



Category: Applied Research in Health and Medicine

ORIGINAL

Self-care of Intensive Care Nurses

El autocuidado del personal de enfermería de terapia Intensiva

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ABSTRACT

This research will be carried out in order to determine the level of self-care of the intensive care nurses of the Nodal Hospital of Venado Tuerto. It will be useful for all the nursing staff of said unit, providing data related to certain situations that may arise in relation to self-care, and thus visualizing them. This will make it more feasible to raise staff awareness.

Nursing occupies the role of the caregiver, i.e., its daily action is focused on patient care, but paradoxically, it is observed that such personnel manifest certain behaviors that evidence a lack of self-care. We believe that the factors that contribute to the lack of self-care of the Hospital's nursing staff are due to the low salaries that harass the profession, the high rate of professionals who work double shifts and rotating shifts, in addition to the physical and emotional overload, not to mention the pandemic experienced in recent years. In addition to these variables, the gender condition that influences it stands out. A great majority correspond to the female gender implying that, even being professionals and performing as such, we do not abandon other roles such as housewife and mother. Therefore, the present work will try to reflect these variables, to consider them and to base a knowledge on the level of self-care in order to contribute to make this problem visible within the institution, so that it can implement strategies to achieve an improvement in the performance of the profession. The type of design is quantitative and, by taking a sample of the service and the institution, the level of self-care of this discipline can be reflected.

Keywords: Self-care; Nursing; Intensive care nursing.

RESUMEN

Esta investigación se realizará con los fines de poder determinar cuál es el nivel que tiene el servicio de enfermería de terapia intensiva del Hospital Nodal de Venado Tuerto, en cuanto a su autocuidado. La misma será de utilidad para todo el personal de enfermería de dicha unidad, proporcionando datos vinculados a ciertas situaciones que se puedan manifestar en relación a su autocuidado, y de este modo visualizarlas. Así será más factible la concientización del personal. Enfermería ocupa el rol del

cuidador, es decir, su acción diaria se centra en el cuidado del paciente, pero paradójicamente se observa que dicho personal manifiesta ciertas conductas que ponen en evidencia una falta de autocuidado. Creemos que los factores que contribuyen a la falta de autocuidado del personal de enfermería del Hospital se deben a la baja retribución salarial que hostiga a la profesión, el alto índice de profesionales que realizan doble jornada y los turnos rotativos, además de la sobrecarga física y emocional, sin dejar de lado la pandemia atravesada en los últimos años. Aparte de estas variables se destaca la condición de género que influyen en la misma. Una gran mayoría corresponden al género femenino implicando que, aun siendo profesionales y desarrollándonos como tales, no abandonamos otros roles como el de ama de casa y madre.

Por lo que el presente trabajo intentará reflejar estas variables, considerarlas y fundamentar un conocimiento sobre el nivel de autocuidado para, de este modo, poder contribuir a visibilizar esta problemática al interior de la institución, con el objetivo de que la misma pueda implementar estrategias hacia el logro de un mejoramiento de desempeño de la profesión. El tipo de diseño es cuantitativo que, tomando una muestra del servicio y la institución, podrá verse reflejado el nivel de autocuidado de esta disciplina.

Palabras clave: Autocuidado; Enfermería; Terapia intensiva.

INTRODUCTION

Certain working conditions have consequences, perceived as a lack of self-care. By working so many hours, they are physically, mentally, and emotionally demanding, which may reduce the fulfillment of their duties, especially if this is perpetuated over time. This workload also leads to detachment from the family. Here, too, there is evidence of an installed discomfort, which the family, in a certain way, naturalizes but which causes a lack of quality experiences.

Regarding the above, we cannot mention that most nursing professionals are female, implying that women have been professionals for some time now. We have performed as such, but without neglecting other roles such as homemaker and mother.

Although there are positive factors associated with performance - exercising a profession, giving place to vocation, the aspiration for further training, recognition, gratitude, and appreciation of care, both by the institutions and by patients and their families and society as a whole - in some way all of the above generates physical and psychological wear and tear, which increases discomfort, which is not visualized or perceived by the nursing professional.

The aforementioned conditioning factors share a common denominator: They all generate a lack of time for self-care. In this sense, the nursing staff does not achieve a correct balance between daily obligations and activities dedicated to rest, relaxation, leisure, and self-care routines. Thus, they gradually neglect their integrity and leave aside, for example, a health check-up, postponing shifts, or discontinuing treatments.

One variable that we cannot omit is the one we have gone through in recent years, the COVID-19 pandemic, which aggressively affected the nursing staff, having to face a pathology that, in principle, was little known, assuming more significant professional pressure, since the number of patients exceeded the usual; anguish before their own and family contagion; and social, due to the stigmatization and pointing out for the task. In this sense, numerous studies show the impact caused by the pandemic: physical and mental exhaustion, depression, and anxiety, among others.

In summary, this research will be carried out in order to determine the level of self-care of intensive care nurses at the Nodal Hospital of Venado Tuerto, arguing that the factors that contribute to the lack of care of nursing staff are low pay, double working hours and rotating shifts, physical and emotional overload, without neglecting the pandemic experienced in recent years. Therefore, the present work will reflect these variables, analyze them, and base knowledge about the level of self-care to make this problem visible within the service and implement strategies to improve the profession's performance. In this way, it will be more feasible to raise staff awareness.

What is the level of self-care of the nursing staff working in the Intensive Care Unit of the Nodal Hospital in Venado Tuerto?

General objective

To identify the level of self-care of the nursing staff of the Intensive Care Unit.

METHOD

The present work is projected as explanatory, with descriptive nuances. Its main objective is to explain, by describing the variables, the level of self-care of the nurses of the Intensive Care Unit of the Nodal Hospital of Venado Tuerto.

Likewise, the design is non-experimental since it is not intended, in this instance, to control and manipulate either the variables or the sample group resulting from the population. On the other hand, the aim is to describe and explain the phenomenon of self-care and discover whether the physical, psychological, and social aspects used to measure self-care are related to each other.

The research is projected with a quantitative methodological design. The analysis and scope of the study will be descriptive, with variables involved and already mentioned.

Participants.

This research's target population is comprised of a sample of the Intensive Care Service of the Nodal Hospital of Venado Tuerto. It is worth mentioning that the service has thirty-three nursing professionals who not only perform patient care tasks but also record each activity performed, the control and condition of the materials in their service, and the management of problems that may arise during their working day.

The sample population is derived from the survey used as the data collection instrument. Although the survey was sent to the entire population, i.e., to all the nurses in the service, only eighteen responses were obtained, which will be analyzed and interpreted according to the variables mentioned.

Study Area.

This study will be conducted in the Intensive Care Service of the Nodal Hospital in Venado Tuerto. It is worth mentioning that the institution was inaugurated on September 30, 2017, constituting a high-complexity hospital covering three levels of care. It has outpatient clinics where all medical specialties are provided, as well as ancillary services: neonatology, dermatology, clinical, surgery, pediatrics, oncology, urology, ophthalmology, dentistry, pulmonologist, endocrinology, traumatology, cardiology, chemotherapy, mental health, social workers, pharmacy, vaccination, diagnostic imaging, laboratories, emergency service both for adults and pediatrics.

The present service has three units with five beds, one for isolation units. Each unit has panels with different outlets, including negative and positive pressure gas outlets and an electricity supply. These panels have supports for the placement of a multiparametric monitor, as well as mechanical ventilation ventilators, to assist in a non-invasive way that helps to replace the function of regular gas exchange. The beds are articulated and electric beds that allow postural changes, which are handled both with remote control and manually; this allows the nurse to work with the patient comfortably, and this can have a better rest and stay.

The nursing staff has furniture for the necessary work elements, a clean area for hand hygiene, and a dirty area for eliminating different fluids and contaminating liquids.

Each of these units has the assistance of two nurses per shift for the care of five patients regardless of their pathology and complexity since these are multipurpose units. In addition, there is a referent with the same workload and rotation, the same for the three units of the service.

Techniques/Instruments.

The present work included implementing individual voluntary surveys, in which values were determined. Once analyzed, this allowed the degree of affectation to be linked with the degree of self-care of nurses belonging to the Nodal Hospital of the city of Venado Tuerto.

These surveys were carried out using Google Forms, which presents a structured format with dichotomous closed questions. The same has three sections, seeking to highlight the level of self-care, taking into account the physical, psychological, and social aspects. They were sent during the last quarter of 2022 via e-mail to the population who previously signed the informed consent form, which is attached in Annex 1.

Another instrument used for data collection was observation. Belonging to the service in which the present study is linked granted the possibility of making a visual and linked record of the aspects and variables on which the study was centered.

Ethical considerations.

Bearing in mind that research work is not carried out only by the person concerned or by a research group but always involves other people and understanding that one of the ultimate aspirations of the human being has to do with happiness, we cannot leave aside the ethical issue. Happiness and ethics are mutually connected, so much so that man finds happiness, ultimately, in the good. Therefore, one of the basic principles is that we should treat each other ethically.

In the case of research, and this research in particular, we involved a group of nurses to determine their level of self-care, seeking strategies that allow them to reverse situations or circumstances that do not contribute to self-care. For this purpose, not only are they observed, but they are also asked to participate in a survey. They are given an Informed Consent, where the purpose and usefulness of the present work is mentioned.

Informed Consent is intended not only to inform the subject that he/she will be the research subject but, above all, to respect his/her rights and specific ethical guidelines in research with human beings.

First, we understand that to be ethical, research must have social and scientific value, it must be able to generate knowledge, and it must be used in favor of the study population.

Secondly, we assure the respect, freedom of expression, and confidentiality of the subject who will provide the information gathered through the survey. Finally, we commit ourselves to being faithful in analyzing and describing the results.

RESULTS

This research was carried out to analyze the level of self-care of intensive care nurses at the Regional Hospital of Venado Tuerto using a Google form (Annex 2). Before filling out the form, the nurses were given informed consent (Annex 1), which informed them of the purpose of their participation and the confidentiality of the data.

These surveys have 18 questions which are divided into three categories: level of physical self-care (Table 1), level of psychic self-care (Table 2), and level of social self-care (Table 3), which have a sum of 1 to 6 as positive in terms of self-care and -6 to -1 as unfavorable in terms of self-care.

Table 1: Physical care

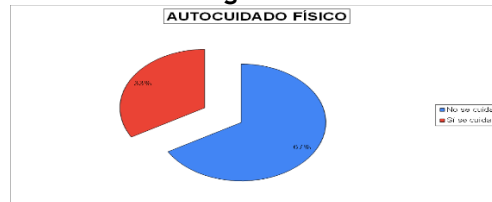
AUTOCUIDADO FISICO							
Número de Pregunta						Valoración por respuesta (VR)	Análisis
Uno	Dos	Tres	Cuatro	Cinco	Seis		
1	-1	-1	-1	1	1	0	No se cuida
-1	1	-1	-1	-1	-1	-4	No se cuida
1	-1	-1	1	-1	1	0	No se cuida
-1	1	1	-1	1	1	2	Sí se cuida
1	-1	1	1	-1	1	2	Sí se cuida
-1	1	-1	1	1	-1	0	No se cuida
1	-1	-1	1	-1	1	0	No se cuida
-1	-1	1	1	-1	-1	-2	No se cuida
1	-1	-1	1	-1	1	0	No se cuida
-1	-1	-1	-1	-1	-1	-6	No se cuida
1	-1	-1	1	1	1	2	Sí se cuida
-1	1	1	1	1	1	4	Sí se cuida
-1	-1	-1	-1	1	-1	-4	No se cuida
1	-1	-1	-1	1	1	0	No se cuida
-1	1	1	1	1	-1	2	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
-1	-1	-1	-1	-1	-1	-6	No se cuida
-1	1	1	-1	-1	1	0	No se cuida

SUMMARY ANSWERS	No care	12
	Yes, it does	6

REFERENCIAS	
Observation	VR
No care	< 0
Yes, it does	> 0

Source: own elaboration

Figure 1.



Source: own elaboration.

In this case, we can visualize a percentage of 67% (high) regarding the lack of self-care by intensive care health professionals, taking into account that observation reveals weight alterations (obesity, thinness) and drowsiness, among others, which are not diagnosed or assumed as risk factors.

When analyzing the sample, only 12 of the 18 patients underwent medical check-ups for their existing pathologies, and when asked whether they complied with the treatment, less than half did so, resulting in deficient self-care by the intensive care staff.

It can also be observed that only a minority of them manage to rest 8 hours a day to be able to perform the routinely required tasks.

Table: 2 Psychic Care

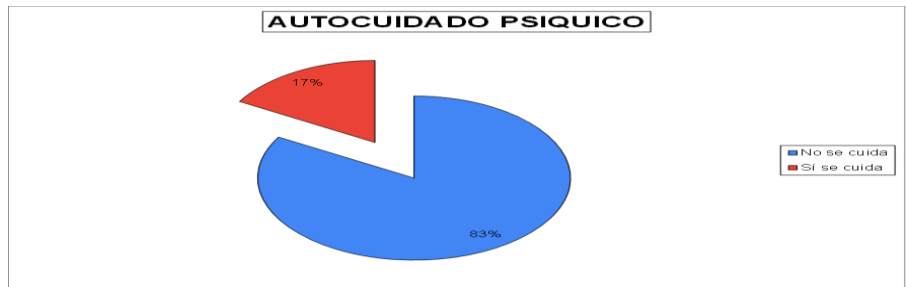
AUTOCUIDADO PSQUICO							
Número de Pregunta						Valoración por respuesta (VR)	Análisis
Uno	Dos	Tres	Cuatro	Cinco	Seis		
-1	1	-1	1	-1	-1	-2	No se cuida
-1	1	-1	1	1	-1	0	No se cuida
-1	1	-1	-1	1	-1	-2	No se cuida
1	1	-1	1	1	-1	2	Sí se cuida
-1	1	-1	1	1	-1	0	No se cuida
1	-1	-1	1	1	1	2	Sí se cuida
-1	1	-1	1	-1	-1	-2	No se cuida
1	1	-1	-1	-1	-1	-2	No se cuida
-1	1	-1	1	-1	-1	-2	No se cuida
-1	1	-1	1	-1	-1	-2	No se cuida
-1	-1	-1	1	1	1	0	No se cuida
1	1	-1	1	1	-1	2	Sí se cuida
-1	-1	-1	1	-1	-1	-4	No se cuida
-1	-1	-1	1	-1	-1	-4	No se cuida
-1	-1	-1	1	-1	1	-2	No se cuida
-1	1	-1	1	-1	-1	-2	No se cuida
-1	-1	-1	1	1	-1	-2	No se cuida
-1	1	-1	-1	-1	1	-2	No se cuida

SUMATORIA RESPUESTAS	No se cuida	15
	Sí se cuida	3

REFERENCIAS	
Observación	VR
No se cuida	≤ 0
Sí se cuida	> 0

Source: own elaboration.

Figure 2.



Source: own elaboration.

In response to the survey, it is possible to analyze that only a few professionals attend psychological or alternative therapies and engage in leisure activities. They are dissatisfied with their salary; there is only satisfaction in their work performance; this discipline is always highlighted by the vocation that each nurse has and gives conformity to these. Emotionally, they are affected when they are linked to patients, and most of them do not undergo any psychological or alternative therapy, which could be fundamental for self-care, which many times plays a vital role in the daily routine.

Table 3: Social Care

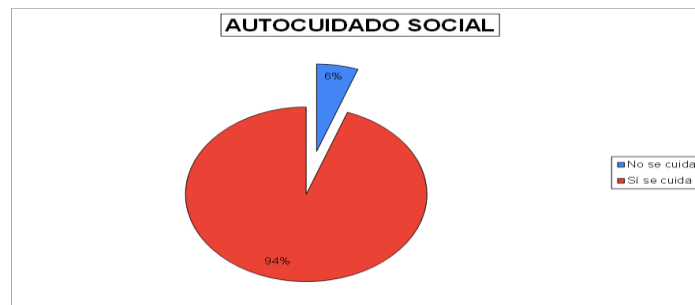
AUTOCUIDADO SOCIAL							
Número de Pregunta						Valoración por respuesta (VR)	Análisis
Uno	Dos	Tres	Cuatro	Cinco	Seis		
1	1	-1	1	1	1	4	Sí se cuida
-1	-1	1	1	1	1	2	Sí se cuida
1	1	-1	1	-1	1	2	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
1	1	-1	1	1	1	4	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
1	1	-1	1	1	1	4	Sí se cuida
-1	1	1	1	1	1	4	Sí se cuida
1	1	-1	1	1	-1	2	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida
1	-1	1	1	1	1	4	Sí se cuida
1	1	1	1	1	1	6	Sí se cuida
-1	-1	-1	1	-1	1	-2	No se cuida
1	1	-1	1	1	1	4	Sí se cuida
1	-1	-1	1	1	1	2	Sí se cuida

SUMATORIA RESPUESTAS	No se cuida	1
	Sí se cuida	17

REFERENCIAS	
Observación	VR
No se cuida	≤ 0
Sí se cuida	> 0

Source: own elaboration

Figure 3. Social Self-Care



Source: own elaboration.

This analysis shows in a positive way how they manage to establish a good level of self-care, which is beneficial for each person. They comply with social or family gatherings, agreeing with their peers by covering for each other and changing shifts.

This refers to the importance of developing within society and their environment since the individual is not self-sufficient, nor could he or she relate beneficially as a human being.

In contrast to the above, the analysis shows dissatisfaction with their salary retribution, resulting in their needs not being covered.

CONCLUSIONS

This paper aimed to assess the level of self-care of the nursing staff in the critical care area of the Nodal Hospital of Venado Tuerto to make this problem visible within the institution and to implement strategies to improve the profession's performance. In order to do so, we first clarify the concept of self-care and the determinants of health as determinants of self-care. Then, we addressed the nurse's lifestyle in terms of working hours, rotating shifts, moonlighting, low remuneration, the multifaceted role of the female nurse, and how all this impacts the health professional's work performance. Finally, we carried out an observational recording of the study population sample and conducted individual and voluntary surveys to collect the necessary data regarding physical, psychological, and social self-care.

After analyzing the results of the surveys carried out, we can state that, according to the data obtained, the self-care of intensive care nurses is deficient in physical, psychological, and social aspects.

Regarding the degree of physical self-care, the results give a prevalence of lack of self-care, evidencing that, although they perform the medical controls in the case of the presence of pre-existing pathologies, they fail to execute the treatments indicated to them, which may be alarming with time; not forgetting that nursing is characterized by the humanistic sense and responsibility with the other people who require their education regarding their self-care and this is, precisely, what they do not apply to themselves.

Regarding the lack of daily rest, that is, the few hours dedicated to rest, it is also observed that these hours are not enough to cover the minimum necessary to carry out the daily routine, which becomes even more complex due to the load generated by the permanent need linked to the attention and tasks, in order to perform an efficient work, which translates into correct care of the patient.

Due to the absence of a follow-up of the situations that generate psychological affectations, it is observed that psychic self-care is not located within the necessary practices for the health personnel either, being few times that they have a structure that allows them to face the conflicting circumstances to which they are submitted in the daily work, triggering stress situations that in many cases are manifested in external environments, both in the social and in the family.

In the case of remuneration, it is observed that, as this is insufficient, health personnel must work two or more shifts, either in the same health center or in another, generating a routine that entails little or no rest. This factor is analyzed as being linked to psychological affectations.

Finally, regarding social self-care, it is concluded that the staff seeks to make up for the lack of the other points of analysis through social activities, either with family, friends, or both, finding in this factor a positive result, since they seek to maintain this type of link, even changing hours dedicated to rest for hours dedicated to social activities.

It will be necessary to extend the study or continue some lines of it in order to try to determine the reason for the lack of identification of health personnel as subjects of self-care, a situation that has not been addressed at present and which is considered necessary to be able to initiate awareness of the benefits if they could identify themselves as subjects of self-care. From the above, it would be sought to determine whether it is possible to achieve a decrease in the burden that health personnel bear when they do not recognize themselves as subjects of self-care, just as the person who has stress manifested in different ways (overweight, panic attacks, etc.) does not self-identify with these manifestations until they translate into physical and occupational affectations.

It is not possible to forget that health personnel are academically trained for patient care through the transmission of knowledge on biosafety, body mechanics, and pharmacology, to mention a few subjects. However, subjects such as self-care, the psychological burden of health personnel, and stress management are rarely included in the curriculum. If they are included, it is estimated that it will be

possible to begin to generate awareness among health personnel, limiting the wear and tear to which they are subjected.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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 Methodology: Erica Andrea Valdebenito
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