

## EDUCATION OF NURSES: DETACHMENT BETWEEN UNDERGRADUATION COURSES AND PROFESSIONAL PRACTICES

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### ABSTRACT

This study aimed at analyzing the relationship between training and professional practice of nurses as described by reported experiences. This is a descriptive research with qualitative approach. The study subjects were 14 nurses enrolled in a *stricto sensu* graduation program. The data were collected in October 2012, through a semi-structured form with the following guiding question: "In your professional performance as a nurse, did you find a situation of detachment between the undergraduation teaching and the professional practice?" The data were analyzed by Content Analysis Technique. We have identified a detachment between undergraduation education and professional practice of nursing professionals in relation to nursing care, whether to the planning and execution of nursing care shares, the management of the nursing staff and the multiprofessional work. The university education should enable a critical viewpoint of the profession, showing the importance of the social and political role of the nursing professional in care, management, teaching and research, in order to enhance this profession. This could also promote better working and training conditions.

**Keywords:** Professional Practice. Higher Education. Nursing.

### INTRODUCTION

The nursing education has undergone changes under the influence of several factors, among them the new forms of organization of services; the changes in the health system; the scientific discoveries; the development of increasingly complex technologies and the process of population aging<sup>(1-3)</sup>. Thus, all these changes, the instability of work environments and the quick growth in the volume of scientific information started to require that professionals who work in health and nursing have greater theoretical and practical resources for achieving the Millennium Development Goals (MDGs) and perform their roles with greater responsibility<sup>(1-2)</sup>.

Amidst this scenario of changes and increasing demands, it is still observed that the articulation between theory and practice does not take place as it should be, given that it is superficially explored along the process of

nursing education. This detachment between theory and practice can be perceived when the newly formed professional is faced with situations that seem completely new, since they were not experienced during its training or were in a different manner of the professional reality<sup>(1-2)</sup>.

In light of this weakness, the training of nurses for the field of work is an important aspect to be discussed. This training is here understood as a process aimed at acquiring knowledge, competencies, attitudes and skills required for the nursing practice. The profile defined by the National Curriculum Guidelines for the Graduation Nursing Course consists in training a generalist, humanist, critical and reflective professional, who should have social responsibility and commitment to citizenship, besides having its operations based on ethical principles<sup>(3)</sup>. For this purpose, the professional training should take place in scenarios of complex challenges, taking into account elements like globalization, increased

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professional competitiveness, health problems that are exacerbated by changes in the ecosystem and various types of urban violence<sup>(3-4)</sup>.

In this context, the training should include proximity to the actual issues of professional practice and provide tools for the development of interventions and researches that can change the reality. The challenge requires that the nursing professional is involved with the complexity of the breadth of its operation, integrity and attention to the health needs of the individual, family and community<sup>(3-5)</sup>.

In the 2000s, the field of education in the health area was marked by a transformative viewpoint, grounded on critical theories, constructivist conception and also on the problematization of practices and skills, thereby opposing the conservative positions, which are underpinned by positivist and biologicist convictions. Thus, it was expected that the training centers could assume, in an articulated way to the world of work, their responsibility in training human resources necessary to ensure the viability and consolidation of the Brazilian Unified Health System (known as SUS: in Portuguese, *Sistema Único de Saúde*), which would be focused on universality, equity in access health services, decentralization and comprehensive approach of the individual inserted into the family and the society at large<sup>(3-5)</sup>.

Given the above, the present study aimed at examining the relationship, perceived by nurses, between training and professional practice, considering their testimonies. Due to the fact that the nursing professional is one of the foundations for the implementation of public health policies, the detachment between the university education and the actual professional practice is something to be further investigated, with the purpose that they can know the factors that contribute to the maintenance of this disconnection between teaching and practice, which can provide subsidies for the development of strategies for change.

## METHODOLOGY

This is a research with qualitative and descriptive nature, developed in the discipline "Critical Analysis of Nursing Practices", which is attached to the Post-Graduation Program from

the Faculty of Nursing at the State University of Campinas (UNICAMP). It were included students who were attending the *stricto sensu* post-graduation classes of a discipline in the second half of 2012, and they were also nurses with at least 12 months of caring experience. The survey was processed with the approval of the Research Ethics Committee from the Faculty of Medical Sciences at the UNICAMP (Ethics opinion number 04876312.5.0000.5404/2012), as required by the Resolution nº 196/96 of the National Health Council.

The data collection took place in October 2012, with the application of a semi-structured form, which contained the following guiding question: "*In your professional performance as a nurse, did you find a situation of detachment between the graduation teaching and the professional practice?*" The form also contained questions about sociodemographic data with sights to characterize the sample, such as gender; duration of training; time of operation and type of educational institution. The aforementioned form was manually answered by the participants after they were informed about the objectives and ethical aspects of the research. All participants have voluntarily signed the Free and Informed Consent Form, in two copies, and have been identified with the letter "E", followed by an Arabic numeral specific to each participant, in order to preserve the anonymity.

The data were analyzed by means of the Content Analysis Technique, which deals with the linguistic materiality, considering the empirical conditions of the text and establishing categories for the interpretation<sup>(6)</sup>. For this purpose, the respondents' writings were read and reread in a careful way, as well as their contents discussed among the authors, in order to achieve a consensus. After this, the data were organized and grouped into two categories: *the differences between care process in training and in professional practice, as well as differences between the management process in training and in professional practice*.

Next, the collected data were transcribed in a literal manner with sights to expose the analyses.

## RESULTS AND DISCUSSION

### Characterization of the study subjects

The study participants were 14 nurses. Among

the participants, 12 were female and aged between 24 and 49 years. Regarding time of professional experience in the nursing area, we have identified: four participants with time less than or equal to five years; and four nurses with between 6 and 10 years and, finally, six of them with over 10 years of experience. The majority of the respondents (10) did the Nursing Undergraduation Course in public institutions.

From the reading and rereading of the respondents' testimonies, we have elaborated two categories that address differences between the academic training and the professional practice, both in the care process and in the management process. They are presented below.

### **Differences between the care process in training and in professional practice**

Nurses, when asked about their activities in daily practice and the relationship that they identified in the undergraduation teaching, assumed that there were many situations in which significant differences between the ideology of training and the actual practice emerged in the daily work. Therefore, the training produces gaps when fails to exploit potentialities that are required to the professional practice.

The first difficulty was the paucity of human and material resources in health institutions, as well as shortfall of physical resources and working process failure. This situation hampers the performance of nurses in full perspective, being that they repeatedly use improvisations to conduct the patient care, with a minimum time for direct contact with their customers, due to their several assignments. The teaching is focused on "ideal" situations that are distant from the everyday care:

What we see in practice are services organized in a way that cannot enable the integral action of nurses in a similar way to the scope of the undergraduation course (whether for lack of human resources, physical resources or for the working process). (E5)

There is lack of staff, lack of materials, lack of or inadequate training, lack of structure, so we end up using improvisation to care of patients. (E8)

It was realized a professional effort for adapting to the actual setting where the practices of nursing care are conducted. This issue is

directly related to the production of knowledge, which does not exclusively take place in the academic environment, but also within the various research and health institutions<sup>(5)</sup>.

The shallowness of the teaching of some procedures, as well as some technical and managerial skills, also can be highlighted. Some concepts are exposed, but it is very hard getting an opportunity of performing practical experiences during internships, but the future professional will also be charged with regard to these skills in the field of work.

The nursing notes in practice are very different from the theoretical approaches. The completion of procedures also does not follow the same rigor of the theory. (E5)

In undergraduation classes, we learn various procedures and concepts that often we do not have the opportunity to hold on internship programs [...] when we fall in working field, we are charged to develop them with skill and dexterity. (E11)

My biggest insecurities were related to practices that were not performed during the undergraduation course, as well as the fact that I could not relate the theory with such practice, such as, for example, because a patient with diabetic ketoacidosis shows the Kussmaul's breath and I had to recognize it in the gasometry. (E2)

The difficulty of integration between the graduation disciplines and the professional practice, in which one can see the predominance of fragmented care, i.e., without critical reflection aimed at solving problems, was also pointed.

There was a fragmentation of nursing care in which the technique was performed through the technique, the exams were taken towards a problem and the X-ray was addressed to just a part and not the patient itself. (E11)

The university itself fosters this fragmentation of knowledge by providing the building of a knowledge distributed in disciplines organized from the biomedical model. The vocational disciplines reproduce the know-how model, without articulation among their contents. The academy has its share of responsibility in the predominance of fragmented and non-theorized professional practices, since it has shown that the professional ideologies of autonomy, power and reflective practice seem to be different realities

in the classroom and in the daily practice<sup>(7)</sup>. There is a requirement of complying with the technical knowledge, and it is even recommended in a rigorous manner, during the graduation period, but is not always followed in professional life<sup>(5,7)</sup>.

Another relevant theme found in the answers was the difficulty with regard to the Nursing Care Systematization (NCS) in everyday practices, due to the ignorance of professionals, work overload and devaluation of this factor in the daily work.

The consolidation of the nursing process depends on several factors, among which we highlight the economic and social issues that affect the professional practices. In an age of fast technological advancement, nurses are required to demonstrate that their interventions related to care can make a difference in the obtained results, because the user who seeks a health service should feel confident in relation to the approaches adopted for its treatment. The identification of the level of nurses' knowledge about the stages of the NCS, its use in daily life and the difficulties encountered in its implementation are of utmost importance for proposing measures that can contribute to its feasibility. These actions should be conducted with sights to improve the use of this working methodology, since that its conduction shows the intention of increasing the quality of patient care and enhance nursing practices, thereby improving the professional performance throughout this process<sup>(8)</sup>.

The use of method requires a critical thinking from professionals, and this thinking should be focused on objectives and targeted to results, in order to meet the needs of patients and their family members. The development of the NCS is a way to exert the profession with autonomy, in other words, with basis on technical and scientific knowledge accumulated in the last few decades<sup>(8,9)</sup>.

The Brazilian Federal Board of Nursing (known as COFEN) made mandatory the implementation of the NCS and reinforced the importance and necessity of planning nursing care shares. The COFEN Resolution n° 272/2002, updated by the COFEN Resolution n° 358/2009<sup>(10)</sup>, article 2, advocates that "the implementation of the Nursing Care

Systematization (NCS) should occur in all health institutions, public and private". Nonetheless, there are difficulties for its implementation, which involve not only the scarcity of resources, but the way in which the professional appropriates this knowledge<sup>(11)</sup>. These questions contribute to the gap between knowledge production and its applicability in the daily practice of the field of nursing.

During undergraduation, I learned to perform the NCS with the five steps, but in practice I saw that it was not performed, and when it was, people did it with no commitment, they didn't prioritize diagnoses, didn't design a care plan. (E14)

I found a distancing between the nurses' practice and the use and effectiveness of the Nursing Care Systematization. Moreover, the health establishments are unaware of the need for this systematization. (E10)

NCS was not performed in any step as it was my responsibility to take care of an average of 40 to 50 patients. (E13)

Another identified issue was the humanized care. During undergraduation, it is emphasized the importance of the comprehensive care for the individual, but in practice what is found is a fragmented care, which is focused on the disease or the diseased part of the body, thereby hindering the full care of the patient.

In my undergraduation, it was greatly emphasized the issue of humanization with sights to address the patient as a whole. But I didn't see it happening in practice. In most cases, patients were approached like diseases. (E2)

When we are at undergraduation, we learn the ideology of the services. Everything seems perfect. Nursing care at undergraduation takes place in the best possible way. The patient is welcomed, heard [...]. However, in practice it is observed that things are unlike all that, since there are days that I could not even see the faces of the patients, I wasted my whole duty "putting out the fire". (E12)

The existing conditions to supply materials in institutions can interfere in the work and also in the feelings of professionals, making it difficult to operationalize actions and, consequently, impairing the humanized nursing care. Considering the increased cost control, many institutions are struggling to remain in operation. The limited professional staff, shortfall of

material resources, unhealthy conditions and new and continuous technological demands increase insecurity and foster dissatisfaction at work. These facts result in a fragmented and dehumanized care <sup>(12)</sup>, which generates risks and dissatisfaction for customers and health professionals.

### **Differences between the management process in training and in professional practice**

The administrative function is inherent in the professional practice of nurses. It is hoped that this professional will assume the management of sectors, services, nursing staff, but not always the nurse feels prepared for this type of operation. Due to the recognition of the importance of the nurses to assume, in addition to the direct patient care, the management of nursing care, it was emphasized the education related to management of services in nursing under graduation curricula. This involves the organization of infrastructure of the unit, planning of the patient care and the coordination of the nursing staff targeted to offer efficiency and humanized care <sup>(5)</sup>.

Currently, the managerial function of nurses is designed as a continuous learning process <sup>(13)</sup>, where the professional practice provides the best situations for learning, but health professionals should be in constant search for improvements and updates. To this end, it becomes necessary to demystify the management in nursing as a dysfunction, besides reinforcing the importance of dominating this space on the part of nurses, as a working process within the health production. The intervention strategies in the working process and the professional satisfaction are raised from innovation in nursing management, pointing to possibilities of changes in organization and in reality of the world of work, which is currently generator of wear <sup>(3,5)</sup>.

There is a lack of resources for management. (E9)

Various practical situations were enhanced after training and remain in constant transformation [...] these are examples that I learned in practice: leadership, interpersonal and interdisciplinary relationship. (E6)

The lack of opportunities to experience care and management shares during the graduation period is translated into insecurity in the professional practice. The "protected" environment of teaching does not allow students

to face an actual experience of a confrontational situation or the accountability for a whole team. Generally, nursing students encounter in their professional lives several situations of confrontation, conflicts and management, but they are not always prepared for it. Accordingly, the leadership also appears as a major difficulty faced in professional practice.

[...] There is a distancing between the teaching of leadership in the field of nursing and the fact of being the leader in professional practice. (E3)

The work and supervision of the nursing staff is improperly conducted and is unskilled. (E5)

Currently, the conception of leadership is not only based on individual characteristics. There are several factors that contribute to the formation of a leader, including the organizational factors and group qualities <sup>(13)</sup>. The nursing professional is responsible for the nursing team and needs to be prepared to lead it. The main role of the leader is to monitor the delegated activities and supervise them to ensure the quality of the provided care <sup>(5,13)</sup>. The nursing professional should recognize the value of teamwork and its subordinates, establishing a responsible and ethical leadership, seeking knowledge, confidence and fluidity for the quality of care in a continuous way <sup>(13)</sup>.

The relationship with other professionals is also a topic addressed by nurses as an example of the detachment between theory and practice. Nursing is a profession responsible for the care and is inserted in a team of professionals who are also responsible for the health of the individual, within its cores <sup>(14)</sup>. The relationship between professionals never takes place without any conflict, given that confrontations between the medical and nursing staffs are very common in the daily lives of nurses.

At the university, we learned that we are professionals that care and work as a team, but I wrestled with the illusion of a nursing team that obeys. (E1)

There is a lack of respect from medical professionals and nursing assistants. (E9)

The teamwork issue and how to deal with conflicts encountered in everyday life were little exposed to us in the under graduation period. (E11)

The lack of explicit delineation of roles among the teams enables interference and

disrespect of professionals towards each other<sup>(5,14)</sup>. Thus, when the nurse ceases to carry out his or her core activities to replace other professionals, its work is not valued and, therefore, the nursing staff supervision becomes insufficient and ineffective, thereby damaging the patient care.

### FINAL CONSIDERATIONS

The detachment between what is taught in nursing undergraduation courses and what is experienced by professionals in their daily practices can be confirmed by the literature and

the nurses' reports in this research. It is noted that the contexts in which this detachment is perceived concern both the planning and the execution of nursing care, as the management of the nursing staff as well as the multiprofessional work.

It is essential to pay attention to the reality of nursing education in Brazil. The university education should enable a critical viewpoint of the profession, showing the importance of the social and political role of the nurse in care, management, teaching and research, in order to enhance the professional and achieve better working and training conditions.

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## FORMAÇÃO DE ENFERMEIROS: DISTANCIAMENTO ENTRE A GRADUAÇÃO E A PRÁTICA PROFISSIONAL

### RESUMO

O objetivo deste estudo foi analisar a relação entre a formação e a prática profissional do enfermeiro conforme as experiências relatadas. Trata-se de uma pesquisa descritiva de abordagem qualitativa, tendo como sujeitos 14 enfermeiros matriculados em um programa de pós-graduação stricto sensu. A coleta dos dados ocorreu no mês de outubro de 2012, mediante formulário semiestruturado com a seguinte pergunta norteadora: "Em sua atuação profissional como enfermeiro, você encontrou alguma situação de distanciamento entre o ensino da graduação e a prática profissional?" Os dados foram analisados pela Técnica de Análise de Conteúdo. Identificou-se o distanciamento entre o ensino de graduação e a prática profissional do enfermeiro quanto à assistência de enfermagem, tanto no seu planejamento e execução, quanto na gerência da equipe de enfermagem e no trabalho multiprofissional. A formação universitária deve possibilitar visão crítica da profissão, mostrando a importância do papel social e político do enfermeiro na assistência, no gerenciamento, no ensino e na pesquisa, a fim de valorizar a profissão. O que também poderá promover melhores condições de trabalho e de formação.

**Palavras-chave:** Prática Profissional. Educação Superior. Enfermagem.

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## FORMACIÓN DE ENFERMEROS: DISTANCIAMIENTO ENTRE LA GRADUACIÓN Y LA PRÁCTICA PROFESIONAL

### RESUMEN

El objetivo de este estudio fue analizar la relación entre la formación y la práctica profesional del enfermero conforme las experiencias relatadas. Se trata de una investigación descriptiva de abordaje cualitativo, teniendo como sujetos 14 enfermeros inscriptos en un programa de postgrado stricto sensu. La recolección de los datos ocurrió en el mes de octubre de 2012, a través de formulario semiestruturado con la siguiente pregunta guía: "¿En su actuación profesional como enfermero, usted encontró alguna situación de distanciamiento entre la enseñanza de la graduación y la práctica profesional?" Los datos fueron analizados por la Técnica de Análisis de Contenido. Se identificó el distanciamiento entre la enseñanza de graduación y la práctica profesional del enfermero en cuanto a la asistencia de enfermería, tanto en su planificación y ejecución como en la gerencia del equipo de enfermería y en el trabajo multiprofesional. La formación universitaria debe posibilitar una visión crítica de la profesión, enseñando la importancia del papel social y político del enfermero en la asistencia, en el gerenciamento, en la enseñanza y en la investigación, a fin de valorar la profesión. Lo que también podrá promover mejores condiciones de trabajo y de formación.

**Palabras clave:** Práctica Profesional. Educación Superior. Enfermería.

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