

ORIGINAL RESEARCH

Outcomes of Planned Home Visits of Intern Public Health Nurses: An Example from Turkey



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Abstract

OBJECTIVE This study aimed at evaluating the outcomes of planned home visits of intern public health nurses enrolled to a school of health over 8 educational years.

METHOD The descriptive research consisted of 181 families (N = 745 individuals) who received primary services through the planned home visits undertaken by 431 intern public health nurses at Kocaeli province in Turkey. The data were collected from Family Nursing Process Records and Family Health Achievement Forms. Both of these data collection forms were classified according to North American Nursing Diagnosis Association (NANDA) Taxonomy II.

RESULTS Intern public health nurses provided primary health services to 181 families (N = 745 persons) with a total of 8771 planned home visits undertaken over 802 days and 14,874 student/practice days. A total of 1539 nursing diagnoses were identified and 1677 achievements about these diagnoses were reported. Nursing diagnosis per family and per individual turned out to be 8.50 and 2.1, respectively, and achievements were 9.3 per family and 2.3 per individual. Among the nursing diagnosis domains, health promotion (20.3%), safety/protection (16.8%), and activity/rest (16.0%) were the top 3 domains identified. The most common diagnoses turned out to be ineffective health maintenance (47.4%) in health promotion domain and risk for trauma (18.2%) in safety/protection domain. The achievements were reported most in health promotion (37.9%), activity/rest (17.6%), and safety/protection (9.6%), respectively.

CONCLUSIONS Planned and continuous home visits by intern public health nurses resulted in positive health achievements in families, especially for women and children.

KEY WORDS home visit, intern nurse, nursing diagnosis, primary health service, public health nursing

INTRODUCTION

Home visits are planned and targeted activities aimed at health promotion and health maintenance of individuals, as well as prevention of illness and other health problems, and are regarded as one of the important tools of maintaining primary health

services.^{1,2} Randomized controlled studies on impacts of home visits revealed that women developed positive health behavior and experienced healthier pregnancies,^{3,4} maternal mortality related to preventable causes declined considerably,⁵ and communication between mother and child significantly improved.^{6,7} Moreover, the studies found

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that fathers' participation in child care was enhanced⁸ and labor force participation of mothers increased.^{3,8} Also reported were better nutrition of infants with breastfeeding^{9,10}; increases in fetal weight and growth and development of children; and declines in behavioral problems in childhood, deceit, and abuse,^{3,8,11} as well as injuries, application to emergency services, and hospitalization.³ One systematic review identified the relationship between home visits and improvements in quality of home environment.¹² All such positive results were reported more for women in low-income families and less developed countries or regions.^{3,4,7}

The role of public health nurses is crucial in achievement of positive outcomes as they undertake several functions such as care, advocacy, case management, cooperation, consultancy, health education, and so on.^{2,13} The undergraduate education of nursing students appears as one of the most important factors affecting sufficient fulfillment of these functions. Despite the limited amount of research, available results revealed that nursing students attributed positive meanings to home visits.^{14,15} However, there is no academic research available on Turkey evaluating both the home visit activity of nurses, as in the case of other developing countries,⁹ and longer-term results of home visits by intern public health nurses during practice training. The present study aimed at evaluating the outcomes of planned and continuous home visits, namely the nursing diagnosis and achievements as a result of related interventions, undertaken by intern public health nurses enrolled in a school of health over 8 educational years.

METHODS

The study was designed as a descriptive research. The sample consisted of 181 families (N = 745 persons) who received primary health services through the planned home visits undertaken by 431 intern public health nurses enrolled in the fourth grade of the Kocaeli School of Health (KSH) in Turkey. Intern public health nurses are 4th year undergraduate nursing students who successfully completed the 3rd year courses and are obliged to undertake eight hours of public health nursing practice in a month as a part of their intern nursing practice course. Planned home visits constitute an essential component of their public health nursing practice.

The practice training was carried out at a small industrial estate since 2001 known as the top migrant-receiving region of the central district (Izmit) of Kocaeli province populated with families

of low socioeconomic status. The course contents of the integrated nursing curriculum of KSH were structured on Gordon's functional health patterns. Course topics were taught in line with nursing diagnoses of North American Nursing Diagnosis Association (NANDA).¹⁶ Thus NANDA nursing diagnoses are used in all practice trainings in all grade levels.

The intern practice training for fall (September–January) and spring (February–June) semesters was organized within an educational period in groups and covered a total of 14 days, during which practice alternated between 3 days a week and 4 days a week consecutively. The training was supervised by the same instructor over the 8 educational years along the guidelines provided. Each intern public health nurse was held responsible for nursing care for 3 families and was obliged to conduct at least 2 home visits per week. Respecting the continuity of care, the same families were visited with different groups of intern public health nurses in the following periods unless families declined to participate, moved away, went on vacation, or were hospitalized.

The Family Nursing Process Record included nursing diagnosis, aims and objectives, nursing interventions, and evaluations of each family along with the number of home visits, classification of home visits, descriptive characteristics of families, and nursing diagnoses. The Family Health Achievement Form evaluated the outcomes of the home visits. Achievement was defined on the basis of health-related positive information, skills, behavior, and attitudes of the families and family members aimed at by the nursing interventions designed as a result of the nursing diagnosis. The resulting outcomes in this form were the ultimate decisions recorded by the intern public health nurses but also evaluated and confirmed by the supervising instructor at the end of the practice training per family and per family member.

Data were analyzed by using percentages and arithmetic means. Both nursing diagnoses and achievements were classified according to NANDA Taxonomy II. Fifteen families were excluded because of either unavailability of their journals or missing data in the records.

RESULTS

The practice training of 431 intern public health nurses over 8 educational years provided public health nursing service to 181 families (N = 745 persons). One-fifth of the families had more than 6 members and almost half of the families (53%)

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