A RESEARCH PROJECT THAT INVESTIGATES THE CONNECTION BETWEEN HOSPITAL POLICY AND NURSING PRACTICE

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Abstract

The policies of the hospital have a significant impact on the activities and attitudes of healthcare personnel, notably nurses, who are at the frontline of providing care to patients. In order to improve patient outcomes, ensure compliance with laws, and increase the overall quality of healthcare services, it is vital to have a solid understanding of the relationship that exists between hospital policies and nursing practice. Examine the ways in which the policies of the hospital affect the workflows and decision-making processes of the nursing staff. Determine how the policies of the hospital affect the patient care quality and the level of work satisfaction experienced by nurses. Investigate the difficulties and obstructions that nurses have when trying to adhere to hospital policies. The research will be conducted using a mixed-approaches strategy, which will include qualitative and quantitative research research methods. The gathering of data will consist of Quantitative data on nurses' impressions of hospital policies and the influence such policies have on practice was gathered through the administration of surveys to a representative sample of nurses working in a variety of departments. Interviews with nursing staff in depth, with the goal of gaining qualitative insights into their experiences and the issues they face in relation to hospital policy. A review of the hospital's policy documents in order to gain an understanding of the policies that are being investigated and their scope and aim. The preliminary data indicate that hospital policies that are well defined and supportive are connected with greater levels of work satisfaction among nurses and improved outcomes for patient care. On the other hand, policies that are seen as being excessively restrictive or vague contribute to increased stress and non-compliance among nursing personnel. Inadequate training on policy changes, a lack of communication between administrative and nursing teams, and an inadequate amount of resources to successfully execute policies are some of the key impediments that have been found.

Keywords: Investigates, Hospital, Nursing Practice

Introduction

Hospital policies serve as basic frameworks that govern clinical practices and assure regulatory compliance. The healthcare business is always developing, and hospital policies are a critical component of this evolution. These rules are intended to ensure that the standards of care are maintained, to enhance the safety of patients, and to maximize the efficiency of operations. Nurses are an essential component of the workforce in the healthcare industry since they are directly involved in the provision of patient care as well as the execution of these policies. It is of the utmost significance to have a solid understanding of the relationship that exists between hospital policy and nursing practice. Policies have the potential to be a key factor in determining nursing workflows, decision-making procedures, job satisfaction, and ultimately, the

results for patients. A dearth of extensive study has been conducted to investigate the ways in which these rules influence nursing practice on a day-to-day basis and the difficulties that nurses encounter while attempting to adhere to them, despite the fact that they play an essential role.

Through the use of policies, procedures, standards, guidelines, work instructions, processes, and a plethora of other papers that are analogous, nurses and other healthcare workers are able to deliver care to patients. Generally speaking, the purpose of these papers is to guarantee that patients receive care that is both safe and appropriate, as well as care that is based on available evidence or best practices. This research takes a direct approach to investigating, comprehending, and explaining nursing practice by examining it through the lens of the policy space and by listening to the voices of nurses. According to Dekker (2014), the healthcare industry is a complicated place, particularly in terms of nursing practice and legislation. The study makes a significant contribution to the body of literature concerning patient safety because it assists nurses in exploring, comprehending, and describing the ways in which policies relate to their nursing practice and the ways in which nurses contribute to providing safe and appropriate care to their patients. In this context, a linear relationship between safe and appropriate care, evidence-based and best-practice policies, and nursing practice is not straightforward. Concerns concerning the policy framework are raised as a result of the researcher's initial anecdotal experiences. The researcher is a nurse who leads system evaluations following bad clinical incidents. System reviews are clinical care reviews that are conducted by retrospectively reviewing an occurrence or event in order to detect any mistakes or gaps in treatment. For the purposes of this thesis, system reviews are referred to as clinical care reviews instead. (Walker et al., 2018) They choose to concentrate on the examination of systems rather than individuals, and they intend to gain knowledge from the event in order to enhance their future practice. The researcher finds it incongruous that there are a large number of policies and procedures in place inside and across healthcare settings, and that all nurses are needed to study, comprehend, and apply these policies and procedures in order to prevent patient damage in any and all clinical settings. The problem that nurses have in staying current with the most effective or evidence-based practices in the field is highlighted by the exponential increase in the number of formal restrictions that are placed on healthcare practitioners and their profession. There is a presumption that nurses are able to recognize and comprehend their profession in its entirety, or at the at least, that they have rapid access to policy papers that will aid them in providing patients with care that is both safe and of high quality, within the scope of their capabilities and skills. Evidence-based practice or best practice should be reflected in policy papers, and it is required of nurses that they be familiar with policies that are connected to their profession. System studies regularly identify communication and policy challenges in healthcare organizations as the most prevalent contributing reason to patient harm. This is the case whenever an incident or adverse clinical event takes place.

Objectives:

1. To examine the influence of hospital policies on nursing workflows and decision-making processes.
2. To assess the impact of these policies on nurse job satisfaction and the quality of patient care.

Policy Context in Hospital Settings

The term "healthcare policy" refers to the legal and regulatory frameworks that have been put in place to promote efficiency and safety in healthcare delivery while keeping costs down. Furthermore, healthcare

organizations often create procedures as guides to help carry out a certain policy or service delivery technique. Procedures encompass the wide range of responsibilities held by nurses and other medical staff members in carrying out policies and providing requested services. But most hospitals focus more on policymaking and less on the crucial problem of actually putting those policies into action (Kelly, Garvey, & Palcic, 2016). We would be unable to accomplish our most basic care goals if nurses did not follow the procedures put in place to enhance the quality of treatment they deliver. This impacts nursing practice on the front lines and demonstrates how difficult it is to formulate policies and then put them into action. While the policy is in place, it is not well integrated into the daily practice of nurses. The practice of frontline nurses is impacted by this. The nursing profession is subject to a wide variety of regulations and policies that are specific to healthcare facilities. It is critical for nurses to be familiar with both clinical and non-clinical policies and procedures. The policies that have the most influence on nursing practice within a hospital organization are those that deal with administration, human resource management, service provision, medicine, and information management (Braithwaite, 2006). Consequently, it is the duty of hospital administration to guarantee that nurses provide their services in compliance with the requirements of the different policies. Cogin, Ng, and Lee (2016) state that hospital administration must prioritize streamlining operations by creating effective administrative processes that reinforce nurses' roles in patient care. Because administrative policies are the bedrock of healthcare facilities' business operations, it's crucial to create a work atmosphere that promotes the adoption of these policies and procedures. Examples of typical requirements may be seen in the dress rules, visiting policies, bed policies, and equipment procurement policies that are prevalent in Australian hospital administration policies and procedures. Nurses and other medical staff can usually find guidance in the hospital's administrative rules and procedures. This is done to ensure that their work adds up to the organization's overall efficiency. A thorough approach that includes the entire company is necessary for nursing practice norms and procedures, according to the existing research. Compared to a method that prioritizes evidence, this shows a better understanding of policy overall. Despite this, Pascoe, Foley, Hutchinson, and Watts (2005) contended that a lack of adequate human resource management rules and procedures renders an organization's administrative policies useless within the Australian health system. The policies and procedures established for human resource management are focused on providing employees with the necessary care, in addition to ensuring that staff comply with the hospital's rules and laws. Occupational health and safety policies and procedures are a good example of this, as they are physically and conceptually bound up with the care that nurses give to their patients. Consequently, HR policies promote the implementation of administrative policies by checking that healthcare professionals adhere to the many protocols established by the institution. The study conducted by Pascoe et al. in 2005 The HR division of a hospital should design rules and procedures that help employees feel cared for while also directing them to accomplish the organization's stated objectives. Staff members' ability to care for patients depends on this.

Because this strategy affects nurses' commitment and motivation to provide high-quality care services—the primary goal of any healthcare system—providing adequate care to nurses is, thus, of the highest significance. Manuals outlining policies and procedures are vital resources for Australian nurses because they allow them to provide treatment based on evidence. The information contained in these guides is crucial. A nursing whistleblower essay argued that Australian hospitals must improve nurses' access to policy and procedure manuals (Jones, 2005; Kneafsey, Clifford, and Greenfield, 2015). The accessibility of these instructions should be prioritized by hospitals, as nurses play a crucial role in guaranteeing that patients receive top-notch treatment. It is critical that hospital policy and procedure manuals be easily

accessible. These manuals contain important rules and regulations regarding many areas of care delivery, such as admission and discharge, education for patients and their families, safeguards against abuse and neglect, and patients' rights and obligations (Kneafsey et al., 2015). Consequently, the hospital administration should do things like make sure vital records are readily available and that nurses follow the rules that control the delivery of treatment. There is a lack of research on the development of online policy databases and the distribution of print policy manuals in Australia, which is another finding of this literature review.

In order to better comprehend the impact of digital policy implementation and access compared to paper-based policy implementation and access, research has to be conducted inside the contemporary digital environment. In order to give patients the care and services they need, hospitals and their nursing staff must follow a number of rules and regulations. Because of this, they are compelled to understand the policy-related criteria of jurisdiction and accreditation. Consequently, it is critical for everyone involved in healthcare to follow the many rules and regulations that have been established in hospitals. Accreditation and compliance with regulations are the primary motivations for the establishment of these rules and processes. In order to comply with various accrediting criteria, laws, and standards, as well as to promote adherence to acknowledged professional norms, hospitals define and record their policies and processes. One way to lessen the amount of variation in practice is by standardizing methods across several units within a single health system. This is achieved through the many regulations and procedures that are present in a hospital environment. By drawing attention to the importance of inputs that lead to the delivery of high-quality services, the standardization of processes has affected nurses' performance and, by extension, the health of the entire health system. The authors emphasized that policies and procedures serve as a vital resource for nurses of all experience levels by reducing the reliance on memory, which is a major source of nursing errors. This is particularly true for newly registered nurses, who may not yet have acquired extensive knowledge in all essential areas of nursing practice. To achieve the goals of any health system—providing excellent services and ensuring patient safety—policy and procedure manuals are essential because they facilitate error prevention and offer support for evidence-based practice. Organizations based in hospitals must incorporate different types of policies and procedures in a way that encourages nurses to carry out their duties legally and contribute to the achievement of the health system's overall objectives.

When it comes to healthcare, the goal of establishing policies and procedures is to standardize routine operations. Health and safety, regulatory obligations, and legal duties all place a heavy burden on hospital administrators, who must ensure that policies and procedures are followed to the letter in order to avoid ambiguity. Rules and procedures at hospitals are crucial for the smooth operation of the organization, which helps nurses to provide patients with the care they need. So, making efficient and effective healthcare policy a top priority is vital. This is due to the fact that healthcare professionals are making every effort to provide patients with high-quality services that adhere to all relevant legal requirements. Ploeg, Davies, Edwards, Gifford, and Miller (2007) state that many healthcare organizations have failed to embrace optimal management practices that would enable the proper implementation of policies and procedures. The outcome is that this is a contentious issue. As a result, nurses and other healthcare staff aren't able to do their jobs well, which compromises the quality and safety of treatment patients get.

Researchers Maier and Aiken (2016) found that nurses and other healthcare personnel in hospitals should be expected to prioritise the execution of various policies and procedures by the hospital administration. Because it ensures hospitals do not break any rules governing the sector and increases the efficiency and

output of nurses, this approach is considered crucial for adoption. Furthermore, it should be noted that hospital policy plays a pivotal role in guiding healthcare providers to accomplish the desired results. Consequently, it is critical for hospital management to effectively and efficiently communicate the hospital's regulations and policies if the facility is to achieve its fundamental goals, such as providing high-quality services and integrating patient safety. Since it helps healthcare personnel, such as nurses, make decisions, it is crucial that the hospital's action plan on rules and procedures be communicated. Nursing staff members are better able to make informed decisions and fulfill their duties when hospital policies are clearly communicated. The acronym ISBAR stands for "Identify, Situation, Background, Assessment, Recommendations," which nurses should use when communicating with patients. When nurses utilize the ISBAR, they are able to communicate with one another on policy. This is a great way for nurses who aren't very well-versed in policy matters to structure their conversations in a way that will boost engagement and positive perceptions of policy narratives.

Views from Around the World on Nursing Practice and Hospital Policy

Elements of the healthcare system on a global scale inform methods used to investigate the assessment and implementation of hospital policies. The global push to establish quality outcomes and the standardization of safety and quality monitoring methodologies make this possible. Note that healthcare ideology, globalization, and international organizations all have a role in shaping, implementing, and evaluating policies. The healthcare developments in other industrialized nations are driven by tendencies of consumption. The reason behind this is that there are several avenues via which information is made available to healthcare professionals and consumers. These channels include interest groups, the internet, and the media. Because of this complexity and the rapid change in information, the notions around policy are further challenged. Another difficulty that arises is how a nurse can keep up with all the changes in literature and related policies. A more global view of safety and quality trends has emerged as a result of the increasing influence of the World Health Organization (WHO) on clinical governance efforts and national and local policy drives. A state of complete physical, psychological, and social wellness is what the World Health Organization(2018) means when it says that health is more than just the absence of sickness. The usage of this phrase highlights the multi-faceted character of health and the elements that influence it. Many different types of healthcare systems are used to carry out health initiatives, and they are all struggling, especially in less developed nations (WHO, 2018). Despite health initiatives often being highly prioritized by politicians, this remains the case. In less developed nations, ensuring that healthcare is provided appropriately is a major concern (WHO, 2018). Policies, regulations, and instructional resources are all aimed at helping both developing and developed countries, according to the World Health Organization (2018). The Global Strategy for Health for All by the Year 2000 was published by the World Health Organization (WHO) in 1981. This was the first step in formulating an injury prevention policy for the entire country of Australia. Subsequently, members established national health policies, strategies, and action plans, and then tracked how well these initiatives worked. Australia established the Better Health Commission in 1985 in reaction to the efforts made by the WHO (Salmond, 1986). As part of its contents, this study assessed the National Better Health Program. The evaluation showed that although the Global Strategy had made considerable progress, not everyone in the nation agreed with its aims and objectives. According to Mitchell and McClure (2006), the health system needs to be more involved in setting and tracking health goals, creating accountability measures, and coming up with strategies to deal with social and environmental factors that affect people's health.

National, state, and municipal rules and procedures pertaining to quality and safety have been put in place primarily as a result of these activities. In the years that followed, a plethora of reports and committees were set up to determine priorities in health and to set objectives and targets in those areas. The National Strategic Framework for Chronic Conditions was developed as a result, with a focus on prevention to promote health in Australia (African Institute of Health and Welfare, 1997; Australian Health Minister's Advisory Council, 2017). By use of campaigns like "Save Lives: Clean Your Hands," The World Health Organization (WHO) has exerted considerable influence in implementing evidence-based policy reforms pertaining to clinical practice, as demonstrated by the Global Patient Safety Challenge and the WHO's Guidelines for Safe Surgery 2009: Safe Surgery Saves Lives (WHO, 2009a, 2009b). With certain adjustments to fit local culture, these worldwide initiatives are now part of the hospital's policy. Hospital policy from a global viewpoint has always been based on the idea that bettering an organization's performance will lead to better member wellbeing. Consequently, hospital policies worldwide should prioritize improving stakeholder well-being via upholding fundamental principles of workplace culture, safety, and quality.

Conclusion

The intricate relationship between hospital policy and nursing practice was examined in this study. Findings indicate that well-crafted and supportive hospital regulations substantially enhance nurse workflows, decision-making processes, work satisfaction, and patient care quality. Conversely, nurses report higher rates of stress and noncompliance when laws are seen as being overly stringent or unclear. impact on workflows and decision-making processes By establishing effective policies, nursing workflows are simplified and decision-making is governed by clear guidelines, leading to a more efficient and assured nursing practice. Findings showed that nurses' feeling of agency and capacity to deliver high-quality care were both enhanced when policies were well communicated and understood. Impact on Work Satisfaction and Quality of Care for Patients Better levels of job satisfaction among nurses' coworkers are directly correlated with helpful policies. Nurses who are happy in their jobs are more likely to give their patients the best treatment possible. When regulations are crafted to support, rather than hinder, nursing practice, patient care is enhanced. This emphasizes the need to bridge the gap between policy goals and clinical practice. Dangers & Challenges to Conquer A shortage of resources to effectively administer policies, insufficient training on newly established or revised regulations, and a breakdown in communication between the administration and nursing teams are among the most prevalent challenges. Compliance with regulations that are either excessively rigid to accommodate the ever-evolving character of clinical settings or fail to consider the pragmatic elements of patient care is a common source of stress for nurses.

References

[1] Adler, P. A., & Adler, P. (1987). Qualitative research methods series, Vol. 6. Membership roles in field research. Newbury Park, CA: Sage.

[2] Akyeampong K. (2009). Revisiting Free Compulsory Universal Basic Education (FCUBE) in Ghana. Comparative Education, 45, 175-195.

[3] Adu-Ampong E. A. (2016). Governing tourism-led local economic development planning: an interactive tourism governance perspective on the Elmina 2015 Strategy in Ghana (unpublished PhD thesis), Sheffield: University of Sheffield.

[4]   Adams E. A. (2018). Intra-urban inequalities in water access among households in Malawi's informal settlements: toward pro-poor urban water policies in Africa. Environmental Development, 26, 34–42.

[5]   Adams E. A., Zulu L. C. (2015). Participants or customers in water governance? Community-public partnerships for peri-urban water supply. Geoforum, 65, 112–124.

[6]   Berger R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. Qualitative Research, 15, 219-234.

[7]   Bhattacharya K. (2007). Consenting to the Consent Form: What are the fixed and fluid understandings between the researcher and the researched? Qualitative Inquiry, 13, 1095-1115.

[8]   Blix B. H. (2015). "Something Decent to Wear": Performances of being an insider and an outsider in indigenous research. Qualitative Inquiry, 21, 175-183.

[9]   Breen L. J. (2007). The researcher "in the middle": Negotiating the insider/outsider dichotomy. The Australian Community Psychologist, 19, 163-174.

[10]   Court D., Abbas R. (2013). Whose interview is it, anyway? Methodological and ethical challenges of insider–outsider research, multiple languages, and dual-researcher cooperation. Qualitative Inquiry, 19, 480-488.

[11]   Deutsch C. P. (1981). The behavioral scientist: Insider and outsider. Journal of Social Issues, 37, 172-191.

[12]   Goffman E. (1959). The presentation of self in everyday life. Garden City, NY: Doubleday.

[13]   Hill M. L. (2006). Representin(g): Negotiating multiple roles and identities in the field and behind the desk. Qualitative Inquiry, 12, 926-949.

[14]   Kanuha V. K. (2000). "Being" native versus "going native": Conducting social work research as an insider. Social Work, 45, 439-447.

[15]   Kerstetter K. (2012). Insider, outsider, or somewhere in between: The impact of researchers' identities on the community-based research process. Journal of Rural Social Sciences, 27, 99-117.

[16]   Lincoln Y. S., González y, González E. M., Massera A. C. (2016). "Spanish is a loving tongue . . . " Performing qualitative research across languages and cultures. Qualitative Inquiry, 22, 531-540.

[17]   Lofland J., Snow D., Anderson L., Lofland L. H. (2006). Analyzing social settings: A guide to qualitative observation and analysis. Belmont, CA: Cengage Learning.

[18]   D. (2001). On "reflexivity" in qualitative research: Two readings, and a third. Qualitative Inquiry, 7, 35-68.

[19]   Mannay D. (2010 Macbeth). Making the familiar strange: Can visual research methods render the familiar setting more perceptible? Qualitative Research, 10, 91-11.

[20]   Mayorga-Gallo S., Hordge-Freeman E. (2017). Between marginality and privilege: Gaining access and navigating the field in multi-ethnic settings. Qualitative Research, 17, 377-394.

[21]   Morley L., Leach F., Lugg R. (2009). Democratising higher education in Ghana and Tanzania: Opportunity structures and social inequalities. International Journal of Educational Development, 29, 56-64.