PERCEPTION OF NURSES ABOUT THE QUALITY MANAGEMENT IN NURSING CARE

ABSTRACT

Objective: describing the perception of nurses about the management of quality in nursing care in surgical clinical unit. Method: an exploratory and descriptive study, with qualitative approach, conducted at a university hospital in Southern Brazil. Semi-structured interviews were made with ten nurses evaluated through thematic analysis. The research project was approved by the Research Ethics Committee, CAAE 162266613.8.0000.5346. Results: the analysis of the interviews allowed the construction of the category “Quality Management of nursing care”; and its respective subcategories “Management of nursing care to the patient and family” and “Professional nursing practice in care management.” Conclusion: quality management in nursing care in surgical clinical unit is permeated by relationships between nursing care, family care, user satisfaction, domain of scientific knowledge by nurses and teamwork. Descriptors: Nursing; Quality Management; Nursing Care; Perioperative Nursing; Qualitative Research.

RESUMEN

Objetivo: describir la percepción de las enfermeras acerca de la gestión de la calidad en la atención de enfermería en una unidad clínica quirúrgica. Método: estudio exploratorio e descritivo, con abordaje cualitativo, realizado en un hospital universitario en el sur de Brasil. Entrevistas semi-estructuradas se llevaron a cabo con diez enfermeras evaluadas a través del análisis temático. El proyecto de investigación fue aprobado por el Comité de Ética en la Investigación, CAAE 162266613.8.0000.5346. Resultados: el análisis de las entrevistas permitió la construcción de la categoría “Gestión de la Calidad de la atención de enfermería”; y sus respectivas subcategorías “Gestión de la calidad de enfermería en paciente e familia” y “Práctica profesional de enfermero en gestión de la atención de enfermería”. Conclusión: la gestión de la calidad en la atención de enfermería en unidad de clínica quirúrgica está permeada por las relaciones entre cuidado de enfermería, cuidado familiar, satisfacción del usuario, dominio del conocimiento científico como enfermeros y trabajo en equipo. Descriptores: Enfermería; Gestión de Calidad; Cuidados de Enfermería; Enfermería Perioperatoria; Enfermería Perioperatoria; Investigación Cualitativa.
INTRODUCTION

In contemporary times, there is evidence of a growing concern about the management of quality in health, highlighting that in the search for nursing care of quality is historical and began with the actions proposed by Florence Nightingale. The concept of quality is built in the lived historic moment. Thus, it is a subjective concept constantly changing, being determined according to technical and scientific parameters, health needs of the population associated with the cultural values of society.

Quality is defined as a set of attributes that includes a level of professional excellence, efficient use of resources, a minimum of risk to the customer, a high level of satisfaction by users, considering the existing social values.

Points out that the quality is founded on seven pillars: efficacy, effectiveness, efficiency, optimization, respectability, legitimacy and equity. Still, the evaluation of quality in health should be carried out from the concepts of structure, process and result.

In this sense, the nursing as part of health care, experiencing an evolutionary moment in the way to manage, since the care management is directly related to the search for healthcare quality and better working conditions for professionals. Therefore, the nurse acts in performing the care, management of human and material resources, leadership, planning assistance, training of nursing staff, reflecting maturing of their practice in the care production coordination and evaluation of nursing actions.

Considering the surgical clinical unit, it perceives the need for special care during the perioperative period and, in particular, nursing care, aiming to provide a postoperative recovery faster, reduce complications, reduce hospital costs and the hospitalization period. Thus, the nurse as manager of care should play actions in order to have excellence in the management of quality of care for the surgical patient, from the planning of care activities of nursing.

In order to contribute to the management of the quality of nursing care in surgical clinical unit, it wonders: “What is the perception of nurses about the management of quality in nursing care in surgical clinical unit?”

To answer this question, this study aims to understand the perception of nurses on the management of quality in nursing care in surgical clinical unit.

METHOD

This is an exploratory and descriptive study with a qualitative approach. The data collection scenario was one Surgery Unit of a university hospital located in southern Brazil. This hospital is characterized as tertiary (of high complexity) and is a reference in health for the central region of the State of Rio Grande do Sul. It acts also as a teaching hospital, with its attention focused on the development of teaching, research, extension and health care.

The participants were ten nurses who, after reading the Informed Consent (IC) agreed to participate. Inclusion criteria used for selection of the study participants were: statutory server, operating for more than six months in the sector, since it is justified that this time is suitable for the adaptation of professional development and the perception of quality management in nursing care. It had as exclusion criteria: nurses on vacation, license award, health or maternity in the planned time of data collection, which did not happen. Soon, the participants were all nurses crowded to the unit.

Data collection was conducted between the months of July to September 2013 by semi-structured interview recorded in digital system. To preserve anonymity, interviewees were identified by the letter E (for nurse in Portuguese), followed by ordinal number in the sequence of interviews (E1, E2, E3 ... E10).

For the analysis we carried out a thorough reading of transcribed and printed interviews, as the operative proposal of Minayo. In this method the subject is connected to an assertion about a certain issue, which involves a group of relations and can be graphically represented by means of words, phrases or a summary. There are three steps: pre-analysis, exploration of material, treatment of results and Interpretation.

Each interview was analyzed individually from the text of the reduction in words and meaningful phrases that emerged during reading and marked by color facilitates the classification and aggregation of data for formation of generative themes of the results. After this step, it created a “clothesline” where interviews were fixed and exposed to facilitate thematic analysis of the issues, to begin its exploration of the material and interpretation of results.

The study followed the Resolution of the National Health Council nº 466 of December 2011.
Survey participants were between 33 and 53 years old, being eight female professionals. The time of service in the unit ranged from 10 to 25 years, two had other employment and average hours worked per week was of 30 hours. All are specialists; one was studying master and another doctorate. Of these, three have qualification in management.

The report of the survey participants revealed that the management of nursing care quality in surgical clinical unit in the perception of nurses is permeated by relationships between nursing care, family care, user satisfaction, the domain scientific knowledge by nurses and teamwork.

Thematic analysis of the interviews allowed the construction of the category: Quality Management of nursing care; and its respective subcategories: nursing care management to the patient and family and the professional nursing practice in care management.

Management of the nursing care to the patient and family

Caring is, first of all, an act of life, in that it is an endless variety of activities designed to maintain, sustain life and enable him to continue and reproduce.11

The nursing care is seen as an intentional phenomenon, essential to life, which takes place at the meeting of humans interacting through actions involving awareness, diligence, solidarity and love; expressed even by a “know-how” grounded in science, art and ethics, directed to the needs of the individual, family and community.12

It emphasizes the importance of humanized care and its relation with the quality of care provided. It is considered the care of the human being the essence of nursing, and in this way, nursing care should be provided humanely with a comprehensive approach and individual, shimmering quality care.13 A review study highlights14 different modes of nursing care, as the appreciation of humanized care with an emphasis on communication and the bond between the professional, the patient and family.

[…] All that you are going to do with the patient, I think if you do it with affection, with love, if you do a quiet way, demonstrating safety for the patient, I’ll be demonstrating quality. (E8)

From the previous interview, it is clear that care is associated with quality and that, in turn, is part of the nursing care management, which in its theoretical conception, involves a dialectical relationship between the know-how manage and the know-how caring, dimensions in the nursing work process. In this context, the concept is not divided into two parts - the management and care - though it is made up of two meanings that while opposed, approach and complement.15

In the process of the nursing work, especially in hospitals, nurses have assumed increasingly complex functions such as caring for more severely ill patients, organizing activities and coordination of services, developing care activities and managerial16 that require quality. But they will not let the quality:

[…] quality is part of everything we do, care management, from the time you come to receive on duty [...]. (E10)

It is understood that the quality of care is closely related to the management of care. In a study conducted in a hospital emergency service with nurses, it was noticed that one of the challenges in care management is to maintain the quality of care provided to patients. These often require attention not always the nursing staff can match in terms of unit labor characteristics.17

Given the increasing activities and functions under the nurse's responsibility, this leaves background care that emphasizes the subjectivity of the patient, and has the technical and procedural care.

Care is not only curative but also preventive, health education and care for the maintenance of life, involving lifestyle, beliefs and values of the subject, sick or not.18 Thus, it is clear that the nursing work process, it should seek to serve the singularities and individual patient needs.

[…] a related quality perception in attendance is individuality; it is we call the patient by the name […] when we call people by name we are providing a quality care at the time we care about the family […]. (E2)

[…] dedication is to be present […] along with the patient […] take the role of the family or the patient […]. (E5)
In a research\(^6\) that reflected the challenge of the nursing team before the care of man as a unique and integral being, comprising his physical, mental, social and spiritual dimension. Still, it is an indispensable task meeting the needs of patients because nurses must be aware of the fact that the experiences in order to care for them as a whole, highlighting their uniqueness. Thus, it becomes possible to realize a humane and dignified care of the needs of the care.\(^9\) In this context, it is noteworthy that the nursing staff must understand the needs not only of the patient but also the family, encouraging them to stay to side of the patient, receiving information about the treatment and care to be dispensed.\(^20\)

To reflect on the context of care, this should not be seen as an isolated action, but should take into account the involvement of all parties that make up this process, since the family actively participates in this scenario, and you can make an important element in the continuity of care at home, since many patients in surgical clinic may have limitations due to the surgery.

\[ [...] \text{When we care about the family, it is also a time to pay quality service, call a friend, guide the family, train the family} \ldots \text{[the patient] must have a continuum of home-based care and we understand that the family is a very important factor in this process} \ldots. \text{(E2)} \]

It is understood that the family acts as an integral part of care, that is, one that is next to the patient and experiences with nursing staff to develop their actions and care.

Another aspect identified by the speech of nurses is the relationship of the quality of care with patient satisfaction. The evaluation of patient satisfaction can be adopted as a strategy to obtain perceptions about the quality of health care, which enables the acquisition of information that benefit the organization of these services\(^3\) and the management of health care.

A study\(^2\) showed that for the provision of quality nursing services, targeted interventions are needed to care management, among them meet the expectations of citizens, that is, and consider patient satisfaction as a quality indicator.

\[ \text{The most important in our work is the patient. So I think that from the moment the patient is satisfied with the service that you are paying, you can already tell that you are having quality of care. (E6)} \]

Thus, in this subcategory, it perceives the management of nursing care quality in surgical clinical unit; it is related to nursing care, family care and user’s satisfaction.

**The professional practice of the nurse in care management**

The subcategory “The professional nursing practice in the care management” emerged from the units of meaning related to the domain of scientific knowledge by nurses and teamwork.

The survey results corroborate the study\(^23\) reveals that knowledge as an important tool for the professional and job success. Institutions need and depend on the knowledge of their professionals so that they can achieve excellence in quality of service,\(^23\) performing care with safety and quality.

In nursing service quality of care goes towards professional practice based, among other factors, in the nursing body of knowledge.\(^24\)

Nursing is a significant part of human resources of hospitals and therefore directly affects the efficacy, quality and cost of health care provided.\(^16\)

\[ [...] \text{if the person has attention, dedication and knowledge she is paying, managing quality} \ldots \text{knowing and taking care you will be able to make quality management. (E5)} \]

\[ [...] \text{quality management is you have domain knowledge, of your duties, you get to work in a team, you motivate people to care front of the patient to provide better care. (E7)} \]

The nurse, as a fundamental part of the hospital organizational structure, should be concerned about his professional development.\(^16\) Qualitative personnel must be compatible with the needs of each health institution, and that each professional has adequate conditions to perform his work activities as it is crucial that there be a work in consolidated staff.\(^25\)

The patient care can be influenced by the working relationship between the health staff. It is therefore crucial that the decisions to be taken in relation to care allowing the participation of team members and especially the patient, prioritizing comfort and quality of life.\(^26\) Nursing care requires the integration and communication between all professional and teamwork, enabling the assistance to be carried out effectively, because it creates a partnership between professionals to achieve excellence in care.\(^27\)

Thus, we can see, through the reports, which, in addition to the ability to exercise...
care quality work that meets the needs of the patient, good relationships and teamwork proves a great ally in the effectiveness of health care activities.

[... the people [...] need to share information to making decisions. When we planned care, [...] nursing through nursing process [...] they [the nurses] share this information with other professionals, with other knowledge. The care [...] becomes more skilled. (E2)

[...] It is evident that a team that works together, [...] and [...] in harmony until the passage of duty, one can realize that there will influence the quality of care. (E10)

For the implementation of the care, the nurse must plan, organize, coordinate, execute and evaluate nursing care services, requiring the integration of all team members. So communication is the basis of the work they do, as when occurring situations are not transmitted to the other team member or communication is failure, there may be a misunderstanding between professionals and even affect the patient.27

The multidisciplinary team of experiences in palliative care in hospitals indicates weaknesses and team challenges such as the need to qualify communication and teamwork.26

Participants cite the nursing process as an important action to share information. It is necessary that the entire multidisciplinary team raises awareness of the importance of implementation of the nursing process in hospital care and collaborative participation, and thus contribute to promote assistance and learning excellence.25

The nurse in quality management in surgical clinical unit should be concerned with professional practice in care management, which in this study is related to the domain of scientific knowledge by nurses and teamwork.

**REFERENCES**


**FINAL NOTES**

Thematic analysis of the interviews allowed the construction of the category Quality Management of nursing care; and its respective subcategories: Nursing care management to the patient and family and The professional nursing practice in care management.

Quality management in nursing care in surgical clinical unit, in the perception of the study nurses is permeated by relationships between nursing care, family care, user satisfaction, the domain of scientific knowledge by nurses and team work.

It is shown as a limitation of this study, the fact that it was performed in a hospital which is suggested to carry out further research on the topic in order to contribute to building knowledge about quality management in nursing care in unit surgical clinic, and other areas as well as formulate theories on the perception of nurses on the management quality in nursing care, using other research methods on this topic. It emphasizes the importance of these results in order to call the professionals and managers to the commitment to the quality of hospital service.


Perception of nurses about the quality...