

Study on the Professional Values of Nurses in a Tertiary Hospital of Qiqihar

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Abstract: Using a self-made general information questionnaire, a revised hospital violence experience and cognition questionnaire, and a revised nurse professional value scale (NPVS-R), 608 nurses in a third-class hospital in Qiqihar were surveyed and analyzed. Investigate the status quo of hospital violence and nurses' professional values and explore the influencing factors of nurses' professional values. Among the 608 nurses, 45.72% (278 people) had experienced hospital violence; when faced with hospital violence, the main measures nurses took were to seek help from security guards, colleagues and leaders. A small number of nurses even committed suicide. Thoughts. Nearly half of nurses have experienced hospital violence at work, and violent incidents will have a negative impact on nurses' physical and mental health and professional values. It is recommended that hospitals increase nurses' participation in anti-violence training and cultivate the ability of nurses to correctly respond to violent incidents. Promote the formation of correct professional values and provide high-quality care.

1. Introduction

With the continuous advancement of medical technology, the number of patients seeking medical treatment in clinics has gradually increased, and related problems have also followed. Hospital violence is one of the most serious problems. The World Health Organization defines it as: The workplace is verbally abused, threatened, and attacked, which creates explicit or implicit challenges to its safety, happiness and health [1]. As the largest group providing medical care services, nurses have a good career value orientation is very important. The professional value orientation of nurses not only has an important impact on the individual's career planning and career choice, but also affects the work efficiency of the entire nursing team, which in turn affects the quality of care received by patients [2]. This research focuses on investigating the status quo of violence in hospitals and exploring its relationship with nurses' professional values, providing a basis for interventions to improve nurses' professional values.

2. Investigation

2.1 Survey Object

In December 2019, a convenient sampling method was adopted to select 608 nurses from a tertiary A hospital in Qiqihar City to conduct a questionnaire survey. The inclusion criteria: volunteer to participate in the study and have no mental illness.

2.2 Questionnaire

General information survey form: self-designed, mainly including the baseline information of the research object such as gender, age, department, professional title, educational background, whether to participate in violence prevention training.

Questionnaire on the experience and perception of violence in the hospital

Revised on the basis of Chen Lilian's research questionnaire [3]. Including two parts, a total of 26 items, mainly investigating the type, frequency, location, coping style, impact and perception of violence in hospitals, etc. The questionnaire Cronbach's alpha coefficient is 0.749.

Nurses Professional Values Scale Revision (NPVS-R): WEIS revised the Nurses' Professional Values Scale according to the ethical guidelines of the American Nursing Society [4], which mainly

includes care provision, activism, freedom of responsibility, and safety. There are 4 dimensions of trust and 26 items in total. The questionnaire uses a Likert 5-point scale survey method, with a score of 1-5, from unimportant to most important, with a maximum score of 130. The higher the score, the greater the recognition of professional value. it is good. The overall Cronbach's alpha coefficient of the scale is 0.964. The principal component and factor analysis show that the cumulative sum of squares of the rotating load of the questionnaire is 78.94%. It has good structural validity and can be used to measure nurses' professional values.

2.3 Investigation Method

After uniform training, the investigators distributed questionnaires on the spot and collected them uniformly. They were filled out in an anonymous manner. A total of 627 questionnaires were distributed and 608 were returned, of which 608 were valid questionnaires, with an effective recovery rate of 96.97%.

2.4 Statistical Analysis

Use SPSS25.0 statistical software to statistically analyze the data; the measurement data is represented by (\bar{x}), the number of count data is represented by N (percentage), the comparison between groups uses t-test, the correlation study uses multiple regression analysis, and the difference is considered to be statistically significant .

3. Survey Results

3.1 General Situation

A total of 608 nurses were surveyed, of which the majority were female nurses, accounting for 96.55% (587) and men accounting for 3.45% (21); in the age distribution, there were 416 people aged 18-29, accounting for 68.42%, and 133 people aged 30-39. , Accounting for 21.88%, 34 persons aged 40-49, accounting for 5.59%, 25 persons 50-59, accounting for 4.11%; education level 45.72% (278 persons), undergraduate 51.48% (313), master 2.80% (17 people); 50.16% (305 people) of interns with professional titles, 31.41% (191 people) with junior titles, 15.95% (97 people) with intermediate titles, and 2.48% (15 people) with senior titles; 66.94 have participated in anti-violence training % (407 people), 33.06% (201 people) did not participate.

3.2 Experience of Hospital Violence

Through statistical analysis of hospital violence incidents suffered by nurses, it is found that among 608 nurses, 45.72% (278 people) of nurses have experienced hospital violence, and 40.46% of nurses have experienced verbal violence in three types of hospital violence The highest proportion of the population, the frequency of hospital violence is mainly 0-2 times. The violent incidents mainly occurred in bed testing, corridors and nurse stations where nurses were in close contact with patients and their families. The verbal violence was mainly concentrated in the daytime (63.87%), the proportion of physical violence in the day and night was similar, and 66.67% of sexual violence occurred at night.

3.3 Nurses' Measures to Deal with Hospital Violence

When faced with hospital violence, the main measures nurses took were to seek help from security guards, colleagues and leaders. When faced with verbal violence, the measures nurses took were more tolerant and avoidance.

3.4 The Impact of Hospital Violence on Nurses' Mind and Body

The main impact of hospital violence on nurses is their inability to concentrate during work. Nearly half of nurses will develop fear after experiencing sexual violence, and a small number will have suicidal thoughts.

3.5 Nurses' Attitude towards Violence

95.07% (578 people) of nurses think that they are not worth fussing about experiencing hospital violence during their work. 94.90% (577 people) of nurses expressed their willingness to participate in training to prevent hospital violence, and 80.92% (492 people) nurses support Zero tolerance for hospital violence.

3.6 The Impact of Hospital Violence on nurses' Professional Values

Compared with nurses who had never experienced hospital violence, nurses who suffered from hospital violence had lower professional value scores, which was statistically significant; moreover, compared with verbal violence and physical violence, nurses experienced sexual violence had lower professional value scores.

3.7 Analysis of Factors Affecting Nurses' Professional Values

Through multiple regression analysis, it can be seen that there is no statistically significant correlation between nurses' gender, age and job title and professional values scores. There is a positive correlation between educational background and violence training and nurses' professional values, while there is a negative correlation between hospital violence and nurses' professional outlook. The correlation is significant.

4. Discussion

4.1 Nurses Mainly Experience Language Violence and Poor Response Measures

In this study, 45.72% of the nurses experienced hospital violence, of which the most was verbal violence, accounting for 40.46%. The incidence of physical violence and sexual violence was low, consistent with the results of Peng Ying's research [5], although verbal violence was not It will directly endanger the health of nurses, but Zhang Sale and other studies have found that language violence has short-term and long-term psychological effects on nurses, and it is often the fuse of physical violence [6]. Most of the violent incidents experienced by nurses in the hospital did not exceed 3 times, mainly from patients and their families. The violent incidents occurred mainly at the patient's bedside, corridors and nurses' stations. This is consistent with Hu Xuan and others who discovered that hospital violence mainly occurred in nurses. Stations and wards [7], Yao et al. 8 found that violence in medical places mostly occurred in places where nurses and patients or their family members directly contacted [8]. When suffering from verbal violence, some nurses will choose to turn to security guards, colleagues and leaders, and the proportion of physical and sexual violence is higher, similar to Yan Junhui's research results [9].

4.2 Most Nurses Believe That There Should Be Zero Tolerance for Hospital Violence

No matter what kind of hospital violence they experience, it will make the nurses unable to concentrate at work. Among the nurses who experience sexual violence, some have fear. Research by Su Yayun and others have found that hospital violence can seriously affect the short-term and long-term psychological state of nurses. It will change its perception and value of its work, which will seriously affect its physical and mental health. Research by Wang Chao et al. also found that hospital violence can seriously affect the working status of medical staff and reduce the quality of medical services [10]. Most nurses believe that there should be zero tolerance for hospital violence. This shows that nurses are resolute in opposing hospital violence, which further demonstrates the role of strengthening the protection of hospital violence on nurses' physical and mental health and working conditions.

4.3 Hospital Violence Has a Negative Impact on Nurses' Professional Values

Compared with nurses who have never experienced hospital violence, no matter what kind of hospital violence they have experienced, they will have a negative impact on nurses' professional values; and after experiencing sexual violence, nurses' professional value scores have dropped more,

which reminds us Hospitals should strengthen nurses' ability to prevent and respond to hospital violence, so that nurses can take active and effective measures when facing hospital violence to reduce or avoid violent incidents to themselves harm and avoid escalation of violence.

4.4 Factors Affecting Nurses' Professional Values

Through the regression analysis of the nurses' professional value scores and various factors, it can be seen that gender, age and job title have no effect on nurses' professional values, and the higher the degree of education, the higher the level of education, the higher the nurse's professional value scores, the more the nurses suffer from hospital violence. Will have a negative impact on the professional values of nurses. The research results show that the higher the degree of education, to a certain extent, it reflects that medical staff have superb medical skills and flexible communication skills. Learning about communication methods and nurse-patient relationships in higher education also plays a role in avoiding medical violence. Certain buffering effect.

5. Conclusion

In short, in the current severe medical environment, hospital violence should be taken seriously. It will not only seriously damage the personal safety and mental health of nurses, but also affect the working status of nurses; this may cause a large loss of nursing staff and reduce hospitals. The level of medical care may even endanger the safety and health of patients. Therefore, the hospital should establish and improve the corresponding rules and regulations, and strengthen the nurses' ability to prevent and respond to hospital violence, protect the physical and mental health and legal rights of the nurses, train the nursing staff to form the correct value orientation, and improve the nursing level and quality of the nurses. Good service for patients.

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