Home health care and nursing: challenges and opportunities

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I take this opportunity to convey the experience of the Research Centre for Teaching and Nursing Practice (NUPEPE) created 18 years ago at the School of Nursing of the UFMG and registered at the National Council for Scientific and Technological Development (CNPq).

NUPEPE conducts research in three main areas: Nursing and Health Education; Health-care Models and Health Promotion. Healthcare Model prioritizes the study of the different expressions and modalities of home care.

Our first project in the area was conducted between 1998 and 2000 in the category hospitalization, at the time a ground-breaking practice within public health services. The research recommended integrating home care into the care model according to the principles of the Unified Health System (SUS). Home care was then in short supply and was neither contemplated by public policies nor by the Department of Health regulations.

Our main focus was the analysis of Brazilian population data that indicated a rapid demographic and epidemiological transition.

Aging and its effects on people's lifestyle, especially the dependence in activities of daily living, required a new approach within health and social services. The increase in life expectancy and in chronic and degenerative diseases highlighted the need of new modalities of nursing care.

In this context, it is worth mentioning the consequences for families that traditionally took care of the sick at home, and that were dealing with more complex situations. Such circumstances shaped a new health care agenda that required establishing a broadened scope of practice for nurses.

The first studies carried out at NUPEPE have already shown the opportunities, benefits and challenges of home care.

Home care expands opportunities for elderly care and continuity of care for patients with chronic conditions. It reveals more autonomous, caring and humane practices.

The Health System has the opportunity to answer to new health care demands through quality home healthcare at lower costs. Furthermore the method reduces hospitalization costs and hospital-acquired infections, as well as frees up care beds.

Researches demonstrated the advantages of domiciliary care: the individual's permanence amidst familiar settings, reduced risk of infection, possibility of adapting the environment to patient's and family needs and conditions.

We have also learned about its challenges: professionals' and informal caregivers' continuing education, home adaptations and their additional costs to health system and families. Recent research demonstrated that home care has multiple facets and an almost non-existent cost accounting that, when applied, has not been able to account for all the dimensions of care costs: family, caregiver and public and private services.

It is important to highlight home care path from its early invisibility to official recognition through the National Home Care Strategy. Issued in 2011, it guided the creation of home care programs in several municipalities. Current researches reveal that its supply is on the rise; it is qualified and is also increasingly available for private patients.

Nursing in the home setting encompasses the management of cases and therapeutic plans, the care for and support to individuals and their families and to other professionals and carers. The nurse plays a prominent role in care management both in public and in private services.

The growing number of studies in the area allowed members of research groups to participate in political, scientific and technical discussions at national and regional levels.

I take this opportunity to emphasize that in order to share our experience and knowledge NUPEPE and its studies are available to all.

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