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DEVELOPMENT AND VALIDATION OF A QUESTIONNAIRE FOR PATIENTS "STUDYING THE OPINION OF PATIENTS' SATISFACTION WITH NURSE INDEPENDENT APPOINTMENT AT THE LEVEL OF PRIMARY HEALTH CARE"

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Summary

Introduction. Since 2017, an independent professional nursing practice has been introduced in Kazakhstan, focusing on the best international experience, involving the implementation of independent nursing reception and delegation of a number of medical functions to them. [8-10]. In connection with the introduction of a new model of nursing service, there is a need to assess the quality of the activities of advanced practice nurses. Undoubtedly, patient satisfaction with medical care is one of the indicators of its quality. According to this, the assessment of patients' satisfaction with nurse independent appointment at the primary health care level is becoming increasingly relevant [14-16].

Aim. Develop, test and evaluate the reliability of a questionnaire aimed at studying the opinion of patients' satisfaction with nurse independent appointment at the primary health care level.

Materials and methods. The questionnaire was developed on the basis of a systematic review of the literature in the databases of medical publications. Validation of the questionnaire included several stages: development, translation and linguistic adaptation, examination, pilot testing, correction and formation of the final version. The determination of the reliability of the questionnaire was based on an assessment of internal consistency, which was calculated based on the calculation of the Cronbach's alpha coefficient.

Results. Summing up the results of all the stages of linguistic adaptation of the questionnaire, there were no special differences in the translated versions of the questionnaire.

Minor adjustments were made to the wording of the questions and their answers for easy understanding of the questions. 50 patients participated in the pilot survey. Internal consistency was calculated and established using the Cronbach's alpha coefficient for each area of study, except for demographic indicators. The value of the Cronbach's alpha reliability criterion for the questionnaire questions was at least 0.7.

Conclusions. The developed and tested new original questionnaire (modified version) "Studying the opinion of patients' satisfaction with nurse independent appointment at the primary health care level" demonstrated sufficient indicators of reliability and internal consistency. This ensures the reliability and convenience of its use for assessing the opinion of patients' satisfaction with nurse independent appointment and allows us to recommend its use in scientific nursing research and in clinical practice.

Keywords: questionnaire, validation, patient, advanced practice nurse.

Резюме

РАЗРАБОТКА И ВАЛИДИЗАЦИЯ АНКЕТЫ ДЛЯ ПАЦИЕНТОВ «ИЗУЧЕНИЕ МНЕНИЯ УДОВЛЕТВОРЕННОСТИ ПАЦИЕНТОВ САМОСТОЯТЕЛЬНЫМ СЕСТРИНСКИМ ПРИЕМОМ НА УРОВНЕ ПЕРВИЧНОЙ МЕДИКО-САНИТАРНОЙ ПОМОЩИ»

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Введение. С 2017 года в Казахстане, ориентируясь на наилучший международный опыт, внедряется независимая профессиональная сестринская практика, предполагающая осуществление самостоятельного сестринского приема и делегирования им ряда врачебного функционала. [8-10]. В связи с внедрением новой модели сестринской службы возникает потребность в оценке качества деятельности медицинских сестер расширенной практики. Несомненно, удовлетворенность пациентов медицинской помощью является одним из показателей её качества. Согласно этому становится всё более актуальной оценка удовлетворённости пациентов самостоятельным сестринским приемом на уровне первичной медико-санитарной помощи [14-16].

Цель исследования. Разработать, апробировать и оценить надежность анкеты, направленной на изучение мнения удовлетворенности пациентов самостоятельным сестринским приемом на уровне первичной медико-санитарной помощи.

Материалы и методы исследования. Анкета разработана на основе проведенного систематического обзора литературы в базах данных медицинских публикаций. Валидация анкеты включала в себя несколько этапов: разработка, перевод и лингвистическая адаптация, экспертизу, пилотное тестирование, корректировка и формирование окончательной версии. Определение надежности анкеты основывалась на оценке внутренней согласованности, которая рассчитывалась на основе вычисления коэффициента α Кронбаха.

Результаты. Подведя итоги проведения всех этапов лингвистической адаптации опросника особенных отличий в переводных версиях анкеты не было замечено.

Небольшие корректировки были внесены в формулировки вопросов и их ответов для легкого понимания вопросов. В пилотном анкетировании приняли участие 50 пациентов. Внутренняя согласованность была рассчитана и установлена с помощью коэффициента α Кронбаха для каждой области изучения, кроме демографических показателей. Значение критерия надежности α Кронбаха для вопросов анкеты составило не менее 0,7.

Выводы. Разработанная и апробированная новая оригинальная анкета (модифицированная версия) «Изучение мнения удовлетворенности пациентов самостоятельным сестринским приемом на уровне первичной медико-санитарной помощи» продемонстрировал достаточные показатели надежности и внутренней согласованности. Это обеспечивает надежность и удобство его применения для оценки мнения удовлетворенности пациентов самостоятельным сестринским приемом и позволяет рекомендовать его использование в научных сестринских исследованиях и в клинической практике.

Ключевые слова: анкета, валидация, пациент, медицинская сестра расширенной практики.

Түйіндеме

«МЕДИЦИНАЛЫҚ-САНИТАРЛЫҚ АЛҒАШҚЫ КӨМЕК ДЕҢГЕЙІНДЕ ӨЗ БЕТІМЕН МЕЙІРГЕРЛІК ҚАБЫЛДАУ ЖҮРГІЗУІНЕ НАУҚАСТАРДЫҢ ҚАНАҒАТТАНУШЫЛЫҚ ПІКІРІН ЗЕРТТЕУ» АТТЫ НАУҚАСТАРҒА АРНАЛҒАН САУАЛНАМАНЫ ӨЗІРЛЕУ ЖӘНЕ ВАЛИДАЦИЯЛАУ

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Өзектілігі. 2017 жылдан бастап Қазақстанда ең үздік халықаралық тәжірибеге бағдарлана отырып, дербес мейіргерлік қабылдауды және оларға бірқатар дәрігерлік функционалдылықты беруді жүзеге асыруды көздейтін тәуелсіз кәсіптік мейіргерлік тәжірибе енгізілуде [8-10]. Мейіргерлік қызметтің жаңа моделін енгізуге байланысты кеңейтілген мейіргерлер қызметінің сапасын бағалау қажеттілігі туындайды. Науқастардың медициналық көмекке қанағаттануы оның сапасының көрсеткіштерінің бірі екені сөзсіз. Осыған сәйкес, науқастардың медициналық-санитарлық алғашқы көмек деңгейінде дербес мейіргерлік қабылдауға қанағаттануын бағалау барған сайын өзекті бола түсуде [14-16].

Мақсаты: Медициналық-санитарлық алғашқы көмек деңгейінде науқастардың өз бетімен мейіргерлік қабылдауға қанағаттану пікірін зерттеуге бағытталған сауалнаманың сенімділігін әзірлеу, сынақтан өткізу және бағалау.

Материалдар мен әдістері: Сауалнама медициналық басылымдардың дерекқорларындағы әдебиеттерге жүйелі шолу негізінде жасалды. Сауалнаманы тексеру бірнеше кезеңнен тұрды: әзірлеу, аудару және лингвистикалық бейімделу, сараптама, пилоттық тестілеу, түзету және соңғы нұсқаны қалыптастыру. Сауалнаманың сенімділігін анықтау Кронбахтың α коэффициентін есептеу негізінде есептелген ішкі консистенцияны бағалауға негізделген.

Нәтижелері: Сауалнаманың лингвистикалық бейімделуінің барлық кезеңдерін қорытындылай келе, сауалнаманың аударылған нұсқаларында ерекше айырмашылықтар байқалмады. Сұрақтарды оңай түсіну үшін сұрақтар мен олардың жауаптарының тұжырымдамаларына шағын түзетулер енгізілді. Пилоттық сауалнамаға 50 науқас қатысты. Ішкі консистенция демографиялық көрсеткіштерден басқа әрбір зерттеу саласы үшін Кронбахтың α коэффициентімен есептелді және орнатылды. Сауалнама сұрақтары үшін Кронбахтың α сенімділік критерийінің мәні кемінде 0,7 болды.

Қорытынды. «Медициналық-санитарлық алғашқы көмек деңгейінде науқастардың өз бетімен мейіргерлік қабылдауға қанағаттану пікірін зерттеу» атты әзірленген және сыналған жаңа түпнұсқа сауалнамасы (модификацияланған нұсқа) сенімділік пен ішкі үйлесімділіктің жеткілікті көрсеткіштерін көрсетті. Бұл науқастардың өз бетімен мейіргерлер қабылдауына қанағаттану пікірін бағалау үшін оны қолданудың сенімділігі мен ыңғайлылығын қамтамасыз етіп, ғылыми мейіргерлік зерттеулерде және клиникалық тәжірибеде қолдануды ұсынуға мүмкіндік береді.

Түйін сөздер: сауалнама, валидация, науқас, кеңейтілген практика мейіргері.

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Introduction

The Ministry of Health of the Republic of Kazakhstan has identified the reform of nursing as one of the strategic goals for the future. The main goal was to identify the need for highly qualified nursing staff with internationally recognized competencies [7,4,6]. Modern theories of nursing, based on a scientific approach and scientifically based experience, represent a nurse as an equal partner of a doctor who makes independent decisions on care, plans and carries out nursing care based on the evidence set out in the nursing documentation. Currently, the partnership between a doctor and a nurse is that a doctor provides medical care to a patient, and a nurse provides nursing care at all levels of the healthcare system, working as part of a multidisciplinary group of medical professionals to improve the efficiency and quality of medical care [14,20,18,16,1]. Since 2017, an independent professional nursing practice

has been introduced in Kazakhstan, focusing on the best international experience, involving the implementation of nurse independent appointment and delegation of a number of medical functions to them. [13,19,5,8]. As a result, the functionality of nurses has expanded, namely, the implementation of individual admission, dynamic observation, counseling, training and patronage within the framework of the disease management program and the universally progressive model of the patronage service, the implementation of health promotion and disease prevention activities, screenings, vaccinations and a number of diagnostic and therapeutic manipulations [10]. The new generation of nurses should allow to increase the prestige of the profession, reducing the boundaries between the average medical staff and doctors. Delegating some of the doctor's powers to nurses will make it possible to use medical personnel more effectively [9]. In connection with

the introduction of a new model of nursing service, there is a need to assess the quality of the activities of advanced practice nurses. Undoubtedly, patient satisfaction with medical care is one of the indicators of its quality. In the context of the introduction of a patient-oriented model of medical care, the opinions of patients can serve as a guide for improving this model. In this regard, the assessment of patients' satisfaction with nurse independent appointment at the primary health care level is becoming increasingly relevant [2,3,15].

The aim of the study to develop, test and evaluate the reliability of a questionnaire aimed at studying the opinion of patients' satisfaction with nurse independent appointment at the primary health care level.

Materials and methods:

Research design: cross-sectional studies. Quantitative (survey), statistical and analytical research methods were used. The materials were developed questionnaires for patients.

Stage 1. Questionnaire development

Based on a systematic review of the literature in the databases of medical publications, we have developed a questionnaire that consists of 22 questions with suggested answers, in the structure of which two blocks can be distinguished. The first block is the passport part that provides information about the respondent. The second block contains questions that determine patients' satisfaction with the quality of medical services provided at an independent nursing appointment, questions of patients' awareness of nursing admission, as well as their opinion on the role of advanced practice nurses in primary health care organizations. The formulation of the questions was based on the comprehensibility and accessibility of the respondents' perception with the exception of the use of specific medical terminology and abbreviations.

The translation process and linguistic adaptation of the questionnaire consisted of a number of successive stages. The first stage was represented by the translation of the original version of the questionnaire by a professional translator into Kazakh, who has experience in translating medical documentation. To determine the accuracy of the questionnaire translation, at the second stage, the questionnaire was translated back into Russian, and then notarized. The Kazakh version of the questionnaire translation was reviewed by an internal and external reviewer and then the questionnaire was reviewed and approved at a meeting of the terminological expert group of the NON-COMMERCIAL JOINT STOCK COMPANY "West Kazakhstan Marat Ospanov medical university" (Protocol No. 32 of May 05, 2023).

Stage 2. Pilot testing

At this stage of our study, a survey was conducted of patients who were at an independent nursing appointment, who gave their consent, in the city polyclinic No. 3 in Aktobe. The minimum sample size was at least 50 respondents, taking into account 80% of the power and 95% of the confidence interval [12]. An informed consent of the respondent was attached to each questionnaire indicating the purpose, objectives, materials, methods and procedures of the questionnaire, the benefits of the respondent's participation, anonymity and voluntary

participation, as well as contacts of researchers for consulting support and familiarization with the results of the study. The survey was conducted anonymously, manually on paper. The task of this stage was to assess the understanding of the questionnaire questions, identify translation shortcomings, correct and formulate questions. According to the results of the survey, the translation errors were eliminated and the necessary corrections were made to the wording of the questionnaire questions. Descriptive statistics were used to analyze demographic data, as well as for individual elements of questionnaires. Statistical analysis was carried out using IBM SPSS Statistics 25 and STATISTICA 10.0 software packages. The reliability of the questionnaire was determined based on an assessment of internal consistency, which was calculated based on the calculation of the Cronbach's Alpha coefficient. The Cronbach's Alpha index is considered acceptable at a value above 0.7, which corresponds to a good level of internal constancy. [11,17]. This study was approved by the Bioethics Committee of the NON-COMMERCIAL JOINT STOCK COMPANY "West Kazakhstan Marat Ospanov medical university" (Protocol No. 3 of March 14, 2023).

Results

Summing up the results of all the stages of linguistic adaptation of the questionnaire, there were no special differences in the translated versions of the questionnaire.

50 patients participated in the pilot survey. The demographic characteristics of the respondents were studied: the average age of the respondents was 52 years, ranged from 24 to 72 years. 62% of the patients were female and 38% male. The prevailing number of respondents had a secondary education and were married.

Minor adjustments were made to the wording of the questions and their answers for easy understanding of the questions. Questions were added about whether patients know about the "nurse independent appointment" and from what sources they learned about the existence of a nurse appointment, as well as about the need for nurse independent appointment in polyclinics. Some questions were excluded because they were not relevant and did not correspond to the topic of the study, such as "Were you able to choose a nurse of your own choice", "Did you have problems in the process of self-registration with a nurse".

Internal consistency was calculated and established using the Cronbach's Alpha coefficient for each area of study, except for demographic indicators. The value of the Cronbach's Alpha reliability criterion for the questionnaire questions was at least 0.7. (Table 1).

Discussion The original version of the questionnaire consists of 22 questions and includes a passport part of 5 questions (gender, age, education, marital status, social status), 17 questions including such aspects as: awareness of nurse independent appointment, organizational issues, the need for nurse appointment and opinions on satisfaction with nurse independent appointment.

The researchers received a certificate of entering information into the state register of rights to objects protected by copyright of the questionnaires "Studying the opinion of patients' satisfaction with nurse independent appointment at the primary health care level" No. 31620 dated January 6, 2023.

Table 1.

Results of calculating the value of the Cronbach's alpha.

Variables	The result for the scale: Mean=30,2000 St.D.=6,78233 N:50 (to check Alpha) Cronbach's Alpha: ,777370 Standardized. alpha: ,838271 The average inter-position. correlation: - ,251336				
	Mean when deleted	Dispersive when removed	Standard deviation during deletion	General positional correlation	Alpha when deleted
6. Knowledge about Independent practice nurse (1.yes; 2.no)	28,84000	41,01440	6,404249	0,623805	0,758054
7. From whom did you learn about it (1. from a doctor; 2. from a nurse; 3. from relatives, friends; 4.call-center; 5. from registry specialists)	27,60000	35,32000	5,943063	0,441454	0,764852
8. Frequency of visits (1. regularly; 2.rarely; 3. extremely rarely)	28,48000	42,32960	6,506120	0,224461	0,776174
9. The purpose of the appeal (1.preventive examination; 2.screening; 3. obtaining preferential medicines (prescriptions); 4. Dynamic observation (D-accounting); 5. obtaining a certificate; 6.others)	27,48000	41,24960	6,422585	0,121346	0,799613
10. How you signed up for a nurse (1.live queue; 2. by phone call from a nurse; 3. through the Damumed/Egov app)	28,24000	40,46240	6,361006	0,408402	0,763524
11. Waiting time (1.no more than 5-10 minutes; 2. from 10-30 minutes; 3. more than 1 hour)	29,02000	41,57960	6,448225	0,484580	0,763273
12. Well-being after a nursing appointment (1. improved; 2. did not change; 3. worsened)	28,82000	42,34760	6,507504	0,359572	0,769064
13. Is a nursing appointment in a polyclinic necessary (1.necessary; 2. not necessary)	29,18000	44,34760	6,659400	0,382274	0,776515
14. Does the nurse monitor the dynamics of treatment (1.yes; 2.no)	29,08000	42,15360	6,492580	0,668487	0,763351
15. If Yes, how (1. repeatedly invites to the reception; 2.actively visits at home; 3. finds out about the state of health by phone)	28,66000	38,54440	6,208414	0,529860	0,752928
16. Satisfaction with the work of the JV nurse (1.yes; 2.not really; 3.no)	28,92000	39,83360	6,311387	0,543935	0,755521
17. If not, note the reason (1. excessive haste in work; 2.insufficient attention to patients; 3.tactless treatment of patients; 4. can not win over the patient; 5.not enough knowledge)	26,76000	35,42240	5,951672	0,573579	0,745364
18. Clarity of the nurse's recommendation (1. yes; 2. not really; 3.no; 4. did not give recommendations)	28,74000	40,51240	6,364935	0,269996	0,775805
19. Inspection and evaluation (1.yes; 2.no)	28,96000	42,35840	6,508333	0,456757	0,766783
20. If Yes, do you ask enough questions (1. enough; 2.not quite enough; 3. not enough; 4. does not ask questions)	28,36000	34,79040	5,898339	0,559743	0,747078
21. Evaluate the nurse's work (1-minimum satisfaction; 5-maximum)	25,86000	41,08040	6,409400	0,319198	0,769877

Conclusion.

Thus, the developed and tested new original questionnaire (modified version) "Studying the opinion of patients' satisfaction with nurse independent appointment at the primary health care level" undoubtedly shows the relevance and practical significance, as well as sufficient

indicators of reliability and internal consistency. This ensures the reliability and convenience of its application for assessing the opinion of patients' satisfaction with nurse independent appointment at the primary health care level and allows us to recommend its use in scientific nursing research and in clinical practice.

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