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IMPACT OF PRIVATE NURSE'S BEHAVIOR IN CARE OF ELDERLY PATIENTS Mr. Kashif Shahzad¹, Ms. Shazia Sardar²*

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Abstract:- As life expectancy has increased all over the world, the burden of health related issues with growing age is now a day's great challenge for the families. With advance age health problems are more visible like cardiac problem, behavioral changes like anger, agitation and neurological in competencies as dementia are very commonly seen which prone families to hire private nurses for long term care of elderly. Private nursing care is cheaper than hospital care and also easily accessible. But due to lack of adequate professional training, most of private nurses are unable understand the basic needs of elderly. Furthermore, lack of supervision from agencies providing private nurses are major contributors of below standard nursing care provision. As result, lack adequate formal and professional schooling system for private care nurses prone elderly to behavioral changes including agitation, irritability and unusual anger.

Background: Health systems are undergoing rapid change and the requirements for conforming to the new challenges of changing demographics, disease patterns, emerging and reemerging diseases coupled with rising costs of health care delivery have forced (2) individual and families to find out different options to overcome the burden of health care related challenges. For long term care need, one option is to opt for home health nursing care which is cheaper as compared to hospitals. For example, it would be quite expensive to keep quadriplegic (all limbs paralysis) patient in hospital for rehabilitation care or an elderly patient who don't have any family member at home to look after care needs.

As longitivity have been increased one can predict the burden of care needs to elderly at homes. World Bank (2016) reported that Pakistan is the sixth most populated country with a population exceeding 212,742,631 in south Asia where the life expectancy has increased up to 66.48 year with compared to India (68.56 years) and Bangladesh (72.49 years).

Keywords: Private nursing, Elderly, Challenges, Professional attributes, Expenses

Introduction:

Home health care is a care which is provided to clients in home setting, which include broad spectrum care given by skilled medical professionals, including skilled nursing care, physical therapy, occupational therapy and speech therapy. Furthermore, it also includes skilled, non-medical care, such as medical social services or assistance with daily living from a highly qualified home health aide.

As the Medicare program describes, home health care is unique as a care setting not only because the care is provided in the home, but the care itself is "usually less expensive, more convenient, and just as effective" as care given in a hospital or skilled nursing facility.(1)

Purpose:

The purpose of this article is to underpin the impact of care provided by private nurses on elderly clients at home setting.

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Case scenario:

During round of patient in the medical ward in tertiary care setup in Karachi Pakistan, it was observed that 75 years old female patient who was admitted with diagnosis of bilateral legs cellulitis was not taking medications from her private nurses. There were two nurses with that patient since 7 to 8 months as patient's family had less time to spend with her due to job related concerns. Family hired those two private staff to care for elderly client in their absence.

As medications were needed to be administered due to medical condition, private staff was insist to give them to patient but again patient refused to take them from those staffs.

To reassure patient, I took patient hands into my hand and started to talk to her about how she is feeling now and why till yet she has not taken any thing to eat. During conversation, it was observed that the two staff nurses were laughing at her and were whispering something between them. Furthermore, one of the female staff nurse took an AC remote to turn on AC as they were feeling heat which was immediately felt by patient and patient started shouting that why you have turn on the AC turn off the AC as she was feeling cold.

Again when I looked into her eyes she started staring at me with a smile. She was assured that will not turn AC and also she was encouraged to take her prescribed antibiotics. She took her medications while smiling and with great comfort.

At the end, both the nurses were counseled not to trouble patients by irritating her with these small little acts of in human nature.

Issues:

Elderly people are more vulnerable to bear physical and emotional hazards. Home nursing abuse and neglect is very common in long term care systems and is very difficult to detect. For example, diseases like dementia can mask the effects of neglect especially in case of elderly. In some instances, families can mistake the regular progression of disease for abuse or neglect. Signs and symptoms of abuse or neglect can vary from emotional (agitation, sudden change in behavior, extremely withdrawn or non-communicative, confusion or dementia) to physical (open wounds and cuts, dehydration, malnutrition, loss of weight and burns)

According to the Human Development Report 2015, the average years of schooling in Pakistan are 7.78%, compared to 9.97% for Bangladesh, 11.69% for India and 13.71% for Sri Lanka (5). This data clearly suggest that, lack of schooling during nursing education prone nursing students to substandard nursing practices including skills and professional attributes. This impact is evident in Health outcomes in Pakistan with life expectancy at 66.2 years which is the lowest in the south Asian region reflecting the inescapable linkage between education and health in human resource development.(5)

Apart from nursing skill, professional attributes play pivotal role in home health care settings which includes, communication skill, emotional stability of nurses, empathy and respect for client they are caring (6). In addition, there is no formal education system available for private nurses which is clearly visible in their practices. Lack of supervision from agencies providing private nurses are major contributors for below standard nursing care provision.

In the above given case, the patient was not being care with empathy which was evident in patient behavior. Elderly client required to be cared with love and affection which cannot be expected from most of private care takers. Most of them have not been trained adequate enough to understand the needs of elderly due to poor schooling systems across the country and lack of cross check by family members due to lack of time.

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One of the study findings of NHS as cited by A.Turrel (2001) is that more rapid deterioration in mental and physical functioning and great risk of accidents in residents of home nursing clients as compared to the care provided in hospital setting which is quite alarming.

Discussion:

While reviewing different work done in field of private nursing, it has been observed that there is darkness in this field of science especially in Pakistan. A lot of research work need to been done regarding impact of private nursing on mental health of elderly which ranges from physical, social and psychological impact.

Conclusion:

Lack adequate formal and professional schooling system for private care nurses prone elderly to behavioral changes including agitation, irritability and unusual anger.

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