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Preview Notes



Validation of the nursing outcome *Mobility* in the elderly with Chikungunya: a methodological study

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ABSTRACT

Aim: Validate nursing outcome Mobility presented by Nursing Outcomes Classification (NOC) in elderly patients with Chikungunya. **Method:** This is a methodological study to be carried out in a reference center for the elderly located in the state of Rio Grande do Norte, in three stages: adaptation of instrument by integrative review of the literature; semantic validation; and clinical validation of the instrument following the recommendations of the Psychometrics. For the descriptive analysis the measures of the distribution center and variabilities will be calculated. The Friedman test will be applied to verify divergence between evaluators, the intraclass correlation coefficient to compare the similarity between the nurses' evaluations and the Cronbach's alpha coefficient to verify the internal consistency of the dual evaluators. **Expected results:** Provide an instrument adapted, validated and directed to elderly patients with impaired mobility as a result of Chikungunya.

Descriptors: Validation Studies; Nursing Assessment; Aged; Nursing.

SITUATION PROBLEM AND ITS MEANING

Nursing Outcome Classification (NOC) is defined as a state, behavior or perception of an individual measured over a period of time in response to one or more nursing interventions. In this scenario, NOC Mobility is understood as the ability of the individual to move independently by the environment, with or without the aid of a support device⁽¹⁾.

Directing nursing actions to elderly patients with Chikungunya and joint impairment is relevant because it is believed that one of the main clinical repercussions caused by the disease is the limitation of mobility and the consequent decrease in the quality of life of the elderly and the inability to perform some daily life activities, especially in the morning⁽²⁾.

In this context, the nurse integrating the health team must pay attention to the clinical management of the elderly person affected by Chikungunya, which, therefore, requires the professional to provide a systematized care through the adoption of a uniform method and language that allows evaluation, planning and the execution of the nursing care to this individual in an accurate and assertive way.

GUIDING QUESTIONS

Are the constitutive and operational definitions and operational magnitudes to evaluate the *Mobility*, present in the NOC, and the others identified in the literature valid in elderly patients with Chikungunya?

AIMS

General

- Validate nursing outcome *Mobility* presented by Nursing Outcomes Classification in elderly patients with Chikungunya.
- *Specifics*
- Review and adapt the validated instrument, in a previous study, for the elderly population with Chikungunya.
- Semantically validate the nursing result *Mobility* in elderly patients with Chikungunya.
- Verify the clinical validity of the constitutive, operational definitions and operational magnitudes of the nursing result *Mobility* in elderly patients with Chikungunya.

METHOD

This is a methodological study to be developed in three stages. The first step will be an integrative review of the literature for adaptation of an instrument validated, in a previous study, to the elderly population with Chikungunya. After the adaptation, the semantic validation stage will be started, aimed at verifying the intelligibility and adequacy of the items of the instrument, by nursing assistants, target population that will use the instrument in question.

The third step will be clinical validation, operationalized by a cross-sectional study to see if there is a more uniform assessment with the use of the instrument. The sample will be established according to the reference on Psychometry, proposed by Pasquali⁽³⁾, which establishes the quantitative of five to 10 individuals for each item of the instrument. Thus, the sample will consist of 90 elderly people with Chikungunya.

Patients should meet the following criteria: being 60 years of age or older, having been notified with Chikungunya; getting a score of 15 on the Glasgow Coma Scale and present an Impaired Physical Mobility Nursing Diagnosis. Exclusion criteria: patients presenting with emergency situations or risk of death during the data collection procedure.

Data collection will be performed at the end of the first half of 2017 with an adapted instrument, composed of socio-demographic data and indicators of NOC *Mobility* in the elderly with Chikungunya. These last two stages will take place in a Center for specialized care in the elderly, located in the state of Rio Grande do Norte.

After the data collection, the data will be organized in a database and will be tabulated in the statistical program *Statistical Package for the Social Sciences* (SPSS), test version 22.0 for descriptive analysis using frequencies, measures of the distribution center and its variabilities.

To verify divergence between the evaluators, the Friedman test will be used, and when there is a statistically significant difference, a post-hoc analysis will be carried out using the least significant difference method (LSD). After calculating the LSD value, the values between the average differences of the positions of each evaluator in each group, with and without constitutive and operational definitions, are calculated. A statistically significant difference will be considered among the evaluators when the mean value between the stations is higher than the LSD.

In order to compare the correlation of the evaluations made by the pairs of evaluators the intraclass correlation coefficient will be used, and to verify the internal consistency of the as-

sessments of the doubles, the Cronbach Alpha coefficient will be used.

This study obtained a favorable opinion from the Research Ethics Committee of the Federal University of Rio Grande do Norte (UFRN) under Certificate of Presentation for Ethical Appreciation No. 64880017.9.0000.5537, according to Resolution 466/12 of the National Health Council.

EXPECTED RESULTS

It is intended to provide an instrument adapted, validated and directed to elderly patients with impaired mobility affected by Chikungunya. This instrument will be able to provide an accurate assessment of the care needs of each individual and, consequently, the improvement of the quality of nursing care. Moreover, it seeks to elicit discussions of public health policies directed to the elderly, which has as one of the main consequences of Chikungunya the long-term joint commitment.

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