COMMUNICATION OF NURSES AND HOSPITALIZED PATIENTS IN A MILITARY HOSPITAL
COMUNICACIÓN DE ENFERMEROS Y PACIENTE HOSPITALIZADO EN UN HOSPITAL MILITAR

ABSTRACT
Objective: to analyze the communication process between the nursing staff and the hospitalized client in a medical and surgical clinic whose scenario will be a large military hospital. Method: this is a qualitative, descriptive study. The study population will be composed of nursing team professionals from an inpatient sector of medical and surgical clinic and by clients who are hospitalized on the day of the interview within the inclusion criteria. The data will be obtained through a semi-structured interview, analyzing them through the technique of Content Analysis. Expected Results: the study is expected to contribute to the feasibility of a situational diagnosis in order to provide the construction and implementation of an instrument that assists in the planning of health actions for the improvement of nursing care provided to hospitalized clients. It is also emphasized the need for new studies that deal with the proposed theme, thus valuing research in the area of Nursing, in order to strengthen the strengthening of the professional-client bond. Descriptors: Nursing Care; Nursing Team; Communication; Hospitalization; Inpatients; Military Hospitals.

RESUMO
Objetivo: analisar o processo de comunicação entre a equipe de enfermagem e o cliente hospitalizado em clínica médica e cirúrgica cujo cenário será um hospital militar de grande porte. Método: trata-se de um estudo qualitativo, descritivo. Compor-se-á da população de estudo pelos profissionais da equipe de enfermagem de um setor de internação de clínica médica e cirúrgica e pelos clientes que estiverem hospitalizados no dia da entrevista dentro dos critérios de inclusão. Obter-se-ão os dados por meio de uma entrevista semiestruturada, analisando-os por meio da técnica de Análise de Conteúdo. Resultados esperados: espera-se que o estudo contribua para a viabilização de um diagnóstico situacional a fim de propiciar a construção e implementação de um instrumento que auxilie no subsídio do planejamento das ações de saúde em prol da melhoria da assistência de Enfermagem prestada ao cliente hospitalizado. Ressalta-se também a necessidade de novos estudos que tratem sobre a temática proposta, assim valorizando a pesquisa na área da Enfermagem, a fim de reforçar o fortalecimento do vínculo profissional-cliente. Descriptores: Assistência de Enfermagem; Equipe de Enfermagem; Comunicação; Hospitalização; Pacientes Internados; Hospitais Militares.

RESUMEN
Objetivo: analizar el proceso de comunicación entre el personal de enfermería y el cliente hospitalizado en una clínica médica y quirúrgica cuyo escenario será un gran hospital militar. Método: este es un estudio cualitativo, descriptivo. La población de estudio estará compuesta por profesionales del equipo de enfermería de un sector hospitalario de clínica médica y quirúrgica y por clientes hospitalizados el día de la entrevista dentro de los criterios de inclusión. Los datos se obtendrán a través de una entrevista semiestructurada, analizándolos a través de la técnica de Análisis de Contenido. Resultados esperados: se espera que el estudio contribuya a la viabilidad de un diagnóstico situacional para proporcionar la construcción e implementación de un instrumento que ayude en la planificación de acciones de salud para la mejora de la atención de Enfermería brindada a clientes hospitalizados. También se enfatiza la necesidad de más estudios que aborden el tema propuesto, valorando así la investigación en el área de Enfermería, con el fin de reforzar el fortalecimiento del vínculo profesional-cliente. Descriptores: Atención de Enfermería; Grupo de Enfermería; Comunicación; Hospitalización; Pacientes Internos; Hospitales Militares.

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INTRODUCTION

It is reported that the motivation of the study was born from the experience of researchers who are inserted in a hospital environment where it is provided excellent care but identify challenges to be met for a more comprehensive care and focusing on user safety. Thus, it is encouraged to implement good communication between the Nursing team, clients and the multiprofessional team.

Communication is known to be part of the life of all human beings and through it social relations are established. It is understood that people can communicate in many ways, for multiple reasons, with different people, ¹ because the purpose of communication is to understand the world and to relate and transform oneself and the other.²

It should be understood, within this thought, that, in health, communication is a very important process, needing to pay attention to the way information is transmitted to clients and family, requiring, from the speaker, the concern to perform adaptations in communication according to the level of understanding of who is receiving the message.

The relationship between transmitter and receiver in a connected way becomes extremely important so that the content is fully understood by the receiver.³ However, it is inferred from the literature that communication in the hospital environment is permeated by the low appreciation of interpersonal relationships, with the extensive formalization of communication.³

It is believed that through an effective communication process, the Nursing team can inform and clarify various situations to the client and their families and identify needs that are not expressed by the clients' speech. It is generated, by a good interaction between Nursing and client, also the promotion of the relationship with other clients, with the multidisciplinary team and/or with the family members, thus developing health education, exchange of experiences and behavioral changes, among others.⁴

There is the client who needs to be hospitalized, often distressed, full of doubts and mixed feelings now, because hospitalization means moving away from home, "normal" and now under routine and schedules imposed by the institution where they are.

In this sense, it is explained that Nursing, as a team that receives and is with the client for twenty-four hours, needs to start a relationship of interaction and trust that will be built from then on. The professional needs to be sensitized, because the conversation is not just about talking (vertically), but about listening and exchanging information, as well as using body language such as the tone of the voice used, the touch, the look, the facial expression. Thus, the Nursing team needs to exercise sensitivity in relation to the client.⁵

Thus, we realize the importance of interlocutive activities and practices. The interaction between those involved in this process shows how important this basic activity the profession is and how relevant interpersonal relationships are for improving the quality of care and humanization.⁶⁻⁷ Moreover, the effectiveness of communication between health professionals and clients reduces the occurrence of errors, thus favoring patient safety.⁸

The nursing team is daily challenged by communication problems, which directly interfere with the continuity and quality of care provided to the client. It is believed that, for a satisfactory development of teamwork, good communication is essential.² In the area of health, which is a peculiar service sector, there is potential communication to subsidize integral and humanized care and, therefore, it is inferred that this is a factor that deserves care in promoting safe care at all levels of care.⁹

In view of the above, this research will use a theoretical basis to analyze the communication process between the Nursing team and the hospitalized client. The theorist Berlo¹, from Psychosociology, who addresses the process of communication was chosen. The application of this framework is justified because the author recognizes communication as a process, that is, a phenomenon that presents constant changes over time. Thus, communication is seen as something dynamic, constantly evolving, always changing according to time and relationships.

It is added that, for this author, communication is everything that can be used by people in order to convey meaning to the recipients, because in a communication process, there are interrelated elements that structure it, namely: source: a person or group of people with a goal; one goal: reason for communication; the encoder: effected by the motor skills of the source (vocal mechanism, the muscular system of the hands and the muscular systems of other parts of the body); the message: the translation of ideas, goals and intentions into a code, a systematic set of symbols; the channel: the intermediary, the message conductor; the decoder: sensory skills; and the receiver: the other person at the end of the channel”.¹

It is noteworthy, given the problem presented, as the object of study, the communication process between the Nursing team and the hospitalized client in the medical and surgical clinic sector.

To this end, the following guiding questions were drawn: What information is given by nursing professionals to the client hospitalized in a

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medical and surgical clinic? What information does the hospitalized client in a medical and surgical clinic receive during the hospitalization period?

**OBJECTIVE**

- To analyze the communication process between the Nursing team and the hospitalized client in a medical and surgical clinic whose scenario will be a large military hospital.

**METHOD**

This is a qualitative, descriptive study in progress, whose scenario will be a large military hospital located in the north of the city of Rio de Janeiro. It is noted that the place used for data collection will be an inpatient sector where there are clients of Medical Clinic and Surgical Clinic, totaling 76 beds. The choice of location is justified because the sector allows obtaining information on the communication of nursing professionals with clients in various circumstances: laboratory tests; pre and postoperative moments; hospital discharge guidelines, among others.

The study population will be composed by the Nursing team professionals: ten nurses (being eight assisting nurses and two nurses in charge, who make up the total number of nurses on that floor) and 18 nursing technicians, regardless of their hierarchical graduation in the military hospital environment, and by clients hospitalized on the day of the interview, following the inclusion criteria. Inclusion criteria were: nurses8nursing technicians inserted in the study setting for over a year working at the site and clients over eighteen years old with more than five days of hospitalization by the medical or surgical clinic, who accept to participate in the study. Those clients who were hospitalized only for elective surgery will be excluded.

Data will be obtained through a semi-structured interview in which the subjects will answer a questionnaire after signing the Free and Informed Consent Term (FICT). The data collection instrument will be divided into two parts: the first, aiming at the characterization of the participants, with questions related to age, gender, education, marital status, professional category, post8graduation (in military), time working in the institution and length of stay (in the case of clients). The second part will contain questions for patients and caregivers. They arose among the questions to patients: What information did you receive and find important? There were some that you didn't receive, but consider it important? How do you evaluate your safety regarding the guidance provided by nursing professionals? Professionals will be asked: What information do you consider important to convey to the client? Which guidance do you consider paramount when thinking about patient safety? How communication has happened in different scenarios during the period of hospitalization. The data collected will be analyzed using the Content Analysis technique.10

This study was approved by the Research Ethics Committee under the registration REC 11059019.1.3001.5256, following the determinations of Resolution No. 466/12 of the National Health Council BNHC.

**EXPECTED RESULTS**

It is expected to contribute to the feasibility of a situational diagnosis in order to provide the construction and implementation of an instrument that assists in the planning of health actions for the improvement of nursing care provided to the hospitalized client. It is also emphasized the need for further studies that deal with the proposed theme, thus valuing research in the area of Nursing, in order to strengthen the strengthening of the professional-client bond; to contribute to client safety during the hospitalization period and to emphasize the psychosocial issues so discussed in the current training of health professionals.

**REFERENCES**


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Corresponding author
Vinicius Rodrigues de Souza
Email: viniciussouza.enf@gmail.com

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