A Study to Assess the Knowledge and Practice on National Institute of Health Stroke Scale among Staff Nurses Working in Private Multi-Specialty Hospital of Vidarbha Region, Maharashtra

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Abstract: *The study findings reveals that the majority of staff nurses were had average knowledge (74%) whereas only 2% and 5% of them had very good knowledge and poor knowledge respectively regarding NIHSS. However, With regard to practice, around 28% of Staff Nurses had good level of practice and 72% had excellent level of practice score. There is no significant association of level knowledge score and practice score By using Pearson's Correlation coefficient negative correlation was found between knowledge and practice score (r=-0.166, p=0.099) which proves that as the knowledge score increase practices of nursing staff also decreases (r=-0.166, p-value=0.099). There is no significant association of level knowledge score and practice in relation to age (years), gender, education, experience, duration of working area, working in private multi-specialty hospitals of Vidarbha region, Maharashtra.*

Keywords: Health, Stroke, Nurse, NIHSS

1. Introduction

A stroke is a medical emergency which happens when blood flow to your brain stops. Stroke occurs fast and unexpectedly. There are lightning strikes in the form of stroke occurs around the world at least once per minute. Millions of people have suffered with stroke disability and many of them do not have the benefit of a stroke support group. The treatment must be sought as quickly as possible.1

National Institute of Health Stroke Scale (NIHSS) is used widely among stroke neurologists and neuroscience nurses. It is most commonly used with acute ischemic stroke but is also used to assess patients after hemorrhagic stroke or a suspected transient ischemic attack. The scale is used widely to assess patient status acutely, to assess treatment efficacy, and to predict outcome.3

2. Materials and Methods

A descriptive study was used to assess the knowledge and practice on National Institute of Health stroke scale among 100 staff nurses working in private multi-specialty hospitals of Vidarbha region, Maharashtra. The samples were selected by using convenient sampling technique. The self-administered questionnaire was used to assess the knowledge of staff nurses regarding NIHSS whereas observational check list was used to assess the practice of staff nurses regarding NIHSS. After content validity of the tools, the reliability of tools was established by using split-half method.

The pilot study was conducted among 10 Staff Nurses working in selected hospital (other than study area) to find out the feasibility of study. The findings of pilot study have shown the feasibility of major study.

The investigator has obtained formal permission from Research Committee, Institutional Ethical Committee informed consent from each Staff Nurses for data collection. The investigator has fixed the date and time and data collected from investigator himself.
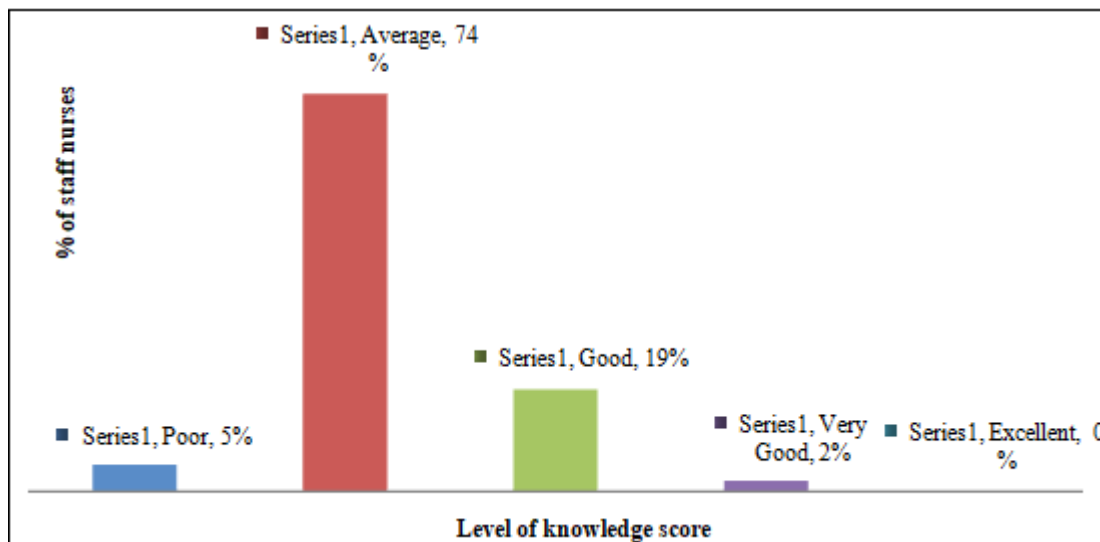
3. Results

Table 4.2: Distribution of staff nurses with regards to level of knowledge regarding National Institute of health stroke scale, n=100

Level of knowledge score	Score Range	Percentage score	Level of Knowledge Score	
			No of staff nurses	Percentage
Poor	1-6	0-20%	5	5
Average	7-12	21-40%	74	74
Good	13-18	41-60%	19	19
Very Good	19-24	61-80%	2	2
Excellent	25-30	81-100%	0	0
Mean±SD			10.77 ± 2.71	
Mean %			35.90 ± 9.04	
Range			5 to 20	

The above table no 4.2 shows the frequency and percentage wise distribution of staff nurses working in private multi-specialty hospital of Vidarbha region, Maharashtra according to level of knowledge regarding National Institute of Health stroke scale. The levels of knowledge were seen into 5 categories, poor, average, good, very good and excellent.

Graph 4.6: Distribution of staff nurses with regards to level of knowledge regarding National Institute of health stroke scale

The study findings reveals that the majority of staff nurses were had average knowledge (74%) whereas only 2% and 5% of them had very good knowledge and poor knowledge respectively regarding NIHSS. However, With regard to practice, around 28% of Staff Nurses had good level of practice and 72% had excellent level of practice score.

There is no significant association of level knowledge score and practice score By using Pearson''s Correlation coefficient negative correlation was found between knowledge and practice score (r=-0.166, p=0.099) which proves that as the knowledge score increase practices of nursing staff also decreases (r=-0.166, p-value=0.099).

There is no significant association of level knowledge score and practice in relation to age (years), gender, education, experience, duration of working area, working in private multi-specialty hospitals of Vidarbha region, Maharashtra."

4. Conclusion

The following conclusions were drawn from the finding of the present study.

The present study shows the 5% of staff nurses had poor level of knowledge score, 74% had average, 19% had good and 2% had very good level of knowledge score.

The 28% of Staff Nurses had good level of practice score and 72% had excellent level of practice score.

It is observed by the study that there is no significant association of level knowledge and practice in staff nurses. 80. There is no significant association of knowledge and practice in relation to demographic variables.

5. Summary

To assess and present the level of knowledge and practice with NIHSS is possible through early assessment of stroke and active participation of prevention and management stroke problem. This is particularly important of NIHSS because everybody would like to prevention from stroke.

References

[1] Kokilavani.A, Madhu S, Thomaslin V, Kalaiarasi.A. Literature Review about Stroke And Its Diagnosis. International Journal of Emerging Technology and Innovative Engineering (Serial on the internet). 2015;1(4):90-96.Available from: http://www.ijetie.org/articles/IJETIE_201514017.pdf.

[2] Stroke - symptoms, treatment, prevention. (n.d.).Retrieved from (Serial on the internet). 2019;7.30.Available from: https://www.southerncross.co.nz/group/medical-library/stroke-symptoms-treatment-prevention

[3] Janice L. H. Reliability and Validity of the National Institutes of Health Stroke Scale for Neuroscience Nurses, State-of-the-Science Nursing Review. American Heart Association (Serial on the internet). 2014;45(3):1-3. DOI: 10.1161/STROKEAHA.113.004243

[4] Meyer, B. C., Hemmen, T. M., Jackson, C. M., &Lyden, P. D. (2002). Modified National Institutes of Health Stroke Scale for Use in Stroke Clinical Trials. Stroke, 33(5), 1261-1266. doi:10.1161/01.str.0000015625.87603.a7

[5] Zuckerman, S. L., Sivaganesan, A., Zhang, C., Dewan, M. C., Morone, P. J., Kumar, N. G., &Mocco, J. (2016). Maximizing efficiency and diagnostic accuracy triage of acute stroke patients: A case-control study. Interventional Neuroradiology, 22(3), 304-309. doi:10.1177/1591019915622167

[6] Michael K, Shaughnessy M. Stroke Prevention and Management in Older Adults. The Journal of Cardiovascular Nursing. 2006;21:S21-S26. doi: 10.1097/00005082-200609001-00006

[7] NIH Stroke Scale. Nihstrokescale.org. 2019. [accessed 7 Feb 2019] Available from: http://www.nihstrokescale.org/

[8] Dalal P, Bhattacharjee, M, Vairale J, Bhat P. International Stroke Society - WHO Global Stroke Initiative: A report on population-based Mumbai stroke registry(2005-2006.Int.J Stroke.(Serial on the internet).2009; 4(4):239-40. DOI: 10.1111/j.1747-4949.2009.00313.x.

[9] MacKay J, Mensah GA. The Atlas of Heart Disease and Stroke.[e-book]. 2004.Geneva. [cited 2018 Mar 25]. Available from. http://apps.who.int/iris/bitstream/handle/10665/43007/9241562768.pdf?sequence=1&isAllowedy

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