ADVERSE EVENTS AND INCIDENTS IN CLINICAL SURGERY: STRESS OF THE NURSING TEAM

EVENTOS ADVERSOS E INCIDENTES EM CLÍNICA CIRÚRGICA: ESTRESSE DA EQUIPE DE ENFERMERÍA

Los eventos adversos e incidentes en la clínica de cirugía: el estrés del equipo de enfermería

Oclaris Lopes Munhoz. Nursing Academic, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: oclaris_munhoz@hotmail.com

Rafaela Andolhe. Nurse, Professor, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: rafaela.andolhe1@gmail.com

Tânia Solange Bosi de Souza Magnago. Nurse, Professor, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: t.magnago@terra.com.br

Renata Guedes. Nursing Academic, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: reeguedessantos@gmail.com

Caroline Santini Rauber. Nursing Academic, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: karol_feltrin@yahoo.com.br

Gabriela Oliveira. Nursing Academic, Federal University of Santa Maria/UFSM. Santa Maria (RS), Brazil. Email: gabioliveirafv@hotmail.com

ABSTRACT

Objective: to analyze the association between the bio-social characteristics of patients, the stress of the nursing staff and the occurrence of adverse events/incidents in the Surgical Clinic Unit. Method: a descriptive, cross-sectional study of a quantitative approach. The target audience will be adult patients admitted to the surgical clinical unit and the nursing staff. There will be used a tool to identify adverse events/incidents, an instrument for survey of the bio-social characteristics and the work of the participant team of the study and a Stress Scale at Work. There will be used ethical principles of Resolution N 466/2012, of the National Health Council. Expected results: to identify the association between the stress of the nursing team and the occurrence of adverse events in the unit. Given the results, it will be possible to plan strategies and contribute to patient safety, as well as the quality of life at the work of the Nursing Team.

Descriptors: Nursing; Patient’s Safety; Professional Burnout.

RESUMO


RESUMEN

Objetivo: analizar la asociación entre las características biociales de los pacientes, el estrés del equipo de enfermería y la ocurrencia de eventos/incidentes adversos en la Unidad de Clínica Quirúrgica. Método: estudio descriptivo, transversal, con un enfoque cuantitativo. El público objetivo serán pacientes adultos ingresados en la unidad de clínica quirúrgica y el equipo de enfermería. Una herramienta para la identificación de eventos/incidentes adversos será utilizada para el levantamiento de las características bio-sociales y el trabajo del participante del equipo del estudio y la Escala de Estrés en el Trabajo. Se seguirán los principios éticos de la Resolución 466/2012, del Consejo Nacional de Salud. Resultados esperados: identificar la asociación entre el estrés del equipo de enfermería y la ocurrencia de eventos adversos en la unidad. Dados los resultados, se podrá planificar estrategias y contribuir a la seguridad del paciente y la calidad de vida en el trabajo personal de enfermería. Descritores: Enfermería; Seguridad del Paciente; Esgotamiento Profesional.
INTRODUCTION

Along with the advancement of health care, patient’s safety has become a major concern of agencies and health institutions worldwide, having its beginning even in the twentieth century, after the publication of the report from the Institute of Medicine of the United States of America (USA), showing alarming data on errors in health care. Nursing, in turn, in order to improve and strengthen its assistance, created the Brazilian Network for Nursing Patient Safety (REBRAENSP) in 2008, aimed at linking and cooperation of health institutions in the search for strategies to improve patient’s safety.1

The Adverse Events (AE) are undesirable incidents that occur in health care, but that can be prevented, or may result in harm to patients, creating commitment to some body structure, changes in physiological functions, temporary or permanent disabilities, what may lead to death. Such damage to the customer’s health can be physical, social and/or of psychological character.2

The nursing team, especially in hospitals, is more exposed to stressors, since they are 24 hours a day with the patients. This performs various activities, such as interpersonal and multi-professional relationships, acts in emergency situations and emergency, deals with the lack of human and material resources, resulting in excessive workload. So, it all ends up contributing to the development of stress, which still hurts, often, the safety of patients who rely on these professionals, leaving a gap for the occurrences of the AE/I.3

Stress, in turn, is considered one of the factors that affects nursing professionals and consequently contributes to the occurrence of AE/I. Stress is considered as the “disease of the century”, and it is even considered an element of modernity;4 has an interaction to be considered an individual with the environment they live in, and defined as a process that exceeds the biological barrier, result an external or internal event that exceeds the adaptive capacity of an individual.5

Regarding adverse events and incidents in health, these, although undesirable, are used as indicators to assess the quality of care, since they are not evaluated and studied, they may compromise the safety of the patient.6 It is estimated that 2,000,000 deaths occur, and 7,000,000 patients with or without incidents suffer damage, with 50% of these are preventable. From 3 to 16% of surgeries with high complexity register complications and one death for every 300 admitted patients.7

In 2010, a study conducted by medical records of patients admitted to the Surgical Clinic of the Hospital Sentinel Network of the National Health Surveillance Agency. It found in 750 admissions, the record of 5672 incidents, according to the consequence to the patient. Of these, 82% represented incidents without damage, concluding that 615 hospitalizations were exposed to at least one incident. Still, there was a predominance of 218 (18.7%) adverse events occurred in the period, ie, 140 hospitalizations were exposed to at least.8

During the graduation, after passing through practical classes and final internships, became student’s interest to develop their study in a Surgical Clinic Unit, a result of discussions in the practice environment, in the classroom and also in the research group, due to reflections and experiences. Thus, it is believed to be important studies that may contribute to patient safety, regarding the occurrence of adverse events and incidents in surgical clinical units and the relationship with the stress of nursing staff.

Also, it was noted during the search for studies to support this project, because there are few studies related to this theme. In daily practice, the surgical clinic appears as a drive that brings anxiety, stress and fear to patients, since they are exposed to procedures that often are unaware.2

In a study of hospital inpatient units, the data showed the surgical clinic as one of the major places where AE/I occurred, highlighting the events related to drains, probes, catheters, medication errors, patient falls bed, pressure ulcers and hospital acquired infections during hospitalization.9

These characteristics justify the conduction of this study.

Based on these considerations the research question that guides this study is based on the following reflection: Is there an association between the occurrence of adverse events and incidents in surgical clinical unit and the stress of nursing team?

METHOD

It consists in a descriptive, cross-sectional study of a quantitative approach. This project is a research subproject entitled “Patient’s safety: stress, coping and burnout of the nursing team and the occurrence of adverse events and incidents in the surgical clinical unit”; GAP registration: 039092. The research project was approved by CEP/UFSM under
There will be included adult patients older than 18 years old, admitted to the unit in the data collection period and they will be followed from admission day until discharge from the unit. They were admitted from May 21st to June 20th, 2015. In relation to team nursing, there will be included all the nursing team from the field of the study, when will act in the data collection period. The subject will be deleted out from work for any reason.

For data collection there will be used a tool for identifying adverse events/incidents, which contains the patient’s identification with their registration number in the institution, age, gender, clinical data, gravity parameters and hospital interventions. Another instrument to be used is to survey the biosocial characteristics and work of members of the nursing staff in the study. It will also be used to Stress Scale at Work (TSE), drawn from the literature review about organizational stressors of psychosocial nature and on psychological reactions to stress.10

The information collected for the study will be entered into Excel spreadsheets and further processing by the Statistical Package for Social Sciences (SPSS) version 20.0, with validation and checking of data consistency. The bio-social and clinical demographic variables of patients as well as the bio-social characteristics of the nursing team and the nursing team work will be presented with absolute frequencies, average, and standard deviation, median, minimum and maximum.

For the identification of the association among: stress levels and biosocial qualitative variables of the nursing team work, there will be used the Chi-square test. For these analyzes, stress levels will be dichotomized by the sample average, high and low.

To identify the association between: stress (TSE) with biosocial quantitative variables and the nursing team work, there will be used Analysis of Variance.

The significance level for all tests will be 5%.

Expected Results

It will identify whether there is an association between the stress of the nursing team and the occurrence of adverse events/incidents in the surgical clinical unit. It aims to contribute to nursing education, thereby contributing to the discussions and reflections about the theme, as well as patient’s safety.

References


DOI: 10.5205/reuol.9373-82134-1-RV1008201648
Adverse events and incidents in clinical...