Healthcare and nursing

[Name of the Writer]

[Name of the Institution]

**Analyzing Research Articles**

**(Qualitative Research)**

**Background of the problem**

The background or the purpose of the study was to examine the relationship that exists between patient readmittance and the patient compliance that includes both patient-related setting or the role of a healthcare center (Hayes, et al. 2015).

**Review of the Literature**

Heart Failure care in Canada was used as a source that can help to collect related literature. It was meant to identify the appropriate resources that are allocated in hospitals as well as the community that is found to be posing a serious threat to the health of the patients suffering from chronic heart failure. (Hayes, et al. 2015).

**Data Analysis**

Modified thematic approach as used to analyze the collected data. It comprises of three major parts such as, familiarization which was followed by data coding and it was followed by the identification of underlying theme. This inductive approach was designed to get an in-depth analysis of the data that was collected.

**Methodology**

Qualitative survey technique was used to collect data. This technique involved semi-structured telephonic interviews that were conducted with administrators of healthcare providers and the other people who are linked with the tertiary care of the patients in Canadian provinces. Sampling technique involved a purposive sampling strategy that enrolled maximum variation to obtain diverse opinion and perspectives. However, the participant has to have experience of five years in the field of healthcare (Hayes, et al. 2015).

**Evaluation**

After a review of the research, it is asserted that the researcher has proposed evidence similar to the proposed outcome. All the four areas of the research journal adhere to the outcomes and they are directly linked with the result because the outcome was proposed in accordance with the views of healthcare professionals (Hayes, et al. 2015).

The implication of future research was more oriented towards patient advocacy that refers to the recruitment of health care providers in a community setting. It is asserted that this implication is a bit diverging because the core of the study was referring to the healthcare professionals and the role of professionals is more limited to the hospital setting. Community approach is another dimension which is a bit misdirecting. So, it can be said that the idea of the future implication of the research is not directly related to the context and content of the four implications mentioned in the research (Hayes, et al. 2015).

**Protection of Human Subjects and Culture Implications**

Taking into account the necessity of ethical considerations, it is found that the study was submitted to the Institutional Research Boards for the approval of ethical considerations. Moreover, the participants of the research were also offered with research honoraria with an aim to ensure the application of ethical consideration. It is evident that the two frameworks are equal representative of the protection of human subjects and the cultural implications because that are included in the ethical considerations. Approval from the Institutional Research Board asserts that all the ethical and moral implications are addressed.

**Strengths**

One of the major strength of this research is the evaluation of data and the techniques that are used for the evaluation of data, because quality research is sometimes assumed to present flawed data.  
**Limitation**

One of the significant limitations that are found in this research is the area in which research was conducted. There are several chances of the manipulated data because of the large number of sample population. If there had been a limited count, then the research would have been more effective.

**Current Nursing Practices**

The current nursing practice is heterogeneous in its context. There are different acre models that are used to address in lowering the readmittance of patients who are suffering from chronic heart disease. Moreover, these models are directed by different discrepancies to age and gender.

**Quantitative Research**

**Background of the problem**

There is a large ratio of people who are suffering from different diseases related to the heart where half of the population is found to be readmitted suffering from heart disease. There are several preventive strategies that are introduced to address the readmittance of patients, where those strategies are not productive in terms of their results (Brittany, 2014). It is also added that the cause of heart disease plays a major role in determining the causative agents that can facilitate or act as a cause of readmittance in the hospital. This study deals with the identification of the causative agents for which palliative care can be given with aspect to that disease and it can act as a guide to ensure that the ratio of readmittance of the patient can be reduced and controlled.

**Review of the Literature**

The literature comprises of articles addressing the causes of heart failure and how palliative care is used to treat heart failure. For better evaluation, the content was classified into four major categories i.e. life quality and healthcare, organizational framework analyzing heart failure, experiencing the symptoms of heart failure after getting discharged from hospital and the burden of patient or caregiver (Brittany, 2014).

**Data Analysis**

The section of data analysis was classified into two main phases. Phase I referred to the collection and then the examination of the questionnaires. The questionnaires were evaluated on a scale from 0-6. In phase II, information collected from questionnaires was classified into different themes that were related to or different from each other. After that, the results collected from phase II were sued to determine the role of palliative care in addressing the readmittance of patients in hospitals (Brittany, 2014).

**Methodology**

Qualitative study design was used to define, test and then analyze the cause-effect relationship between different variables. The study was conducted by using ‘Minnesota Living with Heart Failure Questionnaire’ so as to define and determine the symptoms associated with heart failure.

**Evaluation of the article**

After an exegetical analysis of the article, it can be asserted that the implications mentioned in the introduction sections are directly and completely addressing the perceived and then the calculated outcomes. The evidence proposed in the initial section of articles is completely addressed in the form of outcomes.

**Protection of Human Subjects and Culture Implications**

With the text of the journal, there is no section in which ethical considerations are addressed. Although it is one of the most significant and important section of any kind of research. Still, there is no account dealing with the cultural implications and other ethical considerations that are associated with the participants.

**Strength**

One of the major strength of the research article is quoting the ideologies of the participant. It authenticates the research by adhering to the type of information that is conveyed by the text. Usually, studies do not quote the direct information from the participants and it is a kind of gap because there is no direct approach to the authenticity of the information on which decisions are made.

**Limitation**

Lack of ethical considerations and any approach that could define ethical considerations is one of the major approaches because it hampers the authenticity of the research. Although interview questions are designed in such a way that they can address cultural or ethical consideration until it was mandatory to add consent or implication of ethical considerations.

**Current Nursing Practices**

Going critically through the text, it is asserted that the there is no clear identification of the current practices but the identification of the issues highlight that the healthcare administration has been using traditional approaches such as recommendations and prescriptions to teach patients about the safety measures that they should take in order to keep themselves healthy.

References

#### Hayes, S., Peloquin, S., Howlett, J., Harkness, K., Giannetti, N., Rancourt, C., & Ricard, N. (2015). A qualitative study of the current state of heart failure community care in Canada: what can we learn for the future? *BMC Health Services Research*, *15*(1). doi:10.1186/s12913-015-0955-4

#### Brittany farmer, (2014) *Pdfs.semanticscholar.org*. Retrieved 18 September 2019, from <https://pdfs.semanticscholar.org/1c78/3ac41813a51ae1bcb3e7cfead9d24cafec56.pdf>