

Factors influencing implementation of nursing process among nurses working at Neuro psychiatric hospital, Aro, Abeokuta, Ogun state

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Abstract

The use of nursing process allows for individualized nursing care which allows for quality delivery of care. However, nurses' ability to utilize nursing process may be affected by many factors. Thus, this study assessed the factors influencing implementation of nursing process among Nurses working at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State.

The study adopted a survey to gather data from a total number of hundred (220) nurses who were randomly selected for the study. Self-designed questionnaire was used for the data collection. Descriptive analysis was done for the data gathered and results were presented using frequency and percentage tables.

Findings from the study shows that, majority, (88.2%) agreed that identification of patents priority is easy using NP, 95.5% agreed that nursing process is time consuming and stressful, 95.6% agreed with in-service training.

The study concluded that nurses had good knowledge of nursing process though some factors were largely identified to be affecting the utilization of the nursing process. The study recommends that the factors affecting the implementaion of the nursing process should be worked on in order to improve the quality of care rendered.

Keywords: Factors influencing implementation; Nurses; Nursing process; Neuro psychiatric hospital

1. Introduction

The implementation of the nursing process (NP) and a nursing diagnosis has been identified as critical to nursing practice. The nursing process is used in clinical practice worldwide to provide patients with quality individualized care, and the absence of its application might reduce the quality of care rendered.

NP has been defined as the series of critical thinking activities that are used by nurses as they care for their patients. These activities define a nursing model of care, differentiating nursing from other healthcare professions (Karttunen et al., 2020). The nursing process consists of interconnected steps and it is an organized and self-motivated way of giving nursing care to patients. It encourages humanistic, outcome – focused, cost effective care; and it is based on the belief that as we plan and convey care, we must also consider the exceptional values, concerns and desires of the consumer, who may be an individual, a family or a community.

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It is a cyclic and dynamic patient centered care approach (Alfaro, 2017). The Nursing process is also systematic rational problem solving method of planning and providing nursing care (Kozier, 2018). Nursing care is enhanced by nursing care plans which outline the nursing activities to be provided for a patient. Effectiveness of nursing practice as well as achievement of patient outcomes is tested through the application of nursing process tool which blends nursing as an art and a science (Afolayan, 2019).

The shortage of nurses in comparison to the number of patients, lack of necessary materials for NP, and lack of time might hinder the scientific implementation of the NP.

Implementation of nursing process results in the formation of a strong nurse-patient relationship. This will promote the patient's compliance to the treatment regimen, hence good care outcome. However, despite the universal benefits of the nursing process, its implementation has remained minimal in health care facilities in Nigeria. Poor implementation of the nursing process may lead to poor quality of patient care and nursing care.

However, nurses' ability to utilize nursing process may be affected by many factors, therefore, the determinants of nursing process implementation need to be understood so as to form the yardstick for providing solutions that will enhance its implementation in the clinical practice of nurses and also to provide insight to the setbacks and obstacles that prevent the nurses from practicing with their trademark of autonomy which is the nursing process.

In African countries, the nursing process was adopted even if it encountered some challenges. A study aimed to evaluate the implementation of Nursing process and patient outcome in Nigeria revealed that only 60% of professionals willingly applied the nursing process in the care of the patients. The challenges related to this lack of NP application were inadequate practical knowledge, inadequate staff, work overload and management's inability to provide the needed materials among others (Afolayan et al., 2018).

Nurses working in referral hospitals also showed inadequacy to implement Nursing process; the study conducted In Nigerian referral hospital by Mamsari (2016) revealed that only 43% of nurses were able to implement nursing process and more than 50% understood it but it was difficult for them to implement it. The lack of knowledge about nursing process among nurses as it has been indicated in Nigeria plays a role of hindering its implementation when providing nursing care to patients because knowledge is a pre-requisite of practice.

Nurses' perception regarding the process is crucial whereas it can be affected by several factors. A case of Kenya where the research assessing barriers to NP implementation revealed that in Machaos level 5 hospitals one-third (33.1%) of nurses reported that they actively implement the nursing process but only (8.2%) nurses correctly listed all the steps of the process (Ngao, 2016).

1.1. Statement of the Problem

Nurses form the largest group of health professionals in every country in the world and nursing quality is closely related to a healthcare system's effectiveness. In order to achieve quality health care services the nursing process plays a significant role but its implementation is not well developed (Hagos et al., 2016).

In Nigeria, the essential hospital accreditation standards requires Nursing Assessment that permits planning and care to begin for better outcome of patients therefore quality of health care services (MoH, 2019) and nursing process has also been introduced in nursing academic curriculum starting from level one in undergraduate program as well as in Master of Science in nursing program as is the case in developed countries (Huckbay, 2019). If the individualized care responsive to patient needs is to be delivered, the process is very rational.

Despite these strategies made to encourage the implementation of nursing process, it is observed that its implementation in patient care is evidently absent in various health institutions in Nigeria and this predicts the possible barriers that are challenging its implementation among nurses in those health institutions. The non-application of nursing process causes poor patient's outcomes such as increased length of stay in hospital, increased diseases prevalence, relapse and other complication.

Despite the benefits of using the nursing process and a written care plan, there is still a limited use of these tools by nurses Nigeria. Since the introduction of the nursing process in Nigeria in 1970, there has been a decrease in the use of the care plan among professional nurses at the clinical area. Currently, there is no evidence of the use of the nursing process; since the care plan form is not common among the admission documents used at the clinical area in Nigeria.

Despite structured and comprehensive training of nurses working in Ogun metropolises hospitals on nursing process, evaluation reports at the institution shows an evidence of low implementation of nursing process among nurses hence poor quality health care. Poor quality health care in turns leads to increased morbidity and mortality rates in our health care institutions. This prompted the researcher to conduct a study to assess the factors which influence implementation of nursing process at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun state as a case study.

Objective

The main research objective of this study is to assess the factors influencing implementation of nursing process among Nurses working at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State. However, the specific objectives of the study are below;

- To assess the level of knowledge towards nursing process among nurses at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State.
- To examine the perception of nurses towards the implementation of Nursing process at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State.
- To find out the factors influencing implementation of nursing process among nurses working at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State.

2. Methodology

This study employed a survey to assess the factors influencing implementation of nursing process among Nurses working at Neuro Psychiatric Hospital, Aro, Abeokuta, Ogun State. The sample size was calculated using Taro Yamane's formula and a size of 199.5 was gotten, then attrition rate of 10% was added making 220 as the sample size. Therefore 220 respondents were recruited for the study via simple random technique. Face and content validity of the instrument were ensured by the researchers.

The reliability of the instrument was done on nurses working in Federal Medical Centre (FMC), Abeokuta with 22 respondents (10% of the sample size). The results of reliability test (Cronbach's Alpha coefficient) was 0.82 which was considered reliable. There was face to face administration of the self-designed questionnaire on each of the respondents. Statistical Package for the Social Sciences (SPSS) version 23 was used for the data analysis. Ethical approval of the study was discussed with the relevant authorities. Permission was obtained from the Nation Open University of Nigeria (NOUN) and also from the hospital's ethical management committee. Written and verbal consent were gained from each respondents.

Table 1 shows that majority (68.2%) of the respondents were male, 45.5% of the respondents were below 30 years, 41.9% of the respondents were single, and 41.9% were RPN.

Table 2 shows that 68.2% of the respondents agreed that nurses have good knowledge about nursing process, 59.1% of the respondents agreed that nurses got knowledge from training college, 86.3% of the respondents agreed that nurses got knowledge from seminars/workshops, 90.9% of the respondents agreed that nurses need more information and tutorials to practice nursing process, 81.8% of the respondents agreed that nurses am able to apply nursing process correctly, 77.2% of the respondents agreed that nurses understand nursing process but found it difficult to implement, and 95.5% of the respondents agreed that nurses found nursing process confusing.

2.1. Data presentation

Table 1 Socio-Demographics (N=220)

| Variable | Frequency | Percentage (%) |
|--|-----------|----------------|
| Gender | | |
| Male | 150 | 68.2% |
| Female | 70 | 31.8% |
| Age bracket | | |
| Below 30 years | 100 | 45.5% |
| 30-39 | 82 | 37.2% |
| 4-49:>50 | 38 | 17.3% |
| Marital status | | |
| Single | 92 | 41.9% |
| Marriage | 80 | 36.3% |
| Other | 48 | 21.8% |
| Years practiced as a nurse | | |
| 1-5 years | 62 | 28.2% |
| 6-10 years | 100 | 45.5% |
| 11-15 years | 42 | 19.0% |
| 16 and above | 16 | 7.3% |
| How long have you work in the current nursing unit/department | | |
| 0-2 years | 56 | 25.5% |
| 2-4 years | 80 | 36.4% |
| 5-10 years | 64 | 29.1% |
| 10 years | 20 | 9.0% |
| Highest educational qualification | | |
| RPN | 92 | 41.9% |
| BNSC | 80 | 36.3% |
| MSC | 36 | 16.3% |
| Others | 12 | 5.5% |

Table 2 Level of knowledge towards nursing process among nurses

| S/N | Item | Yes | No |
|-----|---|------------|-----------|
| 1 | Nurses have good knowledge in nursing process. | 150 (68.2) | 70 (31.8) |
| 2 | Nurses got knowledge from training College. | 130(59.1) | 90(40.9) |
| 3 | Nurses got knowledge from seminars/workshops. | 190(86.3) | 30(13.7) |
| 4 | Nurses need more information and tutorials to practice nursing process. | 200(90.9) | 20(9.1) |
| 5 | Nurses am able to apply nursing process correctly. | 180(81.8) | 40(18.2) |
| 6 | Nurses understand nursing process but found it difficult to implement. | 170(77.2) | 50(22.8) |
| 7 | Nurses found nursing process confusing. | 210(95.5) | 10(4.5) |

Table 3 Summary scale of level of knowledge towards nursing process among the respondents

| Knowledge level | Category of Scores | Responses | |
|-----------------|--------------------|-----------|------------|
| | | Frequency | Percentage |
| Excellent | Above 75% | 170 | 77.2 |
| Above Average | 51% - 75% | - | - |
| Below Average | 21% - 50% | - | - |
| Poor | 0- 20% | 50 | 22.8 |
| Total | | 220 | 100 |
| Mean | | 15.46 | |
| Standard Dev. | | 70.66 | |

Table 4 shows that 88.2% of the respondents agreed that identification of patents priority is easy using NP, 65.5% of the respondents agreed that application of nursing process is cumbersome, 88.2% of the respondents agreed that formulating nursing diagnosis should not be mandatory, 69% of the respondents agreed that it should not be mandatory to draw a nursing care plan, 78.2% of the respondents agreed that nursing care plan should be drawn for the very sick patients only, 86.4% of the respondents agreed that writing a care plan is a burden to nurses, and 82.8% of the respondents agreed that nurses in their facility have adequate knowledge of the nursing process.

Table 4 Perception of respondents towards the implementation of nursing process

| S/N | ITEM | SA F (%) | A F (%) | D F (%) | SD F (%) |
|-----|---|-------------|------------|------------|-------------|
| 1. | Identification of patents priority is easy using NP | 120 | 74 | 24 | 20. |
| | | 54.6% | 33.6% | 11% | 8% |
| 2. | Application of nursing process is cumbersome | 80 | 64 | 56 | 20 |
| | | 36.4% | 29.1% | 25.5% | 9% |
| 3. | Formulating nursing diagnosis should not be mandatory. | 120 | 74 | 24 | 2 |
| | | 54.6% | 33.6% | 11% | 0.8% |
| 4. | It should not be mandatory to draw a nursing care plan. | 92 | 60 | 46 | 22 |
| | | 41.8% | 27.2% | 21.0% | 10% |
| 5. | Nursing care plan should be drawn for the very sick patients only. | 92 | 82 | 26 | 20 |
| | | 41.0% | 37.2% | 11.8% | 10% |
| 6. | Writing a care plan is a burden to nurses | 160 | 30 | 20 | 10 |
| | | 72.7% | 13.7% | 9.0% | 4.6% |
| 7. | Nurses in my facility have adequate knowledge of the Nursing process. | 140 | 42 | 22 | 16 |
| | | 63.7% | 19.1% | 10% | 7.2% |

Table 5 shows that 90.8% of the respondents agreed that poor incentives from the management, 93.5% of the respondents agreed unavailability of nurses materials, 90.1% of the respondents agreed high workload on nurses, 86.4% of the respondent agreed Inadequate staff strength, 90.1% of the respondents agreed with unavailability of resources, 78.2% of the respondents agreed with lack of in-service training among nurses, 82.8% of the respondents agreed with lack of cordial relationship with client as factors influencing implementation of nursing process among the respondents.

Table 5 Factors influencing implementation of nursing process among Nurses

| S/N | ITEM | SA F (%) | A F (%) | D F (%) | SD F (%) |
|-----|--|-------------|------------|------------|-------------|
| 1. | Poor incentives from the management | 140 | 60 | 16 | 4 |
| | | 63.6% | 27.2% | 7.2% | 2% |
| 2. | Unavailability of nurses materials | 150 | 56 | 12 | 2 |
| | | 68.1% | 25.4% | 5.5% | 1% |
| 3. | High workload on nurses | 170 | 28 | 14 | 8 |
| | | 77.3% | 12.8% | 6.4% | 3.5% |
| 4. | Inadequate staff strength | 130 | 60 | 20 | 10 |
| | | 59.1% | 27.3% | 9.1% | 4.5% |
| 5. | unavailability of resources | 160 | 38 | 14 | 8 |
| | | 72.8% | 17.3% | 6.3% | 3.6% |
| 6. | Lack of in-service training among nurses | 92 | 82 | 26 | 20 |
| | | 41.0% | 37.2% | 11.8% | 10% |
| 7. | Lack of cordial relationship with client | 140 | 42 | 22 | 16 |
| | | 63.7% | 19.1% | 10% | 7.2% |

3. Discussion

3.1. Level of knowledge towards nursing process among nurses

Table 2 show that 68.2% of the respondent agreed that nurses have good knowledge in nursing process, 59.1% of the respondent agreed that nurses got knowledge from training college, 86.3% of the respondent agreed that nurses got knowledge from seminars/workshops, 90.9% of the respondent agreed that nurses need more information and tutorials to practice nursing process, 81.8% of the respondent agreed that nurses am able to apply nursing process correctly, 77.2% of the respondent agreed that nurses understand nursing process but found it difficult to implement, 95.5% of the respondent agreed that nurses found nursing process confusing. According to Afolayan et al (2013), effective patients' outcomes are promoted through the effective implementation of Nursing Process and this Nursing Process implementation also demonstrates professionalism. With routine Nursing Process implementation, nurses become more competent for patients therefore the agreement between nurse and patient turns out to be strengthened progressively. Implementation of the nursing process improved communication among nurses provided a system for evaluating nursing interventions and improved clients' satisfaction with care. Further, Afolayan, et al (2013) stated that nursing process contributes to professionalization, promotion of client's satisfaction and documentation which form global standards upon which nursing care is audited.

3.2. Perception of nurses towards the implementation of nursing process

Table 4 shows that 88.2%of the respondent agreed that Identification of patents priority is easy using NP, 65.5% of the respondent agreed that Application of nursing process is cumbersome, 88.2% of the respondent agreed that Formulating nursing diagnosis should not be mandatory, 69% of the respondent agreed that It should not be mandatory to draw a nursing care plan, 78.2% of the respondent agreed that Nursing care plan should be drawn for the very sick patients only, 86.4% of the respondent agreed that Writing a care plan is a burden to nurses, 82.8% of the respondent agreed that Nurses in my facility have adequate knowledge of the Nursing process. This goes with Yildirim & Ozkahraman, (2011), Nursing is a profession that demands a consistent, high level of critical thought coupled with critical actions. Critical thinking in nursing has equated with the nursing process, which confines critical thinking to a linear, narrow, single right solution, problem-solving process.

Application of critical thought within the nursing process is an essential construct in the professional practice of nursing and is an outcome within nursing education curriculum (Alfaro-LeFevre, 2004). The growth of nursing as a profession has necessitated the application of a logical and rational method of problem solving in making decisions about patient care, instead of relying on unsystematic and intuitive processes.

3.3. Factors influencing implementation of nursing process

The table 5 shows that 90.8% of the respondents agreed that poor incentives from the management, 93.5% of the respondents agreed that unavailability of nurses materials, 90.1% of the respondent agreed high workload on nurses, 86.4% of the respondents agreed that inadequate staff strength, 90.1% of the respondents agreed with unavailability of resources, 78.2% of the respondents agreed with lack of in-service training among nurses, 82.8% of the respondent agreed with lack of cordial relationship with client. According to Savett & Good (2018), the nursing process is a technology of care that guides the sequence of clinical reasoning and improves the quality of care (Dal, et al., 2013). It integrates, organizes, and ensures the continuity of information, enabling nursing staff to evaluate their efficiency and effectiveness and to modify their performance according to patient recovery results (Dal Sasso, et al., 2013). Consequently, this underpins the need for the effective implementation of the nursing process in patients care. Also, Afoi, et al., (2012), further emphasized that the nursing process has been used as a problem-solving activity to think about a plan of care as the foundation for professional practice in everyday nursing practice.

Recommendations

- There should be periodic workshops and seminars on the nursing process
- There should also be regular in-service training to continually update knowledge and skills on the nursing process.
- The hospital administration should be enlightened on the importance of the nursing process in expressions of patients' outcomes to improve a regular delivery of the needed resources for the practice of the nursing process.
- Nurses and midwives should strive to update their knowledge on nursing process in both theoretical aspect and practical aspect especially nurses who have increased years of experience in hospital.

4. Conclusion

The study concludes that majority of the nurses had good knowledge of nursing process and adequate utilization level of nursing process. The factors largely identified to be affecting the utilization of nursing process includes inadequate staff strength and low institutional supply of nursing process materials. The level of knowledge can be sustained by allowing nurses to update their knowledge via in-service training. The factors affecting the utilization of nursing process should be addressed by the management of the hospital.

Compliance with ethical standards

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Disclosure of conflict of interest

All the authors contributed positively to the writing of this manuscript and no conflict of interest as all agreed to the content of this research.

References

- [1] Abebe N, Abera H, Ayana M, (2014), The Implementation of Nursing process and Associated Factors among Nurses Working in Debreworkos and Finoteselam Hospitals, Northwest Ethiopia, 2013. JNurs Care, 3 (1), 149. doi:10.4172/2167-1168.1000149149
- [2] Afolayan, J. A., Donald, B., Baldwin, D. M., & Onasoga, O. (2013). Evaluation of the implementation of nursing process and patient outcome in psychiatric nursing : Case study of psychiatric Hospital. Advances in Applied Science Research, 4(5), 34–43.

- [3] Akbari, M. and Shamsi, A. (2011): A survey on Nursing process Barriers from the nurses view of Intensive Care Units. *Iranian journal of Critical Care Nursing*, 4(3), 181-18
- [4] American Nurses Association. (2009): *The Nursing process: A Common Thread among all Nurses* .From <http://www.nursingworld.org>.Axelsson,
- [5] American Nurses Association(2010), *Nursing: Scope and standards of practice*, 2nd Edition. Silver Spring, MD: Nursesbook.org.
- [6] ANA(2015) Annual Report, 84.<http://doi.org/10.1017/CBO9781107415324.004>
- [7] Brandalize, D.L. & Kalinowski, E.C. (2005). *Nursing process: experience in the implementation of the diagnostic phase*. *Cogitare Enferm* , 10(3),53
- [8] Burns, N & Grove, SK (2005) *Nursing research conduct, critique and utilisation*, 55thedition. St Louis: Elsevier/Saunders
- [9] Endacott, R, Botti, M (2007) *Clinical Research3: sample size selection, Accident and Emergency*: Elsevier. 15, 234-238
- [10] Finkelman, A, Kenner, C. (2016) *The Essence of Nursing: Knowledge and Caring- professional nursing concepts-* Jones and Barlett learningPp.929
- [11] Fisseha, H., Fessehaye, A., Fikadu, B., Semarya, B., & Alemseged, A. (2014). *Application of Nursing process and its Affecting Factors among Nurses Working in Mekelle Zone Hospitals, Northern Ethiopia*. Retrieved from <http://dx.doi.org/10.1155/2014/675212>
- [12] Fixsen, D. L., Naoom, S. F., Blase, K. a, Friedman, R. M., & Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Components, 311712,1–119.
- [13] George, JB. (2002). *Nursing theories. The base for professional nursing practice*. 5th edition. Upper Saddle River, New Jersey: Pearson Education.
- [14] Gordon, J., Watts, C., (2011) *Applying Skills And Knowledge: principle of Nursing Practice F. Nursing Standard*, 25 (33), 35-37
- [15] Haberman, M & Uys, LR (2005) *The nursing process: a global concept*. China: Elsevier Churchill Living stone
- [16] Kozier, B, Erbs, G, Berman, A & Synder, S (2012) *Fundamentals of Nursing, concepts process and practice*, 9thedition, Nem Jersey: Pearson Education.
- [17] Ledesma, DME, Mendes MMR (2009) *The Nursing process presented as routine care actions: building its meaning in clinical nurses' perspective*. *Rev Latino-am Enfermagem* maio-junho;17(3), 328-34
- [18] Lowe, J., & Archibald, C. (2009), *Cultural diversity: the intention of nursing*. *Nursing Forum*, 44 (1),11–18. <http://doi.org/10.1111/j.1744-6198.2009.00122.x>
- [19] Magnan, M. A & Maklebust, J. (2009). *The nursing process and pressure ulcer prevention: Making the connection*. *Advance Wound Care* (22), 83-92
- [20] Mahmoud, M. H., & Bayoumy, H. M. (2014). *Barriers and facilitators for execution of nursing process from nurses' perspective* ISSN 2320–5407. *International Journal of Advanced Research*, 2 (2), 300–315.
- [21] Mamseri, R.A. (2012). *The nursing process as a means of improving patient care (Master thesis)*. University of South Africa.
- [22] Manal, H.M., & Hala, M.B. (2014). *Barriers and facilitators for execution of nursing process from nurses' perspective* *International Journal of Advanced Research*, 2 (2), 300-315.
- [23] Mouton, EBJ. (2006). *The practice of social research*. 6th edition impression. Cape Town: ABC Press.
- [24] Ngao, M. D. (2015) *Assessing barriers to implementation of nursing process among nurses working at Machakos Level 5 Hospital Mbithi*. PhD Proposal, 1, 2–5.<http://doi.org/10.1017/CBO9781107415324.004>.
- [25] Orlando, IJ. (1990) *The Dynamic Nurse-Patient Relationship: function, process and principles*, Reissue of the1961 edition, New York: National League of Nursing.
- [26] Parker M.E. & Smith M.C. (2010). *Nursing theories & nursing practice*. 3rd ed. Philadelphia, USA: F.A Davis Company.

- [27] Pokorski, S., Moraes, M.A., Chiarelli, R., Costanzi, A.P. and Rabelo, E. R. (2009). Nursing process: From literature to practice. What are we actually doing? *Rev Latino-am Enfermagem*, maio-junho, 17(3), 302-307.
- [28] Polania, Gfk, (2013), Analysis of sample size inconsumersurvey,p33
- [29] Polit, DF & Beck, CT, (2008) *Nursing research, generating and assessing evidence for nursing practice*, 8th edition, Philadelphia: Lippincott, Williams &Wilkins.
- [30] Queiroz, O.C.A., Sant' Ana, R.S.E., Oliveira, S.C., Moinhos, A.S. and Santos, L.S. (2012):Nurse's perception in front of the implementation of nursing diagnosis and prescription. *Nursing Journal. UFPE online*, 6(7), 1347-51.
- [31] Yura,H.,Walsh,M.(1988).*The nursing process assessing, planning, implementing, evaluating (5thed.)*.Norwalk: Appleton and Lange.
- [32] Zamanzadeh, V., Valizadeh, L., Tabrizi, F. J., Behshid, M., & Lotfi, M. (2015). Challenges associated with the implementation of the nursing process: A systematic review. *Iranian Journal of Nursing and Midwifery Research*, 20 (4), 411–9. <http://doi.org/10.4103/1735-9066.161002>.
- [33] Zewdu Shewangizaw, AberaMersha(2015) Determinants towards Implementation of Nursing Process. *American Journal of Nursing Science*. 4 (3), 45-49. <http://doi:10.11648/j.ajns.20150403.11>.