



Review article

Application of home health nursing abroad: A literature review

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ABSTRACT

Currently, with advances in medical science, the average lifespan of citizens is gradually increasing worldwide, resulting in the emergence of an aging society. Aged patients are especially prone to suffering from various chronic diseases, and many elderly patients select to receive home-based care. Thus, professional care in elderly patients' homes is needed, which also represents a mark of social development. Today, home health nursing is widely applied, including nursing of post labor mothers and their infants, and osteoporosis patients, among others. The aim of the present study was to explore the home health nursing model and its applicable range, as well as existing problems and the impact of the model in the domestic settings.

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1. The concept and development of home health nursing

1.1. The concept of home health nursing

Home health nursing is the practice of registered or licensed nurses providing professional care for patients in the patient's home. Home health nursing is different from home nursing in that home health nurses are licensed professionals, while home nursing may involve non-professional caregivers.

1.2. The development of home health nursing

Home health nursing is widely applied in the care for a variety of types of patients, including elderly patients with disabilities caused by various chronic diseases, such as diabetes, hypertension, coronary heart disease, osteoporosis, cognitive impairment and dementia, and hip or knee fracture surgery. These patients usually require long-term, comprehensive, meticulous care and also need interdisciplinary care to meet their needs. Home health nursing is also applied to maternal and infant care, including nursing and prevention of postpartum depression, and promotion of normal development of infants. In California, forms of home care include the In-Home Supportive Services, and Long-term Care Services and

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Supports¹; in Korea, the types of home care vary, including hospital-based home nursing services, customized visiting health services and long-term care insurance-based visiting nursing services. The first type is home health nursing, in which the participating nurses are specialists with a master's degree, while the latter two are home nursing. These types of home care have different target patients.²

Several new problems have emerged from home care practices, such as inability to meet fully the demand of the patients who have not only physical care needs but also psychological and social care needs, which is especially true among elderly patients with chronic diseases. Therefore, when perfecting the mechanism of this type of care, more comprehensive needs and social supports should be considered, such that the best nursing services are provided for patients. Additionally, this type of care system should be diversified to meet the needs of patients with various illnesses and conditions.

2. The specific forms of home health nursing and their implications

In Korea, home care includes several formats: (1) hospital-based home nursing services. For this type of service, users are selected by doctors during hospitalization, and patients typically have a specific condition, such as postoperative patients or patients with chronic disease who were discharged early from the hospital. These patients are usually elderly or are new mothers and newborns. The nursing personnel engaged in this type of care are specialists with a master's degree. (2) Customized visiting health services. This type of care requires identification of people in need and provides them with nursing guidance, such as education, management services, and health promoting via home visits. (3) Long-term care insurance-based nursing service. This type of targeted patient identification is based on the daily life and health conditions of the patient. The latter two involve home nursing without special requirements.² Postpartum women and newborns are the main service users of home health nursing. Postpartum depression is a common problem that occurs a few months after delivery, and can affect the baby's development, behavior and psychological, physiological, and cognitive development. A randomized controlled trial showed that home health nursing could improve maternal-infant interaction and mitigate postpartum depression through home visits, with the puerperal quickly returning to normal and an all-round improvement in the development of infants.³

One randomized controlled trial showed that effective postpartum home visits from nurses can effectively prevent emergencies and promote positive parenting, which is cost-effective.⁴ In nursing processes, high-risk first-time mothers should be constantly evaluated and effective nursing should be provided in a timely fashion.⁵ One study identified that we should improve nurses' knowledge, skills and the overall level of care for elderly patients with chronic diseases. Nurses should give full consideration to all aspects of needs and observe the physiological, psychological, and social supportive problems to provide better care.⁶ A randomized controlled trial demonstrated that family visits combined with telephone calls can reduce hospital readmission rate compared with telephone calls only.⁷

A randomized controlled experiment showed a positive effect of home health care in the management of diabetes.⁸ Home health nursing was effective in preventing skin tears.⁹ Additionally, for home health care nurses, the ability to manage general medication and multiple medication, as well as the ability to evaluate high-risk fall patients, are highly important.^{10–12} Furthermore, in home health nursing, professional nursing staff should master various tasks, including internal medicine and surgical nursing skills.¹³ Home health nursing also plays a vital role in hospice care

patients, and providing spiritual care for terminal patients is valuable.^{14,15} Venous leg ulcers are also a symptom that is important for home health nurses to manage.¹⁶

3. Problems in home health nursing

An American study indicated that there is insufficient care for patients with osteoporosis using home health nursing; only 34% of patients with a high risk of fracture received appropriate treatment, and those who had additional comorbidities received less treatment.¹⁷ In recent years, along with the aging of the population, the number of patients with osteoporosis has increased. Therefore, the proper care and treatment of osteoporosis patients is an important public health issue. A study involving the community and home health nursing of patients with impaired cognitive function suggests that we often cannot discern the development of delirium and dementia in a timely manner. Cognitive impairment and dementia substantially affects physiological and psychological health and quality of life. There are some patients with cognitive impairment who have not yet developed dementia, and effective nursing is a critical component of care for those types of patients. The home health nurses should conduct effective and meticulous observations combined with the use of a high sensitivity scale for simple measurement and early observation of possible problems, thus enabling corresponding nursing interventions and provision of medical guidance.¹⁸ A qualitative study conducted in Norway showed that from the perspective of home health nursing managers, following the home health care model caused a dilemma: comprehensive nursing care of patients with chronic diseases who need long-term home care should be both continuous and well-rounded; however, to provide a sufficient level of care, the nurses work are likely to experience fatigue. Therefore, it is important to achieve a balance of the needs of both nurses and patients for successful home care. The home health care working model involves rotation of different health care teams every 3 months for each patient. Some nurses and patients are reluctant to change because they are familiar with each other and have adapted to a particular nursing pattern. However, continuous patient care with the same care team presents some problems. For example, nurses who have become highly familiar with their patients that they may be more likely to miss the identification of dormant health problems. The goal of regular replacement of the care team is to enable frequent overall re-evaluation of the patients, and thus provide better continuous services.¹⁹

A qualitative study about care of disabled elderly patients in California demonstrated that provision of home support services for such patients and their families are vital. However, problems in the nursing model exist; for example, the tasks for caring for patients are extensive and may include some basic care, such as dressing and cooking, and the needs of many low-income elderly patients cannot be fully satisfied. Additionally, the psychological and social health needs of a patient may be ignored during the process of care. Sometimes, in addition to professional nurses, a patient's family members will also undertake certain care tasks. However, family members have other obligations in their work and lives, causing this type of care structure not to be stable and many times the care needs of the patients are not fully met.¹

4. Foreign home health nursing model for domestic enlightenment

In our country, many studies have been conducted on home care for patients with various diseases, such as high blood pressure, bronchial asthma in children, and vascular dementia. Care for those patients included specific care, general medication guidance and

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