

Application Effect of Hierarchical Group Responsibility System Holistic Nursing in Department of Gastroenterology

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Abstract: Objective: To analyze the application effect of hierarchical group responsibility system of holistic nursing in Department of Gastroenterology. **Methods:** 655 patients in our hospital from August 2020 to January 2021 were selected as the research objects. They were randomly divided into experimental group (328 cases) and control group (327 cases) to explore nursing satisfaction, nursing quality score and clinical symptoms before and after nursing. **Results:** In the experimental group, 266 cases (81.10%) were very satisfied, 33 cases (10.06%) were satisfied and 29 cases (8.84%) were dissatisfied. The total number of satisfied cases (very satisfied + satisfied) was 299 cases (91.16%); In the control group, 167 cases (51.07%) were very satisfied, 63 cases (19.27%) were satisfied, 97 cases (29.66%) were dissatisfied, and 230 cases (70.34%) were satisfied. The nursing satisfaction of the experimental group was significantly higher than that of the control group; The nursing quality score of the experimental group was (91.67 ± 0.66) , and that of the control group was (71.66 ± 0.88) , which was significantly higher than that of the control group; The clinical symptom score of the experimental group was (2.42 ± 0.32) , and that of the control group was (4.66 ± 1.11) , which was significantly better than that of the control group. **Conclusion:** The application of hierarchical group responsibility holistic nursing mode in gastroenterology department can not only improve the nursing satisfaction of patients, but also improve the quality of nursing, promote the good development of patients' condition, and provide a comfortable treatment environment for patients, which is worthy of clinical promotion.

Keywords: Hierarchical group; Holistic nursing with

responsibility system; GI Medicine; Nursing effect

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Today, with the improvement of medical conditions and medical technology in China, people pay more attention to medical quality and medical service level. The traditional scheduling nursing can not meet the practical requirements of modern nursing. Hierarchical group responsibility system of holistic nursing is to manage the nursing staff according to the technical level and skill level, so as to ensure that the patients can get systematic and continuous holistic nursing service, enhance the trust and understanding between nurses and patients, and reduce the contradiction between nurses and patients. Its main feature is to take patients as the center and provide planned and purposeful holistic nursing care for hospitalized patients by responsible nurses of hierarchical groups. That is to say, each group of responsible nurses is responsible for a certain number of patients to carry out basic nursing, condition observation, treatment nursing, psychological communication and prognosis of some health guidance work. The responsibilities of each group of nursing staff are clear, and stick to their own nursing jobs, so their work quality and efficiency during the nursing period have been greatly improved. Therefore, the implementation effect of this nursing mode in the Department of Gastroenterology in our hospital is reported as follows.

1 Material and methods

1.1 General information

655 patients in our hospital from August 2020 to January 2021 were randomly divided into experimental group (n = 328), including 169 male patients and 159 female patients, with an average age of (38.9 ± 3.66) years. In the control group, there were 327 cases, including 166 female patients and 161 male patients, with an average age of (36.7 ± 3.26) years old ranging from 18 to 56 years old.

1.2 Method

According to the nursing of the patients in the control group, the random scheduling mode was adopted, without considering the collocation between the old, middle and new nurses, and the basic nursing services such as the matters needing attention in the treatment process, diet and medication guidance were provided to all patients.

In the experimental group, the hierarchical group responsibility holistic nursing model was adopted, and the allocation of each nursing group member considered the old, middle and new nurses. In addition to providing treatment notes, diet and medication guidance, the following nursing contents were also implemented: (1) Bed management: The 26 nurses were divided into two groups, and one of them was selected as the group leader, that is, the head of the responsible nurse, to carry out nursing service training for the nurses in this group on a regular basis. During the training, nurses should make clear their nursing responsibilities and strictly abide by the requirements of professional norms and professional skills^[4]. (2) Implement the responsibility system: When implementing the responsibility system of nursing, nurses need to provide comprehensive, continuous and high-quality holistic nursing service for patients, and be responsible for them^[5]. Such as medication dose guidance, ward disinfection, life management, so that patients feel the sincere care of medical staff, so as to create a good treatment environment. Position Name: Before carrying out nursing work, combined with hierarchical grouping, each group of nurses

should have clear division of responsibilities, detailed implementation of responsibilities, reasonable work arrangement, and implement each group of members one by one, so as to timely deal with the abnormal situation in the implementation of nursing, and effectively solve the problems^[6].

1.3 Observation indexes

The self-made nursing satisfaction questionnaire was sent to the two groups of patients by anonymous. The satisfaction of patients with nursing was evaluated by the score of nursing quality, and the changes of clinical symptoms of the two groups before and after the implementation of nursing intervention. The higher the score, the higher the nursing quality, that is, the higher the nursing satisfaction. The evaluation index is divided into three levels: very satisfied, general satisfied and dissatisfied. Among them, 85 points or more were very satisfied, < 80 points > 60 points were generally satisfied, and < 60 points were dissatisfied. Satisfaction (%) = (very satisfied + general satisfied) / total cases.

1.4 Statistical methods

T test was used for measurement data, and chi square test was used for count data, P < 0.05, indicating that the difference was statistically significant.

2 Results

2.1 Compare the nursing satisfaction of the two groups

According to the research and observation, 266 cases (81.10%) were very satisfied, 33 cases (10.06%) were satisfied, 29 cases (8.84%) were unsatisfied in the experimental group, and 299 cases (very satisfied + satisfied) were satisfied, the satisfaction rate was 91.16%; In the control group, 167 (51.07%) cases were very satisfied, 63 (19.27%) cases were satisfied, 97 (29.66%) cases were dissatisfied, the total number of satisfied cases was 230 cases, the satisfaction was 70.34%, the experimental group was significantly higher than the control group, $\chi^2 = 155.9884$, $P = 0.0000$, so the experiment was comparable, as shown in Table 1.

Table 1. Comparison of nursing satisfaction between the two groups (n,%)

Group	perfect contentment	satisfied	dissatisfied	Satisfaction
Experimental group (n = 328)	266(81.10)	33(10.06)	29(8.84)	299(91.16)
Control group (n = 327)	167(51.07)	63(19.27)	97(29.66)	230(70.34)
χ^2				155.9884
P				0.0000

2.2 Compare the nursing quality of the two groups

Through research and observation, it was found that the quality of nursing score in the experimental group was (91.67 ± 0.66), and that in the control group was (71.66

± 0.88). The quality of nursing score in the experimental group was significantly higher than that in the control group, with $T = 329.2704$, $P = 0.0000$. Therefore, the experiment was comparable, as shown in Table 2.

Table 2. Nursing quality score of two groups ($\bar{x} \pm s$, points)

Group	Nursing quality score	t	p
Experimental group (n = 328)	91.67±0.66	329.2704	0.0000
Control group (n = 327)	71.66±0.88		

2.3 The clinical symptom scores of the two groups before and after nursing were compared

Through research and observation, it was found that the clinical symptom score of the experimental group before nursing was (8.22 ± 1.67), and that of the control group before nursing was (8.41 ± 2.13), in which $t = 1.2706$, $P = 0.2043$, so the experimental

group before nursing was not comparable, the clinical symptom score of the experimental group after nursing was (2.42 ± 0.32), and that of the control group after nursing was (4.66 ± 1.11), the experimental group was significantly better than the control group. Where $t = 35.1136$, $P = 0.0000$, so the experiment is comparable, as shown in Table 3.

Table 3. Comparison of clinical symptom scores before and after nursing between the two groups ($\bar{x} \pm s$, points)

Group	Before nursing	After care
Experimental group (n = 328)	8.22±1.67	2.42±0.32
Control group (n = 327)	8.41±2.13	4.66±1.11
t	1.2706	35.1136
P	0.2043	0.0000

3 Discussion

The purpose of constructing the clinical hierarchical group responsibility system is to form a nursing echelon according to the different conditions and needs of patients, so as to meet the requirements of patients for the quality of nursing service. Liao changjuand others respectively elaborated two ways of functional nursing and responsibility system holistic nursing. Functional nursing is based on disease, work oriented, to complete the doctor's advice and implement the operation of various nursing techniques; The responsibility system of holistic nursing is mainly patient-centered, providing comprehensive and systematic nursing for patients' body and mind until they are discharged^[7]. Pan Xiancong and others pointed out that the use of the responsibility system of holistic nursing can make up for the deficiency of the functional system, and

enable patients to receive nursing care from different nurses^[8]. Cao Jingpointed out that the responsibility system of holistic nursing can reduce the passivity of nursing staff, enhance the sense of responsibility of nursing staff, and provide continuous nursing service for nursing staff^[9]. Zhao Yonghong pointed out that during the actual nursing period, nursing staff will provide comprehensive nursing for patients' life and diet, which will reduce the recurrence rate of the disease and play a positive role in improving the treatment effect^[10].

To sum up, in this study, the experimental group with hierarchical group responsibility system has obvious advantages in nursing satisfaction, nursing quality score and clinical symptom score after nursing intervention compared with the control group, so this model has a good role in clinical promotion.

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