



EDUCATIONAL AND CULTURAL ACTIVITIES IN SURGICAL AND ANESTHETICAL RECOVERY CENTER: PERCEPTION OF THE NURSING TEAM

ATIVIDADES EDUCATIVAS E CULTURAIS NO CENTRO CIRÚRGICO E RECUPERAÇÃO ANESTÉSICA: PERCEÇÃO DA EQUIPE DE ENFERMAGEM

ACTIVIDADES EDUCATIVAS Y CULTURALES EN EL CENTRO DE CIRUGÍA Y RECUPERACIÓN ANESTÉSICA: PERCEPCIÓN DEL EQUIPO DE ENFERMERÍA

Silvia Maria Caldeira¹, Marla Andréia Garcia de Avila², Eliana Mara Braga³

ABSTRACT

Objective: to identify the perception of the nursing staff on integration activities in the Operating Room. **Method:** cross sectional study of field, quality, favorable opinion of the Ethics Committee in Research, letter n ° 3801-2011 by applying semi-structured form, in the period May-June 2011. Participants were 37 members of the nursing staff who work in the operating theater of a public university. Data analysis was performed by the method of content analysis. **Results:** 31 subjects reported knowing the project; 24 and 13 participated regularly this has never participated in the activities. Regarding the importance attributed to the project, 34 considered important to conduct educational and cultural activities in the Operating Room. **Conclusion:** the team reported positive effects such as improved communication, interpersonal relationships, the perceived tranquility and relaxation, as well as scientific growth, even considering the lack of flexibility in the hours of educational activities. **Descriptors:** Communication; Interpersonal Relations; Nursing Surgical Center; Nursing Team.

RESUMO

Objetivo: identificar a percepção da equipe de enfermagem sobre atividades de integração no Bloco Operatório. **Método:** estudo transversal, de campo, qualitativo, após parecer favorável do Comitê de Ética em Pesquisa, ofício n ° 3801-2011 mediante a aplicação de formulário semiestruturado, no período de maio a junho de 2011. Os participantes foram 37 membros da equipe de enfermagem que atuam no Bloco Operatório de uma instituição pública de ensino. A análise dos dados foi realizada pelo método de análise de conteúdo. **Resultados:** 31 sujeitos referiram conhecer o projeto; 24 participaram regularmente deste e 13 nunca participaram das atividades. Em relação à importância que atribuíram ao projeto, 34 consideraram importante a realização de atividades educativas e culturais no Bloco Operatório. **Conclusão:** a equipe relatou aspectos positivos, como a melhora da comunicação, do relacionamento interpessoal, a tranquilidade e descontração percebida, além do crescimento científico, mesmo considerando a falta de flexibilidade nos horários das atividades educativas. **Descritores:** Comunicação; Relações Interpessoais; Enfermagem de Centro Cirúrgico; Equipe de Enfermagem.

RESUMEN

Objetivo: identificar la percepción de los profesionales de enfermería en las actividades de integración en la sala de operaciones. **Método:** estudio transversal de campo, la calidad, la opinión favorable del Comité de Ética en Investigación, carta n ° 3801-2011 mediante la aplicación de forma semi-estructurado, en el período mayo-junio de 2011. Los participantes fueron 37 miembros del personal de enfermería que trabajan en el quirófano de una universidad pública. El análisis de datos se realizó mediante el método de análisis de contenido. **Resultados:** 31 pacientes reportaron conocer el proyecto, 24 y 13 participó regularmente esto nunca ha participado en las actividades. En cuanto a la importancia que se atribuye al proyecto, 34 considera importante llevar a cabo actividades educativas y culturales en la sala de operaciones. **Conclusión:** el equipo informó de efectos positivos como la mejora de la comunicación, las relaciones interpersonales, la tranquilidad y la relajación percibida, así como el crecimiento científico, incluso teniendo en cuenta la falta de flexibilidad en los horarios de las actividades educativas. **Descriptor:** Comunicación; Relaciones Interpersonales; Enfermería de Centro Quirúrgico; Equipo de Enfermería.

¹Nurse, Master, Department of Nursing/FMB, State University Paulista Júlio de Mesquita Filho / UNESP. Botucatu (SP), Brazil. E-mail: scampos@fmb.unesp.br; ²Nurse Teacher, Department of Nursing/FMB, State University Paulista Júlio de Mesquita Filho/UNESP. Botucatu (SP), Brazil. E-mail: marla@fmb.unesp.br; ³Nurse PhD, Department of Nursing/FMB, State University Paulista Júlio de Mesquita Filho/UNESP. Botucatu (SP), Brazil. E-mail: elmara@fmb.unesp.br

INTRODUCTION

The nursing staff of the Operating Center (Surgical, Anesthetic Recovery and Central Supply Unit) carries out its activities in a closed environment and distinctive features specific to each area, presented complexities that make it difficult to assess the continuity of nursing care. Thus, the nursing staff of the Surgical Center has strict aseptic techniques, performing activities of key responsibilities ranging from the provision of resources to the patient, to the perioperative care itself. Thus, these actions are decisive when we ponder the final product of patient care, as if no longer run, may lead to failures of more complex interventions and endanger the patient's life.¹

The Anesthetic Recovery is a critical unit where patients require continuous observation and special care after the use of anesthetic agents.² Material and Sterilization Center is an environment of high concentration of equipment and materials, with a job that contributes to the quality of services provided by units that consume their products³, stand out in this industry looks like, repetitive work, physical tiredness, overload and no interaction with patients.⁴

A study conducted in four blocks Operative within the Paraná concluded that nursing professionals, in general, were dissatisfied with the components of work (professional status, task requirements, organizational policies, compensation, interaction and autonomy), considered as needed for the quality of work life.⁵ In a study on satisfaction and dissatisfaction of nurses in a surgical center, the professionals felt professionally recognized, however dissatisfied with regard to physical and psicológico⁶, in yet another study conducted in Central Supply and Sterilization on the satisfaction of external customers was understood that job satisfaction directly involved in the performance of functions that each exercised.⁷ Understanding the experiences of employees of a Central Supply and Sterilization the authors consider important that they are encouraged to participate in professional development programs, constant updating, moments of reflection, analysis and discussion on the activities.⁴

Considering the particularities of BO and the importance of each unit in nursing care, the authors of this study developed the extension project << educational and cultural activities: promoting integration with the nursing staff in the surgical, anesthesia

recovery and Center Material and Sterilization >>.

This project is being developed three years ago in the Surgical Center Unit, Hospital of Clinics (HC) of the Faculty of Medicine of Botucatu (BSF) with the aim of promoting integration with the nursing staff in the operating theater, is coordinated by the Faculty Department of Nursing FMB together with the Technical Unit Nurse Manager Surgical Center, including the participation of undergraduate nursing students of this institution. The activities are:

- ◆ Communication dynamics in teamwork;
- ◆ Gymnastics and yoga practice, taught by Physical Education Teachers volunteers;
- ◆ Dynamic with the use of films, dances, music, origami workshop and other educational and cultural events organized by project members; also occurs presentation of scientific papers with technical guidance relevant to these units and other practices to encourage a healthy lifestyle.

The activities take place monthly in setting aside, nice armchairs resting and television space for conducting training and comfort of the nursing team at a time that the team is not required to participate in studies or meetings as service availability.

Given the above and valuing the importance of integration of the nursing staff in educational and cultural activities as a facilitating factor in the everyday actions of the Operating Room, intended to carry out this study in order to know the perception of this team as a participant of the extension project.

OBJECTIVE

- Identifying the perception of the nursing staff regarding the integration activities promoted by university extension project in the Operating Room.

METHOD

Cross sectional study of field and quality. The qualitative research is concerned with a level of reality that can not be measured, i.e. working with a universe which corresponds to deeper space relations, processes and phenomena which can not be reduced to operations of variables.⁸

Study was conducted in the Operating the HCFMB UNESP, which includes the sectors of Surgical Center, Anesthetic and Recovery Center Material and Sterilization. The Surgical Center consists of 13 operating rooms and performs on average 750 surgeries / month

(approximately thirty surgeries daily). The Anesthetic Recovery meets on average 25 patients / day, for patients receiving local anesthesia are routed directly to nursing home. The Material and Sterilization Center is centrally located in its own space, maintaining proper communication with the Centre Surgical and anesthesia recovery.

The nursing staff of the Surgical and Anesthetic Recovery Center is composed of 06 nurses and 1 nurse supervisor also has 30 practical nurses, 20 nursing assistants (3 surgical scrub nurses) and 3 nursing assistants, responsible for receiving and control of the locker room. In the Material and Sterilization Center, 1 nurse, technical supervisor, 08 nursing technicians and nursing assistants 8.

The study subjects were 37 members of the nursing team, five nurses, 12 practical nurses, 17 nursing assistants, two surgical scrub nurses and nursing attendant. The study included all members of the nursing team in the Operating Room to participate in the study and excluded those who declined to participate and / or were on sick leave during the period of data collection.

Data collection was conducted in the period May-June 2011, following a favorable opinion of the Ethics Committee in Research of the FMB, craft CEP No. 3801-2011 by applying semi-structured following the criteria of Resolution 196/96 on Ethical Aspects of Research involving Humans, which implies individuals target application with the autonomy of the Term of Consent, commitment to maximum benefits and minimum damage and risks; significant advantages and minimizing the cost to the vulnerable subjects, as well as ensuring that foreseeable damage will be avoided.⁹

Data analysis was performed by the method of content analysis defined as a research technique for describing objective, systematic and quantitative manifest content of communication, too, has been discussed as a set of techniques for analysis of communications in order to obtain, through systematic and objective procedures to describe the content of the messages, indicators (quantitative or qualitative) that allow us to infer knowledge about the conditions of production and reception of

these messages. To understand the explicit and hidden can organize the data into lexical units (meaningful words) or categories (classes of data defined by an expression or word).¹⁰

In the steps of the data analysis consisted:

Pre-analysis: data organization.

Initial reading of the entire contents.

Choice of documents or records; determining criteria.

Analysis: coding, categorization and quantification.

Material treatment, inference and interpretation: percentages, if appropriate, or other statistical treatment; determination of topics and subtopics.

RESULTS

◆ Featuring the nursing staff and the educational activities

The total number of subjects was found predominantly in females (91.9%), with age ranging from 23 to 61 years and a mean age of 39 years. Considering the professional category of the 17 participants (45.95%) are nursing assistants, 12 (32.43%) nursing technicians, 5 (13.51%) nurses, 2 (5.41%) surgical technologist and 1 (2.70%) nursing attendant and this acts only on receipt of the unit.

Regarding the work unit 5 (13.51%) professionals working in recovery room and 32 (86.49%) in the Surgical Center. The operating time in current position ranged from 6 months to 25 years with an average of 11 years and a median of 9 years. A double shift was found in only 03 professionals, which does not rule out the possibility of carrying out household activities or other paid activities informally. Regarding marital status, 24 (64.86%) professionals are married, 12 (32.43%) were single and 01 (2.70%) widowed. 10 (27.03%) participants do not have children, 9 (24.32%) have one son, 17 (45.95%) has 2 sons and 1 (2.70%) have 03 children. (Table 1). It is noteworthy that 12 Professional Surgical Center does not participate in the study was 01 of maternity leave in the period of data collection.

Table 1. Distribution of identifying the subject of the study, Hospital of the Faculty of Medicine of Botucatu. Botucatu 2011.

Variable	n	%
Function		
Nursing Assistant	17	46,00%
Nursing technician	12	32,40%
Nurse	5	13,51%
Surgical Networking	2	5,41%
Nursing attendant	1	2,70%
Sex		
Female	33	86,80%
Male	4	13,50%
Marital Status		
Married	24	64,90%
Single	13	
Widower	01	2,70%
Number of children		
No	10	27,30%
1	09	24,32%
2	17	45,95%
3	01	2,70%

In relation to knowledge about the project 31 (83.70%) said they know the project 7 (18.90%) participants said they did not know the project, 24 (64.86%) participating in the project and 13 (35.14%) never participated in

the activities. While 34 (91.08%) of respondents consider it important to develop educational and cultural activities there is a low uptake in participation of professionals (Table 2).

Table 2. Distribution of answers of respondents in terms of knowledge, importance and participation in the project, Hospital of the Faculty of Medicine of Botucatu. Botucatu 2011

Variable	n	%
Project Knowledge		
Yes	31	83,70%
No	02	18,90%
Considers Important		
Yes	34	91,08%
No	03	08,11%
Participates in the Project		
Yes	13	35,14%
No		
Total	37	100,00%

The activities most frequently mentioned as preferred by the nursing staff were a total of 43 (100%) citations were folding origami (25.58%), dance (20.93%), scientific papers and gymnastics (16.27%), dynamic communication (11.62%), shiatsu and yoga (4.65%).

◆ Perception of the nursing staff on the educational and cultural activities

Participation in the project and the meanings attributed by the subjects in the following themes emerged:

A – I participate in educational and cultural

◆ Category 1 – Promote the improvement of interpersonal relationships

Communication between people during the games and dances. At this point even people who appear timid in daily loosen up, smile and be happy show (E1)

Interacted more and better with co-workers in a moment of fun (E5)

People let go, release expressions that often do not see the day-to-day. They are happy (E14)

The integration of all co-workers (E16)

The team bonding and distribution of what was produced in the class for the other team members (E9)

The union of all peers (E25)

◆ Category 2 – Provide tranquility and relaxation for the team

On the Japanese dance was fun, I quite laugh, I was more relaxed and willing to work (E2)

Tranquility and Peace (E3)

When we can make the right step dance everyone laughed a lot (E 22)

Relaxation, lightness and the smile on the faces of colleagues (E 24)

When we did origami relaxed (E 31).

The class of origami was very good, the students slowly made the folding and thus all succeeded and felt performed, since this activity is very difficult (E32)

On origami was quite enjoyable because I went back to being a child (E34)

The fact that the team be assembled and doing a different activity becomes an enjoyable and relaxed (E37)

◆ **Category 3 - add knowledge to the team**

Increases knowledge, relationship and personal integration (E 1)

Besides adding more knowledge in relationship activities the day flows better, yields more. (E 2)

B – Not participate in the educational and cultural activities

◆ **Category 4 - Lack of flexibility in the timing of activities**

Due to project schedules and little time to accomplish activities (E3)

Because the time of the activity (E17)

At the time of the activities I can not leave my duties. (E24)

Lack of time and work at night (E37)

Should be done more times per month and / or week and also at different times seeking the participation of all (E 5)

I think it should happen more often (twice a week) (E 27)

Increase the number and timing of activities (E1)

DISCUSSION

In this study there was a predominance of female professionals, which is also shown in several studies with nursing staff.¹¹⁻⁸

The characteristics of the surgical environment are peculiar and complex causing many physical and emotional changes in the professionals working in it, these situations also presented a study that evaluated working conditions of 491 nursing staff of a university hospital in Rio Grande do Sul revealing that sociodemographic (being a woman, extremes of age, small children, low education, obesity, smoking) and labor (to be technical or practical nurse, night shift work, high physical demand at work) were associated with pain in various regions. In this, the authors emphasize the importance of active participation and collective worker demands for changes in working conditions, rethinking the traditional models of work organization in order to create conditions for a flexible work process.¹³

Although most individuals have considered the important activities and had knowledge of programming, poor adherence was also observed, as in the study of program fitness Labor for a group of 23 workers who considered telemarketing gymnastics required, but most (83%) responded not attend the gym sessions. In this, the authors discuss the importance of planning the activities of the physical, social and organizational workplace 16 facts that we consider relevant and which indicate the need

for stimulus to the knowledge of the priorities at work and valuing human life.

Thus a dynamic pleasant work should be combined with the good relationship between the professionals who work in DC. A survey to evaluate the difficulties encountered by nurses DC showed that they are related to barriers of communication and interpersonal skills among professionals. The authors consider that the interpersonal relationship is a constant in the operating room and problems between teams affect the dynamic operation of the unit, which may cause damage to the health of these professionals.¹¹ Communication is an important foundation for the care relationship is established effectively and efficiently, providing understanding of the other in its complexity.^{14,19}

The influence of occupation on the quality of life of 24 nurses DC revealed stress related to the sector, the responsibilities, obligations, risk situations, relationships with multidisciplinary teams and the type of work in the unit.¹⁷

The nursing staff reported participating tranquility and relaxation during the performance of activities, noting that beyond the moment, this feeling stretched throughout the day. According to a survey in which 211 nursing professionals in the surgical ward were studied and detected symptoms of anxiety (31.3%) and depression (24.2%)¹², confirming the need to organize activities that provide pleasant moments. Another study that evaluated the practice of gymnastics by employees of a public hospital concluded that the activity met the needs of most participants who perceived positive changes in their daily work, since it works with body structures which, if not constantly observed and exercised, can cause physical damage to these workers.²¹

The Health care suffers increasing changes and conducting activities that promote and update knowledge of professionals can provide nursing care with better quality and motivation of staff. In the operating notes the difficulty of carrying out such activities considering the circumstances and complexity of each area.

It is understood the difficulty of the subject's participation in the study because the proposed actions happen before the start of surgery, at one time (7h00min), followed, then the unit's routine Surgical Center, but this can not be a factor impediment to the realization of the activities. Study that assessed 211 nursing staff of the Operating Room of 11 hospitals in the city of Londrina - Paraná revealed that professionals require

great attention with regard to their health, since only 82.4% of the participants considered themselves stressed. Nurses had the highest scores for the dimensions demands and control when compared to non-professional nurses, which can be justified by the fact that nurses are responsible for the administration and personnel management, the management of nursing care and take responsibility for the management of conflicts and dissatisfactions and still find themselves at a higher level in the institutional hierarchy, the other nursing staff.¹⁸

The nursing staff made important suggestions that will be taken to nursing management to verify the possibility of adjustments to the schedule and frequency of activities. We also understand that the project activities require investments in disclosure.

CONCLUSION

It is considered that the nursing staff of the Surgical Center and Anesthetic Recovery approves the realization of educational activities. It is understood that the greatest challenge lies in the adherence of team members in activities, while 90% consider it important to the project, 35% had never participated in the activities. Following the suggestions of the respondents believe that new strategies must be adopted for the dissemination and implementation of project activities. For this it was necessary to incorporate new members to design and carry out activities outside the workplace, on its own initiative organizing group that has expanded the project to the entire nursing staff, as well as academic and administrative staff of the institution.

The findings of this study have revealed that the performance of activities provides improvement in communication and interpersonal skills, relaxes and brings tranquility, important elements of professional performance in the units studied.

Limitations of this study are located in the fact the project can not also cover the nursing staff of the Central Supply and Sterilization this be in different physical area. In addition, the Central Supply and Sterilization does not have adequate space to carry out the activities, which at that time did not permit the effective participation of professionals.

REFERENCES

1. Oler FG, Jesus AF, Barboza DB, Domingos NAM. Qualidade de vida da equipe de enfermagem do centro cirúrgico. *Arq ciênc*

saúde [Internet]. 2005 [cited 2012 Dec 1];12(2):102-10. Available from: www.cienciasdasaude.famerp.br/racs_ol/vol-12-2/8.pdf

2. Moraes LO, Peniche ACG. Assistência de Enfermagem no período de recuperação anestésica: revisão de literatura. *Rev esc enferm USP* [Internet]. 2003 Dec [cited 2013 May 07];37(4):34-42. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0080-62342003000400004&lng=en. <http://dx.doi.org/10.1590/S0080-62342003000400004>.

3. Taube AAM, Méier MJ. O processo de trabalho da enfermeira na Central de Material e Esterilização. *Acta paul enferm* [Internet]. 2007 [cited 2012 Dec 1]; 20(4):470-5. Available from: www.ppgenf.ufpr.br/DissertaçãoSamantaTaubae.pdf

4. Lopes DFM, Silva A, Garanhani ML, Merighi MAB. Ser trabalhador de enfermagem da Unidade de Centro de Material: uma abordagem fenomenológica. *Rev esc enferm USP* [Internet]. 2007 [cited 2013 May 07];41(4):675-682. Available from: www.scielo.br/pdf/reeusp/v41n4/18.pdf

5. Schmidt DRC, Dantas RAS. Qualidade de vida no trabalho de profissionais de enfermagem, atuantes em unidades do bloco cirúrgico, sob a ótica da satisfação. *Rev latino am enferm* [Internet]. 2006 [cited 2013 May 07];14(1):54-60. Available from: www.scielo.br/scielo.php?pid=S0104-11692006000100008...sci...

6. Ferreira EM, Possari JF, Moderno AM. Fatores de satisfação e insatisfação profissional do enfermeiro de centro cirúrgico de um hospital de grande porte. *Rev SOBECC*. 2006;11(2):15-23.

7. Imay, MT. Satisfação dos clientes e funcionários da central de materiais e esterilização. *Rev adm saúde*. 2003;5(19):5-16.

8. Minayo MCS. O desafio do conhecimento: pesquisa qualitativa em saúde. 8th ed. São Paulo: Hucitec; 2004.

9. Conselho Nacional de Saúde. Resolução 196/96. Diretrizes e normas regulamentadoras de pesquisa envolvendo seres humanos. Brasília: Ministério da Saúde; 1996.

10. Bardin L. Análise de conteúdo. São Paulo: Edições 70; 2011. 279p.

11. Stumm EMF, Maçalai RT, Kirchner RM. Dificuldades enfrentadas por enfermeiros em um centro cirúrgico. *Texto contexto enferm* [Internet]. 2006 [cited 2013 May 07];15(3):464-471. Available from:

www.scielo.br/scielo.php?script=sci_arttext&pid=S0104...

12. Schmidt DRC, Dantas RAS, Marziale MHP. Ansiedade e depressão entre profissionais de enfermagem que atuam em blocos cirúrgicos. Rev esc enferm USP [Internet]. 2011 [cited 2013 May 07];45(2):487-93. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0080-62342011000200026&lng=en&nrm=iso>

13. T Magnago SBS, Lisboa MTL, Griep RH, Kirchof ALC, Camponogara S, Nonnenmacher CQ, Vieira LB. Condições de trabalho, características sociodemográficas e distúrbios musculoesqueléticos em trabalhadores de enfermagem. Acta paul enferm [Internet]. 2010 [cited 2013 May 07];23(2):187-193. Available from: www.scielo.br/pdf/ape/v23n2/06.pdf

14. Braga EM, Berti HW, Risso ACMCR, Silva MJP. Relações interpessoais da equipe de enfermagem em centro cirúrgico. Rev SOBECC [Internet]. 2009 [cited 2013 May 07];14 (1):22-29. Available from: pesquisa.bvs.br/brasil/resources/lil-516391

15. Guido L, Bianchi E, Linch G. Coping among nurses of the operating room and recovery room. J nurs UFPE [Internet]. 2009; 3(4):823-830 [cited 2012 Dec 1]; Available from: <http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/90>

16. Soares RG, Assunção AA, Lima FPA. A baixa adesão ao programa de ginástica laboral: buscando elementos do trabalho para entender o problema. Rev bras saúde ocup. 2006;31(114): 149-60.

17. Santos RMA, Beresin R. A qualidade de vida dos enfermeiros do centro cirúrgico. Einstein. 2009;7(pt2):152-58.

18. Schmidt DRC, Dantas RAS, Marziale MHP, Laus AM. Estresse ocupacional entre profissionais de enfermagem. Texto contexto enferm [Internet]. 2009[cited 2012 Dec 10]; 18(2):330-337. Available from: www.scielo.br/scielo.php?script=sci_arttext&pid=S0104...

19. Razera APR, Braga EM. The importance of communication during the postoperative recovery period. Rev esc enferm USP [Internet]. 2011 [cited 2012 Dec 10]; 45(3):632-637. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0080-62342011000300012&lng=en.

20. Souza M, Santos T, Pinheiro M, Freitas N, Mendes R, Pires T. Occupational stress of a nursing team of a surgical Center. J nurs UFPE on line [Internet]. 2009 [cited

2012 dec 12] 3(2):524-533. Available from: <http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/160>

21. Gondim KM, Miranda MC, Guimarães JMX, D`Alencar BP. Avaliação da prática de ginástica laboral pelos funcionários de um hospital público. Rev Rene [Internet]. 2009 [cited 2012 dec 12];10(2):95-102. Available from: www.revistarene.ufc.br/10.2/html/10_2_10.html

Submission: 2012/12/14

Accepted: 2013/05/07

Publishing: 2013/08/01

Corresponding Address

Marla Andréia Garcia de Avila
Rua Damião Pinheiro Machado, 751 /Ap. 13
CEP: 18603-560 – Botucatu (SP), Brasil