THE REALITY OF THEORETICAL-PRACTICAL ACTIVITIES IN THE PERCEPTION OF NURSING ACADEMICS: EXPERIENCE REPORT

A REALIDADE DAS ATIVIDADES TEÓRICO-PRÁTICAS NA VISÃO DE ACADÊMICAS DE ENFERMAGEM: RELATO DE EXPERIÊNCIA

LA REALIDAD DE LAS ACTIVIDADES TEÓRICAS-PRÁCTICAS EN LA VISIÓN DE ESTUDIANTES DE ENFERMERÍA: RELATO DE EXPERIENCIA

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ABSTRACT

Objective: to report the experiences of nursing students experiencing their first theoretical-practical activities in a hospital environment. Method: descriptive study, of experience report type, carried out with three academics. The care actions were experienced in the Medical and Surgical clinics of a school hospital during the theoretical-practical activities carried out between August and December 2014. Topics were elaborated with themes to be reported. Results: there was evolution in the students’ learning about the techniques in the theoretical-practical activities, as well as their improvement in the relationship with the patient, with the health team, with the professor and among their colleagues. Conclusion: the experiences reported by nursing students in their first theoretical-practical activity were fundamental to their training process and contributed to a process of reflection about the role of the nurse in the hospital environment.

Descriptors: Nursing Practice; Nursing Students; Nursing.

RESUMO

Objetivo: relatar as experiências dos acadêmicos de enfermagem ao vivenciarem suas primeiras atividades teórico-práticas em ambiente hospitalar. Método: estudo descritivo, tipo relato de experiência, realizado com três acadêmicas. As ações assistenciais foram vivenciadas nas clínicas Médica e Cirúrgica de um hospital escola durante as atividades teórico-práticas realizadas entre agosto e dezembro de 2014. Foram elaborados tópicos com os temas a serem relatados. Resultados: percebeu-se a evolução no aprendizado das técnicas dos acadêmicos participantes das atividades teórico-práticas, bem como o seu aprimoramento na relação com o paciente, com a equipe de saúde, com o docente e entre os colegas. Conclusão: as experiências vivenciadas, relatadas pelas acadêmicas de enfermagem em sua primeira atividade teórico-prática, foram fundamentais para seu processo de formação e contribuíram para um processo de reflexão acerca do papel do profissional enfermeiro no ambiente hospitalar.

Descritores: Enfermagem Prática; Estudantes de Enfermagem; Enfermagem.

RESUMEN

Objetivo: relatar las experiencias de los estudiantes de enfermería cuando viven sus primeras actividades teóricas prácticas en ambiente hospitalario. Método: estudio descriptivo, tipo relato de experiencia, realizado con tres estudiantes. Las acciones asistenciales fueron vividas en las clínicas Médica y Quirúrgica de un hospital escola durante las actividades teóricas prácticas realizadas entre agosto y diciembre de 2014. Fueron elaborados tópicos con los temas a ser relatados. Resultados: se vio una evolución en el aprendizaje de las técnicas de los estudiantes participantes de las actividades teóricas prácticas, así como la mejora en la relación con el paciente, con el equipo de salud, con el docente y entre los colegas. Conclusión: las experiencias vividas, relatadas por las estudiantes de enfermería en su primera actividad teórica práctica, fueron fundamentales para su proceso de formación y contribuyeron para un proceso de reflexión acerca del papel del profesional enfermero en el ambiente hospitalario.

Descritores: Práctica de Enfermería; Estudiantes de Enfermería; Enfermería.

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INTRODUCTION

In Brazil, the Nursing Undergraduate Course has the purpose of training generalist nurses, and, for this purpose, the objective is to endow the professional with the following general skills and competences: health care; decision-making; communication; leadership; administration and management; and permanent education, in addition to the many specific skills of this profession.

During undergraduate course, students are faced with several care scenarios, among them, the expected first theoretical-practical curricular internship, which will be addressed in the present work.

Experienced by students from the third phase of the nursing course at a University of the South of Brazil, the first theoretical-practical activity took place in a Medical Clinic Unit (with hospitalization 29 beds) and in a Surgical Clinic Unit (with 30 hospitalization beds) of a University Hospital (HU), which is structured in four basic areas: surgical and medical clinics, pediatrics and tocogynecology.¹

The theoretical-practical activities are part of the discipline Fundamentals for Professional Nursing Care, with a total workload of 378 hours, of which 150 hours are destined for practical, clinical and simulated practice, 208 hours for theoretical-practical classes, and 20 hours of flexible content.²

The Curricular Axis consists of the path taken by the undergraduate students during their professional training process. And the Curricular Axis of the nursing course of the said university is based on the Health Promotion in the Human Living Process in the diversity and complementarity of the health scenarios.²

The course is organized in 10 phases that encompass a fundamental axis, an articulated basis and a complementary basis. So, some of the disciplines of the undergraduate course are strictly theoretical and others, theoretical and practical.²

The discipline Fundamentals for Professional Nursing Care is inserted in the complementary basis, which is composed of disciplines that support the educational process and the training of nurses, seeking to address the confrontations of the practice scenarios where the professional activities will be developed.²

The nurse must have, during their training, activities of theoretical and practical learning, since it is in these moments that the student can have an approximation with their future professional activity.³

Theoretical-practical activities can also be defined as the moment of practical application of the theory, which generates reflections and the improvement of techniques and skills in real situations.³Such activities are crucial for the construction of the professional character, since the gradual contact with the practical exercise of the profession, besides bringing the students closer to the professional reality, sharpens the development of skills and abilities that will be required as future nurses.²,³

Nursing care should be learned with direct contact between patient and professional, so that theoretical-practical activity appears as a fundamental part of professional training curricula of nursing.³

Given this context and taking into account the importance of the experiences for the training of nurses, this study aimed to report the experiences of nursing students in their first theoretical-practical activities in a hospital environment.

METHOD

This is a descriptive study, of experience report type, developed based on the experiences of undergraduate students in Nursing in their first theoretical-practical activities. The care actions were experienced in the Medical and Surgical Clinics of a School Hospital during the theoretical-practical activities carried out from August to December 2014, under the guidance and follow-up of the professors of the discipline Fundamentals for Professional Nursing Care, counting with the collaboration of the nurses of the said sector. It is also worth noteworthy that the report complied with the ethical principles of Resolution 466/12 of the National Health Council (CNS), which deals with the Guidelines and Norms Regulating Research involving Human Beings.⁴The construction of the reported experience took place from the nursing care in the hospital environment.

DESCRIPTION OF THE EXPERIENCE

♦ The approach to the practice field

At the beginning of the semester, these students would begin the first period in which they would work as nursing academics in the care provision at a university hospital. The approach occurred in two moments, in which the students carried out a history of a patient from a model proposed by the teachers.

The proposed activity focused, on a single exercise, the different feelings of the
students, as well as the professional attitude, the contact with the patient and the health team. Students experienced anxiety, doubts and anguishes, since they corroborated that taking care of the other awakens these different feelings and dealing with them will be result of the learning process that will take place from the experiences lived by the students.³

Thus, the initial approximation was crucial so that students could prepare their feelings as well as their posture so that they could be able to deal with the patient in the comprehensive care.

The purpose of this theoretical-practical experience was to recognize the field of practice that would be frequented by the students in that semester, with the purpose of initially knowing and understanding the work of a nurse, their routine and their work environment.⁴ Initially, an exercise was carried out so that students could have the first contact with the patient: the construction of a nursing history; aiming at developing dialogue, attentive looking to the patient’s needs, the perception of the environment and the ability to record these aspects in annotations.

The first direct contact with patients was, in a way, an incentive for students to continue in the nursing academy, which now contemplates the hospital environment as a learning scenario.

♦ Interaction with the health team

The interaction with the health team occurred in different ways and at different times. Initially, academics adopted a common posture of the newcomer students in the field of theoretical-practical activities, the team-student relationship was more distant, since they did not feel part of the hospital environment.

Subsequently, with the daily living, with the accomplishment of the activities and the familiarization both with the environment and with the team itself, the team-student relationship was established as a respectful, pleasant and, above all, trust relationship. Studies have shown that a good professional interaction is the main facilitator of a group work.⁷

After the first contact with the team, the fear of the unknown did not remain, because the professionals of the units became known to the students. We can then affirm that the interaction with the team is fundamental for the better development of the work. The purpose is to establish an interpersonal relationship with health professionals, interacting and working in a critical-reflective manner.⁶

It should also be noticed that the support of the health team is necessary for the students to feel more confident in accomplishing their tasks. In this way, it is seen that the relationship between students and professionals is fundamental so that, in their first moments of theoretical-practical activities, they feel part of the team and able to perform their functions knowing that they will be seen with seriousness and trust.

Students share a common goal of caring and wanting the good of others. With this, it is seen that there is an unconscious interaction with the health team; the conversations flow and the help is never denied.

The importance of this communication is due to the satisfaction of the professional that relies on the dynamics of human relations, in the inter-relational field, because in this field the live care occurs, and when professionals have the opportunity to think and do their work in the perspective of interactions, the transformation of health care occurs.⁸

♦ Formation of bonds/experiences with the patient

The approach to the patients initially was not related to their case/illness, but to know better their anguish, conflicts, intimacies, beliefs, emotions, and all the different feelings that they may have.

With this first step, of humanized conversation, a bond is created, empathy between us students and the patients. This dialogue is made when "words with which the subject says are recognized by the other and when this subject hears from the other words this subject recognize".⁸

The daily contact with the patient was a new aspect experienced by the nursing students. The establishment of a new relationship of comprehensive care and even of affection causes the student to experience unknown feelings. The experience of having the responsibility to care for the other and the premise that seeks to make the other feel better about their health condition are challenges found by nursing students in their training path.

The contact with the pain and suffering inherent to the nursing profession subject the student to situations of anguish and impotence in the exercise of their functions. However, studies say that academics still have little contact with pain and suffering, which ends up training professionals often unprepared for care.⁹
In order to train skilled nurses to deal technically and emotionally with care and knowing that the initial contacts with the patients are of less involvement and even fear on the part of the academics, it is important to maintain the daily relationship with the patients in situations of illness, since, this will enable developing, besides the techniques, the emotional skills necessary for the profession.

Over time, in addition to providing care and experiencing some recoveries, the sensitivity with which the students take care of their patients becomes essential, so that bonds are established between them.

As a consequence, the recognition was shown through demonstrations of satisfaction with the care provided. On the other hand, worsening in clinical pictures was also experienced and sometimes the professional felt the weight of the emotional aspect. We can be sure that conciliating the emotional and the professional aspects is a gradual process and little by little the professional learns to deal with emotions in situations like these.

Team development among colleagues

Learning to work in a team and organizing tasks seems to have been the most difficult skill developed by students. Most of the activities were performed in pairs or trios, making it necessary, from the beginning of the theoretical-practical activities, to develop the administration of time, tasks and the team.

The teamwork of health professionals should share the planning and division of tasks, cooperation, collaboration and integration of individuals and their practices and knowledge.

The development of teamwork was gradual and the students were able to perceive their evolution after a certain period. By the end of this, they were able to optimize their time and to develop technical activities, as well as to have more time for the contact and the interaction with the patient, allowing to develop the other skill described above as well as to establish bonds with the patient.

The construction of a team occurs gradually and has as a starting point the similarity of a common goal. The team strengthens and a colleague knows they can count on the other. The team's relationship is achieved with the presence and help of the professor. This is of fundamental importance for the unity and support of the team.

It is known that colleagues share the same experiences, so they end up being partners in a tumultuous and stressful semester, where they deal with the same agonies and fears, trying to solve the unknown and go to another stage of the academic life, so it is extremely important to develop this sense of team and cooperativity among the people involved.

Learning to deal with feelings

The student's relationship with their feelings is more complicated than the application of techniques learned in the laboratory. Even though, as in other situations, time and practice facilitate the understanding of feelings and the (im)possible blocking of emotions, dealing with their feelings is a difficult task for students.

Understanding and finding the fine line that separates the total emotional involvement from indifference did not seem to be simple, since, as students were still unprepared in the hospital environment, they did not know their own limits.

The work of nurses with people who are suffering is susceptible to emotional involvement, which causes health workers to be encouraged to regulate their own emotions so that they can understand the negative emotions of caregivers.

In this way, the student's relationship with their feelings and their limits is delicate and is constantly changing, since each patient and his/her health situation imply a new bond establishment and a new limit for this relationship.

The ability to know how to evaluate and balance such emotional involvement is acquired through the practice and daily experiences of different situations of this professional under training. It is possible, even as a graduated nurse, that the professional faces a new situation that causes them to reflect and recognize a new limit to their emotions.

Providing care for the other gives rise to diverse feelings: insecurity, responsibility, happiness, nervousness, fear, anxiety, gratification, learning, anxiety, among others. These feelings are experienced intensely and can be divided into classes: feelings related to the patient, to the student themselves and to the discipline they were attending.

A study that analyzes the level of stress in Nursing students before the first contact with theoretical-practical activity shows that before the internship, 9% of the students feel anxiety and, after that, the number increases to 36.3%. The level of sweating shows an increase from 18.1% to 45.4%. The constant tiredness increases from 63.6% to 72.7%. Above all, the nursing student's stress is
perceived, but it does not induce changes in the heart rate variability (HRV).

Throughout life, we learn to deal better and better with feelings. We acquire practice and abilities that reduce our nervousness, insecurity and distress, for example.

**Teacher-student relationship**

The teacher-student relationship is essential in the daily theoretical-practical classes. The teacher is the basis of teaching and the reference to the student, so it is fundamental that professors value the conversation, the exchange of information and experience, especially the interpersonal relationship. In addition, they must be patient, helpful and educated with the students.14

The simple fact that the teacher is present in attending patients in this first contact with the theoretical-practical activities of academic life brings comfort to the student and a decrease in the concern of causing some mistake in the procedure.14

The relationship between the teacher and the student needs to be of complicity, since the environment and the pressure are stressful; with this, the dialogue, the generosity and the patience itself will lead to a profitable semester. With this, the teacher who was the facilitator of the theoretical/practical activities enabled the students to develop the skills cited, as well as the technical and emotional skills.

Whenever possible, the teacher would pass on responsibilities and decision-making to academics, making them reflect on their tasks and, especially, on their responsibilities to the client/patient, allowing academics to form teams and divide activities.

The experienced teacher must understand the insecurities of the beginning student and support them, albeit in the easier tasks. From the reception until the evaluation, the teacher must develop a commitment to the student's education and to the content to be taught, which are essential to a quality performance.15

The teacher, in this context, established commitments and a good relationship with the academics, stimulating them to express their feelings and thoughts, as well as making them feel free to question and to do requests whenever necessary. As a currency of exchange, the teacher expected commitment, responsibility and dedication on the part of academics, resulting in a healthy and constructive relationship.

**Skills development**

The teaching of nursing in the clinical field is an important issue, since it allows the student to reflect on the professional performance. In addition, it is a stage in which the theoretical knowledge is put in practice, enabling the union between knowledge and doing.1

The group of academics under study had the possibility of experiencing theory and practice in an intercalated way, so that modules of theoretical knowledge were sequentially applied in modules of theoretical-practical activities in the field.

The active methodologies of teaching, which aim to develop the potential of academics15, propose that the student be the center of their training process and that they are able to relate the theoretical content with the practical activities presented in the hospital, for example.

With this, the development of the academics' skills was gradual and cumulative, since, at each new theoretical-practical module, the previously practiced contents were maintained and the new theoretical contents were incorporated. The techniques learned initially are considered simpler and more common, followed by those of greater complexity, making the student able to always practice those that are more present in the daily life of the professional.

The way in which the skills were addressed allowed the students to evolve daily and that the ability in the realization of the techniques was acquired until the end of the period of theoretical-practical activities. Thus, it is noticed that the way in which the moments of theoretical and practical learning were interspersed was fundamental so that the academics could acquire confidence and could improve their theoretical-practical knowledge.

However, even though university seeks to raise conceptual, theoretical and practical elements about the professional activity in the field of practice, the skills will only be acquired and perfected in the field itself. The student’s preparation during undergraduate course as a tool for personal and professional advancement is not only a technical-scientific knowledge highlight, but also added to the perspective of self-knowledge.13

**CONCLUSION**

When nursing academics enter into the hospital universe, they enter in a totally new environment, and are about to experience challenges, conquests, doubts, fears, anguish, accomplishments, among many other feelings,
which are part of the first theoretical-practical activity. And, thus they have the beginning of their journey as future nurses.

The hitherto distant hospital environment becomes more and more known by academics, and throughout this familiarization, the skills development begins, uniting prior theoretical knowledge with the patients’ clinical reality.

Communication is a primordial tool for bringing academics closer to the health team of the unit. Even though such approach is a gradual process, it is essential in the learning process of academics for providing the exchange of experience.

Just as the approach with the team is a gradual process, the development of bonds with the patients is also gradual. Transmitting trust to patients can sometimes be difficult, but it is clear that it is reached when academics are conscientious and confident about the procedures to be performed. Another essential factor to transmit confidence to patients is the presence of teachers, who are always on the side of academics, intervening when necessary.

The first theoretical-practical activity is a time when academics need to have all the knowledge and help of teachers, so that day after day skills can be developed and improved.

It is known that this first contact with the hospital and the patients is only the beginning of a long academic journey, and that confidence gradually takes the place of insecurity; teamwork takes the place of individualism; expertise takes the place of the fear of performing procedures, and thus, progressively, future professionals arise, who until then, have just learned a little more about nursing.

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A realidade das atividades teórico-práticas


Submission: 2016/10/10
Accepted: 2016/12/15
Publishing: 2017/01/15

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