

## A study to assess the knowledge regarding crisis intervention among staff nurses in Narayana medical college hospital, Nellore

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### Abstract

**Background:** Crisis can be viewed as an integral component of everyday life situations. A crisis may influence people's lives in different ways. As a consequence may go down to a lower or less healthy level of functioning than what was before the crisis, or he may resume the same level of functioning by repressing.

Skin the largest organ in our body. The skin functions as a protective barrier and it also involved in maintaining the proper temperature for the body to function well. It gathers sensory information from the environment, and plays an active role in the immune system protecting us from disease.

Crisis intervention assessment is a comprehensive observation that should be documented in a systemic and standardized manner to ensure all practitioners involved in Crisis care.

**Objective:** To assess the knowledge of staff nurse regarding Crisis intervention assessment.

**Materials and methods:** Descriptive research design simple random sampling technique was followed which included 100 samples were used. Data was collected through structured knowledge questionnaire on crisis intervention assessment. Data analysis was done with descriptive and inferential statistics.

**Results:** Majority of staff nurses, 81(81%) had average knowledge level, 14(14%) staff nurses had good knowledge and 5(5%) staff nurses had poor knowledge on crisis intervention assessment.

**Conclusion:** The study concluded that majority of staff nurses are having average knowledge on crisis intervention assessment.

**Keywords:** Crisis intervention assessment, protective barrier, immune system

### 1. Introduction

Crisis can be viewed as an integral component of everyday life situations. A crisis may influence people's lives in different ways. As a consequence may go down to a lower or less healthy level of functioning than what was before the crisis, or he may resume the same level of functioning by to their repressing. The crisis and the relation emotions.

Crisis Intervention is emergency psychological care aimed at assisting individuals in a crisis situation to restore equilibrium biopsychosocial functioning and to minimize the potential for psychological trauma. Crisis can be defined as one's perception or experiencing of an event or situation as an intolerable difficulty that exceeds the person's current resources and coping mechanisms.

The priority of crisis intervention and counseling is to increase stabilization. Crisis interventions occur at the spur of the moment and in a variety of settings, as trauma can arise instantaneously. Crises are temporary, usually with short span, no longer than a month, although the effects may become long-lasting <sup>[1]</sup>.

Crisis Intervention is the emergency and temporary care given an individual who, because of unusual stress in his or her life that renders them unable to function as they normally would, in order to interrupt the downward spiral of maladaptive behavior and return the individual to their usual level of pre-crisis functioning. To perform neurological assessment for this patients, nurses should have specialized knowledge and

skills which will enable them to assess and diagnose disease condition <sup>[2]</sup>.

Crises can occur on a personal or societal level. Personal Trauma is defined as an individual's experience of a situation or event in which he/she perceives to have exhausted his/her coping skill, self-esteem, social support, and power. These can be situations where a person is making suicidal threats, experiencing threat, witnessing homicide or suicide, or experiencing personal loss. While a person is experiencing a crisis on the individual level it is important for counselors to primarily assess safety. Counselors are encouraged to ask questions pertaining to social supports and networks, as well as give referrals for long term care.

### 2. Need for the study

Individuals experiencing crisis have an urgent need for assistance in crisis intervention, the therapist or other intervenes, becomes a part of the individual's life situation. Because of the individuals emotional state he or she is unable to problem solve, so requires guidance and support from other to help mobile. The resources needed to resolve the crisis <sup>[3]</sup>. A crisis occurs when an individual feels overwhelmed by events. The crisis may be precipitated by events which bring about sudden change to the person's environment – e.g., bereavement, redundancy or childbirth. It may also be linked to factors unrelated to any mental health issues such as the illness, which in turn precipitates a crisis requiring

intervention. Usual coping mechanisms fail and new strategies may be tried but, if these also fail, an increasing state of anxiety and poor morale develops. Maladaptive coping strategies, such as substance abuse, deliberate self-harm or violent behaviour, may also be applied. Further escalation leads to a state of decompensation in which normal psychological functioning breaks down, most commonly causing panic attacks and disabling anxiety, suicidal intent or psychosis.

Crisis therapy aims to intervene as soon as possible after the onset of the crisis in order to enable the individual to overcome it, minimise the usage of maladaptive coping strategies and avoid complete psychological breakdown. It is a short-term intervention, which may require intensive involvement of the therapist with the patient and sometimes also members of their family.

Crisis management is familiar to all in primary care - both supporting those with exacerbations of severe mental illness (often involving the Crisis Intervention Teams to prevent hospitalisation) and helping other patients to weather difficult times [4].

### 3. Objectives of the Study

- To assess the level of knowledge regarding crisis intervention among nurses in Narayana Medical College Hospital, Nellore.
- To find out the association between level of knowledge and selected demographic variables among nurses at Narayana Medical college Hospital, Nellore.

### 4. Materials and Methods

- **Research approach:** Quantitative approach.
- **Research design:** descriptive research design was adopted.
- **Setting:** The setting selected was Narayana Medical College Hospital, Nellore.
- **Population:** All staff nurses.
- **Sample:** The samples selected are staff nurses in Narayana Medical College Hospital.
- **Sample size:** The sample size is 100 staff nurses in Narayana Medical College Hospital, Nellore
- **Sample technique:** simple random sampling technique.

### 5. Criteria for Sample Selection

#### Inclusion criteria

- Staff nurses those who are working in Narayana Medical College Hospital, Nellore.
- The staff nurses include both male and female.

#### Exclusion criteria

Staff nurses who not willing and available during data collection.

### 6. Description of tool

- **Part A: Socio demographic Variables:** Age, gender, Religion, Education, Marital Status, Type of family, Area of work, year of experience, Designation, and Attended any programmes regarding crisis intervention.
- **Part B: Structured questionnaire to assess the knowledge regarding Crisis intervention assessment:** It consists of 45 items which are divided into nine areas namely;

### 7. Data analysis

Data was analyzed by using descriptive and inferential statistics.

This chapter deals with analysis and interpretation of data. The data analysis based on the objectives of the study. The data was collected from 100 samples of nurses who are all working in Narayana Medical College Hospital Nellore.

**Section-1:** Frequency and percentage distribution of socio demographic variables of staff nurses.

**Section-2:** Staff nurses Knowledge regarding Crisis intervention assessment

### 8. Results

The results shows that frequency and percentage distribution with regard to age 64(64%) are between 22-25 years, 26(25%) are between 26-30 years and 10(10%) are between 31-35 years, regard to gender, 20(20%) are males and 80(80%) were females, regard to Religion, 32(32%) were Christians,67(67%) were Hindus and 1(1%) member are Muslim, regard to Education 15(15%) nurses were having ANM, 26(26%) nurses were having GNM, 58(58%) nurses were having BSC and 1(1%) member are having PBBSC, Regard to Marital status, 14(14%) were Married and 86(86%) were unmarried, Regard to Type of family, 8(8%) were having Joint family, 88(89%) were having Nuclear family and 3(3%) were having Extended family, Regard to Area of work, 52(52%) were from Medical,38(38%) were Surgical ward and remaining 10(10%) were from ICU, regard to years of experience, 46(49%) were having <1 year of experience, 46 (46%) of nurses were having 1-4 years of experience, 3(3%) nurses were having 4-7 years of experience and 2 (2%) nurses were having experience >7 years, regard to Designation staff nurses, 6(6%) were ward in charge and 1(1%) member are Supervisor, regard to CNEL workshop, 36(36%) of staff nurses were having and 64(64%) of staff nurses were exposed to workshops on Crisis assessment.

Knowledge of staff nurses regarding Crisis intervention assessment

Knowledge	Score	
	F	%
Poor	5	5%
Average	81	81%
Good	14	14%
total	100	100%

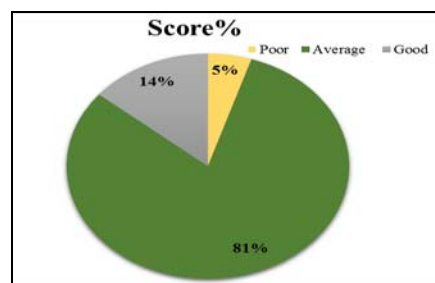


Fig 1: Shows percentage distribution regarding knowledge on Crisis intervention assessment.

There is no significant association between the socio demographic variables of age in years, gender, ward type, year of experience, and source of information regarding wound assessment.

## 9. Discussion

The discussion of the present study was based on the findings obtained from the descriptive and inferential statistical analysis of collected data.

### Major findings of the study

- With regard to age, 64(64%) were between 20-25 years
- With regard to gender, 80(80%) were females
- With regard to Religion, 67(67%) were Hindus
- With regard to Education, 58(58%) were having BSC
- With regard to Marital status 86(86%) were Unmarried
- With regard to Type of family, 89(89%) were having Nuclear family
- With regard to ward type, 52(52%) of staff nurses from Medical ward
- With regard to years of experience, 2(2%) are having experience >7 years.
- With regard to Designation staff nurse, 6(6%) were Ward incharges.
- With regard to CNEL workshop, 36(36%) were having.

There is no significant association between the socio demographic variables of age in years, gender, ward type, year of experience and source of information regarding Crisis intervention assessment.

## 9. Conclusion

The study concluded that majority of staff nurses are having average knowledge on crisis intervention assessment.

## 10. Acknowledgement

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