

CHARACTERIZATION OF NURSES' WORK IN THE HOME SETTING: A LITERATURE REVIEW CARACTERIZAÇÃO DO TRABALHO DO ENFERMEIRO NO CENÁRIO DOMICILIAR: REVISÃO DA LITERATURA CARACTERIZACIÓN DEL TRABAJO DE ENFERMERÍA A DOMICILIO: REVISIÓN BIBLIOGRÁFICA

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#### ABSTRACT

The aim was to characterise how nurses' work in the home has been produced. This is a narrative literature review. Data was collected from the following databases: Latin American and Caribbean Health Sciences Literature (LILACS), Publisher Medline (PUBMED/MEDLINE) and SciVerse Scopus (SCOPUS). The following combination of descriptors was used to search for references: Nurses and/or Home Care Services. Publications from the last 10 years (2013-2022) were considered. A textual corpus was constructed from the results presented in the abstracts of the selected studies and processed using the software Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires (IRaMuTeQ) version 0.7 alpha 2. Three interpretative categories were constructed: 1. Complexity of Home Care: between the Objectivity of Technique and the Subjectivity of Care; 2. Characteristics of the Services and the Public Receiving Home Care and; 3. Work Tools and the Directionality of Home Care. Home care is a complex practice for nurses and requires a multidimensional approach that combines technical skills with sensitivity and empathy. Nurses must be prepared to adapt to the characteristics of the home environment and the individual needs of patients, as well as receiving the necessary support to perform their role in an assertive and humanised way.

Keywords: Home Care; Primary Health Care; Nursing.

#### RESUMO

Objetivou-se caracterizar como o trabalho do enfermeiro no domicílio tem sido produzido. Trata-se de uma revisão narrativa de literatura. Os dados foram coletados nas bases de dados: Literatura Latino-Americano e do Caribe em Ciências da Saúde (LILACS), Publisher Medline (PUBMED/MEDLINE) e SciVerse Scopus (SCOPUS). Para a busca das referências foram empregados a seguinte combinação de descritores: Nurses and/or Home Care Services. Foram consideradas as publicações dos últimos 10 anos (2013-2022). Foi construído um corpus textual a partir dos resultados apresentados nos resumos dos estudos selecionados e processados pelo software Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires (IRaMuTeQ) versão 0,7 alpha 2. Foram construídas três categorias interpretativas: 1. Complexidade do Cuidado Domiciliar: entre a Objetividade da Técnica e a Subjetividade do Cuidado; 2. Características dos Serviços e o Público Receptor do Cuidado Domiciliar e; 3. Ferramentas de Trabalho e a Direcionalidade do Cuidado Domiciliar. O cuidado domiciliar é uma prática complexa no fazer do enfermeiro e requer uma abordagem multidimensional que combina habilidades técnicas com sensibilidade e empatia. Os enfermeiros devem estar preparados para se adaptar às características do ambiente domiciliar e às necessidades individuais dos pacientes, além de receberem o suporte necessário para desempenhar seu papel de forma assertiva e humanizada.

Palavras-chave: Cuidado Domiciliar; Atenção Primária à Saúde; Enfermagem.

#### RESUMEN

El objetivo era caracterizar cómo se ha producido el trabajo de las enfermeras a domicilio. Se trata de una revisión narrativa de la literatura. Los datos fueron recolectados de las siguientes bases de datos: Latin American and Caribbean Health Sciences Literature (LILACS), Publisher Medline (PUBMED/MEDLINE) y SciVerse Scopus (SCOPUS). Para la búsqueda de referencias se utilizó la siguiente combinación de descriptores: Enfermeras y/o Servicios de Atención Domiciliaria. Se consideraron las publicaciones de los últimos 10 años (2013-2022). Se construyó un corpus textual a partir de los resultados presentados en los resúmenes de los estudios seleccionados y se procesó utilizando el software Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires (IRaMuTeQ) versión 0.7 alfa 2. Se construyeron tres categorías interpretativas: 1. Complejidad de la atención domiciliaria: entre la Objetividad de la Técnica y la Subjetividad de los Cuidados; 2. Características de los Servicios y del Público Receptor de Cuidados Domiciliarios y; 3. Herramientas de Trabajo y Direccionalidad de los Cuidados Domiciliarios. La atención domiciliaria es una práctica compleja para las enfermeras y requiere un abordaje multidimensional que combine habilidades técnicas con sensibilidad y empatía. Las enfermeras deben estar preparadas para adaptarse a las características del entorno domiciliario y a las necesidades individuales de los pacientes, así como recibir el apoyo necesario para desempeñar su función de forma asertiva. para desempeñar su función de forma asertiva y humanizada.

Palabras clave: Atención Domiciliaria; Atención Primaria de Salud; Enfermería.



### **INTRODUCTION**

The choice for the nurses' work in the home scenario results from the substantiality that this space imprints as a privileged locus of health care production, which is made possible by different types and levels of health complexity. Thus the present study proposes to enable the understanding of professional practice and, consequently, contribute to the reflection and improvement of professional practice in this specific scenario.

It should be noted that the nurse has the possibility of performing a fundamental work in home care, acting as a link between the health team and the family of the patient under his/her care. Thus, the research is built from the possibilities of investigation of how care has been given in activities and strategies used to establish a therapeutic relationship with the patient and his/her family.

Home health work does not propose to delegate to the family the responsibility for the care to be given to the family member. This condition imprints the need to understand the home as fruitful, as a space for action and effectiveness of health work <sup>(1)</sup>.

In this aspect, the home visit emerges as an obligatory instrument to the possibility of nurses' performance in the home setting. Historically, the introduction of the Family Health Strategy in the 1990s and the proposals for home care and social reintegration of people with mental disorders in the field of health care in Brazil, there is an intensification of the

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publication of experience reports and official documents emphasizing their importance and the real advantages for the success of public health enterprises <sup>(2)</sup>.

The household scenario as a space for production of care corroborates for the effectiveness of new health care practices, with the possibility of greater autonomy of families in relation to the development of the therapeutic project, implies new ways of acting, and recognizes the patient as an active and participatory subject throughout the care process <sup>(3)</sup>.

In this way, the nurse's home visit enables the production of a nursing care directed to the real psychosocial needs of the patient/family. In the present study, we consider care as characterized by being existential, relational and contextual <sup>(4)</sup>, it is the object of nursing, which is its doing and the subject of care is the being who needs it <sup>(5)</sup>.

Thus, the characterization of the role of nurses in home care emerges as a possibility to subsidize public policies and health strategies aimed at strengthening primary health care, contributing to a quality and humanized health care to patients/families in the home environment.

Therefore, given the above, the present study was structured from the following research problem: *"How has the work of nurses been developed in the home setting?"* 



In order to answer the research problem, the objective was to characterize how the work of nurses at home has been produced.

# METHOD

This is a narrative literature review, in order to synthesize the scientific production already published. In this context, the narrative review proposes to the survey of scientific knowledge, aiming at the reconstruction of thought networks <sup>(6)</sup>, in order to identify the state of the art on a particular object of study, in the present work, characterization of the work of nurses in the home setting.

Review articles, as well as other categories of scientific articles, are based on bibliographic or electronic sources to obtain results of studies carried out by other authors, in order to theoretically support a specific objective <sup>(7)</sup>.

Data were collected in June/July 2023 in the following databases: Latin American and Caribbean Health Sciences Literature (LILACS), Publisher Medline (PUBMED/MEDLINE) and SciVerse Scopus (SCOPUS). The following combination of descriptors was used to search for references: Nurses and/or Home Care Services. The publications of the last 10 years (2013-2022) in Portuguese, English and Spanish, published as a scientific article were considered. References whose content of the article was not fully available were excluded from the sample.

After a first selection by reading the titles of the articles, the abstracts were read and finally the references were fully read. After the selection

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of the references, a textual corpus was elaborated, from the results and conclusions of the selected articles, extracted from abstracts and submitted to processing by the software *Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires* (IRaMuTeQ) version 0.7 alpha 2, developed by Pierre Ratinaud in 2009, using the processing from the Descending Hierarchical Classification (DHC) and the Word "Cloud".

In this aspect, the software provides another form of presentation of the results, from a correspondence factor analysis made from the DHC. Based on the chosen classes, the software calculates and provides the most characteristic Text Segments (TS) of each class. Such classes of TS are composed of a classification according to the presence or absence of a certain vocabulary. Regarding the word cloud, the software groups the words and organizes them graphically according to their frequency. They are presented with different sizes, and the larger words are those with greater frequency in the corpus, and the smaller ones have lower frequencies. The former are placed in the center of the graph. It is a simple lexical processing. However, it is graphically relevant, since it presents an initial idea of the content and extracted from the textual corpus<sup>(8)</sup>.

## RESULTS

The selection included 17 articles that met the inclusion criteria, which are presented below in the chart with the characterization of the articles concerning title, journal, objectives



and year of publication, allowing an expanded

view of the subject to be confronted:

**Chart 1 -** Selected sample, including title, journal, year of publication and objective of the study, Três Lagoas-MS, 2023.

TITLE	JOURNAL/YEAR	OBJECTIVES
A1 - Nurses' work with children with cancer: palliative care. <sup>(9)</sup>	Revista de Enfermagem UERJ/2014	To learn about the care practices developed by nurses within the scope of primary care.
A2- Specific characteristics of home healthcare and their approaches in nursing education. <sup>(3)</sup>	Revista Mineira de Enfermagem/ 2014	To explain the specificities of home care learned in the nurse's professional training process.
A3 - Skills and attitudes of nurses in home care: bases for prevention of risk of infection. <sup>(10)</sup>	Revista Mineira de Enfermagem/2015	To investigate nurses' skills and attitudes to work in the prevention and control of infections in home care.
A4 - Work experience of district nurses in home care in Sweden. <sup>(11)</sup>	Healthy Aging Research/2015	To explore the work experiences of district nurses in home care after municipalization.
A5 - Clinical breastfeeding at home, comprehensive support intervention for the success of the breastfeeding process.	Horizonte de Enfermería/2017	To report the professional experience around the Breastfeeding Outpatient Clinic in the form of home visits, whose objective is to offer support and monitoring to the family for the initiation, maintenance and recovery of breastfeeding, as an integral nursing intervention strategy.
A6 - Perception of the family caregiver on nursing assistance in the framework of domiciliary care in the family health strategy. <sup>(13)</sup>	Revista Interdisciplinar Ciências Médicas/2018	To describe the family caregiver's perception of the nurse's assistance in the context of home care in the family health strategy.
A7 - Adaptations and inventions in the praxis of nurses in home care: implications of the reflective practice. <sup>(14)</sup>	Revista de Enfermagem da Escola Ana Nery/2018	To analyze the praxis of nurses in the family context, considering their potential for inventing new ways of producing care.
A8 - Frail elderly at home and the provided assistance by primary health care nurses. <sup>(15)</sup>	Revista Kairós- Gerontologia/2018	To analyze the assistance provided by nurses to frail and homebound elderly people in primary care.
A9 - Nurse's actions during primary care home visits. <sup>(16)</sup>	Revista Eletrônica Acervo Saúde/2019	To demonstrate the nurse's actions during the primary care home visit.
A10 - Tool for home visit evaluation and management in primary health care: an experience report. <sup>(17)</sup>	Revista Brasileira de Medicina da Família e Comunidade/2019	To present the experience of a team using a new tool for risk assessment and classification that aims to optimize the management of the home visit schedule.
A11 - Nursing procedures in puerperal homecare visits: prospects on the professional role. <sup>(18)</sup>	Revista Baiana de Saúde Pública/2019	To analyze the role of the nurse in postpartum home visits.
A12 – Systematization of nursing care and patient safety in the home environment. <sup>(19)</sup>	Revista Enfermagem em Foco (COFEN)/ 2020	To identify the types of safety-related risks that bedridden patients are most exposed to at home and describe the difficulties that the multidisciplinary primary care team encounters in effectively ensuring the safety of bedridden

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		patients at home.
A13 - Themes for educational practices on home care for children with leukemia using a semi implantable central venous catheter. <sup>(20)</sup>	Revista Mineira de Enfermagem/2020	To identify themes for educational practices on home care for children with leukemia using a semi- implanted catheter from the perspective of family caregivers.
A14 - Comprehensiveness of assistance during home visits: experience report. <sup>(21)</sup>	Recien -Revista Cientifica de Enfermagem/2020	To carry out the development and application of an instrument to implement the nursing process during home visits.
A15 - The significance of home care in caring for the elderly in their twilight years: the human perspective of the SUS professional. <sup>(22)</sup>	Ciência & Saúde Coletiva/2020	To understand the meanings of home care in the scope of primary care actions in caring for these elderly people from the perspective of the UHS health professional.
A16 - The differentiating work of the home nurse: a discourse analysis on what prevails in changing health services. <sup>(23)</sup>	Nursing Inquiry/2021	To explore home nursing through critical discourse.
A17- Home care visits by nurses from Family Health Strategies in postpartum care. <sup>(24)</sup>	Revista Ciência Plural/2021	To describe the main actions covered in the literature regarding home visits by Family Health Strategy nurses during the postpartum period.

In relation to the DHC, the processing obtained a total of 58 TS, of which 47 were classified, generating an 81% use and a partition into 6 classes. This research considered the words evoked with significance in the classes. From the processing of DHC and lexicography presented by the word cloud, three interpretative categories could be constructed that respond to the characterization of the work of nurses in the home setting.



Figure 1 - Descending Hierarchical Classification (DHC), IRaM

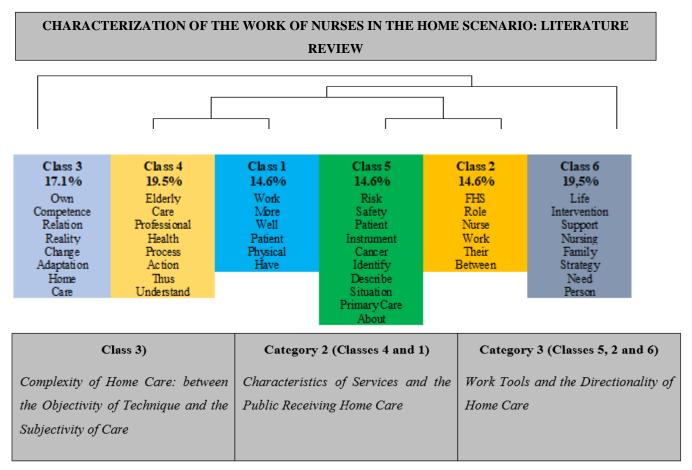
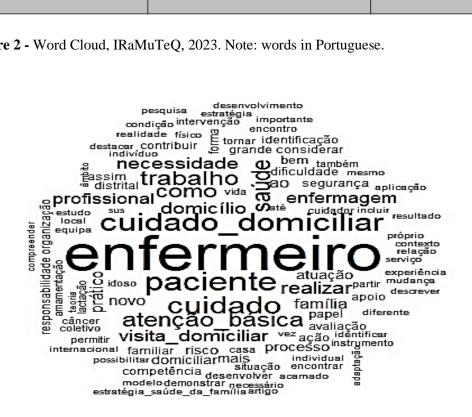


Figure 2 - Word Cloud, IRaMuTeQ, 2023. Note: words in Portuguese.



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Through the reading of the 17 selected articles and the processing made by IRaMuTeQ, three interpretative categories were identified: 1. Complexity of Home Care: between the Objectivity of the Technique and the Subjectivity of Care; 2. Characteristics of Services and the Public Receiving Home Care and; 3. Work Tools and the Directionality of Home Care.

### DISCUSSION

The nurse needs to be able to see the home context beyond the physical space, considering it as a set of interconnected elements, and built from objects, events and humans, with their own uniqueness, processes of subjectivity and coexistence. To provide effective home care, the nurse must be prepared to deal with a variety of situations, requiring the application of multiple elements that make up his/her core professional performance <sup>(14)</sup>.

The care work is a process intrinsically linked to the caregiver, reflecting his/her beliefs and personal values about concepts such as lifedeath, health-disease, care-cure, among others. Understanding the meaning of caring is a matter that demands individual exploration, but at the same time can be developed and cultivated. In this context, nursing education institutions play a fundamental role. since they have the responsibility to facilitate learning and internalization of the humanistic care dimensions (4)

Nurses' work in the home context transcends the mere execution of technical procedures, covering a deeply humanistic and

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holistic dimension. Home care, under the nurse's guidance, involves understanding the unique needs, preferences and values of each patient, in addition to considering the home environment as an integral part of the care process. In this scenario, the nurse acts as a facilitator of the adaptation of the patient and his/her family to health demands, promoting autonomy and quality of life. In the meantime, the home care provided by nurses must transcend the technical and clinical spheres, incorporating a patientcentered approach that recognizes the complexity of the experience inherent in the processes of suffering and illness and the importance of the domestic context in the process of recovery and health promotion <sup>(25)</sup>.

Care is an essential force that permeates human experience, being manifested constantly at all times and circumstances. Placing care at the center does not mean ceasing to work and intervene in the world, but rather renouncing the approach that seeks to control and reduce everything to objects, detaching them from human subjectivity. In this regard, any form of authoritarianism and domination should be rejected, and limits on the obsession with effectiveness at any cost should be imposed. This involves replacing the dictatorship of impersonal and abstract rationality with care, organizing work in harmony with nature and its orientations. Moreover, it respecting the means interconnections that all things maintain between themselves and with us, prioritizing the collective well-being of society, the biotic



community and the planet over exclusively human interests <sup>(26)</sup>.

The complexity of the care process in the home scenario extrapolates the physical environment of the home, being related to the actions and care developed to patients of the services, as well as the inherent aspects of the organization of home care services. In this context, in Sweden, home care began to be incorporated into Primary Health Care services, being under the responsibility of the municipalities <sup>(11)</sup>. In the last 20 years, in many Western countries, health services have changed, with an increasing proportion of services using households as a space for the production of care (23)

Home care is a crucial element in promoting care and building relationships of trust, bond and empathy between health professionals and patients. However, its effectiveness requires close articulation with the network of health services. In this sense, subjective demands from health professionals emerge, which play an essential role in the formation of a truly effective health care network <sup>(22)</sup>.

Another aspect identified from the selected articles is related to the work of nurses in the home setting that is anchored in structural elements of home care services and the public that demands such care. In this sense, primary health care services stand out in the production of home care. Regular contact with generalist community nurses is associated with a strong

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sense of safety about the immediate situation for home cancer patients and their primary health care caregivers. Such a sense of safety is a significant component for the physical and psychosocial well-being of the patient and caregiver <sup>(27)</sup>.

The puerperal period consists of an interval of considerable challenges for health professionals, since it concentrates a significant portion of maternal and child morbidity and mortality in the national context. In this perspective, when we consider the puerperium as a phase that often raises insecurities, especially in primiparous mothers, whose uncertainties are more pronounced, the nurse needs to demonstrate sensitivity to identify the specific needs of these women, especially in the home environment<sup>(18)</sup>.

The home can be considered a unique space of significant relevance for the provision health of services. since, through the understanding of the particular characteristics of this environment, nurses can develop more contextualized and effective care interventions. This gains prominence in the performance of nursing professionals during the puerperal period, since, by improving their practice, particularly in the educational context, they can help primiparous women in the process of adaptation and coping with the challenges inherent to this new stage in their lives. For this approach to be implemented, it is essential to carry out comprehensive home visits, with priority for the health of both mother and

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# **REVIEW ARTICLE**



newborn. However, it is imperative to emphasize that the care provided by these professionals should not be restricted to the purely biological aspects of the puerperium, but should also include considerations related to social, cultural and economic factors, which can be further explored and discussed in the patients' home environment <sup>(18)</sup>.

The monitoring of breastfeeding practice emerges as another field of intervention of nurses at home. Thus, the home lactation clinic allows performing health interventions in the context of people's daily lives, making an individual assessment of the couple and the family, considering aspects of physical, psychological, affective, social and contextual health that may be influencing the phenomenon of lactation. Part of the success of a home lactation clinic lies in the therapeutic bond of trust that can be formed between the nurse and the family, but mainly with the mother, who is in the process of adapting to her new role  $^{(12)}$ .

Elderly people appeared as intervention patients and receiving care in the practice of nurses in home care. It is highlighted the access to health care of elderly patients who are in the process of finitude and palliative needs at home, which require and serve as an alert for health care programs and strategies, especially in the home setting. Thus, the sense of home care implies the dialogical reflection of the representation of the human and solidarity in the exercise of work in public health services <sup>(22)</sup>.

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Another aspect to be highlighted refers to infection in the home context. In this direction, there is a lack of studies that address the assessment of biological risks in the scope of health care provided at home. However, it is important to recognize that the home environment, where care occurs, can expose both health professionals and patients to risks, making it essential to consider all safety principles. Several international guides have sought to guide and structure home care practices. Given the uniqueness of the role of nurses in home care, especially due to the absence of specific infection control programs in this environment, the need for essential attitudes for the organization and effective development of the work process is highlighted, valuing individual and collective awareness as well as social and professional commitment <sup>(10)</sup>.

Finally, the nursing care process at home is supported by the use of professional tools such as home visits and the application of the nursing process through the Systematization of Nursing Care. About the subject, nurses who work in households through home visits can bring benefits in the family care process, such as cost reduction, rapprochement with the individual and his/her family, active listening, understanding people's life situation and identifying household risks. Moreover, the identification of some difficulties observed during the visits is highlighted, such as the lack of safety in the work environment and the presence of violence in the community <sup>(16)</sup>.



Home visits emerge as a significant element in health promotion, and when properly employed by professionals, especially nurses, have the potential to introduce substantial changes in the care given to patients and their families <sup>(13,17)</sup>. Nevertheless, in most cases, family caregivers do not have an understanding about the role of nurses in the home setting, which reflects in the insipient frequency or even in the absence of visits. When the role of the nurse is recognized, the care approach is often limited to performing technical procedures, failing to establish a significant link between the individual, his/her caregiver and the health professional <sup>(13)</sup>.

The Systematization of Nursing Care can be defined as a method used by nurses for the production of care, designed to achieve significant results in the implementation of care, aiming to minimize complications during treatment, as well as promoting patient recovery. Its application in the clinical practice of nurses, in home care, can contribute substantially to the well-being and safety of bedridden patients at home <sup>(18-19)</sup>.

Although the present study has presented the characterization of the work of nurses in the home setting, a limitation concerns the presence of other studies that did not return from the search carried out from the proposal of a bibliographic research design of the narrative type.

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# FINAL THOUGHTS

This research allowed thorough а understanding of the work of nurses in the home setting, revealing its complexity and the inherent in this The challenges action. interpretative categories, "Complexity of Home Care: between the Objectivity of the Technique and the Subjectivity of Care", "Characteristics of the Services and the Public Receiving Home Care" and "Work Tools and the Directionality of Home Care", provide valuable insights for understanding this professional practice.

The data highlight the duality between technique and subjectivity in home care, highlighting the importance of balancing technical skills with empathy and understanding of patient needs. Nurses should be able to develop solid therapeutic relationships that go beyond clinical procedures, recognizing the value of the human aspect involved in care.

In addition, the present study shows the necessary adaptation to the specific characteristics of the home environment and the particularities of the assisted public. Moreover, the consideration of patients' living conditions, cultural and social factors that influence care and challenges logistical that can affect the production of care at home. Understanding these nuances is essential to the success of home care.

Another aspect learned refers to the need for appropriate tools to effectively direct home care. This includes access to updated information, ongoing qualification and technical support for nurses. The availability of adequate



resources is a critical factor to ensure the quality of care provided.

Therefore, this literature review study provides an understanding of the work of nurses in the home setting. Home care is a complex practice that requires а multidimensional approach that combines technical skills with sensitivity and empathy. Nurses must be prepared to adapt to the characteristics of the home environment and to the individual needs of patients, in addition to receiving the support necessary to play their role in an assertive and humanized way. This research contributes to the improvement of the nurse's practice in home care and, therefore, to (re)think how the role of nurses in the home setting has been given and the care that has been given to patients and their families in this challenging context.

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