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Intensive care nurses' perception of care concept the case of Turkey: A qualitative study

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Abstract

Care is the most important concept that constitutes the core of nursing. Nurses' perceptions on care influences the quality of care practices greatly. It is especially important that nursing care is adequate and effective at intensive care units where care is provided for patients with complex and life-threatening problems. This study was conducted with the aim of determining the perceptions of nurses on the concept of care and their care practices. This qualitative study was conducted at an intensive care unit in the Southeastern Anatolia Region in Turkey. The study was performed with 17 intensive care nurses. Private face-to-face semi-structured interviews were conducted to collect the data. The data were analyzed using the method of content analysis. All the nurses stated that the concept of care is the basis of nursing. As a result of the analysis of the data, three main themes were determined. (a) Perception of care; physical care, psychological and physical care, (b) Care; care practice, care responsibility, contribution of care practices to perception of nursing as a profession, (c) Feelings after care; feeling happy, feeling of fulfilling your responsibility. Care perceptions and care practices of intensive care nurses should be improved further.

Keywords: Concept of care, intensive care nurses, qualitative study

Introduction

Care is the most important concept that distinguishes nursing from other health disciplines and constitutes the core of nursing. The concept of care may be defined as being sensitive to the needs and desires of others [1]. Many nursing theorists define the concept of care differently. According to Leininger (1988), care is a basic human need, and it is the use of vocational knowledge and skills to improve health on the basis of values such as empathy, compassion, reassurance and help [2]. Swanson (1991) defined care as the care and feeding of the needy and noted that it includes getting to know the patient and doing something for the patient [3]. Hall defined care as the combination of factors that make up the concept of motherhood, such as nurturing and providing comfort [4]. Among the definitions made in the literature, the most emphasized common view is that care is the essence and foundation of nursing. The concept of care includes elements of empathy, love, compassion, communication, caring, attention, value, ethical behavior, providing information and respect.

Nursing care requires that the right decision is made for the individual for whom the nurse is responsible in accordance with the accumulated scientific knowledge of nursing. A professional nursing approach requires nurses to take the concept of care as a basis in their professional practice. Nurses' perception of care has a significant effect on the quality of their care practices. It is especially important that nursing care is adequate and effective at intensive care units, where care is provided for patients with complex and life-threatening problems.

The physical structure of the intensive care units in Turkey varies. Especially at major university hospitals in Ankara, Istanbul and Izmir, first, second and third tier intensive care services are provided with fully equipped medical equipment in line with the standards of intensive care units. In some cities, however, the physical conditions and medical equipment of intensive care units are not on a desired level. Whether intensive care units are fully equipped or not, there are various problems in intensive care services in Turkey. The main problems are intensive care patient bed capacity, the low number of physicians specializing in this area and problems in intensive care nursing [5-7].

In Turkey, intensive care nursing is performed by nurses who

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graduate from different levels of education (high school, undergraduate and graduate). Intensive care nurses are not adequate in number. Additionally, most of the currently working nurses did not receive special training for intensive care. Nurses work with a large number of patients at intensive care units over long hours and under difficult conditions [8,9]. These problems affect the quality of nursing care negatively. In a study conducted by Karadağ and Taşçı in Turkey, it was determined that nurses perform tasks such as giving medication to patients and monitoring vital sings, but they did not perform the practices related to care in general. In the same study, it was found that unfavorable working conditions, lack of motivation, communication problems and nurses performing tasks that are not part of their responsibilities affected their care practices negatively [10].

Care practices of intensive care nurses are also influenced by the concept of care in addition to their working conditions. There is no study in Turkey that described how nurses perceive the concept of care.

This study was conducted with the aim of determining the perceptions of nurses on the concept of and the care practices of intensive care unit (ICU) nurses.

Material and Methods

Design

This study was a qualitative one which used a content analysis approach. Qualitative content analysis is a technique that is widely used to interpret the meaning of the content of the data in texts. Qualitative studies investigate phenomena rooted in the context of social sciences. This research method may be effective in clarifying ambiguous and unknown areas, and it is the best way to describe life experiences and essential social processes in these which focuses on the “entire” perception and comprehension. Therefore, this was thought to be the most appropriate method for determining the perceptions of intensive care nurses on the concept of care and their care practices in a multi-dimensional and in-depth manner [11].

Setting and participants

This study was conducted with nurses in the period of January-March 2016, who were working at intensive care units of Diyarbakir Gazi Yasargil Research and Training Hospital located in southeast Turkey. The intensive care units at this hospital provide 1st, 2nd and 3rd tier Intensive Care services. Intensive care units are composed of internal, surgical, reanimation, coronary, neurology, cardiovascular and surgical units, with a total bed capacity of 73. At these units, the nurses work in two shifts, at hours of 8-16 and 16-08, for 48-56 hours a week. Nurses provide care to an average of four patients during their daytime and nighttime shifts.

Before starting the study, all nurses working at the intensive care units of the hospital (120 nurses) were informed about the purpose and scope of the study. 17 nurses stated that they were willing to participate. The study was conducted with these 17 nurses. In qualitative research, the sample size is determined based on the ability of the sample to produce the data needed by the researcher. It is generally agreed that the sample size is sufficient when the same/ similar data are repeated in the interviews (when the data reaches a

saturation level). In this study, data saturation was reached with 17 nurses, so the sample size was not increased furthe.

Ethical considerations

Prior to the study, institutional permission and ethical approval was obtained (Application no: 532/58). Intensive care nurses who were planned to be included in the scope of the study were informed about the scope and purpose of the study and that participation was voluntary. Verbal and written permission was obtained from the nurses who agreed to participate in the study.

Data collection

The data were collected by means of in-depth semi-structured one-on-one interviews. The semi-structured interview form was prepared by the researchers (Table 1). An appointment was made for when the nurses were available for the in-depth one-on-one interviews. Voice recordings were made during the interviews with permission from the nurses. All nurses consented to voice recording. Each interview lasted for 30 minutes on average. One-on-one interviews were held in the meeting room of the hospital, in a quiet environment by the first researcher during the nurses’ free hours. The researcher allowed the participants to freely express their views during the interview. Judging, approving or refusing attitudes and expressions were avoided. The open-ended questions that were asked to the nurses during the interviews are listed in Table 1.

Table 1. Questions asked to the nurses during one-on-one interviews

What is the concept of care for you? Can you explain?
Which elements are included in the concept of care? Can you explain?
For you, who should provide care? Can you explain?
What kind of care practices do you provide for patients at your clinic? Can you explain?
Do you notice the changes in your patients after you provide care? Can you explain?
What do you feel after providing care for a patient at your clinic? Can you explain?
What is the contribution or relationship of care practices to the professionalization of nursing? Can you explain?

Data analysis

The data were evaluated by the content analysis method. The results were obtained by analyzing the data using an inductive approach and the constant comparison method. Content analysis is a research technique used to produce reproducible and valid results regarding the content of data [12]. The first researcher immediately transcribed the voice recordings he had obtained at the end of the interviews and created a transcript file. Then, two researchers read this transcript several times and coded and grouped similar and different expressions. At the next stage, the coded data were organized [13], and the main themes and sub-themes of the study are identified Table 2.

Table 2. Themes of the study

Main Themes	Sub-Themes
Concept of Care	Providing the physical needs of the patient Psychological and physical care
Care	Care Responsibility Care Practices Contribution of care in professionalization
Feelings After Care	Being Happy The Feeling of Fulfilling Your Responsibility

Results

It was found that the mean age of the nurses was 28.73, eight nurses were male, 12 were university graduates, one had a master's degree, the mean duration of their employment was 4 years, and seven nurses received intensive care training.

Perception of Care

Intensive care nurses stated that the concept of care constituted the core of nursing. Most of them said they perceived the concept of care more as providing the physical care of the patient. Some nurses also perceived it as the patient's both physical and psychological well-being.

Physical Care

According to the nurses, the concept of care was defined as helping patients who were unable to meet their physical needs do so.

We usually provide physical care since we work at the intensive care unit. In general, body cleaning, perineal cleaning, positioning, oral care, cold treatment when necessary, all of these constitute the concept of care (Nurse 5).

What we encounter most in intensive care is infections. For this reason, hygiene and physical care of patients are very important. For me, care is performing body bath, hair cleaning, oral care and nail care of patients (Nurse 13).

I think the concept of care is to meet all the needs of the patient. For example, provision of hygiene, feeding and positioning. Try to maintain all the physical requirements of the patient (Nurse 14).

Psychological and physical care

Some of the intensive care nurses stated that the concept of care included elements such as communicating, touching, being compassionate and meeting the physical needs of the patient.

Supporting the patient in the spiritual sense as well as the physical care of the patient, to speak or to hold if the patient can perceive it, are the most important aspects of a nurse's care practice (Nurse 6).

The fact that the patient is lying in the same position continuously under four walls causes depression. This is why when I go to the hospital and see the patient, I approach the patient with expressions such as good morning, how are you, you look better today (Nurse 2).

Care is not just about cleaning the patient's hand, face or foot and leaving the patient like that. Care is a physiological, psychological communication process. It treats the patient as a whole and meets their physiological and psychological needs. This includes cleaning the patient, the treatment of the patient, communication with the patient and their relatives, and everything else (Nurse 10).

Care

Care Practices

The care practices stated by the nurses in the interviews included feeding the patient, providing wound care, providing hygiene, positioning, treatment and follow-up.

We are mostly performing the cleaning of the patient. Wiping the entire body of the patient, haircut, nail cleaning, oral cleaning, positioning, etc. At the same time, we perform other procedures such as treatment and wound care (Nurse 7).

We perform all the self-care of the patient. For this reason, there is no time left for more specific nursing practices such as bladder training, cuff training, etc. (Nurse 2).

Care Responsibility

The vast majority of the nurses stated that nurses and caregivers should perform patient care together. Several nurses stated that it could be implemented only by nurses.

The statement of one nurse was very striking.

I think the physical care of the patient should be performed by their caregivers. We can only help them, because nurses have a heavy workload. I am not saying that they should do everything, for example, they cannot perform wound care, but they can perform most care practices (Nurse 14).

Care should not be performed only by nurses. Health is a team effort, so task sharing may be done. For example, the doctors are not responsible only for ordering the treatment of the patient. Doctors should also make the patient feel psychologically relaxed. However, they do not do it too much. Therefore, the overall care of the patient becomes our responsibility (Nurse 2).

The view of one nurse was different:

Since nurses know what patients want better, care is the responsibility of nurses (Nurse 1).

Contribution of care practices to perception of nursing as a profession

Intensive care nurses stated that patient care practices have an important place in the perception of nursing as a profession.

Nurses are often seen as an assistant health workers in our society. I think patient care practices carry nursing to a higher level (Nurse 5).

In our society, nurses are seen as the assistant of the doctor. It is seen as if the doctor calls for the treatment, and the nurse performs. Nurses are known as workers who perform injections, give medication or measure blood pressure. Yet, care is a nursing practice that demonstrates our independence and shows that we are a profession (Nurse 3).

One nurse who stated that care practices do not contribute to the professionalization of nursing:

Care is important for both the patient and the nurse. On the other hand, does it make any contribution to professionalization? I do not know that. I do not really know, because I do not know how it is perceived from the outside. However, I think care does not elevate the profession of nursing. I think it demeans nursing (Nurse 14).

Nurses' feelings after care practice

Feeling Happy

The nurses stated that they observed positive changes in the patients after implementing care, and they felt happy.

Patients look dirty before we perform care, sometimes they smell bad. I see that the patient is cleansed and relaxed after care. I see gratitude in the eyes of the patient, I feel happy and emotional (Nurse 9).

The Feeling of Fulfilling Your Responsibility

The nurses stated that they felt peaceful after providing care for their patients.

When I provide care for the patient, I relieve their pain, I feel conscientiously relaxed, I think I am useful and beneficial to the patient (Nurse 1).

Firstly, I feel peaceful. I believe that I am earning lawful –halal– money (Nurse 5).

Discussion

In this study, nurses stated that the concept of care constituted the basis of nursing, and it was perceived as fulfilling the patient's physical needs and providing psychological support. The concept of care includes elements of empathy, caring, love, providing information and being open to communication [2,3,14]. In a qualitative study conducted with Pakistani nursing students regarding their perceptions of the concept of care, it was determined that most of the students referred to care as a maternal relationship and stated that communication, assistance, empowerment and development behaviors constituted the concept of care [15]. In another study conducted with a qualitative method that examined the attitudes and behaviors of nurses towards the concept of care, questions were asked about what care is and how care should be provided. Based on the responses of the nurses, it was determined that the most emphasized themes were caring, being thoughtful and sensitive, showing affection, approaching patients without judgement, being open to communication and empathy [16]. In the study by Mlinar (2010) conducted with 166 first- and third-year nursing students on their perceptions on care practices, it was found that the students perceived caregiving as being respectful, helping, teaching, getting to know patients and establishing relationships [17].

The students stated that nurses should consider the concept of care while applying their knowledge and skills. In the same study, it was found that the perception of the concept of care differed between the first-grade nursing students and third-grade nursing students. In this study, it was found that the intensive care nurses mostly perceived care as providing physical care to the patient and

mentioned only some of the elements included in the concept of care, suggesting that the knowledge and perceptions of the intensive care nurses related to the concept of care should be improved.

In the findings of this study, the vast majority of nurses stated that caregivers should assist nurses in the physical care of the patient. The nurses thought that the caregivers of the patients should help nurses because of their heavy workload. However, a few nurses stated that the care practices should be performed entirely by the nurses. There are various problems in the field of intensive care nursing in Turkey. These are important issues such as low number of nurses, lack of intensive care certificates in most of the currently working nurses and high number of patients per nurse and long working hours [8,9]. A study conducted with 112 intensive care nurses in Turkey revealed that 78.6% of nurses would not want to choose the profession of nursing again, 68.8% were considering quitting, 50.64% thought the working conditions were heavy and intense, and 33.76% were not satisfied with the working hours [18]. In the literature, it was reported that intensive care nurses experienced physical and mental exhaustion [19,20]. In this study, the reason why nurses request caregiver support may be the aim to reduce their workload or due to the fact that care awareness was not on a desired level. Whatever the case is, nursing care is a practice that is the sole responsibility of nurses. For this reason, development of awareness on nursing care and provision of appropriate working conditions may increase the time and quality of patient care.

The nurses stated that the care practices they performed at the intensive care unit were feeding the patients, wound care, providing hygiene, positioning, treatment and monitoring. In the definition of the duties of intensive care nurses in Turkey, it is stated that nurses are responsible for diagnosing patients with complex and life-threatening problems, monitoring the patients constantly, applying quality and advanced intensive care and treatment interventions, establishing therapeutic communication with patients and their relatives, and protective, healing and rehabilitative initiatives [21]. The statements of the intensive care nurses showed that they fulfilled a part of their care responsibilities.

The intensive care nurses stated that care practices contribute to the professionalization of nursing. In order for a job to be considered as a profession, it needs to fulfill certain criteria such as involving theoretical knowledge, duration of training, providing services to the society, independence, having ethical values and commitment to the profession.²² Care practices that constitute the core of the profession of nursing require professional knowledge, skills and autonomy. Nurses provide important healthcare services to individuals and the society through care practices. For this reason, care practices have a significant contribution to the professionalization of nursing. In a study conducted in Turkey, it was found that the nursing services that were provided were insufficient, and the care practices in the profession of nursing gave a psychological satisfaction to nurses [22]. In the literature, it was emphasized that nursing and care cannot be independent from each other [4,23]. In this study, although the statements of the nurses regarding the contribution of care for the professionalization of nursing is encouraging, it is believed that the awareness of nurses on the care practices they perform independently should be developed further.

The intensive care nurses stated that their patients were physically and psychologically relaxed after care. After providing care, the nurses stated that they felt happy, conscientiously relaxed and motivated since they were beneficial to their patients. Nurses feeling happy and thinking that they are putting the effort for the money they make, day lead to job satisfaction and increased motivation.

Conclusion

Improving the perceptions of nurses on the concept of care will improve the quality of patient care. It is important for intensive care nurses to ground their practices on the concept of care. The study examined the nurses' care practices from various aspects. The intensive care nurses defined the concept of care as follows: providing the physical care of the patient and supporting the patient spiritually.

The findings of this study suggested that the perceptions of the ICU nurses were not on a desired level, and a comprehensive training should be provided to nurses on the concepts of care and nursing care. Intensive care nurses should receive special training in their field, and their working conditions should be improved.

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Competing interests

The authors declare that they have no competing interest.

Financial Disclosure

This paper is based on the Master's degree dissertation of the first author, carried out under the supervision of the second author.

Ethical approval

Ethical Approval All procedures performed in this study involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. Informed Consent Informed consent was obtained from all individual participants included in the study. The research received IRB approval from the Scientific Research Ethics Board of Diyarbakır Gazi Yaşargil Training and Research Hospital, Turkey.

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References

- Altıok ÖH, Şengün F, Üstün B. Care: concept analysis. Dokuz Eylül Üniversitesi Hemşirelik Yüksekokulu Dergisi. 2011;4:137-10.
- Leininger MM. Leininger's theory of nursing: Cultural care diversity and universality. Nurs Sci Q. 1988;1:152-60.
- Swanson KM. Empirical development of a middle range theory of caring. Nurs Res. 1991;40:161-6.
- George BJ. Nursing Theories, in George BJ, Lydia E Hall. Fourt edition. Fullerton, California, 1995.
- Çelikel T. Critical Care Medicine in the World and in Turkey. J Intensive Care. 2001;1:5-9.
- ICU in Turkey, <http://www.iha.com.tr/haber-turkiyede-680844/> access date 23.01.2018
- Altınöz Ü, Demir S. Intensive care nurses' perceptions of their work environment, psychological distress and the factors that affect them. J Psych Nurs. 2017;8:95-101.
- Taycan O, Kutlu L, Çimen S, et al. Relation between sociodemographic characteristics depression and burnout levels of nurse working in university hospital. Anatol J Psych. 2006;7:100-8.
- Kavlu İ, Pınar R. Effects of Job Satisfaction and Burnout on Quality of Life in Nurses Who Work in Emergency Services. Türkiye Klinikleri J Med Sci 2009;29:1543-55.
- Karadağ S, Taşçı S. The factors affecting the nursing care given by the nurses working in Kayseri State Hospital. J Health Sci. 2005;14:13-21.
- Corbin JM, Strauss A. Grounded theory research: Procedures, canons, and evaluative criteria. Qualitative Sociology. 1990;13:3-21.
- Graneheim UH, Lundman B. Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. Nurse Educ Today. 2004;24:105-12.
- Lawrence J, Tar U. The use of grounded theory technique as a practical tool for qualitative data collection and analysis. Electronic J Business Res Method. 2013;11:29-40.
- Karaöz S. Turkish nursing students' perception of caring. Nurse Educ Today. 2005;25:31-40.
- Begum S, Slavin H. Perceptions of "caring" in nursing education by Pakistani nursing students: An exploratory study. Nurse Educ Today. 2012;32:332-6.
- Dyson J. Nurses' conceptualizations of caring attitudes and behaviours. J Advanced Nurs. 1996;23:1263-9.
- Mlinar S. First-and third-year student nurses' perceptions of caring behaviours. Nurs Ethics. 2010;17:491-500.
- Yıldız N, Kanan N. The factors that affect job satisfaction in nurses working in the intensive care units. Yoğun Bakım Derg. 2005;9:8-13.
- Kaya N, Kaya H, Ayık S, et al. Burnout of nurses who work in a government hospital. Uluslararası İnsan Bilimleri Dergisi. 2010;7:401-19.
- Altay B, Gönener D, Demirkiran C. The level of burnout and influence of family support in nurses working in a university hospital. Fırat Tıp Dergisi. 2010;15:10-6.
- Akdeniz S, Ünlü H. Intensive care nursing. Yoğun Bakım Dergisi. 2004;4:179-85.
- Korkmaz F. Profesionalizm and nursing in Turkey. Hacettepe Univ Fac Health Sci Nurs J. 2011;18:59-67.
- Alligood MR. Nursing Theorists and Their Work-E-Book. Elsevier Health Sciences. <https://books.google.com.tr/books?> access date: 05.01.2018.