42 - PERCEPTION OF PARENTS' ASSISTANCE ABOUT HEALTH PROFESSIONALS IN A NEONATAL ICU OF A UNIVERSITY HOSPITAL IN WESTERN PARANÁ

JAQUELINE ALBERT,
ERICA OSAKU,
CLAUDIA MACEDO COSTA,
JAQUILENE BARRETO DA COSTA,
MARIA DO CARMOTEIXEIRA JORGE
Universidade Estadual do Oeste do Paraná, Cascavel, Paraná, Brasil
jakialbert@hotmail.com

INTRODUCTION

The hospitalization of a child in the Neonatal Intensive Care Unit (NICU) is a situation that can cause emotional stress for the whole family, especially for parents (SCHMIDT et al., 2012). In the case of the birth of a newborn in risk, the family faces a stressful and challenging situation, because the length of stay in the neonatal unit can extend over several months (BALDINI; KREBS, 2000).

This prolonged hospitalization causes a sudden change in a family life, which in a short time happens to be the children's companionship and and an expectator of the specialized care provided by the health team, without being emotionally prepared to face this event. It should be the concern of health professionals, who work in the NICU, to assist these families in a more humanized way (BALDINI; KREBS, 2000; AZOULAY et al., 2003; ARAUJO; RODRIGUES, 2010). Few studies in Brazil have assessed the degree of satisfaction of family members of hospitalized premature infants in the NICU, or suggested measures to promote improvement in the attention and care to them. Therefore, it is necessary to conduct a study that aims to understand the needs and satisfaction of family members, especially parents of premature infants in the neonatal unit, since parents remain great part of their time with their children, experiencing the routine of this unit along with health professionals.

Accordingly, this study aimed to determine the perceptions of parents for health professionals's assistance in a NICU of a teaching hospital in western Paraná.

MATERIALS AND METHODS

This is a descriptive, an exploratory and a qualitative research. All parents were invited to participate in the study of the newborns admitted to the NICU of the University Hospital in Western of Paraná (UHWP) from June to August in 2012.

Parents initially were informed about the study, and were then asked about their interest in participating in the research. Parents who agreed to participate were asked to read and sign the Statement of Consent Form (ICF).

The study included all parents of newborn babies admitted during the period of the data collection and in a length of stay of at least 36 hours. Three days were chosen as the minimum time, so that parents were more familiar to the NICU and the routine work of its multidisciplinary team. Parents who disagreed to participate were excluded from the study, and also those whose children died during the period of the data collection.

We applied a demographic questionnaire to characterize these parents. Data collection was performed using a semi-structured interview based on five guiding questions which were answered by the participants: (1) "What is your opinion of health professionals who provide care for your child in the NICU?"; (2) "Do you have any complaints regarding the care of professionals working in the NICU, if so, why? If not, why not? "; (3) "Do you have any suggestions for the professionals who provide assistance?"; (4) "What is the expectation that you have related to the health professionals who assist your children?" ; (5) "What concerns do you have when you have to take your children home?".

For the analysis and the interpretation of data, we chose to follow the guidelines of the qualitative method described by MINAYO (2004): (1) It was first performed the organization of data that consisted of reading the material and its primary organization, (2) then it was made an exhaustive reading of the data, establishing a questioning relationship in order to verify the central themes on the studied subject, (3) and finally, the themes were discussed based on the theoretical study. When presenting the results, responses were identified by the letter " P" father and " M " for mother followed by numbers.

This study was approved by the Ethics Committee on Human Research of the State University in Western Paraná (Opinion No. 019 / 2012).

RESULTS AND DISCUSSION

In the period of the study, 18 infants were admitted to the NICU at UHWP. Of 18 parents, two were excluded from the study: a mother who did not agree to participate for personal reasons, and another mother because her child died. We interviewed 16 subjects, 14 mothers and two fathers.

Parents were aged between 24 and 41 years old, which makes an average of 35 years old. Regarding marital status, 15 (93.75%) was married and one (6.25%) was single. As far as education is concerned, five (31.25%) had primary education, seven (43.75%) went to high school and four (25%) had higher education. Regarding religion, 11 (68.75%) were Catholic and five (31.25%) were evangelical. Related to their occupation, seven (43.75%) had some sort of payment salary and nine (56.25%) were housewives.

Regarding infants, gestational age at birth ranged from 26-37 weeks, on average 31 weeks. When it comes to the sex of newborns, seven (43.75%) were female and nine (56.25%) were male. As for the reason for hospitalization, prematurity prevailed as the main diagnosis (37.5%), followed by respiratory distress syndrome of the newborn (SARRN) (25%), also related to prematurity. About the length of stay in the NICU, the babies were between 5-30 days in hospitalization, which was on average 16 days.

The following are the results related to every question according to the proposed method and its discussion.

The complaints of parents regarding the care of health professionals in the NICU

In the case of the interviewed parents, the majority of them showed no complaints about the care provided by health professionals in the NICU. They reported that babies were very well cared, received attention, love and affection, and that they were treated as if children were their own family health team.

> "[...] Whenever I'm here with my son, I always saw it being well treated and cared for, I have nothing to

complain" (M2).
"Children who are hospitalized in the NICU receive warmth of the staff and it makes me calm[...]. The work that these professionals do is performed with love and affection and that's what makes the difference "(M13).
"[...] A team of professionals working in this NICU, doctors, nurses and physiotherapists are to be congratulated, all very attentive and caring" (M16).

The lack of humanization can bring difficulties in care, especially in the NICU, since recovery of the baby does not depend solely on the technical care. On a day of an ICU, it is often difficult to ensure the humanization of care for patients and their families. The heavy routine work, exhausting function handling critical patients can make health professionals, consciously or unconsciously about the pain of these people, or they may become indifferent to it (LAMY; GOMES; CARVALHO, 1997).

Through the speeches it was revealed that they felt welcomed by all professionals who were related to them.

"[...] I and his parents were well looked after [...]" (M8).
"[...] They are great professionals, caring all newborns who are in hospital very well, not only children, but parents are also well treated [...]" (M13).

Within the context of treatment in the hospital, the family also needs a humanized and individualized assistance especially because they are in a strange and new environment, and they have to adapt to new standards and predetermined routines, besides the fact of living with a "sick" child (COLLET; ROZENDO, 2003).

During the hospitalization period, healthcare professionals should interact with parents and family, encouraging them to express their feelings, doubts and fears in an attempt to minimize possible trauma arising from hospitalization (SALDANHA et al., 2003).

Only two mothers complained about the service. They reported lack of information about the visits, and about procedures that were carried out with their children.

"The only complaint I have is about the lack of information that sometimes I do not get about the improvement of my son, what can I do to help my baby to recover faster, so he could go home soon" (M15).
"Now I know how to care my baby [...], now I understand more, but at first I was scared because of lack of information, I thought they were mistreating my son, with all these wires and tubes hurting him, but after that, I was explained it was for his own well-being and now it is much better "(M9).

The need to seek clarification from the family of hospitalized patients is constant (NEVES et al.,2009). The family expects to talk with a health professional every day about the condition of the hospitalized patient, wishing to obtain information about the care, equipment and what they can do for the patient at the time of the visit (VERHAEGHE et al., 2005).

In a study by McDonagg et al (2004), about the level of family satisfaction in the ICU, it was proved that the delight of family member is related to the clarification of doubts. Furthermore, it demonstrates that satisfaction is proportional to the amount of information received by professionals, and that families consider communication as important as the clinical practice.

The doubts of the family should be clarified. It is necessary that they receive clear and appropriate understanding, and the clarification of doubts should not only be limited to the health of the newborn, but also about the equipment, procedures and routines in the NICU so that they would feel more secure and valued, without getting away from the unit and consequently from the child (FROTA et al.,2007).

Expectations of parents relate to the health professionals working in the NICU

Regarding this issue, parents expect that professionals maintain the quality of care through the constant pursuit of knowledge. They also expect the continuation of a humanized treatment and that parents can be more clarified about what the children have and what has been doing with them.

"I hope they always run after the advances in medicine, and always worry about going after new information to continue saving increasingly little lives" (M6).
"[...] And that they get better each day, going always after studies and research for being more capable to save our little ones" (M5).
"That they may give more explanations about the routine of the babies, day by day. [...] Sometimes I do not know much about the situation of our son. We do not have the technical knowledge that professionals have, so they may explain more us, after all it is my son who is admitted here "(M2).

In the care in the ICU, where it is usually provided care to critically ill patients, health professionals need to use technology combined with technical expertise, along with humanization, in order to promote an ethical safe and responsible care to critically ill patients, turning the place of pain and suffering into an environment of hope. We must seek to overcome the problems arising from the process of illness and hospitalization, as well as understand the conditions of the child and parents (SILVA, 2000; MINAMISAVA; MUNARI, 2004).

Parents also need to be addressed. It should be in mind that professionals mainly aim to clarify doubts. In this context, intensive care should include clinical stabilization of the child without dehumanize care, and always respecting the family (LIMA, ROCHA; SCOCHI, 1999; VERHAEGHE et al., 2005; MOLINA et al., 2007).

Parental concern over the time of hospital discharge

For these parents, the lack of information and clarification of doubts causes doubts about how to proceed from the moment that the child receives the discharge. This makes them feel insecure because they think they will not have the ability to care them like health care professionals do. There is also the fear about possible complications in the children's health.

"We have to worry because you will not have to look and care for her as she needs, and if something unexpected happens? What do we have to do? [...] "(M11).
"[...] Here everything is easier, because here there is all the equipment needed, but not at home, I'm afraid of not knowing how to properly care because I know my son is not a totally healthy baby because he was born before the time "(M1).

The hospital discharge is a moment of great expectations for the family of the preterm baby. Due to its particularities they need a special and intense care, causing the mother a feeling of not being able to take care of them (RABELO et al., 2007).

Generally mothers of premature infants leave the hospital with their children, along with the need for complex care, which may cause a sudden change in her and her family personal habits. Although these mothers can have some experience and knowledge regarding the care of his child, they still have many questions and concerns about their competence to care for a child in the home environment (ALMEIDA et al., 2006; MOLINA; MARCON, 2009).

It is extremely important that parents can be encouraged by health professionals to actively participate in the care given to their children, and they should always be guided and monitored by the health team. Thus with encouragement, practical help, especially with no doubs, and providing guidance regarding the care, it is expected that they use the learning from health professionals (TAVARES et al., 2006), making them to have more confidence in taking care of the household.

CONCLUSION

It was found that in the perception of the interviewed parents, the children were being well looked after. This perception has been built from the service, through the achievements of techniques and procedures, which were always associated with human attitudes and feelings such as affection, attention, joy, smiles, among others. However it can be seen that the lack of information and communication between health professionals and families is a factor that contributes mainly to the lack of confidence that parents have at the time of the hospital discharge.

Thus health professionals who work in a NICU need to be more present and engaged with the families of hospitalized children. They shall guide parents about the care that may be provided to their children during hospitalization, as well as answering questions and providing complete information about the treatment and discharge planning. Consequently there would be a more humanized care not only for hospitalized children, but also for the family, empowering these parents to perfom the correct care at home.

REFERENCES

ARAÚJO, B. B. M.; RODRIGUES, B. M. R. D. Vivências e perspectivas maternas na internação do filho prematuro em Unidade de Tratamento Intensivo Neonatal. Revista da Escola de Enfermagem da USP, v. 40, n. 4, p. 865-72, 2010.

AZOULAY, E. et al. Family participation in care to the critically ill: opinions of families and staff. Intensive Care Medicine, v. 29, n. 9, p. 1498-504, 2003.

ALMEIDA, M. I. et al. O ser mãe de criança com doença crônica: realizando cuidados complexos. Escola Anna Nery – Revista de Enfermagem, v. 10, n. 1, p. 36-46, 2006.

BALDINI, S. M.; KREBS, V. L. J. Reações psicológicas nos pais de recém-nascidos internados em unidade de terapia intensiva. Pediatria Moderna, v. 36, p. 242-6, 2000.

COLLET, N.; ROZENDO, C. A. Humanização e trabalho na enfermagem. Revista Brasileira de Enfermagem, v. 56, n. 2, p. 182-92, 2003.

SCHMIDT, K. T. et al. A primeira visita ao filho internado na Unidade de Terapia Intensiva Neonatal: percepção dos pais. Escola de Enfermagem Anna Nery, v. 16, n. 1, p. 73–81, jan./ mar., 2012.

FROTA, et al. Recém-nascido em uma Unidade de Internação Neonatal: crenças e sentimentos maternos. Cogitare Enfermagem, Fortaleza, v.12, n. 3, p. 323-329, jul. /set., 2007.

LAMY, Z. C.; GOMES, R.; CARVALHO, M. A percepção de pais sobre a internação de seus filhos em unidade de terapia intensiva neonatal. Jornal de Pediatria, v. 73, n. 5, p. 293 – 298, 1997.

LIMA, R. A. G.; ROCHA, S. M. M.; SCOCHI, C. G. S. Assistência à criança hospitalizada: reflexões acerca da participação dos pais. Revista Latino-americana de Enfermagem, v. 7, n. 2, p. 33-9, abril, 1999.

MOLINA, R. C. M. et al. A percepção da família sobre sua presença em uma Unidade de Terapia Intensiva Pediátrica e Neonatal. Revista da Escola de Enfermagem da USP, v. 43, n. 3, p. 630-8, 2009.

MCDONAGH, J. R. et al. Family satisfaction with family conferences about end-of-life care in the intensive care unit: increased proportion of family speech is associated with increased satisfaction. Critical Care Medicine, v. 37, n. 7, p.1484-8, 2004.

MOLINA, R. C. M.; MARCON, S. S. Benefícios da permanência de participação da mãe no cuidado ao filho hospitalizado. Revista da Escola de Enfermagem da USP, v. 43, n. 4, p. 856-64, 2009.

MINAYO, M.C. S. O desafio do conhecimento: pesquisa qualitativa em saúde. 8ª ed. São Paulo: Hucitec, 2004. 269 p.

NEVES, F. B. C. S. et al. Análise da satisfação dos familiares em unidade de terapia intensiva. Revista Brasileira de Terapia Intensiva, v. 21, n. 1, p. 32-37, 2009.

RABELO et al. Sentimentos e expectativas das mães na alta hospitalar do recém-nascido prematuro. Acta Paulista de Enfermagem, Fortaleza, v. 20, n. 3, p. 333-337, 2007.

SALDANHA, M. E. S. et al. “Opinião dos pais sobre a abordagem realizada pela equipe de saúde a criança hospitalizada”. Família, Saúde e Desenvolvimento, Curitiba, v. 5, n. 2, p. 133-140, mai. /ago., 2003.

SILVA, M. J. P. Humanização em UTI. In: CINTRA, E.A.; NISHIDE, V. M.; NUNES, W.A. (Org.). Assistência de enfermagem ao paciente crítico. São Paulo: Atheneu, 2000.

TAVARES, A. S.; QUEIROZ, M. V. O.; JORGE, M. S. B. Atenção e cuidado a família do recém-nascido em unidade neonatal: perspectiva da equipe de saúde. Ciência, Cuidado e Saúde, Maringá, v. 5, n. 2, p. 193-203, maio/ago. 2006.

VERHAEGHE, D. et al. The needs and experiences of family members of adult patients in an intensive care unit: a review of the literature. Journal of Clinical Nursing, v. 14, n. 4, p. 501-9, 2005.

Endereço: Rua Universitaria, 2069.
Bairro: Jardim Universitário.
CEP 85819-110. Cascavel - Paraná

PERCEPTION OF PARENTS ASSISTANCE ABOUT OF HEALTH PROFESSIONALS IN A NEONATAL ICU OF A UNIVERSITY HOSPITAL IN WESTERN PARANÁ

ABSTRACT

Meeting the needs and satisfaction of family members, especially parents of newborns admitted to neonatal intensive care units is an essential part of health care professionals. Accordingly, this study aimed to determine the perceptions of parents for assistance from health professionals in a neonatal intensive care unit of a teaching hospital in western Paraná. This is a descriptive, an exploratory, and a qualitative research. Sixteen individuals were interviewed from a semistructured writing

interview. Responses were analyzed from the ordering and reading of the data, organized core categories. Most parents positively evaluated the care of professional in the intensive care unit, but there is a lack of information and communication between health professionals and families.is a lack of information and communication between health professionals and families.

KEYWORDS: NICU, parents, health professional.

PERCEPTION DES PARENTS ASSISTANCE AU FRONT DE PROFESSIONNELS DE LA SANTÉ DANS UM SOINS INTESIFS NÉONATALS D'UN HOPITAL UNIVERSITAIRE DANS L'OUEST DE PARANA

RESUME

Rencontre avec les besoins et la satisfaction des membres de la famille, en particulier les parents d'enfants admis dans les unités néonatales de soins intensifs est une partie essentielle de professionnels de la santé. En conséquence, la présente étude visait à déterminer les perceptions des parents à l'aide de professionnels de la santé dans une unité néonatale de soins intensifs d'un hôpital d'enseignement dans l'ouest de Paraná. Il s'agit d'une descriptive, exploratoire, qualitative. Seize personnes ont été interrogées à partir d'une entrevue semi-structurée répondu par écrit. Les réponses ont été analysées à partir de la commande et de la lecture approfondie des données et le regroupement ultérieur des idées dans les catégories de base. La plupart des parents ont évalué positivement la prise en charge de l'unité de soins intensifs professionnel, mais il ya un manque d'information et de communication entre les professionnels de santé et les familles.

MOTS-CLÉS: USIN, les parents, les professionnels de la santé.

PERCEPCIÓN DE LOS PADRES AYUDA AL FRENTE DE PROFESIONALES DE LA SALUD EN UCI NEONATAL DE UN HOSPITAL UNIVERSITARIO EN EL OESTE DE PARANÁ

RESUMEN

Satisfacer las necesidades y la satisfacción de los miembros de la familia, especialmente los padres de los niños ingresados en unidades de cuidados intensivos neonatales es una parte esencial de los profesionales sanitarios. Por consiguiente, este estudio tuvo como objetivo determinar las percepciones de los padres por la asistencia de profesionales de la salud en una unidad de cuidado intensivo neonatal de un hospital universitario en el oeste de Paraná. Se trata de un estudio descriptivo, exploratorio, cualitativo. Dieciséis personas fueron entrevistadas de una entrevista semiestructurada contestadas por escrito. Las respuestas se analizaron desde el orden y la lectura minuciosa de los datos y su posterior agrupación de las ideas en las categorías principales. La mayoría de los padres evaluaron positivamente el cuidado de la unidad de cuidados intensivos profesional, pero hay una falta de información y comunicación entre los profesionales de la salud y las familias.

PALABRAS CLAVE: NICU, padres, profesionales de la salud.

PERCEPÇÃO DOS PAIS FRENTE Á ASSISTÊNCIA DOS PROFISSIONAIS DA SAÚDE NE UTI NEONATAL DO HOSPITALUNIVERSITÁRIO DO OESTE DO PARANÁ

RESUMO

Conhecer as necessidades e o grau de satisfação dos familiares, principalmente pais de crianças internadas em unidades de terapia intensiva neonatal é uma parte essencial dos cuidados dos profissionais de saúde. Nesse sentido, este estudo teve como objetivo verificar a percepção dos pais frente à assistência dos profissionais da saúde em uma unidade de terapia intensiva neonatal de um Hospital Escola do Oeste do Paraná. Trata-se de uma pesquisa descritiva, exploratória, de caráter qualitativo. Foram entrevistados dezesseis indivíduos a partir de uma entrevista semiestruturada, respondida por escrito. As respostas foram analisadas a partir da ordenação e leitura exaustiva dos dados e posterior agrupamento das idéias em categorias centrais. A maioria dos pais avaliou positivamente o atendimento dos profissionais da unidade de terapia intensiva, porém há a falta de informação e comunicação entre profissionais da saúde e familiares.

PALAVRAS - CHAVES: UTI Neonatal, pais, profissional da saúde.