

Routine care to patients and families in outpatient follow-up after hospitalization

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BACKGROUND:This routine is intended for hospitalized patients with indications of continued treatment in the outpatient chemotherapy. It was observed through behavioral and emotional expression that patients starting treatment at the clinic showed signs of anxiety and fantasies in relation to the physical environment. It was found that there was a lack of knowledge about the operation of the clinic and involvement of the patient and family with the treatment, which caused a perceived decline in the quality of care. Thus, it was understood that there was an information gap and unmet expectations between the care received during hospitalization, which involved greater reliance on the team regarding the care, and the health care proposal offered in outpatient chemotherapy, generating dissatisfaction and the perception of worsening care. It was established that during the hospitalization there is a need for intervention by the multidisciplinary team to raise awareness regarding handling routines in the clinic and the involvement with the treatment that patient and family should have.

HYPOTHESIS:Establish a routine presentation of the operation of the clinic for inpatients and family in order to promote the expression of doubts, decrease in anxiety and adaptation to the new environment of treatment.

METHODS:The process was organized in a way that the nurse of the clinic is warned about the estimates of patient discharge by the professional staff of the hospital (nursing and / or psychology). Patients and family members are approached during hospitalization and invited to know the outpatient chemotherapy as well as the routine of the sector and the staff involved in the care. At this time a visit is made to the outpatient care facilities and the routine of that sector is exposed, showing the importance of scheduling days of treatment, the correct intake of medication to allow adequate performance of outpatient examinations, the time necessary for preparation and installation of medications and the professionals involved in this process, so that care is validated enabling the reception of patients and family. On the first day of chemotherapy treatment at the clinic, orientation regarding the new procedures are given.

RESULTS:During the period in which the routine was performed, we observed that the complaints related to the processes inherent to the outpatient care function decreased. Expectations with respect to this new phase of treatment could be adjusted and, therefore, the work of the team was more effective. After the implementation of this routine, improvement was also noticed in the relationship among patient, family and staff, especially in terms of communication and bonding, as well as decreased anxiety, increased security and better adaptation of patients and families facing an outpatient routine. The implementation of this flow enabled care based on the work of the interdisciplinary team with focus on the patient, allowing the integration of the needs of the patient, the family as well as the staff. For the continuation of this work, we identified the need to prepare a form for assessment of satisfaction regarding this process in order to record the results of this intervention.