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Research Article

**THE EFFECT OF NURSING ON MEETING PATIENTS' HOME
CARE NEEDS**

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Abstract:

The aim of the study is to touch or relieve the pain of people in need of help and attention and know their requirements and needs, whether through their need for medicines or changing them, as well as alleviating them with the medical word, to alleviate their daily suffering, the importance of making home visits to educate patients, whether visiting the elderly to touch their needs, or doing health education for other patients in terms of harmful eating habits that harm their physical and mental health and their body, as well as trying to provide spiritual relief for the elderly who are unable to visit hospitals, and that there are those who care about them among the members of society and that they are a category dear to us all. Or individuals who need to change their wounds and purify them for carrying out one-day operations in hospitals and they need to be reviewed. A questionnaire was created using the Google Drive application and it was distributed electronically through the social networking service application (WhatsApp) to 600 people (men and women), and the answer was obtained from 550 people in the city of Mecca.

Keywords. effect, nursing, Meeting patients, home care needs

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1-INTRODUCTION:

Home health nursing is a specialty within nursing in which nurses provide multidisciplinary home care⁽¹⁾ to patients of all ages. Home health care is a cost-effective way to provide high-quality care in the comfort of a client's home⁽²⁾. Home health nurses create care plans to achieve goals based on a client's diagnosis. These plans can include preventive, remedial, and rehabilitative measures. Home health nurses also supervise unlicensed auxiliary staff. The Home Health Nurse Professional Nursing Organization is the Home Health Care Nurse Association (HHNA)⁽³⁾ Home health care is intended for clients whose health allows them to be discharged home from the hospital, but who still require skilled nursing staff to evaluate, conduct and supervise nursing interventions. Home health nurses have a wide range of duties and provide many services. In addition to these services, they also consult physicians about a patient's condition and provide feedback on any potential changes that need to be made in the plan of care. The responsibilities of home health nurses include health support, disease prevention, administration of medication, educating patients about their current diagnosis, providing psychological support, and providing basic care such as personal hygiene⁽⁴⁾. Current nursing literature on caring relationships tends to focus on the psychological attributes of the nurse (e.g., the ability to listen, being there) Nurses also play a role in different cases, as services from different specialties have been coordinated for the patient. This can include reintroduction, pharmacy, community improvement, and more Part of the home health nurse's job is providing new, up-to-date health care to a patient. Effective medical understanding by following the latest research and medical evidence-based practices⁽⁵⁾.

reflecting nursing ideology, which either helps or hinders the development of a trusting and respect-full relationship⁽⁶⁾.⁽⁷⁾ in-dictates that such an individualistic approach may credit and/or blame nurses for "good" and "bad"*relationships, and little attention is given to personal or contextual elements⁽⁸⁾. To meet a patient in the home is to meet the inviolable domain of this person. This context is characterized by a high degree of patient autonomy, limited oversight of informal caregivers, and situational variables unique to each home⁽⁹⁾. When the patient and the nurse meet in the patient's home, different expectations from both sides may govern the inter-action. The nurse's role is that of a professional helper who is to meet the patient and show respect and dignity⁽¹⁰⁾. Maintaining a patient's dignity requires that the nurse get to know and understand the patient

and, accordingly, carry out individualized treatment with respect to the patient's autonomy and integrity⁽¹¹⁾. Studies have shown that nurses working in home care consider themselves guests in the patient's home⁽¹²⁾. At the same time, they are also aware of their professional status, which occasionally dominates and, in turn, generates a demand to handle the question of dis-tance and closeness in the nurse patient relationship⁽¹³⁾. Nurses and other health professionals have to be able to identify and articulate the nature of these interactions and their impact on patient out-comes, along with an understanding of factors that can promote or inhibit the therapeutic relationship⁽¹⁴⁾. Home health care at the Ministry of Health provides health care that guarantees the satisfaction of the patient and his family, providing safe care in the patient's home with the presence of his family, and the following services are provided: home nursing care, medical care, rehabilitation and home physiotherapy, home nutrition services, home respiratory care, home social services, Home Mental Health, Virtual Home Health Services, Medication Administration, Other Supportive Services. By appointment or referral system. 1- Hospitalized patients: Patients whose condition is stable and the attending physician believes that they cannot be discharged without the presence of health services at home. 2- non-inpatients: outpatient patients in the hospital who need health care, with the availability of referral and a clear treatment plan by the treating doctor in the hospital. Emergency patients and in need of health care with the availability of a referral and a clear treatment plan by the attending physician in the hospital. Primary Health Center patients referred according to the Primary Health Centers Patient Admission Policy Alzheimer's patients according to the Alzheimer's Association Patient Admission Policy. Comprehensive rehabilitation patients in accordance with the comprehensive rehabilitation patient admission policy. A disabled student whose condition is stable and can be discharged to school, but needs medical care. 3- The presence of a person capable of caring for the patient. 4- The presence of a safe home environment for the patient and the health team.⁽¹⁵⁾

2-MATERIAL AND METHODS:

This study went on in (the city of Mecca in Saudi Arabia), and started writing the research and then writing the question in March 2022, and the study ended with data collection in July 2022. The examiner used the descriptive analytical approach that uses a quantitative or qualitative description of the cultural phenomenon, and (The effect of nursing on Meeting patients' home care needs). This type of study is described by analysis, cause, topicality, and certainly,

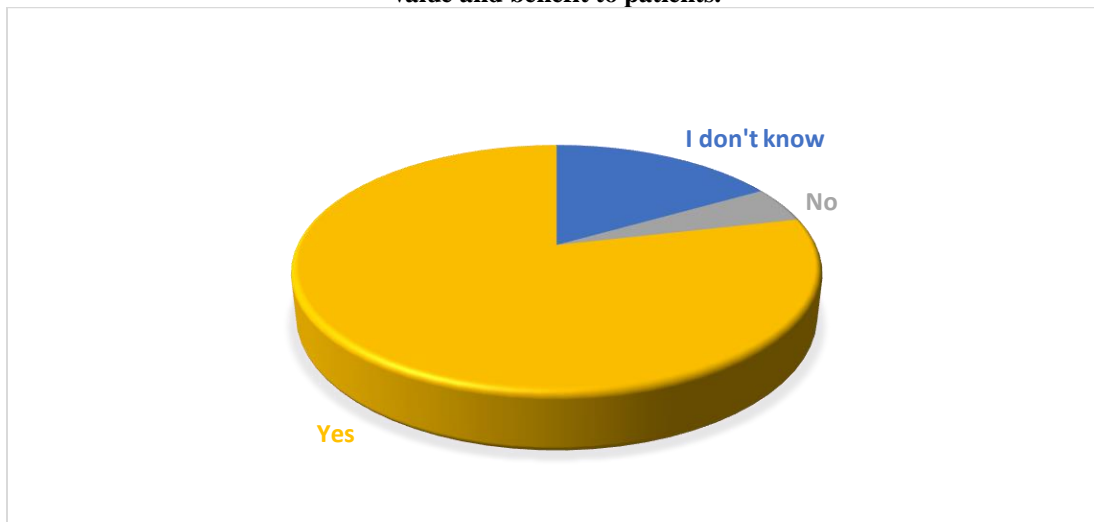
as it is worried about personals and communities, as it learns the changeable and their impacts on the health of the personage culture, and consumer, the expand of illness and their bonds to demographic differentiable such as age, sex, nationality, and married status. Status, function ⁽¹⁶⁾, and use of the Office Group 2010 histogram for Excel to rank the results by dragging them on the statistical software ⁽¹⁷⁾.

3- RESULTS AND DISCUSSION:

A questionnaire is an important and useful device for raising a huge amount of data. However, researchers were not allowed to personally meet participants in the online research, due to social distancing regulations at the time to prevent contagion between participants and examiners and vice versa (not coronavirus participation completely disappearing from society). He only replied to the question electronically, because the questionnaire contains twelve closed questions. The online approach has also been used to generate valid samples in similar studies in Saudi Arabia and elsewhere ⁽¹⁸⁾, Regarding the ages of the participants in answering the research questionnaire, they were as follows: 23-16 years 32%, 24-31 years 0%, 32-39 years 28%, 40-47 years 28%, 48-55 years 12%, as for gender The research participants found that 80% are women and 20% are men, all of them (men and women) are Saudis. As for the professions of men, they were as follows: students 14.3%, government employees 64.3%, private sector employees 0%, businessmen 14.3%, non-working men 7.1%, as for the professions of women, students 33.3%, government employees 47.6%, and private sector employees 0 %, business women 4.8%, unemployed women 4.8%, housewives 9.5%. As for the answer to the first question of the questionnaire, the first question is about Do you think that home care employees are assigned based on their specialization? The answers were as follows: Yes 68%, No 8%, I don't know 24%. The second question was about the number of home visits by the medical team for patients in need of assistance in their homes? The answers ranged from I don't know to 3 visits. The third question is, do you think all patients registered with home care need help and attention? The answers were yes 66.7%, no 20.8%, I don't know 12.5%. The fourth question was about what, in your opinion, is the quality of care that patients receive in home care? Most of the answers were as follows: Medicines and investigations, food and other things, primary care, I don't know. The fifth question, what do you think is the method of obtaining home care to meet the needs of patients? Most of the answers were as follows: transfer to the hospital,

communicate with them, through the hospital care center, all the time, I don't know.etc. The sixth question about whether patients are able to obtain home care from the medical team? The answers were as follows: Yes 86.2%, No 3.5%, I don't know 10.3%. The seventh question about Is, in your opinion, home care limited to medication and medical examination only? Yes 16.7%, No 73.3%, I don't know 10%. The eighth question: Do you think home care cares about the psychological aspect of patients? The participants answered yes 63.3%, no 26.7%, 10% do not know. The ninth question about whether home care cares about the therapeutic aspect of patients, such as changing diabetes and pressure medications, treating insomnia and lack of sleep for the elderly? The participants answered yes 76.7%, 6.6% no, 16.7% do not know. Health education for patients? Their answer was yes 60%, no 26.7%, I don't know 13.3%. The eleventh question is about the extent of satisfaction of patients in need of home care with the services provided by the visiting medical team? The answers were between I don't know, excellent, very good, and good. The twelfth question is about whether the time of visiting the medical team specialized in home care is suitable for patients? 62.1% answered yes, 3.4% did not, 34.5% did not know. The thirteenth question, do you think home care includes all preventive, curative and rehabilitative health aspects for patients? 73.3% answered yes, 10% said no. I don't know 16.7%. The last question is: Do you think the home visit is evaluated according to quality standards in terms of actual value and benefit to patients? The answers were as follows: Yes 80%, No 3.3%, I don't know 16.7%. Through the answers, we find that people fully trust the nursing staff in home care and that they have an effective and significant role in contributing to raising the suffering and morale of patients, whether they are elderly and need to measure blood sugar or patients who need to change wounds continuously. Where we find that those who agree on the importance of nursing staff reach from 60% to 76%, and the extent of their interest in the psychological aspect of patients by 63.3%. This current study found that psychological and social needs are very important to take into account their feelings and meet their needs, as it raises their morale and makes them feel that they are an integral and indispensable part of society, and there is a study by ⁽¹⁹⁾Anette Hansen 2017 that mentioned that how can psychological and social needs not tend, which are evaluated as part of the services provided by Home, as it was recognized within the area of responsibility for home care services and was therefore needed. (Figure No.1).

Figure No.1: In your opinion, is the home visit evaluated according to quality standards in terms of actual value and benefit to patients.



CONCLUSION:

Through the current research, we find that home care, which people trust, and that they provide great services and of great importance, whether for the elderly or other patients in need of help, and for those who relieve their pain and hunger, that they are of great importance and provide useful services for the elderly and other patients.

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