

Assess the Effect of Structured Teaching Program on Knowledge Regarding Labor Care Guide Among Staff Nurses at a Selected Hospital, Perinthalmanna.

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Abstract— The present study was aimed to assess the effect of structured teaching program on labor care guide among staff nurses at a selected hospital Perinthalmanna, Kerala. The objectives of the study were to assess the knowledge regarding labor care guide among staff nurses, to find out the effect of structured teaching program on knowledge regarding labor care guide among staff nurses and to find out the association between the pretest knowledge levels regarding labor care guide with their selected demographic variables. A quasi-experimental research design was used to study 50 staff nurses from a selected hospital at Perinthalmanna, selected by purposive sampling technique. The data was collected by using structured knowledge questionnaire on labor care guide. Pretest was conducted and the same day itself planned teaching program given to the staff nurses regarding labor care guide and posttest was done after one week. The data collected was analyzed to achieve the objectives of the study and to test the research hypotheses.

The results revealed that in pretest most of the subjects had average knowledge (62%), 30 % had poor knowledge whereas only 8% had good knowledge regarding labor care guide where in the posttest 100% of them having good knowledge and none of them are having poor and average knowledge. The range, mean, median and standard deviation of pretest was 12, 8.92, 9.5 and 3.45 respectively. The range, mean, median and standard deviation of posttest was 5, 16.78, 17, and 1.36 respectively. Results showed that significant association was found between age and year of experience whereas no association between educational qualification and the level of knowledge scores. The calculated χ^2 value for age- 8.13 with p-value is 0.0044, year of experience- 14.966 with p-value is 0.0001 and for educational qualification -2.91 with p-value is 0.0877 at 0.05 level of significance.

The present study helped to identify the knowledge of staff nurses on labor care guide. The study shows that the structured teaching program is effective to improve in knowledge of labor care guide.

Keywords: Effect, Knowledge, Structured Teaching Program, Labor Care Guide

INTRODUCTION

The Labor Care Guide (LCG) is a clinical tool developed by the World Health Organization (WHO) as part of efforts to improve the quality of care during childbirth. It replaces the previously used Partograph and aims to provide a simpler, more practical approach to monitoring labor progression while promoting individualized, respectful maternity care.

NEED FOR THE STUDY

The LCG serves as a vital resource for healthcare workers in diverse settings, promoting safer deliveries and improving maternal and neonatal outcomes. Recent research has explored the implementation and impact of the World Health Organization's (WHO) Labor Care Guide (LCG) in various healthcare settings.

A study was conducted to examine the effect of the WHO LCG on primary cesarean delivery rates. The findings indicated that utilizing the LCG significantly reduced the number of primary cesarean deliveries without increasing perinatal complications or the duration of hospital stay. The study also noted a minimal learning curve for healthcare providers adopting the LCG.

A study was conducted to evaluate the LCG's usability, feasibility, and acceptability among maternity care practitioners in clinical settings. Mixed-methods evaluation with doctors, midwives, and nurses in 12 health facilities across Argentina, India, Kenya, Malawi, Nigeria, and Tanzania. Purposively sampled and trained practitioners applied the LCG in low-risk women during labor and rated experiences, satisfaction, and usability. Practitioners were invited to focus group discussions (FGDs) to share experiences and perceptions of the LCG, which were subjected to framework analysis. The study

results show that Practitioner satisfaction with the LCG was high and median usability score was 67.5%. Practitioners described the LCG as supporting precise and meticulous monitoring during labor, encouraging critical thinking in labor management, and improving the provision of woman-centered care.

The above research studies shows that the LCG is feasible and acceptable to use across different clinical settings and can promote woman-centered care. Implementing the LCG should be accompanied by the necessary initial and ongoing training, and supportive supervision, and strategies to promote an enabling environment for practitioners to use LCG efficiently.

So the researcher is interested to assess the knowledge of staff nurses regarding Labor Care Guide.

STATEMENT OF THE PROBLEM

A study to assess the effect of structured teaching program on knowledge regarding labor care guide among staff nurses at a selected hospital at Perinthalmanna.

OBJECTIVES OF THE STUDY

1. To assess the pretest knowledge regarding labor care guide among staff nurses
2. To find out the effect of structured teaching program on knowledge regarding labor care guide among staff nurses and
3. To find out the association between the pretest level of knowledge scores regarding labor care guide with their selected demographic variables.

HYPOTHESES

H1: There is significant difference between the mean pretest and posttest knowledge score of staff nurses regarding labor care guide

H2: There is a significant association between pretest knowledge scores of staff nurses with selected demographic variables.

SETTING OF THE STUDY

The study was conducted at KIMS Al Shifa Hospital, Perinthalmanna.

POPULATION

Population consists of staff nurses who are working at KIMS Al Shifa Hospital, Perinthalmanna.

SAMPLE

The samples consist of 50 staff nurses who are working at KIMS Al Shifa Hospital, Perinthalmanna.

SAMPLING TECHNIQUE

Purposive sampling technique

CRITERIA FOR THE SELECTION OF THE SAMPLES

Inclusion Criteria

- Staff nurses who are working at KIMS Al Shifa Hospital, Perinthalmanna
- Staff nurses who are available during the data collection period.

Exclusion Criteria

- Staff nurses who were not willing to participate in the study.

- Staff nurses at who had attended previous classes on labor care guide

Data collection instruments

The tools used for the study were,

Section A: Demographic Proforma.

Section B: A structured knowledge questionnaire to assess the Knowledge of Staff nurses regarding labor care guide

Data collection process

After getting permission from ethical committee, researcher taken consent from the subjects and collected data from the participants. Using the tool on the first day pre-test was conducted and on the same day itself structured teaching program was given. On the 7th day post-test was done.

RESULTS

Section A: Description of the Demographic Variable

Table 1: Frequency and Percentage Distribution of students on Demographic Variable

N=60

SI No	Demographic variables	Frequency	Percentage (%)
1	Age in years		
	a) 20-25 yrs	22	44
	b) 26-30 years	15	30
	c) More than 30 yrs	13	26

2	Qualification		
	a) Undergraduate	28	56
	b) Graduate	22	44
	c) Postgraduate	0	0
3	Year of experience		
	a) Less than 1 year	13	26
	b) 1-5 years	30	60
	c) More than 5 years	7	14

Most of the subjects (44%) were in the age group between 20-25 yrs

Most of the subjects (56%) were under graduates

Most of the subjects (60%) were between 1-5 years of experience

Table 2: Frequency and Percentage Distribution of Knowledge Scores of staff nurses regarding labor care guide

N=60

Section B: Knowledge of staff nurses regarding labor care guide

Level of Knowledge	Pretest		Post test	
	(n)	(%)	(n)	(%)
Good (14-20)	4	8	50	100
Average (7-13)	31	62	0	0
Poor (0-6)	15	30	0	0

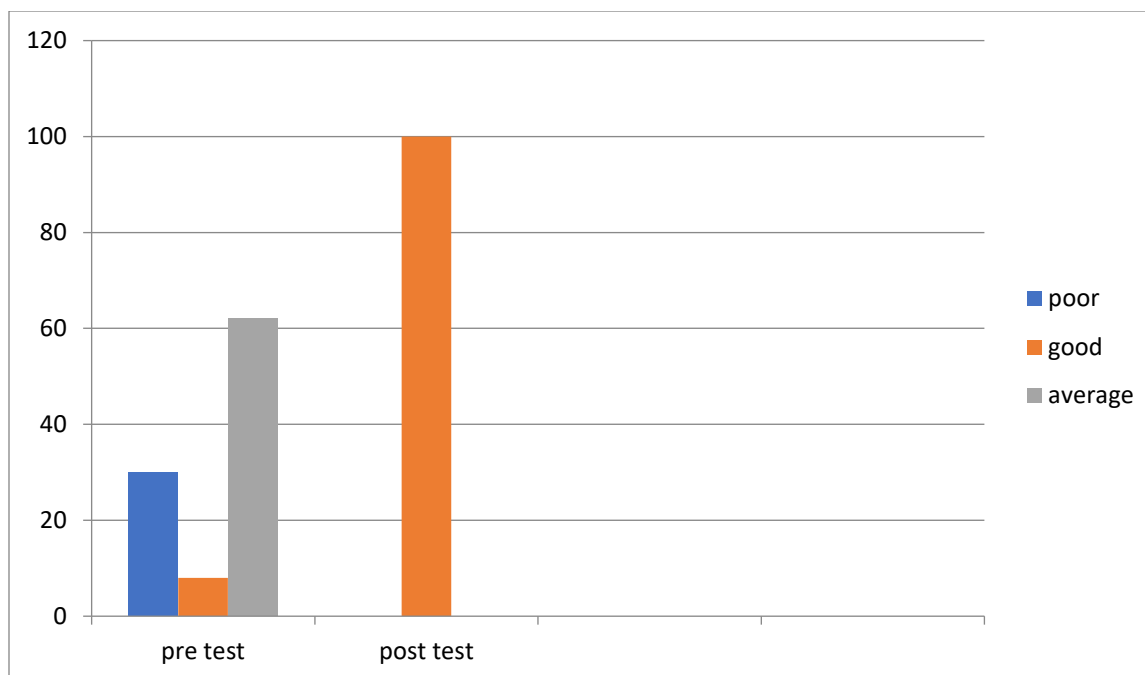


Figure 1: Bar Diagram showing the Percentage Distribution of Staff nurses according to their Pretest and Posttest Knowledge Scores

Data presented in the Table 2 and Figure 1 show that, in pretest most (62%) of staff nurses had average knowledge, 30% had poor knowledge whereas only few (8%) of them had good knowledge. Where as in

the post-test all the staff nurses (100%) had good knowledge.

Table 3: Mean, Standard Deviation, Paired ‘t’ test values of pretest and posttest level of knowledge regarding labor care guide.

N=60

Level of knowledge				Paired ‘t’ test		
Pretest		Posttest		t-value	p-value	Significance
Mean	Standard deviation	Mean	Standard deviation			
8.92	3.45	16.78	1.36	17.29	0.00001	Significant

Data in the Table 3 shows that the pre=test mean was 8.92 with a standard deviation 3.45 and post-test mean was 16.78 with a standard deviation 1.36. The calculated ‘t’ value is 17.29 which was statistically significant at $p < 0.05$.

Section C: Association of Knowledge Scores with selected Demographic Variables

Table 4: Chi-Square Test Showing Association of Level of Knowledge Scores with Selected Demographic Variables

Sl. No.	Demographic Variables	χ^2	Inference
1.	Age (in years)	8.13	Significant
2.	Year of experience	14.966	Significant
3.	Educational qualification	2.91	Not significant

The data in the Table 4 shows that, significant association was found between age, year of experience and the level of knowledge scores, whereas no significant association educational qualification. Hence the research hypothesis was accepted at 0.05 level of significance for age.

Discussion

A mixed-method research was conducted to evaluate the usability, feasibility, acceptability, and satisfaction of midwives using WHO LCG in rural practice. During February to April 2024, research data were gathered from three rural hospitals. Data were collected from 41 midwives in three rural hospitals. Midwives observed labor in 123 patients using LCG. According to the questionnaire, 49.6% of the midwives were satisfied with the use of LCG, 65% were satisfied with how LCG was designed, and 68.3% thought LCG was useful. According to the midwives' interviews, the LCG design was detailed; however, in its implementation, the midwives agreed that more time, information, and effective communication were needed to complete.

A study was conducted to explore opinions of skilled health personnel on the first version of the WHO Labour Care Guide. Skilled health personnel (including obstetricians, midwives and general practitioners) of any gender from Africa, Asia, Europe and Latin America were identified through a

large global research network. A total of 110 participants from 23 countries completed the survey. Participants agreed or strongly agreed with the overall design, structure of the LCG, and the usefulness of reference thresholds to trigger further assessment and actions. They also agreed that LCG could potentially have a positive impact on clinical decision-making and respectful maternity care.

The present study also revealed that health care professionals are lack knowledge regarding labor care guide. The above studies are supporting the present study that health care professionals should receive training and classes to improve their knowledge and practice.

Limitations

- * The study was limited only at one setting.
- * There is a small sample size will reduce the generalization of findings.

Conclusion

The study concluded that structured teaching program is effective in terms of improving knowledge of staff nurses regarding labor care guide

Recommendations

- * Future studies can be conducted to assess the both knowledge and practice on labor care guide

* In-service education can be given to the staff nurses to update their knowledge.

* The study can be conducted at different settings by using large sample size to improve the generalization of findings

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