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The nurse in the long-stay institution for the elderly

La enfermera de la institución de ancianos de larga estancia

O enfermeiro na instituição de longa permanência para idosos

ABSTRACT

The objective was to identify the role of the nurse in a Long Stay Institution for the Elderly. This is a qualitative, descriptive and exploratory study carried out with six nurses in five institutions in the April and May 2019 period. For data collection, a semi-structured script developed by the authors was used. Bardin's Thematic Content Analysis was the option for data analysis, organizing the data into thematic codes, generating the analytical categories. The results showed three categories: Perception about the importance of nurses in ILPI; Activities performed by nurses; and Difficulties and challenges: administrative and assistance. In conclusion, the importance of professional nurses in systematic, scientific and humanized work is observed. Challenges in the training of nurses, in team and family communication and under-sizing of staff in institutions. The nurse is fundamental in management, administration and assistance, being essential in the centrality and humanization of care for the elderly.

DESCRIPTORS: Nursing. Elderly. Long-stay Institution for the Elderly.

RESUMEN

El objetivo fue identificar el rol de la enfermera en una Institución de Larga Estancia para Ancianos. Se trata de un estudio cualitativo, descriptivo y exploratorio realizado con seis enfermeras en cinco instituciones de la Período abril y mayo de 2019. Para la recolección de datos se utilizó un guión semiestructurado desarrollado por los autores. El análisis de contenido temático de Bardin fue la opción para el análisis de datos, organizando los datos en códigos temáticos, generando las categorías analíticas. Los resultados mostraron tres categorías: Percepción sobre la importancia de las enfermeras en el ILPI; Actividades realizadas por enfermeras; y Dificultades y desafíos: administrativos y asistenciales. En conclusión, se observa la importancia del enfermero profesional en el trabajo sistemático, científico y humanizado. Los desafíos en la formación del enfermero, en la comunicación entre el equipo y la familia, y la subestimación del personal en las Instituciones. La enfermera es fundamental en la gestión, administración y asistencia, siendo fundamental en la centralidad y humanización de la atención a las personas mayores.

DESCRIPTORES: Enfermería. Anciano. Institución de larga estancia para la tercera edad.

RESUMO

Objetivou-se identificar o papel do enfermeiro em Instituição de Longa Permanência para Idosos. Trata-se de um estudo qualitativo, descritivo e exploratório realizado com seis enfermeiros em cinco instituições no período de abril e maio de 2019. Para a coleta de dados foi utilizado um roteiro semiestructurado elaborado pelos autores. A Análise de Conteúdo temática de Bardin foi a opção para a análise dos dados, organização dos dados em códigos temáticos, gerando as categorias analíticas. Os resultados evidenciaram três categorias: Percepção sobre a importância do enfermeiro; Atividades desenvolvidas pelos enfermeiros; e Dificuldades e desafios: administrativos e assistenciais. Como conclusão observa-se a importância do profissional enfermeiro no trabalho sistematizado, científico e humanizado. Os desafios na formação das enfermeiras, na comunicação equipe e família e subdimensionamento de pessoal nas Instituições. O enfermeiro é fundamental no gerenciamento, administração e assistência sendo primordial na centralidade e humanização do cuidado ao idoso.

DESCRIPTORES: Enfermagem. Idoso. Instituição de Longa Permanência para Idosos

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INTRODUCTION

Population aging is a reality in Brazil and in the world and poses challenges not only for the health system, but for various sectors of society, with social and economic demands that can incorporate the needs of the elderly population, in order to enable aging fair and respectful to everyone. Advances in the area of health result in quality of life and longevity for the elderly.¹

The proportion of people aged 60 years and over grows faster compared to other age groups, a fact that consequently caused the sharp increase in the number of Long-Stay Institutions for the Elderly (LSIE). Other names are still used to refer to ILPIs such as: shelters, rest homes and asylums.²⁻³

The National Health Surveillance Agency (ANVISA) published Resolution - RDC No. 283 of September 26, 2005, and defined LSIE as - governmental or non-governmental institutions, of a residential nature, intended for the collective domicile of people of the same age or over 60 years old, with or without family support, in a condition of freedom and dignity and citizenship.⁴ These institutions are based on: observing the rights and guarantees of the elderly, preserving the identity and privacy of the elderly, ensuring an environment of respect and dignity;

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encourage and promote the participation of the family and the community in the care of the elderly resident; develop activities that encourage the autonomy of the elderly, among others.⁴

To meet this demand, LSIEs need to have a qualified health team that meets the needs of the elderly. The nurse is an important member of the health team that fulfills integration and care attributions, developing care activities in a holistic and humanized way. He must determine actions that fully meet the elderly, train the team and enable them to carry out care actions.⁵

Given the accelerated growth of LSIEs and the important role that nurses play within the health team of these institutions, this study aims to understand the activities of nurses in Long-stay Institutions for the Elderly.

METHOD

Qualitative, exploratory, descriptive research in eight private LSIAPs, randomly chosen and located in Greater Florianópolis, between April and May 2019. Five institutions were selected for the study by acceptance and authorization to participate in the research. The selected participants were six nurses, who met the inclusion criteria: nurse, active in the long-stay institution in one of the work shifts (morning, afternoon or evening).

Exclusion criteria were: professional nurses on vacation or away for reasons of health or leave. For data collection, a semi-structured interview was carried out in person, at times and spaces of the LSIEs previously scheduled with the participants. The ethical issues in research with human beings and research in the project modality approved under CAAE n. 09673419.0.0000.0113 and Research Ethics Opinion n. 3.278.968 of April 23rd, 2019. Out of respect for the anonymity of professionals, we use the name of flowers for identification. The interviews were carried out for an average duration of 40 minutes, by the authors of the study. The interviews were recorded and transcribed and then a floating and attentive reading was carried out. Organized tables with similar thematic contents and selected codes. Bardin's Content Analysis (2016) ⁶ was used for the treatment of collected data and the systematization of ideas, meticulous reading of the material and based on systematic literature review. Results were categorized into thematic units based on the analyses.

RESULTS

As for the institutions, each has different categories and numbers of professionals and asylum seekers.

In institutions with two nurses, one is the Responsible Technician (RT) and all perform administrative and managerial activities. Most LSIEs have formal caregivers. The nurses' work regime is variable and there are no nurses working at night.

Perception about the importance of nurses in LSIE

The importance of the nurse in the LSIE is unanimous, the nurse is responsible for health care, acting in the administration and management of the team in carrying out the systematization of care.

Extremely. The nurse is responsible for health care, a requirement of sanitary surveillance, a technically responsible nurse obligatorily supervises, assists in the administration. (Girassol)
Important for both administrative, systematization, and management parts. Injury guidance, care for bedridden, professional updating. Monitor the caregiver and the nursing technician. Care administration. People management is a requirement of CO-REN. (Liz)

Theoretical scientific knowledge is essential in providing quality care and promoting actions in care and care. It is necessary to update and qualify the team, to bring security and provide quality care.

Activities performed by nurses

Of the nurses who assume Technical Responsibility (RT), one fulfills a care function such as changing tubes and other invasive procedures. As there are no other nurses, it performs both functions.

Coordination of the nursing team, supervision and execution of nursing services, responsible technician; planning, preparation of medical records, norms and routines, dressing change, patient assessment. (Girassol)
Nursing evolution, evaluation, implementation of the Nursing Care Systematization. Dressings, care with enteral diet, medication taken overnight, due to time constraints. (Azaleia)

Nurses perform multiple activities, we highlight the importance of staff dimensioning for coherent and technical assistance.

Difficulties and challenges: administrative and assistance

In the administrative issue, nurses have difficulty managing the team in care, attention and continuity of actions. The management of the nursing team is ineffective. As noted in the speeches:

Align the conduct of the team, for continuity and quality of care for patients who sometimes need individual attention. There is no doctor to assess the elderly. (Girassol)
Manage team and shift change, update protocols. (Rosa)
Lack of a clinical nurse, of a second nurse to participate together in carrying out the actions,

Table 1 – Number of professionals and elderly residents in the LSIEs – Greater Florianópolis/SC/Brazil. 2019.

LSIEs	Elderly	Professional Category and Total Professionals				Total
		Nurse	Nursing Technician	Nursing Assistant	Caregivers	
A	12	2	2	1		3
B	26	1	9		1	10
C	11	2	4		2	6
D	19	2	4	1	2	7
E	12	1	7			7

Source: Survey data, 2019.

alone it is difficult to manage and administer, the COREN is supervising. (Rosa)

Deficit of specific materials, sterile materials, the family does not support extra expenses. Elderly people with depression and a psychologist in the multidisciplinary team. There are no relationship issues. Continuous attention. Lack of family presence, contact difficulty, triggering depression due to lack of family, or for not being more productive. (Azaleia)

As for the care difficulties and challenges, they are related to the lack of family participation, many do not visit the elderly, causing them to feel sad and depressed. A psychologist in the multidisciplinary team (mental health) and a physician (clinician/geriatrician) are required. Another difficulty is the lack of necessary supplies for hygiene and comfort care, and continuous use medication for comorbidities.

Presence of the Family, many family members abandon the elderly person at home. Residents with stroke sequelae, schizophrenia, age-related senility. (Liz)

Training of employees, hiring part of the multidisciplinary team (physiotherapist psychologist). (Azaleia)

The results highlight points such as lack of training for the nursing staff and caregivers.

DISCUSSION

Only three LSIEs have two nurses who work in day shifts, all LSIEs do not have a nurse at night. The professional practice legislation provides that, in the presence of mid-level/technical nursing workers and caregivers, monitoring by the nurse is essential.

⁷ The literature shows that, in most LSIEs, the reality is different from the legislation.⁸

Art. 8 of Decree No. 94,406/87, which regulates Law No. 7,498/86 regulates the exclusive competence of the nurse and the direction of the public or private Nursing agency; head of nursing service and unit; planning, organization, coordination, execution and evaluation of nursing care services; Nursing consultation; prescription of nursing care, expanding care in all its administrative/managerial, care/care, educational/teaching and research/research dimensions. It is up to the nurse to manage, in addition to directly supervising the nursing actions in the LSIEs.⁹

We found three nurses with training for elderly care, the literature emphasizes the specific knowledge through continuing education enhances attention and quality care.¹⁰

In the research, there is a lack of professionals and the overload of others. The work overload occurs due to a lack of qualified workers and a reduced number of professionals.¹¹ The physical overload allied to the fast pace of the routine in which the activities are carried out, promoting the compromise of later actions.¹²

In the administrative and managerial area, the nurse has care technologies such as the Nursing Care Systematization (NCS), as directed by the Regional Council of Nursing (COREN) to meet the needs of daily life, maintenance and recovery of health conditions, stimulate and promote self-esteem, independence, self-confidence and autonomy.¹¹

The dimensioning of nurses promotes quality of care, structured implementation of comprehensive care actions, improves the team relationship and quality continuing education with a focus on the elderly.¹³

Nursing professionals face their anguish, in addition to the emotional and mental suffering of the elderly, de-

pression, distancing and lack of interest from the families.¹⁹ Some seniors are resistant to the institution's norms and routines.¹⁴⁻¹⁵

The role of the family is provided for in art. 229 of the Federal Constitution, it is up to the family, society and the state to support the elderly. In the Elderly Statute, in art. 30 priority care and assistance must be provided primarily by the elderly's family.¹⁶⁻¹⁷

Institutionalized elderly people require specialized care due to frailties and diseases, nursing aims to provide care, providing individualized attention to the physical and psychosocial condition of individuals.¹⁴

The Collegiate Board Resolution No. 283/2005 determines that all ILPI have a nurse for RT. Literature mentions ILPI without a nurse, ignorance of the category's attributions and low salary. Non-compliance with the law and the weakness of inspection by Organs competent bodies lead to complaints to the Public Prosecutor's Office.^{15,18}

For the holistic care of the elderly, ILPIs must invest in structuring a multidisciplinary team and expanding nurses in all shifts of the day. The understaffed team of professionals generates precarious and improvised care and risks to the elderly.²⁰

CONCLUSION

The nurse plays a decisive role in the LSIEs for comprehensive, humanized and welcoming care, and also seeks to comply with the laws aimed at assisting the elderly with the work team.

The research allows us to know the role of nurses in the administration and management of LSIEs, in the relationship with the work team, the supervisory functions and attention to care actions for the elderly. Nurses highlight the importance of Nursing Care Systematization (NCS) in assisting the elderly, but feel undervalued by salaries, discouraged by the lack of

continuing education and overloaded by activities.

As for the elderly, they highlight difficulty in following the rules of the LSIEs and absence from the family.

LSIEs do not hire a multidisciplinary team for the holistic care of asylum seekers and do not regularly purchase supplies for the provision of care.

The aim of this study is to highli-

ght the importance of nurses in elderly care, as a manager, assistant, supervisor and administrator in an LSIE and encourage further studies on the subject. ■

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