An image of a perfect nurse in the opinion of hospitalized patients

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ABSTRACT

Introduction: Contemporary patients' expectations for a nurse do not only concern medical knowledge and practical skills, but also a proper moral attitude, commitment, courteousness and professionalism. The present study is an attempt to present personality traits of a nurse from the point of view of patients' expectations based on Murray's theory of needs.

The aim of this study was to analyse the image of a "perfect" and "bad" nurse in the opinion of hospitalized patients in the context of their own needs.

Materials and methods: The study included a group of 250 patients hospitalized in various departments. The Adjective Check List (ACL) was used to carry out the assessment.

Results: The study has shown that patients clearly expect that a nurse should have a need for order – with a mean of 60.36 ± 7.58 and a need of endurance – with a mean of 59.13 ± 6.61 .

Conclusions: Patients explicitly differentiate the characteristics of a "perfect" nurse.

Keywords: hospitalization; perfect nurse; opinion; patient.

INTRODUCTION

Contemporary nursing differs from the way that nursing was perceived over a dozen years ago. Historically, the essence of the theory of nursing, the role of the patient and the attitude towards the process of nursing were understood differently. The basis of the present changes in attitudes towards patients are changes in values, standards of behaviour and, above all, a holistic approach to patient care. A contemporary nurse must have the ability to encourage people to communicate, to transmit knowledge and to be able to create an appropriate atmosphere in the patient's environment. Today's patients are no longer passive receivers of care, but clients actively participating in the process of nursing, more aware of their own rights and expectations from a therapeutic team. The expectations of a nurse are no longer restricted to the possession of appropriate practical skills, but also involve a proper moral attitude, commitment, courteousness, and professionalism [1].

In the context of the growing demand for a higher quality of care, there arises a question: what personality traits should a nurse have and what are patients' expectations for the characteristics of a good nurse? Meeting the individual needs of a patient aids the progress of therapy.

One of the indicators of human behaviour and the expectations of people for the others are human needs, which constitute an important part of the structure of personality. One of the many theories of needs is Murray's theory of needs. Murray thought that the power of need is the drive behind human behaviour. He argued that needs are of an unconscious character and are evoked by external stimuli (presses) and internal stimuli [2].

This study is an attempt to present the personality traits of a nurse (favourable – "perfect" nurse and unfavourable – "bad"

nurse) from the expectations of patients from different hospital departments, based on Murray's theory of needs. A research tool that was developed based on this theory is the Adjective Check List (ACL) test [3].

The aim of this study was to analyse the image of a "perfect" and "bad" nurse in the opinion of hospitalized patients, in the context of the assessment of their own needs.

MATERIALS AND METHODS

The study encompassed a group of 250 patients who stayed in various hospital departments. The average age of the respondents was 54.64 ±14.72. The studied group consisted of 127 (50.8%) men and 123 (49.2%) women. The study group was composed of hospitalized patients who met the inclusion criteria, i.e. adults from selected hospital departments who are intellectually capable and do not have a problem with filling in the questionnaire. Consent was also required to participate in the study. The study was conducted from March to July 2017, after the written consent of the Director of the Hospital had been obtained. Before the study started, all patients had been informed about voluntary participation in the study, the right to withdraw from it at any moment, anonymity and confidentiality. The study was conducted by the authors of this paper.

Among the participants 99 (39.6%) were patients with a secondary education and 60 (24.0%) of the patients had a vocational education; 42 (16.8%) and 49 (19.6%) of the patients had a primary education or higher education respectively. The greatest number of patients were respondents living in a city – 151 (60.4%) of them, whereas 99 (39.6%) of the participants lived in a village. Among the respondents, the most numerous



group were professionally employed people – 92 (36.8%) of the respondents and retired people – 71 (28.4%) of the participants, whereas 59 (23.6%) of patients lived off disability pensions and 28 (11.2%) of the respondents claimed that they do not work.

The ACL test by Gough and Heilbrun was applied in this study. The ACL test contains 300 randomly listed adjectives which relate to different personality traits. For the purposes of this study, the patients from the selected departments indicated the adjectives describing a "perfect" and "bad" nurse as well as an image of themselves. The results were analysed according to 15 scales of needs in relation to Murray's theory of needs; the needs are as follows: need of achievement (Ach), need of domination (Dom), need of endurance (End), need of order (Ord), need of intraception (Int), need of nurturance (Nur), need of affiliation (Aff), need of heterosexual contacts (Het), need of exhibition (Exh), need of autonomy (Aut), need of aggression (Agg), need of change (Cha), need of succorance (Suc), need of abasement (Aba) and the need of deference (Def). The questionnaire also allows to determine the total number of adjectives checked as well as the number of favourable adjectives and unfavourable adjectives relating to 75 adjectives scored positively and negatively considered as the normalization group [3].

The results were presented as values calculated for the 10 score in the range 0–100, with a mean arithmetic mean score of 50 points and a standard deviation score of 10 points.

The next part was a unique questionnaire to collect variables such as the age, sex, education, place of residence, marital status and the professional situation of the respondents.

Statistical analysis of the results was conducted using the statistical package Statistica PL v. 9.1. The analysis of variance (Anova) was used for statistical inference; the p-value at the level of <0.05 was considered significant.

RESULTS

Way of describing personality traits of a nurse

The total number of adjectives used to describe personality in all 3 groups were smaller than the normalization group. Statistically significant differences also appeared between the individual categories. When comparing the assessment of a "perfect" nurse with a "bad" nurse, a statistically significant difference was noticed in case of a "perfect" nurse, because more adjectives were attributed to a "bad" nurse. There were no differences in the number of adjectives used between the assessment of one's own traits and the assessment of the traits of a "perfect" nurse. A greater number of adjectives were used in order to describe a "bad" nurse than to assess the personality of a "perfect" nurse and one's own personality (p < 0.01).

The number of adjectives describing a "perfect" nurse amounted to 50.01 ± 6.92 and was below the mean value compared with the normalization group. This number was statistically significantly higher than in the positive assessments of one's own personality (p < 0.001).

The number of negative adjectives in the assessment of a "bad" nurse amounted to 91.98 \pm 10.96 and this number was

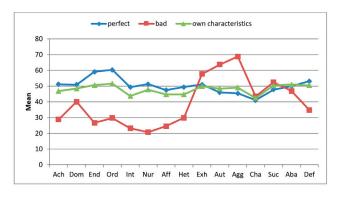
significantly higher than in the assessment of one's own features and, as would be expected, the assessment of a "perfect" nurse (p < 0.001) – Table 1.

TABLE 1. Mean values of the total number of adjectives, favourable adjectives and unfavourable adjectives

| | Total number of adjectives checked | Favourable adjectives | Unfavourable adjectives |
|---------------------|--|--------------------------|----------------------------|
| | | mean (±) | |
| Perfect | 33.37 ±6.41 | 50.01 ±6.92 | |
| Bad | 35.27 ±9.07 | | 91.98 ±10.96 |
| Own characteristics | 33.39 ±6.34 | 42.69 ±8.23 | 46.82 ±9.31 |

The image of a nurse in the eyes of patients – description in the category of psychosocial needs

When analysing the mean values of adjectives used to describe a "perfect" nurse, it was observed that patients clearly expect the nurse to have Ord - with a mean of 60.36 ±7.58. According to the respondents, the ideal traits are: striving for rationality, maintaining order, proper organisation and planning of activities. The next expected trait is End - with a mean of 59.13 ±6.61. The respondents expect a nurse to have a strong sense of duty, conscientiousness in performing activities and endurance in every taken action. The image of the patients' own traits is similar to the traits of a "perfect" nurse. During the analysis of an image of a "bad" nurse, the patients indicated Agg as an undesirable trait – with a mean of 68.83 ± 7.33 . According to the respondents, aggressiveness, competitiveness and an excessive drive to achieve a goal without paying attention to social consequences are the least expected traits of a nurse. The Aut – with a mean of 63.69 ± 7.11 is the next trait considered negative by the respondents. This need expresses itself in indifference towards others, focusing the attention of others and one's own attention on one's self, and taking action regardless of the opinion of other people and against social values and expectations. The image of the respondents themselves oscillates on a similar level, without a great difference in the mean values (Fig. 1).



Ach – achievement; Dom – domination; End – endurance; Ord – order; Int – intraception; Nur – nurturance; Aff – affiliation; Het – heterosexuality; Exh – exhibition; Aut – autonomy; Agg – aggression; Cha – change; Suc – succorance; Aba – abasement; Def – deference

FIGURE 1. Mean values of the scales of needs

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As shown in Table 2 the people describing a "perfect" nurse, attributed to this category higher statistically significant results compared to the description from the "bad" nurse. These results concerned the needs of: Ach, Dom, End, Ord, Int, Nur, Aff, Het, Aba, and Def. An opposite situation was observed in the scales of Exh, Aut, Agg, Cha, and Suc. This means that the patients describing a "bad" nurse attributed a greater intensity of the above-mentioned needs. When describing their own personality traits, the patients expressed a difference compared with the description of a "bad" nurse in respect to an increase in Exh, Aut, and Agg. A similarity was observed between the description of one's own characteristics and the characteristics of a "perfect" nurse, with an exception of Cha, where there was no difference between a "bad" nurse and one's own characteristics.

DISCUSSION

The results of the presented study were supposed to answer the question: what characteristics should a "perfect" nurse and a "bad" nurse have in the opinion of hospitalized patients. An image of a "perfect" nurse and a "bad" nurse was presented in the context of the self-assessed characteristics of the studied patients.

The studied group were quite reticent when it came to the total number of adjectives used to assess the image of a perfect nurse or their own personality traits as the mean score oscillated around 30–40 points, whereas the mean number of adjectives used to assess unfavourable characteristics was 2–3 times greater. This indicates that nurses are critically assessed more easily. Perhaps this reflects a more general trend in the critical assessment of the medical community or a greater ease in criticizing other people rather than perceiving positive characteristics in a general population. An expression of

such attitudes may account for the growth in the number of cases against medical staff in healthcare units.

Between 2007-2011 in Poland, the Court of Nurses and Midwives received 156 complaints and this number is increasing every year. However, on average, 90% of the complaints lack justification. Many of these complaints came about when a health insurance system and an idea to "pay for healthcare" were introduced. The greatest number of complaints, almost 70%, concern petty offences against the rules of professional ethics, approx. 20% of complaints result from the inadequate care of a patient (according to the patients themselves and their relatives), whereas 10% of the complaints concern incorrectly performed procedures. According to a report by Nowosielska and Boniecka, patients' complaints most often result from a lengthy waiting time for help, consultation and diagnostic tests, as well as from frustration and an enigmatic feeling that the level of care is different than it used to be in the past [4]. The most frequent reasons leading to medical errors in nursing practice, divided into organizational and personal errors, are broadly described in the subject literature [5]. However, there is some ambiguity regarding this as there are data, among others contained in the literature, conducted by the Centre for Quality Monitoring in Health Care indicating that around 90% of nurses get a favourable assessment from patients [6]. A study by Włodarczyk and Tobolska showed that nurses themselves assess their image more positively than doctors and patients [7]. Perhaps, the differences are associated with different research methodologies.

The results of our own study have shown that patients, regardless of the department they are hospitalized in, expect Ord and End in the image of a "perfect" nurse. A detailed analysis of the content of such needs reveals that patients attach great importance to organizational competence, i.e. maintaining order, proper organization of work and the ability to plan tasks, but they also value some characterological traits in

TABLE 2. Mean values of the scales of needs with regard to the characteristics of a "perfect" nurse, "bad" nurse and the patient's own characteristics

| Needs | Perfect | Bad | Own characteristics | Significance of differences |
|------------------|-------------|-------------|---------------------|-----------------------------|
| | mean (±) | | | (p < 0.05) |
| Achievement | 51.14 ±6.45 | 28.69 ±7.93 | 46.86 ±7.43 | A > B & C; B < C |
| Domination | 50.81 ±6.91 | 40.15 ±6.38 | 48.41 ±7.51 | A > B & C; B < C |
| Endurance | 59.13 ±6.61 | 26.68 ±8.91 | 50.64 ±8.78 | A > B & C; B < C |
| Order | 60.36 ±7.58 | 29.62 ±8.43 | 51.60 ±8.52 | A > B & C; B < C |
| Intraception | 49.31 ±7.94 | 23.22 ±9.66 | 43.70 ±8.88 | A > B & C; B < C |
| Nurturance | 51.35 ±5.58 | 20.71 ±9.13 | 46.71 ±7.55 | A > B & C; B < C |
| Affiliation | 47.42 ±7.90 | 24.56 ±7.15 | 44.68 ±9.36 | A > B & C; B < C |
| Hetero-sexuality | 49.41 ±6.83 | 29.86 ±6.92 | 44.73 ±8.80 | A > B & C; B < C |
| Exhibition | 51.04 ±7.00 | 57.70 ±5.98 | 49.96 ±7.13 | A < B; B > C |
| Autonomy | 45.94 ±5.32 | 63.69 ±7.11 | 48.33 ±7.00 | A < B & C; B > C |
| Aggression | 45.45 ±5.50 | 68.84 ±7.33 | 49.08 ±8.28 | A < B & C; B > C |
| Changes | 41.06 ±4.31 | 43.54 ±8.70 | 42.40 ±7.00 | A < B & C |
| Succorance | 47.76 ±4.99 | 52.46 ±9.87 | 50.46 ±8.23 | A < B & C; B > C |
| Abasement | 49.90 ±6.00 | 47.00 ±6.99 | 51.04 ±8.39 | A > B; B < C |
| Deference | 53.22 ±5.77 | 34.77 ±6.13 | 50.49 ±7.22 | A > B & C; B < C |

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nurses – characteristics such as conscientiousness, sense of duty and End. Similar results were shown in a study by Ossowska and Majkowicz, in which patients with neoplastic diseases, subjected to radical and palliative treatment, expected the same needs from radiology technicians [8]. Analogical results were presented by Rostowska and Walęcka-Matyja in a group of female patients after mastectomy [9]. Is it possible to conclude on the basis of these results, that patients have the same expectations in terms of needs, regardless of the type of work performed in healthcare?

With regard to "unfavourable" characteristics, the results of this study and a study by Ossowska and Majkowicz coincide in terms of the need of aggression being the least desirable trait. In the study presented in this paper, the patients assessed aggression in nurses as the most negative need, whereas the 2nd most negative characteristic was a strong Aut [8]. The negative assessment of an increased Agg in nurses is quite obvious if we take into account the components of this factor, such as competition between staff members associated with an excessive "drive" to achieve personal success without paying attention to social consequences and omitting patient's interests. The negatively assessed Aut in nurses seems to be slightly less obvious. It seems that in an excessively developed Ind, an indifference to other people and a disregard for the opinions of others, the patients notice a lack of interest in their own affairs. There are not many studies concerning the assessment of personality traits, but from those that exist, results show a similarity especially in patients' expectations relating to Ord and End.

The next issue that should be considered is the image and perception of the nursing profession by patients. Currently there are a lot of studies concerning this issue. A study by Kojder and Zarzycka presented different determinants of the image of a nurse, the influence of professional traits, personal traits, interpersonal relationships as well as the role of the mass media in this matter [1]. Despite the fact that in Poland, the nursing profession is socially respected, factors that negatively influence this are low salaries, weak autonomy of the profession and also spreading gossip and rumours, according to a study by Kunecka in which almost half of the respondents indicated these as negative factors [10]. Perhaps these issues also influence the image of a nurse in the patients' opinion which results in the negative characteristics that were indicated in our study. The entirety of opinions certainly influences nurse's behaviour in professional working conditions, what determines specific reactions and expectations from patients.

Analyzing a study by Sochacka, who assessed the perception of the profession by nursing students, it can be concluded that, according to the students, a nurse should inspire confidence, be caring, kind and patient etc. [11]. This is similar to the

impressions of patients from our own study group, despite the fact that a different questionnaire was applied.

A study by Johari and Hee indicates that patients' expectations of a nurse include personality traits that are associated with the provision of nursing care. Despite the differences in the applied questionnaires, a conclusion is coherent because it indicates the need of studies of personality traits of a nurse and choosing the one that will meet the expectations of a current "client" of medical services. The author also indicates the need for the assessment of other professional groups associated with healthcare [12].

CONCLUSIONS

Patients explicitly differentiate between the characteristics of a "perfect" nurse and a "bad" nurse, using significantly more adjectives to describe the "bad" nurse. According to the patients, a "perfect" nurse should have characteristics such as the Ord and End, whereas they mainly attribute Agg and excessive Aut to a "bad" nurse. The characteristics attributed to a "perfect" nurse are similar to the characteristics of one's own personality in the mean values.

REFERENCES

- 1. Kojder E, Zarzycka D. Wizerunek zawodowy pielęgniarki i jego determinanty. Pielęgniarstwo XXI wieku 2014;2(47):47-52.
- Ciałkowska-Kuźmińska M, Klejna A. Potrzeby osób z zaburzeniami psychicznymi – perspektywa psychologiczna wobec psychiatrycznej. Post Psychiatr Neurol 2012;21(4):277-82.
- Gough HG, Heilbrun AB. Lista przymiotnikowa ACL. Podręcznik. Warszawa: Pracownia Testów Psychologicznych Polskiego Towarzystwa Psychologicznego; 2012.
- Nowosielska K, Boniecka H. Pielęgniarki przed sądem: na co skarżą się pacjenci?. Rzeczpospolita 2012. https://www.rp.pl/artykul/928153-Pielegniarki-przed-sadem--na-co-skarza-sie-pacjenci.html (28.08.2020).
- 5. Marczewska S. Błędy medyczne w pielęgniarstwie. Pielęg Położna 2012;12:43-6.
- Cieślik P. Personel medyczny w oczach pacjenta. Służba Zdrowia 2002;5-8:14-5.
- 7. Włodarczyk D, Tobolska B. Wizerunek zawodu pielęgniarki z perspektywy lekarzy, pacjentów i pielęgniarek. Med Pr 2011;62(3):269-79.
- 8. Ossowska M, Majkowicz M. Obraz idealnego technika radioterapii w ocenie pacjenta. Psychoonkologia 2010;2:41-7.
- 9. Rostowska T, Walęcka-Matyja K. Obraz siebie i poziom samooceny po amputacji piersi oraz kobiet ze schorzeniami skóry analiza porównawcza. Psychoonkologia 2003;7(1):7-13.
- 10. Kunecka D. Jak cię widzą, tak cię piszą. Mag Pielęg Położ 2011;9:4-5.
- Sochacka L. Postrzeganie zawodu pielęgniarki/pielęgniarza przez studentów kierunku pielęgniarstwo na kolejnych etapach kształcenia. Piel Zdr Publ 2014;4(2):109-16.
- $12. \ Johari\,H, Hee\,OC.\ Personality\,traits\,and\,customer-oriented\,behavior\,in\,the\,health\,tourism\,hospitals\,in\,Malaysia.\,IJTEF\,2013;4(4):213-6.$

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