

Thesis Title	Development and Evaluation of Clinical Nursing Practice Guideline of Tactile Stimulation for Preterm Infants in the Neonatal Moderate Care Unit
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Major Program	Nursing Science (International Program)
Academic Year	2011

ABSTRACT

This developmental study aimed to develop and evaluate a clinical nursing practice guideline of tactile stimulation (CNPG-TS) for preterm infants in the Neonatal Moderate Care Unit (NMCU), Songklanagarind Hospital. The CNPG-TS was developed based on related scientific evidence regarding tactile stimulation and a group discussion with five CNPG-TS development panelists. It consisted of five guidelines, five sub-guidelines, and 95 statements: 1) Criteria to select preterm infants for providing appropriate tactile stimulation techniques (5 statements), 2) Appropriate environmental management in providing tactile stimulation to preterm infants (3 sub-guidelines, 36 statements), 3) Evaluating preterm infants readiness and management before receiving tactile stimulation (7 statements), 4) Evaluating the behavioral and physiological responses of preterm infants during and after receiving tactile stimulation and management (6 statements), and 5) Methods of tactile stimulation (2 sub-guidelines, 41 statements). The content validity of the developed CNPG-TS was assessed by three experts. The practicability of the developed CNPG-TS was assessed by 14 nurses and 40 preterm infants using the nurse's practicability questionnaire and was evaluated based on criteria for testing process standards utilizing Mason's technique (Mason, 1994). Fourteen nurses employed the developed CNPG-TS

on 40 preterm infants divided into 4 sub-groups: 10 preterm infants in incubators who received the Gentle Human Touch (GHT) (group 1), 10 preterm infants in incubators who received the Multisensory Stimulation: Auditory, Tactile, Visual, and Vestibular (ATVV) (group 2), 10 preterm infants in cribs who received GHT (group 3), and 10 preterm infants in cribs who received ATVV (group 4). The data was analyzed in terms of frequency and percentage.

The results showed that all nurses could practice 100% accurately 86 of 95 statements of the CNPG-TS with all preterm infants. There were 6 statements (statement 5, sub-guideline 2.3; statement 16, sub-guideline 2.3; statement 17, sub-guideline 2.3; statement 2, guideline 3; statement 7, guideline 3; and statement 6, guideline 4) that only 20-80% of nurses could practice because of limited occurrences of those events or situations. The other three statements (statement 6, sub-guideline 2.3; statement 7, sub-guideline 2.3; and statement 5, guideline 3) were not available to be practiced because of no actual occurrences of those events or situations. However, these nine statements were still included in the CNPG-TS as optional statements. Thus, the developed CNPG-TS for preterm infants can be used as a tool for NMCU nurses to make decisions and to control the quality of providing developmental care through effective tactile stimulation to preterm infants.