NURSING CARE SYSTEMATIZATION TO THE DISABLED PEOPLE: INTEGRATIVE REVIEW

SISTEMATIZAÇÃO DA ASSISTÊNCIA DE ENFERMAGEM ÀS PESSOAS COM deficiência: REVISÃO INTEGRATIVA

SISTEMATIZACIÓN DE LA ASISTENCIA DE ENFERMERÍA A LAS PERSONAS CON DISCAPACIDADES: REVISIÓN INTEGRADORA

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ABSTRACT

Objective: to analyze the Nursing Care Systematization to the disabled people in scientific publications. Method: this is an integrative review, performed in the Virtual Health Library databases, from 04/16/12 to 06/07/12, with the following research question << What has been published about the Nursing Care Systematization for patients with disabilities? >>. For data collection, we used a questionnaire; the sample consisted of 22 papers. As for the data analysis, descriptive statistics and content analysis were used. Results: After analysis, it has emerged the following categories << Nursing Care Systematization >> and << Disabled people: the care importance and need for inclusion >>. Conclusion: it becomes crucial to enhance the studies for the development of researches with other designs and that produce significant evidence with regard to the disabled people. Descritores: Nursing Care; Nursing Process; Hospital Care; Nursing Care Systematization; Disability.

RESUMO

Objetivo: analisar nas publicações científicas a Sistematização da Assistência de Enfermagem às pessoas com deficiência. Método: revisão integrativa, realizada nas bases de dados da Biblioteca Virtual em Saúde, de 16/04/12 a 07/06/12, com a seguinte questão da pesquisa << O que se tem publicado e discutido acerca da Sistematização da Assistência de Enfermagem para clientes portadores de deficiência? >> Para a coleta de dados, foi utilizado um questionário; a amostra foi composta de 22 artigos. Para a análise dos dados, a estatística descritiva e a análise de conteúdo foram usadas. Resultados: após a análise, emergiram as seguintes categorias << Sistematização da Assistência de Enfermagem >> e << Portadores de deficiência: a importância dos cuidados e necessidade de inclusão >>. Conclusão: torna-se fundamental aprimorar os estudos para o desenvolvimento de pesquisas com outros delineamentos e que produzam evidências significativas relativas aos portadores de deficiência. Descritores: Cuidados de Enfermagem; Processos de Enfermagem; Assistência Hospitalar; Sistematização da Assistência de Enfermagem; Deficiência.

RESUMEN

Objetivo: analizar en las publicaciones científicas la sistematización de la Asistencia de Enfermería en personas con discapacidades. Método: revisión integradora, realizada en las bases de datos de la Biblioteca Virtual en Salud, del 16/04/12 al 07/06/12, con el problema puesto en cuestión en la investigación << ¿Qué se ha publicado y discutido acerca de la Sistematización de la Asistencia de Enfermería en clientes portadores de discapacidades? >> Para la recolección de datos fue utilizado un cuestionario; la muestra fue compuesta de 22 artículos y para el análisis de los datos la estadística descriptiva y el análisis de contenido fueron usados. Resultados: luego del análisis emergieron las siguientes categorías << Sistematización de la Asistencia de Enfermería >> y << Portadores de discapacidades: a la importancia de los cuidados y necesidad de la inclusión >>. Conclusión: es fundamental mejorar los estudios para el desarrollo de investigaciones con otros delineamientos que produzcan evidencias significativas relativas a los portadores de discapacidades. Descritores: Cuidados de Enfermería; Procesos de Enfermería; Asistencia Hospitalaria; Sistematización de la Asistencia de Enfermería; Discapacidad.
Disability is a broad concept related to social restrictions imposed on people who have variety in their bodily skills.¹ The World Health Organization (WHO) - 2006 data - estimates that 10% of the world population is constituted by people with some disability type, including 2% of physical disability.²

Some reasons justify this percentage, such as: rising urban violence and traffic accidents rates, falls in the elderly age, work accidents, attacks with firearms use or, even, nervous system disorders, which brings about an increased percentage of the population that faces suffering and physical limitations resulting from the physical sequel, making it an alarming factor in today's world.³

Disabled people usually require more frequent and intense intervention, as well as a care towards to their needs, according to the dependency degree that they have. Concerning the nursing care practice, it should be highlighted the importance of the Nursing Care Systematization (NCS) in the process of assisting disabled patients. The NCS has been used in some health institutions as a work method of care that provides a significant progress in the care quality provided to the patient, through the individualized planning of nursing actions developed by the nursing professional.⁴

To start the establishment of the NCS, it becomes necessary to choose a nursing theory, which is used to direct the remaining stages of the care systematization. The Nursing Process (NP) provides the background for holding the decision-making throughout the nursing care, making it more scientific and less intuitive.⁵

Although the NP has been inserted in Brazil since the 70s, when it was introduced by Wanda de Aguiar Horta, the nursing process emerges as an organizational form of nursing work in the course of the 80s¹, being that it became strengthened by the Vocational Nursing Exercise Law nº 7.498/86. This aforementioned law provides for the regulation of the nursing practice and suggests other measures.⁶

In 2009, the NCS received legal support from the COFEN, through the Resolution nº 358, to be nationwide practiced, i.e., in all Brazilian health institutions, being that its deployment became essential for characterization and optimization of nursing professionals. This systematization started to be one of the main resources that, through scientific foundation, provide an individualized and pretty good care for the patient.⁵ Nonetheless, it should be emphasized that “one of the reasons that lead the nurses to not implement the NCS, as well as negatively assess such a method, is related to the inadequate training during the undergraduate nursing course.”⁶¹⁸⁵

Other factors that could be related are: lack of staff, lack of commitment, involvement and responsibility by nurses, and, furthermore, lack of time.⁶

It should be noticed that the Resolution, by itself, maybe not presenting all the required support by the establishment of the NCS, as many factors has raised the practical difficulties of such a methodology in health institutions, mainly, when healthcare professionals are faced with disabled patients.

The designed research question for this current study was: What has been published about the Nursing Care Systematization for patients with disabilities?

**OBJECTIVE**

- To analyze the Nursing Care Systematization to the disabled people in scientific publications.

**METHOD**

This is a descriptive study, with integrative literature review, which is intended to gather and synthesize research results, on a particular issue, in a systematic and ordered way, being that it is a tool to deepen the knowledge about the researched issue, by allowing the synthesis of many published studies and general conclusions with regard to a particular study field.⁷

For raising papers in the literature, we have conducted a search on the Virtual Health Library (VHL), which covers the following databases: Literature Latin American and Caribbean Health Sciences (LILACS), Medical Literature Analysis and Retrieval System (MEDLINE), Cochrane Library and Scientific Electronic Library Online (SciELO).

For data collection and systematic categorization of publications, we used a structured questionnaire with open questions in order to summarize the studies that met the research question and the inclusion criteria. We opted to choose the temporal cutting of 10 years (2002-2012), specifically from 04/16/12 to 06/07/12, in the Virtual Health Library databases, since the NCS was legally supported by the COFEN, through the Resolution 272/2002, to be nationwide practiced.

Regarding the search for studies, we used the following Medical Subject Headings (MESH): “Nursing care”, “Nursing process”, "Nursing Exercise Law”, “Nursing Care Systematization”.
“Nursing Care Systematization”, “Hospital Care” and “Disability”. Thus, these descriptors and their combinations in Portuguese and English languages were used to search for papers. We opted to choose the Boolean operator “and”, since this functions as the word “e”, in Portuguese, by providing intercession, i.e., exposes only papers containing all the typed keywords, thus limiting the research breadth.

We used the following inclusion criteria: free full papers; papers in Portuguese, English and Spanish languages; systematic and integrative review papers, reflective papers, experience reports, case studies, descriptive and exploratory studies; disabled people; humans. The items which are not relevant to the issue were included in the exclusion criteria.

The following descriptors were employed: “Nursing process” and “Nursing Care Systematization”, being that 85 papers were found. After reading the abstracts, it was found that 12 of them were relevant to the proposed theme: one in English language and one thesis.

After this search, the following descriptors were tested: “Nursing care” and “Nursing Care Systematization”, being that 81 papers were found and, after reading the abstracts, it was found that only two of them were relevant to the issue at stake, one of them was a dissertation.

When using the following descriptors: “Hospital care” and “Disability”, 38 papers were found, but only two were identified as relevant to the proposed theme. All papers were found in the LILACS database.

Other combinations were tested with the above mentioned descriptors, but it was found that the papers identified as relevant had already been found in previous searches, so that they would not add any further paper, therefore, they were not described.

When performing a new research directly on the site SCIELO, the descriptors “Disability” and “Nursing Care Systematization” were included, being that only two papers were found. After reading the abstracts, it was found that these papers were not relevant to the proposed theme.

Next, we tested without the descriptor “Disability”, but with no associations, being that 1,747 papers found. From this selection, we excluded repeated papers and those whose matters did not cover the research theme. Hence, we have selected 62 papers for cataloging, and, after reading the abstracts, six of them that met the inclusion criteria were selected: three in English and two in Spanish.

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When analyzing the 22 selected papers, there was no homogeneity in relation to the published journals. The newspaper linked to the Brazilian Nursing Association had a larger

**RESULTS**

In analyzing the study types (Figure 1), it was found a prevalence of descriptive studies (27%), followed by bibliographic reviews, literature reviews and review papers (14% for each), qualitative studies and reflective papers (9%), case studies (5%) and quantitative and analytical studies (4% for each). The Brazilian Nursing, in terms of research, still remains with a lot of descriptive and qualitative studies.
publications percentage of papers that focused on the issue at stake, NCS and Disability (27.3%), followed by journals linked to the public universities with regard to the nursing field (9.1% for each); magazines of different areas arise in a lesser scale (4.5% for each). Even so, most authors of papers belong to the nursing field.

In Figure 2, we can see all nurses who have published on this theme with 54.4% of the studies. In the health science field, they correspond to 14% of the listed studies, followed by the undergraduate nursing students, with 15.8%; social workers and psychologists reached a rate of 1.75%, however, 12.3% of the studies did not inform about the authors' origins. Outside Brazil, all studies on the theme were conducted by PHD nurses.

Figure 2. Professionals who have published papers on the theme at stake.

It should be noticed that the professionals from the health sciences field, social workers and psychologists take on ownership of this theme, by seeking answers to the multiple questions about disability as a manifestation of the human and body diversity, in order to standardize the knowledge and provide equality of rights, whereas nursing is attached to the promotion and improvement in knowledge of care/nursing care and the application of a care methodology to the clients, with a view to improving the care quality. It should be observed that professionals who more have published papers are related to the academic career, with doctors contributing with 30%, followed by masters and graduated people, with 22% for each, PHD with 12.2% and students with 4.8%.

For analyzing the found data, we made use of interpretative reading and thematic analysis. From this analysis, the following categories have emerged:

1. Nursing Care Systematization
2. Disabled people: the care importance and need for inclusion.

1. Nursing Care Systematization:

This category included 12 papers and one doctoral thesis, which deal with the NCS deployment/implementation process of the Nursing Care Systematization, as Figure 3 shows.
Regarding the number of papers published in the period from 2002 to 2012, Figure 3 illustrates the number of publications in each year with regard to the NCS, showing a most perceptible increased volume in the years 2009 and 2010, when the publications, in comparison to other years, were uppermost in amounts.

In this category, the studies show, in relation to the NCS implementation difficulties, the emergence of several challenges, whether they are the overload of activities performed by nurses, the insufficient amount of staff or, even, the lack of knowledge by the nursing staff, besides the crucial factors for the managerial process, thus becoming indispensable to know the institutional structure in which it shall be deployed.\textsuperscript{9,12,15,17}

These professionals pointed out the need for institutional support, by identifying as being essential that healthcare institutions propitiate all the necessary conditions for effectively having the NCS conduction, and not partially, since it contributes, somehow, to the fragmentation of the provided care, by distorting the features of an individualized customer service.\textsuperscript{13,14,17}

Some nursing professionals recognize having little knowledge about the NCS, but they have a great interest in learning how to develop it in their daily practice.\textsuperscript{15,17} They believe they can contribute in improving the care quality.\textsuperscript{16,17}

For others, although it is revealed that the creation of this care plan is an tool that systematizes the care, when individually organized and updated, however, they believe that the importance of developing such a tool is questionable, because institutional barriers still hinder this process, so that there is little dedication towards the Nursing Care Systematization and running into difficulties aroused from the most varied reasons, transforming the NCS implementation in an unattractive process.\textsuperscript{8,9}

As a result, a flagged option was related to the NCS module attached to the computerized information service, which can help the nursing professional to win a greater legibility and safety in the electronic record, both for fixed or mobile access, making the registration process more agile. This strategy has brought great contributions to the Nursing Care Systematization and running into difficulties phases.\textsuperscript{14,19}

Despite the difficulties, the studies consider that in a world that revolves around the search for new knowledge that organize and value the work organization, it becomes essential to seek new skills in the professional
attitudes integrated to the social systems of multiple relationships and interactions. In its various dimensions, scopes and specificities, the NCS collaborates with the construction of the care quality in healthcare environments.

2. Disabled people: the care importance and need for inclusion:

This category included 08 papers and one master dissertation, which deal with the disabled people, as show in Figure 4.

Despite the scarcity of the studies across the world, even so, it receives little incentive for research across the world, a true disability, when portraying the social injustice and the vulnerability situation experienced by excluded groups, as well as the difficulties to achieve inclusion in the educational scope and in the job market, due to lack of schooling and training and, even, resistance strategies by companies that refuse to hire them.25,27

Despite the attempts of those who make the decisions, the fight against discriminatory behaviors and the equality-based theory, these people still face problems to break the barrier arising from the difficulties and, consequently, achieve the deserved rights to all human beings, which leads us to reflect on the current context of rehabilitation as the science of the social inclusion, which fights for specialized treatments and establishment of social and healthcare policies to include all disabled people.23,28

Other studies also report that the issue of disability deserves to enter into the Brazilian research schedule over the next decade, not only by the high incidence of disabled people in the population, but, mainly, by political and academic silence concerning this theme throughout Latin America. We must respect the rights, necessities, as well as the aware and unhindered willingness of a person who has some functional difference.24,26

Despite the scarcity of the studies conducted on this theme, even so, it receives little incentive for research across the world,
including Brazil. Disability, for many people still remains to be widely approached as a misfortune or bad personal luck and - from the socio-political viewpoint - disabled people are seen as a minority. Therefore, the literature on such a matter is still precarious.27,28

Whatever the unit, the nursing care planning is an exclusive activity that is intended for the nursing professional. Regarding the disabled people, which have sequelae that limit their daily activities, when interfering with their ability to perform the most varied duties, such a methodology would be an indispensable tool.24

**DISCUSSION**

In the studied hospital institutions15, we have observed, in relation to the NCS deployment/implementation process, that it is presented as a very complex process, and above all, knowing the institutional structure where it will be deployed or implemented becomes essential: [...] “the NCS deployment, in fact, requires more than desire and dedication from assistantial nurses, but the institutional support that enables the reorganization of the service, the allocation of human and material resources and prioritizes the care [...]”.17

Furthermore, it is necessary to know the aspects that might contribute to this process and, also, those ones that could harm it, since the systematized nursing practice enhances the profession itself, by cooperating to the end of its stagnation.30

The NCS deployment/implementation process often occurs from a single sector of the institution, as observed in some hospitals, however, all phases not always are included: “[...] the NCS implementation occurs still in a very fragmented way [...]”.18 So, it should be realized that sometimes nurses make partially use of the NCS, by contributing, somehow, to the care fragmentation and distorting the individualized customer service.20,31

It becomes crucial that the institution recognizes the NCS, whose documentation should be included in the patient record, in order that it is present in the work routine so that the systematization is valued by professionals of the healthcare team. The proper preparation and training of professionals was another condition mentioned by some authors, so that there is incentive for nursing staff to implement the NCS: “[...] being prepared with scientific knowledge and constant update, which should be part of the in-service education program of the institutions themselves [...]”12, besides the preparation of manuals and routines to operationalize the work and unify the care.12

When aiming an effective beginning of the NCS, it becomes necessary to choose a nursing theory to justify its practice: “[...] theory works as a structural foundation for the SAE deployment [...]”13, being that it is essential that the healthcare institutions propitiate all the necessary conditions for the effective conduction of the NCS. The theoretical model that underpins the NCS phases and the relationship between them aim at focusing on the written record of the provided care, with a view to searching for the quality of the nursing care, thus presenting it in a coherent, comprehensive and sequential manner, in order to drive a favorable action during the patient treatment.11,16,18

The integration of the NCS to the Electronic Patient Record was another approached issue, as one of the benefits that the computer science has provided through its advancement within the hospital environment.19 So, “[...] The computer has proved to be an effective tool for gathering and accessing information, making the decision process more effective, saving time for the healthcare professional, financial resources and energy, besides increasing the productivity and improving the care provided to the patient [...]”.14 The availability of this information contributes to the wholeness of the nursing process practice, by making other professionals, and not just the nursing staff, have access to prescriptions and provided information about the patients.19,34

It is required that all nursing staff is involved in the implementation process of this system and knows about its steps and, mainly, how each of these ones should be implemented in the daily practice.

In a world that revolves around the search for new knowledge sources that organize and value the work organization, it becomes essential to seek new skills in the professional attitudes integrated to the social systems of multiple relationships and interactions. In its various dimensions, scopes and specificities, the implementation of this practice is showed as a very complex and hardness process, but it can collaborate with the improvement of the care quality.12-3,15,17

Nursing, regarded as a crucial profession for the construction of the care quality in the healthcare scope, accompanies the intense and important changes in social and political relationships in the technological field, interpersonal relationships and, especially, in the way of organizing the services and
responding to the new managerial and scientific demands.

Before they showed potentialities and difficulties, we have realized that one of the discussions to be conducted is related to the evident necessity for a permanent research process on the NCS application, when it is found that most institutions have difficulties to develop such a process. It is a task of the nurse to identify, under the assistance context, what the Nursing is and what the Nursing is not\textsuperscript{35}, in order to contribute to the professional knowledge. As to research context, this professional needs to overcome the obstacles of the first experience\textsuperscript{36} to develop a critical and reflective scientific spirit, in order to deepen its knowledge for performing a nursing practice as science under construction.

**CONCLUSION**

Since the consulted sources that formed the basis for this study, it is possible to raise issues relevant to the disabled people. In search of the best available evidence, regarding effective nursing interventions for the disabled people, it should be understood that the NCS can contribute in the building a care plan consistent with the needs, both individual and collective of this clientele. Nonetheless, there is a challenge in the training of the nursing professional in the sense of caring for disabled people and working an education geared to the needs of these individuals and their families.

In general, we have a heterogeneous disabled people population in several aspects, such as: social, economic, gender-related, cultural and psychological, among others. Given this, there is the importance of the NCS is driven to the specific needs of this clientele, besides the conduction of further studies that allow expanding the knowledge and rights of this population.

It is known that studies, especially in the nursing field, are carried out on growth pathways, since the care practices require the need for further researches. This pursuit qualifies the professional and flags the need for continuing education, because through researches arising from the practice, as well as new practices arising from the research, it is noted the necessity to qualify these professionals.

Before the highlighted gaps and the results mentioned in the papers included in this integrative review, it becomes essential to improve our studies for the development of researches with other designs and that produce significant evidence with regard to the disabled people.

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