

Representations of nurses in a teaching hospital about the object, purpose and instruments of their work¹

Representações de enfermeiros de um hospital de ensino acerca do objeto, finalidade e instrumentos do seu trabalho

Representaciones de enfermeros de un hospital de enseñanza sobre el objeto, propósito e instrumentos de su trabajo

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How to quote this article:

JacondinoMB, ThofehrnMB, AmestoySC, Moura PMM, Porto AR, Borges LR. Representações de enfermeiros de um hospital de ensino acerca do objeto, finalidade e instrumentos do seu trabalho. Rev Fun Care Online. 2019 jan/mar; 11(1):216-221. DOI: <http://dx.doi.org/10.9789/2175-5361.2019.v11i1.216-221>

ABSTRACT

Objective: To know the understanding of the nurses of a teaching hospital about the elements of their work process. **Method:** Exploratory-descriptive research, in which 14 nurses from hospitalization units participated. **Results:** The results show two conceptions of work object: the users of the hospital and their families and the other is health care. Care was ratified as the purpose of the work of the nurse, yet the workers lead the work process in favor of healing, with still focus on the disease. The work tools used by nurses translated into applied scientific knowledge to perform the professional activity. The worker's body was also described as a working tool. **Conclusion:** It is important to highlight the need for investments in research that discuss the nurses' work process in the hospital setting, in order to make this work more visible.

Descriptors: Work, Nursing, Teaching hospitals, Work environment.

RESUMO

Objetivo: Conhecer o entendimento dos enfermeiros de um hospital de ensino sobre os elementos do seu processo de trabalho. **Método:** Pesquisa exploratória-descritiva, da qual participaram 14 enfermeiros de unidades de internação. **Resultados:** Os resultados evidenciam duas concepções de objeto de trabalho: os usuários do hospital e suas famílias; e a assistência em saúde. O cuidado foi ratificado

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como finalidade do trabalho do enfermeiro, contudo, os trabalhadores conduzem o processo de trabalho em prol da cura, com foco ainda na doença. Os instrumentos de trabalho utilizados pelos enfermeiros traduziram-se em conhecimentos científicos aplicados para desempenhar a atividade profissional. O corpo do trabalhador também foi descrito como ferramenta de trabalho. **Conclusão:** Destaca-se a necessidade de investimentos em pesquisa que discutam o processo de trabalho do enfermeiro no âmbito hospitalar, para possibilitar maior visibilidade a este trabalho.

Descritores: Trabalho, Enfermagem, Hospitais de ensino, Ambiente de trabalho.

RESUMEN

Objetivo: Conocer el entendimiento de los enfermeros de un hospital de enseñanza sobre los elementos de su proceso de trabajo. **Método:** Investigación exploratoria-descriptiva, en el cual participaron 14 enfermeros de unidades de internación. **Resultados:** Los resultados evidencian dos concepciones de objeto de trabajo: los usuarios del hospital y sus familias y la otra es asistencia en salud. El cuidado fue ratificado como finalidad del trabajo del enfermero, sin embargo los trabajadores conducen el proceso de trabajo en pro de la curación, con foco aún en la enfermedad. Los instrumentos de trabajo utilizados por los enfermeros se tradujeron en conocimientos científicos aplicados para desempeñar la actividad profesional. El cuerpo del trabajador también fue descrito como herramienta de trabajo. **Conclusión:** Se destaca la necesidad de inversiones en investigación que discutan el proceso de trabajo del enfermero en el ámbito hospitalario, para posibilitar mayor visibilidad a este trabajo.

Descriptor: Trabajo, Enfermería, Hospitales de enseñanza, Ambiente de trabajo.

INTRODUCTION

Work is the process of mediation between man and nature, yet man is part of nature, but is distinguished from nature by the intentional action that gives to work, by the ability to design strategies and to set a goal even before performing the task.¹ In this sense, work is part of human life, being understood as a purposive activity, guided by the consciousness and that can acquire different meanings for the worker.

Due to the relevance attributed to work over time, it is sought to deepen the discussions on the subject, turning the look to nursing and the elements that make up its work process, which in this article refers to the object, purpose, and instruments. Still, the need to think of new ways to boost it and strengthen it, with a view to qualify care, so as to obtain social recognition as a profession and science.

In the nursing work process, the individual is considered to be an object of work, be it healthy, sick or with the possibility of illness, and the transformation of this object can occur both in the promotion and in the prevention or recovery of health.² According to Marxist perspective, the work object is one of the constituent elements of the work process, translated as that which applies the work itself, that on which the action of the worker focuses and that at the end of the process will be modified.¹

On the other hand, the purpose of work is what gives meaning to action, that is why it is done.¹ From this theoretical perspective, in the field of health the purpose of work is

the therapeutic action³ and in relation to work in nursing, care is the pillar that sustains professional activity and that identifies nursing as a health profession.⁴

In order to print a transformation in the user, the worker makes use of working tools, which correspond to the material instruments, the knowledge, and the conducts.³ The instruments of labor correspond to the means, but they are also considered extensions of the body and mind of the worker, in other words, everything that exists between the worker and the object of work.¹

Herein, it is understood that care is all that the nurse performs at work, not only with the hospitalized individual, but all the actions that the worker performs to effect care, such as the management of actions, education, and research.

By analyzing the influences of the capitalist mode of production that have a direct impact on the nursing work process, it is important to highlight that it faces important challenges related to the need to establish itself as a profession, socially valued and challenges for the concretization of a specific field and own knowledge.⁵

Bearing this in mind, the present investigation is justified considering that the perception of health workers about the work process contributes to changes toward the integrality and humanization of health care, directly influences the organization of work and, consequently, with implications in the care itself.^{6,7} Furthermore, discussing the work process favors the consolidation of Nursing as a care science, because it is necessary to produce knowledge that supports caregiving.⁸

Hence, it is fundamental to reflect on the nurses' work process in the perspective of understanding the object, purpose, and instruments of work used in professional practice, considering the qualification in the nursing work organization and the visibility in the nurses' work.

OBJECTIVE

The study's purpose has been to further know the nurses' understanding about the elements of their work process from a teaching hospital.

METHODS

It is a descriptive-exploratory research with a qualitative approach that was carried out in hospitalization units from a teaching hospital located in Pelotas city, Rio Grande do Sul State, Brazil.

The study participants were 14 nurses from the referred teaching hospital, four nurses from the medical clinic, two from the surgical clinic, two from the gynecological-obstetric clinic and six from the pediatric clinic. Inclusion criteria were the following: to be a nurse in the hospitalization unit; to be working in the collection period and to accept to participate in the research.

All inpatient unit nurses at the teaching hospital were personally invited by the researchers. In the research hospital there are 32 nurses, of whom 23 are part of the work process of the open hospitalization units. At the time of data collection of the 23 nurses, three were licensed (maternity or health)

and six nurses did not agree to participate, totaling the 14 interviewees of this study.

Data collection was performed over the period from September to October 2012, through a semi-structured interview. The interviews were recorded in audio, with an average duration of 40 minutes, with free and informed consent of the participants, and transcribed later. The statements were collected at the nurses' own workplace, individually and in a private setting, with a prior date and convenience schedule defined by the workers.

In order to ensure the nurses' anonymity, there was no identification of the units they belonged to, and codes were created from the letter "N" (nurses) and a number from the sequence of interviews (Example N1, N2 to N14).

The research data obtained were submitted to Minayo's operational proposal according to recommended steps:⁹ data arrangement, data classification, and final analysis. The nurses' work process, which was the subject of research in the present research, was analyzed under the Marxist dialectical conception, with the objective, purpose, and instruments of the work process as the guiding elements.¹

The research project was evaluated and approved by the Research Ethics Committee of the Nursing School from the *Universidade Federal de Pelotas* under protocol No. 178/2011. The guidelines and norms of the Resolution No. 196/9610 regarding the ethical standards of research involving human beings were followed.

RESULTS

The data obtained allowed to establish the profile of the participants and to construct two categories of analysis entitled "The human being and the family as object of work and the care translated as the nurse's work process purpose" and "Working tools used by the nurses to promote the care", which will be discussed below.

Considering the 14 study participants, only one was male, 11 nurses were statutory, and three were under bariatric conditions at the health facility. With regards to the employment relationship, six nurses had more than one job. Regarding the work shifts, four professionals work in the morning, five in the evening period and five in the evening. The working time at the institution ranged from two months to 19 years, and the majority of the participants (86%) had at least one specialization in the health area, two of them with a Master's Degree.

Object and purpose of the nurses' work

According to the research participants, the nurses' work object is a little consensual theme, translated into two conceptions: a first conception that the nurses' work object are the sick (patients/users) of the study hospital and also his family and a second conception that the object of work is health care:

"[...] it's the client, it's the patient you serve, it's your patient."
(N4)

"I understand that the object of our work is the patient [...]" (N9)

"It is to provide health care, health care for both the patient and the family [...]" (N3)

"It is to provide humanitarian assistance both to patients and to their families..."(N13)

Furthermore, in the investigation the human being in sickness was identified as an object of work and also the family:

"The purpose of the nurse's job is to provide assistance, in my case the child and also look at the side of the family." (N6)

"The nurse always tries to prioritize the patient and his family. This is our biggest goal." (N12)

The testimonies reveal an extended perspective of the object of work in the hospital scope, since, besides incorporating the family, the interviewees demonstrate an attempt to cover biological, mental and social aspects in the care of the human being, with an emphasis in the social context in which the individual is situated.

"The goal of the nurse's job at the hospital is to provide health care, both physical health and mental and psychological health." (N3)

"[...] it is fundamental to be able to have a broad view of things, to see the social, it is everything that comes with the patient..." (N1)

"[...] it is fundamental to be able to have that very broad view of things, is to see, for instance, that the child has been here for a month, the mother leaves leaving her other child at home, or lost the service and you do not have money to eat, you have a lot of trouble at home, you have the child in the hospital, I think it's essential that you understand that it's not just that child that is not just that mother, that's all that comes [...]" (N1)

"The social issue here is very big, the population [the object] that we attend is very poor, so it is difficult to solve everything! Of course, we can not solve their problems outside, but as far as possible we try to understand and respond well." (N6)

Concerning the work purpose, it was observed the difficulty of the nurses to define the objective of the nurses' performance, and to establish the limits between what is specific to the nurse and what is also used by either the nursing or health team.

"[...] sometimes we are not doing our part that is caring and is wanting to make a medical diagnosis, for example: diagnosis of pathology, it is not our role and sometimes this is inadvertent, by the model itself. Sometimes we mix it up and I think our role is to take care of the patient." (N14)

"[...] when you see a patient doing well and that he was very serious and starts to improve, that's where our goal [purpose] is to know that a little of that recovery was caused by us [nursing], is there my finger, in the vein that I punctured, the medication that was applied, when he [user] was not well, the care I gave, the bath that the employee gave, the change of decubitus, all this work process is there when he is well." (N10)

Another participant despite seeing the care as purpose directs his work to hospital discharge:

"The total focus of the care is the well-being of the patient, is the improvement of their health conditions and always for the purpose of hospital discharge." (N2)

Overall, considering the answers about the purpose of the work, it is noticed that although the nurses identify the care as the purpose of the work, it still maintains a direction of its professional practices with emphasis in the health production. Nurses' statements are contradictory, because although they see an object of intervention in a social context, they prioritize the work process with a focus on illness and healing.

Working tools used by the nurses to promote the care

The research participants refer to different types of instruments, among them are managerial, methodological and educational instruments, all translated as knowledge used by nurses to perform the professional activity and also the worker's body was identified as a working tool.

Through the testimonies, we observe as working instruments the knowledge of human relations, of teamwork, which are translated into management tools, essential tools for the production of care.

"[...] what we use most to work is human relations; Of course we use the technique a lot, but the first thing is the relationship with the employee, with the patient, with the patient's family, with the other professionals. For me, human relations are what I use most at work." (N14)

"What the nurse has to have to work is a good team knowledge, like working with other people [...] because if a nurse has no knowledge about it, he has no way to establish his team, he can not manage the team and can not coordinate the work [...] you can have several good and bad professionals, but who will group, who will get the best of them is the nurse, from his knowledge of interpersonal relationships." (N4)

Also in this research was the knowledge of planning activities and the management of the service, as well as a working tool that simultaneously involves knowledge of coordination and management of the unit and the nursing team and is one of the predominant activities performed by nurses:

"What we use most to work is the planning of the activities, the vision we have of the unit and the health service [...]" (N6)

"What we do in our job is to manage the service, to manage the team." (N10)

Also as a working tool was revealed the methodological instruments, which are associated to the structured knowledge in nursing when the nurse performs direct care to the user, such as critical thinking, evaluation and clinical reasoning in daily situations with the user.

"[...] To work I use my thinking. You have to have a good reasoning, you have to have a feeling [...]" (N10)

The educational instruments are verbalized as the knowledge structured in nursing, when the nurse employs the knowledge in the training with the nursing team and with the user.

"... the nurse has to be always well trained, this I charge the technicians and I train them [...] had a time that I put stop doll and did training with the whole team [...]" (N10).

"[...] Health education is present at all times in my work. Sometimes patients come in for portcath placement, and he does not know what it is: I explain the whole procedure, and I think that's very important and it's the nurse who does it." (N7)

It also identifies the reference to the worker as a body, as a working tool, manifested through the senses of the body such as speech, touch, gaze and body itself.

"[...] we do not actually use equipment to work; of course, you use the equipment, but you will use your body, your perception, your gaze, your knowledge and manual dexterity." (N2)

"[...] to work, I use my body the most." (N1)

DISCUSSION

From the analysis of the Marxist dialectical conception, which divides the work process into object and purpose, it was identified that it is not clear to the nurses of this research the object of work, since they probably did not have theoretical contact about the respective elements of the process of work or little debate on the subject (in vocational training or in the workplace), which already reveals the need to promote discussion spaces with workers about their work.

This question can be understood according to the Marxist perspective, for according to Marx, work sometimes becomes alienation, since the worker becomes a commodity in the capitalist mode of production and such alienation is not only effective in the loss of the object, but in the very act of production.¹

Research conducted with different health professionals (physicians, nutritionists and nurses) also identified two conceptions of work object in health: the client and the care. However, it is the nursing team workers who strongly point to care as an object of work, alluding much more to the purpose of work than to the object itself.⁶

Therefore, it is understood in this study that the provision of health care is the product of health work, and nursing develops part of this work.² In this area, the care performed by the nurse cannot be understood as the object of work, but rather as an epistemological object of nursing on which the knowledge is developed.⁴ The clear understanding by the nursing professionals about the user as a work object can contribute to the visibility of the profession within the field of health and brings a necessary identification: care is the basis of the nursing discipline and, therefore, it is the nursing that takes care.

Despite the confusion in the definition of the work object, the participants include the family as the object of intervention. In this same direction, the nursing care involves acts that transcend biological or technical actions, in order to meet the Marxist conception,¹ in which the human being must be understood as a natural, unique, social, individual being with body and mind interconnected, which translates an integral view of man.

It is known that there are still many changes to achieve comprehensive care and to consolidate an expanded conception of the work object and the health-disease process. This conception becomes more difficult to incorporate when the environment is hospitable and focuses on healing, medicalization, and work practices focused on harsh technologies.

This question is reinforced when one perceives, in the speeches of the participants of the research, a contradictory testimony, in which, although they verbalize a care related to the well-being of the individual and family, they position themselves as professionals who work for the production of health, reinforcing the model of medical-private care that reduces the health-disease process to health improvement or not, with an emphasis on intervention strategies in the sick body.

Nonetheless, care in the hospital environment is aimed at recovering health, in which the disease as the focus of work and the predominance of the clinical model of health care directly interfere with the nurses' way of working, since the hospital maintains the medical professional as hegemonic agent of the production process for appropriating diagnosis, therapy, and hospital discharge.^{3,4}

Nursing has little strength to counteract or differentiate itself from the hegemonic model, which is shaped and influenced by the healthcare practice, by the production of knowledge in the area and professional training in health. Nonetheless, it is also nursing that shows the potential for a greater approximation with the multiple dimensions of the work object in health, considering its intrinsic characteristic of caring for human beings⁶ and the workforce in the *Sistema Único de Saúde (SUS)* [Unified Health System] with quantitative personnel.

These changes to the more complete look at the work object are made possible by the use of the working tools used in the work process and are verbalized by the nurses of this research as an essential tool to transform the object.

The working tool is a complex of necessary things that the worker inserts between himself and the object of work in order to direct his activity on the object.¹ In this research, the nurse is the professional who mediates the work in health through knowledge about how to deal with human relations and workgroups by softening the characteristic of fragmented work.

Here, it is possible to underline the knowledge about teamwork used to aggregate positive skills of each worker and direct them to a common goal. The nurse groups the different professionals in favor of the care to the user, becoming an indispensable tool for the planning of the assistance and configuring, possibly, a peculiar knowledge of this worker. Leadership is recognized by the team as a working tool for nurses, as well as the capacity to multiply caregiving actions.¹¹

Another dimension of the knowledge related to the instruments of work encompasses the construction of professionals' knowledge. In this sense, the knowledge updating is reinforced by the research participants as an indispensable item to carry out the work, being the nurse responsible for the science of recent theoretical, methodological, scientific and technological contributions available in the nursing area. Education is present at all times in the nurses' work process, as it uses it both to empower the nursing team and to guide the patient.¹³

Another aspect of knowledge as a working tool was related to critical thinking, possibly translated as the overall knowledge of the work process, in terms of human, financial, clinical assessment of user conditions and health needs.

Research with nursing professionals also identified the worker's body as a working tool, which reveals an alert to the health services' management in regards to both the workers' physical and mental health.^{6,12}

From the identification of the instruments of work used by the nurses, it is possible to perceive that these instruments amplify the possibility of intervening on the individual. It is understood that it is relevant to draw specific instruments used by nurses to strengthen the visibility and importance of the work of this worker in the hospital.

CONCLUSIONS

In the nurses' work process, the elements of the process (object, purpose, and instruments of work) are constantly articulated, so that one element is embedded in the other in the development of professional practice. This study identified that nurses perceive two conceptions of work object: the hospitalized individual and his family and health care. It was observed a gradual and gradual understanding of the nurses in front of a work object inserted in a social context, which reveals in a certain way, an extended perspective of the object of intervention in the hospital environment.

Herein, it was identified that the purpose of the nurses' work corresponds to care. Nevertheless, this care emphasizes

the clinical-curative model, because although the nurses perceive the intervention object (the patient and the family) located in a social context, they lead the work process with a focus on the disease, prioritizing biological work practice.

Regarding the nurses' working tools, these were translated into applied knowledge to develop professional practice, which are highlighted as managerial, methodological and educational instruments. The use of the worker's own body was also evidenced as a working tool to carry out the care, revealing a situation that deserves attention from the management of hospital institutions and also from public health policies, since these nurses may be subject to physical and mental at work.

As a proposal, it is possible to emphasize the need of investing in research that discusses the elements of work (object, purpose, and instruments) of the nursing profession, so that nursing can be strengthened and consolidated as a profession of care.

It is also important to invest in the continuing training of nurses in order to rethink the direction of work so that nursing can be understood as a social practice in health that is essentially committed to the individuals' life.

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Recebido em: 19/11/2017

Revisões requeridas: 19/01/2018

Aprovado em: 09/04/2018

Publicado em: 01/01/2019

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