# Explorative study to assess the knowledge & attitude towards NABH accreditation among the staff nurses working in Bombay Hospital, Indore. India.

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**Abstract:** Quality in health care mainly "process-focused", which encompasses access, care, outcomes and evaluation. Aim of the study to assess the knowledge and attitude towards NABH accreditation among staff nurses. Descriptive explorative approach was selected for the study and 40 staff nurses were selected trough Purposive sampling method. Alternative structured questionnaire and attitude scale were used to collect the data. The data revealed that 90% are belongs to age group of <25 years, 90% of the subjects were belonged to female category and, Majority of the subjects 36(90%) had the experience of  $1 - \leq 3$  years. All the subjects (100%) had good knowledge about NABH accreditation. 15(37.5%) had the positive attitude, 13 (32.5%) are had highly negative and 12(30%) had negative attitude. The mean of the knowledge score (40.75) is more than the mean of level of attitude (34.37). There is a Partial Negative correlation between knowledge score and level of attitude [r = 0.212, r (38) = 0.34 p > 0.05]. There is a significant correlation between knowledge and negative attitude. Findings of the study indicate that all the subjects were having good knowledge and negative attitude towards NABH accreditation and there is partial positive correlation between knowledge and attitude.

**Key words:** accreditation, attitude, explorative, knowledge, NABH

### I. Introduction

Quality has become an essential part of the management and evaluation of health care. The continual improvement of service quality in healthcare units has become a prime consideration to ensure patient satisfaction across the world in the modern economic scenario. Quality management techniques, often borrowed directly and unchanged, from manufacturing and service sector settings, have often not lived up to their promise in terms of improved health care provider performance and hospital competitiveness. In India, health sector is one of the largest and fastest growing sector in which both the private and government care providers and hospitals put much emphasis on quality improvement and patient satisfaction. National Accreditation Board of Hospitals and Healthcare Providers (NABH) along with Quality Council of India provided the criteria based on which quality standard of hospitals is determined.[1]

Hospital Acquired Infections (HAI) is the most frequent form of adverse events in healthcare delivery worldwide. Hundreds of millions of patients are affected by HAI worldwide each year, leading to significant mortality and financial losses for health-systems. Of every 100 hospitalized patients at any given time, 7 in developed and 10 in developing countries will acquire at least one HAI.[2]

Nurses in practice need to be more aware of how their attitudes towards Infection Control & Prevention (ICP) can be perceived by patients and the possible consequences of this for the patients. Nurses need to work towards identifying barriers to good infection prevention practice and ways to overcome these. [3]

NABH is a constituent board of Quality Council of India (QCI), set up with co-operation of the Ministry of Health & Family Welfare, Government of India and the Indian Health Industry. NABH accreditation system is one of the methods for commitment to quality enhancement throughout the whole of the health care system in India. It involves all professional and service groups to ensure that high quality in health care is achieved, while minimizing the inherent risks associated with modern health care delivery. [4]

Quality Assurance should help to improve effectiveness, efficiency, cost containment, and should address accountability and the need to reduce errors and increase safety in the system. Thus the objective of NABH accreditation is on continuous improvement in the organizational and clinical performance of health services, not just the achievement of a certificate or award or merely assuring compliance with minimum acceptable standards. [5]

Being a nurse and accountable for providing care to patients, to the society and to the profession by quality patient care, the investigator got inspired to do a study for assessing the knowledge and attitude towards NABH accreditation among the staff nurses to gain more information and guidelines for further development of knowledge and skills in practice.

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# II. Methodology

An exploratory descriptive approach was selected for the study. The main aims of the study were to find out the knowledge and attitude of staff nurses and to find out the correlation between knowledge and attitude score towards NABH accreditation. Non-experimental design is used to construct a picture of a phenomenon or make an account of events, as they naturally occur or the researcher collects data, and describes phenomena as they exist. The study was carried out among 40 staff nurses were selected by Purposive sampling method after obtaining permission from the authorities. Informed consent was obtained from the participants after explaining the purpose of the study and confidentiality was assured Alternative structured questionnaire and attitude scale were used to collect the data. The data obtained was analyzed by using frequency, percentage, mean, standard deviation and inferential statistics [6].

### III. Results

The analysis of the data was based in the objectives and hypothesis. Both descriptive and inferential statistics were used for the data analysis. Demographic distribution analyzed by using frequency and percentage (Table 1). Result shows that all the subjects (100%) have good knowledge about NABH accreditation. Majority of the subjects i.e 15(37.5%) have positive attitude, rest that is 13 (32.5%) subjects are having highly negative attitude and remaining 12(30%) have negative attitude towards NABH Accreditation. There is a significant Partial Negative correlation between knowledge score and level of attitude [r= -0.212, r  $_{(38)}$  = 0.34 p≤0.05] between knowledge score and level of attitude. Hence, there is a significant partial negative correlation between knowledge and attitude among staff nurses towards NABH accreditation at the level of p≤0.05.

<b>Table 1:</b> Distribution of frequency	and percentage of socio demo	ographical variables n=40

Sl no	Variables	Frequency	Percentage (%)	
1. Age (in Years)				
a.	<25	36	90	
b.	25-35	4	10	
c.	35-45	0	0	
d.	>45	0	0	
2. Gender				
a.	Male	4	10	
b.	Female	36	90	
3. Experience ( in years)				
a.	1- <u>&lt;</u> 3	36	90	
b.	> 3- <u>&lt;</u> 6	2	5	
c.	>6	2	5	

## **IV. Conclusion**

Findings of the study indicate that all the subjects were having good knowledge and negative attitude towards NABH accreditation and there is partial positive correlation between knowledge and attitude. The study had implications not only in the field of nursing, but also in other disciplines. The study was limited to small samples and only for staff nurses. The findings of the study support the need for conducting educational programmes regarding NABH accreditation to improve the quality of care and adherence to the prescribed policies. Thus in future more studies related to topic can be conducted

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