



NURSE'S CARES FOR ADULTS AT HOME

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ABSTRACT

The social Situation in Bulgaria reflects the way of living of the people in advanced age. Added to the specific social problems, related with aging, are some chronic diseases, leading to social dependency. The goal of our scientific report is to reveal and outline the pedagogical conditions of caring out the methods of the practical learning of nurses how to deal with adults at their homes while being in clinical practice. In the process of the studies some inquiry was applied, as well as targeted observation and pedagogical experiment. The results show, that while introducing of the learning program and her realization in the environment of до practical learning, in clinical practice will apply better qualified care for the adults at home.

The conclusions are: the contemporary clinical approach requires to negate the image of equality between age and disease; when frequent suffering, based on illness among aged people, a search of diseases with hidden symptoms is required; the appliance of proper therapy should be accompanied with careful registration of the tissue sensibility and its influence on the human body as a whole. The nurse should apply strictly an individual approach when diagnosing, pre-treatment and cure of the aging patient; She should be aware of the age norms, characterizing healthy people in mature, advanced and long living people; as well as knowing in details the changes due to aging

Key words: aging, methods, aging patient, communication, care, medical nurse

INTRODUCTION

Aging pass through different stages– within the cell, cell, and tissue, within the organs, within the body systems and in the body in general. Within the body the changes begin at the age of 30-ies, when the period of physical maturity is completed. Step by step changes advance in the metabolism and in the functions of the particular systems, the adapting abilities, as well as the probability of rise of chronic-generative pathology, inclination to complications and even death.

The goal of this scientific report is to reveal and outline the pedagogical and organizational conditions in the methods of practical learning of the medical nurse in her work with aging people at home.

Subject of the study is the process and the conditions while nurse training goes on in order to prepare her to apply the obtained

knowledge and skills when working with man in need.

The people to analyze were the students of the chair "Health care" at the Thrakia University, Medical Faculty– town of Stara Zagora, trainees in the subject of medical Nurse and their teachers.

Inquiries, observation and pedagogical experiment were applied.

SUBJECT AND METHODS

The aging as a final stage of the process is not always to correlate with pathology. There is a normal physiological aging, certain productivity and social activity.

Diseases most registered in relation with aging are: atherosclerosis, hypertonic disease with their forms and complications, brain stroke, endocrine disease as diabetics type II, osteoporoses with some complication within the motor system, diseases of the respiratory system and the receptors, as well as within the urine-and sex system, neoplasm.

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A great part of the risen pathology is due to reduction of the immune reactivity. Age may be a risk factor favorable for the development of chronically-degenerative pathology. Aging of the body is connected with changes of the genetically system, the metabolism within the cell. Energy processes within slow down. Senile changes /functional, morphological and metabolism are highly complicated. They are a complex of metabolism of the cells and significant changes of the nerve-humeral regulation of the body. These changes explain the rise of specific for the aging body compensating, adjusting mechanisms.

The slowdown of the nerve – vegetative function in the aging body makes the tissue more sensitive and the systems risen at the ontogenesis toward the humeral factors, specially toward the mediators. This effect may be understood as a defense – compensational reaction. The new registered mechanisms, even not perfect, make us believe, that aging can be considered as not only as a process of regression. Aging is the last and logical stage of the body, but the disease is a disturbance of the physiological functions and activity. Within the rise of many diseases in advance age frequently a gene relations are to discover, developed parallel with the normal aging. These changes may occur along with aging with no disease symptoms to be registered. At certain conditions, various circumstances / biological, social-economical, psychological, ecological may lead to some diseases and pathological changes.

In the clinical medicine in the field of somatic diseases geriatric problems take up an essential part. They are conditioned by the polymorbidity of the people in advanced and senior age. The main and accompanying pathology damage predominantly the inner organs and the cardio-vascular system. Often the geriatric patient has rather complicated medical and social problems. (2).

The solution of the problems connected with training of nurses with contemporary skills in the field of geriatrics is up to date, significant for medical practice and prophylactics of people in senior age.

Aging is unavoidable; it is a natural process to be understood by all medical staff. Process of aging has its effect on the family,

demographical and social development and requires modernizing in the way of living, conditioned by organizational, economical and psychological maturity of the society. (1)

RESULTS AND DISCUSSION

Based on the premised formulations, the applied inquiry, purposeful study and pedagogical experiment we prepared a training program for clinical practice at home of the senior people, to be applied while nurse winter semester of the year 2010/2011 with the students of the Year 3 and 4.

The result of care for adults may be positive or negative. The positive manifests within the feeling of being useful, necessity and role within the family, being in power to change to everyday life of the adult in need. Positive may mean fellow feeling, sympathy and love toward to man, humanity and nurse care for the man in need. The feel of satisfaction, helping the adult in need for care is obvious.

The people in senior age appreciate the care of their beloved and friends. A nurse's self respect grows after her cares have been recognized by them.

The negative result of nurse's care for a senior age people consists of their physical problems, financial problems and everyday life. Many of them have problems with health. Very typical triple effect: problems, insomnia and fatigue. Very often - social isolation like a conflict between brothers, sisters and others. Fatigue and misunderstanding as well as many challenges during day time may lead to conflict between members of the family. Nurses also take care of people at home, stress may be avoided via following means: communication at home, keep the balance in needs and other members of the family; control in behavior toward the members of the family.

The training program includes 36 lecture hour during the 6th and 7th semester and has following parts: Geriatrics as a science; Geriatric patient as a social personality; Specifics of the geriatric diseases; Specifics in diagnosis, analyzing and control of the diseases; Risk factors leading to typical age diseases; Gerontology as a science; Physiological changes due to aging; Working out a plan for nurse's care for an aging patient.

CONCLUSIONS

In the environment of dynamic quantitative and qualitative changes in the need of health care for adults, a necessity of highly trained nurses grows immensely.

The challenge of the time arise new functions and responsibilities for the medical nurse to carry out her duty. The same is valid for her competence, her activity in the organizational work, planning, and evaluation of health care for adults; autonomous or in partnership with multi-profile team targeted on the physical, mental and social health of the adult in order to improve his standard of living; the health care and services has a priority, as well as the rehabilitation of those in need.

All students and teachers on study have the opinion, that in case, the program mentioned above would be introduced in the training process and clinical practice, the medical nurse would be much better qualified for the position she is being trained for.

One of the conditions to obtain this competence is the organization in real time and space and it means at home of the people in senior age.

The practical training in real medico-social environment leads to improvement of motivation of the nurse to work in complicated, but also various and therefore interesting situations; multidisciplinary team to work in real situations.

The study has shown the necessity of working out and application of new methods to work in clinical practice straight at home of the adult.

While analyzing the results following conclusions have been made: The contemporary approach requires to turn down the equal consideration of age and disease; one should search for a discrete symptoms, when frequent complaints on health problems occur; adequate therapy should be applied, considering the tissue sensibility; the nurse should apply individual approach when diagnosing, preventing and cure of the geriatric patient; She should know the age norms, characterizing the healthy people in grown, advanced and senior age.

RECOMENDATIONS

Following recommendations could be made toward the teachers in the subject of medical care: while nurse training, an effective use of the methods to work with adults, mentioned above is necessary; the teachers should possess the needed qualification in order to apply optimally the active methods, contemporary methods to stimulate the students; The teachers should make all in their power to give additional possibilities to the students to improve the professional skills and knowledge.

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To decide whether nursing is for you arrange to shadow a staff nurse, see what she does, how she manages care and ask questions. Then you can make a reasonable decision. Sorry, as I read this I realized I used female pronouns, there are many wonderful men in nursing now days.Â But I'm at home. I have years under my belt taking care of adults in a variety of clinical settings. Some problems persist since before I entered the profession in 1994 and will likely persist long after I leave. There is still an unhealthy physician/nurse dynamic that is tolerated by organiz.

1. The nurse is making a home health visit to a patient and needs to contact the case manager of the patients home-care team. Which person should the nurse contact? a. Physician b. Social worker c. Registered nurse (RN) d. Home health agency administrator. C. Registered nurse (RN).

2. The nurse is to see a patient who requires dressing changes.Â The nurse instructs the spouse to provide these infusions. How frequently should the nurse plan to make home-care visits to this patient? a. Daily b. Never c. Twice a week d. Every 2 weeks. B. Never.

9. During a home visit, the patient asks if his spouse could take one of the patients prescribed pain pills for a severe headache. Nursing care for patients at home: A phenomenological study. Titan Ligita*.

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.