

CURRENT STATUS OF NURSING CARE FOR PATIENTS IN THE INTENSIVE CARE UNIT, THANH HOA PROVINCIAL GENERAL HOSPITAL, 2021

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ABSTRACT

Objective: To describe the current status of nursing care based on feedback from inpatients treated at the Intensive Care Unit of Thanh Hoa Provincial General Hospital in 2021.

Subject and method: A cross-sectional descriptive study was conducted on 245 inpatients receiving treatment in the Intensive Care Unit of Thanh Hoa Provincial General Hospital from February to June 2021. A pre-designed patient interview questionnaire, adapted from the study by Quach Chi Dong on evaluating nursing care activities, was utilized.

Results: The average age of patients was 59.56 ± 16.13 years. Among them, 65.7% were male, and 43.3% were farmers. A total of 92.7% of patients highly appreciated the psychological and emotional support provided by nurses. The rate at which nurses verified patients' names and ages and provided full explanations before administering medication was 99.6%.

Conclusion: According to patient feedback, nursing care met the essential requirements.

Keywords: Nursing care, patient feedback, inpatients.

1. INTRODUCTION

As part of the global strategy for nursing development, the World Health Organization (WHO) has affirmed that services provided by nurses and midwives are among the foundational pillars of the healthcare system. Nurses play a direct role in delivering healthcare to communities and within medical facilities, offering care that is both cost-effective and efficient, while making a significant contribution to disease prevention and control [1].

In hospitals, nurses are among the primary providers of healthcare services throughout the entire process of patient examination and treatment. They maintain the most frequent and direct contact with patients, thereby playing a critical role in ensuring and enhancing the quality of healthcare services across all hospitals [2].

Globally, the evaluation of nursing care activities is conducted annually to ensure and improve the quality of patient care. A 2007 study by Robert L.

Kane and colleagues on nursing staff and quality of care in the United States and Canada found that hospitals with a higher nurse-to-patient ratio had lower patient mortality rates. This was especially true in specialized units such as intensive care units and among surgical patients, where increased nursing staff was associated with reduced complication rates and mortality [3].

In Vietnam, a study by Quach Chi Dong (2018) conducted at Ninh Binh Provincial General Hospital showed that patient satisfaction with nursing support in treatment and collaboration with physicians reached 86.3%. However, only 59.4% of patients reported receiving direct assistance from nurses in personal hygiene tasks, such as oral care and toileting. These limitations were attributed to a shortage of staff, varying levels of professional competence, and excessive workloads among nurses [4].

Although various studies have described nursing

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care practices in Vietnam, no such evaluation has been conducted at Thanh Hoa Provincial General Hospital. In response to this gap, we conducted a study aiming to describe the current status of nursing care based on inpatient feedback in the Intensive Care Unit (ICU) of Thanh Hoa Provincial General Hospital in 2021. This study seeks to provide scientific evidence on nursing care practices and suggest solutions to further improve the quality of patient care.

2. SUBJECTS AND METHODS

2.1. Study subjects

The study participants were inpatients receiving treatment in the Intensive Care Unit (ICU) of Thanh Hoa Provincial General Hospital.

- *Inclusion criteria:*

+ Patients aged 18 years or older who were hospitalized in the ICU.

+ Patients capable of communication, who agreed and voluntarily consented to participate in the study.

- *Exclusion criteria:*

+ Patients who were not physically fit to participate in the interview or who declined to participate.

2.2. Study Location and Duration

- Location: Intensive Care Unit, Thanh Hoa Provincial General Hospital.

- Duration: From February 2021 to June 2021.

2.3. Study Design

This was a cross-sectional descriptive study.

2.4. Sample Size and Sampling Method

The sample included all inpatients who met the inclusion criteria in the ICU during the data collection period. A total of 245 patients were recruited.

2.5. Data Collection Instruments

The data collection tool consisted of two parts:

- Part I: General demographic information of the patient.

- Part II: A structured patient interview questionnaire adapted from the study by Quach Chi Dong (2018) on nursing care activities, revised to suit the current study setting.

The questionnaire included 17 items covering four domains of nursing care:

- Psychological and emotional support for patients

- Support in treatment and collaboration with physicians' orders

- Assistance with personal hygiene

- Ensuring safety and preventing technical errors

2.6. Data Collection Procedures

- Research Team: Three ICU nurses were trained prior to the study to ensure consistency in data collection.

- Method: Face-to-face interviews using the structured questionnaire were conducted in patient rooms, each lasting approximately 15 minutes. Interviews were scheduled for the afternoon after patients had completed their nursing care procedures.

- Steps of data collection:

- Identify eligible participants based on inclusion criteria.

- Explain the study, obtain informed consent from patients willing to participate.

- Conduct interviews one day before discharge to gather patient feedback on nursing care.

2.7. Evaluation Criteria

Responses were rated using a three-point scale:

- Well performed / Fully completed

- Performed but not adequately / Incomplete

- Not performed

Completion levels were categorized into two groups: "Achieved" and "Not Achieved," defined as follows:

- Domain 1 (psychological and emotional support) and Domain 2 (support in treatment and physician order execution): considered "Achieved" only when all items were rated as level 1. If even one item was rated as level 2 or 3, the domain was classified as "Not Achieved."

- Domains 3 and 4 (personal hygiene and safety/error prevention): results were presented descriptively by item and not aggregated into "Achieved" or "Not Achieved" categories.

2.8. Ethical Considerations

The study was approved by the Graduate Council of the Nam Dinh University of Nursing under Decision No. 1677/QĐ-ĐDN dated August 10, 2021. All data were used solely for research purposes aimed at improving the quality of patient care.

3. RESEARCH RESULTS

Table 1. General Characteristics of Study Participants (n = 245)

Information		Number	Percentage (%)
Gender	Male	161	65.7
	Female	84	34.3
Education Level	Primary school	30	12.2
	Lower secondary school	122	49.8
	Upper secondary school	57	23.3
	Vocational school	29	11.8
	College/ University	07	2.9
Occupation	Farmer	106	43.3
	Worker	17	6.9
	Government staff	09	3.7
	Student	04	1.6
	Other freelance jobs	70	28.6
	Retired/ Disabled	39	15.9
Residence	Urban	54	22.0
	Suburban	188	76.7
	Other provinces	03	1.2

The average age of study participants was 59.56 ± 16.13 years, with males accounting for 65.7% of the sample. Among the patients, 49.8% had completed lower secondary education, 43.3% were farmers, and 76.7% resided in suburban areas.

Table 2. Psychological and Emotional Support for Patients (n = 245)

Content	Number	Percentage (%)
Nurses showed concern, empathy, and inquired about the patient's condition during care and treatment		
Well performed	239	97.6
Performed but not adequate	06	2.4

Content	Number	Percentage (%)
Nurses reassured patients during care and clinical procedures		
Well performed	231	94.3
Performed but not consistent (intermittent >1 time/day)	14	5.7
Nurses responded promptly to patients' concerns and questions during care and treatment		
Well performed	227	92.7
Performed but not timely	18	7.3
Communication attitude, behavior, and verbal interactions with patients		
Always respectful, kind, and empathetic	233	95.1
Performed but not consistent	12	4.9

Psychological and emotional support provided by nurses was rated highly by patients across all indicators. Specifically, 97.6% of patients acknowledged that nurses consistently showed concern and asked about their well-being. Respectful communication, kindness, and empathy were recognized by 95.1% of patients. Moreover, 94.3% of respondents reported that nurses effectively reassured them during care and clinical procedures.

Table 3. Support in Treatment and Implementation of Physicians' Orders (n = 245)

Content		
Response	Number	Percentage (%)
Nurses provided prior notice and explanation before carrying out physician's orders		
Well performed, complete	240	98.0
Performed but incomplete	05	2.0
Nurses verified patient name and age and provided full explanations before administering medication		
Well performed, complete	244	99.6
Performed but incomplete	01	0.4

Content		
Response	Number	Percentage (%)
Nurses clearly stated the name and quantity of medication, and disclosed medications used during the day		
Well performed, complete	225	91.8
Performed but incomplete	20	8.2
Nurses administered medication at bedside under their supervision		
Well performed, complete	192	78.4
Performed but incomplete	53	21.6
Nurses provided encouragement and clear explanations before each clinical procedure		
Well performed, complete	199	81.2
Performed but incomplete	46	18.8
Nurses instructed patients on necessary preparations before diagnostic tests and imaging		
Fully instructed	187	76.3
Incompletely instructed	58	23.7
Nurses guided or accompanied patients to diagnostic or imaging areas		
Well performed	245	100.0
Incomplete	00	0.0

Patients rated nurses' performance in supporting treatment and implementing physicians' orders positively. Notably, 100% of patients reported being guided or accompanied by nurses to diagnostic or imaging departments. In addition, 98.0% acknowledged receiving advance notice and explanation before procedures, and 99.6% stated that nurses verified patient identity and explained medications thoroughly before each administration. However, only 76.3% of patients reported receiving adequate instructions for preparing for diagnostic tests, and 78.4% confirmed that medication was administered at the bedside under direct nurse supervision.

Table 4. Daily Personal Hygiene Support for Patients (n = 245)

Content		
Response	Number	Percentage (%)
Patients experienced difficulty with personal hygiene during hospitalization		
Yes	233	95.1
No	12	4.9
Nurses assisted patients with personal hygiene when difficulties were reported		
Well performed, complete	231	94.3
Provided assistance but not consistently	06	2.4
No assistance provided	08	3.3
Individuals who directly assisted severely ill patients with oral hygiene, body cleansing, and toileting		
Nurse	230	93.9
Nursing assistant	00	0.0
Patient's caregiver	15	6.1

Among the 233 patients who experienced difficulty with personal hygiene during hospitalization, 94.3% reported that nurses provided adequate assistance. However, 2.4% indicated that help was provided inconsistently, and 3.3% stated that no assistance was given. The results also highlight that nurses were the primary personnel responsible for assisting severely ill patients with oral hygiene, body cleansing, and toileting, accounting for 93.9% of cases.

Table 5. Ensuring Safety and Preventing Technical Errors (n = 245)

Content		
Response	Number	Percentage (%)
Patients required transport using medical equipment (e.g., stretchers, wheelchairs) during hospitalization		
Yes	240	98.0
No	05	2.0
Medical staff assisted family members in transporting the patient		
Yes	231	94.3
No	14	5.7

Content		
Response	Number	Percentage (%)
Nurses provided guidance/positioned patients in a safe posture during transport		
Well performed, complete	215	87.8
Performed but incomplete	30	12.2

During hospitalization, 94.3% of patients reported that healthcare staff adequately assisted family members in transporting patients. However, 12.2% of patients stated that nurses did not fully ensure proper guidance or safe positioning during patient transport.

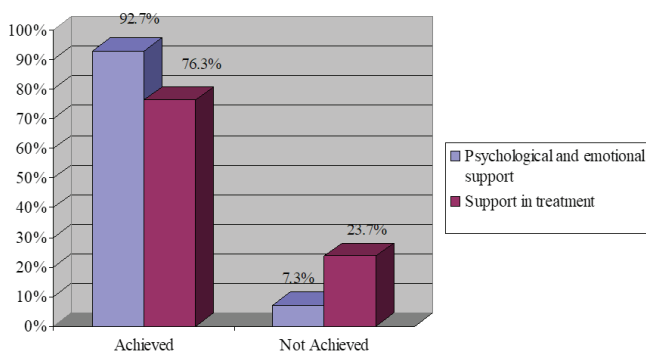


Figure 1. Classification of Nursing Care Levels for Patients (n = 245)

The quality of nursing care was rated at a relatively high level: psychological and emotional support for patients reached 92.7%, while support in treatment and collaboration in implementing physicians' orders reached 76.3%.

4. DISCUSSION

The findings of this study demonstrate that the nursing care provided in the Intensive Care Unit (ICU) of Thanh Hoa Provincial General Hospital generally met the expectations of inpatients across key domains of care, particularly in psychological support, treatment assistance, personal hygiene, and safety practices.

Psychological and Emotional Support:

Psychological and emotional support plays a critical role in patient care, contributing to patients' and their families' sense of security and trust in the treatment process—especially in cases involving chronic illness, life-threatening conditions, or extended hospital stays. Nurses are expected to demonstrate respectful, empathetic, and supportive attitudes when interacting with patients. When patients feel comfortable and secure, they are

more likely to cooperate during care and treatment, which enhances clinical outcomes and reduces the likelihood of complications or relapse.

The findings of this study indicate that patients highly valued the psychological and emotional support provided by nurses across all assessed domains. The highest-rated item was the criterion that nurses regularly expressed concern, communicated with, and reassured patients during treatment, which was positively evaluated by 97.6% of respondents. In addition, 95.1% of patients reported that nurses maintained respectful, compassionate, and understanding communication. Furthermore, 94.3% of patients felt reassured by the emotional support provided during clinical procedures. Overall, 92.7% of patients rated the psychological and emotional support provided by nurses as satisfactory, while 7.3% considered it unsatisfactory—primarily due to delays in addressing patient concerns during care. These findings are consistent with the results reported by Chau Thi Hoa and Nguyen Thi Dieu Trang (2010) and Duong Thi Binh Minh (2012), who found satisfaction rates of 90.7% and 94.9%, respectively, in similar contexts [5,6].

Support in Treatment and Execution of Medical Orders:

The support provided by nurses in executing medical orders and facilitating treatment was also rated highly across most indicators. All patients (100%) reported that nurses either guided or accompanied them to diagnostic and imaging areas. Additionally, 98.0% of patients noted that nurses explained forthcoming procedures in advance, and 99.6% stated that nurses consistently verified patient name and age, and clearly explained medications before administration. However, areas with lower satisfaction included preparation guidance before diagnostic tests (76.3%) and bedside medication administration under nurse supervision (78.4%). The overall satisfaction rate for this domain was 76.3%, which was slightly lower than the 81.2% reported by Nguyen Thi Bich Nga (2015) in a study conducted at the National Lung Hospital [7].

Personal Hygiene Assistance:

The study also highlights the central role of nurses in supporting personal hygiene for patients with limited mobility. Among the 233 patients who reported difficulty with personal hygiene, 94.3% confirmed that nurses provided adequate assistance. However, 5.7% indicated that they were either not assisted when needed or received help inconsistently. Nurses were identified as the primary caregivers for oral hygiene, bathing, and toileting assistance in 93.9% of cases. These

findings are comparable to those reported by Duong Thi Binh Minh, in which 14.6% of patients at Huu Nghi Hospital indicated that nurses did not provide adequate or consistent hygiene support when needed [6].

Safety and Technical Error Prevention:

Regarding patient transport safety and prevention of procedural errors, 240 patients reported needing transport via hospital equipment (e.g., stretchers, wheelchairs). Of these, 94.3% stated that healthcare staff provided assistance along with family members during transportation. Nonetheless, 12.2% of patients noted that nurses did not fully ensure safe positioning during transport. Similar to previous studies, these limitations are often associated with insufficient staffing and excessive workloads, which hinder comprehensive care delivery [4,6].

5. CONCLUSION

Overall, the study reveals that nursing care in the ICU was assessed by patients as meeting essential care standards. Key strengths included psychological support (92.7%), guidance and accompaniment for diagnostic procedures (100%), and personal hygiene assistance (94.3%). However, certain limitations were noted, including the inconsistency in hygiene support (5.7%) and inadequate pre-procedure instructions for diagnostic tests (23.7%). These findings highlight the need for staffing reinforcement and workload optimization to enhance the comprehensiveness and consistency of nursing care in intensive care settings.

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