

THE DAILY WORK IN NURSING: A REFLECTION ON PROFESSIONAL PRACTICES

Mariana Almeida Maia*
Ana Carolina de Oliveira Paiva**
Diene Inês Carvalho Moretão***
Renata Cristina Rocha Batista****
Marília Alves*****

ABSTRACT

Objective: To reflect on the daily routine of nursing work practices, taking into account the daily ways of doing in which Certeau proposes, focusing on historical aspects and professional performance in health services. **Methods:** This is a reflection based on the studies on the daily life of Michel de Certeau. **Results:** The application of the arts of doing about the daily life of the profession proposes the need for discussions about the daily practices of nursing and critical reflection on the reality of health services. Strategies and tactics are used in the daily work of nursing, as a dimension of the real. **Final considerations:** Practices in health services include several ways of doing the work; and in the nursing routine these actions become multiple and intermittent. Nursing uses pre-established aspects of the work and a creative dimension of the professionals' work.

Keywords: Nursing. Nurse Role. Professional Practice. Health Services Administration. Health Services.

INTRODUCTION

The practices in the health services contemplate several ways of doing the work, aiming at attending single subjects with individualized needs. In the words of Certeau, practice is the "art of doing" various operations through which the users of the system appropriate the space organized by socio-cultural production techniques. They involve standardized ways of doing, modified by executors with diverse interests to facilitate work, such as revenge, to disobey or to take some advantage⁽¹⁾.

Practices imply the use of strategies and tactics, both by professionals and by users who use them to deal with the multiplicity of activities found in everyday life. Strategies evidence relations of force and presume the existence of a circumscribed place in which there are relations of domination and prescriptive rules of conduct. Tactics would be "a calculation that cannot count on a place of its own, and therefore with a boundary that distinguishes the other with visible totality"⁽¹⁾. Thus, norms, routines, and standardizations coexist with creative and ephemeral ways that cannot be kept (tactics), these ways of doing daily practice are used to

account for the complexity of everyday work.

Health work, made up of knowledge and practices, presents the potential to reveal how care production is governed by strategies and tactics that involve skills, production, needs, desires, demands, solutions and limits that surround everyday life of health services with a high degree of standardization and improvisation.

The practice of care has always been inherent in human activity, which has built its environment and has, over time, been improving ways for it to occur. Nursing, in its professional practice, played an important role in the organization of health care, under the influence of the Taylorist model, using norms and routines to organize care. With these practices, nursing began to be recognized as a salaried profession, necessary for the maintenance of hospital dynamics⁽²⁾. Subsequently, the professional practice of the nurse has expanded to other spaces, maintaining as the primary work object the human being, its main purpose being the care of people.

In this context, nursing begins to define and redefine its role, to discuss its work dynamics in patient care and to reinforce its care practice, which has undergone great evolution, especially in the 1990s^(2,3). From activities of a charitable,

*Nurse, PhD student in Nursing at the Federal University of Minas Gerais, Federal University of Minas Gerais (UFMG) Belo Horizonte, Minas Gerais, Brazil. E-mail: maia.mariana.ufmg@gmail.com. ORCID ID: <https://orcid.org/0000-0001-6311-2964>

**Nurse, Master in Organization and Management of Health Services and Nursing at the UFMG, Hospital das Clínicas of the Federal University of Minas Gerais, Belo Horizonte, Minas Gerais, Brazil. E-mail: carolpaiva6@hotmail.com. ORCID ID: <https://orcid.org/0000-0001-5729-3658>

***Nurse, Master in Organization and Management of Health Services and Nursing at the UFMG, SARAH Rehabilitation, Belo Horizonte, Minas Gerais, Brazil. E-mail: dieneem@yahoo.com.br. ORCID ID: <https://orcid.org/0000-0002-1716-391X>

****Nurse, Master in Organization and Management of Health Services and Nursing at the UFMG, Hospital das Clínicas of the Federal University of Minas Gerais, Belo Horizonte, Minas Gerais, Brazil. E-mail: renatabatista.houfmg@gmail.com. ORCID ID: <https://orcid.org/0000-0001-8100-4924>

*****Nurse, PhD in Nursing from the University of São Paulo, Professor of the Nursing School of the UFMG, Belo Horizonte, Minas Gerais, Brazil. E-mail: marilialves@gmail.com. ORCID ID: <https://orcid.org/0000-0002-4695-0787>

religious nature and with the objective of seeking divine salvation, in the past, it becomes a professional, salaried job, in the construction of care from the formation process. Care, therefore, is an element of personal growth that transforms not only the sick individual but also the caregiver throughout his or her life and experiences. In the nursing routine, the act of caring implies knowing the other, unveiling their desires and desires, seeking to offer and building a state of health to be cared for ⁽⁴⁾. At the same time, the nurse performs administrative activities with an organizational vision or focused on the management of care and teams in different aspects and groups.

In the larger work process, with care as its essence, the nurse brings the knowledge and skills to deal with the other, to communicate and to interact⁽³⁾. This professional transforms the act of caring into effective professional action for the transformation of the patient's health conditions.

In health work, the care exercised by nursing must be expressed taking into account the daily practices aimed at the individual, family and community. Postmodernity has brought, for nursing, a look at the daily life of the people and the value of the small things that add up to the act of caring. For the strengthening of care, other looks are necessary for care to reach its goal, focusing on the reach of what is not usually seen⁽²⁾.

Other views of nursing and other professionals value subjective aspects of professional work and the people served. Health work has specificities, considering that it is not performed on things or objects, but on and for people based on a shared intersection between the professional and the patient. In order to reconcile activities and produce something new in daily life, the nurse confronts, in his daily practices, strategies imposed by organizations with creative ways of doing, in order to achieve better results. It is in everyday life that there is a possibility of knowledge about movements of resistance to hegemonic forces⁽¹⁾ and on day-to-day minutiae in relations and production of care.

Everyday life is important for reflections on life in society, highlighting interfaces of common life and aspects of places shared by individuals, groups and institutions in permanent relations of cooperation and conflict. That is why it is

important to study it in the area of management, because the analysis of everyday practices is one of the ways organizations are understood. Thus, the purpose of this study was to provide elements to enable reflection on the daily practice of nursing work, taking into account the arts of daily life proposed by Certeau, focusing on historical aspects and professional performance in services of health.

METHODS

This is a theoretical-reflexive essay written from the readings, discussions and reflections carried out during the course "Management Practices in Health Services", offered at the Postgraduate Course in Nursing, School of Nursing, Federal University of Minas Gerais (UFMG) in 2017, which studies management trends, technologies and implications for daily work and health training, subjectivities and objective conditions in management and work. The theoretical reference of Michel de Certeau⁽¹⁾ was used for the reflection of Nursing practices in the daily life, considering its theoretical and practical importance for the quality of the services, management of the care practices in its different modalities in the Primary Care work scenarios Health, Secondary and Tertiary.

Historical contribution to professional practices

Across the world, the evolution of production models, such as Taylorism, Fordism, and Toyotism, more recently introduced changes in society in order to reduce costs and optimize owner profits. Management models act as work disciplines and control the work process by the dynamics of capital accumulation⁽⁵⁾.

Taylorism instituted a hierarchical framework of work, in which higher-level workers idealized the tasks to be performed by others at the bottom of the organizational pyramid. It is characterized by work scheduling, time and movement control to reduce production time, specialization of the worker in specific tasks and salaries according to the speed and physical capacity, being a model of high production with low costs⁽⁵⁾.

Fordism, following Taylorist assumptions of the classical school, concentrated its mode of

manufacturing on the assembly line, whose main function is to connect in sequence the various works performed by the workers, in addition to the mass production and consumption and vigilance of the workers. Fragmented production facilitated control of labor, limited workers to repetitive movements, and disqualified the professional⁽⁵⁾.

In the health area there is a tendency to maintain the Taylorist model of production, mainly linked to norms and routines and worker control. Nursing is the largest professional group in health services and stands out for care activities, but also planning, organization and control of work and workers in the organizational scope. It has an important administrative function in the health services, compared to other professions, anchored in its process of formation and insertion in the labor market in which nurses, concurrently, must carry out assistance and administrative activities.

In the flexible model, known as Toyotism, the organization becomes more malleable and the worker must have broad knowledge of the productive process and new technologies. It emphasizes a system of production proportional to the demand and growth of the market and production is conditioned to a minimum stock, to meet the requirements in the shortest time and with higher quality⁽⁵⁾. In health organizations, it is possible to find mixed models, with predominance of one or the other model, although Taylorism prevails in daily work.

Taylorism, Fordism and Toyotism are models that seek, each in its own time, to meet the demands of the capitalist world, reflecting directly on the daily lives of people who live from work⁽⁵⁾. With the nursing team it is not different, considering that it is possible to identify in its historical course that the demands of organizations and society generate the need for changes in the forms of organization and control of work.

A theoretical view on professional practices

In his book *The Invention of Everyday Life*, Certeau discusses how representations or social behaviors occur in which, in a thousand different ways, the everyday is invented⁽¹⁾. In a deeper analysis, it is possible to understand, in the light

of Certeau, that the resistances present in everyday life do not necessarily mean a severe opposition to laws, norms and strategies, but a way of circumventing, producing something new, that is, that is received from the organization through a cunning bricolage, evidencing a new knowledge.

The dichotomy that has formed between production devices and consumers has led individuals to develop "punching arts", shrewdness, that is, victories of the "weak" over the "strong" and is increasing in the world of job. In scientific discourses, however, there is a growing distance between effective and everyday practices and what is known as science, that is, global strategies and local wiles are not always present in scientific studies. They are described only as a mixture of science and fiction.

On the other hand, Certeau proposes the elaboration of a 'politics of the wits', whose objective would be to recognize the expressions of everyday practices and to that policy to assign an author, a subject, a common hero, that represents the murmur of the societies and that occupied the scientific scenes. This subject would be what he called the 'ordinary man'⁽¹⁾.

In recourse to the Freudian theory, Certeau describes this ordinary man as the narrator of his own history, bringing to himself the illusion of being able to clarify all the enigmas of the world and encouraging the assurance that 'Providence' takes care of his life. In this context, culture appears in this discourse, when the ordinary man begins to define the place/common and the anonymous space where it develops.

In his work, Certeau describes the forms of resistance of everyday practices, based on the war model, the 'polemological' model, that is, the relation between two distinct 'poles': 'strategies' and 'tactics'. In this context, strategies depart from a place that is linked to an institution, a physical place, theoretical or writing, for example. Tactics, on the other hand, constitute the ways in which ordinary subjects, who do not own this place, move in it, having as their main ally time, transforming place into space of relations. Therefore tactics are the wiles, the art of striking the enemy's field⁽¹⁾.

Thus, Certeau defines that strategies are the means capable of producing, imposing and mapping the types of 'operations', leaving only

tactics the art of altering and manipulating. It is at the moment when the panoptic view of the strategies is absent that the subjects find space to give blows. Therefore, power is tied to its visibility, becoming the 'art of striking', in a sense of occasion in response to the demands of daily life.

It is therefore urgent for the author to discover how the creative side of subjects emanates from everyday life, which in their ways produces resistance to constant and present "vigilance" in all spheres of society, in the daily practices of Nursing.

Ways of doing the Nursing practices in the Health Services

Brazilian nursing has advances in the professional practices in the different work environments in Primary, Secondary and Tertiary Health Care levels, involving actions in communities, in the management and training of human resources. The quality of care and management is currently one of the main challenges of nursing in the consolidation of the Unified Health System and must understand the principles of integrality, universality, equity and social participation⁽³⁾. In other environments there is permanent pressure for quality and safety of patients and professionals, which has been a current challenge. In the different contexts of health care, nursing seeks to build a day-to-day basis of evidence-based care, interacting with patients and their families, seeking a new, more effective, sensitive, flexible and comprehensive health action⁽⁴⁾.

In order to achieve the expected care, there is a need to build relationships of trust with freedom, respect and interaction between nurses/patients/professionals, seeking to understand the life and work contexts of nursing and patients. Care needs to be focused on the health needs of the population and, if the service does not respond to the demands, articulations are necessary so that the subjects have access to other levels of attention⁽³⁾.

Nurses need to look for space to develop their managerial and care practices in the daily routine, performing actions that can be done directly with the patient, his/ her family and the nursing team. From these interactions, affective bonds will be

built and more effective among individuals, which will reflect in good care practices. Thus, in constructing an extended care, nursing contemplates action-reflection-action in practice, which is fundamental in health care settings⁽⁶⁾.

The nursing work practices consist of several micro-processes within a macro-process, with the aid of hard, light and hard technologies. These daily practices occur through activities that are interdependent and complementary, observing the predominance of organizational and management action⁽⁷⁾ for the practice of care.

Management practices are complex and dynamic and require strategic thinking. Strategies establish a place that will serve as the basis for managing the relations of strength between individuals. Thus, when providing care, a healthcare professional must plan a strategy and follow established protocols, so that the expected care occurs, as well as adapt the norms to the context. This is because health care professionals construct ways to subvert standards and routines that are imposed on them, adopting survival tactics and modifying predefined behaviors. Thus, the daily practice is developed in the experience of the professional, through the relationships and interactions between subjects, becoming a real work, with tactics, in relation to the strategies of the prescribed work. To do this, professionals must be flexible, creative and recognize the difference between prescribed work and actual work.

In the daily routine of nursing management, it is possible to highlight actions taken by nurses in their work: Leadership; Management of human and material resources; Care planning and care delivery; Education and training of the nursing team; Coordination of care delivery processes and evaluation of the results of nursing actions⁽⁸⁾. However, practice becomes a challenge in the face of scarce resources for effective action. There is a lack of materials, inputs and equipment, poor integration of the health network, problems in interpersonal relations and physical structure, which contributes to a less stimulating environment for the exercise of the profession.

Leadership performance in the daily work of nursing is fundamental for coordination, provision and articulation of the activities that involve the production of health care, as well as the organization of an environment that favors the

quality and safety of the patient^(8,9). The practice of leadership has proved essential to meet the new demands. Increasingly, the market demands quality management and responsibility from nurses⁽⁸⁾. Studies show that leadership is one of the most important and most present competencies in nursing managers^(2,3,5), because it interferes with changes in the way one practices health.

The management of human resources occurs through the constitution of the nursing team, according to the needs of the patients' care, aiming at integrality and equity. The management of material resources ensures the quantity and quality of the materials necessary for the continuous accomplishment of the activities with lower cost^(7,10). The shortage or deficiency of these resources implies improvisations and permanent adequacy to obtain positive answers.

The care planning occurs through the systematization of nursing care (SNC) and its implementation by the nursing process requires clinical reasoning to determine care priorities^(2,4). SNC creates opportunities that facilitate the routine of nursing in patient care and allows greater interaction and autonomy to organize the data collected and the knowledge inherent to the profession, prioritizing actions and nurse's decisions as a team member. So it is not just another standard, it must be built in a shared way with the team.

The education and training of the nursing team is a managerial practice that depends on the context of action and contributes to better practices^(9,10). It is a strategy of reorganization of work processes in the continuous search for improvement, updating, improvement and adequacy. The training of health professionals, we need to pay attention to the diverse and sly look, because the practice of care requires a rigorous and flexible look of the ways to think, to describe and to direct it⁽⁷⁾. Ongoing training requires research, selection of priorities, development of a development program with training and results monitoring.

The nurse has a key role in coordinating care, participating in all stages, directing, controlling, supervising, coordinating, communicating and directing the care activities without losing sight of the knowledge of the team members. By legislation, it must manage the care of patients

and their families and carry out educational activities that are exclusive to the nurse⁽¹⁰⁾. Nursing actions should have the results evaluated as an essential act to verify if they are close to what is expected or if they require changes⁽¹⁰⁾, ensuring the effectiveness and efficiency of services.

The formal aspects or strategies have permanent and approval of the organization while tactics are ephemeral, not registered, bring the idea of anonymity and represent skills in the use of time and occasions that present themselves, so circumstantial. The great challenge is recognizing their existence, correcting deviations and finding the best way to use them to achieve quality.

FINAL CONSIDERATIONS

The daily practices of nursing are marked by predetermined protocols, norms and routines in a context of excessive standardization of actions, while demands require flexibility, perceive members of the organization of the same.

The strategies are established, but not always fulfilled before the demands of daily work dynamic, in which there is pressure of time and results in patient care, in addition to inadequate resources. The practices experienced by professionals lead to the use of tactics to respond to needs every moment, generating unforeseen and circumstantial actions. In spite of the resistance to the standardized conformation of institutional strategies, this does not happen in a conflictive way, but it is often shown in a creative and positive way, in the search for a new, mixed and fruitful reality. Creative ways of doing (tactics) do not negate the strategies, but complement them, aiming at effective results in the delivery of care to individuals and families.

The nurse, as leader of the nursing team, in the daily practices, also performs creative actions in resource management, care planning and in the coordination and evaluation of the results of nursing work.

The main contribution of this study to nursing is based on the need to create spaces for discussions about daily life and nursing management and care practices, considering the creativity and the astuteness of the subjects in the construction of more human management links and processes care and services.

O COTIDIANO DE TRABALHO NA ENFERMAGEM: UMA REFLEXÃO SOBRE PRÁTICAS PROFISSIONAIS

RESUMO

Objetivo: Refletir sobre o cotidiano das práticas de trabalho de enfermagem, levando em consideração as maneiras de fazer no cotidiano propostas por Certeau, focalizando aspectos históricos e de atuação profissional em serviços de saúde. **Métodos:** Trata-se de uma reflexão fundamentada nos estudos sobre o cotidiano de Michel de Certeau. **Resultados:** A aplicação das artes de fazer sobre o cotidiano da profissão propõe a necessidade de discussões sobre as práticas cotidianas da enfermagem e reflexão crítica sobre a realidade dos serviços de saúde. As estratégias e táticas são utilizadas no cotidiano de trabalho da enfermagem, como uma dimensão do real. **Considerações finais:** As práticas nos serviços de saúde contemplam diversas maneiras de fazer o trabalho; e no cotidiano da enfermagem essas ações se tornam múltiplas e intermitentes. A enfermagem utiliza aspectos preestabelecidos do trabalho e uma dimensão criativa do fazer dos profissionais.

Palavras-chave: Enfermagem. Papel do Profissional de Enfermagem. Prática Profissional. Administração de Serviços de Saúde. Gestão em Saúde.

EL COTIDIANO DE TRABAJO EN LA ENFERMERÍA: UNA REFLEXIÓN SOBRE PRÁCTICAS PROFESIONALES

RESUMEN

Objetivo: Reflexionar sobre el cotidiano de las prácticas de trabajo de enfermería, teniendo en cuenta las maneras de hacer en el cotidiano, propuestas por Certeau, enfocando aspectos históricos y de actuación profesional en servicios de salud. **Métodos:** se trata de una reflexión basada en los estudios sobre el cotidiano de Michel de Certeau. **Resultados:** la aplicación de las artes de hacer sobre el cotidiano de la profesión propone la necesidad de discusiones sobre las prácticas cotidianas de la enfermería y reflexión crítica sobre la realidad de los servicios de salud. Las estrategias y táticas son utilizadas en el cotidiano de trabajo de la enfermería, como una dimensión de lo real. **Consideraciones finales:** las prácticas en los servicios de salud involucran diversas maneras de hacer el trabajo; y en el cotidiano de la enfermería estas acciones se vuelven múltiples e intermitentes. La enfermería utiliza aspectos preestablecidos de trabajo y una dimensión creativa del hacer de los profesionales.

Palabras clave: Enfermería. Rol del profesional de Enfermería. Práctica Profesional. Administración de los Servicios de Salud. Gestión en Salud.

REFERENCES

1. Certeau M. A invenção do cotidiano: 1. As artes de fazer. 16ed. Rio de Janeiro: Vozes; 2009.
2. Andrade SR, Piccoli T, Ruoff AB, Ribeiro JC, Sousa FM. Normative grounds of health care practice in Brazilian nursing. *Rev Bras Enferm.* [on-line]. 2016 [citado em 2017 Jul]; 69(6):1020-8. doi: <http://dx.doi.org/10.1590/0034-7167-2016-0228>.
3. Backes DS, Souza MHT, Marchiori MTC, Colomé JS, Backes MTS, Lunardi Filho WD. The Idealized Brazilian Health System versus the real one: contributions from the nursing field. *Rev Lat Am Enferm.* [on-line]. 2014 [citado em 2017 Jul]; 22(6): 1026-33. doi: <http://dx.doi.org/10.1590/0104-1169.0040.2512>.
4. Barbiani R, Dalla CRD, Schaefer R. Nursing practices in the primary health care context: a scoping review. *Rev Lat Am Enferm.* [on-line]. 2016 [citado em 2017 Jul]; 24:e2721. doi: <http://dx.doi.org/10.1590/1518-8345.0880.2721>.
5. Ribeiro AF. Taylorismo, fordismo e toyotismo. *Lutas Sociais.* [on-line]. 2015 [citado em 2017 Out]; 19(35):65-79. Disponível em: <https://revistas.pucsp.br/index.php/ls/article/view/26678/pdf>.
6. Cruz RAO, Araújo ELM, Nascimento NM, Lima RJ, França JRFS, Oliveira JS. Reflections in the light of the complexity theory and nursing education. *Rev Bras Enferm.* [on-line]. 2017 [citado em 2017 Out]; 70(1):236-239. doi: <http://dx.doi.org/10.1590/0034-7167-2016-0239>.
7. Manzo BF, Ribeiro HCTC, Brito MJM, Alves M. Nursing in the hospital accreditation process: practice and implications in the work quotidian. *Rev Lat Am Enferm.* [on-line]. 2012 [citado em 2017 Jul]; 20(1):151-158. doi: <http://dx.doi.org/10.1590/S0104-11692012000100020>.
8. Santos JLG, Pestana AL, Guerrero P, Meirelles BSH, Erdmann AL. Práticas de enfermeiros na gerência do cuidado em enfermagem e saúde: revisão integrativa. *Rev Bras Enferm.* [on-line]. 2013 [citado em 2017 Jul]; 66(2):257-263. doi: <http://dx.doi.org/10.1590/S0034-71672013000200016>.
9. Seo YS, Son YL, Jung CY. Mediation effect of nursing competency between transformational leadership and organizational commitment of nurses in hospitals. *J Korean Clin Health Sci.* [on-line]. 2015 [citado em 2017 Jul]; 3(3):419-26. doi: <http://dx.doi.org/10.15205/kschs.2015.3.3.419>.
10. Magagnin AB, Aires LCP, Freitas MA, Heidemann ITSB, Maia ARC. The nurse as a political-social being: perspectives of a professional in transformation. *Ciênc Cuid Saúde* [on-line]. 2018 [citado em 2018 Jun]; 17(1):1-7. doi: <http://dx.doi.org/10.4025/cienccuidsaude.v17i1.39575>.

Corresponding author: Marília Alves. Universidade Federal de Minas Gerais, Escola de enfermagem, Avenida Professor Alfredo Balena, 190, sala 514, Santa Efigênia, Belo Horizonte, Minas Gerais, CEP: 30130-100. E-mail: marilix.alves@gmail.com

Submitted: 18/06/2018

Accepted: 24/06/2019