Nursing diagnoses associated of depression indices and capacity mental in elderly people in a geriatric ambulatory clinic of Brazil

Cris Renata Grou Volpe, Karolina Vicenzi Andrade, Yuri Gustavo de Sousa Barbaiho, Lucas Barbosa Aguiar, Walterlânia Silva Santos and Marina Morato Stival
University of Brasilia, Brazil

The present study aimed to identify the most prevalent nursing diagnoses in elderly patients in a geriatric outpatient clinic in the Federal District, Brazil, according to NANDA Taxonomy II relating them to the depression and mental scales. This is a descriptive, observational study of 40 elderly people over 65 years attended at the geriatric clinic. Data collection took place in March 2010 for 60 days. The scales of EDG and MEEM were used. The Pearson’s chi-square were used for associations and the significance level of p <0.05. The Geriatric Depression Scale (EDG) and the Mental State Mini Exam (MMSE) were used. This study was approved by the Ethics Committee of the Health Department of the Federal District. The most prevalent nursing diagnoses were: disturbed sensory perception; decreased cardiac output; Impaired dentition; Impaired memory; Risk of falls and insomnia. The indexes of depressive symptoms by EDG were 35% and the cognitive alterations by the MEEM were 60%. There is a significant association between social isolation, risk of loneliness, chronic sadness and hopelessness in relation to the depression indexes demonstrated by the scale. SDs significantly associated with cognitive impairment by MMSE were: poor knowledge and impaired memory. Older people tend to have cognitive deficits and depressive symptoms, especially older ones, and dependence on how much wings activities of daily living. The most prevalent related factor with impaired memory was excessive environmental changes and poor cognition was cognitive limitation.

A culture of change: Examining the relationships between Critical Care Nurses’ perceptions of a healthy work environment and intent to transfer following health system mergers

Georgia D Harrison
USA

Background and Significance: The June 2014 acquisition merger of an American Nurses Credentialing Center (ANCC) Magnet-accredited major urban academic institution, and an ANCC Magnet accredited suburban, community hospital in the Northeast United States, had a significant impact on the improved quality and availability of resources to the population it serves. The merger acquisition of the community hospital by the urban hospital created a one-hospital two-campus organization, with the urban hospital being the flagship hospital in the health system. In 2015, the nurses verbalized feeling even more dejected and devalued. It was observed where senior and mid-level unit nursing leadership dismissed staff nurses as they verbalized their concerns regarding inappropriate staffing levels, not having meaningful recognition, and not feeling valued.

Aims and Objectives: The aim of the project is to explore the factors that relate to critical care nurses’ perceptions of a healthy work environment (HWE), and intent to transfer after two health system mergers. The specific objectives of the project are to assess the American Association of Critical Care Nurses six standards of a HWE, and explore factors that may have an impact on critical care nurses’ intent to transfer.

Methodology: A descriptive correlational survey design used to explore factors related to critical care nurses’ perception of a HWE and intent to transfer following two hospital mergers.

Outcome Measures: The HWE instrument utilized will identify the six essential standards to ensure a HWE; appropriate staffing, skilled communication, authentic leadership, meaningful recognition, nurse satisfaction, and availability of resources. The Anticipated Transfer Scale instrument focus on potential job turnover and intent to transfer among nurses in an acute care setting.

Nursing Implications: The intent of the project is to create awareness about the negative, unhealthy behaviors that may impact nursing units going through mergers.