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1. ADULT HEALTH

CHARACTERIZATION OF PATIENTS UNDERGOING NONINVASIVE VENTILATION ADMITTED IN UNIT INTERMEDIATE CARE

Matilde Martins^a, Patrícia Ribas^b, Joana Sousa^c, Andreia Cunha^c, Norberto Silva^d, Teresa Correia^a

^aHealth School of Polytechnic Institute of Bragança, Sports Sciences, Health Sciences and Human Development, Portugal; ^bClinic of Arrifana, Portugal; ^cHealth School of Polytechnic Institute of Bragança, Portugal; ^dHealth School of Polytechnic Institute of Bragança, Unit of the Northeast Local Health Bragança, Portugal.

Contact details: matildemartins@ipb.pt

Introduction: Non-invasive ventilation (NIV) is the application of a ventilatory support without resorting to invasive methods. Today it's considered a credible therapeutic option, with enough scientific evidence to support its application in various situations and clinical settings related to the treatment of acute respiratory disease, as well as chronic respiratory disease.

Objectives: Characterize patients undergoing NIV admitted in Unit Intermediate Care (ICU) in the period from October 1st 2015 to June 30th 2016.

Methods: Prospective study conducted in ICU between October 2015 and June 2016. In this study were included all patients hospitalized in this unit (ICU) and in that time period a sample of 57 participants was obtained. As data collection instruments we used a questionnaire for sociodemographic and clinical data and the Braden scale.

Results: Participants were mostly male 38 (66.7%), the average age 69.5 ± 11.3 years, ranging between 43 and 92 years. They weighed on average 76.6 kg (52 and 150), with an average body mass index of 28.5 kg/m² (20 to 58.5). With skin intact 28 (49.1%) with abnormal perfusion 12 (21.1%), with altered sensitivity 11 (19.3%) and a high risk of ulcer on the scale of Braden 37 (65%). The admission diagnosis was respiratory failure 33 (57.3%) and had different backgrounds. We used reused mask 53 (93.0%), the average time of NIV was 7.1 days (1-28), 4.8 days of hospitalization (1-18) and an average of 7.8 IPAP pressure. 11 (19.3%) of the participants developed face ulcer pressure.

Conclusions: The NIV is used in patients with advanced age, obesity, respiratory failure and high risk of face ulcer development.

Keywords: Patients. Noninvasive ventilation.

TELEPHONE SUPPORT LINE OF RHEUMATOLOGY DEPARTMENT: A 4.5 YEARS EXPERIENCE

Eduardo Santos^a, Andréa Marques^b

^aAssociate Research at the Portugal Centre for Evidence-Based Practice (PCEBP): a Collaborating Centre of the Joanna Briggs Institute - Health Sciences Research Unit: Nursing (UICISA: E), Nursing School of Coimbra (ESENFC); ^bRheumatology department, Centro Hospitalar e Universitário de Coimbra, EPE.

Contact details: ejf.santos87@gmail.com

Introduction: In many health services in developed countries, the telephone support has been used as an innovative approach to providing care and answering questions by nurses, developing especially in specific areas such as rheumatology (Brown et al., 2006).

Objectives: To analyze the profile of users and the main reasons of patients that uses the Telephone Support Line of Day Hospital and early arthritis consultation of the CHUC Rheumatology Department, EPE.

Methods: This is a retrospective descriptive-correlational study with a convenience sample of 448 calls. For continuous variables we used the t-student test, for dichotomous variables the χ^2 test and, finally, we performed a cluster analysis by the TwoStep Cluster method through the log-likelihood distance.

Results: Users have an average age of 44.8 years being predominantly male (58%). The cluster analysis allowed to create three groups whose profile shows that the cluster 1 (n = 96/21.4%) are formed by "older" adults that need to clarify mainly doubts about the results of auxiliary examinations tests (AET)/prescriptions and side effects/complications; the cluster 2 (n = 232/51.8%) are formed by young adults that call to change appointments and mainly to clarify doubts on the results of AET/prescriptions; finally, the cluster 3 (n = 120/26.8%) are formed by "middle age" adults that want to clarify doubts about medication and disease management. **Conclusions:** Incoming calls cover a wide range of ages and all kinds of rheumatic diseases. This study allows us to identify in which groups it is necessary to make a more detailed educational

Objectives: To draw an educational intervention to promote MHL about anxiety of adolescents.

Methods: Conducting a focus group, for one hour, with 6 adolescents in 9th grade: 3 boys and 3 girls between 14 and 15 years, average age 14.3, who agreed to participate and whose parents provided informed consent. The focus group moderator was the investigator, a mental health nurse and there was a non-participant observer, a pediatric nurse. Audio recording was used. We used a vignette about an adolescent with anxiety and raised 12 questions about MHL on anxiety in adolescents and opinion on how to have more information.

Results: Adolescents in focus groups suggested conducting an educational intervention at school context about anxiety in adolescents using group dynamics, the issues and educational games. We draw an educational intervention with 4 sessions of 90 minutes, whose contents are in accordance with MHL concept. We used expository, interrogative, demonstrative and active methods and group dynamics, educational games and role-playing.

Conclusions: The focus group was very important because it allowed us to know the opinion of adolescents and follows a Delphi with experts. We hope this educational intervention will increase MHL about anxiety of adolescents at school context.

Keywords: Adolescents. Mental health. Health literacy. Intervention study. Focus group.

lapping to those observed in other countries. Our sample presents a higher perception of barriers and low rates of EBN practice and research use.

Conclusions: Nurses have a positive attitude related to EBN. Nevertheless there are several barriers that constrain an effective EBN practice in a regular bases.

Keywords: Evidence-based nursing. Assess. Practice patterns.

IMPLICATIONS OF TRAINING ON THE PRACTICE OF HEALTHCARE PROFESSIONALS DEALING WITH LESBIAN, GAY AND BISEXUAL PATIENT

Madalena Cunha, André Taveira, David Ribeiro, Gonçalo Esteves, José Soares, Tiago Carvalho

CI&DETS Health School/Politech Institute of Viseu, Portugal.

Contact details: madac@iol.pt

Introduction: Producing evidence on the skills and practices in dealing with lesbian, gay and bisexual (LGB) patients and determining factors thereof constitutes an influential tool in ensuring excellent healthcare for this segment of the population, guaranteeing the effectiveness of health systems.

Objectives: Identify the determining factors for the healthcare skills and practices performed by healthcare professionals dealing with lesbian, gay and bisexual patients.

Methods: Observational study in objective convenience sample of 119 healthcare professionals, with an average age of 37.90 years, residing in Portugal. Data collection was made using the Sexual Orientation Counselor Competency Scale Citation (SOCCS) (Bidell, 2005) and the Correlates of Homophobia and Gay Affirmative Practice in Rural Practitioners by Crisp (2002), Portuguese version by Pereira & Cunha (2014).

Results: 47.1% proved to be competent professionals, 26.9% scored as highly competent professionals and 26% showed lack of competence. The professionals with higher skills were also those who demonstrated the best practices in healthcare (66.7%). Affirmative skills were predictive of healthcare practice when dealing with LGB patients, accounting for 20.9% of its variability.

Conclusions: The inferences produced corroborate the existence of a significant statistical effect of affirmative skills in healthcare practice. Accordingly, the results show that the healthcare professionals with the worse affirmative skills have inadequate practices of healthcare when dealing with LGB patients, suggesting that the academic curricula of the healthcare professionals should include psychotherapy training oriented towards the support of LGB patients so as to make therapeutic interventions more effective and inclusive.

Keywords: Lesbian. Gay. Bisexual. Healthcare. Practice.

21. SAFETY AND QUALITY IN HEALTH

ATTITUDES, BARRIERS AND PRACTICES RELATED TO EVIDENCE-BASED NURSING: A DIAGNOSTIC ASSESSMENT IN THE PORTUGUESE CONTEXT

Rui Pereira^a, M. José Peixoto^b, Teresa Martins^b, M. Céu Barbieri-Figueiredo^b, António Vaz-Carneiro^c

^aUniversidade do Minho/Escola Superior de Enfermagem; ^bEscola Superior de Enfermagem do Porto; ^cUniversidade de Lisboa, Faculdade de Medicina, Centro de Estudos para a Medicina Baseada na Evidência.

Contact details: ruipereira@ese.uminho.pt

Introduction: The assessment of barriers, attitudes and practices related with Evidence-Based Nursing (EBN) it's fundamental to promote in the nursing staff the use of research in clinical practice. Our study objective was to assess attitudes, barriers and practices related to EBN in a group of nursing leaders and local key partners in the northern Portugal.

Methods: We used the Portuguese version of the following instruments - "Questionnaire Barriers and Facilitators to Using Research in Practice (BARRIERS)"; "Clinical Effectiveness and Evidence Based Practice Questionnaire (EBPQ)"; and the "Attitudes to Evidence-Based Practice Questionnaire (AEBPQ)". A convenience sample was used. 388 RN participated in the study. These nurses work in hospitals or primary care units. All the participants agree to collaborate voluntarily and was assured data confidentiality and the subjects' anonymity.

Results: All nurses had at least a licensure degree corresponding to a 4 year's full time undergraduate academic program in nursing. The majority were women between 31 to 35 years old with a post-graduated specialization in nursing. Strong ($r \geq 0.7$ $p < 0.01$) and moderate ($r \geq 0.5$ $p < 0.01$) Pearson correlations were observed between the following scales and subscales: BARRIERS - Nurses, Research, Organization and Study and between EBPQ Attitudes, Practices, Skills/Competences. Overall, the estimated self-perception rate of daily EBN practice was off 63.86%. Results are partially over-

CARE QUALITY TO DEPENDENT PATIENTS OF A HEALTH CARE CENTER - CONTINUOUS QUALITY IMPROVEMENT CYCLE

Joana Silva, Patrícia Sousa, Sofia Fraga, Tânia Costa

Unidade de Saúde Familiar Alves Martins.

Contact details: joanasilva11@hotmail.com

Introduction: Home care provided by doctors and nurses represent an organized response to the need to treat, care for and support dependent people, while on their midst, trying to provide them the best possible quality of life.

Objectives: Evaluate and ensure quality of care to registered and monitored dependent patients of a Health Care Center (HCC).

Methods: Studied dimension: technical and scientific quality. Study Unit: registered and monitored dependent patients of a HCC in 2015. Type and source of data: clinical process. Evaluation: internal