NURSING STUDENTS' PERCEPTION ABOUT THE SYSTEMATIZATION OF PERIOPERATIVE NURSING CARE

Percepción de los estudiantes de enfermería en la sistematización de la asistencia de enfermería perioperatoria

RESUMO

Objetivo: identificar la percepción de los estudiantes de enfermería en la sistematización de la asistencia de enfermería perioperatoria. Método: estudio descriptivo-exploratorio, realizado con 20 estudiantes universitarios del curso de enfermería de la Universidad de Sao Paulo, aprobado en la disciplina de Atención de Enfermería Perioperatoria. La recolección de datos fue realizada a través de un cuestionario compuesto por dos partes: caracterización de la población y la identificación de la percepción. Se utilizó una planilla de Microsoft Excel® para el análisis estadístico descriptivo e análisis de contenido de las justificaciones. Resultados: la sistematización regula el cuidado perioperatorio; debe ser aplicado en todas sus etapas y destaca el trabajo científico de las enfermeras. La percepción de los estudiantes revela una brecha entre la teoría y la práctica y la necesidad de profundizar en el conocimiento para permitir la implementación y la formación de profesionales cualificados. Conclusión: la sistematización es una herramienta esencial para el enfermero, por lo que hay evidencias claras de la dificultad de implementación en la práctica profesional. Descriptores: Percepción; Estudiantes de Enfermería; Educación en Enfermería; Procesos de Enfermería; Enfermería Perioperatoria.

RESUMEN

Objetivo: identificar la percepción de los estudiantes de enfermería en la Sistematización de la Asistencia de la Enfermería Perioperatoria. Método: estudio descriptivo-exploratorio, realizado con 20 estudiantes universitarios del curso de enfermería de la Universidad de Sao Paulo, aprobado en la disciplina de Atención de la Enfermería Perioperatoria. La recolección de datos fue realizada a través de un cuestionario compuesto por dos partes: caracterización de la población y la identificación de la percepción. Se utilizó el software Microsoft Excel® para el análisis estadístico descriptivo e análisis de contenido de las justificaciones. Resultados: la sistematización regula el cuidado perioperatorio, debe ser aplicado en todas sus etapas, y evidencia el trabajo científico de las enfermeras. La percepción de los estudiantes revela una brecha entre la teoría y la práctica y la necesidad de profundizar en el conocimiento para permitir la implementación y formación de profesionales capacitados. Conclusión: la sistematización es un elemento esencial en la práctica profesional, pero hay evidencias claras de la dificultad de implementación en la práctica profesional. Descriptores: Percepción; Estudiantes de Enfermería; Educación en Enfermería; Procesos de Enfermería; Enfermería Perioperatoria.

Descriptors: Perception; Nursing Students; Graduation in Nursing; Nursing Processes; Perioperative Nursing.
Nursing directs its care from the identification, assessment and intervention on the needs of the individuals, family, group and community. Historically, this work went through different types of knowledge, being molded by the professionals who began to develop theories and concepts that, besides guiding the practice, allowed the formation of the professional identity, which resulted in the characterization of nursing as a profession.1,4 Thereby, with the science development, the construction of the knowledge in different and specific areas became important, mainly the perioperative nursing when considering this study.

Initially, the nursing in operating rooms was specifically for the maintenance of the environment, to keep it safe, comfortable and clear.5 The evolution of the Nursing course, in this case, was directed to instrumental aspects, helping the physicians and organizing and providing materials, setting the care to the patient undergoing a surgery.6

The development of health care regarding the operating room, the surgical and instrumental techniques, as well as innovations in other specialties, demanded the health staff, specially nurses, to improve the scientific qualification.5 Thus, nursing, concerning the global health, structure its assistance in order to build a knowledge focused on acting, evaluating the work and reorganizing the care, the Systematization of the Nursing Care (SNC).

The SNA reassembles the care and unifies the work of the nursing staff, once it is based on the process of communication between professionals and on the patients’ reality and needs, organizing the professional work related to the method, apparatus and personnel so that it is possible to operationalize the Nursing Process (NP).7

The Resolution N° 358/20098 of the Nursing Federal Council (COFEN) states about the SNA in Brazilian health institutions, considering it as a private activity of the nurse compound by scientific methods and strategies for the identification of health conditions/disease, supporting nursing care actions that may contribute to the promotion, prevention, recovery and rehabilitation of the individual and his/her family, being the nurse also responsible for implementing, planning, organizing, executing and evaluating the NP.5

This practice involves the patient care in the operating room environment and the hospitalization unit. In this work process, the nurses are responsible for both the perioperative nursing care as the accomplishment of management activities. However, certain health services has divisions of tasks among the nurses of the operating room staff, in which some become responsible for administrative and bureaucratic activities, and others, for the patient care.3

Regarding the direct care, nursing improves and consolidates its own types of knowledge in various areas from NP - a methodological, systematic and humane instrument used to guide the professional nursing care. It is considered systematic for it has five stages (history of nursing, nursing diagnosis, planning, implementation and evaluation), and humanized for it is individualized and subjective.9,10 The conceptual marks and nursing theories are tools that support the operationalization of the NP, being the first publication about NP in Brazil from 1979, by Wanda Horta, with the book “The Nursing Process”.1,11

Therefore, the NP is characterized by flexibility and dynamism, organizing and directing the clinical practice of nursing and the nurse’s work in investigating the patient’s data, identifying care needs, recommending interventions and evaluating the results. Thus, it is a method to operationalize the nurses’ work for enlarging nursing actions, related to the systematization of care.4,11

Most Brazilian hospitals failed to implement the NP methodology, with all its stages. The success or failure of implementing nursing care depends on the nurse and each institution.3,4 A study showed that there is an initial resistance among health professionals about the SNC, which favors the apprenticeship of nursing care, encouraging both students as service users and their families.2 Another study stated that the main difficulties faced by nurses for not working the NP are the lack of time and poor knowledge related to the NP and nursing classifications.5

In perioperative nursing, according to the Brazilian Society of Nurses in Surgical Center, Anesthetic Recovery and Material and Sterilization Center (SOBECC), that formulates the guides for the practice, promotion and dissemination of perioperative nursing, the Systematization of Perioperative Nursing (SPN) is identified as a proper organization tool, with the following phases: preoperative nursing visit, planning perioperative care, the implementing the care, evaluation with post-operative nursing visit and redesign of care.12

SPN was created in 1985 with the objective of promoting the complete, individualized, documented, evaluated and ongoing care to...
Considering the mentioned scenario, the following question arises: what is the perception of nursing students in relation to the SPNC? To answer it, the following objectives were established:

- To identify the perception of the Nursing students about the Systematization of the Perioperative Nursing Care;
- To characterize the population regarding gender, marital status, origin city, technical education, work or internship in the perioperative area;
- To identify the perception of the students about the theoretical and practical content of the discipline Perioperative Nursing;
- To identify the perception of the students about the stages and viability of implementing the Systematization of the Perioperative Nursing Care.

**METHOD**

Descriptive-exploratory study, with a population compound by Nursing students from the Nursing College of the State University of Campinas (UNICAMP) that, in 2013, attended the classes of the discipline Care Process in Perioperative Nursing.

The discipline has a total of 120 hours, being 45 hours of theoretical content, and 75 hours of practical content, performed at the centers of material and sterilization, surgical center and post-anesthetic recovery unit. The activities were accomplished at the Clinics' Hospital of UNICAMP.

In August and September, the literature review about Nursing Process (NP) and Systematization of the Perioperative Nursing Care (SPNC) was conducted in the Latin-American and Caribbean Literature (LILACS), Electronic Library of Brazilian Scientific Journals (SCIELO), International Literature (MEDLINE) and Virtual Library in Health (VLH) databases.

The instrument for data collecting consisted of two parts: the first one is related to the characterization of the students, including the variables: gender, age, marital status, origin city, technical education, job or internship in the perioperative area; the second one, specific to identify the perception of the students about the theoretical and practical content of the perioperative nursing discipline, the phases and the feasibility of implementing the SPNC.

The second part contains the answers to the questions using a Likert scale, a non-comparative five-point scale ranging from "strongly agree", with value one, to "strongly disagree", with value five.
Ferraz KMC, Gonçalves MCS, Duran ECM.

agree", with value five, which can be used to evaluate products/services where the respondent fulfill a single item according to his/her satisfaction leve.15 Furthermore, the individuals justified their answers in a suitable space and, lastly, wrote about the experience in the practice fields of the discipline using the SPNC.

For the collecting, the researchers submitted the project to the Graduation in Nursing Committee, which approved the implementation of the study at the Nursing School of UNICAMP. The coordinator of the discipline was also informed about the study. Once these points were informed and accepted, a meeting with the graduate students to explain the research’s objectives was scheduled, and an email to invite them was sent. The questionnaire and the Term of Free Consent and Informed (TFCI), with two copies, were delivered to all of the students joining the study, and so a period of seven days was established to return the questionnaire and the TFCI.

Due to the return period of the questionnaires coincide with the end of the academic activities of the semester, the students found difficult to return them. In an attempt to solve the problem, the return date was extended, but, still, four questionnaires did not return.

The software Microsoft Excel® was used for the descriptive statistical analysis and for the analysis of the content of the students’ responses. The research was delivered to the Research Ethics Committee of the Medical Science College of the State University of Campinas (UNICAMP), in October 2013, and was approved in November 2013, under the opinion number 435.572.

RESULTS

The sample consisted of 20 nursing students: 95% (n = 19) were women and 5% (n = 1), men; age from 20 to 26 years, with an average of 22 years with a standard deviation of 1.6 years. Regarding the origin, 90% (n = 18) were from the state of São Paulo, 5% (n = 1) from Minas Gerais and 5% (n = 1) from Rio de Janeiro; 45% (n = 9) live in the metropolitan region of Campinas, 10% (n = 2) in the metropolitan region of São Paulo and 45% (n = 9) in other cities. Concerning the technical education, 35% (n = 7) said they had graduated the technical course in nursing and all of them developed practical activities in the perioperative area, and 14.2% (n = 1) had already worked in that area.

When asked about the contribution of the theoretical content of perioperative nursing in acting as a nurse, 60% (n = 12) of the students report using the content taught in the course in the practice of nursing, fully agreeing, scoring one in Likert scale. Among the respondents, 50% (n = 10) scored two according to Likert scale, agreeing that the theoretical content of nursing contribute or will contribute in the use of SPNC and 25% (n = 5) strongly agreed, punctuating one, although reporting a weak theoretical content about SPNC.

The practical activities in the center of material and sterilization, operating room and post-anesthetic recovery unit contributed or will contribute to the work as a nurse for 70% (n = 14) of the population interviewed. The development of practical activities using SPNC improved the knowledge of the perioperative period for 65% (n = 13) of the respondents, while 60% (n = 12) reported the need for expanding workload.

Among the students, 45% (n = 9) agree, scoring two in the Likert scale, that the Systematization of Perioperative Nursing Care (SPNC) is a nurse working tool that qualifies the care provided to the client and his/her family. The experience with SPNC partially met the expectations according to 40% (n = 8) of the sample, scoring three in Likert scale.

Most of the students, 70% (n = 14), fully agrees - one in Likert scale - that the preoperative visit is an effective tool for nurses in planning the care provided to the surgical client, and 60% (n = 12) fully agrees - one in Likert scale - that the information collected in the preoperative visit provides subsidies that allow them to positively change the implementation of nursing care during surgery and post-anesthetic recovery.

Among all graduate students, 40% (n = 8) agreed, scoring two in the Likert scale, and other 40% (n = 8) fully agreed, scoring one, that the postoperative visit is an effective tool for nurses to evaluate the quality of care provided to the surgical client, since it evaluates the provided assistance.

Most of the sample, 50% (n = 10), agrees, scoring two in the Likert scale, and 35% (n = 7) fully agree, scoring one in the scale, that the SPNC collaborates as a possible reformulation of the care, believing it to be important if correctly done.

Among the respondents, 40% (n = 8) believe it is possible to implement the SPNC in any service to attend the surgical patient, provided there is sufficient human resources, nursing staff commitment, material resources and planning of the institution.

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2111
Nine graduate students answered the question about the experience in practical fields of activity, 15% (n = 3) responded that the SPNC is little used, and were not able to see its implementation; 5% (n = 1) reported that the experience was useful in practical fields of activity, whereas 5% (n = 1) reported that they would like to look for the patient in all operative periods, to have access to the books of the institution and to know how the SPNC was implemented by the nursing staff of the institution. The importance of SPNC in post-anesthetic recovery, where it is mostly viewed, was present for 10% (n = 2) of the students. Finally, 5% (n = 1) reported that the practical activity was essential to consolidate their theoretical knowledge.

**DISCUSSION**

During the academic life, the theoretical and scientific content about the Systematization of Nursing Care and Nursing Process is presented, discussed and applied for and with the students. This construction in nursing provides the development of practice in the perioperative period. Thereby, the nurse who has the opportunity to practice the SPNC during the academic life can apply this scientific method in the future of the professional life. It is essential that graduate students receive adequate training, highlighting the importance of systematization.

Nursing’s objective is to look into the aspects of the impact of the disease on individuals and their families, having its focus of action on the human being. The SNC intends to promote basic human needs affected by the health-disease process and is constituted as a methodological tool that enables the development of the nursing profession as a science, linking the areas of assistance, teaching and research.

The nurse’s NP in the operating room includes the care, management, teaching and research. The Association Perioperative Registered Nurses (APRN) and the Brazilian Society of Nurses in the Surgical Center, Anesthetic Recovery and Material and Sterilization Center (BSNSC) seek the unification of perioperative practice, in order to establish standards for excellence. In this study, the students pointed out the importance of the practical activities of the discipline “Care Process in Perioperative Nursing” both in the Surgical Center as in the Sterilization Center, improving the knowledge with the use of SPNC and highlighting the need to increase the workload.

The NP is a tool that enables the improvement of the professional status of nursing, due to the application of scientific knowledge, and is the implementation of systematic and interrelated actions, providing a management of the nursing assistance. Therefore, the nurse is essential to develop and apply the SPNC, which constitutes the proper tool for organization, and includes the phases of preoperative nursing visit, planning perioperative care, the implementation of assistance, evaluation and post-operative nursing visit and reformulation of the care.

The construction of the knowledge responsible for professional practice begins in the college, being focused on the efficient training of future nurses, contributing significantly to justify this study. In this study, the students agreed (45%, n = 9) that the SPNC is a working tool that qualifies the care provided to the client and the family. In contrast, their experience with the SPNC in practice fields partially met expectations.

Most respondents fully agree (70%, n = 14) that preoperative visit is an effective tool for nurses in care planning for surgical patients, and other 60% (n = 12) fully agree that the information collected in the preoperative visit provides data that allow changing positively the implementation of nursing care during surgery and post-anesthetic recovery.

The preoperative visit is very important in the nurse’s action in SPNC, since it enables controlling the evolution of the patient and early detection of possible errors in nursing care. It also enables reducing the anxiety of the patient and family, for any surgical procedure creates anxiety for the fear of the procedure or anesthesia, and it is up to the nurse to identify weaknesses and interfere, setting as an orientation process about the perioperative period, from the preparation of the patient, proposed procedure, postoperative period, legitimizing the continuity of nursing care in intra- and postoperatively periods. Studies show as difficulties in implementing the SPNC, the function overloading, insufficient number of professionals, time spent, structural and cultural paradigms, inadequate tools, lack of scientific knowledge, not-assumption of the role of leader and educator by the nurse, focusing the care on medical diagnosis and lack of autonomy of the nursing.

In this context, it is necessary to plan and define the role of nurses regarding the action plan focused on the patient in the perioperative period, so that the assistance is good and safe, based on scientific theories and enabling the development and

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Ferraz KMC, Gonçalves MCS, Duran ECM.

**Nursing students’ perception about the...**


2112
consolidation of a specific knowledge of nursing, the SPNC.

Postoperative visit is an effective tool for nurses to evaluate the quality of care to surgical client, since it evaluates the care provided for most respondents, as 40% (n = 8) agree and another 40% (n = 8) fully agree with that statement. Postoperative visit is a moment in which the nurse is able to monitor the patient’s progress and is considered essential to the exercise of the profession. It provides a broader view of the patient, and even of his/her family, and obviously provide valuable information regarding the work of the nurse in the preoperative period, such as the effectiveness of the guidance and information provided during this period.

Most respondents agree (50%, n = 10) and fully agrees (35%, n = 7) that SPNC contributes to a possible reformulation of the assistance, believing it is important if correctly done. However, one of the challenges found by nurses to ensure this improvement is the fact that perioperative nursing care is done, mostly, without proper registration, which complicates the continuity of systematization. A method to evaluate the organization, individualized care and management of the assistance is to build indicators that address the SPNC, which may contribute to improve this situation.

The literature reports that there is a great difficulty in performing the SPNC, and when it is made, it is only applied in parts, though most nurses know its importance. Studies report that, in addition to the difficulties found by some graduate students of this study when performing the practical activities, such as insufficient number of professionals, both nurses as team members, lack of appropriate instruments and overhead functions (characterizing the lack of institution planning), are other difficulties are reported, such as lack of scientific knowledge, focusing the care on medical diagnosis, lack of autonomy of nursing and decrease of the role of leader and educator, by the nurse. In this study, 40% (n = 8) believe that the implementation of the SPNC in any customer service to surgical patients is possible, provided there is sufficient human resources, nursing staff commitment, material resources and planning of the institution, according to the literature.

The practice of SPNC proved to be an essential tool for determining the theoretical content taught in class. Although this was considered insufficient by some students, implementing the systematization can be observed, appearing as the improvement of the patient’s care in perioperative situation, even if not fully performed by the professionals during practical activities.

CONCLUSION

The SPNC is an essential tool for professional nursing practice, and, with this systematization, it is possible to put into practice the planning and promotion of an appropriate care to patients and their families, based on scientific evidence; however, even aware of this importance, there are clear evidences of the difficulty of implementing the SPNC in professional practice, due to factors such as work overload, lack of human resources, inadequate tools, lack of scientific knowledge, lack of nursing autonomy, among others.

Graduate students consider that the SPNC directs the perioperative care and should be applied in all its stages. Furthermore, the action plans for its implementation should be directed in accordance with the reality of institutions; it also comes as a way of showing the scientific work performed by nurses, as well as safe and quality care.

The students’ perception reveals a gap between theory and practice and a need to improve the knowledge of these two aspects, in order to enable the proper implementation and training of qualified professionals, as they believe that the SPNC is important not only in practical level, as a way to plan and improve care, but also in theoretical level as an essential scientific basis of nursing education. Performing correctly all its stages provides subsidy that allows a better care to the patient and family, making it possible to evaluate and improve the quality of services provided during the perioperative period. There is also the need of scientific literature about the theme, being extremely important for the nurses to conduct researches, as scientific studies about SPNC are very scarce.

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2113
Ferraz KMC, Gonçalves MCS, Duran ECM.

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