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REHABILITATION NURSING IN HYGIENE CARE: AN INTERVENTION FOR AUTONOMY

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ABSTRACT

Introduction: hygiene care is a basic human need that aims to promote body cleanliness and comfort. In the dependent person in self-care, it is a focus of nursing in its science and execution.

Objective: to analyze the scientific description that relates hygiene care as a time of rehabilitation for the dependent person in self-care.

Method: integrative literature review conducted in February 2020 in the CINAHL Plus database with full text, using the keywords hygiene, bath, rehabilitation nursing, with the Boolean operator *AND*.

Results: of the universe of 157 articles found, 6 were selected for analysis.

Conclusion: we corroborate that hygiene care is one of the activities of daily living where a greater degree of dependence stands out. This lacks intervention for autonomy, something that can be transformed into a moment of rehabilitation. Through specialist nurses, they can teach and instruct strategies for more independent self-care, rehabilitating the person in their day-to-day lives.

Keywords: hygiene; bath; rehabilitation nursing.

INTRODUCTION

Hygiene care is described as a nursing intervention that ensures results such as body cleaning, preservation and integrity of the integuments, contributing to the person's general well-being and comfort⁽¹⁾. It is a vehicle for the provision of multiple care that enriches the nurses' knowledge and value them as caregivers⁽²⁾.

Its practice is one of the nursing focuses defended in its different models. The literature demonstrates how important maintenance and assistance in this care is⁽³⁾.

According to the data described on the characterization of hospitalizations in hospital units, the number of people dependent for self-care increases in view of their organic and functional failure, their age or being subjected to a transition process that they may experience^(3,4). In the domain of self-care, the self-care of hygiene, bathing, is one of those described with the greatest cases of dependence^(3,4).

When the person does not have the capacity to perform self-care, there is a deficit in it, requiring nursing care to meet the fundamental human need affected⁽⁵⁾. However, we wonder if the person would benefit if this care was provided with the collaboration of the nurse specialist in rehabilitation nursing.

The specialist nurse in rehabilitation nursing has the competence to identify the needs for intervention in the person who is unable to perform their daily life activities independently⁽⁶⁾. As a result of a transition process of a permanent or temporary nature, the specialist nurse has the ability to evaluate and subsequently to implement a specialized care plan in order to contribute to the person's quality of life⁽⁶⁾.

Since hygiene care is a basic human need, the moment of bathing becomes a possible intervention space for specialist nurses. Throughout its execution, it can observe and evaluate the person, creating a moment of data collection almost anonymous, where later it can intervene by teaching strategies in order to stimulate the person to participate in his self-care, adapt him to his limitations, maximizing his autonomy and quality of life, rehabilitating it⁽²⁾.

Guided by this theoretical foundation, we aim to analyze scientific descriptions that relate hygiene care as a time of rehabilitation for the dependent person in self-care. That is, if the person would benefit from the intervention of the nurse specialist in rehabilitation nursing, encouraging them to participate in self-care with a view to enhancing capacities, promoting their autonomy.

MATERIAL AND METHODS

This integrative review, as a way of synthesizing knowledge⁽⁷⁾ on the topic under study, is oriented towards a source of information.

Thus, the Cumulative Index of Nursing and Allied Health Literature Plus database with full text (CINAHL® Plus) was chosen, the largest and most in-depth database of nursing research^(8,9). Guided by the PI question (C)O: does the collaboration of the specialist nurse in rehabilitation nursing in hygiene care (I) benefit the autonomy (O) of the dependent person in self-care (P)? We used the descriptors hygiene, bath, and rehabilitation nursing, based on the Health Sciences Descriptors, with the Boolean operator *AND*, for their combination.

Inclusion criteria were established – original articles, published in national and international literature, whose theme was hygiene care, specifically the moment of bathing, as a time of rehabilitation, in Portuguese and English, in a space between January 2015 and January 2020 – and exclusion criteria – studies in the format of editorials, opinions or comments, monographs, dissertations and theses.

The search resulted in 157 articles: 143 were excluded by title 7 excluded by the abstract, leaving 7 to be read in full, of which 6 were selected. In view of the level of evidence, the studies were categorized according to the classification⁽¹⁰⁾: level I – meta-analysis or systematic reviews; level II – randomized controlled clinical trials; level III – clinical trials without randomization; level IV – cohort and case control studies; level V – systematic reviews of descriptive studies; level VI – descriptive studies; level VII – expert opinion.

The survey was carried out on February 17, 2020 and we emphasize that it complies with the ethical Standards still required, the rigor and reliability of the data presented.

RESULTS

The analysis of the results was based on 6 articles, that is, 3.8% of the 157 articles found. Of these, 3 scientific papers^(15,13,12) are studies published in Brazil, 1 article published in Portugal⁽²⁾, another in Turkey⁽¹⁴⁾, and other in the United Kingdom⁽¹¹⁾.

Of the selected articles, although with different objectives, they all summarize the importance of hygiene care in nursing practice and in promoting the comfort and well-being of the assisted person.

Descriptive studies^(14,15,2) – level of evidence VI, report that self-care of hygiene presents greater deficits at a time of transition, whether due to illness, organ failure or submission to surgical procedure. Also, the article for reviewing studies on what was produced in the context of the bath⁽¹³⁾ – level of evidence V, guides us to hygiene care with a focus on rehabilitation of the person. The articles whose methodology is based on randomized controlled clinical trials^(11,12) – level of evidence II, summarize that by training people for self-care, both the dependent person and caregivers, we increase levels of self-confidence, and consequently by teaching strategies we decrease anxiety when self-care.

We prepared a table in summary form of the studies found and selected.

Table 1 – Synthesis of articles found that relate hygiene care as a means of rehabilitation care.

Author/Year/Country	Title	Level of evidence	Conclusions	Focus on care
Whitehead, PJ, Golding-Day, MR. (2019). United Kingdom. ⁽¹¹⁾	The lived experience of bathing adaptations in the homes of older adults and their carers (BATH-OUT): A qualitative interview study.	II	Training for self-care increases levels of self-confidence and quality of life.	To facilitate the positive emotional state.
Ates, M, Dogru, BV, Yesilbalkan, OU, Karadakovan, A, Akman, P. (2018). Turkey. ⁽¹⁴⁾	Educational Needs of Caregivers Of Patients Hospitalized in a Neurology Clinic: Results of Questionnaire.	VI	Teaching caregivers.	To enhance functionality.
Santana VM, Santos JAA, Silva PCV. (2017). Brazil. ⁽¹⁵⁾	Nursing care systematization in the immediate postoperative Period after orthopedic surgeries	VI	Care directed to the needs of the person for their training.	To enhance functionality.
Prado ARA, Ramos RL, Ribeiro OMPL, Figueiredo NMA, Martins MM, Machado WCA. (2016). Brazil. ⁽¹³⁾	Bathing the dependent client: theorizing aspects of nursing care in rehabilitation.	V	Promotion of autonomy for self-care.	To prioritize self-care.
Fonseca EF, Penaforte MHO, Martins, MM. (2015). Portugal. ⁽²⁾	Hygiene care – bath: meanings and perspectives of nurses.	VI	Promotion of the person's participation in their care plan.	To prioritize self-care.
Lopes JL, Barbosa DA, Nogueira-Martins LA, Barros ALBL. (2015). Brazil. ⁽¹²⁾	Nursing guidance on bed baths to reduce anxiety.	II	Control of anxiety in performing self-care.	To facilitate the positive emotional state.

DISCUSSION

The findings of the review are discussed, for combining the results of the analysis. In the current review, given the broad character, which allows the inclusion of different types of studies (i.e., experimental and non-experimental, in addition to theoretical literature), it leads to openness in the observation of the phenomenon⁽¹⁶⁾. The option for CINAHL Plus, as a single database, was due to the fact that it is one of the richest sources of evidence in Nursing. In fact, the isolated use of CINAHL is seen in other studies, based on the argument exactly on the richness of this source in the field of nursing⁽⁸⁾.

From the analysis of the results of the studies, focuses of care emerged that we valued according to the theme of the study. Thus, from these agglutinating expressions, the results are commented.

Facilitating positive emotional state

Facilitating a positive emotional state in the face of adversity contributes to success in the recovery process^(10,11). One of the articles analyzed⁽¹¹⁾ emphasizes the person with cardiac pathology, stating that it is possible to adapt the aerobic capacity of the person in their self-care, such as the dissociation of breathing times while self-care or the control of the efforts made, decreasing the anxiety levels in realization of self-care for fear of not being able or not being able. This can happen with the person with obstructive or restrictive pulmonary pathology. The person feels that he is capable of carrying out care activities arouses self-esteem, self-confidence. It generates a feeling of capacity, decreasing the feeling and its degree of dependence.

Enhancing functionality

Information about the person's level of dependency for hygiene care determines many of the person's needs^(10,2). It guides the type of help needed for bathing, as well as the level of dependence for other self-care, in view of their decreased mobility, or musculoskeletal disability⁽²⁾.

When enhancing its functionality, people are privileged to take care of themselves taking into account their needs and limitations, creating a greater perception of their abilities and skills⁽⁴⁵⁾. According to the person's degree or state of dependence, generated by a transition or permanence process⁽⁴⁵⁾, enabling them to initiate and execute actions that aim to take care of themselves, it is possible to maximize their independence and their functional potential^(15,18), as well as teaching, instructing and training caregivers for shared self-care, not doing it for the person, but doing it with them, so that they become autonomous and capable, reducing the caregiver's underload and anxiety⁽¹⁴⁾.

Prioritizing self-care

During hygiene care, when bathing, the person favors the nurse's total attention. It is an opportunity to assess her general condition, teach her and encourage her to participate in her self-care, as well as observe possible care needs, for example in terms of integuments and mobilization⁽¹⁷⁾.

When prioritizing self-care, the person feels an integral part in its execution with a focus on their autonomy. The nurse specialist in rehabilitation nursing when being with the person in hygiene care can offer a provision of care directed to the person's needs, stimulating the person in their autonomy^(10,13), increasing their self-confidence and improving their quality of life according to their condition⁽¹⁵⁾.

Contributions to the area of Nursing, Health or Public Policy

The intervention of the nurse specialist in rehabilitation nursing in hygiene care, at the time of bathing, can be a moment of intervention for the person's autonomy. Creating strategies to reach, rotate, stand, with or without support, or sit correctly, will assist self-care independently, minimizing the consequences of immobility, limitations of breathing patterns, decreasing joint stiffness or spasticity. It is a way of promoting muscle strength and tone, joint amplitude, motor coordination and motor skills, sensitivity, notion of body proprioception and balance training.

Above all, it is a vehicle for the provision of multiple care that enhances the person's autonomy, which only the nurse specialist in rehabilitation nursing has these joint capacities to provide.

Study limits

The conduct of the research only in a database emerges as a limitation to the study. There are numerous articles on hygiene care, but most are excluded for the purpose of the study. By selecting only a single database to perform the search, we obtained a result more directed to what we wanted. However, this limitation makes the research a convenience one, conditioning its evidence.

The scarcity of articles on the subject makes it difficult to draw quantifiable conclusions. However, what we want to expose is a form of rehabilitation intervention in action. For this reason, this action should be deepened, either in the scope of hygiene care or in other activities of daily living, carrying out experimental studies that prove the potential for independence that can be generated with the participation of the specialist nurse in nursing of self-care rehabilitation.

CONCLUSIONS

Hygiene care is a care of knowledge intrinsic to nursing science, which must be performed by nurses. However, the collaboration of a nurse specialist in nursing of rehabilitation creates an opportunity to assess and intervene in the person according to their deficit in order to enable them to self-care. This promotes their autonomy, functionality and consequently their quality of life, as well as of those ones who care, reducing the underload of caregivers.

In addition, intervening in training for self-care can be an indicator to be valued regarding the degree of dependence and need for care. Maximizing a person's potential for self-care can reduce costs associated with health care with shorter hospital stays, through an increasingly early rehabilitation aimed at fundamental human needs.

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