



Research Article

Journal of Clinical Review & Case Reports

Experiences in a Nursing Certification Program

Oliveira ACR1*, Tomasella GMF2, Machado MM3, Farras BC4

¹Ariadine Cristina Rodrigues de Oliveira, IQG, São Paulo, SP, Brasil

²Geovana Magalhães Ferecini Tomasella, IQG, São Paulo, SP, Brasil

³Mara Marcia Machado, IQG, São Paulo, SP, Brasil

⁴Bruno Cavalvante Farras, IQG, São Paulo, SP, Brasil

*Corresponding author

Ariadine Cristina Rodrigues de Oliveira, IQG, São Paulo, SP, Brasil, E-mail: cq@iqg.com.br

Submitted: 14 Dec 2019; **Accepted**: 20 Dec 2019; **Published**: 02 Jan 2020

Abstract

The aim of this study is to report the experience of nurses and nursing technicians in the Nursing Certification Program, from the perspective of two program surveyors. The reported experience took place in November 2019 with nursing professionals from a Brazilian general hospital participating in the Nursing Certification Program. The experience report was held at the fifth meeting of the program after building the learning process. It was possible to identify behavioral changes in the groups, which demonstrated motivation regarding the performance of professional practices, so that the perception of autonomy was increased, especially in the group of nurses and leaders.

Keywords: Nursing, Patient Safety, Quality of Health Care, Health Facility Environment, Job Satisfaction

Introduction

The Brazilian Program for Nursing Service Certification of IQG Health Services Accreditation, established in 2017, is designed to support the nurse's repositioning, in the coordination of patient care through the integration of high-performance strategies for excellence in management care [1]. The program is developed in phases and considers the maturity of the group; it thus supports institutional self-awareness, advancing sustainable development and fostering market competitiveness [2].

The expected minimum duration is 18 months, with regular followup in the development of consensus actions between the accrediting institution and the service managers. The construction process includes evaluations of nursing care practice, educational activities and focus groups with each hierarchical level of participants of the nursing service.

Endorsing the program, there is a worldwide discussion of the role of nurses in care, in a campaign launched by the World Health Organization called Nursing Now. This movement is translated into a global alliance that emerged in February 2018 with the objective of repositioning the nurse and contributing with investments for the development of professional knowledge and influence authorities for the professional valuation of the group [3].

One of the global objectives of this Campaign is to support organizations to enhance the action of professional nurses within

care, demonstrating its impact on the health work process, aligned with the fact that the nursing team represents half of the health service workforce [4]. This team is a heterogeneous group whose leadership is important for fostering a positive work environment that can support good practice.

When we look at best practices, we find its description in magazines and books, focusing especially on techniques and procedures, taught in schools and universities. However, the work environment within this context cannot be repeated, copied, or imitated.

Nursing theories are essential to support nursing practices in health institutions; however, there is no nursing theory that reflects the patient's needs, considering their particularities, the aging of the population and the increasing complexity of the cases [5]. People involvement is critical to the success of safe care practices and high-valued for the patient.

Considering that the surveyor plays a facilitating role in the construction of knowledge, and in rescuing the importance and relevance of the group in the institutional results, we sought to reveal the surveyor's perceptions in the report of the nursing team's experience in a Brazilian general hospital participating in the Nursing Certification Program.

Goal

The aim of this study is to report the experience of nurses and nursing technicians in the Nursing Certification Program, from the perspective of two program surveyors. Thus, there are the main gains and impacts observed in the implementation of the model, in addition

to the challenges to be outlined for the future of nursing practice.

Methodology

The reported experience took place in November 2019 with nursing professionals from a Brazilian general hospital participating in the Nursing Certification Program. The experience report was held at the fifth meeting of the program after building the learning process.

The analyzed institution is a general, private hospital, a reference in high complexity care, with 172 operating beds, of which 70 are intensive care units. The most strategically relevant services are organ transplantation and robotic surgery. They have 721 nursing professionals, being 27% nurses, 73% nursing technicians and 0.27% nursing assistants.

At the beginning of the interpersonal relationship, the professionals were approached in four focus groups, the first with 10 nursing technicians, the second with 10 care nurses, and the third with seven nursing leaders. A final group was conducted with the nursing management and quality area leader.

Focus groups provide accessible discussions around a common interest to participants [6, 7]. These are qualitative research techniques, derived from group interviews, which allow the collection of information through personal interactions, based on communication and interaction [8]. Its main purpose is to gather detailed information on a specific topic from a group of selected participants [7].

The surveyors coordinated the focus groups, where the following aspects were addressed: what did the participation in the Nursing Certification process provide in the professional practice environment. To carry out the study, it was requested the authorization of the accrediting institution and the evaluated institution, emphasizing that their personal data would not be disclosed. This authorization was performed electronically by the institution.

Results and discussion

Given the participants' reports, it was possible to observe different perceptions of the professional practice environment between the different hierarchical levels of the institution. In the group formed by nursing technicians, participants noticed, after the implementation of the Nursing Certification Program, the increase in the availability of courses for nursing teams, with different themes and approach mostly of technical topics in the area of profession knowledge, such as the identification of early signs in the deterioration of the patient's clinical state.

It is often observed in the reality of hospitals the predominance of educational actions carried out from the problems identified in the units, especially in the updating of technical procedures and nursing care to critical patients; understanding that the technical dimension is a frequent concern and considered a priority process in the work process [9].

However, the technical issue is only one of the pillars in the work process, with great impact from other work-related factors, such as ethics, legislation, professional practice, interpersonal relationships and teamwork. In a study that analyzed the continuing education demands of the nursing staff of a teaching hospital, the nursing technicians reported the need that educational actions must relate

to the needs of care units in the context of work [9]. This practice can be made possible through the daily practice of the leading nurse in the daily management of its unit.

Another point addressed by nursing technicians was the inclusion of this group in the daily rounds of multidisciplinary discussion of the patient in the intensive care unit. In other units, it was also pointed out by these professionals the expansion in communication with the doctor about the patient's clinical condition.

Factors such as autonomy and good relations with the medical team bring greater personal fulfillment, quality of care, reflecting a climate of safety, job satisfaction and safe behavior [10]. The nursing technician is the figure of the care team with a key role in ensuring safe care practices, supported by communication skills.

In this focus group, discussions related to the difficulty in communicating with the support team, unfavorable to care practice, led to work overload and "failure of care" to patients. The implementation of new routines or new protocols was perceived as a work overload, bringing great demand on the part of management to fulfill the new tasks established. They point out that there are not enough professionals to perform daily tasks.

The reasons that lead to omission in nursing care (unfulfilled, partially or delayed care) is the focus of international discussions, mainly related to the lack of human resources, material (mainly related to drug application) and communication (mainly related to tension in communication between nursing staff and doctors) [11].

The nurses' reports differed from the perception of the group of nursing technicians, raising the improvement in the organization and continuity of care by prioritizing the team to essential practices. The increase in the number of trainings was observed as positive, expanding specific knowledge of the nursing area, thus allowing an improvement in clinical reasoning.

The relationship with management was also a favorable point, with improvement of performance evaluation and frequent application of the "Feedback" tool to support the performance of this work team. It was also noticed as a favorable point the greater support from leaders and peers.

It is important to highlight those environments in which the nurse has autonomy, control over the environment and good relations with the medical team, result in greater professional satisfaction, lower intention to leave the job and makes results better for the patient regarding quality of care and patient safety [12].

The nursing leadership, composed by the team of nursing supervisors, pointed as positive the increase in nursing staff, representing a direct relationship with the reduction of adverse events. Added to this factor, it was noted by this group a decrease in absenteeism, favored by the implementation of programs aimed at workers' health. As in the group of nursing technicians, there was a loss of time in care related to the support areas, leading to a breakdown in the work relationship.

As a favorable point, we observed the transformation in management, becoming shared, bringing autonomy to this group, as well as results, including financial results for the improvement of management.

Thus, it was noted a better use of existing meetings, with productive discussions with effective actions.

Regarding to this last point, the nursing management pointed to a change in the profile of the management itself, making the decentralization of decisions and hierarchies, understanding this process as essential for the repositioning of the nurse. Supporting this process, the job description allowed the definition of deliveries to the different hierarchical levels of the nursing team.

The training, performance evaluation, feedback, adaptation of staff and project for health of the collaborators was built with the support and approach of nursing management with human resources. All of these processes allowed a decrease in the institution's turnover and absenteeism, with a direct positive impact on the institution's costs.

Conclusion

Based on the above, it was possible to identify behavioral changes in the groups, which demonstrated motivation regarding the performance of professional practices, so that the perception of autonomy was increased, especially in the group of nurses and leaders.

There was a clear sense of pride and belonging, especially in the focus group of nurses and leaders, given the autonomy and decentralization of management. Interdisciplinary communication was observed as being a positive point as a result of the program, between the nursing group and the doctors, but still incipient in the figure of other professionals working in patient care.

Thus, it is concluded that the Nursing Certification Program has changed the environment of nursing professional practice in a positive way, bringing to the nursing professional practices issues that are essential for improving the quality of care.

The repositioning of the nursing staff is a process still under construction to be developed with the institution. The groups with the greatest perceived transformation were management and leadership, still initial among the group of nurses and nursing technicians.

References

- 1. IQG (2019) Nursing Certification Program Guide.
- 2. WALLEN GR, MITCHELL SA, MELNYK B, FINEOUT-OVERHOLT E, MILLER- WALLEN GR, et al. (2010) Implementing evidence-based practice: effectiveness of a structured multifaceted mentorship programme. Journal of Advanced Nursing 66: 2761-2771.
- 3. Crisp N, Iro E (2018) Nursing Now, London W1G 0RN, UK (NC); House of Lords, Houses of Parliament, London, UK (NC); and World Health Organization, CH-1211 Geneva 27, Switzerland (EI).
- 4. Cassiani SHB, Neto JCGL (2018) Perspectivas da Enfermagem e a Campanha Nursing Now. Rev. Bras. Enferm 7.
- 5. Brandão MAG, Barros ALBL, Primo CC, Bispo GC, Lopes ROP (2019) Nursing theories in the conceptual expansion of good nursing practices. Rev Bras Enferm 72: 604-608.
- 6. MORGAN DL (1998) The Focus Group Guidebook. Thousand Oaks: Sage.
- 7. Trad, LAB (2009) Focus groups: concepts, procedures and reflections based on experiences with the use of the technique in health research. Physis 19.
- 8. KITZINGER J (2000) Focus groups with users and providers of health care. In: POPE C, MAYS N. (Org.). Qualitative research in health care.2. ed. London: BMJ Books.
- 9. Sade PMCS, Peres AM, Brusamarelo T, Mercês NNA, Wolff LDG, et al. (2019) Demands of permanent nursing education in a teaching hospital. Available from: http://dx.doi.org/10.5380/ce.v24i0.57130.
- 10. GuirardelloEdinêis de Brito (2017) Impact of critical care environment on burnout, perception of quality of care and safety attitude of nursing staff. Rev. Latino-Am 25: e2884.
- 11. Kalisch BJ, Landstrom G, Williams RA (2009) Missed nursing care: Errors of omission. Nursing Outlook 57: 3-9.
- 12. Aiken LH, Sermeus W, Van den Heede K, Sloane DM, Busse R, et al (2012) Patient safety, satisfaction, and quality of hospital care: cross sectional surveys of nurses and patients in 12 countries in Europe and the United States. BMJ 344: e1717.

Copyright: ©2020 Ariadine Cristina Rodrigues de Oliveira. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.