







REVIEW ARTICLE

Interpersonal relations of multiprofessional teams in home care: integrative review

Relações interpessoais de equipes multiprofissionais na atenção domiciliar: revisão integrativa

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ABSTRACT

Objective: To analyze the scientific production on the interpersonal relations of multiprofessional teams in home care (HC). **Method:** Integrative review in databases of Latin American and Caribbean Health Sciences Literature; Medical Literature Analysis and Retrieval System via PubMed, Cumulative Index to Nursing and Allied Health Literature; Web of Science and Scopus without delimiting period. **Results:** Of the total of 1,203 articles, 11 were selected, three were not available and eight were read in full. Of these, three did not answer the research question, and five constituted the sample. Of the studies analyzed, four were qualitative and one was quantitative. The investigations included were conducted predominantly by teams that work in services that treat patients in households. **Conclusion:** The evidence showed that interpersonal relationships and effective communication among HC teams are essential for qualified care, but intervention research is needed to stimulate teams in relational skills.

Descriptors: Home Nursing; Patient Care Team; Interpersonal Relations; Nursing.

RESUMO

Objetivo: Analisar a produção científica sobre as relações interpessoais de equipes multiprofissionais na atenção domiciliar. **Método:** Revisão integrativa em bases de dados da Literatura Latino-Americana e do Caribe em Ciências da Saúde; Medical Literature Analysis and Retrieval System via PubMed, Cumulative Index to Nursing and Allied Health Literature; Web of Science e Scopus sem delimitar período. **Resultados:** Do total de 1.203 artigos, 11 foram selecionados, estando três não disponíveis e oito lidos na íntegra. Desses, três não responderam à pergunta de pesquisa, e cinco constituíram a amostra. Dos estudos analisados, quatro foram qualitativos e um quantitativo. As investigações incluídas foram conduzidas predominantemente por equipes que atuam em serviços que atendem pacientes domiciliados. **Conclusão:** As evidências mostraram que relações interpessoais e comunicação eficaz entre equipes que atuam em serviços de assistência domiciliar são imprescindíveis para o cuidado qualificado, porém fazem-se necessárias pesquisas de intervenção que estimulem as equipes nas habilidades relacionais.

Descritores: Assistência Domiciliar; Equipe de Assistência ao Paciente; Relações Interpessoais; Enfermagem.

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How to cite this article: Bianconi ALM, Sanchis DZ, Aron P, Barreto MFC, Rossaneis MA, Haddad MCFL. Interpersonal relations of multiprofessional teams in home care: integrative review. Rev. Eletr. Enferm. [Internet]. 2020 [cited on: _____];22:59594. Available at: <https://doi.org/10.5216/ree.v22.59594>.

Received on: 07/21/2019. Accepted: 07/23/2020. Available on: 10/10/2020.

INTRODUCTION

Home care (HC) consists of a modality of health care, suitable for the implementation of new forms of care production and interdisciplinary action, in expansion in Brazil and in the world^(1,2). It is included in the Health Care Network (HCN) of the Brazilian Unified Health System (SUS), assuming the principles and guidelines of this system, provided for by law, highlighting universality, equity, completeness, resolution and expanded access, associated to reception and humanization, to be observed in the organization of Home Care Services (HCS)⁽³⁾.

This model of care is related to several other areas and policies at the municipal and state levels, such as the Elderly People Accompanying Program (PAI), Person Accompanying with Disability (APD), in addition to several Home Care Services for life cycles (neonatal, infant, elderly) or for health problems such as AIDS, leprosy sequelae, among others⁽⁴⁾. Therefore, a team that works on developing activities with patients in an integral way, associated to treatment with dignity, respect and quality, comprising the human being as biopsychosocial and spiritual⁽⁵⁾ is indispensable.

The work process in this context is a multi-professional task that consists in the action of caring, and therefore requires technical and ethical competence. Thus, there is a need for professionals with adequate profiles in the AD, in order to achieve positive results such as adequate communication and collaboration among patients, relatives, caregivers, health professionals and other workers, in order to incorporate specific information in the global planning and implementation of care⁽⁶⁾.

Multiprofessional teams are considered indispensable components for the achievement of the objectives of AD and the purpose of the work processes, and they should use interpersonal relationships as an imperative tool⁽⁷⁾. Thus, it is necessary the constant search for improvement in the relationship between teams and skills to deal with social situations, and its insufficiency or absence may lead to barriers for the establishment of health care.

Interpersonal relationships are considered a work tool and their lack or limitation may directly affect care. For this it is necessary to develop social skills such as communication, empathy, social civility, resilience, among others. Since when entering the home of these patients, it is required that health professionals have an ethical and individual posture, good interpersonal relationship, and consequently can reflect on the care of the patient, on issues such as respect for beliefs and values, with the home being the precious place of the patient, space where the family is, an important group in people's lives. When observing this context, the teams that assist these users must perceive both the health status and the life relationships of those involved and consider that these factors relate and interfere in the process as a whole⁽⁸⁾.

In the face of the presentations and considering the deficiency of interpersonal relationships, as well as limitations of social skills among multiprofessional teams can generate conflicting relationships, thus preventing professionals from performing a collective action, and achieving a common goal, which directly affects patient care. Therefore, it is necessary to compile the knowledge about interpersonal relationships of teams working in HC services, which is why this integrative review was developed in order to generate scientific evidence that allows the implementation or implementation of interventions in practice, as well as to trigger reflections on the subject. Thus, this study aimed at analyzing the scientific production on interpersonal relations of multiprofessional teams in home health care.

METHODS

This is an integrative literature review consisting of six stages: elaboration of the guiding issue; definition of the databases and establishment of criteria for inclusion and exclusion of studies/sampling or literature search; definition of the information to be extracted from the selected studies; evaluation of the studies included in the integrative review; interpretation of the results and, finally, presentation of the knowledge review/synthesis⁽⁹⁾.

To guide this integrative review, the following question was formulated: What is the scientific evidence on the interpersonal relationships of multi-professional teams in HC? To construct this ask we used the PICO strategy (acronym for *patient, intervention, comparison, outcomes*), where (P) represents patient care teams; (I) represents HC, (O) represents interpersonal relationships. As the present study is an integrative review, the third element (C), i.e., the comparison, was not used⁽¹⁰⁾.

The search for the articles was made by consulting the Latin American and Caribbean Literature in Health Sciences (LILACS), Medical Literature Analysis and Retrieval System (MEDLINE) (via PubMed), Cumulative Index to Nursing and Allied Health Literature (CINAHL), Web of Science (WOS) and Scopus databases. To perform the search in LILACS, the descriptors in Health Science (DeCS) of the Virtual Health Library (VHL) were used as search strategy: Home Care, Patient Care Team and Interpersonal Relations. The terms were also used: Interdisciplinary health team, Home Care, Home Health Care and Interpersonal Relations combined through the Boolean operators AND and OR.

In order to carry out the search for primary articles in the CINAHL database, the strategy used contemplated the use of descriptors and keywords, CINAHL headings, being them (Interpersonal Relations) AND (Multidisciplinary Care Team OR Health Care Teamwork OR Health Care Team) AND (Home Health Care OR Home Nursing Service OR Home Healthcare).

In order to carry out the search strategy on the other bases, the descriptors of the Mesh and keywords combined by means of the Boolean operators AND and OR as follows: ((Interpersonal Relations) AND (((Home Care Service) OR Home Health Nursing) OR Home Health Care) AND (((Patient Care Team) OR Multidisciplinary Care Team) OR Interdisciplinary Health Team).

The study included all the available articles published in English, Spanish and Portuguese, without delimiting the date of publication, which presented information on interpersonal relationships in multiprofessional HC teams. The exclusion criteria were theses, dissertations, secondary studies, response-letter and editorials.

The selection of the studies was carried out from May to June 2019, to favor the validation of the selection of publications for analysis, and the articles were evaluated by two researchers, with expertise in the area, through independent selection, considering the inclusion and exclusion criteria, and guided by the research question. Each reviewer registered their evaluation and justification for inclusion or exclusion of the article in an instrument that contained the respective titles, abstracts and database.

The studies were analyzed through the Start version 3.4 BETA program.

For the level of evidence, the definition of the type of study as proposed by Melnyk and Feneout⁽¹¹⁾ was maintained: level 1, studies with meta-analysis methodological design or systematic reviews; level 2, controlled randomized clinical trials; level 3, non-randomized clinical trials; level 4, cohort and case-control studies; level 5, systematic reviews of descriptive and qualitative studies; level 6, descriptive or qualitative studies; and level 7, expert opinions.

The results are presented in descriptive frame format.

RESULTS

In the initial search, a total of 1,203 publications were found. By reading the titles and abstracts, it was possible to exclude 142 articles in duplicate in the different databases and 1,050 studies that did not meet the inclusion criteria or the proposed theme. Thus, of the 11 articles selected two were available in full and nine had to be searched with the help of Bibliographical Switching. Of these, six were located and three were not found in full. Finally, of the eight articles that were read in their entirety, three did not answer the research question. Therefore, five articles were the final sample of this review (Figure 1).

After analyzing the articles included in this literature review (Chart 1), a gap was observed regarding the year of publication among the researches related to the subject. The sample consisted of five primary studies, being published in 2004, 2013, 2016, 2017 and 2018⁽¹²⁻¹⁶⁾. Regarding language,

five were published in English and one in Portuguese. The article in Portuguese was developed in Brazil, demonstrating the scarcity of studies published on this subject in the country.

Regarding the method adopted in the studies, four (80.0%) were qualitative studies and one (20.0%) quantitative approach, both levels of evidence six⁽¹⁰⁾. The investigations included were predominantly conducted with teams working in services serving domiciled patients.

DISCUSSION

HC in the world scenario has followed the demographic and epidemiological changes, thus there was the need to associate the optimization of hospital beds utilization with the reduction of care costs for health systems, focusing on the humanization of care⁽³⁾. Thus, HC has been considered a new model of care not focused on the disease and hospital environment, but on promotion, prevention and humanization⁽¹⁶⁾.

Caring, regardless of location, requires identifying the elements that participate in its construction, that is, what knowledge is used, what technology is used, on which beliefs and values the care is based, and which subjects are involved. Thus, the caring process depends on a work that is built on the constant mobilization of elements that interact in the definition of needs, and therefore, multiprofessional teamwork with an interdisciplinary approach should be sustained, being interpersonal relationships an important tool⁽¹⁶⁾.

In order to obtain health care in a cohesive and non-fragmented manner, there is a need for collaboration and interaction within organizations and among teams, both in the hospital environment and at home⁽¹⁴⁾.

Health professionals are considered indispensable components to reach the objectives of this service and the purpose of the work processes. For this reason, they need to seek constant spaces for reflection on practice, technical-scientific updating, dialogue and social skills with users, their caregivers/families and other workers that integrate the service. For this, a team of professionals who trust each other and show interest in collaborating, can build goals to achieve the objectives through effective communication. Collaboration influences the interactions between team members and the way it works⁽¹²⁾.

The study⁽¹³⁾ highlights that the nurse professional is considered a bridge between the team and the patient during home visits, and also has the potential to encourage teamwork in this process, besides having the role of building a good relationship, coordinating the work and controlling what is necessary to result in good care. The research itself also observes that understanding the role played among professionals is an important prerequisite for collaboration, facilitating communication⁽¹³⁾.

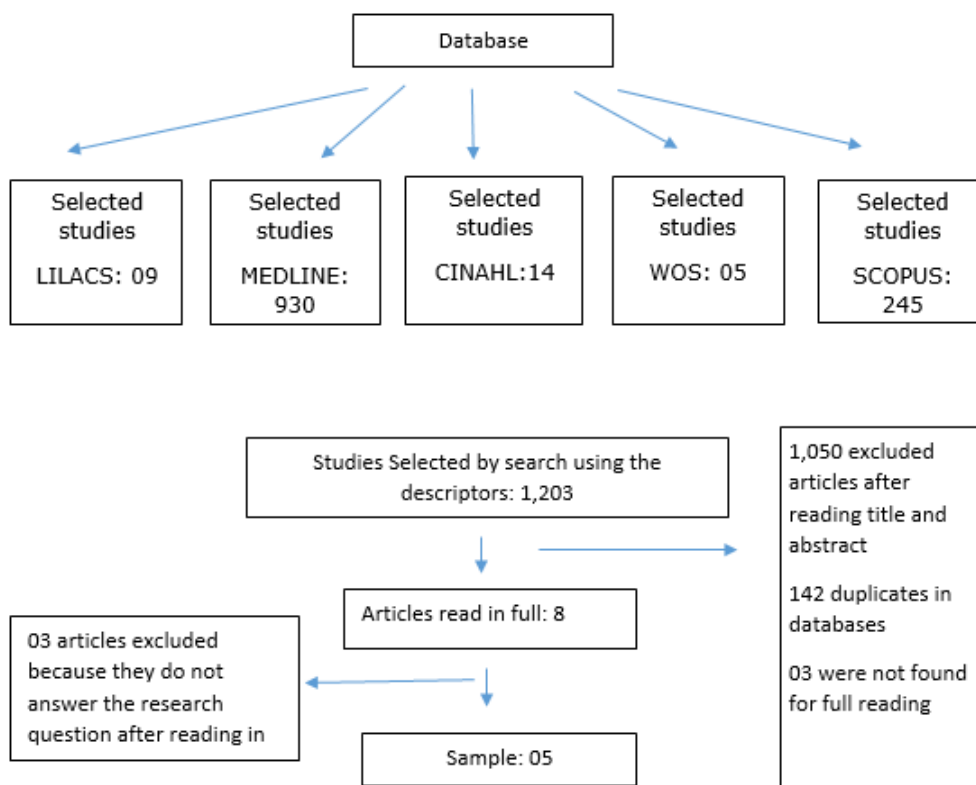


Figure 1. Flowchart of identification, selection and inclusion of studies from the integrative literature review, Londrina (PR), 2019.

Chart 1. Summary of primary studies included in the integrative review (n=06), 2019.

Year/author/ database	Title	Goal	Key results
2018 Pype et al. ¹² MEDLINE	Healthcare teams as complex adaptive systems: understanding team behavior through team members' perception of interpersonal interaction	Describe the functioning of a health team, as follows which originates from the interactions between members using the principles of CAS (Complex Adaptive Systems).	<ul style="list-style-type: none"> - Sharing knowledge and experiences creates a positive working environment and avoids conflicts. - The study offers explanations of different aspects of team behavior with implications for education, practice and research - There is a consensus among the team that the focus of the work is the patient
2017 Fujita et al. ¹³ MEDLINE	Analysis of team types based on collaborative relationships among doctors, home-visiting nurses and care managers for effective support of patients in end-of-life home care	Define the types of team collaboration for end-of-life care and clarify the factors that contributed to the successful care by the team types.	<ul style="list-style-type: none"> - Three types of collaboration among teams were classified: the team in which the collaborative relationships among all health professionals were good; the team in which the collaborative relationships between doctors and care managers were bad; and the team in which the collaborative relationships among all professionals were bad; - Understanding the role played among professionals is an important prerequisite for collaboration in facilitating communication.

Continue...

Chart 1. Continuation.

Year/author/ database	Title	Goal	Key results
2016 Larsen et al. ¹⁴ MEDLINE	Complex caring needs without simple solutions: the experience of interprofessional collaboration among staff caring for older persons with multimorbidity at home care settings	To illustrate how professionals belonging to home care services and hospital care services experience collaboration in the care of elderly with multimorbidities.	- Multi-professional teams must work as a trans professional team, where intimate interactions, flexibility and improvisation are keys to success. - For the interprofessional collaboration it is necessary a relationship and interaction between the team.
2013 Klarare et al. ¹⁵ MEDLINE	Team interactions in specialized palliative care teams: a qualitative study	Explore the interaction between team members specialized in palliative care.	- Communication has been described as key to being considered a team, resolving conflicts and executing palliative care. - The climate of the team and its performance are significantly affected by the knowledge, competence and trust in colleagues, with other professionals and the available leadership.
2004 Silva et al. ¹⁶ LILACS	Home health care and the challenges in interpersonal and interprofessional relationships	Deepen the knowledge of interpersonal and interprofessional relationships of all the actors involved in the care produced at home.	- The results allowed us to recognize that an articulation between team and team / family members is necessary in the search for quality care, so the professionals interviewed expressed great concern about interpersonal relationships and identified the need to adopt strategies in order to allow interaction and articulation of knowledge and facilitate dialogue.

In another research of professionals working in HC there was a consensus among participants that the leader, regardless of their profession, is responsible for creating a team atmosphere. The team atmosphere and its performance are significantly impacted by the knowledge, competence and trust among colleagues, and the leadership available. In the same study, there were several reports from professionals who have participated in courses on communication, but nothing on teamwork and interpersonal relationships⁽¹⁵⁾.

The work teams, that is, the specialized groups are increasingly encouraged to act with technical and social competence in organizations in general. Characteristics such as overview and of the complementarity, effective communication and the competence to deal with individual differences are valued in the current organizational environment. Thus, good interpersonal relations among team members are considered the main facilitator for continuity of care^(17,18).

Despite the broad search for primary studies, this integrative review has limitations, which are mainly related to the level of evidence of the researches that were selected in this review, being demonstrated by the fact that the primary search

identified 1,203 articles, and only five of these related to the guiding question, and no study of educational intervention on interpersonal relationships for professionals who work in HC services was found, therefore, it was not possible to verify the potentiality of this type of action.

This research can contribute to the area by summarizing primary studies on interpersonal relationships in teams that work in HC services, generating evidence to point out feasible ways in practice.

CONCLUSION

In this review we found evidence that communication and interpersonal relationships among professionals working in HC services are essential to result in adequate patient care. In practice, this study corroborates the need for educational interference relevant to interpersonal relationships and teamwork. Therefore, it is necessary to develop researches with intervention methods that stimulate teams in relational abilities.

The implementation or establishment of necessary interventions should be carried out by health professionals

and managers based on individualized evaluation of each team. The synthesis of knowledge indicated the need to intensify efforts to develop research with methodologies capable of producing evidence on this topic, especially in the practice of HC.

It was evident that even with the proposals of renewed forms in the production of care and in multiprofessional action, interpersonal relationships ended up not being protagonists in this process, since the actions focused on the biological model still stand out and, thus, it can be inferred that there is little stimulus to develop studies on the subject.

Interpersonal relationships among health care teams are extremely important, being in HC or in another health care model, mainly to ensure qualified care, seeking the reduction of obstacles and openness to horizontal relationships in terms of hierarchy.

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