



**PERFORMANCE OF NURSES IN THE CARE OF SKIN LESIONS**  
**ATUAÇÃO DOS ENFERMEIROS NO CUIDADO DAS LESÕES DE PELE**  
**ACTUACIÓN DE LOS ENFERMEROS EN EL CUIDADO DE LAS LESIONES DE PIEL**

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**ABSTRACT**

**Objective:** to know the role of nurses in the care of patients with skin lesions. **Method:** this is a qualitative, descriptive and exploratory study, through interviews with a semi-structured script with 21 nurses, analyzed by the Content Analysis Technique in the Thematic Analysis modality. **Results:** The categories << The importance of knowing >>, << Realize or delegate the practice of care >>, << Teamwork >> and << Dedication to skin care >> were derived from the empirical corpus. **Conclusion:** the improvement of the nurse, by the permanent education, by the team work and by the help of the Commission of Prevention and Treatment of Wounds, was considered a strategy for the care of the skin stimulating the clinical reasoning through discussions of case studies, analyzing the behaviors of the nurses and directing the professional practice for the collective, dialogic and critical care. **Descriptors:** Nursing; Wounds and Injuries; Nursing Care; Patient Care; Hospitals University; Tertiary Healthcare.

**RESUMO**

**Objetivo:** conhecer a atuação dos enfermeiros no cuidado aos pacientes com lesões de pele. **Método:** trata-se de estudo qualitativo, descritivo e exploratório, por meio de entrevistas com roteiro semiestruturado com 21 enfermeiros, analisadas pela Técnica de Análise de Conteúdo na modalidade Análise Temática. **Resultados:** resultaram-se do *corpus* empírico, as categorias << A importância do saber >>, << Realizar ou delegar a prática do cuidado >>, << Trabalho em equipe >> e << Dedicção no cuidado da pele >>. **Conclusão:** considerou-se o aprimoramento do enfermeiro, pela educação permanente, pelo trabalho em equipe e pelo auxílio da Comissão de Prevenção e Tratamento de Feridas, uma estratégia para o cuidado da pele estimulando o raciocínio clínico por meio de discussões de estudos de casos, analisando as condutas dos enfermeiros e direcionando a prática profissional para o cuidado coletivo, dialogado e crítico. **Descritores:** Enfermagem; Ferimentos e Lesões; Cuidados de Enfermagem; Assistência ao Paciente; Hospitais Universitários; Atenção Terciária à Saúde.

**RESUMEN**

**Objetivo:** conocer la actuación de los enfermeros en el cuidado a los pacientes con lesiones de piel. **Método:** se trata de un estudio cualitativo, descriptivo y exploratorio, por medio de entrevistas con guion semiestruturado con 21 enfermeros, analizadas por la Técnica de Análisis de Contenido en la modalidad Análisis Temática. **Resultados:** como resultado del *corpus* empírico, las categorías << La importancia del conocimiento >>, << realizar o delegar la práctica del cuidado >>, << El trabajo en equipo >> y << La dedicación en el cuidado de la piel. **Conclusión:** se consideró el perfeccionamiento del enfermero, por la educación permanente, por el trabajo en equipo y por el auxilio de la Comisión de Prevención y Tratamiento de Heridas, una estrategia para el cuidado de la piel estimulando el raciocinio clínico por medio de discusiones de estudios de casos, analizando las conductas de los enfermeros y conduciendo la práctica profesional para el cuidado colectivo, dialogado y crítico. **Descritores:** Enfermería; Heridas y traumatismos; Atención de Enfermería; Atención al Paciente; Hospitales Universitarios; Atención Terciaria de Salud.

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## INTRODUCTION

It is understood that skin lesions are a serious public health problem and worldwide in scope because of the large number of people with changes in skin integrity. In Brazil, approximately 3% of the population of the country has some type of lesion, and this percentage increases to 10% among people with Diabetes Mellitus, presenting chronic lesions.<sup>1-2</sup>

Chronic lesions are characterized by those lesions that do not heal spontaneously within three months and, most of the time, present infectious processes; are also defined as complex lesions due to prolonged permanence time reaching deep layers of skin and frequent recurrence, usually associated with systemic pathologies that impair the healing process.<sup>3</sup>

It is known that patients with chronic skin lesions are a challenge for health professionals in their clinical practice, since skin lesions cause pain, immobility, disability, psychological and emotional changes related to self-esteem and self-image generating social changes due to hospitalization, social isolation and, often, job loss.<sup>1-2</sup>

The nurse is assigned the legally established lesion care by the Federal Nursing Council Resolution 501/2015. This professional can perform Nursing consultations, prescribe and wound dressing, coordinate and supervise the Nursing team in the prevention and care of wounds and in the record of the evolution of the wound, among other specific assignments.<sup>4</sup> Thus, in the hospital scope, the nurse is responsible for the planning, organization, execution and continuous evaluation of the assistance given to patients with chronic injury aiming at a safe and quality care, uniting and expanding the systematization strategies of the skin care, evaluation and classification of the lesions, adequate treatment and recovery.

In this sense, the article was based on the following question: How is the performance of nurses in the care of patients with skin lesions characterized? The justification is directed to the concern of care to patients with injuries in the face of the many challenges in the daily life of the hospital context, an action that permeates different demands of work and that places Nursing as protagonist in the care of skin lesions.

## OBJECTIVE

- To know the role of nurses in the care of patients with skin lesions.

## METHOD

This is a qualitative, descriptive and exploratory study,<sup>5</sup> in a university hospital in the State of Rio Grande do Sul, a public private company that is part of the university hospitals network of the Ministry of Education, academically linked to a federal university that serves the native population from different parts of the State and Brazil.

Nursing professionals were chosen at the hospital's hospital admission units by the wide diversity of patients and by the Nursing and multi-professional team that actively acts in the prevention, evaluation and treatment of injuries to patients, being inclusion criteria to be a nurse assigned in one of the five clinical units of the university hospital. The criterion of exclusion was to be on vacation or leave during the collection period.

The information was collected in October 2016 through a semi-structured interview intentionally applied to 21 nurses working in five adult hospital admission units of the hospital and who accepted the invitation from the researchers to participate in the study.

Interviews were conducted at the university hospital, after working hours, in a reserved and previously scheduled place, in order to provide comfort and privacy to the participants during the interviews, recorded in MP3 and later transcribed by the researchers, with an average duration of 20 minutes. The questions asked during the interview were: How do you perceive the care of patients with skin lesions? What are the potentialities and weaknesses of caring for patients with injuries? What aspects do you think are important for proper skin lesion care?

Before signing the interviews, the Free and Informed Consent Form was signed in two ways. Data collection was completed by data saturation.<sup>6</sup> The analysis of the information was done using the Thematic Content Analysis<sup>5</sup>, constituting in pre-analysis, material exploration and treatment and interpretation of the results.

The recommendations of Resolution 466/12 of the National Health Council, which deals with research involving human beings, were followed in relation to ethical aspects.<sup>7</sup> The research is approved by the Research Ethics Committee of the university hospital where the collection took place the information under opinion CAAE 58898916.8.0000.5327.

The anonymity of the study participants was preserved by identifying the nurses by the letter "E" followed by the collection order number.

## RESULTS

Of the 21 participants in the study, 18 were women. Age ranged from 29 to 59 years. The nurses' hospital work time was seven months to 32 years. The reported qualifying period for work with injuries was four months to four years in skin groups and / or commissions.

It is also pointed out by the results that, of the 21 participants, 15 participated in professional development initiatives in specific courses on skin care and / or took courses online or in other institutions on the subject and six did not take any course update.

From the empirical corpus of the interviews, four thematic categories emerged: The importance of knowledge; Perform or delegate the practice of care; Teamwork and Dedication in Skin Care.

### ◆ The importance of knowledge

It is corroborated in this issue, through the nurses' reports, the importance of skin care knowledge about the use of coverages, permanent education and the support of a specialized committee.

*I think knowing the coverages, how to use them and knowing the types of injuries, it is possible to provide a better treatment to the people. (E11)*

*It is necessary to understand how the various coverages that exist available in the market for the treatment of the different types of injury work. (E2)*

It also reminded the permanent education as a strategy to favor the realization of the safe and quality care.

*They could have more skills, I'm missing out, have more discussion of cases or, even after the shift, have a conversation with a mediator to stimulate a debate in a dynamic way. (E20)*

*Whenever I can, I try to update myself. I think there could be meetings discussing real cases of patients. (E18)*

Cooperative relationships were listed as essential to the care of the skin by the nurse reporting to the Hospital Wound Prevention and Treatment Commission for the technical-scientific contribution to the professionals involved in the care.

*I like doing the bandages. I have no difficulties and have worked for years in the hospital's Wound Care and Prevention Committee. So, I am called to evaluate skin lesions in different inpatient units. Besides, I try to be always up to date. (E12)*

*In each patient with a skin lesion, if I have any questions regarding the treatment, I seek help from the hospital's Wound Care and Prevention Committee. (E6)*

Based on the statements of the participants, the importance of a commission acting as a consultant within the institution, concerned with the healing process of the patient's injuries, a referral service with specialized professionals.

### ◆ Carry out or delegate the practice of care

It is reported that in the Systematization of Nursing Care (SNC), nurses perform and organize the practice of care, based on the patients' needs, directing their action.

*I always see if the patient has an injury and performs the Nursing process by registering the diagnosis of Impaired Tissue Integrity Nursing and, when there is no injury, I apply the Braden scale. Therefore, nursing care will be the object of nursing care. (E4)*

*When the patient arrives at the unit, at the hospital, the nurse performs anamnesis and physical examination, in addition to the interview. A thorough physical examination can assess the condition of the skin and the lesions, an important time for planning the care. (E18)*

*In fact, I evaluate the skin and apply the Braden scale. When the patient has an injury, I ask the Nursing technician to call me at the time of the bath to evaluate the healing process. (E7)*

### ◆ Team work

It is considered the work of the nurse in a strategic team for the accomplishment of the skin care in the hospitalization unit, configuring the care a collective process in which he is responsible for the articulation of the interprofessional work of Nursing.

*The greatest difficulty is not to see the injury and have to rely on the description that another professional made due to the demand of the work of the unit, which does not allow to evaluate all the injuries of all the patients during the work shift. (E21)*

*I ask the Nursing technician to call me when to open the dressing just because an injury changes from day to day or every other day. So, not always the treatment that is prescribed is what will continue, because this change according to the healing process. (E21)*

*I am always attentive to the work that the team develops. I usually advise the Nursing technicians to do the dressing properly, I help whenever I can. (E21)*

The performance of nurses was described, as well as the differences of actions between health professionals and the discussions inherent to the different contexts of skin care performance, were also emphasized.

*I observe differences between some behaviors of the professionals, but what I can visualize, in a broad context, is that the*

*actions complement each other and that the action of care is a collective action and the dialogue between the team is something necessary. (E19)*

*We have the support of support teams such as Nutrition, for example, that assesses the patient's nutritional status. With the nutritionists, I feel at peace to discuss a diet with a greater load of proteins to potentiate healing. (E14)*

#### ◆ Dedication in skin care

Lack of time and workload as difficulties in meeting the needs of patients and their injuries were mentioned due to the demands.

*In my routine, I have some priorities. For example, if there is a more serious patient, I end up leaving the care of the injury of another patient in the background and I delegate it to the Nursing technician. If I could put it as a priority, I would put it, but in some situations, I cannot handle the demand for work. (E15)*

In view of the intense workload of Nursing, it was reported that nurses are not always able to follow closely the prescribed care.

*The main difficulty is the great workload, with little time to take care of the injuries. Sometimes I feel like I'm just putting out the fires. If there were more nurses, it would be possible to plan the care of skin lesions by evaluating the healing process in more detail. (E18)*

*It's no use knowing that I have to change my mouth every two hours if I do not have enough professionals to do this. (E16)*

## DISCUSSION

It is emphasized, among the strategies used by the nurse to the performance of skin care, the importance of keeping up-to-date by stimulating clinical reasoning and seeking the best therapy.

Through the changes in the national and international scenarios of Nursing in skin care, the strengthening of nurses was promoted for a more effective and contextualized action. Scientific research, the construction of research groups and specialized commissions strengthen the practice of care based on professional experiences and technical-scientific skills developed by an evidence-based knowledge.<sup>8</sup>

Keeping up-to-date with the nurse is necessary, in this regard, regarding approaches and clinical practices in skin care, a subject that is constantly improving<sup>9</sup> and is concerned with the prevention, evaluation and treatment of injuries.<sup>10</sup> Being open to the innovations of knowledge and having the freedom of service for action are indispensable requirements.

It is inferred from the nurses' reports that investing in permanent education can allow the exchange of experiences that are experienced institutionally in skin care with discussions of patients' own cases that they attend daily, in addition to the conversation wheels at the shift, which were mentioned to qualify the health care provided by the Nursing staff of the hospitalization units.

It is noted that the fact that the nurse does not seek permanent updating can interfere with the care of the lesions, their fragilities in the professional practice of care or even the insecurity about the products available in the market and their peculiarities.<sup>9</sup> These are corroborating situations knowledge deficit of nurses.

It is also worth noting that nurses reported asking for help from the hospital's Wound Care and Prevention Committee, for advice and evaluation support, seeking suggestions for treatment and treatment of more complex injuries. In this way, it is perceived that the specialized professionals are a theoretical and care contribution to those situations in which the need for greater clarification is demanded or when they report to the prevention of more severe situations.

In this sense, the preventive approach of nurses is used to motivate the commission to seek effective prevention strategies in the management of care and to strengthen the quality of patient care.<sup>10</sup> The commission is an interdisciplinary technical group, with a normative and consultative character, advising on the prevention and treatment of lesions. In addition, it promotes professional training courses, tests new materials, evaluates conducts and follows the treatments performed by the nurses in the units.<sup>11</sup>

It contributes, through the systematization of care, to the organization of skin care, based on the Nursing Process, detailing steps such as the history of Nursing accompanied by anamnesis and physical examination, the Nursing diagnosis, the planning of the actions, the implementation of nursing care and evaluation.<sup>12</sup> The evaluation can be considered a fundamental step, which allows to coordinate the skin care based on information important to the decision making, facilitating the establishment of the priorities.<sup>13</sup> It was exemplified the evaluation, by the participants of the study, by the use of the Braden Scale in inpatients for the implementation of prevention actions in patients who do not yet have an injury. This scale has the purpose of measuring the risk of patients in developing pressure injury and has

a higher quality and sensitivity for the measurement of risks.<sup>14</sup>

Another focus was on the attribution of the Nursing diagnosis<sup>15</sup> by nurses, highlighting "Impaired tissue integrity" and "Impaired skin integrity" in patients with lesions. The registry of the diagnoses in a computerized system is a tool that helps to evaluate the care developed for different types of injuries and a concerted action in measuring the results achieved from the implementation of the diagnosis of Nursing.

It can be seen that pressure injuries are very frequent in hospitalized patients, and the treatment must be focused on prevention and the use of special coverages. Thus, it is necessary that the nurse knows the products and coverages available in the market and their correct indication. This knowledge needs to be discussed in undergraduate courses during vocational training.<sup>16</sup>

Nurses need to be clarified about each type of injury, different stages of healing that require adequate coverage, and knowledge of the indication, conduct and details of how the products act on the skin.

Another aspect of nurses' performance is the articulation of patient care with professionals from other areas, promoting care in a collective work characterized by cooperation, complicity and solidarity among professionals.<sup>17-8</sup> In this sense, work in a team puts the need for authentic communication within relationships, respect for others and their knowledge, welcoming the differences of knowledge.<sup>19</sup>

It is also necessary to recognize that skin lesions are a multidisciplinary problem that requires effective action of all the professionals involved in the care concerned with the prevention, minimizing the risks associated with the development of the lesions in the patients and the costs related to the treatment.<sup>20</sup>

It is believed that the demand for patient care, increasingly complex, in the hospitalization units, causes the nurse to end up delegating to the nursing technicians some care that he or she would like or intended to accomplish, which may reflect in the planning and in the implementation of care provided to patients in the care of the lesions.

## CONCLUSION

It is concluded that the improvement of the nurse, through permanent education, teamwork and the help of the Wound Prevention and Treatment Commission, is a central strategy for the care of the skin

stimulating the clinical reasoning through case studies, as well as teamwork, which allows the exchange of information, within an established performance through the trust and quality of interpersonal relationships.

It is important to emphasize that nurses mentioned little time to dedicate themselves to skin care and, to this end, put into practice planning strategies to better use their workday. However, attention is needed to the organization of the work as a whole emphasizing priorities of care to delegate activities and procedures.

Based on the study, we show the expansion of knowledge, with repercussions for the production of care in Dermatological Nursing, besides raising possibilities for further investigations, since the limitation of the study is related to the research scenario, a university hospital characterized by a peculiar technical and organizational contribution and by professional contingents that favor the care of the skin. Thus, investigations are recommended in other scenarios of hospital care and primary health care.

It is portrayed, through the commitment of the nurse in the search for a collective, dialogic and critical care to the patient with skin lesion, his performance through care interventions in a systematized way, besides a concern concerned to qualify the Nursing team to clinical practice in lesions.

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