

Preparation of a discharge plan as a humanized practice in nursing

Elaboración de un plan de alta como práctica humanizada en enfermería

Elaboração de plano de alta como prática humanizada na enfermagem

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How to cite this article:

Moreira LS, Chamarelli MS, Soares TCS, Gerstenberger Junior OG, Oliveira ES, Ribeiro AS, Marta CB. Preparation of a discharge plan as a humanized practice in nursing. Glob Acad Nurs. 2024;5(1):e421. <https://dx.doi.org/10.5935/2675-5602.20200421>

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Submission: 04-10-2024

Approval: 06-14-2024

Abstract

The aim was to report the experience of monitoring the patient's discharge, focusing on health education and technical guidance according to individual needs, in a humanized way, using visual forms to better adhere to self-care and providing care to the patient at home. by companions and family members. This is an experience report carried out in a public hospital in the city of Rio de Janeiro, where the difficulty of an elderly patient regarding medications and post-discharge management was identified. A visual discharge plan was used, with graphic markings and playful colors to facilitate understanding. The results indicated that the use of visual forms and a humanized approach facilitated adherence to self-care, highlighting the importance of discharge planning that considers the individual needs of patients. It was concluded that the implementation of a humanized discharge plan can improve the quality of care and promote a safer transition for patients from hospital to home.

Descriptors: Nursing Care; Patient Discharge; Family Support; Health Education; Humanization of Assistance.

Resumén

El objetivo fue relatar la experiencia de acompañamiento del alta del paciente, enfocando la educación en salud y orientación técnica según las necesidades individuales, de forma humanizada, utilizando formas visuales para una mejor adherencia al autocuidado y brindando atención al paciente en su domicilio. compañeros y familiares. Se trata de un relato de experiencia realizado en un hospital público de la ciudad de Río de Janeiro, donde se identificó la dificultad de un paciente anciano en cuanto a la medicación y el manejo post alta. Se utilizó un plano de descarga visual, con marcas gráficas y colores lúdicos para facilitar la comprensión. Los resultados indicaron que el uso de formas visuales y un abordaje humanizado facilitaron la adherencia al autocuidado, destacando la importancia de una planificación del alta que considere las necesidades individuales de los pacientes. Se concluyó que la implementación de un plan de alta humanizado puede mejorar la calidad de la atención y promover una transición más segura de los pacientes del hospital al hogar.

Descriptoros: Atención de Enfermería; Alta del Paciente; Apoyo Familiar; Educación para la Salud; Humanización de la Asistencia.

Resumo

Objetivou-se relatar a vivência no acompanhamento da alta do paciente, com foco na educação em saúde e orientação técnica de acordo com as necessidades individuais, de forma humanizada, utilizando formas visuais para melhor aderência ao autocuidado e prestação de cuidados com o paciente em casa pelos acompanhantes e familiares. Trata-se de um relato de experiência realizado em um hospital público no Município do Rio de Janeiro, onde foi identificada a dificuldade de um paciente idoso quanto às medicações e condutas pós-alta. Utilizou-se um plano de alta visual, com marcações gráficas e cores lúdicas para facilitar a compreensão. Os resultados indicaram que a utilização de formas visuais e uma abordagem humanizada facilitaram a adesão ao autocuidado, destacando a importância de um planejamento de alta que considere as necessidades individuais dos pacientes. Concluiu-se que a implementação de um plano de alta humanizado pode melhorar a qualidade do cuidado e promover uma transição mais segura do paciente do hospital para casa.

Descritores: Cuidados de Enfermagem; Alta do Paciente; Apoio Familiar; Educação em Saúde; Humanização da Assistência.



Introduction

Hospital discharge is a critical and determining moment in the patient's recovery process, representing the transition from intensive care in the hospital environment to shared responsibility between the patient and their caregivers at home. This process requires a comprehensive assessment of the patient's clinical conditions, as well as clear and effective communication with family members and caregivers involved in their post-treatment. Studies indicate that ineffective communication and gaps in post-discharge guidance are associated with increased readmission rates and post-hospital complications^{1,2}.

For hospital discharge to be safe and effective, the nursing team must provide understandable and detailed information about the reason for discharge, post-discharge instructions, prescribed medications, recommended diets, and necessary home care. Furthermore, guidance on the importance of self-care and the need for follow-up exams and follow-up appointments are essential to ensure continuity of care^{2,3}.

The concept of humanization in healthcare, particularly in nursing, seeks to promote patient-centered care respecting their individual needs, and providing an empathetic and welcoming care environment. The humanization of care is especially relevant at the time of hospital discharge, where personalizing guidance can make a significant difference in adherence to treatment and patient recovery. A well-structured and humanized discharge plan is a crucial component of the nursing process, facilitating the patient's transition and promoting their well-being after hospital discharge^{3,4}.

During a hospital visit at a hospital in the city of Rio de Janeiro, we observed the difficulty of an elderly patient in understanding the medications and post-discharge procedures prescribed. This case highlighted the need to adapt communication and guidance to meet the patient's limitations. To facilitate understanding, graphic markings, and playful colors were used to correctly identify times and medications, in addition to a detailed verbal explanation about their clinical condition and prescribed therapies. This visual method helped improve treatment adherence, demonstrating the effectiveness of personalized and humanized approaches.

Furthermore, the literature points out that health education is an essential component in promoting self-care and preventing post-discharge complications. The use of visual educational resources is effective in improving patients' understanding of their conditions and the care needed, especially among populations with low literacy levels or learning difficulties²⁻⁴.

Given the above, the present study aims to report the experience of monitoring the patient's discharge, focusing on health education and technical guidance according to individual needs. The humanized approach was enhanced using visual forms to improve adherence to self-care and facilitate the provision of care by companions and family members. This experience report aims to contribute to reflection on humanized hospital discharge practices and

Methodology

This is an experience report of a qualitative and descriptive nature. The study was carried out in a public hospital in the city of Rio de Janeiro during a hospital visit in December 2023. The target population consisted of patients who were in the process of being discharged from the hospital, with the focus being a 78-year-old patient admitted to the sector of Pulmonology.

The methodological approach involved direct observation and interaction with the patient and their family members, in addition to collaboration with the medical team and the guiding teacher responsible for the technical visit. The construction of the discharge plan considered the patient's social, emotional, and personal limitations, using visual resources such as graphic markings and playful colors to facilitate understanding of post-discharge instructions.

The theoretical framework for discussing the results was based on concepts of humanization in nursing care, highlighting the importance of effective and personalized communication to promote adherence to treatment and self-care after hospital discharge.

Experience Report

Bearing in mind that it is regularly the role of the nurse, in conjunction with the interdisciplinary team, to ensure an effective discharge plan that addresses the physical, social and emotional needs of an individual, it is notable to encounter some difficulties in achieving this objective⁵. The practice of preparing a discharge plan involves not only technical knowledge about the patient's clinical conditions but also the communication and empathy skills to understand their specific limitations and needs.

When a 78-year-old patient was discharged from the Pulmonology department of a public hospital in the city of Rio de Janeiro, significant difficulties were identified related to understanding medications and post-discharge procedures. This patient, when approached about possible doubts, revealed that he did not know how to read or write, which made it difficult to interpret the medical instructions, which were abbreviated in the medical order. Furthermore, he expressed ignorance about his clinical condition, demonstrating a failure in communication throughout his hospitalization.

Recognizing the seriousness of this situation, the nursing team took the initiative to seek clarification from the medical team about the correct use of therapies and their respective doses. This clarification process involved a detailed review of medical prescriptions, intending to transform this technical information into more accessible and understandable guidance for the patient. In line with the guiding teacher responsible for the technical visit, it was suggested that a discharge plan be drawn up that considered not only the patient's literacy limitations, but also their social, emotional and personal needs.

It was established that, to outline an effective and concrete discharge plan, it was necessary to go beyond



simply explaining medication schedules and post-hospitalization care. The discharge plan should also include guidance on routine habits, signs and symptoms to be monitored if necessary, and, above all, the construction of a mutual relationship of trust with the patient. This bond is essential to mitigate the chance of readmission, ensuring that the patient feels safe and confident in following the instructions received.

The prepared plan was meticulously divided into colors and structured individually for the patient. The visual teaching allowed him to understand the periods of the day in "blocks" before or after meals. Each medication was associated with a specific color and indicated times, facilitating memorization and correct administration of medications. In addition, illustrations were included that showed, simply and directly, the procedures he should follow, such as taking medications, performing breathing exercises, and observing warning signs for possible complications.

Then, a detailed explanation was given to both the patient and the companion who was present. This educational session involved a clear justification for the use of each medication, highlighting the importance of each one for the positive evolution of the patient's clinical condition. The nursing team emphasized the relevance of home monitoring, explaining how family members and caregivers could effectively contribute to the planning and execution of daily care.

During this explanation, simple and direct language was used, avoiding technical terms that could confuse. The use of analogies and practical examples helped make the guidance more tangible and understandable. The active participation of the companion was encouraged, promoting an environment of collaboration and mutual support. The team also made sure that both the patient and companion fully understood the instructions, offering to answer any remaining questions and providing contact details for additional support if needed.

This humanized and personalized approach not only facilitated the understanding of post-discharge instructions, but also promoted the patient's trust in the nursing team, strengthening the therapeutic bond. This case exemplifies how the adoption of health education practices adapted to the individual needs of patients can significantly contribute to the effectiveness of post-discharge care and the overall improvement of the patient's quality of life^{3,5}.

Discussion

The findings of this experience highlight the critical importance of humanization in the hospital discharge process, especially for patients with educational or cognitive limitations. It was observed that the use of visual resources, such as graphic markings and playful colors, significantly facilitated the understanding of post-discharge guidelines, promoting more effective adherence to treatment and self-care. This finding is in line with existing literature, which emphasizes that health education when adapted to the specific needs of patients, can substantially improve treatment outcomes⁴⁻⁶.

The humanization of nursing care, defined by the personalization of interactions and the consideration of patients' individual needs, proved to be essential for the success of the discharge plan. Previous studies indicate that effective communication and building a trusting relationship between the patient and the healthcare team are fundamental to ensuring continuity of care and reducing readmission rates. The reported experience confirms that an empathetic and patient-centered approach, combined with visual educational strategies, can overcome significant barriers to understanding and adherence^{3,5,6}.

Furthermore, the inclusion of family members and caregivers in the discharge process is vital. By directly involving caregivers in education about necessary medications and care, a support network is created that can help ensure instructions are followed correctly at home. The literature highlights that family support is a crucial component in a patient's recovery, especially for those with low literacy or cognitive limitations.

The practical implications for nursing are clear. Firstly, nursing professionals must be trained to identify and address patients' individual needs during the discharge process. This includes the use of visual tools and adapted communication methods, as well as the ability to simplify complex information without losing technical precision. The adoption of humanized practices must be incorporated as a standard of care in hospital discharge protocols^{3,6}.

It is recommended to invest in the ongoing training of nursing professionals on effective communication techniques and health education strategies adapted to the diverse needs of patients. It is essential to create and make available visual educational materials, such as colorful booklets and infographics, that can be used during hospital discharge to facilitate patient understanding. Systematic inclusion of family members and caregivers in the post-discharge education process, ensuring they fully understand instructions and are prepared to support the patient at home, is also crucial. In addition, monitoring and evaluation systems should be implemented to check patients' adherence to post-discharge guidelines and identify any difficulties early, offering additional support as needed. Finally, it is important to promote ongoing research to evaluate the effectiveness of humanized practices in the discharge process and continually seek new strategies to improve treatment adherence^{5,6}.

It is emphasized that the humanization of the discharge process, through personalized approaches and the use of visual resources, not only facilitates the understanding of post-discharge instructions but also strengthens the trust of the patient and family members in the healthcare team, promoting a safer and more effective transition to home care. This study reinforces the need to incorporate these practices as standard in nursing care, always aiming to continuously improve the quality of care provided to patients.

Final Considerations

Adapting the discharge plan to facilitate patient understanding, using illustrations, colors and other playful



strategies, proved to be an effective intervention to ensure that patients correctly follow post-discharge instructions, including medications and self-care. The experience reported during the hospital visit highlighted the importance of personalizing the discharge plan as an essential educational strategy. The use of visual resources facilitated the correct identification of schedules and medications, providing a more accessible approach that helped the patient to correctly follow care at home, minimizing doubts and insecurities about routine behaviors.

This approach showed that the implementation of humanized discharge planning adapted by the nursing professional can significantly improve the quality of care. It promotes a more empathetic and patient-centered approach, essential for effective nursing care. However, the application of this strategy still faces challenges in its incorporation in a standardized way in all hospital services, due to the variability in nurses' commitment and training.

Limitations of this study include the sample being limited to a single public hospital, which may not represent

the diversity of hospital contexts and practices in other regions. Furthermore, the evaluation of the effectiveness of the interventions was based on observations and qualitative reports, which suggests the need for more comprehensive quantitative studies to validate the findings. Another limitation was the lack of longitudinal monitoring to verify adherence to the discharge plan and the long-term health outcomes of patients.

For an effective strategy, nurses must understand the discharge plan as an opportunity for leadership in the process of direct patient care, actively promoting the individual's health and autonomy. Investing in the ongoing training of nursing professionals on effective communication techniques and the creation of visual educational materials can increase the positive impact of these interventions. Furthermore, the systematic inclusion of family members and caregivers in the post-discharge education process is essential to create a solid support network, ensuring that instructions are followed correctly at home.

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