



REVIEW

Making Nurses and Nursing Care Visible in Nigeria. A Review of Standardized Nursing Care Plan from the Nurse Len

Nijerya'da Hemşireleri ve Hemşirelik Bakımını Görünür Hale Getirmek. Hemşire Len'den Standardize Hemşirelik Bakım Planının Gözden Geçirilmesi

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Abstract

A standardized nursing care plan (SNCP) is a published universal action plan that specifies nursing care, and it has evolved into the standard in nursing practice for the betterment of healthcare globally. However, this nursing care plan's use can vary depending on the institutions thus limiting the use among developing hospitals in developing countries such as Nigeria. The scoping review sought to analyze, consolidate, and summarize data from the body of research on the use of standardized nursing care plans by Nigerian nurses. Searching for and combining research published between 2015 and 2019 involved using a scoping review technique based on Arksey and O'Malley. Google Scholar, PubMed, CINAHL, and MEDLARS Online, also known as the Medical Literature Analysis and Retrieval System Online, were among the databases that were searched. The number of items that might be included was 38. Standardized nursing languages in the form of NANDA-I were the mostly utilized nursing languages in many hospitals in the country, meanwhile, activities in nursing intervention classification were used by a few. However, nursing outcome classification was stated as nursing evaluation in many hospitals. Also, three categories of identified factors to SNCPs use were I. not having the right format of SNCP on the wards. II. Nursing and Midwifery Council of Nigeria not mandating its use. III. Hospitals not having a policy for the nurses to mandate its use. Addressing the core barriers and making the right format of SNCP available will promote its use in all hospitals in the country. The authors recommend that the Nursing and Midwifery Council of Nigeria should mandate its full adoption in documenting patient care in the hospitals.

Keywords: Advanced nursing process, Nigeria, standardized nursing care plan, nursing process, NANDA-I

Öz

Standardize bir hemşirelik bakım planı (SHBP), hemşirelik bakımını belirleyen yayınlanmış bir evrensel eylem planıdır ve küresel olarak sağlık hizmetlerinin iyileştirilmesi için hemşirelik uygulamalarında standart haline gelmiştir. Ancak bu hemşirelik bakım planının kullanımının kurumlara göre değişebilmesi, Nijerya gibi gelişmekte olan ülkelerdeki gelişmekte olan hastanelerde bu planın kullanımını sınırlamaktadır. Bu kapsam belirleyici derleme, Nijeryalı hemşireler tarafından standardize hemşirelik bakım planlarının kullanımına ilişkin araştırma grubundan elde edilen verileri analiz etmeyi, birleştirmeyi ve özetlemeyi amaçladı. 2015 ile 2019 yılları arasında yayınlanan araştırmaların aranması ve birleştirilmesi, Arksey ve O'Malley'e dayalı bir kapsam belirleyici derleme tekniğinin kullanılmasını içeriyordu. Google Scholar, PubMed, CINAHL ve Medical Literatür Analizi ve Çevrimiçi Erişim Sistemi olarak da bilinen MEDLARS Online, aramanın yapıldığı veritabanları arasında yer aldı. Dahil edilebilecek madde sayısı 38 idi. Ülkedeki birçok hastanede en çok kullanılan hemşirelik dilleri NANDA-I formundaki standardize hemşirelik dilleriydi, buna karşın çok az sayıda hemşirelik müdahale sınıflandırmasındaki faaliyetler kullanıldı. Ancak hemşirelik sonlanım sınıflandırması birçok hastanede hemşirelik değerlendirmesi olarak bildirilmiştir. Ayrıca, SHBP'lerin kullanımına ilişkin tanımlanan faktörlerin üç kategorisi şunlardır: I. Servislerde doğru SHBP formatına sahip olmamak, II. Nijerya Hemşirelik ve Ebelik Konseyi'nin kullanımını zorunlu kılmaması, III. Hastanelerin hemşirelerin kullanımını zorunlu kılacak bir politikasının olmaması. Temel engellerin ele alınması ve SHBP'nin doğru formatının kullanıma sunulması, SHBP'nin ülkedeki tüm hastanelerde kullanımını teşvik edecektir. Yazarlar, Nijerya Hemşirelik ve Ebelik Konseyi'nin, SHBP'nin hastanelerdeki hasta bakımını belgeleme konusunda tam olarak benimsenmesini zorunlu kılmasını önermektedir.

Anahtar Kelimeler: İleri hemşirelik süreci, Nijerya, standardize hemşirelik bakım planı, hemşirelik süreci, NANDA-I

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Introduction

The standardized nursing care Plan (SNCP) is a developing idea that ushers in a new era of nursing care. According to Kourkouta and Papathanasiou (1), nursing language has rarely been able to describe the same clinical condition in a straightforward, consistent, or dependable way.

The clinical information system must therefore use standardized languages to help clinicians with the documentation of nursing practice (2). The evidence-based tool, which is currently in use in intensive care settings in developed nations including the United States and Sweden, among others, has assisted in labeling and identifying the contributions of nursing to healthcare delivery systems and serving as a clinical protocol in these settings (3).

The SNCP is the name of this evidence-based clinical practice. The benchmark in nursing practice for the overall improvement of care has been standardized nursing care plans, which are published universal plans of action outlining nursing care (4,5). However, it is important to note that the formats of the nursing care plans can vary depending on the institutions (6).

In developed countries, research conducted has shown that the utilization of SNCP brought about glycemic control and slight diastolic blood pressure among patients living with diabetes (3). Also, clinical management and therapeutic commitment to chronic health conditions and reduction in drug-related costs among patients living with chronic diseases were improved with the use of SNCPs (3,7,8). SNCP use has been shown to have positive effects on patient safety and clinical outcomes, as well as a decrease in the frequency of hospital readmissions for patients with chronic illnesses (9).

The utilization of SNCPs and challenges encountered by nurses in Nigeria seems not to have been documented as well as the direct impact of SNCPs on patients' health. The adoption of SNCP enhances nurses' ability to plan patient care, leading to improved patient outcomes and treatments (10). Improved clinical care and therapeutic adherence in chronic patients are a few of these outcomes (3,7); also, drug-related expenses have been found to be lower (8,11). Azzolin et al. (7) found that using SNCP effectively improved the management of clients' in-home care by facilitating self-modification support, behavioral modification, prescribed medication, disease process, dietary counseling, telephone consultation, and energy conservation in heart failure patients.

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Aim

This scoping review aims to summarize findings from existing literature regarding the experiences of nurses in Nigeria with the use of a standardized nursing care plan.

Materials and Methods

This study followed the preferred reporting items for systematic reviews and meta-analyses (PRISMA) standard. To investigate the experience of nurses in the use of SNLs and SNCPs in the hospital and to organize the presentation of the results, the PRISMA checklist for scoping reviews (12) was utilized.

Without necessarily going through the formal procedure of a systematic review, scoping studies assist in summarizing important evidence on a topic (13). The information gained through scoping reviews is frequently used in practice, policy creation, and research (13,14). This process is known as the knowledge-to-action cycle. The scoping review methodology used in this study is based on Arksey and O'Malley's model (14) and includes six steps: Defining the research question, locating pertinent studies, choosing the best ones, charting the data, compiling, summarizing, and reporting the findings, and consulting with stakeholders.

Research on SNCPs and SNL experience among nurses that was published between 2015 and 2019 was the only type of study that qualified for inclusion. Since a wider perspective was desired, there were no geographical restrictions on eligibility. All studies concentrating solely on students were omitted based on the exclusion criteria used in the study population.

Investigations using qualitative and quantitative designs as well as literature reviews were eliminated in order to offer a larger diversity of investigations. For the purpose of finding pertinent papers, searches were made in four databases: Google Scholar, PubMed, Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Medical Literature Analysis and Retrieval System Online (MEDLARS Online).

The search was carried out between January and February 2019 using pertinent search terms like Nurs*, Nursing Process, Nursing Care Plans*, SNCP, "challenges to the utilization of Standardized care plan", Advanced Nursing Process", "Standardized Nursing Languages", and "Nigeria Nursing Process". Multiple suffixes were sometimes included in the search result via truncation (i.e., *). First, a general search was done using terms like "Nurs*", "Nursing Process", and "Nursing Care Plans". Boolean operators "AND" and "OR" were employed to, when considered essential, narrow down or broaden the search.

Examples of search terms were "experience of standardized Nursing Languages", "Standardized Care Plan", and "Nursing Process". Finding acceptable search phrases was helped by the Mesh thesaurus (15).

Despite being derived from Mesh terms (i.e., medical subject headings), CINAHL headings contain more terms that are connected to healthcare. Although there may be a slight difference in the subject headings between the two databases, the search terms used for this study were the same across both and included nursing process, standardized nursing language, the experience of nurses with standardized nursing care plans, and standardized nursing care utilization barriers.

Ethical Consideration

Since there was no actual contact with the subjects, no ethical approval was required. Statements on ethical topics are allowed in articles that qualify. The chance of identifying specific individuals was decreased by treating the data as an aggregate.

Results

A total of 520 items were found; 19 of them had duplicate content, and 366 more were eliminated because they were

irrelevant. A checklist for literature reviews from the Swedish Agency for Health Technology Assessment and Assessment of Social Services was used for quality evaluation (16). The evaluation involved assigning a score to each article based on various factors, including the degree of systematic errors, transferability, and precision. In order to be included in this review, only 38 publications had to meet the criteria for medium and high quality (see Figure 1).

Objectives, study population, study site, research question, methodology, and outcomes, i.e., experience with standardized nursing care plans, are all pertinent information that may be gathered from the publications. To identify barriers to SNCPs utilization, data were synthesized, mapped, and evaluated.

Table 1 lists a total of 38 papers that were considered for the review (i.e., 33 quantitative and 5 qualitative research). Numerous survey tools used in quantitative studies included questions about participants' demographics, nursing process, SNCP use, SNL use, and factors affecting SNCPs and SNLs use in the nursing process.

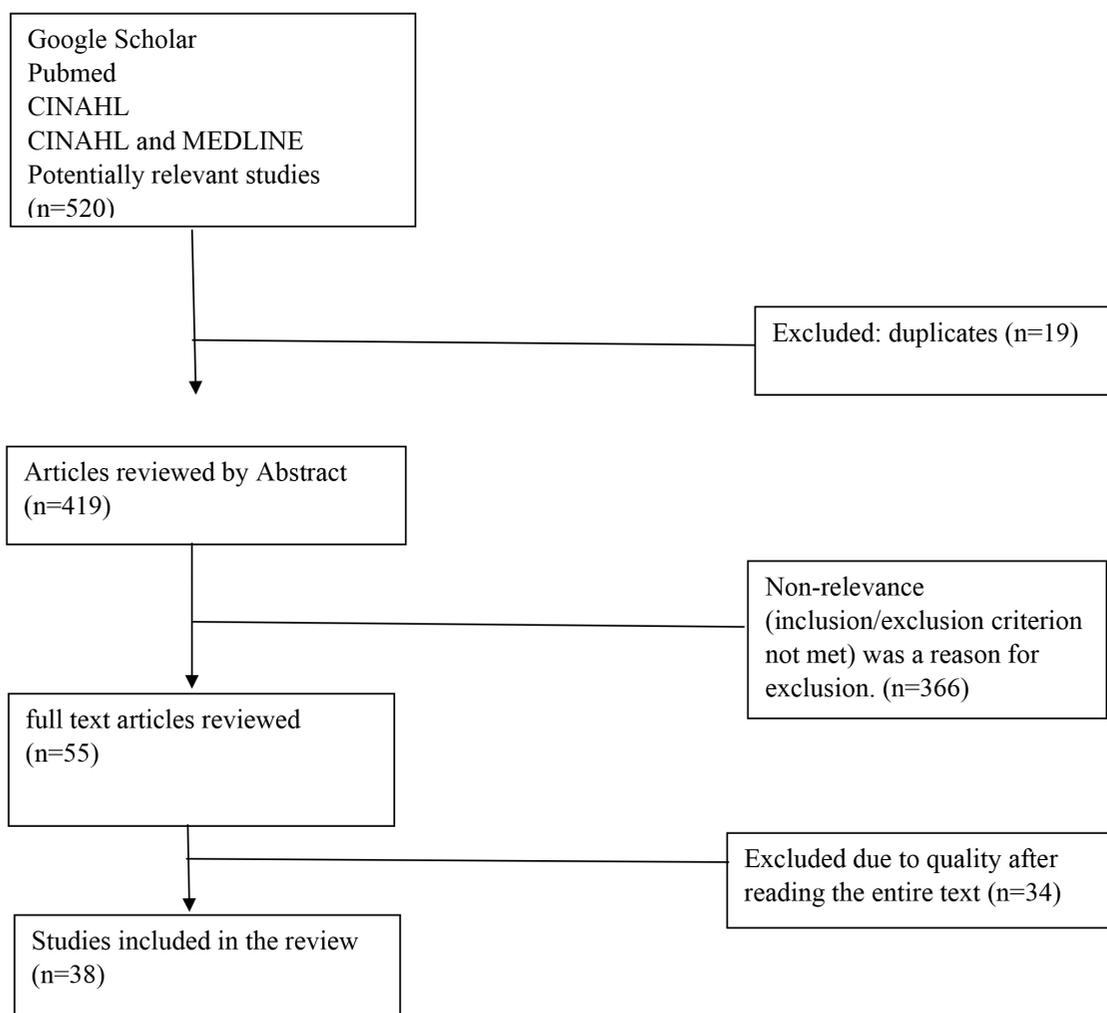


Figure 1.
Process flow Diagram for Searches

Table 1.
Provides an Overview of the Reviewed Studies

Author & year study	Objective	Design	Findings	Country
Adereti and Olaogun (2018)	To evaluate the effect of electronic and paper-based standardized nursing care plans (SNCPs) use on the quality of nurses' documentation	Quasi experimental design	Findings revealed improvement in documentation quality in the two wards after introducing SNCPs with higher quality scores in the electronic ward post-intervention.	Nigeria
Adeyemo and Olaogun (2013)	To assess factors that affect the use of the nursing process	Quantitative descriptive retrospective design	Findings revealed that inadequate knowledge, and institutional, and professional factors negatively influenced the use of the nursing process	Nigeria
Adubi et al., (2017)	To assess the documentation of nursing care before, during, and after the Standardized Nursing Language Continuing Education Programme (SNLCEP)	A retrospective record review design was used.	The study concluded that the SNLCEP had a significant effect on the quality of documentation of nursing care using Standardized Nursing Languages	Nigeria
Agyeman-Yeboah, Korsah, and Okrah (2017)	To assess the factors that influence clinical utilization of the nursing process at a hospital	Qualitative descriptive study	Findings revealed inadequate knowledge, the absence of a nursing care file, and low staffing levels affect the use of the nursing process	Ghana
Aseratie, Murugan, and Molla (2014)	To assess the factors affecting the implementation of the nursing process	Quantitative cross-sectional study.	Findings revealed that stressful working environments, high nurse-to-patient ratios and inadequate knowledge of the nursing process were factors that affected the implementation of the nursing process	Ethiopia
Amugitsi Isiaho, Amessa Assanga, and Wambaya (2019)	To assess the factors that influence the implementation of the nursing process among nurses in a referral hospital	Quantitative descriptive design.	Findings revealed that staff shortage, inadequate knowledge, and lack of material resources were major impediments to the implementation process	Kenya
Alemu and Kebede (2020)	To assess factors affecting the implementation of the nursing process among nurses in some government hospitals	Mixed methods research	Findings revealed that staff shortage, time allocation, and organizational factors (inadequate resources and low pay for many nurses) limited the use of the nursing process	Ethiopia
Baraki et al. (2017)	To assess factors associated with the implementation of the nursing process.	Quantitative cross-sectional study	Findings revealed that stressful working environments were negatively correlated to the implementation of the nursing process.	Ethiopia

Table 1. continued				
Author & year study	Objective	Design	Findings	Country
Cárdenas-Valladolid et al. (2012)	To evaluate the effectiveness of SNCP implementation, based on North American Nursing Diagnosis Association (NANDA) and Nursing Interventions Classification (NIC), in the improvement of metabolic, weight, and blood pressure control of type 2 diabetes mellitus (T2DM) patients.	A two-year prospective follow-up study	The findings revealed utilization of SNCP helped achieve glycemic control targets in poorly controlled patients with T2DM (HbA1c $\geq 7\%$). Diastolic blood pressure results were slightly improved in the SNCP group compared to the UNC group.	Spain
Cárdenas-Valladolid et al., (2018)	To evaluate the effectiveness of implementing (SNCP for improving blood pressure and low-density lipoprotein cholesterol in patients with poorly controlled type 2 diabetes mellitus at baseline	A four-year prospective follow-up study	More patients cared for using SNCP achieved blood pressure goals compared with patients who received usual nursing care.	Madrid, Spain
Conrad et al., (2012).	To identify the perceived user barriers to the documentation of nursing practice utilizing SNL in the EHR by ambulatory care nurse practitioners (NPs)	A researcher-developed survey	Respondents identified NP practice as a blend of medical as well as nursing care but NPs have not embraced the current SNLs as a vehicle to document the nursing component of their care, particularly in EHRs.	United States
Clarke (2017)	To assess the application of the nursing process and associated factors	Mixed method exploratory study.	Findings revealed that inadequate practical knowledge, work stress and lack of healthcare material were inhibiting factors.	Ghana
Edet et al., (2013)	To examine nurses' perception and use of the nursing process.	Cross-sectional descriptive survey.	Findings revealed that nurses viewed the process as beneficial; however, perceived workload, staff shortage, and insufficient material resources were barriers to implementation.	Nigeria
Folami et al., (2019)	To identify the factors that affect the use of the nursing process	Quantitative, descriptive design.	Findings revealed that a permanent increase in the number of patients is a major impediment in a context with low staffing levels.	Nigeria
Leoni-Scheiber et al., (2019).	To assess nurses' knowledge and their attitude towards the advanced nursing process	A cross-sectional, descriptive correlational study	Nurses demonstrated low levels of knowledge, positive attitudes, and an average advanced nursing process quality.	Switzerland

Table 1. continued				
Author & year study	Objective	Design	Findings	Country
Gonen (2017)	To identify the most frequent nursing diagnoses (ND) and their respective linkages with nursing outcomes (NOC) and interventions (NIC) performed by nurses caring for medical and surgical patients.	Document analysis study with a quantitative approach,	The result identifies NNN linkages that were selected by nurses in a real clinical environment, using an electronic clinical decision support system	Sao Paulo, Brazil
Odutayo et al., (2013)	To measure the effectiveness of an educational package on documentation of care among public health nurses.	A quasi-experimental design	There was a significant improvement in documentation of care	Nigeria
Ogunfowokan et al., (2013)	To explore the knowledge and perception of student nurses on the use of NANDA-I nursing diagnoses in the community setting	The study adopted a cross-sectional design	Knowledge and perception of the participants about the use of NANDA-I nursing diagnoses in the community were satisfactory.	Nigeria
Ojo et al., (2020)	To assess the perception of the nursing students about integrating standardised nursing language (SNL) into the nursing curriculum	Cross-sectional research design	Nursing students had a very good perception that SNL is important and should be offered as part of their course system in the institution.	Nigeria
Olsson et al., (2009)	To investigate the quality of standardized care plans and the extent to which they are used within Swedish in-hospital somatic care.	Reviewed document.	There was a lack of knowledge regarding what a standardized care plan is, and how such a document should emanate from evidence-based knowledge.	Sweden
Rabelo-Silva et al., (2017)	To assess the quality of the advanced nursing process in nursing documentation in two hospitals.	Cross-sectional study	The quality of nursing documentation was superior at hospital 1.	Sweden
Sani et al., (2017)	To examine the relationship between knowledge of standardized nursing languages and working experience among nurses in Sokoto, Nigeria.	A quantitative descriptive cross-sectional design	The study found that there is a significant difference between knowledge of standardized nursing language and working experience among nurses.	Nigeria
Setyaningrum et al., (2019)	To determine the effect of providing NANDA-I, NIC, and NOC (NNN) nursing care documentation systems training on the quality of nursing documentation	Pre-experimental study with pretest-posttest design without a control group.	Training in the NNN nursing documentation system could improve the quality of nursing documentation	Yogyakarta regional

Table 1.
continued

Author & year study	Objective	Design	Findings	Country
Gazari et al., (2020)	To explore the perception and utilization of the nursing process	Qualitative study	Findings revealed that nurses perceived the nursing process as scientific and important but failed to use it systematically.	Ghana
Glenn et al., (2020)	To improve the quality of student training by enhancing teaching modalities that suit the baccalaureate degree	Quasi-experimental study.	Findings revealed there is a need to improve the nursing care plan template and the nursing training in constructing quality nursing care plans.	Oman
Gusen et al., (2016)	To evaluate the perception and utilization of standardized electronic health records among nurses in Jos University Teaching Hospital (JUTH), Jos, Nigeria.	Descriptive survey	Findings revealed that the majority of the respondents had positive perceptions about standardized electronic health records.	Nigeria
Hagos et al. (2014)	To assess the application of the nursing process and evaluate the factors that affect its use.	Mixed methods design.	Findings revealed that nurses do not have adequate knowledge that enables them to fully implement the nursing process.	Nigeria
Shewangizaw and Mersha (2015)	To assess the factors that affect the implementation of the nursing process among nurses	Quantitative cross-sectional study.	Findings revealed that stressful working conditions and inadequate knowledge negatively correlated with the implementation of the nursing process.	Ethiopia
Mutshatshi et al., (2015)	To determine the experiences of nurses during the implementation of the nursing process in public clinical settings.	A qualitative phenomenological descriptive study	Findings revealed that inadequate knowledge and low staffing levels were barriers to implementation.	South -Africa
Mangare et al. (2016)	To determine the factors influencing the implementation of the nursing process.	Quantitative cross-sectional study	Findings revealed that training, time, administrative support, supplies, and staffing levels were major factors that influenced the implementation of the nursing process	Kenya
Mbithi, Mwenda, and Karonjo` (2018)	To evaluate the use of the nursing process among nurses	Quantitative cross-sectional study	Findings revealed that inadequate knowledge of the nursing process is an important factor hindering its effective use.	Ethiopia
Miskir and Emishaw (2018a)	To assess the determinants of the nursing process implementation in North Eastern Ethiopia.	Quantitative cross-sectional study	Findings revealed that nurses lack adequate knowledge with regards to the nursing process and this negatively influenced the way it was implemented	Ethiopia

Table 1.
continued

Author & year study	Objective	Design	Findings	Country
Mwangi, Meng'anyi, and Mbugua (2019)	To assess knowledge, attitude, practices, and hospital factors affecting the use of the nursing process	A quantitative, descriptive cross-sectional study	Findings revealed nurses' negative attitude, inadequate knowledge, and lack of facility support as some of the factors affecting implementation.	Kenya
Mutshatshi and Mothiba (2020)	To explore the practices of nurses during nursing process implementation.	Qualitative explorative descriptive	Findings revealed that nurses faced many challenges like inadequate knowledge, increased workload, lack of resources, and the time-intensive nature of the process.	South Africa
Ndayi, Kandolo, Matungulu, et al. (2017)	To evaluate the factors related to the experiences of nurses implementing the nursing process.	Qualitative study.	Findings revealed that adequate knowledge; availability of staff and staff motivation can positively influence implementation.	Democratic Republic of Congo
Ojewole and Samole (2017)	To evaluate the use of the nursing process in a hospital milieu	A quantitative descriptive retrospective design	Findings revealed that inadequate knowledge of the nursing process hindered implementation.	Democratic Republic of Congo
Opore et al. (2017)	To explore the perspectives of nurses and midwives two years post training on the nursing process.	Quantitative Survey	Findings revealed that additional training improved knowledge and ability to use the nursing process.	Ghana
Oronje and Munyasa (2018)	To assess the knowledge attitude and practice on the implementation of the nursing process in a clinical setting	A quantitative cross-sectional descriptive study	Findings revealed that those who received additional training were more likely to implement the nursing process than those who did not	Kenya
Soyinka and Salawu (2020)	To assess the determinants of nursing process utilization.	Quantitative descriptive design	Findings revealed that nurses' attitudes, knowledge of the process, and institutional factors significantly influenced proper utilization.	Nigeria
Vincent (2020)	To assess the knowledge, attitude, and practice of the nursing process among nurses	Cross-sectional descriptive study.	Findings revealed that nurses had a positive attitude towards the nursing process but staffing levels and workload are barriers to implementation. Nigeria	Nigeria

For research with a qualitative design, the interview guides included open-ended questions on whether SNCPs, SNLs, and the nursing process are discussed, as well as experiences, attitudes, challenges, and possible solutions. The articles were from Nigeria, Ghana, Ethiopia, Kenya, Spain, Yogyakarta, the USA, Switzerland, Brazil, Sweden, Oman, South Africa, Democratic Republic of Congo (see

Table 1). Findings revealed barriers experienced in SNCPs and SNLs use in the country. The three major categories of the experience were not having the right format of SNCPs on the wards, the Nursing and Midwifery Council of Nigeria not mandating the use of SNCPs, and hospitals not having a policy for the nurses to mandate the use of SNCPs.

Discussion

Our results demonstrate that the experiences of nurses in Nigeria with the adoption of a SNCP are consistent despite the many study contexts the studies considered in this scoping review and their peculiarities.

Format of SNCP on the Wards

Interesting literature reviewed shows that there are several challenges facing the utilization of standardized nursing language and standardized nursing care plans in practice, especially as it relates to developing countries such as Nigeria. The factors considered to be the main challenge by nurses include lack of practical skills in data collection, nursing diagnosis, and objective writing; attitudes of nurses towards the nursing process; lack of staff and equipment; uncondusive work environment such as frustrations about the failure to implement the nursing process (17,18) In a recently conducted qualitative study on challenges to the utilization of SNLs in the nursing process booklets in three tertiary health institutions in Nigeria. The findings from the study revealed that inadequate knowledge of SNLs, inadequate staffing, the high load of patients, lack of the write format of SNCPs on the wards and lack of motivation among nurses were the major challenges (19).

Non-mandate by Nursing and Midwifery Council of Nigeria

From the literature reviewed, in the case of Nigeria, Adereti and Olaogun (20) described SNCPs as the adoption of standardized nursing languages (North America Nursing Diagnosis Association International (NANDA-I diagnosis), Nursing Intervention, and Nursing Outcome) into the nursing process that is required in a clinical information system. The SNCPs sets out the basic standard of nursing care and can be used for patients with the same medical condition, for patients receiving similar medical treatment, or for patients with similar nursing problems. Adereti and Olaogun (20), posited that SNCPs offer safe nursing care in the wards that utilize them. Also, it has placed nurses in positions to independently apply the SNCP by observation, assessment, nursing diagnosis, planning, intervention, and evaluation of patients' care. The Nursing and Midwifery Council of Nigeria (N&MCN) guideline, revealed that the nursing process should provide the basis for the creation of standards for institutional practice (6). However, the N&MCN has not mandated the use of SNCPs in the hospital but the research that has been done in clinical settings shows that Standardized nursing language is utilized in some hospitals in Nigeria (21,22). The Nursing and Midwifery Council of Nigeria has started developments aimed at enhancing, fostering, and securing the position of nursing as a significant and dignified profession by using NANDA-I diagnostic in the nursing process (23). This is done by making it easier for standardized nursing languages (SNLs) to be used in nursing practice. The SNCP has been incorporated into the school curriculum and the Mandatory

Continuing Professional Development Programme (MCPDP), even though the Nursing and Midwifery Council of Nigeria has not yet formally adopted it.

Hospital Policy to SNCPs Use

Studies have shown that Standardized nursing language is utilized in some hospitals in Nigeria (21,22) however, there has not been a policy to enforce its use. In a study conducted in Nigeria's federal teaching hospitals, the utilization of Standardized nursing language enhanced nurses' documentation of care, thereby translating to improved quality of life in the patients (21). Adereti and Olaogun (20) affirm that SNCP could form a basis for electronic health records, which improves population health. Retainment has been difficult in some of these facilities due to hospital policy (non-enforcement of SNCPs by stakeholders of the hospitals). Although, some teaching hospitals still engage in the teaching of SNLs at the in-service training programs of their nurses. Although several submissions to the literature suggested that electronic health records (EHRs) would be introduced into healthcare institutions across the nation, no mention of nursing concepts in the EHR in public hospitals is made (2,24). While nursing services are crucial to inpatient care, other healthcare professionals occasionally use the data from the nurse's record as the foundation for their patient management decisions. The adoption of some of the in this review's variables and their adaptation to context-specific circumstances may lead to the use of SNCP and SNLs for nursing documentation. Additionally, reducing the uncertainty around the discussion and usage of SNCPs can be accomplished by identifying obstacles and implementing enabling factors.

It is important to note the study's advantages and disadvantages. Contrary to systematic reviews, scoping reviews typically do not evaluate the overall quality of the evidence; rather, they are helpful for summarizing important evidence (25).

While two large databases have been thoroughly searched for studies on health, it's still possible that pertinent studies (and their findings) haven't been included. Additionally, the screening of solely English-language papers may lead to the potential omission of pertinent study findings. Despite these drawbacks, this study's strength is the presenting of crucial data that are pertinent to both practice and education.

Conclusion

The use of SNCPs as a clinical protocol has been reported to have several benefits in developed countries (26-28). Meanwhile, the limited empirical study also shows that the introduction of SNLs which is the basis of SNCP has also improved nurses' quality of documentation in developing countries such as Nigeria (20,21). Therefore, the authors presume that the usability of SNCPs that are linked with NANDA-I, NIC, and NOC will ensure that nurses' quality of

documentation is improved and sustained. As well as the visibility of nurses in the healthcare sector.

Implications for Practice

A critical thinking approach to education and practice will encourage knowledge of and use of critique of SNCPs that have limits within the healthcare system. Adopting strategies (including routine training, the Nursing and Midwifery Council of Nigeria's requirement to use SNCPs, and hospital policy to support SNCP use) may promote SNCP utilization in healthcare facilities.

For nurses and other stakeholders to be challenged to accept full adoption in practice, it is crucial to adopt more critical thinking both in practice and training. A critical thinking skill approach will be useful for nurses to achieve meaningful use of SNCPs and its use will hopefully continually boost nurses' documentation and patient care enhanced without bias.

Recommendations

The SNCP is a new development in nursing practice in Nigeria that serves as an advanced nursing process in evaluating the quality of documentation of nurses. On the strength of SNCP as documented in literature the following recommendations are made:

- There is a dire need to inculcate standardized nursing languages into the curriculum of undergraduate in all the schools in the geopolitical zones at the Baccalaureate and graduate levels in Nigeria.
- Nurse auditors in hospitals should be re-trained on the use of nursing diagnostics and standardized nursing care plans. This will help in eliminating the common errors that, nurse auditors themselves make in the process of teaching the nurses about the uses of standardized nursing languages.

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