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THE REHABILITATION NURSE'S CONTRIBUTION TO PATIENT SAFETY: MULTIPLE CASE STUDY

A CONTRIBUIÇÃO DO ENFERMEIRO DE REABILITAÇÃO PARA A SEGURANÇA DO DOENTE: ESTUDO DE CASOS MÚLTIPLOS

LA CONTRIBUCIÓN DE LA ENFERMERA DE REHABILITACIÓN A LA SEGURIDAD DEL DOENTE: ESTUDIO DE CASOS MÚLTIPLES

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RESUMO

Introdução: A segurança do doente é um componente crucial da qualidade do cuidado em saúde, sendo amplamente reconhecida como uma prioridade global. Compreende-se que é crucial o papel desempenhado pelo enfermeiro de reabilitação na promoção da segurança do doente, especialmente face ao aumento observado no número de eventos adversos evitáveis durante a prestação de cuidados de saúde. Portanto, investigar como o enfermeiro de reabilitação contribui para mitigar esses eventos e promover um ambiente de assistência mais seguro é essencial para melhorar a qualidade global dos cuidados de saúde.

Metodologia: A pesquisa adota uma abordagem qualitativa, com um desenho de estudo de casos múltiplos holístico, visando explorar, descrever e explicar o fenómeno no seu contexto real.

Resultados: Os resultados demonstram a importância de compreender as competências essenciais do enfermeiro de reabilitação para promover cuidados qualificados e seguros, visando maximizar as potencialidades dos doentes e suas famílias. Os enfermeiros especialistas em Enfermagem de reabilitação desempenham um papel fundamental na prevenção de eventos adversos, além de desenvolverem técnicas específicas para garantir a segurança e a qualidade dos cuidados. As competências dos enfermeiros especialistas em enfermagem de reabilitação incluem a responsabilidade profissional, ética e legal, melhoria contínua da qualidade, gestão dos cuidados e desenvolvimento profissional. Destacou-se o ensino ao doente como estratégia para garantia de sua autonomia e independência.

Discussão: Ao abordar as barreiras sociais e a necessidade de intervenção, busca-se proporcionar autonomia para a vida diária e a participação social dos doentes. A compreensão mais profunda do papel do enfermeiro especialista em Enfermagem de reabilitação na segurança do doente contribui com a discussão já antes iniciada, valiosa para a prática clínica e a gestão de cuidados de saúde. O fomento da temática e o levantamento de novos dados são essenciais para informar políticas e práticas que visam melhorar continuamente a qualidade e segurança dos cuidados de saúde.

Conclusão: Os resultados deste estudo proporcionam uma visão mais ampla do papel do enfermeiro especialista em Enfermagem de reabilitação na promoção da segurança do doente, lançando luz sobre novos horizontes para a prática clínica e desencadeando um processo de reflexão profunda para aprimorar a gestão dos cuidados de saúde. Estes resultados são essenciais para informar políticas e práticas que visam melhorar continuamente a qualidade e segurança dos cuidados de saúde.

Descritores: Enfermagem; Segurança do Doente; Enfermagem em Reabilitação; Cuidados de Enfermagem

ABSTRACT

Introduction: Patient safety is a crucial component of healthcare quality, widely recognized as a global priority. The role played by rehabilitation nurses in promoting patient safety is understood to be crucial, especially given the observed increase in the number of preventable adverse events during healthcare delivery. Therefore, investigating how rehabilitation nurses contribute to mitigating these events and promoting a safer care environment is essential for improving the overall quality of healthcare.

Methodology: This research adopts a qualitative approach with a holistic multiple case study design, aiming to explore, describe, and explain the phenomenon in its real context.

Results: The results demonstrate the importance of understanding the essential competencies of rehabilitation nurses to promote qualified and safe care, aiming to maximize the potential of patients and their families. Rehabilitation nurses play a fundamental role in preventing adverse events and developing specific techniques to ensure safety and quality of care. Their competencies include professional responsibility, ethics and legality, continuous quality improvement, care management, and professional development. Patient education was highlighted as a strategy to ensure their autonomy and independence.

Discussion: By addressing social barriers and the need for intervention, efforts are made to provide autonomy for daily life and social participation of patients. A deeper understanding of the role of rehabilitation nurses in patient safety contributes to the ongoing discussion, valuable for clinical practice and healthcare management. Fostering this theme and collecting new data are essential to inform policies and practices aimed at continuously improving the quality and safety of healthcare.

Conclusion: The results of this study provide a broader perspective on the role of rehabilitation nurses in promoting patient safety, shedding light on new horizons for clinical practice and triggering a process of deep reflection to enhance healthcare management. These results are essential to inform policies and practices aimed at continuously improving the quality and safety of healthcare.

Descriptors: Nursing; Patient Safety; Rehabilitation Nursing; Nursing Care

RESUMEN

Introducción: La seguridad del paciente es un componente crucial de la calidad de la atención médica, ampliamente reconocida como una prioridad global. Se entiende que el papel desempeñado por los enfermeros de rehabilitación en la promoción de la seguridad del doente es crucial, especialmente dada el aumento observado en el número de eventos adversos evitables durante la prestación

de atención médica. Por lo tanto, investigar cómo los enfermeros de rehabilitación contribuyen a mitigar estos eventos y promover un entorno de atención más seguro es esencial para mejorar la calidad general de la atención médica.

Metodología: La investigación adopta un enfoque cualitativo, con un diseño de estudio de casos múltiples holístico, con el objetivo de explorar, describir y explicar el fenómeno en su contexto real.

Resultados: Los resultados demuestran la importancia de comprender las competencias esenciales de los enfermeros de rehabilitación para promover una atención calificada y segura, con el objetivo de maximizar el potencial de los doentes y sus familias. Los enfermeros de rehabilitación juegan un papel fundamental en la prevención de eventos adversos y en el desarrollo de técnicas específicas para garantizar la seguridad y la calidad de la atención. Sus competencias incluyen responsabilidad profesional, ética y legal, mejora continua de la calidad, gestión de la atención y desarrollo profesional. La educación del paciente se destacó como una estrategia para garantizar su autonomía e independencia.

Discusión: Al abordar las barreras sociales y la necesidad de intervención, se hacen esfuerzos para proporcionar autonomía para la vida diaria y la participación social de los doentes. Una comprensión más profunda del papel de los enfermeros de rehabilitación en la seguridad del doente contribuye a la discusión en curso, siendo valiosa para la práctica clínica y la gestión de la atención médica. Fomentar el tema y recopilar nuevos datos es esencial para informar políticas y prácticas destinadas a mejorar continuamente la calidad y la seguridad de la atención médica.

Conclusión: Los resultados de este estudio proporcionan una perspectiva más amplia sobre el papel de los enfermeros de rehabilitación en la promoción de la seguridad del doente, arrojando luz sobre nuevos horizontes para la práctica clínica y desencadenando un proceso de reflexión profunda para mejorar la gestión de la atención médica. Estos resultados son esenciales para informar políticas y prácticas destinadas a mejorar continuamente la calidad y la seguridad de la atención médica.

Descriptores: Enfermería; Seguridad del Paciente; Enfermería en Rehabilitación; Atención de Enfermería

INTRODUCTION

Patient safety is a crucial component of the quality of healthcare, the importance of which extends to both the patient and their family, providing safe care to prevent incidents or harm associated with healthcare. Adverse events pose a risk to health, and are associated with patient morbidity and mortality within healthcare systems, making this issue a global priority, as demonstrated by the Global Action Plan for Patient Safety: 2021–2030, adopted during the 74th World Health Assembly[1] .

Health services must provide care to the population in the prevention of disease, treatment, recovery and rehabilitation of individuals. However, many patients suffer preventable adverse events during this care. These events are defined as unintentional injuries or harm caused by healthcare staff, resulting in temporary or permanent disability or dysfunction, which may prolong hospitalisation or even lead to death as a consequence of the care provided[2] .

Nursing care, which aims to assist individuals with a view to preventing deterioration, providing protection, and facilitating recovery and rehabilitation, must be grounded in organised and coordinated planning, based on technical and scientific knowledge applicable to each patient receiving care[2] . Nurses are responsible for the majority of care interventions provided directly to patients. They are essential for reducing incidents that may harm patients, as well as for the early detection of complications and the implementation of care plans, thereby promoting a safe healthcare environment and improving the care provided by the healthcare team[3] .

It is important to highlight that nurses specialising in rehabilitation nursing have distinct care objectives and employ specific techniques that may help to prevent complications or, in some cases, increase the risk, which requires greater attention to patient safety. In addition to common competencies, these include: professional, ethical and legal responsibility; continuous quality improvement; care management; and professional development. As part of their responsibilities, they are expected to supervise delegated tasks, ensuring safety and quality, and to promote a physical, psychosocial and cultural environment that protects individuals and groups[4] .

This study emerged from a broader investigation, which included nurse managers and identified a significant difference in the discourse of managers specialising in rehabilitation nursing. The initial analysis demonstrated that nurses specialising in rehabilitation nursing play a central role in patient safety.

When analysing the issue, it is essential to define the role of the Nurse Manager: a professional who possesses practical knowledge and a systematic approach to nursing, the profession and management, with proven competence in the field. This manager takes a holistic view of the organisation, analyses contingent factors that influence the planning, implementation, monitoring and evaluation of activities, adds economic value to the organisation and social value to nurses, championing the safety and quality of care and promoting the professional development of the team. Decision-making is carried out in an ethical, responsible and citizen-centred

manner, with a focus on health outcomes. To fulfil the role of manager, it is necessary to have held the title of specialist nurse for at least three years and the title of nurse for at least ten years [4] .

In light of this situation, it was decided to conduct a study to explore in greater depth the contribution of specialist rehabilitation nurses to patient safety. The main objective was to understand how specialist rehabilitation nurses in management roles and care managers explain their ability to ensure patient safety.

Rehabilitation nursing aims to maximise the potential of patients and their families, taking into account social barriers and the need for intervention, so that individuals can achieve autonomy in daily life and social participation[5] . We therefore sought to address this objective based on the core competencies of specialist rehabilitation nurses, which suggest a practice focused on the provision of specialised care, aimed at patient safety and rehabilitation. In Brazil, the Federal Nursing Council emphasises, as a specific competence of specialist rehabilitation nurses, Teaching and Research as activities geared towards academic and professional training and research, to promote high-quality care and patient safety in rehabilitation[6] .

METHODOLOGY

The study was conducted using a qualitative approach, employing a holistic multiple-case design. The case study is a structured research method, suitable for understanding both individual and group phenomena by investigating them in a real-life context. This method aims to explore, describe and explain the event, providing an in-depth understanding of the phenomenon under study[7] . We opted for multiple cases due to the need for literal replication of the expected findings, thereby increasing the robustness of the study. This project is considered holistic as it examines the overall nature of the cases, allowing for a comprehensive analysis[7] .

Following Yin's recommendations[7] , the study was structured around a clear protocol that outlines formal procedures, identifying strengths and limitations. The components of the protocol included the research question; hypotheses; unit of analysis; rationale; and criteria for interpreting the findings. The research question was: 'How do specialist rehabilitation nurses contribute to patient safety?'.

The propositions can be supported by scientific evidence that has already examined this topic. The literature emphasises that patient safety is significantly improved when healthcare is based on specialised and evidence-based practices[8] , such as those provided by specialist rehabilitation nurses (SRNs).

The continuous and personalised care provided by SRNs strengthens the interpersonal relationship between the patient and the nurse. This bond fosters an environment of rehabilitation and mutual recognition, which has a positive influence on both parties, enabling the patient to live well[9] . Furthermore, researchers have demonstrated that intervention by SRNs reduces complications and accelerates recovery, minimising the risks associated with hospital treatment[10] .

Accordingly, the hypotheses guiding the study were: a) "Patient safety is enhanced by rehabilitation nursing care", b) "The rehabilitation nurse contributes positively to patient safety", and c) "Patients face fewer risks under the care of a rehabilitation nurse".

The unit of analysis was defined on the basis of a larger study entitled "Patient safety in Brazil and Portugal: a qualitative approach", approved by the ethics committee of a higher education institution in southern Brazil, and by the ethics committees of two hospitals located in the north and south of Portugal, with data collection taking place in November 2023.

During this research process, a statement by a nurse manager highlighted the importance of EEERs in promoting patient safety. This account emphasised the need to further investigate the specific contribution of these professionals, highlighting the importance of a more detailed study focused on this topic.

Based on this preliminary finding, and to facilitate the conduct of the multiple-case study, the head nurses of the hospitals under investigation were asked, using convenience sampling, to forward the research questionnaire to the EEERs at their respective institutions. This procedure aimed to ensure that the participants were directly linked to the context of the study.

The study's methodology established as inclusion criteria EEERs holding management positions and specialist rehabilitation nurses involved in direct patient care, working within the Portuguese healthcare system during the data collection period. As exclusion criteria, nurses who were absent from their duties for any reason during the study period were excluded.

The invitation email included the question: "How do rehabilitation EEERs contribute to patient safety?" and requested demographic information such as gender, age, length of training, length of time as a specialist and current professional category. Each professional received the email privately, i.e. without a copy or blind copy to other recipients. Responses were returned to the researcher privately.

The fifth component of the study is the linking of data to propositions. The data analysis followed an explanatory analytical strategy, using ATLAS.ti 24 *software* for organisation and coding. The interviews were transcribed and then entered into *the software*. From there, the primary coding stage

began, carried out line by line, allowing for a detailed analysis of the content.

Following this phase, the most frequently recurring codes were identified, which suggested emerging concepts. These conceptual codes encompassed the primary codes, serving as the basis for abstraction. Based on these concepts, categories were formed to structure the data analysis. Furthermore, the software enabled the creation of networks linking the conceptual codes, establishing the relationships identified from the empirical data. The construction of these networks facilitated the description and interpretation of the findings.

Data saturation was observed, as no new or complementary conceptual codes emerged during the coding process from the eighth interview onwards. Consequently, it was decided not to invite any further professionals to join the sample, given that the data already collected were sufficient to gain an understanding of the topic.

Based on the theoretical premises, the analysis enabled the identification of emerging patterns and concepts, adopting an inductive approach due to prior theoretical knowledge of the subject.

RESULTS

The study was conducted with eight nurses, comprising six female nurses and two male nurses. Five nurses, working directly in the provision and management of nursing care as specialists in rehabilitation nursing, and three nursing managers specialising in rehabilitation nursing took part in the study. The average age was 43 years. The average length of service in nursing was 20.7 years. As rehabilitation nurses, the average was 8.8 years.

Data analysis identified five categories for discussing patient safety based on the work processes of rehabilitation nurses, namely: rehabilitation nurses' self-perception; management of rehabilitation nursing care; delivery of rehabilitation care; patients' self-care; and autonomy and inclusion. The categories were analysed using a network analysis approach, with the exception of 'Rehabilitation nurses' self-perception'.

SELF-PERCEPTION OF REHABILITATION NURSES

Rehabilitation nurses demonstrated a positive self-perception regarding the importance of their specialism in clinical practice, particularly with regard to patient safety. This perception was based on a deep understanding of the needs and challenges faced by patients during the rehabilitation process. By dealing daily with people at different stages of recovery, rehabilitation nurses witness first-hand the progress of patients, as well as the obstacles that may arise along the way.

The accounts highlighted that the role of the rehabilitation nurse in patient safety is crucial due to their specialist knowledge and professional experience. It was reported that rehabilitation nurses are constantly involved in direct patient care, which enables them to monitor patients' progress and contribute to decision-making within the multidisciplinary team.

Case 09: *[... the work of the rehabilitation nurse, underpinned by detailed assessments, preventive interventions and coordination of care, plays a key role in patient safety during the rehabilitation process.]*

It was noted that patient safety is an important indicator of the quality of healthcare, and the EEER aims to prevent functional decline and help patients adapt to a new way of life. Furthermore, the EEER develops skills in the management and organisation of care, contributing to improved outcomes and a reduction in length of stay.

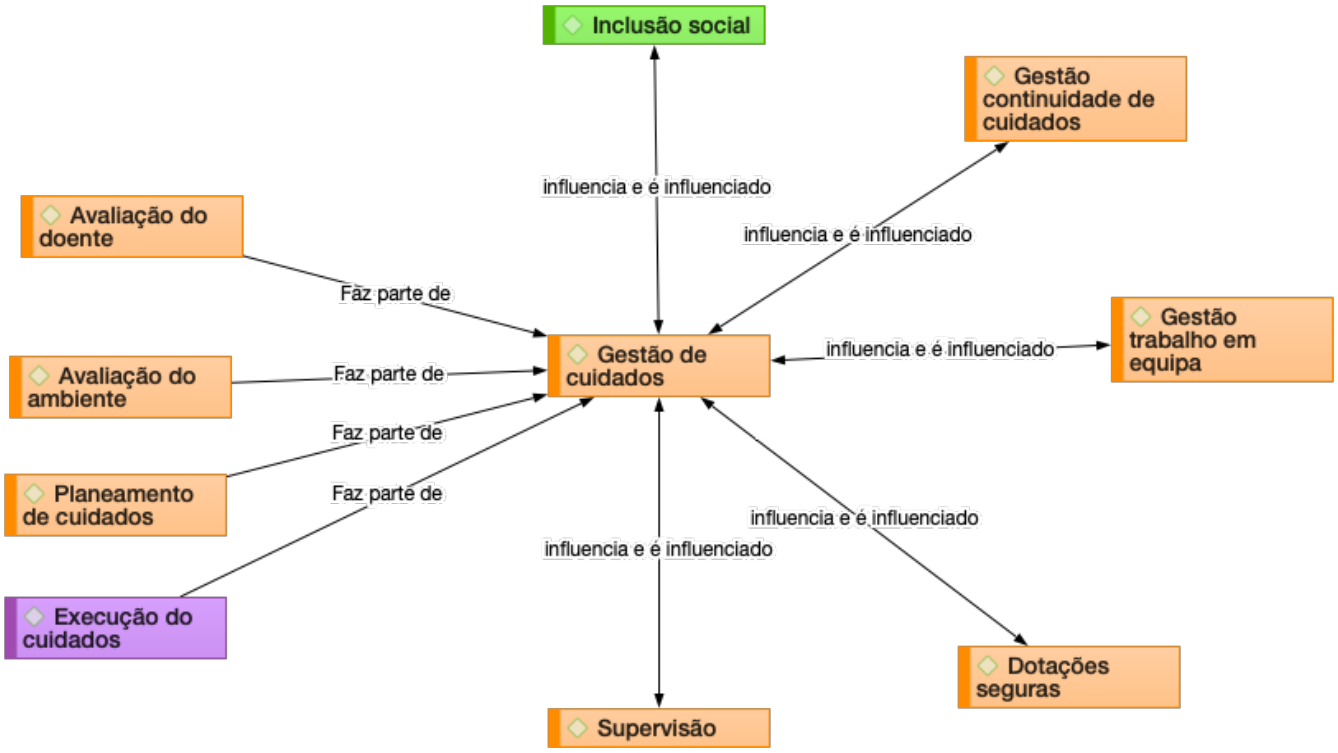
Moreover, rehabilitation nurses' positive self-perception is strengthened by the recognition of the interdisciplinary approach and collaboration required to ensure the safety and effectiveness of care. When working in multidisciplinary teams, rehabilitation nurses value the exchange of knowledge and experiences, recognising that patient safety is a shared responsibility. This perception reinforces the importance of the rehabilitation nurse's role as a crucial link in the care chain, capable of integrating and coordinating efforts to promote the safety and well-being of patients undergoing rehabilitation.

REHABILITATION NURSING CARE MANAGEMENT

Based on the findings, it was possible to establish a framework for care management (Figure 1). Analysis of the participants' responses revealed that patient assessment, environmental assessment, care planning and care delivery form part of the rehabilitation nursing care management process, and that this process enhances patient safety by reducing risks and complications to their health.

Case 02: *[The rehabilitation nurse does indeed contribute to the safety of care... when they assess the patient in detail and are able to detect subtle changes in areas such as consciousness, cognition, swallowing, balance and elimination, and intervene to prevent complications.]*

Figure 1 – Management of rehabilitation nursing care related to patient safety



Source: The authors (2024)

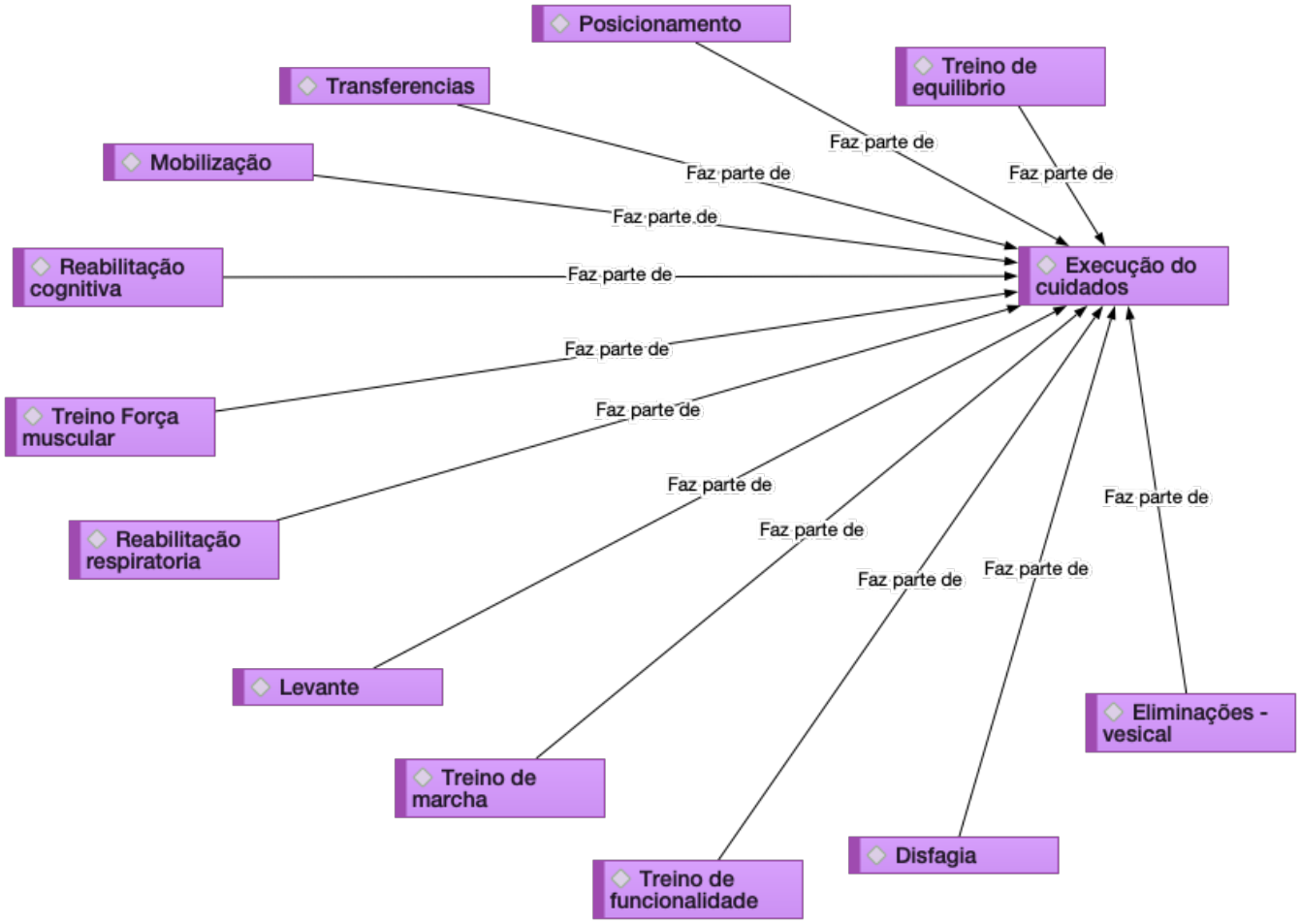
It was also found that care management is influenced by various factors, which in turn are also influenced by management, such as continuity of care, teamwork, supervision, safe staffing levels and social inclusion.

Case 05: *[...the rehabilitation nurse contributes to patient safety...due to their professional experience, they play a key role in the management of direct patient care, as they have a holistic view of the patient's care and act as a vital link with the rest of the multidisciplinary team, ensuring that the care provided is better tailored to the patient's needs and priorities.]*

DELIVERY OF REHABILITATION CARE

The delivery of rehabilitation nursing care is described by nurses as a form of care management; however, various specific rehabilitation nursing interventions are associated with patient safety, as shown in the care delivery framework (Figure 2).

Figure 2 – Rehabilitation care provided to ensure patient safety



Source: The authors (2024)

Balance training, positioning, transfers, mobilisation, cognitive rehabilitation, muscle strength training, respiratory rehabilitation, lifting, gait training, functional training, as well as rehabilitation care for dysphagia and elimination, are cited as forms of rehabilitation care that promote patient autonomy, thereby reducing risks to their safety.

Case 01: *[... there's getting up, there's walking... Because if the patient gets up into a chair, they won't develop pressure sores... if the patient can walk about, the time they spend doing so is much better... and, and we're preventing respiratory atelectasis and respiratory infections. Knowing how to position oneself correctly will prevent aspiration and... if I cough effectively, it prevents pneumonia... a whole range of things.]*

Case 07: *[The work we carry out in terms of functionality, the recovery of muscle strength, and balance and gait training also translates into benefits for patient safety and the prevention of complications such as the risk of falls.]*

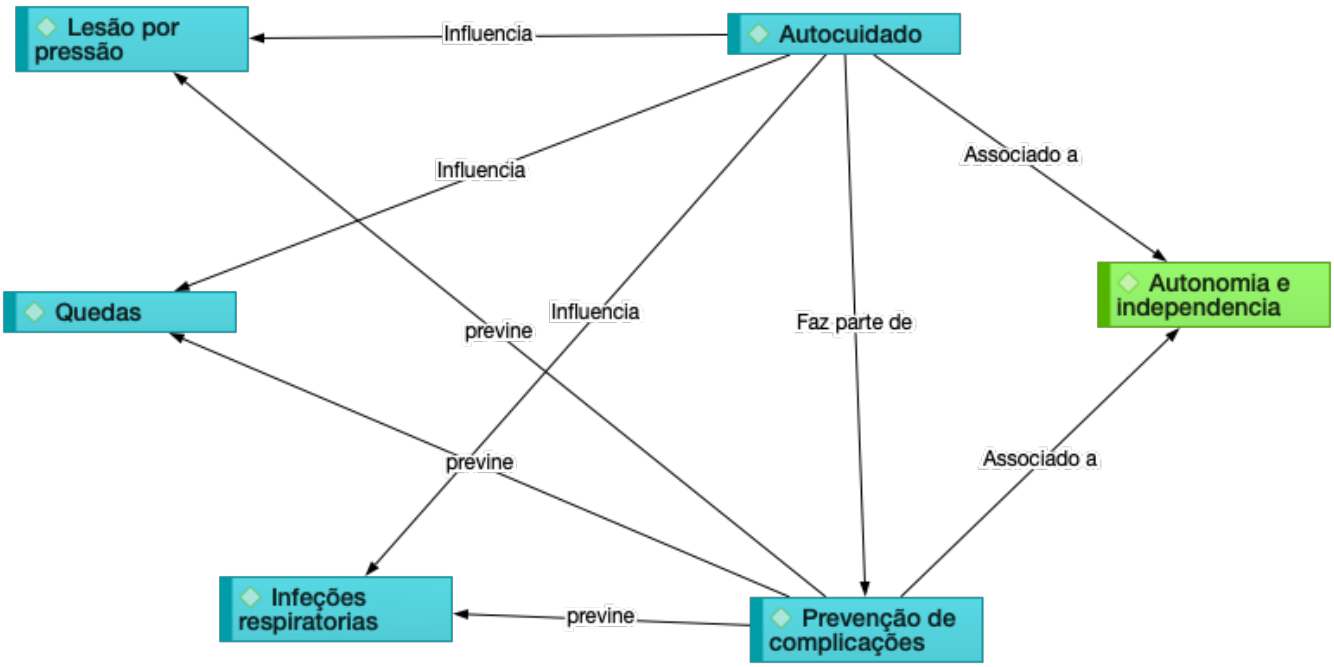
Case 08: *[I believe that nurses specialising in rehabilitation nursing contribute to effective patient safety in contexts such as ... Training in bladder control and autonomy (prevention of infections, which in turn promotes patient safety) ... Prevention of falls, patient education and training to promote effective gait and balance (patient safety).]*

AUTONOMY AND INDEPENDENCE

Analysis of the data revealed that the rehabilitation nurse plays a crucial role in the prevention of both safety incidents and pressure injuries and falls, as well as other complications such as respiratory infections and joint stiffness. This proactive approach aims to minimise risks and maximise patient safety throughout the entire rehabilitation process.

Figure 3 illustrates the interrelationships between the promotion of self-care and the prevention of complications, exemplified by safety incidents. Both self-care and the prevention of complications converge towards the common goal of promoting patient autonomy and independence.

Figure 3 – Relationships between the promotion of self-care and the prevention of complications



Source: The authors (2024)

The prevention of complications emerges as a fundamental aspect to be considered when one of the concerns is to ensure the effectiveness of treatments and promote the patient's proper recovery. The reports indicate that the EEER uses its expertise as an active tool to educate patients and carers about practices and behaviours that may reduce the incidence of complications, as evidenced by the words of one participant:

Case 01: *[... if the patient can identify the risk factors – 'look, you've had an amputation; when you might not yet realise you've lost your leg; when you get up, you have to be careful, you have to hold onto the bed first, you have to keep the walking frame nearby, you have to ask for help' – she (the rehabilitation nurse) teaches them.]*

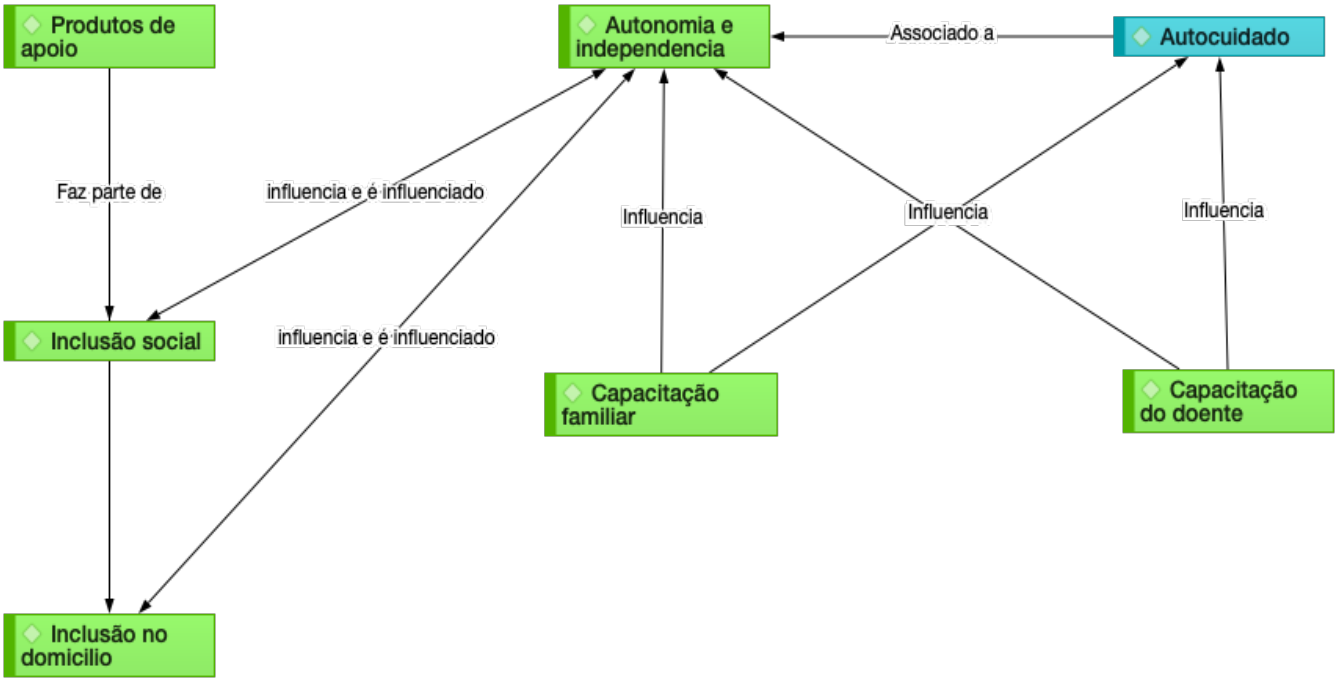
The focus on developing self-care proved to be the driving force behind working on patients' literacy to prevent incidents, both within the hospital and at home. By identifying subtle changes, the EEER can intervene at an early stage.

With regard to two of the most common safety incidents in healthcare, participants reported receiving guidance on positioning techniques to avoid pressure ulcers, mobilisation exercises to prevent joint stiffness, and environmental adaptations to reduce the risk of falls. Emphasis was also placed on infection prevention, whether through dysphagia screening to prevent aspiration pneumonia or by teaching patients about proper hygiene.

AUTONOMY AND INCLUSION

The reports indicated that the focus of rehabilitation care is on patients' autonomy and independence, which are influenced by social and home-based inclusion; these factors are linked to increased patient safety, as the more autonomous a patient is, the lower the risks of a deterioration in their health (Figure 4).

Figure 4 – Relationships promoting autonomy and independence



Source: The authors (2024)

A person's autonomy and independence were associated with self-care, both of which are influenced by the empowerment of the patient and their family members; this is consistent with greater patient safety during their hospital stay and during the period of reintegration into the home and society.

Case 07: *[Training on how to adapt the home environment, guidance on assistive devices – for example, a commode chair for self-care and bathing – as well as home adaptations, enables an improvement in patient safety.]*

Case 09: *[The rehabilitation nurse plays a crucial role in promoting patient safety ... the rehabilitation nurse develops a personalised care plan that addresses the patient's specific needs, taking into account not only the rehabilitation condition but also medical, social and economic factors.]*

DISCUSSION

Patient safety is an indicator of the quality of healthcare and is a priority for rehabilitation nurses. With their specialist knowledge, these professionals play a crucial role in preventing adverse events, tailoring self-care to individual needs and reducing complications. Their skills, developed through the management of intervention plans, are fundamental to ensuring quality care and patient safety[13] .

Authors highlight the persistence of inefficiency in many health services, pointing to a care model characterised, amongst other aspects, by a marked division between preventive and rehabilitative measures. Such fragmentation of care may compromise the continuity and effectiveness of treatment, as interventions may not be addressed in an integrated and coordinated manner. This approach may result in gaps in the care provided, undermining the final outcome of treatment and compromising patient safety[13] .

Rehabilitation nurses, by virtue of their expertise, play a crucial role in the direct management of care, promoting a holistic approach and acting as the vital link with the multidisciplinary team. Planned interventions aim to prevent safety risks, including education, training and supervision of daily activities, particularly during hospitalisation, with a focus on neurological and respiratory care[12] .

Some specific interventions by rehabilitation nurses to promote patient safety include: fall prevention; education and training in effective walking and balance; and prevention of pressure ulcers. Rehabilitation nursing care should focus on preventing complications so that patients can achieve greater safety, in terms of their knowledge regarding the necessary care and how to return to family and community life, so that they feel socially included[12] .

Rehabilitation nurses guide patients towards a safe return home, whilst recommending support resources and aids. Empowerment provides tools to increase autonomy and awareness of limitations. Adapting self-care requirements is crucial, involving feasible adjustments to instructions, diet and procedures. This approach aims to mitigate complications, as discussed by Dias[14] . Furthermore, the

author argues that collaboration between rehabilitation nurses and other healthcare professionals is vital for creating a personalised plan, as it allows requirements to be adapted to a level that is accessible to the patient. By empowering patients to take control of their own health, the risks of complications arising from a lack of adherence to self-care are reduced[14] .

Researchers[15,16] emphasise the importance of establishing an early rehabilitation programme for critically ill, chronically ill and elderly patients, as the role of the rehabilitation nurse is seen as promoting patient safety by preventing functional decline in these individuals through the strengthening of teamwork, based on reflection on nursing practices and care, and by encouraging professionals to engage in continuing professional development.

Although some recent studies[17,18,19] do not focus specifically on patient safety, they reveal crucial areas of the rehabilitation nurse's practice that are inherently linked to safe practices. The quality of care is intrinsically dependent on safety, even if this is not explicitly addressed in the results of these studies.

This gap highlights the need for further research into how rehabilitation nurses promote a culture of patient safety in their practice. Thus, the present study not only helps to fill this gap but also broadens perspectives on the intersection between patient safety and rehabilitation, a field that requires greater academic attention.

This research has some limitations that should be acknowledged. Firstly, the small sample size of participants may have influenced the generalisability of the results; it is therefore necessary to increase the number of nurses involved in future research to ensure greater representativeness. Furthermore, the potential bias in participants' self-reports is another critical aspect to consider, as responses may reflect personal interpretations or a desire to conform to social expectations.

To address this limitation, it would be useful to seek additional data sources, such as clinical records, interviews with other professionals or even patients under the care of these nurses, in order to enrich the findings and strengthen the validity of the results. These factors suggest the need for triangulation with other sources of information in future studies, in order to ensure a more robust and accurate analysis.

Furthermore, the scarcity of evidence highlighting the specific role of rehabilitation nurses in preventing risks and harm to patients within the context of the Portuguese national health system is recognised as a significant limitation to the discussion of these cases. The lack of comprehensive and specific studies on this topic hinders an understanding of the impact and best practices of rehabilitation nurses in preventing complications and promoting patient safety within the country. This gap highlights the need for future research and a more in-depth examination of the topic, in order to provide a more solid foundation for guiding health policies and clinical practices in the field of rehabilitation in Portugal.

CONCLUSION

Rehabilitation care, by promoting accessibility, safety and achieving the greatest possible autonomy, plays a crucial role in restoring a person's physical and psychosocial well-being. This intervention process contributes to a scientific foundation and aims to optimise functionality, taking into account not only physical limitations but also emotional and social aspects.

By strengthening the individual both physically and psychologically, rehabilitation care helps to boost self-esteem and confidence. Furthermore, this holistic approach fosters a deeper understanding of the individual's rights, ensuring that interventions are aligned with ethical and regulatory principles. It is worth noting that EEER care not only seeks functional recovery but also creates conditions conducive to a more complete and integrated 'good life' within society.

This study highlighted that rehabilitation nurses have specific reasons for asserting that they add value to patient safety through the way they manage care, the intervention strategies they employ, the promotion of self-care and the prevention of complications, as well as through their commitment to fostering people's autonomy and independence.

The results of this study indicate that the inclusion of rehabilitation nurses in healthcare teams can improve patient safety and quality of life. Public policies should recognise the fundamental role of these professionals in promoting autonomy and preventing complications, whilst encouraging their integration into multidisciplinary care. Furthermore, it is essential to invest in the continuing professional development of rehabilitation nurses and in adapting environments to optimise patients' self-care and recovery.

It is important that these professionals have the skills to identify architectural and social barriers, act as advocates for patients and their families regarding available resources, and adopt strategies for managing the physical environment to enable adaptations for self-care, thereby enhancing safety.

By empowering patients and carers to take an active role in self-care and the prevention of complications, the rehabilitation nurse promotes patients' autonomy and independence and contributes to more effective and safer rehabilitation, improving their quality of life and general well-being. The importance of adhering to the principles set out in Portuguese legislation is emphasised in the statements made by rehabilitation nurses.

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Conceptualisation: KCF; MMM
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