



Approaching positive staff abilities among Primigravida

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Abstract

A "Primigravida" also known as "High Risk Mother's" (HRMs) seems intimidating, just like any other problem; yet, education is the key to living with and managing HRMs that have difficulties. The frequency of high-risk pregnancy in Asian countries ranges from 80 percent of maternal mortality. An disease that is either coincidental with pregnancy or is specific to pregnancy is considered to be a high-risk pregnancy. This type of pregnancy is characterized by the fact that the mother's life and the health of the baby are in jeopardy.. If a high-risk pregnancy is identified and treated promptly, it is possible to prevent the development of morbidity and mortality in both the mother and the foetus later on in the pregnancy. Therefore, teaching human resource management professionals (HRMs) can be one of the effective interventions to lower the prevalence of high-risk pregnancies. This is because it is necessary for safe motherhood that HRMs be educated, and the motivation and efforts of health experts are also essential. A strong staff relationship among HRMs is necessary in order to provide both emotional and practical support to employees in order to facilitate integration and overcome this challenge. As a result, this article provides a summary of the studies and strategies that HRMs have identified for improving programs concerning staff relationships.

Keywords: Primigravida, HRMs (*High Risk Mother's*), Neonatal Intensive Care Unit (NICU), Pregnancy Education, Staff relationship.

1. Introduction

Studies that were generated from the experiences of human resource managers and newborns who were admitted to the NICU (Neonatal Intensive Care Unit) came to the conclusion that one of the most important results was the necessity of support and the enhancement of a healthy relationship. Support for human resource management (HRM) is required in the neonatal intensive care unit (NICU) as well as in ordinary wards in order to reduce the likelihood of a breakdown in the relationship between the HRM and the child following the HRM and the newborn's early admission.

Furthermore, when it comes to day-to-day life, even human resource managers require social support, which includes support from family, friends, and spirituality. Health care professionals play a significant and systematic role among human resource managers during



at least the first three months of their employment. Where, when we talk about professionals working in the health care industry, nursing staffs have the ability to develop compassionate interactions. Involving human resource management professionals in the care of their infants, sharing knowledge, and paying attention to providing psychological and physical support are all ways to lessen maternal stress. When HRMs are provided with support, it leads to a reduction in their anxiety, an increase in their awareness, and a development in their "self-confidence to their capabilities." Additionally, it helps them take care of the newborn, which ultimately results in a reduction in the amount of time the newborn spends in the hospital and an increase in HRMs' satisfaction. On the other hand, informal support plays a crucial role within the family. Once a patient is discharged from the hospital, the staff's relationship and support becomes less available for human resource management. As a result, it is of the utmost importance that staff members provide sufficient support in order to assist parents in managing the stress associated with the hospitalization of their newborn children and to enhance their capacity and trust in the care that is provided for infants. In light of the fact that nurses are the ones who offer care, they play an essential part in the process of providing support.

There have been a significant number of studies that have concentrated on the experiences of human resource managers who are employed in the neonatal intensive care unit (NICU). However, there is a paucity of information regarding the experiences of health care personnel who work in the neonatal intensive care unit (NICU) and provide assistance to human resource management (HRM) employees. The purpose of this study was to investigate the staff ties that exist among human resource managers (HRMs), as well as the experiences that HRMs have to deal with on a daily basis in order to accomplish their support needs. In order to analyze both of these facets, the goal of this study was to.

2. Identification of relevant studies

2.1 Not Accompanying the Human Resource Managers in Care

Managers of human resources who lacked the necessary abilities to properly care for their infants displayed lack of competence a continuous degree of concern and worry regarding the quality of care they brought to their newborns during the first week of hospitalization. This



was the case even though they were able to provide care for their newborns. Her initial experience with gavage, which was her first time using the method, was recounted by a human resource manager who specializes in sexually transmitted diseases (STD).

It was a terrifying experience for me the first time I attempted to gavage feed. I had been implying that it is possible for the milk to enter the lungs, causing the infant to suffocate.

Throughout the entire process, they sought the direction and support of nurses. However, this was made more difficult by the fact that nurses frequently lacked the capacity to offer the essential emotional support due to time restrictions and the huge number of patients they were responsible for.

2.2 HRMs Receiving Responsibility for Monitoring and Care

One of the human resource managers (HRMs) was said to have suffered from a persistent infection that lasted for a lengthy period of time, as stated in the explanation. Because they did not have faith in the nursing care that they were receiving, the human resource managers were compelled so that they can spend their time resting in the chair that was placed next to the newborn. Taking into consideration this topic, the following is an example of one of the observations that can be made.

It appeared as though the manager of human resources was nodding off in the chair. Almost immediately after I was able to reach the crown of her head, she emerged from her sleep and became alert. I was curious as to why she did not try to rest in the room where the human resource managers were located. The Human Resources Manager reacted with the following: " Upon my return from the room of the human resources manager yesterday, I observed that my infant was sobbing heavily and that his face was injured. However, the nurses did not notice that she was crying for any reason."

2.3. Inadequate Sharing of Medical Information



It was common practice for human resource managers to seek additional clarification from nurses whenever they were dissatisfied with the way physicians shared information and clinical explanations. There were a significant number of clinical inquiries, which were associated with tests or para-clinical procedures. Nurses, on the other hand, due to a lack of expertise, we are unable to provide answers to a significant number of these kinds of questions. Not only did they experience discomfort, but they also indicated that responding to such a technical question was beyond their capabilities. According to the nurses, it is a medical responsibility to provide answers to concerns regarding medical matters. One nurse exemplifies this by stating the following words:

The department of Human Resources and Management has requested that I submit an interpretation of the results of the lumbar puncture test. Thanks for your time and consideration. It is a specialist examination, to express it in the simplest terms possible. As a consequence of this, I let the mother know that she needs to go to the doctor in order to question about this particular test. Due to the fact that we do not possess the necessary experience, we are unable to interpret the findings..

As a result, in order to integrate and overcome all of these complications, there should be a good staff relationship among HRMs in order to provide them with both emotional and practical support. Therefore, the government or private hospitals or fertility clinics should plan in accordance with their regulations and provide a few strategies and methods for enhancing a good staff relationship among HRMs with their family support.

4. Methods for enhancing staff relationships

4.1 Reassuring the HRMs

The managers of human resources infants who were born with anomalies of the physical body exhibited feelings of discontent and upset at the same time that they were presented with new scenarios in the care of the newborns. For instance, the method of tying a diaper for



a newborn who has undergone surgery for bladder exstrophy is distinct from the one that is utilized for tying a diaper for a newborn who is in good health. As a consequence of this, a lady who had more than one kid had a tough time holding her baby's diaper in place while she does so, certain nurses offered the mother words of encouragement and reassurance that they would provide her with care and help. They also assured her that they would be there for her.

The following is an explanation that was supplied by one of the nurses: " I let the human resources manager know that I will be here for at least an hour and a half." I will have milk ready for your newborn if he is awake, and if I need your aid, I will wake you up. If your infant is awake, I will serve him milk. It is possible for the exhausted mother to take a half-hour break and rest as a result of this activity.

4.2 Supporting HRMs with Reduced Functional Capacity

It was not possible for certain human resource managers to offer patients with physical treatment because of the limited functional capacity they possessed. For example, those human resource managers who had undergone caesarean sections or vaginal stitches showed a deterioration in their physical function. This was the case for those who had recently given birth. In these kinds of circumstances, the nurses were the ones who were tasked with fulfilling the primary obligation of providing care for the infant.

Although it is the mother's duty to change a baby's diaper, there are circumstances in which a mother who is ill, such as after a caesarean section, there is a possibility that she will not be able to meet all of the particular needs of her newborn. This is sometimes the case. In the event that this takes place, we are bound to offer aid to the HRM in the care of her newborn kid.

4.3 Providing Information



Generally speaking, the managers of human resources asserted that they were not granted access to a restricted quantity of clinical information regarding illness and treatment. The other side of the coin is that there was a significant amount of contentment regarding communication in regards to certain care procedures. For example, a mother who was at a high risk gave birth to an infant who had a cleft palate and questioned the doctor about the circumstances surrounding the birth:

"Is it okay if I give my breast milk to my newborn?" When queried about it, the medical professional reacted by saying, "Yes, you are able to breastfeed your newborn; however, you will need to bend over and make sure that your nipples are able to fill the mouth of your infant that you are breastfeeding." You can, on the other hand, utilize this bottle rather of the one you typically use if you are unable to achieve the aforementioned goal.

5. Emotional and practical support for human resource management nursing methods

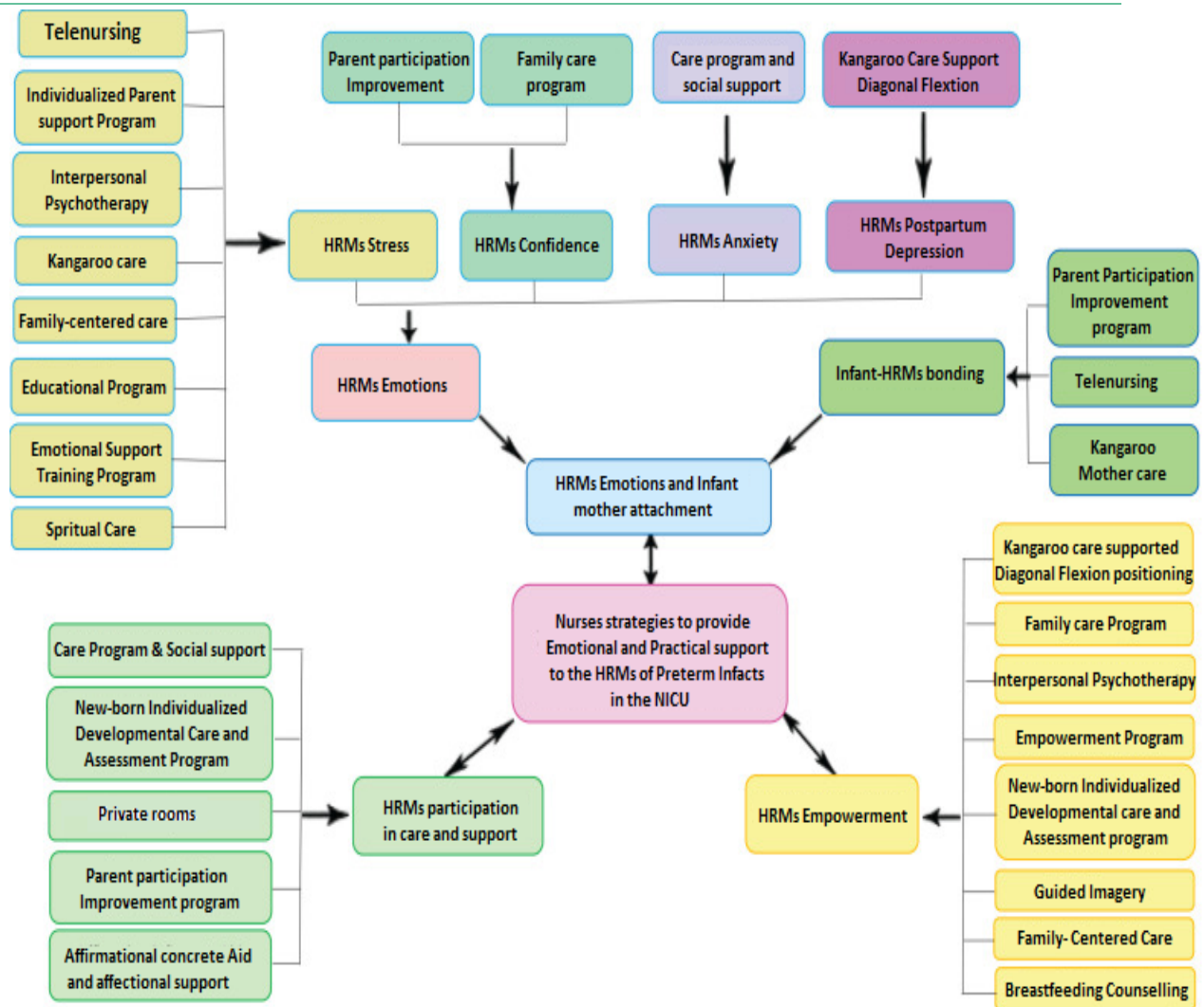


Fig 1: schematic representation with strategies was based on Maryam Maleki *et al.*, (2020), based on Mental Health considerations: Psychological Physiological- Social awareness.

6. Outcomes

According to the findings of the current study, nurses were primarily concerned with the performance of complicated clinical duties and placed a significant amount of reliance on the presence of mothers in order to monitor and provide primary care for both new mothers and their newborn children while being supervised by nurses and other associated staff. It seemed as though the nurses were under the impression that they were primarily responsible for the care of both the HRMs and their newborns. However, this was in direct contradiction to the



duties that they had in their professional lives. After all, the nurses are the ones who are ultimately responsible for the care, and they also offer assistance to the human resource managers by means of effective communication and supporting skills.

7. Discussion

The majority of nurses, as indicated by the findings of this study, are of the opinion that the most significant barrier that stands in the way of accommodating the support requirements of human resource management is a shortage of staff. When there is an optimal level of staffing, nurses have the opportunity to collaborate with human resource managers (HRMs) in the process of care planning and delivery, as well as to recognize and address the HRMs' specific requirements and for the purpose of providing the much-needed education and clinical explanations regarding the care of labor and delivery mothers and their newborns. In the present day, the most significant challenges that health systems all over the world are facing are the growing demand for nursing services and the limited number of staff members that are available. According to Turner et al. (2019), the elimination of staffing shortages is considered to be a prerequisite for the supportive function that nurses play in the healthcare system.

8. Nursing Implications

Based on the findings, it can be concluded that nurses are not unaware of the emotional pressures that are related with the management of human resources. When human resource managers were unable to handle their tasks as a result of diminished physical function or poor mental health after giving birth, emotional assistance was provided on occasion. This was the case in situations where the managers were unable to cope with their responsibilities. On the other hand, those human resource managers who were suffering from conditions such as low mood, anxiety, acute stress, and depression received a greater quantity of emotional assistance from the nurses.

9. Conclusion



There was a significant proportion of the activities that were carried out by the professionals working in the health care industry that were focused on the patient, with the primary emphasis being placed on the treatment and care of newborns. When it comes to providing care that is centered on the family, the other aspects, such as providing support and sharing information, have received less attention than they could have. During the time that they are providing care for their babies, it is essential for human resource managers to be under the supervision of nurses. In addition, it is essential for human resource managers to have a comprehensive understanding of the diagnosis, treatment, and prognosis of their disease, in addition to dealing with concerns pertaining to the health of newborns. However, workers in the health care industry acknowledged that the support of HRMs was essential, and many viewed the burden as a difficulty. The conclusion that can be drawn from this research is that educating human resource managers (HRMs) can be one of the effective strategies that can be used to minimize the number of high-risk pregnancies. It is necessary to have a strong staff interaction among HRMs in order to provide both emotional and practical assistance in order to successfully integrate and overcome this..

Ethical Clearance: It is not necessary to obtain ethical approval for this piece because it is about a program that raises awareness among high-risk mothers and the connection between staff members.

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