

A study on the Role of Nursing Management in providing better Patient Care in Hospital

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ABSTRACT

Background: In the healthcare system, nurses are required to give patients the best care possible in compliance with established standards and to adhere to their professional codes of ethical conduct. Since independence, India's educational and nursing services have grown significantly. Patient care and comfort are a hospital's primary goals. Effective use of resources is only one aspect of nursing efficiency; other aspects include competent standard care in accordance with the nursing profession's code of ethics, good interpersonal relationships and communication, appropriate use of technology, and a sufficient nurse-patient ratio.

Aims & Objectives: To assess the role of nursing management in providing better patient care.

Methodology: A Cross sectional study was conducted among 140 nurses from various hospitals of Gujarat. A structured questionnaire was developed for quantitative data collection from the nursing Staff/In charge/Manager. The questionnaire included: Demographic details, Communication Gap, Record Management, Resources Distribution, Workload Management and Training & Development. Respondents were selected on the basis of convenience sampling.

Results: Out of total, among 51.8% cases lack of medical knowledge in patients, followed by in 20.6% cases lack of interest in their health leads to communication gap. Total 44% nurses had incomplete or missing patient information, 32.6% cases had difficulty in time consuming data entry and 13.5% cases had technical issues with EHR system. Among the study participants, 48.9% nursing staff believed that current workload was manageable by them.

Conclusion: Language and communication gaps are significant challenges in patient care, primarily due to patients' lack of medical knowledge and disinterest. Internal communication practices in hospitals are still largely informal, with occasional difficulties between nursing staff and consultants. Workload and overtime issues are common, though most nursing staff manage their responsibilities well with occasional instances of being overloaded. Resource management practices often rely on traditional request-based systems without predictive planning

Keywords: Hospital management, Nursing management, Patient care, Perception, Staff nurse....

1. INTRODUCTION:

"Nurses are the backbone of the health care system," wrote Gro Harlem Brundtland, Director General of the World Health Organization.^[1] In the healthcare system, nurses are required to give patients the best care possible in compliance with established standards and to adhere to their professional codes of ethical conduct. Since independence, India's educational and nursing services have grown significantly. However, it has been noted that there is a labor crisis in India as a result of underemployment and unemployment among nurses.^[2]

Patient care and comfort are a hospital's primary goals.^[3] The hospital's clearly established structure of authority attests to the fact that every lower site is overseen and managed by a higher one.^[4] Hospital administrators are essential to the smooth operation of the hospital; they guarantee patient care and the success of the entire facility.^[5] Since health care costs are a significant use of

resources and are now increasing quickly, even modest improvements in the health sector's efficiency can result in significant resource savings or the expansion of community services. For all governments, providing affordable healthcare is a major goal.^[6]

Effective use of resources is only one aspect of nursing efficiency; other aspects include competent standard care in accordance with the nursing profession's code of ethics, good interpersonal relationships and communication, appropriate use of technology, and a sufficient nurse-patient ratio. This degree of excellent nursing care results in effective nursing care and a shorter hospital stay for the patient, which lowers treatment costs for both the patient and the hospital.^[7]

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Development. Respondents were selected on the basis of convenience sampling.

Data entry and analysis: Data were entered into Microsoft excel sheet and analysed by using SPSS software. Percentage analysis, Cross tabulation analysis have been used for the analysis and interpretation.

Results:

Table 1. Causes for communication gap wise distribution

Cause	Percentage	Approx. Number of Responses
Lack of medical knowledge in patients	51.8%	73
Patient's lack of interest in their health	20.6%	29
The medical terms we use with patients	14.9%	21
Time spent with the patient	12.8%	18

Out of total, among 51.8% cases lack of medical knowledge in patients, followed by in 20.6% cases lack of interest in their health leads to communication gap. [Table 1]

Table 2: Difficulty faced in keeping record of patients's wise distribution

Difficulty Faced	Percentag e	Approx. Number of Responses
Incomplete or missing patient information	44%	62
Time-consuming data entry	32.6%	46
Technical issues with EHR	13.5%	19
Lack of training or knowledge of EHR system	9.9%	14

Total 44% nurses had incomplete or missing patient information, 32.6% cases had difficulty in time consuming data entry and 13.5% cases had technical issues with EHR system. [Table 2]

Table 3. Current workload wise distribution

Response Option	Percentage	Number of Responses (Approximate)
Manageable	48.9%	69
Heavy	21.3%	30
Overwhelming	6.4%	9

Depending on patient inflow and emergencies	23.4%	33
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Among the study participants, 48.9% nursing staff believed that current workload was manageable by them. [Table 3]

Table 4. Training and development programme occurrence wise distribution

Response Option	Percentage	Number of Responses
Regularly	40.4%	57
Occasionally	43.3%	61
Rarely	13.5%	19
Never	2.8%	4

In 40.4 % hospitals, regularly nursing staff had given training and development programme. [Table 4]

Table 5. Benefits from Training and development programme wise distribution

Response Option	Percentage	Number of Responses
Yes, very much	46.1%	65
Yes, to some extent	32.6%	46
Not really	14.2%	20
Haven't attended yet	7.1%	10

Of total, 46.1% nursing staff believed that training and developments programmes had very much benefits to them. [Table 5]

2. DISCUSSION:

The present study highlights communication gap as a major challenge in nursing management, with more than half of the respondents (51.8%) reporting patients 'lack of medical knowledge as the leading cause, followed by lack of interest in personal health (20.6%). Similar findings were reported by Patil in a hospital-based study from Maharashtra, where inadequate patient awareness and poor health literacy significantly contributed to ineffective nurse-patient communication. [8] Likewise, Kaur and Singh observed that communication barriers in tertiary care hospitals were largely driven by patients 'unfamiliarity with medical terminology and limited interaction time with nursing staff. [9] These similarities indicate that patient-related factors remain a persistent issue across different Indian healthcare settings, emphasizing the need for structured patient education initiatives.

In terms of record management, the current study found that 44% of nurses faced issues with incomplete or missing patient information, while 32.6% reported time-consuming data entry. These findings are consistent with the observations of Sharma et al., who reported documentation burden and incomplete records as common problems among nurses following partial implementation of electronic health record (EHR) systems in North India. [10] Similarly, Reddy et al. documented technical difficulties and lack of adequate training as major barriers to effective digital record maintenance in government hospitals. [11] The concurrence of findings suggests that despite increasing digitization, insufficient training and system inefficiencies continue to hinder optimal record management by nursing staff.

Regarding workload management, nearly half (48.9%) of the nurses in the present study perceived their workload as manageable, although a substantial proportion reported heavy or variable workload depending on patient inflow and emergencies. Comparable results were reported by George et al., who found that while most nurses were able to cope with routine duties, staff shortages and emergency admissions frequently resulted in work overload and stress. [12] This pattern reflects the uneven distribution of

nursing workload in Indian hospitals and underscores the importance of dynamic staffing models and supportive supervision.

Training and development emerged as a positive component of nursing management in the current study, with 40.4% of hospitals conducting regular programs and 46.1% of nurses perceiving these programs as highly beneficial. These findings are in agreement with Verma et al., who reported that continuous professional development programs significantly improved nurses' confidence, efficiency, and quality of patient care in tertiary care institutions.^[13] Similarly, Rao and Kumar emphasized that regular in-service training enhanced nurses' adaptability to technological advancements and improved inter professional communication.^[14] The consistency across studies reinforces the critical role of ongoing training in strengthening nursing performance and patient outcomes.

Overall, the findings of the present study are largely consistent with existing Indian literature, indicating that communication barriers, documentation challenges, and workload issues are common across healthcare institutions. At the same time, effective training and development programs stand out as a key facilitator of improved nursing management and patient care. These comparisons highlight the need for structured nursing management strategies tailored to Indian healthcare settings, focusing on patient education, streamlined

documentation systems, balanced workload distribution, and continuous professional development.

3. CONCLUSION:

Language and communication gaps are significant challenges in patient care, primarily due to patients' lack of medical knowledge and disinterest. Internal communication practices in hospitals are still largely informal, with occasional difficulties between nursing staff and consultants. Workload and overtime issues are common, though most nursing staff manage their responsibilities well with occasional instances of being overloaded. Resource management practices often rely on traditional request-based systems without predictive planning. Training and Development programs are widely appreciated and considered highly beneficial in improving both job performance and patient care outcomes. From these findings, it can be concluded that structured and proactive nursing management practices — including patient education initiatives, formal communication protocols, balanced workload distribution, systematic resource management, and continuous staff development — are essential for ensuring high-quality patient care in hospitals. Addressing these key areas through planned interventions and regular reviews will not only improve patient satisfaction but also enhance the professional efficiency, morale, and well-being of nursing staff

REFERENCES

1. Kirsten S. American nurses association convention speech: June 24, 2000, Indianapolis, Indiana, USA. *J Issues Nurs*. 2016;6:2.
2. Ministry of Health and Family Welfare. Nursing and Midwifery in India. 2016. [Last accessed on 2025 Dec 19]. Available from: <http://nursingandmidwifery.gov.in/auth/index.jsp#.W9NSWuKhUdU>.
3. Cartwright C. Characteristics of a Bureaucracy, Emergency Medical Paramedic Chris Cartwright.2010-2018. <http://www.emergencymedicalparamedic.com/characteristics-of-a-bureaucracy/>
4. Hospital Management, Hospital Administrator. Hospital Manager. Healthcare News and Insights. HealthcareBusinessTech.com. 2016
5. Peacock S, Chan C, Mangolini M, Johansen D. Techniques for Measuring Efficiency in Health Services, Staff Working Paper. Commonwealth of Australia; Productivity Commission. 2001
6. Patidar AB, Kaur J, Sharma SK, Sharma N. Future nurses' perception towards profession and career plans: A cross sectional survey in state Punjab. *Nurs Midwifery Res J*. 2011;7:175–85.
7. Khomami HM, Rustomfram N. Nursing efficiency in patient care: A comparative study in perception of staff nurse and hospital management in a trust hospital. *J Family Med Prim Care*. 2019 May;8(5):1550-1557. doi: 10.4103/jfmfp.jfmfp_37_19.
8. Patil SB, Naik VA, Mane RS. Nurse–patient communication barriers and their impact on patient care in tertiary hospitals of Maharashtra. *Indian J Public Health*. 2019;63(3):220–4.
9. Kaur J, Singh A. Communication challenges faced by nursing staff in tertiary care hospitals of North India. *Int J Nurs Educ*. 2020;12(2):45–9.
10. Sharma R, Gupta P, Mehta S. Documentation practices and challenges among nurses after implementation of electronic health records. *Nurs J India*. 2018;109(6):268–72.
11. Reddy S, Prakash B, Reddy K. Utilization of electronic health records and associated barriers among nursing staff in government hospitals. *Indian J Community Med*. 2021;46(4):678–82.
12. George M, Joseph B, Kumar AV. Workload, stress and job satisfaction among nurses in a tertiary care teaching hospital. *J Clin Diagn Res*. 2017;11(8):IC01–IC04.
13. Verma N, Sood A, Kaur R. Effect of in-service education on nursing performance and quality of patient care. *Int J Community Med Public Health*. 2020;7(5):1845–50.
14. Rao S, Kumar P. Impact of training and development programs on nursing efficiency in tertiary care hospitals. *Indian J Nurs Stud*. 2019;10(1):12–7.