Systematization of nursing care in intensive care unit

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ABSTRACT

Objective: To evaluate the systematization of nursing care in intensive care unit (ICU).
Methods: This is an integrative review of the literature carried out through the VHL, SCIELO and LILACS databases with articles published between 2009 and 2014.
Results: Five articles were selected, where it was possible to observe that the lack of applicability of the systematization of nursing assistance in the ICU is more reality found, however, when held, this process provided a registry organized and directed the data and execution and evaluation of the nursing care.
Conclusions: The instruments need to be fairly discussed and proposed nursing professionals to become empowered.

Key Words: Nursing process, Nursing care, Intensive care unit

1. INTRODUCTION

Systematization of nursing care (SNC) consists of a practice used to perform the planning, execution and evaluation of nursing care provided to the patient, regardless of the context in which it is, in other words, this methodology can be developed both in the hospital sector but also in various social service specialties. Therefore, the same is employed in order to provide a more effective and holistic care. [1]

The Federal Nursing Council of Brazil Resolution the 272/2002 determines to leave the responsibility of the nurses and highlights the importance of their achievement in the health services. And to put into practice the scientific knowledge are the Foundation for the development of the nursing process, which consists of steps, as nursing history, diagnosis, prescription, implementation and evaluation, which together provide a professional quality assistance. [2]

Thus, it is necessary the implantation of the SNC in the working environment of these professionals by this method generate effective results and add in a positive way the care offered. The importance in the intensive care unit (ICU) is noticeable because of the complexity of this sector, in which are admitted patients with clinical and surgical complex disorders, acute and chronic, which require attention and immediate approach. Therefore, the actions taken must be planned and nursing care outlined so that the goals are achievable, providing the professional a reflection on assistance held. [3]

So, when instituted in the ICU, the nurses provide patient safety for the care provided, favoring as much healing as recovery. Besides, the use of nursing diagnosis and interventions in this sector is essential in order to direct the individualized care of basic human needs, as in intensive care nursing professionals demands a greater number of hours of care due to the dependency of these patients and the fact that...
interventions be more complex.\cite{4}

However, the reality often hinders the achievement of SNC, due to particularities that each health establishment has, but it is necessary to reflect on their implementation and raise the main factors that trigger and sustain the difficulties in accomplishing it, to be able to be established.\cite{1}

Thus, it is necessary to seek more and more about the applicability of the nursing process, since it’s something that adds positively to carry out a more completed assistance and free of mistakes or damages, but that is not yet presented in all sectors who provide health care. Thus, this study aimed to evaluate the systematization of nursing care in intensive care unit.

2. METHODS

The present study is an integrative review of the literature. This type of search allows the synthesis of multiple published studies and enables general conclusions about a particular area of study, in which the purpose is to deepen and strengthen the scientific knowledge.\cite{5}

Thus, the method of implementation comprises six steps: establish the hypothesis or question the review; select the sample to be studied; categorize studies; analyze the studies included in the survey; interpret the results and submit the review or the knowledge synthesis.\cite{6}

And to follow the steps mentioned above, the study has been guided from the following question: how does the process of systematization of nursing care in the intensive care unit?

Therefore, for the bibliographical databases, Virtual Health Library (VHL), Latin American literature and Caribbean (LILACS) and Scientific Electronic Library Online (SCIELO) were used, and the Controlled Health Sciences Descriptors (Decs): nursing process, nursing care and intensive care units were used resulting in 33 articles.

The inclusion criteria for searching were articles published in their entirety, free of charge, in English and Portuguese language, available in the VHL databases, LILACS and SCIELO between 2009 and 2014, having main subject: intensive care units and nursing processes. Duplicate articles, monographs and articles not available online for free in full were deleted.

Filtering the items found and excluding those who do not fit the above criteria, leaving five articles that were established in the form of an array in order to organize the data, and that encompassed the following: year of publication, database, article title, authors, goal and result of the studies.

3. RESULTS

With the analysis of the articles resulting from research on online database, the details of the selected studies framework were displayed in order to enable better understanding of same.

One of the articles, a study sought to implement the instruments, was observed that the nursing staff know about the importance of it, however, it still had doubts about the role of the nurse. In relation to the time taken to conduct the SNC, the results demonstrate the feasibility of achieving the same as the experience of implementation of this practice, the use of the instrument values and providing greater autonomy to nursing, as well as records become more organized and humanized care and holistic.

4. DISCUSSION

With the articles analyzed, it is realized that the publication intervals are of irregular shape, showing that the interest in the topic is something that is growing over time. However, even if the nursing process is a topic debated for a considerable time, it is worth noting that scientific publications about the instruments are fresh.\cite{7}

When looking at the titles of selected articles, one can speculate that more and more nurses understand the importance to the development of the SNC in the ICU. Yes, on highly specialized and complex care nurses develops in this sector, the systematization of their work and the nursing staff, is essential for a quality assistance, free from damage, and thus, being possible to perform a more humanized care. Therefore, systematizing the care is used as a scientifically based work methodology, which makes it possible to take decisions and properly assess the quality of care provided.\cite{8}

One of the articles noted a study that aimed to implement the instruments from the evaluation of the knowledge of nursing staff about the same and including their participation in that process.\cite{9} Thus, the study question was obtained as a result that the members of the nursing staff have notion about the value of knowledge for the achievement of care and thus leading to optimizing results with this action. However, it was evidenced that the majority had doubts about the role of the nurses and their responsibility in the implementation of SNC.

With this, it is possible to conclude that all this difficulty in relation to the nursing process comes from inadequate preparation in training, showing mostly lack of knowledge about the physical examination, lack of training of the stages of the systematization, conflict, lack of credibility in the nursing
requirements, among other.[2]

Thus, as a research developed in a hospital of Mato Grosso said, that despite nurses professionals know the instrument, the practice is not yet in the same routine, as is also found in the aforementioned study. And it is realized that this is the reality in many places, and usually because the instruments to several members of the nursing team are something impossible to perform, due to the various difficulties encountered as lacking of time, lacking of human resources, workload, and generically[10] organizational structure.

Table 1. Presentation of the articles selected for integrative review

<table>
<thead>
<tr>
<th>Year of publication</th>
<th>Database</th>
<th>Title</th>
<th>Authors</th>
<th>Objectives</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>SCIELO</td>
<td>Systematization of nursing care in an intensive care unit supported by the theory of Wanda Horta</td>
<td>Mistress LN, Rossetto AP, Schneider DG.</td>
<td>Implementing the SAE, with reference to the Theory of Basic Human Needs of Wanda de Aguiar Horta and the Nursing Diagnosis of North American Nursing Diagnosis Association (NANDA)</td>
<td>The nursing staff know about the value of knowledge to action in nursing, providing security and optimization of results of this action, but it was evidenced that the same has doubts about the role of the nurse in the instruments</td>
</tr>
<tr>
<td>2012</td>
<td>SCIELO</td>
<td>Time spent in implementing the nursing process in a critical care center</td>
<td>Abdullah MA, Severus, EB, IM BarretoLN, Banu DM</td>
<td>Measure the time taken by the nurses of intensive care center (CTI) in the implementation of the steps of the nursing process (EP)</td>
<td>The nurse spent 25.58 minutes per patient in realization of the EP. The data provide support for the design of human resources in the critical patients, with a view to qualifying the assistance</td>
</tr>
<tr>
<td>2012</td>
<td>LILACS</td>
<td>Systematization of nursing care: implementation in an intensive care unit</td>
<td>Oliveira APC, MEAA Rabbit, Almeida VCF, Lisbon, Macêdo KWSC ALS</td>
<td>Describe the implementation experience of systematization of nursing care in an intensive care Unit.</td>
<td>The results of this practice have demonstrated the feasibility of the implementation of the nursing process, with a consequent professional growth, recovery and greater autonomy to the nursing</td>
</tr>
<tr>
<td>2012</td>
<td>LILACS</td>
<td>Development of an instrument for critical patient data collection: nursing history.</td>
<td>Silva, Pereira, Raj AG, Marine CMS, Oak IS, Rajan R.</td>
<td>Describe the experience of building an instrument for data collection for the documentation of the first stage of the nursing process in an intensive care unit</td>
<td>The use of the instrument, has facilitated the completion of the first stage of the nursing process in the ICU and directed the implementation of the remaining steps. With your usage, the registry organized and directed the data and execution and evaluation professional nursing care provided to the critical patient</td>
</tr>
<tr>
<td>2013</td>
<td>LILACS</td>
<td>Reflecting on practice of systematization of nursing care in intensive care unit</td>
<td>Ch ACTR, KT, Almeida RS, Souza FS, Mark HF</td>
<td>Identify the experiences of nurses in the practice of Systematization of nursing care (SNC) in the intensive care unit (ICU)</td>
<td>The testimony, in which thematic analysis suffered the following nuclei of meaning: the factors that interfere in the SNC implementation in ICU and the ignorance of the nurse on the SNC</td>
</tr>
</tbody>
</table>

Note: Source: own Authorship, 2016.

However, in contrast to what is often reported as an impediment to the realization of SNC, which is the time, according to a study that sought to mensurar, the time spent by nurses from intensive care center (CTI) in the implementation of the steps of the nursing process, showed that the professional spent 25.58 minutes per patient in realization of SNC. Therefore, the data provide support for the design of human resources in the critical patients, with a view to qualifying the assistance. Therefore, it is possible to show that sometimes those minutes the nurses lost doing something unnecessary, could be the ideal time to plan and conduct a more organized care, complete, since with the use of this process can contribute to a greater time for direct patient care, providing thus a nursing care with more quality.[11]
the feasibility research of SNC, sought to make an adapta-
tion of the nursing process, but taking into consideration
what already existed on the site, so, it was noted that despite
the obstacles, the results of this practice have demonstrated
the feasibility of the implementation of the nursing process,
with a consequent professional growth, valuation and greater
autonomy to nursing. So, with the interest of the nurse in im-
plementing the process complete and good relationship of the
team facilitated the implementation of differentiated care.[12]
Soon, once established it is expected that the method be used
with knowledge and with possible targets to be achieved. In
this way, the SNC is relevant to effective assistance in an
ICU and for individuals who remain.[1]

About the experience of building an instrument for data col-
lection for the documentation of the first stage of the nursing
process in an ICU, reached the conclusion that the use of the
instrument by the nurses facilitated the implementation of
the first stage of the nursing process in the ICU and directed
the implementation of the[13] steps. And as all should be doc-
umented in the patient’s chart, since they are indispensable
in the process of care, instigated even more nursing staff to
be bound with the necessary records concerning the patient,
and therefore enable the permanent communication between
the members of the multidisciplinary health team will need
to know the process carried out to, continue to contribute to
the improvement of health of the person hospitalized.[14]

Therefore, the SNC consists of something very important in
the process of care and have proved to be one of the most
effective tools in respect of nursing care based on scientific
knowledge and that contributes to holistic way in the life of
the patient.

Can understand with the study that instruments, as well as
your implementation in ICU develop a bond that interacts
directly with nursing care technologies, the severity of the
patients and the complexity of technological equipment used
in industry for hemodynamic monitoring can be a challeng-
ing experience for nurses as well as for the team, for help in

the process.[3]

However, this reflection shows that the role of the nurse in
the ICU leads us to believe that even in the face of instability
of the patients, the SNC dispels that care dispensed in the ev-
everyday life of the ICU, since the implementation of the same
in practice becomes effective for all involved, in addition to
providing an orderly professional valuation, because of the
peculiarities that nursing process has, and that is something
characteristic of profession.[15, 16]

5. Conclusion

With the study it was possible to observe that the lack of
applicability of the SNC in the ICU is more reality found,
and unfortunately it’s something that still needs to be fairly
discussed and proposed nursing professionals to become
empowered and encouraged to develop in your work envi-
ronment.

Therefore, the prevalence of professionals who understand
the nursing process and the importance of the right to a qual-
ity assistance, autonomy and development of the category,
however, questions about the role of the nurse and the respon-
sibility of the same about implementation of SNC, because
often this difficulty be assigned the training given to pro-
fessionals. We also observed that when held, this process
provides a registry organized and directed the data and exe-
cution and evaluation professional nursing care provided to
the patient.

Thus, the fact that the same to be something very useful and
of great importance for the development of a quality assist-
ance and to offer the nurse as well as the nursing staff for the
provision of care based on scientific evidence, is important
to develop further studies on the subject in order to boost the
implementation of SNC in the work environment of nursing
professionals.

Conflicts of Interest Disclosure

The authors declare that there is no conflict of interest.


