The Challenges Involved in Home Family Visits by Nursing Students.

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The Country “Oman”
Facts from ministry of health regarding home visit in Oman
National challenges
The future
Major challenges facing the faculty members in conducting home visit
Students’ feedback
conclusion
OMAN

- Is located in Southwest Asia, on the southeast coast of the Arabian Peninsula.
- The Sultanate is divided into eleven governorates.
- As of 2013, Oman's total population is 3.8 million; 2.15 million Omani nationals and 1.68 million expatriates.

  Life expectancies: female - 76 years, male - 72 years.

- Omani people are, consisting of Arabs, Balochis, Swahilis, Lurs, Hindus, and Mehri.
- At least 12 different languages are native. Arabic is the official language of Oman. Balochi, Kumzari, Bathari, Harsusi, Hobyot, Jibbali, Mehri.

- Oman's official religion is Ibadi Islam.
- During the last three decades, the Oman health care system has demonstrated and reported great achievements in health care services and preventive and curative medicine.
Responding to the expansion of nursing services provided in the home and the need to formalize this specialty practice.

Looking forward to 2020, home health nurses will be caring for a more diverse patient population with:

- Increase number of families in need of health promotion services.
- Increase number of infants, children and adults surviving with deficits from severe illnesses and/or injuries who will require palliative and hospice nursing services.
- Increase in number of older adults with multiple chronic illnesses.
1970 CHN started with few nurses in HC
Community health Program open to all disease entities & 10 nurses trained (2004)
Expansion of the program Wilayats of Muscat (2007)
Educational framework for the CHN program by MOH (July 2007)
Expansion of the program Other regions (2009)
Discharge planning (2009)
Bachelors Program in CHN by MOH (2010)
NATIONAL CHALLENGES
Recognition of the program at National Level

- Program integrated within the existing PHC structure
- Increasing incidence of chronic diseases in Oman
- Integration of the elderly and community health nursing program
- Flexible interchangeable work force
- Budget allotted
- Establish OJT and BSN program
- Reviving of the Professional Core Group for CHN
❑ Demographic trends
❑ Demands for nurses with advanced skills
❑ Public perceptions
❑ Public Acceptance
In educational settings

students

faculty
Major concerns are:

- knocking the door of a stranger.
- gender.
- language difficulties.
2. THE WIDE RANGE OF ACTIVITIES AND ROLES ENTAILED IN HOME VISITS

It is in the nature of delivering health care in community settings that student nurse concerned have to perform a variety of roles.
The current compliment of CHNs consists of **ONE CHN from each Health Centre.**

The populations served by Health Centers may range from a few thousand people to up to **10,000.**

The actual ranges of nursing services that may be offered in the community are very limited,

Therefore, students are most unlikely to observe a role model CHNs and home visit in action. They have to depend on learning ONLY from the CH faculty members.
4. MULTIDISCIPLINARY AGENCIES TO BE INVOLVE IN HOME VISITS

- Communication
- Cooperation
- Involvement

Important to participate in conducting home visit weather with the community health nurse and/or with the students

However, the students and the faculty could help and guide the family many social financial or health needs examples
5. THE DIFFERENT CASES THAT STUDENTS HAVE TO DEAL WITH DURING HOME VISITS

Elderly
Prenatal, postnatal
Chronic diseases CVD, Diabetic, Asthma
Congenital blood disorder sickle cell.
Thalassemia, G6pd (Consanguinity)
socioeconomic
5. FAMILY RECRUITMENT AND ENGAGEMENT

- Seeking and **finding suitable families** who are willing to be visited at home. The dearth of CHNs to liaise with makes this more difficult.

- **The geographical location** and distance between the families to be visited, since the students have to be transported from one house to another.

- Faculty have to struggle in the process of finding suitable and willing families but who are not located too far apart because of the limited **transport** and time students have available.

- Sustaining the interest and commitment during and between visits is not easy and some **change their mind** leaving faculty having to make alternative arrangements at a very short notice.
Community Health Nursing course commences during the latter part of the program, and despite the fact that there are certain pre requisites that students have to achieve before commencing this course.

Reading between the lines makes it difficult at times for our students to attain a comprehensive understanding and full appreciation of the patient and his/her family.

The faculty of the course could overcome such challenges by including variety of simulation sessions that demonstrating nurses role in these situations.
their learning objectives may not exactly the same as those of the clients they engage with. How can we align our students’ aims and learning outcomes with the health care needs, goals, hopes and aspirations of the families they serve?
8. OTHER CHALLENGES

- **financial constraints.** Our students feel obliged, in keeping with local social and cultural norms, to offer a present to the families they visit, especially if children are involved, and as they terminate their interaction and visits to them. Nearly all students are always short of funds and the college’s budget does not cater for this purpose.

- The type of families visited and their **social context constitutes** another challenge since this tends to affect the quality of relationship formed with the family, ongoing rapport and the effectiveness of our student engagement with them.

- Families living in **certain localities may be more inclined to fully engage** with home visits than others. Our experience suggests this and shows that, naturally enough, there is a positive correlation between families that engage well with home visits and the benefits they derive from them.
As a trial to figure out the challenges might facing the nursing student during home visit course program, at the end of their home visit rotation, 45 students were asked to list down the most concerned first three challenges faced by them during their home visits.
32 students stated that “TIME” in general was the most listed down challenge. The course was designed to conduct home visit early in morning, this time was inappropriate, as mentioned by these students, the time when most of family members either at work or at schools.
38 students mentioned challenges that can be classified under the “socio-cultural”. Omani families are not used to have such visits by health care staffs, some families refuse the visit, some of them weren’t welcoming, some refuse to continue the home visit program, which is designed for three weeks long period by interval once visit a week.
25 students difficulties in arrangement and scheduling home visits with the families. Many families are not committed
communication with deferent families and kind information and services needed by assigned families were also mentioned. 23 students
15 conducting health education sessions for the families

12 difficulty in building a trustful and confident relationship with families “time”

5 Transportation

3 Finding suitable cases.
In conclusion, both faculty and students appreciate the importance of learning about community health nursing and the critical role of home visits in this process.

Yet this learning experience has to be delivered in the virtual absence or actual Community Health Nurses (home visitors), and therefore a role model from which students may learn.
• Finding effective means to overcome, or adapt to these challenges is our major concern. Suffice to say on this occasion that faculty have instituted certain measures to alleviate the effect of some of these challenges, with the support of the college, health centers and the faculty who are accompanying and working with students during home visits.
IMPOSSIBLE

Only means that we haven’t found the solution yet.
Home care
Try it!
You’ll like it!

THANK YOU