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FREE THEME

THE MANAGEMENT OF HEALTH SERVICES IN THE PERSPECTIVE OF THE HUMANIST ADMINISTRATION THEORY

O GERENCIAMENTO DOS SERVIÇOS DE SAÚDE SOB A PERSPECTIVA DA TEORIA DE ADMINISTRAÇÃO HUMANISTA

LA GESTIÓN DE LOS SERVICIOS DE SALUD EN LA PERSPECTIVA DE LA TEORÍA HUMANISTA DE ADMINISTRACIÓN

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ABSTRACT

Objective: to report the students' experience manage of approximation with the management process in nursing, in the light of humanistic administration theory. *Method:* descriptive study, report of experience type. It was performed a capture of reality of a foundation hospital, by nursing students in the context of the discipline of nursing process managing of the State University of Rio Grande do Norte, Caicó campus. It was used a guide script of the capture, based on Egry's theoretical and methodological Egry to identify the influence of management theories in organizing of this service. *Results:* the theories that have more influence on management of nursing are the taylorist, classical, bureaucratic and humanistic theories. From the experience, we were able to identify that there are gaps between the purposes of the human relations theory and the practice in the reality of the service, making explicit the predominance of the classical theory of nursing administration. *Conclusions:* the student experience of approximation with the managing process in nursing, in the light of humanistic administration theory, by the capture of the reality, facilitated the learning because it provides the articulation between theory and practice. *Descriptors:* nursing; health administration; public health.

RESUMO

Objetivo: relatar a experiência discente de aproximação com o processo gerenciar da enfermagem à luz da teoria humanista da administração. *Método:* estudo descritivo, tipo relato de experiência. Foi realizada uma captação da realidade de uma fundação hospitalar, por acadêmicos de enfermagem, no contexto da disciplina de processo gerenciar em enfermagem da Universidade do Estado do Rio Grande do Norte, campus Caicó. Foi utilizado um roteiro norteador da captação com base no referencial teórico-metodológico de Egry, para identificar a influência das teorias administrativas na organização desse serviço. *Resultados:* as teorias que exercem maior influência no gerenciamento da enfermagem são as teorias taylorista, clássica, burocrática e humanista. A partir da vivência/experiência, foi possível identificar lacunas existentes entre os propósitos da teoria das relações humanas e as práticas na realidade do serviço, ficando explícito o predomínio da teoria clássica de administração na enfermagem. *Conclusões:* a experiência discente de aproximação com o processo gerenciar da enfermagem à luz da teoria humanista da administração, através da captação da realidade, facilitou a aprendizagem porque proporcionou a articulação entre teoria e prática. Descritores: enfermagem; administração em saúde; saúde coletiva.

RESUMEN

Objetivo: reportar la experiencia de estudiantes de aproximación con el proceso gestionar de enfermería a la luz de la teoría humanista de la administración. Método: estudio descriptivo, tipo reporte de experiencia. Se realizó una captación de la realidad de un hospital, por estudiantes de enfermería en el contexto de la disciplina de proceso gestionar de enfermería en la Universidad del Estado de Rio Grande do Norte, Caicó campus. Se utilizó un plan para guiar la captación basado en la referencia teórica y metodológica de Egry para determinar la influencia de las teorías administrativas en la organización de este servicio. Resultados: Las teorías que tienen más influencia en la gestión de la enfermería son las teorías tayloristas, clásica, burocrática y humanista. A partir de la experiencia, hemos sido capaces de identificar las brechas entre los propósitos de la teoría de las relaciones humanas y la práctica en la realidad del servicio, haciendo explícito el predominio de la teoría clásica de la administración en enfermería. Conclusiones: La experiencia de estudiantes de aproximación con el proceso gestionar de enfermería a la luz de la teoría humanista de la administración, mediante la captación de la realidad, facilitó el aprendizaje, ya que proporciona el vínculo entre la teoría y la práctica. Descriptores: enfermería; administración en salud; salud colectiva.

Pescriptores: enfermeria; administración en salud; salud colectiva.

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INTRODUCTION

The nursing work process, understood as a social practice in collective health work is structured as a critical and reflective process, permeated through the steps of the watch/intervene, teach/learn, manage and search, in the perspective of improving the quality of life of those involved in this process, also seeking the development of shared decisions able to intervene in health-disease process, individually and collectively.¹

This establishes between itself and the others involved, a web of interpersonal and collective relationships with complex character, embedded in a social and historical space, full of ideology, knowledge and subjectivity.

Among the stages of nursing work process, the management, inseparable from watch/intervene, teach/learn and research, know/do/be in nursing, was established as a key step in nursing care.

In practice professional nursing care and management have a strongconnection, since it provides professional customer care leads the members of your team, being necessary to develop this work during the training process, management skills such as planning, organization and assessment of teamwork with the aim of their actions being carried out with quality.²

Thus, it is necessary to consider the importance of understanding the management, specifically the associated to other processes, since continue to understand them in a disconnected way has helped us meet the challenges posed by the complexity of our practice, once this becomes inserted in different contexts, growing in their longing, the purpose of providing resolutions of issues involving the health-disease process, individual and collective.3

The conduct of managing health is permeated by a variety of theoretical frameworks covering different areas of knowledge, which underpin the professional manager practice, aiming to assist in the understanding of the social, political, cultural, economic and administrative questions present in human condition.

The coordination and administration of health services constitute one of the activities of the nursing work process, which has strong influence on the quality of health care provided to individuals and the community.

The exercise of this function is supported as a privative nurse activity by Law No. 7498 of June 25, 1986, leaving to this professional, among other activities, planning,

organization, coordination, implementation and evaluation of health services.⁴

Nationally, according to researches conducted by the Ministry of Health, in 2007, the number of nursing workers in Brazil corresponds to the expressed number of 1.243.804, among nurses, technicians and nursing assistants. Of that number, 85,64% corresponds to the class of technicians and nursing assistants and only 14,35% is equivalent to nurses.⁵

In the state of Rio Grande do Norte, numbers indicate that by the year 2007, the nursing work force corresponded to the total of 16.318 nursing workers. Similar to the national percentage, the distribution of these professionals by class, corresponds to 85.87% of technicians and nursing assistants and 14.12% of nurses.⁵

From these numbers, we get as information the marked disparity between the classes of nursing staff, resulting in an overloaded management demand, which could interfere with the steps of assist/intervene, teaching/learning and research, resulting in a lower quality assistance.

OBJECTIVE

• To report the experience of students manage in approaching the management process in nursing, in the light of humanist administration theory, identifying in the objective reality, its influences and contributions to nursing.

METHODOLOGY

The methodology used was based on the Theory of Praxis Intervention in Public Health Nursing (TIPESC), placed as a dynamic systematization process to capture and interpret the phenomenon articulated to the processes of social production and reproduction related to health and disease in a given community, in the context of their situation and structure, within a historically determined social context.⁶

In this study, we addressed the first and second moments of TIPESC, which includes the capture of objective reality and interpretation of objective reality.

The activity of capturing objective reality was designed and conducted in the discipline 'Management Process in Nursing' from the State University of Rio Grande do Norte, as a methodology capable of facilitating and contributing to the teaching/learning process of students.

The collection of objective reality, as an educational tool, can be understood as a step toward knowledge of reality. The knowledge

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learned through this is always an approximation and not a full knowledge of it, since this is dynamic. The approach to the objective reality must be done as part of the proceeding to intervene in it.

This process should be implemented in order to achieve the dimensions, general or structural, particular and singular of the study object. These are so articulated that to understand the unique context, we must necessarily understand what is the determination of particle and structural dimension.

This activity is aimed to approach the teaching of undergraduate nursing with the production of health services in Caicó/RN, seeking the relationship practical-theory-practice. The theoretical framework used to support the process of capturing the reality is anchored, basically, in Chiavenato, Paiva 10 e Kurcgant. 14

In order to facilitate and to direct the process of capturing reality regarding the management process in nursing in Fundação Hospitalar Dr. Carlindo Dantas, a script was used containing guiding directions guarantee support to incentivize dialogue and discussions the subject. This on methodological tool aims to address the general, particular and unique dimension of situation experienced.

These dimensions range from the historical, socio-political and economic federation, the social assistance policies held in the country, demographic indicators and epidemiological profiles of the city of Caicó/RN. It enables the recognition and characterization of the organizational structure of the goal of the approaching the identifying study, characteristics, labor force, and operation of systems work production in providing assistance and its conditions.

In conjunction with the other dimensions, understanding the uniqueness that exists in reality involves the approach to nursing work process in locus, with goals to understand the dynamics surrounding the nursing management and planning, as key step in their practice, and also realizing the interpersonal relationships that underlie the management of the service and present conceptual ideas that underpin professional practice.

Unraveling and recognizing the reality experienced

Brazil, over time, and in different governments, is shown as a country that still faces major problems of social inequality in many different sectors of society. Recently, the National Household Sample Survey (PNAD),

held in September 2008, which discusses the country's economy, reveals a development in Brazil, with stable economy, more jobs and income. However, paradoxically coexists with the lack of infrastructure, sanitation, quality education and high illiteracy rates, factors that reflect the quality of life.

Over the decades, deep changes occurred in the age composition of its population, and inequalities in access to health services and the distribution of resources and equipment, leading to the country changes in the epidemiology, interfering in the context of morbidity and infectious diseases.

With the creation of the Unified Health System (SUS) in 1989, the provision of health services in Brazil has undergone changes in its health care model, from a purely curative model, for a model that assumes in its principles, integrity in attention to the individual and the community.

The reorientation of the model of health care and the reorganization of the services, combined with the proposal of humanization in health care, only become possible when performed concurrently with the conceptual change and professional practice, acquiring in their praxis, actions consistent with the principles of SUS.

In this sense, the organization of the health system is to give emphasis to the promotion and prevention interventions and maintenance of individual and collective health, based on the operational guidelines of decentralization and regionalization, combined with principles of integrality, equity and generating resolutivity, differentiated management demands, requiring even changes in the organization and management of work for its achievement.⁷

The stage of managing health services and the organization of the system should systematize effective actions that aim at the demands of the population's needs, in a way to ensure the integrity of health care and access for everybody.

In order to approach reality, especially regarding the process of managing nursing practice and discuss its relationship with the humanistic administration theory, we performed a capture of reality in the Dr. Carlos Dantas Foundation, known as the Seridó Hospital, located in the Paraiba district, municipality of Caicó/RN. This institution serves a number of municipalities that make up the region of Seridó Oriental, in the State of Rio Grande do Norte/RN, Brazil.

It is a charity hospital of medium size, with about 120 beds, which provides medical care financed by the SUS, representing 80% of the

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demand, having agreements with health plans in the private sector. Its foundation was in 1969, the same period in which they gave the creation of the statute that regulates the internal legal organization and functioning of the institution, which remains in force until the present day.

The institution aims to provide the people of Seridó with health services, hospital care, medical and surgical assistance, pathological examinations, ambulatory and emergency room in the middle and upper levels of complexity, through the hospital structure organized and integrated to SUS, having currently about 167 employees in its staff.

In the unit, are available the services of medical clinic, pharmacy, surgery, obstetrics, gynecology clinics, plastic surgery, general surgery, video surgery, X-ray. laboratory, emergency physicians on duty for 24 hours, consultations and referrals, as well as hospital class Sulivan Medeiros, partnership with the Federal University of Rio Grande do Norte (UFRN), the Center for Higher Education of Seridó (CERES).

Access to services and customer service is performed on free demand, after obtaining a form for consultation, or even through referrals from the Municipal Secretariat of Health of the surrounding municipalities or local.

In terms of organization, the unit is distributed in areas subdivided by specialty, as obstetrics, pediatrics, surgery center, medical clinic, pathological examination center and the personal sector, besides the positions of president and administrator. Regarding the hierarchy of the workforce, each sector has a responsible person for organization and standardization of rules and routines to be followed by employees who compose it.

Community involvement is present through the implementation of intervention projects, developed by higher education institutions as the Federal University of Rio Grande do Norte (UFRN) and the State University of Rio Grande do Norte (UERN), counting, also, with the voluntary participation of members from a non-governmental organization (NGO), like the Project Friend of the Child.

The management of the nursing staff in the perspective of humanistic administration theory

The perception of the management process in nursing, experienced in the institutional ambit of the Dr. Carlos Dante Foundation, from the inclusion of nursing students in health service environment, became apparent to our eyes, under the strong influence of classical theories of administration, rooted in professional practice.

Such condition is demonstrated by the most serious concern on the performance of bureaucratic and purely administrative issues, by giving emphasis on how to do or, simply, in the technique execution and the division of work tasks, besides excessively restrict the conduct of the work procedure manuals, routines, assistance fragmentation, among others.

The team's work in nursing can be resumed to the fulfillment of tasks, being the performance of each professional assessed by the quantitative of performed procedures. Technicians and assistants are responsible for direct care and the nurse is limited to assume the supervision and control of the work process.⁷

Regarding the management of the nursing work process, this support is in Article 11, by Law No. 7498 of June 25, 1986, which provides the Regulation of Nursing Practice, and gives other providences, establishing the Nurse, in private, the following provisions: a) the direction of the board of nursing member of the basic structure of health institutions, public and private, and heads of service and nursing unit, b) organization and direction of nursing services and technical and auxiliary in companies providing activities planning, services; organizing, c) coordinating, implementing and evaluating nursing care services.4

Historically, the construction and progress of nursing work process and more specifically with regard to the management stage of the professional practice of nursing, was strongly influenced by the administrative theories, especially the classical and bureaucratic administration theory. In these theories, the classical models of management influenced the management of human resources in health which, in recent decades, have led the organizations to unsatisfactory and inefficient results, because they do not respond to current needs.⁷

The fragmentation and division of activities, the impersonality in work relationships, hierarchy and centralization of power are remarkable in everyday nursing work, clearly demonstrating authoritarian managerial conduct that nurses have adopted the practice of work process.⁸

Faced with a more humanized and democratized care that values human capital and their inter-relationships, values and group behavior, there is the approach of the Theory of Human Relations, by the inadequacy of classical administrative organization.

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This, in turn, is heavily criticized by the overrating of bureaucratic organization, formal and structural service, aimed at greater efficiency by the division of labor, power and authority in the vertical hierarchy, not admitting involvement of subordinates, or considering personal and psychological dimension of individuals.

The Theory of Human Relations emerged in the United States in the early 1930s, from the experience of Hawthorne, reality in the industrial environment aimed at evaluating the productivity of functional in relation to working conditions and especially the informal organization of groups, having as primary researcher Elton Mayo.⁹

This theory addresses the importance of social integration in labor income, and assumes that the level and quality of informal organization of teams, and their active collaboration in all stages of the work developed by companies, ensure greater efficiency in obtaining the results, as well as promotes the humanization of service. 9

Its epistemological basis, considering the social recognition and employee valorization, stimulate motivation and commitment to the activities and the relevance of personal identification with the work. In its planning is crucial to offer to employees the sufficient conditions for the performance of activities and instill the spirit of democratic and participative leadership in the informal organization. besides developing communication between those involved in the production process as a fundamental tool in process optimization.9

The incorporation and use of this referential in administrative practices, and specifically in managing the health sector, directly influenced through the role model of multidisciplinary team, being inserted in the proposals of SUS, as a way of organizing health services, using the collective work in health.¹⁰

This proposal brings up a practical and conceptual change in the reorganization of the management of health services by understanding the dimension of indivisibility of care and management, saying that there is a relationship between forms of care and forms of manage, providing the users with a more humanized assistance.¹¹⁻¹²

Based on this concept, the subjects involved are considered capable of acting as reality changing agents, making them coparticipants in the process.

Thus, the Theory of Human Relations in the context of nursing contributes so much to consider the social and psychological relations

of the staff, to develop a good quality work and productivity. The idea that the workforce is an integral part of the whole process, that, by this way, there is no fragmentation and division of labor as in hospital routines.

The theoretical approach in nursing administration really seeks to reconcile the principles of scientific and technical management with the Humanistic administration, adding to their practice, skills that go beyond technical knowledge.¹³

The influence of the Theory of Human Relations with the approach of the values of leadership, communication and motivation, is a subject treated in undergraduate nursing programs or update courses for nurses.¹⁴

In conducting the work, the leader must act leading groups considering aspects of its informal organization, instead of rules, norms and bureaucratic conducts of formal organization. So, its role is to motivate, lead, communicate and conduct and stop being the autocratic manager to conquer the acceptance of people and their commitment to the organization. 9

We also emphasize communication as a process by which links and flow of information among the group are established, and the free initiative of subjects participation, considering their points of view and beliefs during their participation in solving problems.

Another strong point of the Humanistic is the adoption of organization, which is realized as a result of of relationships set and interactions, by the placing of values, customs, traditions and social norms conduct collectively established. organizational model characterized the climax of the Theory, where the man and his form of group organization are primarily considered a key part in the work development, making the of bureaucratic system administration coadjuvant in companies' organization.9

Nursing has absorbed much of these concepts and principles, aimed at developing strategies for the management and administration of the nursing team, to benefit the quality of service.

It is noteworthy, in this sense, the role of the nurse as a social actor, able to transform reality through the coordination of the care/assist/intervene process in nursing, by conducting practices developed in the collective health work, by the organization of available resources, contributing to a better quality of life of the population, by providing a more humanized assistance.³

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FINAL CONSIDERATIONS

From this experience, we were able to identify gaps between the purposes of the Human Relations Theory and the practice in the reality of the service, making explicit the predominance of the Classical Theory of Administration in Nursing. The management, specific activity of nurses, throughout history, has been placed as an overloaded demand activity, limiting the role of professional to administrative matters, interfering in the other stages of the nursing work.

It is necessary, in this sense, to contribute to the transformation of management practice of nursing by the adoption of theoretical support as in the Human Relations Theory, designing in this process, the character of humanization.

The practice of capturing activity gave to the students the reality, the articulation of practice-theory-practice as a methodological proposal for learning, significantly contributing to the development of competences and professional skills, to the extent that the knowledge was built in a dynamic way.

By bringing students and professors of knowledge as the Human Relations Theory and foment discussions about it, the academy offers to the future professionals the construction of knowledge that promote awareness for the realization of a more humanitarian work. In this understanding, the teaching also acts as a equipment of social intervention and transformation of reality, by contributing to the training of professionals able to criticize and reflect on the conditions imposed on the reality of services, as well as health care practices present in their context.

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