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ORIGINAL RESEARCH

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HOME CARE NURSES' ROLES IN ENHANCING QUALITY OF NURSING CARE FOR PATIENTS AT HOME: A PHENOMENOLOGICAL STUDY

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ABSTRACT

Background: Provision of health care service at home is one of the advanced forms of care for patients being discharged from hospitalization. Little is known about the experience of nurses providing home care services through a nursing home-care model especially in Indonesian context.

Objective: This study aims to explore the experience in order to increase understanding on the form of home care provision, and consequently the nurses may understand the form of home care globally.

Methods: This study employed a phenomenological design and performed interview in the process of data collection. Data were analysed by using content analysis.

Results: The main contexts of home care nurse experiences were generated. There were definition and role of home care nurses, the involvement of family members in the provision of care, the facilitating and hindering factors contributed to home care provision as well as manual on providing home care nursing.

Conclusion: The implication from this study is that nursing care should be given to the patients continuously and consequently the need for family involvement is important. Additionally, in providing the home care, a proper manual is needed by home care nurses as the guidance to give best quality of care to patients.

Keywords: home care nurses, quality of nursing care, phenomenology

INTRODUCTION

Nursing care aims to fulfil patients' needs on health and provides response to illness condition experienced by patients as individuals, families or communities. The nature of nursing care is holistic where the focus is not only limited to biological condition but also considering other

aspects of patients such as psychology, social, culture and spirituality. Moreover, the provision of nursing care is not only applied at the hospital area but also in either community settings or at the patients' houses. Several factors influence the provision of nursing care in

community settings. One factor is that the population in the world increase gradually and thus people needs certain type of nursing care that provided at home. Other factor is that both elderly and younger patients are considered to have lack of benefits when admitted to hospitals. The decrease in the availability of hospital beds is also one of the factors that affect the need for home nursing care.¹

The model of providing health care service at home is one of the advanced forms of care given once the patient has been discharged from hospitalization. However, it seems that this healthcare service model is less than optimal. This phenomenon occurs as a result of high workload of nurses in hospitals who must provide advanced nursing services as an additional burden so that the nurses do not follow up on the care service to the patient in the patient's home. According Jester, there are two factors that underpin the development of nursing models at home, early discharging patients from the hospital and prevention of patient entry to the hospital.¹

Nursing services provided as a home care to patients do not seem as simple as we can imagine. There are several things that need to be considered: the selection of patients or families; patient self-defence strategy; home situation and certainly the patient's condition which is sometimes not supported by the patient's home situation.

¹ There are currently no standard regulations on the nursing service model at home although it is not uncommon for nurses in Indonesia providing healthcare service for patients at home. Little is known about the experience of nurses providing home care services through a nursing home-care model especially in Indonesian context. Nurses' experiences in providing nursing care at home are

important to explore because through these experiences, the appropriate and feasible model of service can be identified. Then, it will allow home care nurses to implement a standard model of healthcare service in Indonesia.

There is a need for an agreement on the criteria for patient admission to the hospital or patient discharge from the hospital so that the provision of the nursing care service can have obvious boundaries.¹ Moreover, there is a need to explore on how long the intensity of care services provided at home, who involves in the roles of providing nursing care services to patients in the home and how the roles are performed. Therefore, this study aims to explore the role of nurses providing nursing care services to patients at home in improving the quality of nursing care.

METHODS

Study Design

An appropriate research design was used based on the purpose of the study, which was to explore individual experiences in providing nursing care in order to improve the quality of nursing care. This was a qualitative study with phenomenological research design. Through a research framework with a phenomenology design, an understanding of the phenomenon of individual experience will be developed.²

Sample

The study was undertaken in 2014 in West Kalimantan, Indonesia, where the number of home care nurses were limited and home care was not popular at this time. Participants involved in this study were selected by using purposive sampling method. The inclusion criteria included in this study was nurses who have had experiences as a home care nurse for one year or more. The total number of

participants were three people. Creswell recognises that the number of participants in a phenomenology study vary from one to 325.³⁻⁵ Moreover, a phenomenology study is recommended to have between three and ten participants.³

Data Collection

These participants of this study have main roles as either clinical nurses or nurse academics with an additional role as a home care nurse. Data were collected through interviews by asking semi-structured questions and the interviews were audio-recorded. Collecting data through the interviews was undertaken by either face to face or phone call. Before the interviews were conducted, the researcher had to ensure the research ethical principles were employed by ensuring the participants that the study participation is voluntary and thus the participants have rights to reject their participation during or before the data are processed. The researcher also considered potential risks that will occur. Participants in this study may experience a negligible risk from being participated in an interview.

Data Analysis

The collected data were then analysed by using content analysis. The recorded data were verbatim transcribed into a written document. The transcripts were then printed to facilitate the researcher analysing the data by reading the transcript thoroughly. The researcher read repeatedly the transcripts of the interviews to get an overview of the interviews to ensure the trustworthiness in the study. Data saturation was achieved during the process of data analysis. The concept of data saturation is used when the incoming information “produces little or no change” to the existing data during the process of

collecting and analysing data.⁶ After that, several concepts were developed and classified so that the main consistent concept was able to be determined.⁷ The concepts obtained were as follows: the definition and the role of home care nurses; enablers in home care practice and hindrances in home care practice; family involvement in home care practice and guidelines in the implementation of home care.

RESULTS

The process of data collection process was undertaken over one month in 2014. Interviews were conducted either by face to face or through a phone call as some of the participants did not live in the same province (West Kalimantan, Indonesia) as the interviewer as the participants were studying for their master degree in Nursing. In this study, there were five themes generated from the interviews about the roles of home care nurses. The themes were definition and role of home care nurses, factors that enable home care practice, hindrances encountered during the home care practice, family involvement and guidelines in home care practice.

Definition of home care and roles of home care nurse

From all of the three participants, the definition of home care describes about a form of care service provided and where the care service is performed.

“... [Home care is] a service that is officially provided for health care at home...” (Participant 1)

“...How we take care of patients at [their] homes so that their needs can be fulfilled...” (Participant 3)

Whereas, roles of home care nurse can be acknowledged from the participants' statement as follows:

"...Providing assistants, discussing, giving feedbacks and resolving family's problems together..." (Participant 3)

"...Monitoring, providing wound care, facilitating outpatient care and delivering basic nursing interventions..." (Participant 2)

"...Facilitating patients' needs in which the patients and their families cannot accomplish the needs independently..." (Participant 1)

Enablers in home care practice.

This study also recognised factors enabling the implementation of home care practice. These factors were identified from the participants' statement below:

"... [The factors are] ... the patients themselves... Full support from the families..." (Participant 1)

"...Short distance... the availability of time... proper supporting devices..." (Participant 2)

"...The government, in this case, the Ministry of Health to make a regulation on home care for patients who need a longer period of health care service..." (Participant 3)

Hindrances in home care practice

Meanwhile, factors that limit nurses providing home care practice can be realised as follows:

"...Lack of supports from the family. Family having problem beside health problems. Nurses having lack of knowledge. Excessive workload..." (Participant 3)

"...Ignorance of families on the nurses' [role of] boundaries. Family dependency.

Nurses' opinions being opposites with the families' opinions..." (Participant 2)

"...Patient having lack of motivation because of a prolonged time in the healing period. Cost effectiveness. Families being too busy. Lacking in family supports..." (Participant 1)

Family involvement

Patient Family Involvement in Home Patient Care can be seen from the following participant statements:

"...The family involves in controlling diabetes such as eating pattern, [and] personal hygiene. The family will continue the care and patient controlling. The family fully involve [in the care] and is eager to learn for continuing the care..." (Participant 1)

"...Families help a lot. The healing [process] is quicker. However, the psychologic burden had by the families make the families do not want to take care of the patients because the patients put more trusts on the nurses than their own families mainly when it is related to the use of health technology. Family involvement is vital in identifying the patient's problem earlier so that it will not be resolved very late..." (Participant 3)

Guidelines in home care practice

All the home care nurses in this study stated different point of views about the guideline on the home care nursing practice.

"...The guideline on home care is acquired from the Community Health Nursing book. However, there is also a hospital foundation which make the guideline on home care implementation..." (Participant 2)

"...The guideline was obtained when [I] have been trained on home care training by the Ministry of Health. It can be

acquired through the internet or the book of Community Nursing..." (Participant 3)

"...There is no specific guideline on the application of home care practice in the form of either procedures, interventions or nursing interventions..." (Participant 1)

DISCUSSION

In this study, it was identified that any forms of nursing care services provided in the patient's home is called as home care. These forms of care service vary from facilitating the needs of the patient, performing basic nursing care and monitoring vital signs. This service care is provided for both patients and families who are unable to do the care independently. Similar findings were found by two studies in which the role of home health care providers is conducted in the form of identifying patients, assessing their needs, conducting psychological and psychosocial supportive care as well as providing dietary or nutritional education.^{8,9}

Although this current study did not mention the reasons why patients choosing a home care service, the reasons for patients receiving home care services are disclosed by another study. One reason is cost of institutional care (in this case the hospitals) is high. Another reason is that elderly people expect to be treated at home by his relatives according to eastern and western cultures. The last reason is patients are able to choose how they continue to live and control their daily conditions.¹⁰ The same finding was identified by a study where three types of elderly patients who chose to have home care services were identified¹¹. They were the patients who were poor, dependent on family's decision, free to decide the form of nursing care service for themselves. The significant meaning from Boggatz

and his colleagues' research study is that socioeconomic condition and family decision influence the decision on the form of nursing care service for the patients, especially for elderly patients.¹¹

The role of the family supports is very important for the continuity of nursing care services provided at home. Wilson, Davies and Nolan outlined that a good relationship between nurses and families, who help taking care of patients, is very accommodating and it is strongly influenced by how nurses acknowledging, appreciating and responding on family's efforts in taking care of the patients.¹² Therefore, Wilson and his colleagues also emphasize that the relationship can be developed very well between nurses, patients and families when there is a mutual understanding and appreciation on a daily routine at home.¹² However, when the family relationship is well established, involving family in nursing care will be much more challenging.¹³ The same analysis is stated by Silver and Wellman that negative emotion will affect the ability of the family on helping the provision of patient care.¹⁴

Gruber et al. also add that family support is crucial not only to the recovery of the patients but also to the increase of health and wellbeing as well as the development of positive roles.¹³ Family involvement is also very important in controlling patient activities such as eating, taking medication and in identifying patient problems at home so that it can be immediately reported to the nurse.

This study also identified that family helps greatly in terms of performing follow-up care at home when the nurse is not available to the patient. Obviously, this role is applied when the family have previously obtained guidance from the nurse. However, an important

thing needs to be considered is when the form of care service requires high technology, then the patient will put more trust on nurses who can provide the care than their own family. Therefore nurses need to be highly skilled and have sufficient knowledge in providing interventions to patients who are highly dependent on technology.¹⁴

Providing a well-established home care nursing service is supported by not only nurses, patients and families, but also a clear guideline and regulation. In this study, the home care nurses acquired guides in providing the services through various sources such as books, the hospital or training. There have been no rules and standards in the form of a guideline in performing home care practice. Thus, it is important to have a home care practice that is provided in accordance with the authority of the nurses so that the provision of the care can support the quality of nursing care. If there is no clear regulation, the patient may be treated at home in which they should be treated in the hospital and thus new problem arisen and a fatality to the patient may occur. Lakasing underlines that there are several conditions where a home care service may not be suitable for the patient.¹⁵ These conditions include patients who do not wish to be treated at home, poor or inadequate care supports and the caregivers who cannot cope with the problems. Other reasons such as untreatable distress symptoms, inadequate control of the symptoms at home and acute emergencies can also be inappropriate conditions for home care service.¹⁵

CONCLUSION

Current form of nursing care service has developed. It does not only focus on hospitalization but also develop on the

provision of nursing care service at home. Results from this study identified several important things about home care nursing. One advantage of home care practice is the family involvement. Family involvement is very crucial because the family can provide updated information about patients more quickly so that complications can be prevented and thus the patients can be treated immediately. In addition, this form of home care services implies that the care for the patients should be done in a sustainable manner. Therefore, it needs an appropriate guideline for nurses in performing home care practice. Supports from the government and relevant stakeholders are crucial in supporting the continuity of patient care at home and issuing a uniform guideline for the home care practice. Further research is needed for examining the impacts of the provision of home care service on patients' health and wellbeing.

Declaration of Conflicting Interest

None declared

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Author Contribution

This is the original work of the corresponding author.

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