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# How do nurses recognize subtle signs of stroke and minimize serious damage in older residents of nursing homes?



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**Summary** This qualitative study aims to explore the perceptions of nurses in nursing homes about signs of stroke and their experiences with older residents who are at a high risk for stroke. Data were collected through in-depth interviews with 31 nurses from 11 nursing homes in South Korea. Data were analyzed concurrently with data collection through inductive content analysis. The findings consisted of three themes: (1) maximizing experiential knowledge: classifying and comparing in daily work; (2) minimizing further severe cerebral damage: detecting something strange; and (3) perceiving barriers to caring for older residents with stroke. The nurses used their clinical experience and personal history, and maximized their knowledge to identify high-risk residents and recognize the onset of stroke. Through continuous monitoring, they became aware of subtle changes in the condition of older residents with an underlying illness. After timely recognition, prompt transfer to an emergency department was important to minimize serious damage with evidence-based hyperacute treatment. Nurses highlighted that linking with family members might be important for them to understand nurses' actions and accept emergency situations. However, the nurses perceived limited resources and lack of authority as barriers to stroke care. Poor knowledge about subtle symptoms was also a substantial barrier to stroke care. Understanding the nurses' perceptions may be an initial step toward developing well-defined clinical protocols of effective stroke care in nursing homes.

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## 1. Introduction

Stroke is a leading cause of death and one of the most common chronic and disabling disorders among the world-wide aging population (*World Stroke Organization, 2012*). In South Korea, the prevalence of stroke is relatively low (4.1%) compared with hypertension (64.7%) and diabetes (21.4%) among persons 65 years old and older (*Ministry of Health & Welfare, 2013*); however, stroke, surprisingly, has been reported to be the second or third leading cause of death after cancer and heart disease among older adults (*Statistics Korea, 2012*). Moreover, because of the rapidly increasing number of older persons, stroke is a significant health issue in South Korea (*Park, 2008*). Most older adults with stroke have residual disabilities such as impaired physical, functional, and cognitive capacities, and are in need of long-term care and health-related services (*Cowman et al., 2010; Fletcher-Smith, Walker, Cobley, Steultjens, & Sackley, 2013; Rodrigues et al., 2013*). Cultural norms dictate that Korean adult children are responsible for caring for their older parents with illness. However, placement of older parents in long-term facilities is gradually increasing owing to recent shifts in family structure, such as decreased family size and increasing number of working women (*Park, 2002*).

Nursing homes are representative long-term care facilities that mainly serve frail older adults who are highly dependent on help with care and daily living (*Cowman et al., 2010*). Many nursing home residents have multiple health problems but do not usually require hospital care (*Department of Health, Social Services and Public Safety, 2012*); however, with several age-related changes, declined levels of function, and underlying problems, their response to illness may be vague and slow (*Kim, Ahn, Kim, & Hong, 2011*). The subtle and atypical presentation of older residents is similar to that in persons with a high risk for stroke (*Boyles, 2007*). Therefore, nurses should be able to recognize and respond to the onset of stroke (*Montgomery & Mitty, 2008*). Accordingly, early detection and proper nursing interventions for older residents who experience a stroke are essential to minimize immediate serious sequelae (*Ouslander et al., 2011*).

Although stroke is more prevalent in older residents, there has been no study about stroke occurring in nursing homes (*Cowman et al., 2010*). In particular, there is a lack of care guidelines in non-acute care settings (*Cowman et al., 2010*), although there are well-developed specific guidelines for stroke rehabilitation and care in acute care settings in South Korea. Furthermore, nurses in long-term care facilities have relatively few opportunities to receive ongoing education about standardized stroke-related care plans (*Park & Han, 2010*). Thus, they may be unprepared to provide optimal stroke care to older residents. Nevertheless, they tend to notice small but significant changes in condition (*Parker, Fadayeatan, & Lee, 2006*), such as subtle communication problems or altered mental status, for prompt management of those residents.

Nurses play a pivotal role in the health outcomes of older residents (*Zolnierek, 2011*). Their perceptions and experiences about signs of stroke can influence the quality of care older residents receive. Nurses' awareness of signs and symptoms of stroke is the most critical factor in minimizing

dangerous consequences in older residents (*Kim, Park, et al., 2011*). Understanding nurses' perceptions about management may therefore be a vital first step toward establishing standardized protocols or guidelines for managing older residents who experience a stroke (*Park & Han, 2010*). However, little is known about nurses' perspectives on their work with older residents at a high risk for stroke (*Park & Han, 2010*). Therefore, this study aims to explore how Korean nurses recognize subtle signs of stroke and minimize serious consequences in older nursing home residents with a high risk for stroke. In particular, research findings in other countries may not be directly applicable to South Korea (*Kim, Ahn, et al., 2011; Kim, Park, et al., 2011*) because of the differences in the South Korean society and nursing homes. Accordingly, understanding nurses' perceptions of and experiences with stroke care is important in the context of culture and nursing in South Korea.

## 2. Methods

### 2.1. Design

This descriptive, exploratory study was performed with a qualitative method by using in-depth interviews and inductive content analysis. A qualitative method is useful for discovering and interpreting the participants' perspective during interaction with them through interviews or observation (*Krasner, 2001*). This method was chosen to allow understanding the perceptions and experiences of nurses working with older residents at a high risk for stroke within the South Korean cultural context.

### 2.2. Data collection

Purposive sampling was used to recruit experienced nurses who had been working for >1 year in a nursing home. There were 3775 nursing homes in South Korea at the start of this study. The locations of the nursing homes were divided into seven administrative districts: Seoul (capital city), Gyeonggi, Chungcheong, Gangwon, Gyeongsang, Jeolla, and Jeju. According to the number of residents, we grouped the nursing homes into four categories: <10, 11–30, 31–100, and >100 residents. Eleven nursing homes were finally selected on the basis of their size and regional distribution. Permission to conduct the study was obtained from the directors of the selected nursing homes. The nurses at these nursing homes who expressed interest in participating in the study were contacted and recruited by research team members. The main selection criterion was the variety of the nurses' experiences, such as working with residents who were at a high risk for stroke and required emergency nursing care. For data collection, semi-structured in-depth interviews with guided questions were conducted. A set of open-ended questions was designed to help participants describe their experiences in providing care for older residents at a high risk for stroke. Examples of interview questions are as follows:

1. Tell me about your experience in caring for older residents with a high risk for stroke.

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