A Study to Evaluate the Effectiveness of Planned Teaching Programme On Thermoregulation of Neonates in Terms of Knowledge and Practice among Staff nurses Working in Neonatal Intensive Care Unit(N.I.C.U) of Selected Hospitals.

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ABSTRACT

A Study to Evaluate the Effectiveness of Planned Teaching Programme On Thermoregulation of Neonates in Terms of Knowledge and Practice among Staff nurses Working in Neonatal Intensive Care Unit(N.I.C.U) of Selected Hospitals. Objectives- To assess the knowledge before and after administration of Planned teaching programme regarding thermoregulation of neonates among staff nurses working in N.I.C.U of Selected Hospitals in Madhya Pradesh state" To assess the practice before and after administration of Planned teaching programme regarding thermoregulation of neonates among staff nurses working in N.I.C.U of Selected Hospitals in Madhya Pradesh state" To find out the association of pre-test knowledge of staff nurses on thermoregulation of neonates with selected socio demographic variables. To find out the association of pre-test practice score with selected socio demographic variables.To evaluate the effectiveness of planned teaching programme on knowledge and practice regarding thermoregulation of neonates among staff nurses. Results- Quantitative research approach was employed to assess the impact of a Planned Teaching Programme on neonatal thermoregulation knowledge and practice among staff nurses in Neonatal Intensive Care Units. The study was conducted across six government hospitals in Madhya Pradesh, each equipped with Neonatal Intensive Care Units. A sample of 50 staff nurses was selected using a non-probability convenient sampling method. These findings shed light on the effectiveness of educational interventions in enhancing neonatal care practices, highlighting the importance of continuous professional development in healthcare settings. Conclusion- The analysis included descriptive and inferential statistics, unveiling significant results. Most samples were aged 21-30, predominantly female, GNM qualified, with 1-4 years' NICU experience; many had neonatal care training. Pre-test knowledge mean was 12.2, rising to 16.46 post-test, a significant difference (t = 12.88, p < 0.05).

Practice scores improved significantly post-program, from 8.94 to 11.46, a mean difference of 2.52 (t = 8.85, p < 0.05). Associations were significant between pre-test knowledge and qualification, and pre-test practice and attendance at neonatal care workshops or training (χ^2 > critical value, p < 0.05). These findings emphasize the program's efficacy in enhancing neonatal care knowledge and practice.

INTRODUCTION

The need for this study is underscored by the persistent challenge of neonatal mortality, which remains a significant global concern despite concerted efforts outlined in international development goals such as the Millennium Development Goals (MDGs). In India, the country is committed to achieving targets set forth in the MDGs, particularly the reduction of child mortality rates. However, current trends indicate a shortfall in meeting these targets, with a substantial number of neonatal deaths occurring annually.

Neonatal mortality rates in India remain alarmingly high, with an estimated 1.1 million neonatal deaths each year. Efforts to reduce infant mortality rates (IMR) and under-five mortality rates have been initiated through programs such as Mission 20/20, aiming to accelerate the decline in IMR. Despite some progress, there is still a considerable gap in achieving these goals, necessitating further intervention.

One of the primary contributors to neonatal mortality is hypothermia, a preventable condition with documented impacts on morbidity and mortality. Maintaining normal body temperature in newborns is crucial for their well-being, as deviations from optimal temperatures can lead to increased risks of complications and mortality. However, studies indicate a lack of adequate knowledge and practices among healthcare providers regarding neonatal thermoregulation.

Proper neonatal care practices, including thermal care, are essential for reducing morbidity and mortality rates. Essential newborn care practices, such as immediate skin-to-skin contact and proper wrapping, have been identified as critical interventions to prevent hypothermia and improve neonatal outcomes. However, gaps in knowledge and implementation persist, highlighting the need for targeted education and training among healthcare professionals.

The study aims to address these gaps by evaluating the knowledge, attitudes, and practices of medical and paramedical staff regarding neonatal hypothermia. By assessing current practices and identifying areas for improvement, the study seeks to develop and implement a planned teaching program (PTP) to enhance staff nurses' competencies in neonatal thermoregulation.

Ensuring adequate training and education for nurses working in neonatal intensive care units (NICUs) is crucial for improving neonatal outcomes. By equipping healthcare providers with the necessary knowledge and skills, we can mitigate the risks associated with neonatal hypothermia and contribute to reducing neonatal mortality rates.

The study's significance lies in its potential to improve the quality of care provided to newborns in NICUs, thereby reducing the incidence of hypothermia-related complications and mortality. By addressing gaps in knowledge and practice, the study aims to empower healthcare providers to deliver optimal care and support to neonates, ultimately contributing to improved neonatal outcomes and reduced mortality rates.

MATERIAL AND METHODS

The study employed a quantitative research approach to assess the effectiveness of a Planned Teaching Programme on neonatal thermoregulation among staff nurses in Neonatal Intensive Care Units (NICUs). A Pre-Experimental design, specifically a One Group Pre-Test Post-Test Design, was utilized to evaluate the intervention's impact on the nurses' knowledge and practice.

The independent variable was the Planned Teaching Programme, focusing on neonatal thermoregulation, while the dependent variables were the knowledge and practice of staff nurses. Data collection took place in six government hospitals with NICUs in M.P. state. These hospitals were chosen for their familiarity, sample availability, and research feasibility.

The target population comprised staff nurses in NICUs of selected hospitals in Madhya Pradesh, while the sample consisted of 50 staff nurses selected through non-probability convenient sampling. Criteria for sample selection included nurses working in NICUs who were willing and available to participate in the study.

Structured instruments, such as a Knowledge Questionnaire and Observation Checklist, were developed for pre-test and post-test assessments. The study's design allowed for the manipulation of the independent variable and observation of its effects on dependent variables.

Overall, the research approach, design, setting, and sampling method were tailored to evaluate the effectiveness of the Planned Teaching Programme on neonatal thermoregulation knowledge and practice among staff nurses in NICUs.

RESULT

The data analysis encompassed both descriptive and inferential statistics, revealing significant findings. Among the demographic variables, the majority of the samples were aged between 21 to 30 years, predominantly female, held General Nursing and Midwifery (GNM) qualifications, with 1 to 4 years of experience in Neonatal Intensive Care Units (NICUs), and a considerable portion had attended workshops or training on neonatal care. Regarding knowledge, the Planned Teaching Programme demonstrated substantial effectiveness, as evidenced by the mean pre-test knowledge score of 12.2, which significantly increased to 16.46 post-test, indicating a notable mean difference of 4.26 ($t = 12.88$, $p < 0.05$). Similarly, the programme and its demonstration significantly improved the practice of the samples, with the mean pre-test practice score of 8.94 rising to 11.46

post-test, resulting in a mean difference of 2.52 (t = 8.85, p < 0.05). Furthermore, associations between pre-test knowledge scores and professional qualification, as well as between pre-test practice scores and attendance at neonatal care workshops or training, were found to be significant (χ^2 > critical value, p < 0.05). These findings underscore the effectiveness of the Planned Teaching Programme in enhancing both the knowledge and practice of staff nurses in Neonatal Intensive Care Units, while also highlighting the importance of professional qualification and additional training in neonatal care.

CONCLUSION

In conclusion, the findings underscore the efficacy of the Planned Teaching Programme in enhancing the knowledge and practice of staff nurses in Neonatal Intensive Care Units. The significant associations between pre-test scores and demographic variables further emphasize the importance of professional qualification and additional training in neonatal care. These insights provide valuable guidance for healthcare institutions aiming to improve neonatal care standards. The success of such educational interventions highlights their potential to positively impact patient outcomes and underscores the ongoing need for continuous professional development in healthcare settings.

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