

Table II. Nursing interventions in crisis-oriented psychiatric home care

Classes	Interventions in crisis-oriented home care
A. Activity and Exercise Management:	Energy management Exercise promotion
D. Nutrition Support:	Nutrition management Nutritional counselling
F. Self-care Facilitation:	Sleep enhancement Self-care assistance Medication management
H. Drug Management:	Medication administration Teaching prescribed medication
O. Behaviour Therapy:	Activity therapy Behaviour management Behaviour modification Mutual goal setting Self-modification assistance Self-responsibility facilitation Anger control assistance
P. Cognitive Therapy:	Cognitive restructuring Reminiscence therapy
Q. Communication Enhancement:	Active listening Complex relationship building Socialization enhancement
R. Coping Assistance:	Coping enhancement Counselling Decision-making support Emotional support Grief work facilitation Hope instillation Mood management Presence Recreation therapy Security enhancement Self-esteem enhancement Support system enhancement
S. Patient Education:	Teaching: disease process
T. Psychological Comfort Promotion:	Anxiety reduction Suicide prevention
U. Crisis Management:	Crisis intervention Delusion management
V. Risk Management:	Surveillance Surveillance: safety
X. Life Span Care:	Home maintenance assistance Family support Family process maintenance Family involvement Family integrity promotion Family therapy Caregiver support Visitation facilitation
Y. Health System Mediation:	Health system guidance Discharge planning Health care information exchange
b. Information Management:	Referral Telephone consultation

Classification systems for nursing interventions

The 'Nursing Interventions Classification' (NIC) (29) is one of the most useful and well-known classification sys-

tems for nursing interventions presently available (22, 24, 31). The NIC is designed to make the contributions of nurses visible in health care (32). Interventions classified under the NIC are organized in a three-level taxonomy. At the top, most abstract level there are six domains:

1. Physiological (Basic)
2. Physiological (Complex)
3. Behavioural
4. Safety
5. Family
6. Health System

Each domain includes several classes (level 2). In total, there are 27 distinguishable classes; the taxonomy currently identifies 433 nursing interventions.

An intervention is described structurally using a label that gives a short characterization, followed by a range of activities that focus on the concrete goals and measurable effects. As an example, the structure of the nursing intervention *Crisis Intervention* is given in Fig. 1. This is an intervention from the Classes R/U: Coping Assistant/Crisis Management, and is probably one of the most important nursing interventions in (crisis-oriented) psychiatric home care.

Domain 4/3 Class U/R CRISIS INTERVENTION

Definition: Use of short-term counselling to help the patient cope with a crisis and resume a state of functioning comparable to or better than the pre-crisis state.

Activities:

- Provide atmosphere of support
- Determine whether the patient presents safety risk to self or others
- Initiate necessary precautions to safeguard the patient or others at risk from physical harm
- Encourage expression of feelings in a non-destructive manner
- Etc.

Fig. 1. An example of the structure and content of a nursing intervention from the NIC.

METHODS

Design

One way of investigating what psychiatric home care nurses do is to examine the nursing records. In this study, a descriptive approach was used. The nursing records of four crisis-oriented and two long-term psychiatric home care teams were analyzed. The records of the teams were all based on the problem-oriented record, consisting of a database, a problem list, a nursing care plan, and the

Table III. Nursing interventions in long-term psychiatric home care

Classes	Interventions
A. Activity and Exercise Management:	Energy management Exercise promotion
D. Nutrition Support:	Nutritional counselling
F. Self-care Facilitation:	Sleep enhancement Self-care assistance
H. Drug Management:	Medication management
O. Behaviour Therapy:	Activity therapy Behaviour management Self-modification assistance Self-awareness enhancement Substance use prevention
Q. Communication Enhancement:	Active listening Complex relationship building Socialization enhancement
R. Coping Assistance:	Body image enhancement Coping enhancement Counselling Decision-making support Emotional support Grief work facilitation Recreation therapy Security enhancement Self-esteem enhancement Support system enhancement Support group
S. Patient Education:	Teaching: disease process
T. Psychological Comfort Promotion:	Anxiety reduction
X. Life Span Care:	Home maintenance assistance Family process maintenance Family involvement Family integrity promotion
Y. Health System Mediation:	Health system guidance Discharge planning Sustenance support
b. Information Management:	Referral Telephone consultation

progress notes (33). The care planning as part of the nursing process was standardized. All nurses of psychiatric home care teams (26 in total) had at least three years of experience in an inpatient care setting before they made the switch to the outpatient care setting. During the first year in the new care setting, they were trained monthly in the method of problem-oriented record keeping. In a previous study, an audit instrument was developed to measure the nursing process (34). Preliminary findings suggest acceptable connectivity between assessments and care plans, and between care plans and progress notes in both the crisis-oriented and long-term psychiatric home care teams. Content analysis of nursing

care plans was, therefore, considered an appropriate method in this study.

Sample

Written informed consent was obtained from the clients who received care from the home care teams. Thus, 250 nursing records from the four crisis-oriented and 24 records from the two long-term home care teams were available for study. This quantity of nursing records corresponded to 45% of the total number of clients who received care from the acute psychiatric home care teams and 40% of all clients from the long-term psychiatric home care teams. The psychiatric nurses were all involved in a developmental action research project, and so they agreed to the content analysis of the records.

Not all records from the crisis-oriented home care teams were used because the method of analysis was very labour-intensive. An independent person (secretary) randomly chose a sample of 135 nursing records. All 24 nursing records from the long-term psychiatric home care teams were included in the sample.

Nursing records were selected for further analysis if they had a clear written nursing care plan in which one or more nursing diagnoses were set, goals were formulated and nursing activities were described. For example, from the sample of 38 records from one home care team, only 10 had written nursing care plans. After all the nursing records were screened for these criteria, 128 records were found suitable for further analysis: 104 from the crisis-oriented and 24 from the long-term home care teams.

Analysis

A content analysis of the nursing care plans was made. Annotation related to nursing interventions was collected. The activities planned and prescribed by the psychiatric home care nurses were compared with the labels and activities attributed to nursing interventions identified under the NIC. An example of the way a nursing care plan was analyzed is shown in Table I.

RESULTS

The results show a total of 435 prescribed interventions in the 104 care plans for crisis-oriented home care and 138 interventions in the 24 care plans for long-term psychiatric home care. Categorized according to the NIC criteria, there emerged 52 different nursing interventions in the nursing care plans of the crisis-oriented psychiatric home care programme (Table II) and 31 different nursing interventions in the long-term psychiatric home care programme (Table III). For the crisis-oriented psychiatric home care, this amounts to about 13%, and for the long-term home care about 7% of the 433 nursing interventions described under the NIC. However, the NIC aims