ABSTRACT
Objective: to identify the perception of nursing professionals on Continuing Education in the Sterilization Center. Method: cross-sectional, descriptive study with a quantitative and qualitative approach, in which data were obtained from the questionnaire to fill and conducting interviews with 17 nursing professionals of a university hospital in northeastern Brazil. Qualitative data were grouped, categorized and analyzed according to the Collective Subject Discourse Analysis technique and for tabulation and analysis of quantitative data, descriptive statistics were used through SPSS Statistical Software 17.0 for Windows. Results: it was revealed a lack of continuing education activities in the sector and insecurity of staff as to the field of new technologies. Conclusion: continuing education is a necessary action for the provision of quality service in the Sterilization Center.

RESUMEN
Objetivo: identificar la percepción de los profesionales de enfermería sobre Educación Continuada en el Centro de Material y Esterilización. Método: estudio transversal, descrittivo, con abordaje cuantitativo y cualitativo, cuyos los datos fueron obtenidos a partir de preenchimento de questionário y realización de entrevista com 17 profesionales de enfermería de un Hospital Universitario del Nordeste de Brasil. Los datos cuantitativos fueron agrupados, categorizados y analizados siguiendo la técnica de Análisis del Discurso Colectivo y, para tabulación y análisis de los datos cuantitativos, fue utilizada estadística descritiva y, por medio del Software Estadístico SPSS 17.0 para Windows. Resultados: se evidenció ausencia de actividades de educación continua en el sector e inseguridad de la equipe quanto ao domínio de novas tecnologias. Conclusión: a educación continua é uma ação necessária para a prestação de serviço de qualidade no Centro de Material e Esterilização.

ORIGINAL ARTICLE
CONTINUING EDUCATION IN A MATERIAL AND STERILIZATION CENTER: PERCEPTION OF THE NURSING TEAM
EDUCAÇÃO CONTINUADA EN CENTRO DE MATERIAL E ESTERILIZAÇÃO: PERcepção da EQUIPE DE ENFERMAGEM

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INTRODUCTION

Modernity and technological advances require special and unquestionable speed dynamics. This fact requires the health professional seek strategies to accompany the process successfully, allowing their skills to provide support for such changes. Therefore, it is necessary an education beyond graduation, enabling professionals to be able to act to ensure their safety as workers, and users of health service. Thus, it is highlighted the need to educate for work, or, more specifically, to train people for professional practice.

The Material and Sterilization Center (MSC) is a technical support area, intended for processing dental-medical articles, responsible for receiving, purge, preparation, cleaning, sterilization, custody, control, distribution, and tracking of materials and equipment that are used throughout the hospital. In the context of healthcare organization in a very peculiar way, it is characterized as a support unit to all care and diagnostic services that require dental-medical articles to provide assistance to its members.

Although the work done in MSC is not directly associated with the care of patients, sterilization efficiency provides reduction of infections related to healthcare, with the consequent better quality of care provided to patients. This sector has great importance for developing closely related activities throughout the hospital, involving professionals from all sectors, in various types of procedures. Therefore, as a vital unit in any health institution, it requires professionals trained in various activities developed there.

However, the work on MSN comes with difficulties often not overcame, reflecting directly on workers in the area and the quality of provided indirect assistance. These difficulties are associated with the work process, including lack of nursing staff, lack of support by institutional demand, precariousness cross-sectoral communication of professionals acting without technical capacity to perform the function and sickened professionals performing incompatible with their skills.

In order to succeed in the operation of the MSC ensuring patient safety, it is necessary to implement continuing education programs (CE) to reach all professionals working in this area, seeking changes in the work process through awareness, engagement, sharing and application of scientific knowledge in professional practice as a fundamental factor for the recognition and appreciation of professionals and infection fight.

Studies indicate the need for implementation of CE programs in health services to contribute to the training of professionals in this area, enabling them to deal with the specific needs of each professional practice, also showing that when such programs are present, there is an improvement in the provision of health care.

The CE appears as an aggregate of experiences after the initial training, and all professionals involved in the sterilization process should be part of this plan, considering the best effort to keep up the knowledge and skills of nursing staff.

In this sense, to fill the gaps of knowledge and at the same time, professionals be able to work in a very complex sector, it is necessary for nurses to count on a strong and capable team to deal with scientific knowledge updated to MSN problems. Thus, there is a clear need for nurses as responsible for sector management - including the management of human resources - to offer CE programs to strengthen the team scientifically and also to promote a good working environment, where interpersonal strengthening is a reality.

Upon this context and the experience of routine in MSN services, it was observed that holders hospitals of an effective EC program can achieve low rates of hospital infection and also have a ridiculous amount of trouble at all stages of the sterilization process. This shows that when used as operating knowledge and guiding the work and actions, nursing knowledge makes this profession increasingly effective and strong, making the health care happen effectively.

Given the shortage in Brazil, studies published on CE programs in MSN urges the need to conduct research aimed at description and analysis of the quality of these programs. In this context, the study aimed to identify the perception of nursing professionals on Continuing Education in the Sterilization Center.

METHOD

Cross-sectional, descriptive study, with quantitative and qualitativa approach with its axis as the perception of Continuing Education of nursing professionals in MSN held in a large university hospital in northeastern Brazil, state reference to secondary and tertiary care, especially in the areas of call the High Risk Pregnancy, Intensive care Unit Adult, Neonatal Intensive care Unit, Human Milk...
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Bank, Oncology Center, in addition to surgical services, such as neurosurgery, gastroplasty and others.

The study subjects were 17 nursing professionals, including nurses, nursing technicians and nursing assistants who work in that MSN. The inclusion criteria were having an employment relationship with the institution and being in place during the period of data collection, independent of the work shift.

For data collection, the research subjects had an individual approach, with the survey instruments with closed and objective and semi-structured interview questions. For tabulation and analysis of quantitative data, descriptive statistics was used by the SPSS Statistical Software 17.0 for Windows.

The interviews were transcribed in full and together with the objective data, they were grouped, categorized and analyzed according to the Collective Subject Discourse Analysis technique (CSD), a tabulation technique and organization of qualitative data, developed by Lefevre and Lefevre in 2005 and currently used in health care research. This technique allows knowing the thoughts, representations, beliefs and values of a community on a given topic using scientific methods.

The CSD is based on the theory of Social Representations and characterized as a speech-synthesis prepared with parts of similar meaning speeches, through systematic and standardized procedures; it is a proposal for reconstituting an empirical being collective and with opinion in the form of a speech subject issued in the first person.

The research had the project approved by the Ethics Committee for Research and Education of the University Center Cesmac (COEPE) under protocol number 1411/12, in October 2012.

RESULTS

There were 17 MSN professionals interviewed, 13 (76.5%) were female, and 04 (23.5%) were male. Regarding the age, 11 (64.7%) are aged 41-60 years old and 06 (35.3%) between 21-40 years old.

The course completion time of these professionals ranged from five to thirty-one. Thus, it was observed that 05 (29.4%) have completed less than ten years, 04 (23.5%) have completed between 11 and 20 years, 06 (35.3%) were formed for more than 21 years, and 02 (11.8%) did not answer.

For the period in which they operate in MSN, it was found that 12 (70.6%) professionals were from 0 to 10 years, 02 (11.8%) from 11 to 20 years, 02 (11.8%) for 21 or more years, and 01 (5.8%) could not answer. It was noted that the majority of respondents have a significant experience in the sector, making their perceptions and extremely important considerations for this search.

When asked about the capacity to act in the MSN, only one subject (5.9%) said he was not properly trained to operate in the sector.

In this MSN, there are work shifts where there is no nurse but the nursing staff even in the absence of the nurse can work effectively in the sector because 16 employees (94.1%) said they were able to act on the MSN, but 04 (25%) of them said:

I have experience operating and activities in MSN. I try to be updated on issues relating to this sector. I try, as far as possible, participate in events related to this area. The experience and service time are enough to make me able. While there is always more to learn and practice. Despite being a constant, mechanical service. What we learned is hardly changed.

As regards the concept of CE, 06 (35.3%) professional do not know about the subject, and 11 (64.7%) reported having knowledge of the subject stating:

It is an educational process carried out in the workplace, preferably, reviewing work processes already known, but updating and reactivating this knowledge. A form of recycling updates on various sectors of health and others. I understand that learning is continuous.

By the speech of the subjects, it was observed the concept of CE understood as education directed to the improvement of professional performance. Of the 11 professionals who have demonstrated some understanding of CE, 06 (54.5%) said they had never participated in any process; 05 (45.4%) participated in CE processes in previous years in the institution where they work; but out of five, 02 (40%) received CE in another workplace. Thus, it is now possible to observe the absence of CE processes in MSN of this institution. Thus, it was necessary to have a CE program focused on the professional development of employees of MSN to achieve a better quality of care.

When asked about their interest in participating in a CE process, all respondents mentioned being interested. However, three (17.6%) said they did not know what it is, because they justified the need for continuous updating, adding that the experience provides knowledge exchange.
It is necessary to update and always learn, and experience adds something good and provides the exchange of knowledge.

Regarding the frequency and objectives of the meetings held in this MSN, there was a disagreement between the lines of some respondents: 06 (35.3%) said meetings occur annually; 08 (47%) stated that they occur sporadically when needed; 02 (11.8%) said they did not happen in two years; and 01 (5.9%) could not say. However, it was found that the occurrence of meetings is not routine in the sector, and they take place in an extraordinary way when there is the need to pass new techniques and information; and it is a lack of an appropriate time or place to perform CE.

Regarding the human resources available, all respondents said that there is a high demand for procedures in the MSN, while there are insufficient professionals due to: absences, lack of resources for hiring, vacation, maternity leave, among others; that make the overloaded staff.

In addition to insufficient human resources and overwork, other difficulties were cited encountered in the sector: lack of personal protective equipment (PPE) and inadequate physical structure; the devaluation of the professional and cross-sectoral communication deficit; lack of training and the constant repetition of activities.

As for suggestions to improve the service in MSN mentioned by the subjects, they found that all converged with the current needs of the sector:

- It is necessary to invest in infrastructure (washers, dryers and other equipment, and reforms in physical structure). Acquisition of appropriate PPE. The increase in some employees. Personnel training. And appreciation of the work done in an MSN, especially by of hospital nursing managers.

**DISCUSSION**

The data show that although already notice a movement about the inclusion of men in nursing, gender is marked in this profession, especially by the historical conception of care while the eminently feminine act is still evident. This fact calls attention to the demand of physical effort required for the performance of activities in MSN, which may cause posture problems, general fatigue and other health problems for collaborators who work in it.

Moreover, the team’s speech highlighted the perception of work in MSN as mechanical and little changed. This same data is found in the literature, which claims to be the working process of this very systematized unit, routine and little allows worker creativity. This requires nurses, leader of the nursing team, the activities proposition that favor a reflective practice, overcoming the alienation process resulting from routine work.

The study is in the literature, which states that to meet the expectations of the institution, every professional needs to have technical competence, confidence, and credibility; must demonstrate flexibility, organizational skills and planning, professional liability, and especially being involved in CE programs to acquire the necessary theoretical and practical training.

It is important to note that for a skilled professional, it is necessary to acquire knowledge, skills, and attitudes, so then he will have the basics to start his actions on his techniques and skills geared to his knowledge. However, for that knowledge to generate skills, it is necessary that the knowledge is mobilized through action schemes arising from schemes of perception, assessment and decision developed in practice.

This study identified, through the interviews, the team has confidence in the activities carried out for years but felt insecure about the new technology domain and even did not feel aligned with the changes that occur continuously in technologies plaguing the MSN.

This finding appears to be related to the average time of training for professionals working in the setting of this study, mostly with training more than ten years, associated with the absence of a CE program; which shows a lag of technical and scientific knowledge of these professionals. This fact highlights the importance of investing in training professionally for the job. Since CE is a way of providing employees with opportunities for change in their behavior and help them in performing tasks with greater knowledge and efficiency, enabling to improve their performance.

Despite the collective subject narrative showing to maintain the effectiveness of work even in the absence of the professional nurse, this is an alarming factor that deserves attention, after all, the nurse’s presence is vital to the management of the whole process and the action forecasting and provision of resources, and among other activities, they shall choose of material and human resources, guidance and supervision of all stages of the process, conflict mediation and training of other employees.

Despite the key role that the MSN plays in the quality of the care process, it appears
that it often has insufficient staff. This data is related, in the literature, to the prioritization in the allocation of staff in care sectors to the detriment of those not involved in direct patient care, leading them to work overload, which makes the organization and execution of the work process and the promotion of measures which improve the quality of care provided indirectly.  

The data show the concern of the nursing staff with the difficulties in the sector, as insufficient human resources, overwork, lack of safety equipment, inadequate physical structure, interpersonal communication deficits and others that culminate in compromising the quality of service and recognition of professional.

This study shows the lack of PPE in the unit setting of this research, as this fact endangers the health professionals who work in this service, given that the MSN is an environment that presents occupational risks, exposing professionals to organic and inorganic substances linked to micro-organism, being essential the use of PPE by professionals of these units.

It is important to note that for the MSN function properly, it is required a trained personnel and the quality of this workforce depending on the existing material resources, physical infrastructure, upgrade of standard techniques and good interpersonal relationships among workers.

Given these factors may have a negative influence on the functioning and effective development of MSN and, consequently, the quality of care, it is essential that the institution provides adequate working conditions for the professionals involved to develop their duties efficiently and continuously.

**CONCLUSION**

Despite the absence of CE in this MSN, professionals have satisfactory knowledge about this process. However, there is deficient in technical and scientific knowledge regarding the area of new technologies.

The CE is a necessary tool for providing quality service at the MSN. Training cannot be just a means for the professional of MSN train to work. It must also be a device that assists in reflecting on the importance and quality of the actions performed in the sector; also, the CSD showed an important tool in understanding the speech of professionals, which enable to identify the positive aspects in the work of MSN and collective complaints about the sector.

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