

Session 5.12
NNN Track

Abstract Title:

Nursing Outcomes Classification (NOC) to Measure the Evolution of Patients with Self-Care Deficit: Bathing and/or Hygiene

Presenters:

Miriam Almeida, RN
Sofia Barilli
Margarita Ana Rubin Unicovsky, RN
Deborah Hein Seganfredo
Adele Kuckartz Pergher

Intended Audiences:

Educators, Clinicians, Informaticists, Administrators

Areas of Focus:

Informatics, Research, Use in Practice, Use in Education, Linking or Integrating Nursing Language

Research Format:

For Research Reports

PURPOSE: In the Nursing Process (NP) developed at a university hospital, nursing diagnosis (ND) was inserted in the computerized prescription system according to the NANDA International Taxonomy I and a reference on Basic Human Needs. The interventions and the outcomes in this system do not follow a classification system. The objective of this study was to verify the viability of the Nursing Outcomes Classification (NOC) in hospitalized orthopedic patients with the ND Self-care Deficit: Bathing and/or Hygiene, validating the NOC indicators and monitoring the evolution of such patients.

METHODS: This was a descriptive, transversal and quantitative study, composed of 2 stages. First, expert nurses who were experienced in the care for the orthopedic patients validated the indicators referring to the outcomes of Self-care: Bathing, Self-care: Hygiene, Self-care: Activities of Daily Living and Self-care: Oral Hygiene selected by NOC. For the validation, an instrument containing such indicators with a Likert scale from 1 (not relevant) to 5 (extremely relevant) was constructed. Operational definitions were developed for every indicator. The data analyses were calculated by the weighted mean of the grades that the experts attributed to each of the indicators (1 = 0; 2 = 0.25; 3 = 0.50; 4 = 0.75; 5 = 1). Values inferior to 0.50 were discarded and indicators with a ≥ 0.80 weighted mean were considered major indicators, and those with < 0.80 and > 0.50 arithmetic average, minor indicators. Second, the application of the indicators selected in the first stage to measure the results of the nursing interventions on hospitalized orthopedic patients were submitted to patients with Total Hip Replacement. The data collection is being carried through during bathing observation in two distinct moments. The first measure occurred on the first day postoperative, and the second happened after 48 hours. The evolution of the patients was monitored according to a Likert scale (1= dependent, does not participate; 2= requires assistive person and device; 3= requires assistive person; 4= independent with assistive device; 5= completely independent). The Ethics Committee of the hospital approved this study, and ethical procedures were observed.

FINDINGS: First Stage: out of the 34 indicators proposed by NOC for the four nursing results research, 2 (6%) were considered to be major indicators, 22 (65%) minor indicators and 10 (29%) were discarded. Second Stage: 19 patients have been included until the moment, showing a significant difference between the two measures (test T, 90% confidence, significance 0, 05) in 11 of the 24 indicators evaluated on the second stage.

CONCLUSIONS: It is possible to conclude, based on the analysis, that the NOC is viable and that there has been an improvement on the patient's independence for self-care during bath/hygiene. This investigation aims to aid the Nursing Group of the hospital on their continual computerization of other stages of the nursing process using the NOC classification, as well as the Nursing Interventions Classification – NIC – and NANDA International.

Citations:

JOHNSON, Marion; MAAS, Meridean; MOORHEAD, Sue. Classificação dos Resultados de Enfermagem (NOC). 2 ed. Porto Alegre: Artmed, 2004.