

Bölüm 4

BİREYSELLEŞTİRİLMİŞ HEMŞİRELİK BAKIMININ ÇIKTISI: HASTA MEMNUNİYETİ

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GİRİŞ

Bilimsel, teknolojik, kültürel ve ekonomik gelişmeler zaman içinde toplumların değişmesine yol açtığı gibi bireysel ve mesleki değerleri de etkileyerek standartlaşmış bakım protokollerinin uygulanmasına zemin hazırlamıştır ⁽¹⁾. Günümüzde ortak hedefler içeren ve bir temele dayanan bakım protokolleri yaygın olarak uygulanmaktadır. Hedefe yönelik olan bu bakım protokollerinde hastaların her birinin farklı bir birey olduğu ve bireyselleştirilmiş hemşirelik bakımına ihtiyaç duydukları göz ardı edilmiştir. Oysaki, hemşirelik bakım modellerinin çoğunda hastanın bireyselliği özellikle vurgulanmaktadır. Teori ve uygulamadaki bu ayrılık bakım kalitesini olumsuz yönde etkilemektedir ⁽²⁾.

Sağlık bakımı hizmetlerinden yararlanmada yaşanan artış, sağlık kurumlarında etkili, ekonomik ve hasta merkezli bakımın geliştirilmesine yönelik inovasyon uygulamalarını beraberinde getirmiştir ⁽³⁾. Sağlık sistemlerinin bireysel ihtiyaç ve tercihlere nasıl daha iyi yanıt verebileceğini bulma dürtüsünün bir parçası haline gelen bireyselleştirilmiş bakım ise, son yıllarda en temel sağlık politikası olmuştur ^(4,5). Bu bağlamda birçok Avrupa ülkesi, sağlık bakım hizmeti sonuçlarını iyileştirmek ve maliyeti düşürmek amacıyla, Berwick tarafından önerilen hasta deneyimini ve toplum sağlığını iyileştirme, kişi başına düşen bakım maliyetini düşürme amacına dayanan biz dizi önlemi benimsemiştir ⁽⁶⁾. Bu ülkelerde, hasta deneyiminin iyileştirilmesini sağlamak üzere bakımın bireyselleştirilmesi ve sağlık bakım kalitesinin artması benimsenen bir yaklaşım olmuştur ^(5,7,8). Hemşirelerin doğrudan hasta bakımını sağlayan meslek grubu olduğu göz önünde bulundurulduğunda, bu yaklaşımda önemli role sahip olduğuna dikkat çekilmiştir ⁽⁹⁾. Hemşirelerin hastanın inançlarını, değerlerini, ihtiyaçlarını ve tercihlerini dikkate alarak ba-

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