THE MEANING OF THE NURSING PROCESS FOR UNDERGRADUATE NURSING STUDENTS

O SIGNIFICADO DO PROCESSO DE ENFERMAGEM PARA ALUNOS DE GRADUAÇÃO EM ENFERMAGEM

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ABSTRACT

Objective: to understand the meaning of the nursing process for students and the difficulties to implement it. Method: this is a qualitative study, which follows the phenomenological trajectory, with 21 students from the last semester of the undergraduate Nursing course. The research questions were: “How do you think the nursing process is like?” and “What are your difficulties to implement it?”. After the interviews, the discourses were transcribed and analyzed through units of meaning. The research project was approved by the Research Ethics Committee of Universidade Jose do Rosário Vellano, under the Protocol 54/2008. Results: the units of meaning were: Methodological instrument; Private function of the nurse; Contextualizing the nursing process; Contributions of the nursing process; and Limitations to achieving the nursing process. Conclusion: the nursing process is indispensable to guide nursing care and the professional who uses it will be able to improve cognitive and psychomotor skills.

Descriptors: Nursing Process; Undergraduate Nursing Students; Nursing Diagnosis; Patient Care; Nursing.

RESUMO

Objetivo: compreender o significado do processo de enfermagem para discentes e as dificuldades para implementá-lo. Método: trata-se de estudo qualitativo, seguindo a trajetória fenomenológica, com 21 acadêmicos do último período de graduação em Enfermagem. As questões de pesquisa foram: “Como é para você o processo de enfermagem?” e “Quais são suas dificuldades para implementá-lo?” Após as entrevistas, os discursos foram transcritos e analisados a partir das unidades de significado. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa da Universidade José do Rosário Vellano, sob o Protocolo n. 54/2008. Resultados: as unidades de significado foram: Instrumento metodológico; Função privativa do enfermeiro; Contextualizando o processo de enfermagem; Contribuições do processo de enfermagem; e Limitações para a realização do processo de enfermagem. Conclusão: o processo de enfermagem é imprescindível para orientar a assistência de enfermagem e o profissional que o utiliza será capaz de aprimorar habilidades cognitivas e psicomotoras.

Descritores: Processo de Enfermagem; Acadêmicos de Enfermagem; Diagnóstico de Enfermagem; Assistência ao Paciente; Enfermagem.

RESUMEN

Objetivo: comprender el significado del proceso de enfermería para discentes y las dificultades para implementarlo. Método: esto es un estudio cualitativo, siguiendo la trayectoria fenomenológica, con 21 académicos del último semestre de graduación en Enfermería. Las preguntas de investigación fueron: “¿Cómo es para usted el proceso de enfermería?” y “¿Cuáles son sus dificultades para implementarlo?”. Después de las entrevistas, los discursos fueron transcritos y analizados desde las unidades de significado. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación de la Universidad José do Rosário Vellano, bajo el Protocolo n. 54/2008. Resultados: las unidades de significado fueron: Instrumento metodológico; Función privativa del enfermero; Contextualizando el proceso de enfermería; Contribuciones del proceso de enfermería; y Limitaciones para la realización del proceso de enfermería. Conclusión: el proceso de enfermería es imprescindible para guiar la atención de enfermería y el profesional que lo utiliza será capaz de mejorar habilidades cognitivas y psicomotoras.

Descritores: Proceso de Enfermería; Académicos de Enfermería; Diagnóstico de Enfermería; Atención al Paciente; Enfermería.

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INTRODUCTION

Nursing, characterized as a dynamic profession, needs a working tool which is able to reflect this dynamism. The nursing process (NP) is regarded as the most known and accepted assistance tool in the world, facilitating the exchange of information between nurses from various health institutions.\(^1\)

One observes that nursing care is influenced by the modern world, especially in the face of the technological development, something which has led to benefits that lead to technical improvement. However, these improvements can’t distance human care, which constitutes a key factor in the nursing profession. Care must be performed in a systematic way, based on scientific and theoretical knowledge, and not only on technical and practical knowledge.

In this context, NP is of paramount importance, since it provides a systematic care, with a holistic client-driven view, and not only a disease-driven view. Notwithstanding, there’re obstacles to implement it in the daily practice, due to various reasons, whether by lack of clarification with regard to the issue, lack of the professional’s time, a consequence of excessive workload, or lack of human resources.

Given this premise, the Regional Nursing Council (COREN) established, through the Law 7,498, enacted in 1986, that nursing prescription and evolution are private functions of the nurse.\(^2\)

The nursing students adopt NP in a better manner when faced with nurses who are already practicing the profession.\(^3\) Thus, it’s expected that teaching NP in Nursing undergraduate courses can contribute to improve the practices and to definitely implement it in health institutions providing nursing care.

One notices that, with the training of professionals able to implement NP, the tomorrow’s practice field is guaranteed, since nursing students who employ this process are learning to act like professionals in their clinical practice.

Through these reflections, NP is organized into five identifiable stages: clinical evaluation, nursing diagnosis, planning, implementation, and assessment.\(^4\) In practice, not always occur the separation of actions into stages, as they are interrelated and interdependent, constituting a continued syllabus of thought and action. Thus, the first stage of the methodology consists of history and/or investigation involving the client’s clinical evaluation.\(^5\) In turn, the second stage is related to nursing diagnosis, defined as a clinical judgment on the individual, family, or community’s reactions.\(^6\)

The third stage of this process focuses on planning, and the care plan which is defined to assist the client. Then, there’s the implementation of nursing, which consist in putting the plan into action. Finally, there’s the assessment stage, in which the nurse assesses the client’s progress towards obtaining the aimed results.\(^4\)

Given the above, one justifies carrying out this study, since it contributes to the reflection of nursing students on the need for developing and implementing NP to provide the client, family, and community with a holistic and good quality care. One proposes, this way, to treat, cure, or relieve the problems detected, preventing the nursing team to take undue and empirical actions.

OBJECTIVE

- To understand the meaning of the nursing process for students and their difficulties to implement it.

METHODOLOGY

Qualitative study, following the phenomenological trajectory. One understands that the qualitative method allows the observation and description of the way how experience happens, through which one knows the object under investigation, reviving the theme surveyed and allowing an understanding of the various meanings offered within the daily relationships.\(^7\)

Along with the qualitative approach, the study was based on the phenomenological trajectory, since it aimed at unveiling the students’ experience with regard to NP. Thus, one believes that phenomenology is the methodology which has a better connection to the proposed aims, as its purpose is describing experience as it actually presents itself or as it’s experienced, including the meaning it has for the individuals participating in it.\(^8\)

There’re three moments in the phenomenological trajectory: description, reduction, and understanding.\(^9,10\); necessarily, understanding points to an interpretation.\(^11\)

The subjects were made aware with regard to the study’s objectives and informed that the ethical precepts would be ensured, including anonymity. Thus, they were asked to sign the Free and Informed Consent Term, according to the Resolution 196/96, which deals with research involving human beings.\(^12\)
The sample consisted of 21 nursing students from the last semester of the Class 2004/02, which attended the discipline “Nursing Assistance Systematization (NAS)” in the fourth semester of the undergraduate course of Universidade Jose do Rosario Vellano (Unifenas), in the town of Alfenas, Minas Gerais, Brazil. The interviews were recorded on K7 tapes, with the subjects’ permission.

The guiding questions were: “How do you think the nursing process is like?” and “What are your difficulties to implement it?”

The number of participants was defined through the saturation process, from the time when there were repeated answers from the students interviewed and they stopped presenting something new to the phenomenological understanding.13

After the interviews, the speeches were fully transcribed, respecting the reliability of discourses and with successive readings of every description as a whole, for preparing the units of meaning, which is a division of text, more or less equivalent to a division of paragraphs.

Along with the completion of the categorization of units of meaning, there were the understanding and correlation of the discourses, which were compared to those reported in the literature.

The research project was sent to the Research Ethics Committee of Unifenas, and it was approved under the Protocol 54/2008.

RESULTS AND DISCUSSION

After the successive full readings of discourses, the following units of meaning were prepared: Methodological instrument: Private function of the nurse; Contextualizing NP; Contributions of NP; Limitations to achieving NP.

♦ Unit I – Methodological instrument: private function of the nurse

NP is an assistance tool which should be exclusively used by the nurse.14 Thus, it’s understood as a methodological tool which allows one to identify, understand, describe, explain, and/or predict how the clientele responds to the health problems.15

[...] It is an exclusive activity of the nurse [...]. (D8)

NP consists of steps which involve identification of the client’s health problems, the nursing diagnosis design, the establishment of a care plan, the implementation of planned actions, and the assessment.16,17

[...] The nursing process aims at many aspects, you know, anamnesis, there’s the evaluation, you’ll analyze the evolution, there’re many points, you know, you have to follow a sequence [...]. (D2)

It’s worth stressing that NP implies the use of a labor methodology, besides guidance and training of the nursing team for implementing the systematized actions.18

♦ Unit II – Contextualizing the nursing process

As the art and science of caring for, nursing is needed by all nations, indispensable in any season and a must to the preservation of health and life of human beings at all social levels, classes, or statuses.19

[...] The nursing process, for me, is the art of caring for [...]. (D1)

[...] The nursing process is treating the patient as a whole [...]. (D7)

Applying NP in daily care is characterized by the scientificity of the involved professionals’ knowledge, since it requires knowledge and implementation in practice, as well as it enables providing the client with a holistic care.20

♦ Unit III – Contributions of the nursing process

To provide a good quality care, it becomes indispensable to effectively meet the client’s needs, promoting active participation in her/his own care, according to her/his individuality, besides having a holistic view of the human being.21

[...] Ah, the nursing process, for me, is caring for, you know, with assistance, you, ah, aim at the quality of the care which you are providing itself [...]. (D10)

NP is the method through which the nursing practice is applied, with the purpose of contributing to the quality of the care provided to the client.22

It’s worth stressing that, besides influencing the organization/optimization of care, NP also facilitates the nursing team’s work to locate in the patient’s medical record the information concerning the treatment evolution and the care which will be provided.23

[...] The nursing process facilitates the nursing service [...]. (D5)

♦ Unit IV – Limitations to achieving the nursing process

It’s important to emphasize that the hindering factors to the implementation of NP point to the group’s unpreparedness, the lack of interest and also the lack of professionals, time, and willingness of managers of services, the philosophy of the institution, the complexity of the method, the lack of
awareness, the lack of interest and motivation of the nursing professional.24,25

In the organizational aspect, the lack of nursing staff/nurses is the predominant factor hindering the implementation of NP.26

[…] It would be a reduced amount, you know, of employees, this makes it difficult to implement, due to a small number of employees […]. (D2)

Adding to this, there’s also a lack of knowledge of nurses on NP, constituting a barrier to its adhesion to the actual use of this assistance method in the health care institutions.27

[…] Many still don’t understand, don’t comprehend what this nursing process is […]. (D13)

One point that should be emphasized is the fact that there’re still many gaps in the knowledge production on the theme, especially in the analysis of administrative characteristics of the health institutions, as well as in the position and autonomy of nursing, in the concentration of power within institutions, and its interference in the implementation of the NP stages.28

[…] I think the difficulty ends up being the hospital’s protocol itself […]. (D5)

Thus, the philosophy of hospital institutions, by standing out for routine and authoritarian management and reduced spending, decrease the quality of nursing care, something which is incoherent, disagreeing with the proposals of the Professional Practice Law.2

[…] It’s the lack of professionals’ adherence […]. (D9)

The nurse’s overload with management and care activities in the institution can lead to physical and emotional exhaustion, lack of opportunity and time to perform the care actions and assess the results.19

[…] The biggest difficulty, in my opinion, is the lack of time… sometimes, there’re many patients with an only nurse […]. (D7)

Another hindering and/or complicating factor to implement NP is the dichotomy between teaching and practice. One regards as a major failure, on the part of schools and health institutions, not providing a scientific methodology which guides the nursing care which best suits the conditions and characteristics of their clientele and which are studied and planned by agreement.29

Although the professionals obtain knowledge during the undergraduate course, it’s still a predisposing factor for the implementation or not of NP in the professional practice.30

[…] We see a lot of theory, but in practice it’s completely different […]. (D10)

The meaning of the nursing process...

NP constitutes a subject which still presents a huge gap between knowledge production and its applicability to the student’s daily practice. Thus, there’s a need for making educators aware to associate scientific knowledge and technical skill to the interest, dedication, and sensitivity required by a humanized care.

The combination of these aspects provides the caregiver and the person being care for with confidence, so that she/he can break the sense of emptiness in the client-professional relationship, and it must permeate every moment of the undergraduate student’s clinical practice.

Therefore, NP is indispensable to guide nursing care, where the professional who uses it as a guiding instrument will be able to improve cognitive and psychomotor skills to associate theory to practice, relating multidisciplinary knowledge and establishing deeper and more productive labor relationships, aiming at a better quality of the client’s care.

REFERENCES


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