#### **Recruitment of Nurses**

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#### **ABSTRACT:**

We study the use monetary incentives might be counter – production , we analyses the effect of fining owners of long – term care institutions who prolong length of stay at hospital. We developed prediction models for hospital admission and prolonged length of stay in older adults admitted from the emergency department (ED).

**KEYWORDS**: Hospital length of stay, Heart failure, prognosis, Ejection fraction, Natriuretic peptides.

#### I. INTRODUCTION:

Mid- regional pro- atrial natriuretic peptide (MR – pro ANP), procalcitonin (PCT) and mid – regional pro – adrenomedullin (MR – pro ADM) demonstrated usefulness for management of emergency department patients with dyspnea.

This was a retrospective cohort study of patients aged 70 years or older who visited a geriatric ED in Brazil (N = 5,025 visits).

Hospital admission and prolonged length stay.

#### II. REVIEW OF LITERATURE

YEAR	TITLE AND YEAR PUBLISHED	AR AUTHOR	FINDIND
2006	Dose monetary punishment crowd out proceed and provided in the social motivation A natural experiment on hospital length of stay.	Tor Helge Hol EgilKjerstad Hilde Luras Odd Rune Stra	necessary the best way to motivate economic agent to perform in accordance
2008	Regional	Don E. Detmer	The hospital cooperation was generally excellent and

2008	Regional	Don E. Detmer	The hospital cooperation was generally excellent and
	differences in	M.D., Timothy j.	with exception of 2 hospital each of approximately
	surgical care based	Tyson	300 beds were noted. while , the remainder were
	upon uniform	M.S	obtained from hospitals subscribing to computerized
	physician and		record- keeping (PAS,HSD).population based
	hospital discharge		surgical rates for various common surgical
	abstract data		procedures were analyzed on a regional basis by
			examining select uniform hospital discharge abstract
			data from Wisconsin hospital . information of this
			type has signification both for professional standard
			review organization (PSRO) and Health Planning
			Agencies (HPAS). Further work will be necessary to
			define optimal surgical rates.



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2009 Prevalence and prognosis of heart failure with preserve ejection fraction and elevated N-terminal pro brain natriuretic peptide: a 10 year analysis from the Copenhagen hospital heat failure study.		Christian malchauCarlsen Morten Bay Vibeke Kirk Jens Gotze Olav Wendelbone Nielsen		lsen	After years of focusing on the clinical syndrome of heart failure (HF) with reduced systolic left ventricular ejection fraction (HFREF), there has been increasing interest in HF with preserved ejection fraction (HFPEF) using a heart failure diagnosis requiring elevated NT-proBNP reduces the prevalence of HFPEF and result in a survival similar to that of heart failure with reduced ejection fraction .in contrast, when NT-proBNP is not used for the heart failure diagnosis or adjusted for , HFPEF is associated with a lower mortality in both univariate and multivariate analysis .				
2010	natriuretic peptic management of p in the medical er department (PRC correlation with severity utilization hospital resource prognosis in a lar prospective rand	N-terminal pro brain natriuretic peptide in the management of patients in the medical emergency department (PROMPT): correlation with disease severity utilization of hospital resources, and prognosis in a large ,prospective randomized multicentre trial.			N-terminal pro brain natriuretic peptide (NT-pro BNP Is a potent marker of heart failure and other cardiac diseases. The value of NT-pro PNB testing in the medical emergency department (ED) was assessed in patients 65 years old this large prospective randomized controlled multicentre trial was conducted in six medical Eds. Data for evaluation of the primary endpoint of hospitalization were available for 1086 patients. Although NT-pro BNP does not affect overall hospitalizations, it is associated with better stratification of patient care and is strongly correlated with subsequent utilization of hospital resources and prognosis.				
2011	A plea for promaternity hospital	ntyne , M.D	The pro-maternity hospital need not be a sepa establishment: it may quite well be an annex many come to be of equal size with the mater but it must be distinct from the maternity: it was for the reception of patients who have in past pregnancies suffered from one or other of the						

the united states.

complication of the pregnant state has been diagnosis. The idea of a pro-maternity hospital has been forced into my mind by several circumstances during the last few years but more particularly by communication which I have received from medical mem in various parts of this country and



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2012	natriuretic peptide management of pat the medical emerge department (PROM :Correlation with d	N-terminal pro brain natriuretic peptide in the management of patients in the medical emergency department (PROMPT):Correlation with disease severity, utilization of hospital			N-terminal pro brain natriuretic peptide (NT-pro BNP) is a potent marker of heart failure and cardiac diseases. The value of NT-pro BNP testing in the medical emergency department (ED) was assessed in patients >65 years old. Although NT-pro BNP does not affect overall hospitalization, it is associated with better stratification of patient care and I strongly correlated with subsequent utilization of hospital resources and prognosis.				
2013	The effects of mark concentration and horizontal mergers hospital costs and prices	on Ro	ger D Feldman marke prices wd.(2013) benefit duplic condit and prices area minesult pre-mithat po		trust advocates believe that horizontal sets can reduce competition and increase as while merger advocates believes it can effit consumers by reducing service ication. This study analysed the market lition, operation characteristics, and costs prices of approximately 3500 short-term ral hospital (including 112 within – market-mergers) from 1986-1994 to investigation the lt show and managed care penetration. Lower merger occupancy rates: and some evidence post-merger price reductions were smaller in competitive markets.				
2014	Postoperative atrial fibrillation independently of hospital stay after cardiac surgery	J Aue T We R Ber CK N	ber can rent poo g len stra inv poo sur cha cha	ostoperative atrial fibrillation (AF)occurs in up to 50% of ardiac surgery patients and represent the most common ostoperative arrhythmic complication A reduction of the night of hospital stay is a desirable goal in preventive rategies of postoperative F. The aim of the present vestigation was to determine whether prolonged ostoperative hospital stay associated with AF after cardiac argery is attributable to the arrhythmia itself or to baseline haracteristics of patients who develop AF. Despite baseline haracteristics differed between patients with and without ostoperative AF, most of the prolongation of hospital stay in be attributed to the rhythm disturbance itself.					
2015	A framework for operational modelling of hospital resources	PAUL R	HARPER	The provi operating considerab the subject of healthca and tools t for decisi framework	sion of hospital resources, such as beds, theatres and nurses, is a matter of ple public and political concern and has been to of widespread debate. the political element are emphasises the need for objective method to information the provide a better foundation in making the effectiveness of the case is demonstrated through the development an integrated hospital capacity tool.				



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2016	Patient – repo health outcom after total hip knee surgery: Dutch univers hospital settin result of 20 ye clinical regist	nes and in a sity g: ears	PHILIP J VAN WEES JOOST JG WAMMES REINIER P AKKERMANS JAN KOETSENRUIT	ΓER	The patient reported outcome (PRO) measurement is a method for measuring perception of patient on their health and quality of life. the aim of this paper is to present the result of PRO measurement in total hip and knee replacement as routinely collection during 20years of surgery in a university hospital setting. The functional status of a large cohort of patients signification improved after hip and knee replacement based on routine data collection. Our study shows the feasibility of the routine collection of PRO data in patient with total hip and knee replacement. the use of PRO data provides opportunities for continuous quality improvement.					
2017	Indigent care as Quid Pro Quo in hospital regulation		N S CAMPBELL provolucare altruexperior altruexperior hospiness resuindigitices		ospital expend considerable resources each years to ovide health care to the poor . why do some hospitals pluntarily take on a disproportionate burden of this are our view is that the burden hospital are not simply truistic. They are indirectly compensation for this appense with legal protections against competition ander certificate of need (CON) regulation .we test this appothesis in a recursive model explaining which ospital are likely to win CON regulation approval. The sults indicate that controlling for the endogeneity of digent care regulators in systematically awarded teenses to hospital providing greater amounts of care to be poor.					
2018	the overall management of	hospital volume in HELEN M			To determine whether hospital volume is associated with clinical and economic outcomes for patients with pancreatic cancer who underwent pancreatic resection, palliative bypass, or endoscopic or percutaneous stent procedures in Maryland between 1990 and 1995 patients with pancreatic cancer who are to be treated with curative or palliative procedures appear to benefit from referral to a high -volume provider.					
2019	contribution groups predictors which outdown vary hospital than p	predictors which outcomes vary with hospital rather			In a model such as a logit regression model we wish to compare the relative importance of two group of predictors for various objectives in the example that motivated model predicts patient outcomes during hospital stays and we wish to measure the relative contribution of patient and hospital characteristics to the variation in outcomes among patients and among hospitals this is done using the relative dispersion of patient and hospital contributions to the fitted outcomes relevant point estimates ,confidence intervals and hypothesis tests are developed.					

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Volume 2, Issue 10, pp: 713-718

#### RESEARCH GAP:

To ensure effective utilization of research in nursing more evidence which illuminates the way think about research the value which they put on it, and how they everyday.

#### DATA COLLECTION:

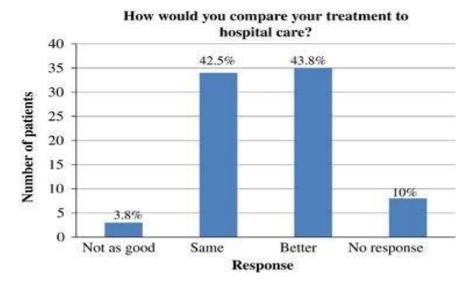
The proposed system for defining and recording preoperative complications associated esophagectomy provides infrastructure to

standardize international data collection and facilitate future comparative studies and quality improvement projects.

We gave more than 120 questionnaires and received 100 valid question with which we did the analysis.

#### **DATA ANALSYSIS and CONCLUSION:**

We use excel sheet to analysis data and we use simple random sampling to pick data. Convergent and discriminate was proved.



#### HIGHEST QUESTION

**QUESTION 1:** 

It is easy to communication with the other office staff in the practice-3.81

**QUESTION 3:** 

It doctor(s) is are appreciative of my work-3.88

### LOWEST OUESTION

**OUESTION 10:** 

We send practice information to patients when they schedule appointment-2.15

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DISARGEE

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DISAGREE

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NEUTRAL AGREE

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STRONGLY

**AGREE** 

#### **APPENDIX:**

About PRO in hospital: ITEMS STRONGLY

The staff is liked by the patients.

	DISTIGNED				110	KLL
It is easy to communication						
with the other office staff in						
the practice.						
I have opportunities to interact						
with the doctor(s).						
It doctor(s) is are appreciative						
of my work.						
My data are clearly defined.						
I have opportunities to get						
training to do my work.						
I enjoy the work that I do.						
My fellow staff members work						
as a team to foster a good work						
environment.						
	<del></del>			1		
I am well paid for my work.						
The benefits and pay I receive	ed are					
adequate.						
We great patients by name as s	oon as					
they enter our office.						
We send practice information						
1	hedule					
appointment.						
We treat each questions thorough	nly and					
courteously.						
We treat each patient as if he/sh	e were					
a guest in our homes.						
The staff and the doctors h						
friendly and caring towards paties	nt.					