

Challenges and Opportunities for Nurse Managers Working in Nepal's Level II and III COVID Hospitals

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ABSTRACT

Introduction: Following the COVID-19 outbreak, nurse managers encountered many challenges in carrying out their management duties. There were difficulties with determination and decision-making but there is yet opportunity for improvement. However, there were few studies done in this field; as a result, researchers selected this subject to find out the level of management Awareness (AWE) Challenges (CHA), and Opportunities (OPA) faced by nurse managers as a result of COVID-19, followed by an analysis of the relationship of socio-demographic characteristics such as age, marital status, experiences, and training on awareness (AWE) of the COVID-19 pandemic management.

Methods: Researchers utilized a cross-sectional method and a quantitative approach in this investigation. Purposive sampling approaches were used along with self-administered questionnaires to get the data. Ninety-three nurse managers from different government hospitals in Nepal participated in this study. The validity and reliability of the instrument were examined. Both descriptive statistics and inferential statistics, such as regression analysis, were employed.

Results: The finding revealed that; a maximum number of nurse managers have an average level of COVID-19 pandemic management awareness (39%), challenges faced after the COVID-19 pandemic (36%), and opportunities related to the COVID-19 pandemic (35%), respectively. However, years of work experience and training have shown a positive relationship to enhance awareness.

Conclusion: The nurse managers experienced challenges and had average levels of awareness. However, they also noticed a chance in the learning opportunity. This lesson will teach managers to be ready for upcoming emergencies. Therefore, a study has shown that experienced managers and training could be useful to improve leadership in the healthcare sector.

Keywords: Awareness, Challenges, Opportunities, Nurse Manager, Hospital

ARTICLE INFORMATION

Source of Support: No external support	Conflict of Interest: None
Received: 14 August 2022	Accepted: 28 December 2022
	Published Online: 30 December 2022

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INTRODUCTION

In 2022, the WHO suggested that nurses will make up an account for almost 50% of the workforce in the global health sector and be crucial in hospitals' efforts to promote wellness, treat illness, and provide nursing care.¹ To enjoy working under tough circumstances, the enormous nurse workforce has to be inspired, empowered, and engaged. A study found that workplace empowerment had positive outcomes, such as less job stress and increased motivation.² Therefore, managers

should have a constructive role.³ Essential in the hospital,^{4, 5} where nursing personnel make up the majority of health workforces,^{6, 7} as well as frontline service providers, with nurses occupying all hospital beds with increasing overloaded services and manpower shortages, as well as a scarcity of medical personnel, equipment, and drugs, the situation is tough,⁸ and nurses managers are playing a significant role in managing the outbreak of COVID-19. The answer's

perspective and knowledge of the work environment by a nurse manager are referred to as COVID-19 management awareness. During a pandemic, knowing more about COVID-19 management gives an opportunity to understand and better diffuse difficulties. Managers can provide efficient services.⁹The COVID-19 pandemic has sparked an international crisis,¹⁰ in areas such as human well-being.¹¹

A variety of preventive measures have been implemented, including self-isolation, quarantine, isolation from public gatherings, and closing border crossings between nations, school, and university closures to reduce exposure. The nurse manager, on the other hand, was playing a significant role in the management situation.^{12, 13} Different types of COVID-19 management awareness, skill-based training, and effective leadership intervention packages,¹⁴ were provided to them, all of which helped to raise the standard of living and the standard of health care. On the other hand, nurses were a large workforce and the front line for providing services, so there was a greater focus and resources used to empower the nursing, nurse manager workforce. In this regard, nursing managers were a core group, and they were all focused on upgrading their junior nursing workforce to provide different COVID-19 pandemic awareness and care.¹⁵ Numerous socio-demographic factors, including experienced staff,¹⁶ and trainees,¹⁷ The nursing profession is one of the most crucial professions that will respond promptly while prioritizing service to patients in times of challenges, emergencies, or problems in the healthcare business. Improving nursing responses in disaster situations and fostering teamwork, communication, and the delivery of high-quality services would be possible by reducing the challenges that managers have when providing care to patients with COVID-19. Numerous studies have been conducted in Nepal on the importance of understanding different viewpoints. There is less research done regarding it. However, the challenges, opportunities, and numerous aspects that influence comprehension and awareness of COVID-19 management. The researcher made the decision to look into this matter more thoroughly as a result. The current study focuses to indent the level of awareness, challenges, and opportunities about covid-19 pandemic management, and its relationship with socio-demographic variables of age, marital status, years of work experience, and training. The main objective of this study was to investigate the level of COVID-19 pandemic management challenges, opportunities, and awareness/knowledge, as well as the effect of socio-demographic factors such as age, marital status, years of work experience, and training.

METHODOLOGY

The study sites were selected from level II and III COVID hospitals set up by the Nepalese government in various regions since these hospitals are dedicated to the treatment of moderate to severe cases as well as specialized services where nurses

deal with verified and suspected COVID-19 cases. The following hospitals: Seti Zonal Hospital, Nepalgunj Medical College, Kathmandu's Sukraraj Tropical and Infectious Disease Hospital, Narayani Sub-Regional Birgunj, Janakpur Hospital, Koshi Zonal hospital were chosen for this study. The study had a quantitative basis and a cross-sectional study design. Researchers employed a purposive sampling technique for this study. Total of 93 nurses participated in this descriptive study.

The instruments of study

The first section included socio-demographic characteristics such as; age, marital status, experiences, and training. Researchers developed the second section, which had an awareness component. This was done on a five-point scale, with 1 meaning "strongly disagree" and 5 meaning "strongly agree." The awareness (AWE) Cronbach's alpha had 11 total items on 0.82. The study's items were recognized as valid because Cronbach's alpha scores were greater than 0.70.¹⁸ The challenges (CHA) third section's 19 items are assessed on a Likert scale of 1 to 5, with 1 denoting strongly disagree and 5 denoting strongly agree. Cronbach's alpha was (CHA) =.877 for the challenges. The study's items were considered acceptable for the study since Cronbach's alpha value was above the minimum threshold of 0.70¹⁸

Opportunities (OPA) fourth section of this study, which resulted in 10 items with usage values ranging from 1 to 5, with 1 denoting strongly disagreeing and 5 denoting highly agreeing. The Cronbach alpha, OPA, was at.742. This result updates the value above Cronbach's alpha of 0.70. It recommended a reliable instrument for this research.¹⁸

The Content Validity Index (CVI) of the questionnaire's content was assessed by three professionals in the related field. To check the boxes that correspond to the study questions, follow the instructions. "Not relevant,"(1), "Somewhat (2), relevant,"(3)," and "Very relevant,"(4).The CVI for each question was then determined using the findings of this assessment by dividing the total number of expressed opinions. A percentage was then calculated by multiplying the number by 100, and above 70% of the content validity index (CVI) is considered to be within reasonable parameters for questions (items).In this study, the researchers found that the CVI index was 90%, therefore, the content validity generated was effective in this investigation.^{19, 20}

The Statistical Package for Social Science (SPSS) statistical program, version 20.0, was used for statistical analysis. Descriptive statistics were used to determine the frequency and percentage, while inferential statistics, such as regression analysis, were used to examine the effect.

Ethical Consideration: Formal ethical approval letter obtained from the Nepal Health Research Council (NHRC). Ethical consideration is maintained by obtaining data with the informed consent of the participants.

RESULTS

The main aim of this study is to examine the level of challenges, opportunity, and awareness /knowledge about

COVID-19 pandemic management as well as to examine the effect of socio-demographic variables such as age, marital status, and years of work experiences, and training with knowledge/awareness of COVID-19. To obtain the main aim, researchers first examine the reliability test and found all items (instruments) reliable. All instruments (awareness, challenges, and opportunity) are found above.70. It shows that it is a positive value and is suggested for the data analysis. In addition, to obtain findings, researchers administered

descriptive analysis to examine the percentage, and frequency of collected data, and the regression model was utilized to examine the relationship between two dependent and independent variables. The majority (70%) of participants in this survey had not completed COVID-19 pandemic nurse management training, and 41% of them were between the ages of 30 and 40. The majority (80%) of married participants, and 40% of respondents had between 11 and 20 years of work experience.

Table 1: Challenges Faced after COVID19 Pandemic

Statements (Challenges)	Never (%)	Rarely (%)	Sometimes (%)	Often (%)	Always (%)
1.Increased workload (more hours, and responsibilities)	1.1	2	8.9	36	52
2.Difficult to manage shift	4.3	12.9	37.6	36.6	8.6
3.lack PPE and other equipment's	3.2	4.3	40.9	36.6	15.1
4.Fear of contracting COVID-19 infection	1.1	5.4	16.1	22.6	54.8
5.Trouble in dealing	0.0	3.2	37.6	36.6	22.6
6.Lack of appreciation	1.1	6.5	18.3	41.9	32.3
7. Poor Working atmosphere	4.3	9.7	28.0	23.7	34.4
8.Protocol/guidelines	14.1	22.8	22.8	22.8	17.4
9.Lack of preparation and training	6.5	16.3	29.3	35.9	12.0
10.Coordinate with Multidisciplinary team	19.8	37.4	25.3	12.1	5.5
11.Motivation	7.6	8.7	44.6	29.3	9.8
12.Inability to make subordinate to do work	9.9	18.7	54.9	9.9	6.6
13.Communication Problems	13.0	21.7	47.8	12.0	5.4
14.Instability in family life	8.8	11.0	34.1	24.2	22.0
15.Lacks in knowledge and skill	17.4	31.5	21.7	17.4	12.0
16.Health problems	4.3	20.4	30.1	29.0	16.1
17.Coworkers health problems	5.4	19.4	41.9	19.4	14.0
18.Stigma	33.3	16.1	28.0	15.1	7.5
19.Taking care of children	23.3	3.3	13.3	28.9	31.1

The Table 1 illustrates the descriptive data analysis of the challenges encountered during the COVID-19 outbreak mostly indicated that; fifty-two percent of respondents primarily cited (always) increased workload (more time, and responsibilities),thirty-seven point six percent of nurse managers reported (sometimes) difficulty managing staff, forty percent of managers reported (sometimes) being unable to manage personal protective equipment (PPE),fifty-four point eight percent scored (always) fear of COVID-19 infection, thirty-seven point six reported (sometimes)trouble in dealing with situations, forty-one point nine percent scored(often) lack of appreciation, thirty-four point four percent reported (always) a poor work atmosphere, twenty-two point eight percent scored (both often, and sometimes) lack of guidelines, thirty-five point nine percent reported (often) lack of preparation, and training, thirty-seven point four percent reported (rarely) have coordination with multidisciplinary team, forty-four point six percent reported

(sometimes) lack of motivation, however, fifty-four point nine percent managers reported(sometimes) unable to make subordinate to do work, forty-seven point eight percent managers reported (sometimes)had communication problems, thirty-four points one percent managers reported(sometimes) inability to balance work and family life, thirty-one point five percent managers reported (really less opportunity to update skills and knowledge thirty-point one percent reported (sometimes) deal with health problems, forty one point nine percent reported (sometimes)face co-workers health problem, thirty-three point three percent manager reported(never) deal with stigma, and thirty-one point one percent of respondents report (always) problem of taking care of children.

The Table 2 demonstrates opportunity in relation to the COVID-19 pandemic was investigated using descriptive analysis by the researchers. There are opportunities for nurses as a result of the COVID-19 pandemic. The findings revealed

that; 41.9% revealed (often) about the increase in professional recognition, 38.7 % of managers reported (often) about incentive opportunities, 58.1% often reported regarding the opportunity to develop strategies to overcome crises, 25.8% reported (rarely) about the opportunity to participate in different training, 34.4 % reported (often) the opportunity to get additional wellbeing support from an organization, and

60% reported (often) regarding cooperation from friends, family, and others, 50.5% reported (often) about the opportunity to increase professional skills, 53.8% scored (often) regarding an opportunity to learn management skills, 44.1% reported (often) about positives support, and cooperation from the public, and 41.9 % reported (often) about additional developing skills and learning opportunity.

Table2: Opportunities related to COVID19 Pandemic

Statements (Opportunities)	Never (%)	Rarely (%)	Sometimes (%)	Often (%)	Always (%)
1. Professional recognition	2.2	5.4	11.8	41.9	38.7
2. Incentives	25.8	11.8	7.5	38.7	16.1
3. Strategies to overcome	5.4	4.3	12.9	58.1	19.4
4. Different training	24.7	25.8	19.4	23.7	6.5
5. Additional wellbeing support	12.9	14.0	32.3	34.4	6.5
6. Cooperation	0.00	2.2	14.0	60.2	23.7
7. Professional skills	7.5	5.4	12.9	50.5	23.7
8. Management skills	5.4	9.7	17.2	53.8	14.0
9. Public cooperation	5.4	16.1	28.0	44.1	6.5
10. Additional skills development opportunity	8.6	14.0	26.9	41.9	8.6

Descriptive analysis showed the maximum numbers of respondents have an average levels of COVID-19 pandemic management awareness (39%), challenges faced after the COVID-19 pandemic (36%), and opportunities related to the COVID-19 pandemic (35%), respectively. (Table 3)

According to Table 4, the direction of the linear relationship between "x" and "y" is shown by the sign of the linear correlation coefficient. The linear link is strong when r (the correlation coefficient) is close to 1 or -1; it is weak when r is close to 0. According to the results of the regression analysis model, the age coefficient beta is -.143. It was discovered that there is no connection between age and

COVID-19 management awareness. The major indication for improving COVID-19 knowledge is not advised to be age. Factoring discovered a negative relationship between marital status and COVID-19 management knowledge/awareness. Observations, however, showed a good relationship between COVID-19 management and its years of work experience, and a Additionally, the study found that beta years of experience are .035. The results confirmed the next variable's claim that training is a useful strategy for raising COVID-19 management awareness. The finding showed that the beta of training is .103, which revealed that there is a positive relationship between the two variables.

Table 3: Level of COVID-19 Pandemic management Awareness, Challenges, and Opportunity

AWE	Frequency	%	CHA	Frequency	%	OPA	Frequency	%
Low	31	33	Low	29	31	Low	30	32
Average	36	39	Average	33	36	Average	32	35
High	26	28	High	31	33	High	31	33

Table 4: COVID-19 management Awareness (summary model of Coefficient)

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	4.678	.440		10.632	.000
	Marital	-.304	.177	-.202	-1.713	.090
	Year of experience	.021	.084	.035	.244	.808
	Age	-.101	.102	-.143	-.982	.329
	Training	.124	.127	.103	.980	.330

a. Dependent Variable: Mean Awareness

DISCUSSION

This study's major goals are to examine the level of management awareness, opportunities, and challenges, about that COVID-19 management, as well as to examine the relationship between selected socio-variables such as age, marital status, training, and years of work experience, and COVID-19 management awareness. To accomplish the goal of the study, researchers employed descriptive analysis and inferential statistics, such as regression analysis, to examine the relationship between two variables. Ages, marital status, years of experience, and training are independent variables that were examined in relation to COVID-19 management awareness, as a dependent variable. A utilization descriptive study showed that the majority of nursing managers have an average level of awareness of managing the COVID-19 pandemic. However, this study reflects the fact that; nursing management services would not be up to the standard of nursing services without adequate knowledge of the COVID-19 pandemic. Previous studies have also demonstrated that nurse managers have a medium level of expertise in COVID-19 management^{21, 22} However, the majority of nursing managers have an average level of challenges faced after the COVID-19 pandemic, such as increased workload, finding it difficult to make shift duty, also facing a shortage of personal protective equipment,²³ and essential medicine and equipment, also having problems coping with the environment, and less time for children. The previous empirical study also showed that; the highest percentage of nurse managers reported being faced with a high level of challenges.²⁴ In the current study, the finding revealed that there is an average level of opportunity found in terms of increased professionalism, training opportunity, motivation, and incentive. However, the previous study also highlighted that; the COVID-19 pandemic has brought an opportunity to increase investment in the nursing practice environment, which has greatly impacted patients, nurses, and an organization.²⁵ In the current study revealed that years of work experience is one of the important factors to increase knowledge, however, previous evidence also suggested that there is a relationship between COVID-19 management knowledge/awareness, however, the previous empirical study also showed that there is a relationship between training and COVID-19 management.²⁶ While in this study, 40 % had 11 to 20 years of work experience, and, only 30 % had an opportunity to attend COVID-19 pandemic nursing management training.

Practical implication: Research evidence have suggested

that there is average level of awareness about COVID-19 management, there is challenges, on the other side there is an opportunity to, grow professional skills/ knowledge, get opportunity to expand network, and opportunity to work as team, however, another, there is big challenges faced due to COVID-19 management such as work pressure, inadequate human resources, equipment's, and lack of proper guidelines and treatment. With this evidence has contributed a few suggestions to the policy level, and decision-makers to plan, prepare, and programs to cope, communicate and survive any circumstance that arises at work. This is a great lesson. Hence, managers must constantly, combine, and be careful with upcoming challenges, and provide inspiration, instruction, and intuition to their employees as well as themselves with an application of upskilling, re-skilling, and grit mindset.

Limitation: The main limitations of our study include the use of a quantitative research methodology, purposive sampling techniques the absence of in-person interviews due to Covid-19 restrictions and transportation concerns, and the reliance on self-reports from the perspective of a nurse manager. This study was done in a public hospital in a particular region of Nepal.

CONCLUSION

The findings reveal that nurse managers face a variety of difficulties, including a high workload, difficulty completing shift duties, a lack of personal protective equipment (PPE) and other necessary medications and equipment, health issues, a lack of excitement, and the inability to balance work and personal obligations. They have few possibilities for skill-based training as well. With the help of this information, planning must be made to deal with a pandemic catastrophe or other large crises. To establish a motivated, fascinating, and enjoyable working environment, organizations need to recruit qualified managers; they also need to offer an intervention program.

Acknowledgement: The Nepal Health Research Council (NHRC), Dhangadhi's Seti Zonal Hospital, Kolhapur Nepalgunj Medical College, Kathmandu's Sukraraj Tropical and Infectious Disease Hospital, Narayana Sub-Regional Birgunj, Janakpur Hospital, Janakpur, Biratnagar's Koshi Zonal Hospital, and Dharan's BP Koirala Institute of Health Sciences, as well as the participants, are to be thanked and appreciated

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