

Turkish Validation of the Nursing Outcomes for Urinary Incontinence and Their Sensitivities on Nursing Interventions

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Abstract : In the nursing process, many of the nursing classification systems were created to be used in international. From these, NANDA-I, Nursing Outcomes Classification (NOC) and Nursing Interventions Classification (NIC). In this direction, the main objective of this study is to establish a model for caregivers in hospitals and communities in Turkey and to ensure that nursing outputs are assessed by NOC-based measures. There are many scales to measure Urinary Incontinence (UI), which is very common in children, in old age, vaginal birth, NOC scales are ideal for use in the nursing process for comprehensive and holistic assessment, with surveys available. For this reason, the purpose of this study is to evaluate the validity of the NOC outputs and indicators used for UI NANDA-I. This research is a methodological study. In addition to the validity of scale indicators in the study, how much they will contribute to recovery after the nursing intervention was assessed by experts. Scope validations have been applied and calculated according to Fehring 1987 work model. According to this, nursing inclusion criteria and scores were determined. For example, if experts have at least four years of clinical experience, their score was 4 points or have at least one year of the nursing classification system, their score was 1 point. The experts were a publication experience about nursing classification, their score was 1 point, or have a doctoral degree in nursing, their score was 2 points. If the expert has a master degree, their score was 1 point. Total of 55 experts rated Fehring as a "senior degree" with a score of 90 according to the expert scoring. The nursing interventions to be applied were asked to what extent these indicators would contribute to recovery. For coverage validity tailored to Fehring's model, each NOC and NOC indicator from specialists was asked to score between 1-5. Score for the significance of indicators was from 1=no precaution to 5=very important. After the expert opinion, these weighted scores obtained for each NOC and NOC indicator were classified as 0.8 critical, $0.8 > 0.5$ complements, > 0.5 are excluded. In the NANDA-I / NOC / NIC system (guideline), 5 NOCs proposed for nursing diagnoses for UI were proposed. These outputs are; Urinary Continence, Urinary Elimination, Tissue Integrity, Self CareToileting, Medication Response. After the scales are translated into Turkish, the weighted average of the scores obtained from specialists for the coverage of all 5 NOCs and the contribution of nursing initiatives exceeded 0.8. After the opinions of the experts, 79 of the 82 indicators were calculated as critical, 3 of the indicators were calculated as supplemental. Because of $0.5 >$ was not obtained, no substance was removed. All NOC outputs were identified as valid and usable scales in Turkey. In this study, five NOC outcomes were verified for the evaluation of the output of individuals who have received nursing knowledge of UI and variant types. Nurses in Turkey can benefit from the outputs of the NOC scale to perform the care of the elderly incontinence.

Keywords : nursing outcomes, content validity, nursing diagnosis, urinary incontinence

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