

NURSING PROFESSIONALS AND PSYCHIATRIC ADMISSION IN GENERAL HOSPITAL: PERCEPTIONS AND PROFESSIONAL TRAINING

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ABSTRACT: Qualitative study aimed to investigate how the nursing staff perceives psychiatric care beds in a general hospital and assess whether they are capable to assist people with mental disorders. Data was collected from May to July 2016, in a general hospital in the state of Minas Gerais and 31 nurses participated in the study. Semi-structured interviews were used to collect information, and the data obtained was subsequently submitted to content and thematic analysis. It was found that the participants felt uncomfortable with psychiatric beds in the general hospital, which may be related to their lack of skills to provide care for people with mental disorders. Therefore, it is necessary to develop educational planning, especially for nursing technicians, in order to make them able to assist these patients.

DESCRIPTORS: Nursing; Psychiatry; Hospitalization; Perception; Training.

PROFISSIONAIS DE ENFERMAGEM E A INTERNAÇÃO PSIQUIÁTRICA EM HOSPITAL GERAL: PERCEPÇÕES E CAPACITAÇÃO PROFISSIONAL

RESUMO: Objetivando verificar como a equipe de enfermagem percebe a internação psiquiátrica no hospital geral e identificar sua capacitação profissional para lidar com a pessoa com transtorno mental e/ou que fazem uso prejudicial de álcool e outras drogas, desenvolveu-se este estudo qualitativo. A coleta de dados ocorreu nos meses de maio a julho de 2016, em hospital geral do estado de Minas Gerais e participaram 31 profissionais de enfermagem. Utilizou-se a entrevista semiestruturada para a obtenção dos dados que foram submetidos à análise de conteúdo e análise temática. Verificou-se que os participantes têm dificuldades em aceitar a internação psiquiátrica no hospital geral, o que se relaciona à possível inaptidão para oferecer cuidados direcionados à pessoa com transtorno mental. Sendo assim, faz-se necessário o desenvolvimento de planejamento educativo, sobretudo para os técnicos de enfermagem, com vistas a qualificá-los para cuidar dessas pessoas.

DESCRIPTORIOS: Enfermagem; Psiquiatria; Hospitalização; Percepção; Capacitação.

PROFESIONALES DE ENFERMERÍA Y LA INTERNACIÓN PSIQUIÁTRICA EN HOSPITAL GENERAL: PERCEPCIONES Y CAPACITACIÓN PROFESIONAL

RESUMEN: Se objetivó verificar como es percibida la internación psiquiátrica en hospital general por parte del equipo de enfermería, y verificar su capacitación para encargarse de personas con trastorno mental y/o que hacen uso perjudicial de alcohol y otras drogas. Estudio cualitativo cuyos datos fueron recolectados de mayo a julio de 2016, en hospital general de Minas Gerais, participaron 31 profesionales de enfermería. Se aplicó entrevista semiestruturada para obtención de los datos, sometidos a análisis de contenido y análisis temático. Se verificó que los participantes tenían dificultades para aceptar la internación psiquiátrica en el hospital general, lo cual está relacionado con la posible ineptitud para brindar cuidados dirigidos a personas con trastorno mental. Siendo así, resulta necesario el desarrollo de planificación educativa, particularmente para los técnicos de enfermería, a fin de calificarlos para brindar cuidados a estas personas.

DESCRIPTORIOS: Enfermería; Psiquiatria; Hospitalización; Percepción; Capacitación.

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● INTRODUCTION

Hospitals were originally charitable institutions where the sick received only social and spiritual care⁽¹⁾. Later, with the advances in healthcare practices and methods, higher-income individuals also began to seek hospital services, and these institutions that provided shelter for the sick now offered proper medical care and assistance to the patients⁽²⁾.

Hospitals may cover several specialties, classified according to the type of health service provided and may provide general or specialized care⁽³⁾. In the 1960's psychiatric beds were made available in general hospitals in Brazil when the asylum model of treatment of mental disorders was still prevalent⁽⁴⁾. There was less focus on physical pathologies, and mental disorders were then recognized as social, behavioral and family disorders that impaired the quality of life of the people involved.

However, prior to the psychiatric reform movement in Brazil, individuals with mental disorders were institutionalized and secluded from social living. The referred movement was strengthened by the enactment of Law 10.216 of 2001 (known as Anti-Asylum law), which was followed by a legislation targeted to the protection of the rights of persons with mental disorders, as well as to the formation of an extra hospital network to ensure psychosocial rehabilitation and greater integration of these individuals into society⁽⁵⁾.

With the publication of Ordinance No. 148, of January 31, 2012, the Ministry of Health deployed Standard hospital services for the care of people with mental disorders or distress and with health needs arising from the use of alcohol, crack and other drugs⁽⁵⁾. The availability of psychiatric beds in general hospitals, in addition to ensuring appropriate treatment to the patients, contributes to reduce the stigmatization of people with mental disorders⁽⁶⁾.

Therefore, data from a study of 2010 corroborated the need for changes in the recognition and treatment of mental disorders, reporting that general hospitals usually received many individuals with mental disorders. The psychiatric morbidity of these patients ranged from 20% to 60%, and of these, only 1% to 13% were receiving specialized care⁽⁷⁾.

Admission of patients with mental disorders in general hospitals may occur in specific situations, such as the onset of a clinical condition associated with an existing mental illness or onset of psychiatric symptoms during hospitalization for a clinical condition⁽⁸⁾.

One study found that approximately 30% of the patients admitted to medical and surgical clinics for treating clinical problems had a mental illness. The most prevalent psychiatric diagnoses were: mood disorders (35%); anxiety disorders (20%); mental disorders caused by substance abuse (20%); organic mental disorders (20%); and other mental disorders (5%)⁽⁹⁾.

Thus, the nursing staff of general hospitals, and particularly in psychiatric inpatient units or in units with psychiatric beds, should be able to understand the needs of people hospitalized to treat mental disorders and provide the care they need.

It is essential, therefore, that the nursing staff, in addition to their technical knowledge, is prepared to promote interventions targeted to mental well-being of patients. In view of the aforementioned, this article has the following purposes: assess the perception of the nursing staff regarding psychiatric beds in a general hospital and find out whether they are prepared to manage patients with mental disorders and/or with alcohol or other drugs abuse. Such knowledge is important to characterize the nursing role in the process of implementation of psychiatric beds in a general hospital.

● METHODOLOGY

Descriptive study with qualitative approach conducted in a city with approximately 300 thousand inhabitants, located in the inland of Minas Gerais. The general hospital where the study took place had 225 beds, of which six were intended for individuals with mental disorders and/or with abusive use of alcohol and other drugs.

All the nursing professionals who worked in the medical clinic with psychiatric beds (33 individuals) were invited to participate in the study. Of these, 31 agreed to participate, 28 (90.32%) women, 27 (87.09%) were married and four (3.22%) were single. There were 26 Nursing technicians (83.87%) and five Nurses (16.12%).

Data was collected from May to July 2016, through semi-structured interviews. The questions involved the following aspects: the respondent's perception of psychiatric units in the general hospital and level of professional training to manage and interact with people admitted for psychiatric problems in the general hospital.

Prior to data collection, one researcher contacted the nurses and invited them to participate in the study. The interviews of those who agreed to participate were then scheduled and conducted in a quiet, private room in the hospital selected by the respondent. The interviews were recorded and later transcribed.

Content analysis of data was used. It comprises a set of techniques for organizing communication, in order to make the topics emerge⁽¹⁰⁾.

After content analysis, data was systematized by thematic analysis⁽¹¹⁾. This analysis method is performed in three stages: pre-analysis, exploration of material and treatment of results and interpretation⁽¹⁰⁾.

Analysis began after approval by the Ethics Committee (Statement No. 447 029) issued after analysis of the Research Ethics Committee of Universidade de Uberaba. Subsequently, all participants were informed about the study objectives and signed the Informed Consent Term. To ensure anonymity, the participants were identified by letters NT (Nursing Technicians) with sequential numbers and N (Nurses) followed by sequential numbers.

● RESULTS

After transcription, two themes emerged from data analysis: "Acceptance and feelings of the nursing team regarding psychiatric hospitalization in the general hospital" and "Training of the nursing team to meet the needs of people with mental disorders."

Acceptance and feelings of the nursing professionals regarding psychiatric hospitalization in the general hospital

The nursing professionals were unwilling to accept psychiatric hospitalization in the general hospital:

We had to accept it, and it all happened from night to day, but it is difficult because we have a lot of work to do. (E4)

It is difficult, and there are few technicians willing to provide care for these patients. (E5)

I think that there should be a specific sector for them, because these patients may pose risks to us and to the other patients. (TE23)

However, some participants, especially nurses, reported being satisfied to assist people with psychiatric disorders.

I love to deal with these patients. I don't get stressed. (E1)

There is no problem, because they are always accompanied. (E3)

The health professionals who do not feel comfortable with psychiatric hospitalization in a general hospital explain that they feel fear and insecurity and cannot feel empathy with the patients.

I am afraid of them. (TE9)

I really can't feel empathy with them. (TE8)

They scare me, especially when everyone is asleep. I am afraid of physical assault. (TE21)

I feel uncomfortable with their presence here, particularly because it is very close to the maternity (E2)

Although some nursing professionals reported their insecurity in dealing with people with mental disorders, there was a general feeling of concern for the well-being of these patients during hospital admission:

We have to guide the team, because there is still a lot of prejudice [...]. The wards are separated, but the place is not suitable: anything here can be used as a weapon, and the patient can get hurt, and break something. I do not see any problems in psychiatry and medical clinic wards together, but the place is not suitable. (E1)

The interviews identified the pre-conceived ideas related to the aggressiveness and unpredictability of the people with mental disorders, who persist even with the correct use of the pharmacological therapy, a practice predicted during the hospitalizations.

Training of the nursing team to meet the needs of people with mental disorders

In this study, most professionals reported not being able to manage people with mental disorders due to lack of experience.

Well, I have never dealt with a situation of mental disorder, but you have to remain calm. Getting nervous won't do any good. (TE20)

I am learning to deal with these patients in my practice. (TE10)

The lack of preparation reported by some participants was justified by the lack of qualitative and quantitative training provided by the hospital.

The training period was too short, and immediately after this short training the psychiatric patients were admitted. No further training was offered. (TE16)

I learned to place a patient in restraint on the bed in a fast training prior to the hospitalizations. (TE6)

It is possible to infer that this training was not sufficient to provide the nursing technicians with the necessary skills to manage patients hospitalized for psychiatric disorders.

The assistance offered by the nursing technicians who participated in this study does not take into consideration the psychological needs of the subjects, since it does not differentiate between patients with or without mental disorder, as expressed in the following reports.

This patient is like any other patient for me. (TE13)

They receive the same care given to other patients. (TE2)

Therefore, it can be seen that experience is valuable in the establishment of care strategies. In addition, not all the health professionals who participated in this study had experience in mental health care or were duly trained to provide such care.

On the other hand, some participants reported being prepared to meet the demands of people with psychiatric disorders, since they received previous training in other health facilities.

Because I've done internships and have worked a little with psychiatric patients. So it's natural for me, and I don't feel scared. (TE 21)

Thus, an educational plan should be developed for nursing technicians to allow them to identify the specific needs of people with mental disorders admitted to general hospitals. This intervention is strongly recommended for nursing technicians because of their testimonies on the issue.

● DISCUSSION

Some studies have shown that nursing professionals usually feel fear, frustration and helplessness when they have to deal with people with mental disorders⁽¹²⁾. These feelings are a result of the stigmatization faced by these patients, who are often considered unpredictable and of difficult socialization⁽¹³⁾.

The nursing staff should be careful while conveying their feelings and expressing their opinions, since the attitudes taken by patients with mental illnesses are affected by the way in which they are treated⁽¹⁴⁾.

The findings of this study corroborate the literature, demonstrating as 19 respondents reported negative feelings such as fear, lack of empathy with the patients and insecurity. Corroborating the statements of the participants, the literature also reports that poor physical structure is one of the main concerns associated with the admission of psychiatric patients in general hospitals⁽⁴⁾.

The physical environment and the existing resources may pose risks for the patient and for third parties in different health services, regardless of whether they are specialized or not.

In view of the aforementioned, the health professionals responsible for the management of these patients must be attentive to the physical resources and to the mental status of the inpatients, to prevent self or hetero-aggressive behavior. Humanized care that promotes the well-being of hospitalized patients and the other individuals in the environment is recommended.

The implementation of psychiatric beds in general hospitals is relatively recent in the psychosocial care network, which may explain the rejection of these services by some professionals. These beds are destined to people with severe mental disorders during an acute episode or crisis, as a complementary resource to provide comprehensive health care to these patients^(4,15). However, these resources will be pointless without the use of effective strategies and if they are managed by poorly trained nursing professionals, reinforcing the stigmatization of patients with mental disorders.

As members of a multidisciplinary team, nurses should value the biological, emotional, mental and spiritual dimensions of the patients with mental disorders, being concerned with the whole person rather than the disease, as well as listening to them carefully, to demonstrate a satisfactory level of empathy and understanding of the patient. These aspects should never be neglected, as this may have a negative impact on the behaviors of these patients⁽¹⁶⁾.

Thus, nurses are expected to participate in permanent educational and training activities to be updated on the most innovative techniques, perceiving themselves as part of a multidisciplinary team.

Some nurses may be unable to assist these patients because they did not have the opportunity to deal with them previously⁽¹⁷⁾. In this study some patients reported their inability to manage patients with mental illnesses was associated with little or no prior experience with the management of these patients.

The findings of this study are consistent with those from similar studies, especially in what concerns the fact that the professionals who showed little acceptance and negative feelings (fear, insecurity and lack of empathy) regarding psychiatric beds in general hospital were precisely those who had not previously managed these patients⁽⁷⁻⁸⁾. Thus, nursing professionals should always be concerned with the mental and spiritual aspects of these patients, which can be facilitated through educational actions.

However, despite being insecure and having poor understanding of the mental status of the patients, the nursing staff provided care to them as they did to the other inpatients.

While pharmacological treatments are used to treat many mental disorders, other non-drug treatments are being gradually used⁽¹⁹⁾. Recent studies report that nurses working in general psychiatric in-patient wards should provide individualized care to their patients⁽¹⁸⁾.

Regarding these strategies, it was found that some professionals who participated in this study used therapeutic relationship. It is recommended that nurses who provide care to patients with mental disorders are more willing to listen to these patients, showing empathy and concern with their thoughts, feelings and behaviors⁽¹⁹⁾.

Some practitioners who participated in this study were able to promote a trusting patient-nurse relationship without complications such as such as attempts to self or hetero-aggression, destroy hospital property or escape from the hospital). Thus, the use of therapeutic communication tools is recommended during the patient stay in the psychiatric ward, and not only at the times of psychotherapeutic interventions⁽²⁰⁾.

Finally, it can be inferred that the feelings of the nursing professionals towards people with mental disorders admitted to general hospitals are generally similar. Therefore, it is necessary to monitor those professionals who do not seem to be properly trained and who have not changed their attitudes and beliefs regarding the delivery of care to these patients, in order to ensure the delivery of humanized, comprehensive and non-discriminatory care by the health care team. A general analysis of the nursing professionals was conducted here, without focusing on the specificities inherent in the activities performed by nursing technicians and nurses in the care of inpatients, which may be one limitation of this study. Another limitation may be the fact that the psychiatric beds have only been implemented in December 2014 in the hospital where this study took place, i.e., the service has been made available very recently.

● CONCLUSION

The present study identified a nursing team with that was reluctant to accept psychiatric beds in general hospitals based on the historical stigma of mental illness. Also, these professionals have not been adequately trained to provide the comprehensive and humanized care that should be delivered to individuals with mental disorders.

Thus, while demonstrating that one of the great advances of the psychiatric reform movement was the implementation of psychiatric care beds in general hospitals, such as those investigated in the present study, the data obtained highlights the shortcomings and challenges to be overcome.

One of the great challenges in this regard is ensure that the nursing staff is properly trained to provide the care expected. Therefore, we highlight the following needs: educational interventions that address the citizenship of individuals with mental disorder, ensured by the right to equality; implementation of interdisciplinary meetings to address clinical cases and draft an individualized therapeutic plan aimed to qualify the nursing staff to be able to provide effective care to patients with mental problems, as well as to include relational skills among the technical skills required in the nursing profession.

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