Family health nursing: A Recent Review

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Abstract
Nurses remain at the forefront of patient care and are among the largest home care services providers. Professional nursing is assisting people during both health and disease. Nurse practitioners are expected to fill gaps in providing primary care. Family plays an important role in health and illness and family members frequently rely on health care workers to guide and support decision-making process. There is a lack of curricular and teaching models that address nursing practice with families in numerous courses and learning experiences. Increasing number of individuals receive care at home but significant proportion of these patients acquire infections during their care period. Nursing home residents frequently experience heavy and unnecessary care transitions towards the end of life.

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1. INTRODUCTION

Nurses remain at the forefront of patient care (Maharaj et al., 2019) and are among the largest home care services providers. Thus workforce optimisation of nurses positively influence patient outcomes (Ganann et al., 2019). In many countries in the world, nursing discipline and profession has been strengthened by strong and effective leaders in education, research and clinical practice. The 72nd World Health Assembly designated year 2020 as “International Year of the Nurse and the Midwife” for contributions of nurses and midwives to the global health and well-being (Daly et al., 2020). Family nursing is an essential part of nursing (Huang et al., 2021). Family nurse practitioners significantly contribute to disease management and health promotion in primary care (Tsay et al., 2021). Implementing family system nursing in clinical settings is rising (Svavarsdottir et al., 2018).

Importance of human resource planning in home healthcare is increasing everyday due to serious degree of nurse and caregiver shortages in companies in many countries (Demirbilek et al., 2021). Professional nursing is assisting people during health and disease. They are shaping self-care capabilities of people. Complexity of tasks puts responsibilities on nurses due to direct contact with patients, families and communities (Kecka, 2019). Studies of family nursing interventions have shown positive results for the health of individuals and families (Rodrigues et al., 2021). A nurse's skill in establishing therapeutic communication is central to family nursing. Using a family-centered approach, nurses can facilitate relationship building with members of a family unit (O'Rae et al., 2021). Systems thinking is essential for advanced family nursing practice, yet this skill is complex and not innate (Looman, 2020).

Family nurse practitioners have a plethora of employment options upon graduation. Besides primary care, many are working in nontraditional settings such as urgent care, emergency departments, retail health, and specialty practices. In many of these settings, practitioners are required to perform procedures (Woroch & Bockwoldt, 2021). Patients, their families and nursing professionals benefit from applying the family nursing theory to practice. But implementation of family nursing in clinical practice is limited partially due to insufficient or inadequate educational programs focused on family nursing (Gutierrez-Aleman et al., 2021). Increasing number of individuals receive care at home but significant ratio of these patients acquire infections during their care period. Whilst there has been significant focus on strategies for infection prevention and control in acute care environments (Dowding et al., 2020). Researchers have found that many primary care providers are not following developmental screening recommendations (Gellasch, 2019). Although the nursing profession has ample knowledge about the importance of family nursing and the value of family-focused actions, there is a lack of curricular and teaching models that address nursing practice with families in numerous courses and learning experiences (Meiers et al., 2018).

The demand for primary care providers in developed countries is rising and shortages by 2025 are projected. Nurse practitioners are key to addressing the current and future shortage of health care providers, especially in primary care. However, nurse practitioners face a significant challenge when transitioning from the registered nurse role to the advanced practice role, which can affect job satisfaction and retention (Finneran & Kreye, 2021). Health care and services
in the west are mostly oriented towards individuals, and the needs of families often receive little consideration (Gervais et al., 2020).

Countries with ageing populations seek to reduce professional and residential care and therefore encourage family caregiving. Intensive family caregiving, however, places families at risk for caregiver burden which may lead to increased professional care and admission into residential care (Broekema et al., 2021).

Family plays an important role in health and illness, and preparing the nurses to assess and improve the family functioning and relationship based on a theoretical framework is of critical importance (Yektatalab et al., 2017). There is increasing focus on collaboration in primary health care, but there is insufficient patient perspective on collaboration between the family nurse and family doctor. The traditional model of nursing care and the hierarchical relationship, in which the doctor has the dominant role, are evident in the patients’ remarks. The autonomy of nursing could be strengthened by expanding, and highlighting, the primary care activities that a nurse can perform on her own (Taranta & Marcinowicz, 2020).

Alcohol and substance-related disorders affect individuals throughout the global community. It is important that nurse practitioners understand the use of screening, brief intervention, and referral to treatment in recognizing these disorders before development of chronic disease conditions (Arends et al., 2021). A nurse home visitation programme in the USA was found to improve a wide range of outcomes for teenage mothers and their children (Cavallaro et al., 2020). Health care provider support is essential for breastfeeding success. Family Nurse Practitioners are in a unique position to promote and manage breastfeeding (Webber & Serowoky, 2017).

Six main categories of qualities define a “good family nurse” meaning to older patients. These are: 1) Personal traits and attributes (gender and individual characteristics and behaviours not directly related to nursing). 2) Providing care (caring attitude and patient support). 3) Communicating with the patient (the ability to listen and inform the patient). 4) Professional competence (knowledge, professional experience and good technical skills). 5) Ethical attitude (respect, patience and vocation). 6) Availability (the frequency and duration of home visits, organization of the doctor’s appointments) (Marcinowicz & Taranta, 2020).

Nurse practitioners are expected to fill gaps in providing primary care and need vital skills to meet the growing need for primary care providers. One necessary skill is managing “on-call” clinical questions/concerns by patients across the life span (Conelius et al., 2019).

2. FAMILY

Nursing home residents frequently experience heavy and unnecessary care transitions towards the end of life. Families have a significant role in emergency department transfer decisions as they see the change of condition as a crisis. This crisis sense is driven by four major influences: 1) insecurities with nursing home care; 2) being not prepared for end of life; 3) absent/inadequate care planning; 4) deficit of communication and agreement within families related to care goals (Stephens et al., 2015). A serious illness may effect family system and members of family frequently experience considerable physical, emotional and social burdens (Widiyanto et al., 2021).
The loss of sense is the core of the moral pain for families, nursing staff and old patients. Sense is a part of person-centered care quality in a nursing home, for residents, their family, and the nursing staff quality of life at work. Possible misunderstanding or even conflicts may appear. Medical doctors, nurse-managers and psychologists can bridge the gap between the semiospheres (Thomas et al., 2016).

Family members frequently rely on health care workers to guide and support decision-making process. Emotional consideration is commonly acceptable in decision-making (Itzhaki et al., 2016). The heart of social systems is the family and if we are to maintain the health of societies, we need to discover the best means of nurturing the heart (Smith, 2015).

Patients generally prefer to have their family present during medical or nursing interventions. Family presence is assumed to reduce anxiety, especially during painful interventions (İşlekdemir & Kaya, 2016).

High-quality palliative care for people with dementia should be patient-centered, family-focused, and include well-informed and shared decision-making, as affirmed in a recent white paper on dementia from the European Association for Palliative Care (Penders et al., 2015). The behavioral symptoms that often accompany dementia (for example, pacing, calling out, and resistiveness) are stressful to carers and greatly increase the risk of institutionalization. While psychotropic medications are commonly prescribed, their efficacy is limited (Van der Ploeg et al., 2016).

Are for people with advanced dementia requires a palliative approach targeted to the illness trajectory and tailored to individual needs. However, care in nursing homes is often compromised by poor communication and limited staff expertise (Agar et al., 2015).

Family nurse practitioner graduates must be prepared to care for individuals and families and to demonstrate a commitment to family-centered care. Family nurse practitioner educators are challenged to translate theoretical frameworks into meaningful clinical engagement through novel teaching strategies that promote family-centered care in a health care environment that focuses primarily on the individual (Ellis et al., 2015).

Research supporting use of standardized patients in health professional education is strong. Evidence suggests integrating the use of standardized patients into clinical training provides learners with interactive practice in gaining and perfecting clinical skills, in becoming competent in communication skills for provision of health care, and results in improved satisfaction for faculty and students (Pastor et al., 2015). Communication is one of the key principles in family centered care. Studies have shown some drawbacks in communication between families and nurses. Identification of the obstacles against nurse-family communication helps managers of healthcare systems to plan and eliminate the challenges of effective communication. Besides, elimination of these factors (inadequate education, poor professionalization, difficult working conditions, authoritarian management) leads to appropriate strategies for effective application of family centered care (Shirazi et al., 2015). The next decade is likely to produce any number of global challenges that will affect health and health care, including pan-national infections such as the new coronavirus Covid-19 and others that will be related to global warming. Nurses will be
required to react to these events, even though they will also be affected as ordinary citizens. The future resilience of healthcare services will depend on having sufficient numbers of nurses who are adequately resourced to face the coming challenges (Catton, 2020). Nursing shortages, particularly in critical care units, are a major concern worldwide. Job satisfaction is a key factor associated with the high turnover of critical care nurses (Dilig-Ruiz et al., 2018).

3. CONCLUSIONS
Family members frequently rely on health care workers to guide and support decision-making process. There is a lack of curricular and teaching models that address nursing practice with families in numerous courses and learning experiences. Integrating the use of standardized patients into clinical training provides learners with interactive practice in gaining and perfecting clinical skills. Increasing number of individuals receive care at home but significant ratio of these patients acquire infections during their care period. Nursing home residents frequently experience heavy and unnecessary care transitions towards the end of life. Family nurse practitioner graduates must be prepared to care for individuals and families and to demonstrate a commitment to family-centered care. Communication is one of the key principles in family centered care. Job satisfaction is a key factor associated with the high turnover of critical care nurses.

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