

# COVID-19 for Final year Nursing Students: A Qualitative Study

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## Description

The release of the Institute of Medicine (IOM) report prompted a global focus on patient safety in health care centers. Patient safety refers to preventing and reducing adverse events and consequences that may lead to patient harm while providing care. According to the World Health Organization (WHO), adverse events in hospitalized patients are 10%. In the Eastern Mediterranean region in which Iran is located, it is 18%, of which 3% is allocated to severe adverse events. However, 83% of these adverse events are preventable.

In Iran, one out of every 150 people dies due to the consequences of health professional errors, including medicine, nursing, pharmacy, midwifery, surgical technologist, and anesthesia in health care centers. Based on the results of a review in Iran, about 17% of patients admitted to healthcare centers suffer from complications. Annually, more than one million individuals die from surgery complications worldwide, half of which are preventable. Nanji et al. (2016) reported that out of 3671 anesthesia injections performed during 277 surgeries, 193 medication errors had occurred. According to the WHO, about 810 women die per day worldwide due to preventable causes related to pregnancy and childbirth. However, timely management and treatment can prevent maternal and infant mortality.

## Health Professions Students

This study aimed to assess the patient safety competence among senior health professions students in Isfahan, Iran. The results showed that patient safety levels in the six domains of health professions education varied from weak to moderate. The mean total patient safety score was moderate (0.51) in the classroom and poor (0.47) in the clinical setting. Students in the classroom and clinical setting had not received adequate patient safety education. While in similar studies, students' scores were high, indicating a favorable patient safety status in health profession education in other countries. Considering the 50% of preventable adverse effects while providing health care in Iran, it is crucial to pay attention to patient safety education in health professions.

The highest mean score was related to the communicating effectively domain (61% in the classroom and 57% in the clinical setting), which was in line with other studies. Communicating

effectively is an indispensable tool in conversing with the patient to identify medication problems, treatment effects, interactions, and adverse effects. Ineffective communication is one of the leading causes of medication error as the foremost factor threatening patient safety. Therefore, it is required that communication skills in health profession education be emphasized and applied upon entering the clinical setting. The lowest mean score was related to working in teams with other health professions (0.39 in the classroom and 0.38 in the clinical setting), which was consistent with other studies. In Iran, no medical curricula have teamwork education content. Therefore, this study sample's uncertainty in acquiring sufficient knowledge and competence in working in teams with other health professions is justified. Due to the ever-changing nature of health care and the gap between health professions, students are required to receive the necessary education in teamwork; interprofessional education (IPE) can improve interprofessional collaboration (IPC) and patient care. Indeed, the interprofessional education (IPE) and interprofessional collaboration (IPC) are a dimension of the theory and practice of patient safety.

The mean score was higher in total in the classroom than in the clinical setting, which was in agreement with other studies. The results showed that patient safety education primarily occurs in the classroom, while patient safety education in the clinical setting is likewise of particular importance due to direct communication with the patient and potential patient safety hazards. It needs to be considered in clinical education.

By comparing the mean scores of students in the classroom and clinical settings in different domains, it was found that there was a correlation between the classroom and clinical setting scores. The highest and the lowest correlation were related to the domains of safety culture ( $r = 0.567$ ) and communicating effectively ( $r = 0.465$ ), respectively. However, in the study by Hwang et al. (2016), there was a significant difference between the scores of the classroom and the clinical setting, and the mean scores in the domain of 'understanding human and environmental factors' and 'managing safety risks in the clinical setting' were significantly higher compared to the classroom. Among the fields of study, the highest score was reported by midwifery students (0.64 in the classroom and 0.66 in the clinical setting). The study results by Khorasani et al. (2017) showed that midwives' knowledge and attitude towards reporting errors, as one of the important domains of patient

safety, was high and positive as 79.12% of midwives had reported their errors during their employment. The higher rate of error reported by midwives compared to physicians and nurses was due to the higher sensitivity of health center managers to midwives about maternal health, which is an important indicator of community development.

To provide safe care for patients, health care providers must be required to be qualified in the domains of patient safety culture, teamwork, effective communication, safety risk management, optimization of human and environmental factors, and identification and reporting of adverse events. Patient safety culture is a set of values, attitudes, perceptions, beliefs, and behaviors that support the safe activities of the healthcare teams in providing care and play an imperative role in improving patient safety and reducing health professions errors in healthcare centers.

## Patient Safety

Improving patient safety requires all health professions. The participatory approach improves health care quality and reduces health professions errors, readmission, and costs. In addition,

proper communication skills between health professions positively affect health-related outcomes and patient satisfaction. Communication problems in handoffs and transitions of care (i.e., between care areas or shift changes), and failure to provide important information about the patient's condition and care plan lead to delayed or inappropriate treatment, thus threatening patient safety.

Enhancing patient safety competence upon entry into the clinical setting requires its introduction and integration into health professions education. Therefore, the mentioned domains should be included in the health professions curriculum to acquire the required competence and apply it in the clinical setting. As senior health professions students will soon play key roles in frontline patient care, their preparedness for safe, reliable care provision is particularly important. Given the importance of promoting patient safety in health profession education, it is imperative to determine care providers' perspectives on acquiring patient safety competence upon entering the clinical setting. Therefore, this study aimed to investigate patient safety competence among senior health professions students.