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Employing Nurse Stratified Management for Clinical Governance

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DESCRIPTION

The nurse stratified management's potential applications in nursing management. The random number table method was used to divide the 100 nurses who worked in our hospitals into two groups: the observation group (n=50) and the control group (n=50). The experimental group got stratified nurse management in contrast to the control group's normal nursing care. The two groups' nursing standards, practise satisfaction, error rate, patient complaints, and patient satisfaction were contrasted. In comparison to the control group, the experimental group shown much better nursing quality. Nurse practise enjoyment was much higher in the experimental group than it was in the control group. Compared to routine nurse management mode, stratified nursing management mode had a significantly decreased error rate and patient complaint rate. Compared to conventional nurse management, stratified nursing management resulted in higher patient satisfaction. The nurse stratified management approach successfully raises nursing satisfaction while decreasing nursing error rates and patient complaints and enhancing nurses' practise satisfaction.

Patients are demanding higher-quality nursing care as medical technology continues to progress. Strict nursing management is necessary to increase hospital nursing quality, which is a significant indicator of a hospital's overall competence. The everyday usage of nurse management improves clinical treatment effectiveness and patient nursing satisfaction by offering patients the best calibre nursing care. A new nursing management model called nursing hierarchical management makes it clear what nurses' roles are in order to fully engage the nurses' motivation and make the best use of nursing resources. This results in the best nursing care for patients and higher patient satisfaction with clinical care. showed that the patient care was improved by the stratified nurse management paradigm. In our institutions, 100 nurses were chosen to investigate the impact of stratified care management.

The experimental group's nurses underwent nursing stratification management, whereas the nurses in the control group received standard nursing care. The stratification of nursing took into account the unique requirements of hospital management and established a mechanism for classifying nurses. Through job competition, responsible nursing team leaders are appointed or dismissed, and the nurses are categorised according to their clinical experience, academic credentials, and professional titles. The group members debated and created the nursing responsibility stratification system, and the chief nurse was in charge of the organisation. The patient's condition must be continuously monitored, relevant nurses must provide ongoing nursing services and counselling, and they must deliver health education.

Additionally, the senior nursing staff is in charge of overseeing, managing, and directing how junior nursing staff carry out their daily duties. The responsible team leader's main duties include supervising the care of elderly or critically sick patients and mentoring junior nurses. Based on the ability of nurses to gain more gratifying nursing services and improved nursing quality, hierarchical nursing management was introduced. Hospitals classify and carry out nursing duties according to the clinical experience and educational level of nurses, maximise the use of human resources, and appropriately create and enhance the specific content and procedure of nursing work, all of which contribute to higher nursing quality.

On the basis of the unique circumstances of each department, specific training programmes, assessment standards, and training and assessment methods were developed. The management structure was aligned with nursing hierarchical management. The relevant subitems and groups served to complete the level training. The nursing staff received training through on-site instruction or nursing-specific lectures to properly integrate theory with practise, improving the quality of nursing. When performing ward rounds and patient consultations, nurses perform to the best of their professional nursing level and abilities. To encourage nursing personnel to show more initiative and excitement for their work, a commensurate incentive and punishment system was devised. This enhanced patient care

satisfaction and nursing quality.

The mean and standard deviation were used to express the data. The SPSS 22.0 statistical analysis programme was used (IBM, Armonk, NY, USA). Using the Student's t-test and the Chi-square test, differences between measurement data expressed as (x s) and count data expressed as the number of cases (rate) were compared. the threshold for statistical significance was established. For rendering graphics, we used the Graph Pad Prism8. A scientific and efficient management model for nursing staff has been found to contribute to improving nurses' sense of responsibility and mobilising their enthusiasm for work, which effectively ensures the integrity and continuity of nursing. Currently, there are numerous issues in the nursing work in most hospitals, such as the uneven distribution of human resources and the pressure on nursing work, which degrades the quality of nursing.

It maximises nurse strengths while making up for the deficiencies of the traditional nursing management method. On the basis of the single-patient management model, Xu and Lei standardised the implementation of TCM nursing programmes and enhanced the management content utilising hierarchical management and process control, which brought out the nursing features of TCM hepatology and decreased nursing errors. Additionally, stratified nursing management prevents nursing blindness, which lowers the difficulty of primary nurses jobs and ensures the security of clinical nursing.