

Analysis of the Application Effect of Flexible Management Concept in Nursing Management of Psychiatric Hospitals

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Abstract: *Objective:* To explore the application value of flexible management concepts in the nursing management process of psychiatric hospitals. *Methods:* This article selects inpatients in a psychiatric hospital as the research object. The inclusion time is between February 2024 and October 2025. According to statistics, a total of 60 patients are included in the above patients. They are divided into 2 groups according to the order of admission time, including: control group (admitted from February 2024 to December 2024, $n = 30$ cases), experimental group (admitted from January 2025 to October 2025, $n = 30$ cases); during the clinical treatment stage, routine nursing management was provided to the control group, and nursing intervention under the flexible management concept was provided to the experimental group. The final effects were compared, including: the quality of staff nursing management, the incidence of adverse events, and the satisfaction of inpatients. *Results:* (1) The quality of nursing management of psychiatric hospital staff was analyzed. In terms of basic care, safety management, nursing documentation, and patient education, the experimental group scored higher than the control group, $P < 0.05$; (2) In the incidence of adverse events among inpatients, the ratio was 26.67% in the experimental group and 6.67% in the control group. The comparison results showed that the experimental group was lower, $P < 0.05$; (3) Nursing management satisfaction comparison, (76.67%) VS (96.67%), the experimental group was higher among inpatients, $P < 0.05$. *Conclusion:* Nursing intervention under the concept of flexible management is clinically important. For inpatients in psychiatric hospitals, it can reduce the incidence of adverse events and improve satisfaction. At the same time, the implementation of the above program can also improve the work quality of nursing staff and has significant promotional value.

Keywords: Psychiatric hospital; Nursing management; Flexible management concept; Adverse events; Satisfaction; Effect analysis

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1. Introduction

In recent years, with the rapid development of the social economy, people's life and work pressure are relatively high. Against the above background, the incidence of mental illness has shown an increasing trend year by year. For patients, it will seriously affect their physical and mental health^[1]. After detailed analysis, it was found that the typical symptoms of patients with mental illness include: hallucinations, delusions, thinking disorders, difficulty concentrating, memory loss, intelligence decline, mood swings, volitional behavioral disorders, consciousness disorders, etc. In the continued

progression stage, some will also engage in self-mutilation and suicide behaviors, which are highly harmful [2]. In the process of clinical treatment, conventional management can maintain the basic nursing order, but it is poorly targeted and cannot meet the other needs of patients. The proposal of flexible management concept fully highlights the “people-oriented” concept. This model focuses on individual differences and emotional communication, and can better guarantee nursing services and improve patient satisfaction through flexible and comprehensive nursing intervention [3]. In view of this, this article will sample and analyze inpatients in a regional psychiatric hospital from February 2024 to October 2025, aiming to explore the content and implementation effects of nursing intervention under the flexible management concept. The details are reported below.

2. Clinical data and methods

2.1. General information

The research subjects are all from psychiatric hospitals, a total of 60 cases, and the selection time is from February 2024 to October 2025. During the follow-up treatment stage, all inpatients need to be grouped in time. The guiding principle is: the order of admission time. The grouping results are: control group and experimental group. The information is as follows. Control group: 30 cases were included. In terms of gender distribution, the number of female patients and the number of male patients were 14 and 16, respectively. In terms of age, they ranged from 24 to 65 years old, with an average of (44.58 ± 2.37) years old. After counting the course of the disease, they ranged from 2 to 7 years, with an average of (4.45 ± 0.32) years. Experimental group: 30 cases were included. In terms of gender distribution, the number of female patients and the number of male patients were 15 and 15, respectively. In terms of age, they ranged from 26 to 64 years old, with an average of (45.09 ± 2.11) years. After counting the course of the disease, they ranged from 2 to 8 years, with an average of (5.01 ± 0.19) years. The above research information (gender distribution, age, disease duration) was compared in a balanced manner, and there was no difference between the two groups of hospitalized patients, $P > 0.05$.

Inclusion criteria: (1) The hospital ethics committee agrees with this study; (2) All patients have gone through hospitalization procedures, and various clinical examination results are accompanied by varying degrees of psychiatric symptoms; (3) Inpatients and their families are fully aware of the purpose and process of this study, and have signed the consent document.

Exclusion criteria: (1) People with malignant tumors; (2) Patients with severe aggressive behavior; (3) Inpatients with severe organic lesions in liver and kidney function test results; (4) Inpatients who dropped out of the study due to subjective and objective factors; (5) Inpatients with immune deficiency and severe infectious diseases.

2.2. Method

Control group: Routine nursing management was adopted, including continuous observation of disease symptoms and vital signs of inpatients, supervising patients to take relevant drugs on time and in the right amount, recording drug reactions, and providing symptomatic intervention in case of accidents.

Experimental group: Adopt the nursing intervention under the flexible management concept. The main contents are:

- (1) Create a nursing management team. Under the leadership of the head nurse of the department, staff with rich work experience and high enthusiasm for work are selected to create a team. Secondly, professional training is arranged. The core contents include: common characteristics of mental patients and key points of care. After the theoretical information training, practical training must be arranged to improve the overall ability of the staff.
- (2) Improve the system. Analyze the actual situation of the psychiatric hospital and then formulate a flexible management system. During this process, a flexible scheduling system can be developed based on the number of patients and the severity of the illness, and the working hours of nursing staff can be reasonably arranged to avoid overwork. At the same time, the psychiatric hospital can also improve the supervision and management system, intervene through corresponding groups, check staff performance from time to time, and make comprehensive

evaluations based on patient descriptions.

- (3) Emotional support. During the treatment of inpatients, their moods fluctuate greatly under the influence of multiple factors, and they are prone to other bad behaviors. Clinical nurses need to pay great attention to this, proactively communicate with patients, ask patients about their inner thoughts, and implement targeted counseling; and during the communication process, nurses should pay more attention to their own attitudes and language expressions, fully respect and understand the patients, and then play soothing music for the patients, guide the patients to carry out meditation training, and help the patients relax themselves. In addition, for some patients whose conditions are relatively stable, the department can organize related entertainment activities, such as chess games, chorus, dancing, etc., so as to better enrich the patients' hospital life and divert their attention.
- (4) Knowledge mission. It is carried out when the condition of inpatients is relatively stable. During this process, the education content includes: disease triggers, symptoms, and the advantages of drug treatment. During the education period, nursing staff can promptly distribute corresponding brochures and then use one-on-one communication mode to accurately deliver the information, carefully answer questions raised by patients or family members, and correct misconceptions.
- (5) Environmental construction. Focusing on the ward where the patient is located, during clinical intervention, staff need to clean, disinfect, and open windows for ventilation every day to ensure fresh air; at the same time, the temperature, humidity, and light in the ward can be adjusted based on the actual situation to optimize the patient's self-experience. In addition, due to the special type of disease, nursing staff need to carefully check every corner of the ward and remove dangerous items in time, such as fruit knives, scissors, ropes, etc.
- (6) Summarize improvements. During the practice of this nursing plan, the head nurse needs to hold corresponding group meetings regularly. During this process, the group members should report in detail the problems and patient suggestions during this stage, organize the above information for centralized discussion, and formulate corresponding improvement plans.

2.3. Evaluation indicators

- (1) Count the differences in the quality of nursing management between the two groups. The specific dimensions include: basic nursing, safety management, nursing documentation, and patient education; the total score for each dimension is 25, and the level of the measured data is directly proportional to the quality of nursing management. When surveying this indicator, 12 clinical staff members can be selected for analysis to summarize the final results of different management models.
- (2) Among inpatients in psychiatric hospitals, compare the incidence rates of adverse events. Common types include: falls, bed falling, and aggressive behavior.
- (3) To compare the satisfaction of inpatients, the main levels are: very satisfied, basically satisfied, and dissatisfied; during clinical investigation, the hospital's self-made percentage scale can be used for analysis. In the process, the reference content includes: medical staff's appearance, service attitude, professional level, etc. The specific standards are: very satisfied, basic satisfaction standards are: ≥ 85 points, 70–84 points, and the dissatisfaction standard is: < 70 points.

2.4. Statistical analysis

SPSS25.0 software analyzes the data. After retrieving the measurement data and count data of this study, the t and χ^2 tests are used, respectively. The above information is represented in the form of (mean \pm SD), (%). When $P < 0.05$, it proves that the difference between the groups is statistically significant.

3. Results

3.1. Quality of nursing management

Statistics were conducted on the quality of staff nursing management, and the scores of the experimental group were higher, $P < 0.05$. See **Table 1** for details.

Table 1. Comparison of the quality of nursing management between the control group and the experimental group (points, mean \pm SD)

Group	Basic care	Security management	Nursing documentation	Patient education
Control group ($n = 12$ people)	17.96 \pm 2.13	18.05 \pm 2.04	18.01 \pm 1.97	17.93 \pm 2.09
Experimental group ($n = 12$ people)	22.56 \pm 1.87	22.48 \pm 1.59	22.33 \pm 1.71	22.39 \pm 1.55
t	5.622	5.933	5.737	5.938
P	0.000	0.000	0.000	0.000

3.2. Incidence of adverse events

Among inpatients in psychiatric hospitals, the incidence of adverse events was lower in the experimental group, $P < 0.05$. See **Table 2** for details.

Table 2. Comparison of the incidence of adverse events between the control group and the experimental group (%)

Group	Fall	Fall out of bed	Aggressive behavior	Total (%)
Control group ($n = 30$ cases)	3 (10.00)	2 (6.67)	3 (10.00)	8 (26.67)
Experimental group ($n = 30$ cases)	1 (3.33)	0 (0.00)	1 (3.33)	2 (6.67)
χ^2	-	-	-	4.320
P	-	-	-	0.038

3.3. Inpatient satisfaction

Compared with the control group, the inpatient satisfaction in the experimental group was higher, $P < 0.05$. See **Table 3** for details.

Table 3. Comparison of inpatient satisfaction between the control group and the experimental group (%)

Group	Very satisfied	Basically satisfied	Not satisfied	Total satisfaction (%)
Control group ($n = 30$ cases)	12 (40.00)	11 (36.67)	7 (23.33)	23 (76.67)
Experimental group ($n = 30$ cases)	16 (53.33)	13 (43.33)	1 (3.33)	29 (96.67)
χ^2	-	-	-	5.192
P	-	-	-	0.023

4. Discussions

Psychiatric hospitals, as a relatively special medical place, have relatively difficult internal nursing work; after detailed analysis, it was found that the patients admitted to the hospital have relatively complex conditions, severe cognitive impairment and behavioral disorders, low treatment cooperation, and are suffering from great psychological and physical

pain. Therefore, in the clinical management process, relevant personnel need to comprehensively analyze and introduce effective models to meet the diverse needs of patients and ensure the best prognosis^[4].

The results of this study show: (1) After analysis by psychiatric hospital staff and statistics on nursing management quality, the experimental group scored higher, $P < 0.05$; (2) The incidence of adverse events among inpatients was lower than that in the control group (26.67%), lower in the experimental group (6.67%), $P < 0.05$; (3) After intervention by different management models, the satisfaction of inpatients was 76.67% and 96.67% respectively. The comparison results showed that the experimental group was higher, $P < 0.05$. The reason analysis is: nursing intervention under the flexible management concept can be applied to inpatients in psychiatric hospitals. In specific practice, individual differences and emotional needs of patients can be fully considered, and the overall effect is accurate. Among them, establishing a nursing management team and strengthening training measures can better enhance the staff's awareness of self-responsibility and improve their professional level and overall ability^[5]; at the same time, the improvement of the flexible scheduling system and the supervision and management system can ensure adequate rest time for staff, thereby improving work efficiency. For hospitalized patients, clinical intervention is required through active communication and targeted comfort. The purpose is to: reduce the patient's psychological burden and improve negative emotions; recreational activities after the condition is stable can also better enrich the patient's hospital life, distract the patient's attention, and cultivate the patient's social ability; disease knowledge education measures can effectively correct misconceptions of hospitalized patients and family members, and can improve medication cooperation^[6]. In addition, during hospitalization, it is clinically necessary to strengthen the management of the ward where the patient is located, and intervene in terms of cleaning, adjusting temperature and humidity, so as to better increase patient comfort; and strengthening inspections and removing hazardous items can also effectively prevent adverse events and improve the safety of patient hospitalization. Regular summaries can identify problems on time and effectively solve them through group meetings, thereby achieving the goal of a "virtuous cycle", better improving the symptoms of inpatients in psychiatric hospitals, and promoting recovery^[7].

5. Conclusion

To sum up, in the nursing management process of psychiatric hospitals, the nursing intervention under the flexible management concept is effective and can better improve the quality of nursing staff's work. More importantly, this management model can also reduce the incidence of adverse events in inpatients and ensure the level of patient satisfaction. It is worth vigorously promoting in clinical practice.

Disclosure statement

The author declares no conflict of interest.

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