ABSTRACT

This study is a phenomenological investigation, using Alfred Schutz’s comprehensive phenomenological method, aimed at understanding the ideal type of nursing students regarding Nursing Care Systematization (NCS). Data collection occurred through a focus group, conducted according to humanistic experiential learning with eight nursing students from a public university of Rio Grande do Norte, Brazil. The speech analysis from the nursing students, along with the contemplation of their scenarios and written descriptions, in light of Alfred Schutz, allowed us to unveil the participants’ ideal type from three main themes: benefits of NCS, problems experienced, and possibilities for improvement. In the end, the ideal type is described, outlining the investigated action – NCS – alongside its reasons-for and its reasons-why, as well as elucidating the nursing student’s typical doll that believes in NCS consolidation.

Keywords: Nursing; Patient Care Planning; Nursing Process; Students, Nursing.

RESUMEN

Investigación fenomenológica que utiliza el método fenomenológico comprensivo de Alfred Schutz, objetivando comprender el ideal típico de estudiantes de enfermería acerca de la sistematización de la atención de enfermería (SAE). La recogida de datos se produjo a través del grupo focal, llevado a cabo según la pedagogía vivencial humanescente, con ocho estudiantes de enfermería de una universidad pública norte-riograndense. El análisis de los discursos, la observación de los escenarios y las descripciones escritas permitieron revelar el ideal típico de los participantes a partir de tres ejes: beneficios de la SAE; problemas vivenciados; e posibilidades de mejora. Al final se traza el ideal típico, se revela el fenómeno investigado – la implementación de la SAE en la visión de académicos de enfermería – a lado de sus motivos-para e de sus motivos-para que, elucidando, además, el muñeco típico del académico de enfermería que confía en la consolidación de la SAE.

Palabras clave: Enfermería; Planificación de Atención al Paciente; Procesos de Enfermería; Estudiantes de Enfermería.

DOI: 10.5935/1415-2762.20150025
INTRODUCTION

Nursing is currently undergoing a moment of growth in debates and struggles in its attempt to unveil itself as a scientific praxis. This not a new discussion: work from Florence Nightingale had already highlighted the importance of advances not only in nursing disciplines and professions, but also in the elucidation of the necessary context for the construction of care, which is unique to the profession.

Nevertheless, it is indisputable that the world today represents a decisive mark of multiple challenges, in which Nursing: finds itself confronted with the need to defend itself as a science, at the same time that it pursues a comprehensive care that combines science, art, and spirituality; inserts itself within a panorama in which it seeks an emergent paradigm, assuming the necessary epistemological rupture, recognizing that, alongside scientific knowledge, common sense is desired and valued, making the enrichment of human relations possible; and realizes that the core of its theoretical and practical progress is the definition, classification, and disclosure of its own phenomena.1

Such challenges present, as a common axis, the desire of a nurse guided by the concept of knowing. Knowledge, in this interim, is understood as a social product with innumerable conditioning factors, priorities, and stages of construction, a means through which to obtain competence in one’s acts, giving basis to its skills and conferring upon it the dominion to act in a scientifically consensual manner.1

Therefore, what is sought is a qualified nursing care, associating the concept of knowing with that of doing in the consolidation of a care with scientific foundations. To achieve this, quality should not be understood as a goal, but rather as a continuous process that subsequently demands tools for its continuous concretization.2

It is in this sense that, since the 1950’s, what can be observed is a tendency in the profession to search for methods of organization and planning of nursing services, especially through the formulation of nursing theories, primarily developed by American scholars, and in Brazil by Wanda de Aguiar Horta, who published her work entitled “Contribuição para uma Teoria de Enfermagem” (“Contribution toward a Nursing Theory”), in 1979.3

To achieve the ideals of nursing theories, current discussions emphasize Nursing Care Systematization (NCS), specifically operationalized by the Nursing Process (NP), as the essential strategy toward the concretization of nursing guided by the concept of knowing in the search for high-quality healthcare.

Confirming the comprehension of NCS constitutes an essential tool of the affirmation and qualification of nursing, the Brazilian Federal Nursing Council (COFEN), since 2002, by means of Resolution 272, determined the ethical-legal character of NCS, clarifying that it should occur in all healthcare institutions, whether public or private, and should be duly registered user’s medical records.4

Given the many failures in the consolidation of such an affirmation, in 2009, in yet another attempt to promote the implementation of NCS, COFEN fostered Resolution 358, reaffirming the NP as a means through which to show the contribution of nursing in the healthcare provided to the general population, thus boosting the professional recognition of the nursing staff, primarily advancing in the incorporation of the attribution of nursing staff members, even if in an incipient manner.5

It is clear that the authors understand NCS as a crucial path towards improvements in nursing care. Nonetheless, in direct contrast to these demonstrations of belief in NCS as a positive and imperative element, prior literature is unanimous in declaring that this has yet to be effectively implemented, and has passed though innumerable challenges that often surpass purely objective questions, also involving subjective aspects that require even greater investigation in an attempt to reveal ways of overcoming these barriers.

This ascertainment also includes the biographical situation of the authors – a concept understood through the theoretical reference to Schutz, who grasps this as that which provides man with the historical biographical character in which he finds himself, available baggage that serves as a reference scheme for all interpretations worldwide.6 Considering such a biographical contribution, the authors view, in both the academic and the care environments, that the implementation of NCS is integrally linked to multiple conditioning factors that must be understood in order to be overcome.

Such conditioning factors many times surpass the objectivity that hinders the positive process of the professional work of Nursing, such as a work overload and the lack of material and human resources, which also involves subjective elements from the subjects responsible for the solidification of NCS. What the authors understand is that believing and defending NCS directly influence the will to fight for consolidation, to incessantly seek nursing within the concept of knowing.

What can be seen is that this believing and this defending of NCS are still built mostly within the academic realm, where the ideals of future Nursing professionals are shaped. It is from this perspective that the need to investigate the ideal type of future actors in the Nursing field, as set forth in NCS are revealed, in an attempt to unveil the phenomenon of the implementation of NCS according to Nursing students.

It is therefore understood that, “if, in addition to our observation, we exchange experiences with other observers, we will be opening new possibilities to see and to represent, in varied forms, the object/world that we see and we propose to describe.”1447

Thus, based on the premise that it is essential to unveil subjective human experiences so as to better understand a
Phenomenon, seeking the systematization of the *ideal type* of investigated subjects⁶ and taking into account that the education of professionals plays an unparalleled role in the definition of their motivations and beliefs, elucidates the following research question: what is the *ideal type* of nursing students regarding the implementation of NCS?

**AIM**

To understand the *ideal type* of nursing students regarding NCS.

**MATERIAL AND METHODS**

The present study constitutes a slice of the results obtained through a pilot study and with the data collection instrument from the Masters thesis project entitled “Understanding of the *ideal type* of nursing technicians regarding nursing care systematization” (“Compreensão do típico ideal de técnicos de enfermagem acerca da sistematização da assistência de enfermagem”), defended in August 2013 as a requirement for the Masters degree in Nursing from the Post-Graduate Program in Nursing at the Federal University of Rio Grande do Norte (UFRN).

The present study is a phenomenological investigation, employing comprehensive phenomenological method from Alfred Schutz, who is known as the phenomenologist of the social world and is considered one of the foremost philosophers of social science of the 20th century.⁶,⁷

The comprehensive social phenomenology of Alfred Schutz is based on the cognitive reality incorporated within the processes of subjective human experiences: “the phenomenological philosophy is presented as a philosophy of man in his lifeworld, capable of explaining the meaning of this world in a strictly scientific manner.”⁸,⁹

It is in this sense that this study seeks to understand the *ideal type* of nursing students regarding NCS, understanding this to be the path through which to unveil the meanings that they attribute to this work tool, especially as regards the reasons-for the implementation of NCS.

The *ideal type* consists of the way in which men interpret their attitudes and the attitudes of others, according to their own background experience and relevance, helping subjects to situate themselves within the social world and to maintain the various relationships with their equals and cultural objects. In this manner, “concerning the investigation of the reality of daily life, what will make the comprehension of a social phenomenon possible by the researcher is the systematization of his/her typical features.”¹⁰

On the premise that it is necessary to understand the perceptions of the subjects as of their own significances, so that one can interpret the behavior of the subjects and interact with them in a beneficial manner within the social world, Schutz developed the concepts of reasons-for and reasons-why, which are integral parts of the so-called motivational contexts. “[...] a motivational context is, by definition, the context of meaning within which one finds a determined action in virtue of its status as a project, the act of a specific actor.”¹⁰,¹¹

The reasons-for are essentially subjective; they constitute the goals that one wishes to reach, with a temporal structure geared towards the future, forming a subjective category of action, that is, the reasons that are directly related to the action and to the awareness of the actor. In the end, this refers to the accomplishment, to the project to be performed, and to the will to perform it.

In turn, the reasons-why are found within objectivity, evinced within already concluded events, thus following a temporal direction geared toward the past, which can be understood in retrospect, in other words, they are unconscious during the action itself.⁸

The search to interpret the *ideal type* of Nursing students regarding NCS therefore corresponds to the recognizing of the relevance of understanding the experience of these subjects and their motivations, which will make the knowledge of the investigated phenomenon possible, in turn contributing to the elucidation of important mechanisms that translate into practical improvements for the Nursing profession.

The concept of reasons-for focuses on the peculiarity of the biographical situation of the investigated subjects – Nursing students – who, as they are still actively participating in their educational process, have not experienced the investigated action – NCS – in the concreteness of nursing care.

To collect the data, the focal group technique was used, which consists of a quick and inexpensive technique to assess and obtain data and qualitative information that can allow one to identify the participants’ feelings, attitudes, and ideas regarding a given subject or activity.¹²

The focal group, entitled “What I think about NCS”, counted on the collaboration of eight Nursing students from UFRN, who fit the following inclusion criteria: be a grant recipient of scientific initiation and be duly registered in at least the 5th semester of the Nursing course, in an attempt to guarantee that all participants had had an initial contact with the phenomenon under investigation. Twelve students were invited by email, of which eight participated in the meeting.

The focal group was conducted according to humanistic experiential learning; a humanistic transcorporeal pedagogical reality found in the knowledge within a Being, of their human skills, of their subjectivity, and of their corporeality.¹¹ This framework was used with the scope of facilitating the expression of subjects’ motivations.

The practice of the humanopoietic mandala, using the figurative representation by means of miniature statues and playdough
to capture the perceptions of the Nursing students regarding the implementation of NCS, associating the concepts of representing, writing, and sharing of reflections as a means through which to facilitate the capture of the ideal type of subjects, through the key question: “what are your perceptions of NCS?” The mandala practice is denominated in this manner as it provides a purpose for the construction and sharing of ideas in a collective manner, thus denoting the idea of a circle of subjectivities.

In an attempt to better understand the biographical situation of the Nursing students, in the first meeting, a questionnaire was applied to the study participants, which was comprised of closed questions and divided into two axes: sociodemographic data and academic data.

This study followed the ethical and legal principles that regulate scientific research on human beings, as set forth in Resolution 196/96 of the Brazilian National Health Council, and updated by Resolution 466/2012, preserving the voluntary character of the participants and the anonymity of the interlocutors, and obtaining the due authorizations from the subjects. This study was approved by authorization from the UFRN Research Ethics Committee, logged under report number 98.424, of August 31, 2012, and protocol number CAAE 05906912.0.0000.5537.

To unveil the phenomenon, the research followed the proposed guiding principles of a methodology based on findings from Schutz, as carried out by Zeferino7 in his Ph.D. dissertation work.

The three main guiding principles – disinterested attitude of the scientific observer, rules of sociological relevance, and postulation of logical coherence2 – opened the door to the framework of the methodological aspects of data collection. What stands out here are the fourth, fifth, and sixth guiding principles,7 through which the analysis of data was performed: fourth – postulation of subjective interpretation, when a part of the speech that represented the structures of meaning was selected, then proceeding to the grouping of the sections that expressed common reasons that referred to the action, and constructed the categories of human action that sustain the actions of the subjects as regards the meaning of the phenomenon and revealed the distinctiveness of the experiences; fifth – postulation of adjustment, in which the transcription of the meeting was returned to the subjects, which ensured that the essential information had been captured, thus qualifying the method; and the sixth – scientific logic rationality, the moment in which the ideal type is unveiled, presenting the comprehensive analysis, based on the theoretical references set forth by Alfred Schutz.

The texts were grouped by subject, which were identified by the letters NS (Nursing student), followed by the sequential number, from one to eight (AE1, AE2, and so forth, until AE8).

RESULTS AND DISCUSSION

The meeting took place on September 18, 2012, in a previously prepared room in the Nursing Department at UFRN, and lasted 125 minutes. This meeting included the collaboration of eight Nursing students, with the following biographical profile: between 19 and 24 years of age, studying in the 5th (3; 37.5%), the 6th (2; 25.0%) or the 7th (3; 37.5%) semester (Table 1).

The age profile of the students differed from other studies that also investigated a similar public in similar course semesters, in which the age ranges of 21 to 3212 and of 20 to 23 years of age predominated.13 Clearly, these studies also counted on the participation of male students. It should be noted, however, that these studies included a larger sample, which may well explain the diversity in age range.

When asked about their first contact with NCS in their undergraduate education, the participants unanimously answered that this occurred in the 4th semester of the course in

Table 1 - Sociodemographic and student characterization of the participating subjects; 2015

<table>
<thead>
<tr>
<th>Variable</th>
<th>n (N=8)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>Male</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>8</td>
</tr>
<tr>
<td>Age</td>
<td>19 years</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>20 years</td>
<td>1</td>
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<tr>
<td></td>
<td>21 years</td>
<td>3</td>
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<tr>
<td></td>
<td>22 years</td>
<td>2</td>
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<td></td>
<td>23 years</td>
<td>0</td>
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<tr>
<td></td>
<td>24 years</td>
<td>1</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Single</td>
<td>8</td>
</tr>
<tr>
<td>Family income</td>
<td>Up to 2 minimum salaries (MS)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>From 3 to 5 MS</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>From 5 to 10 MS</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>More than 10 MS</td>
<td>0</td>
</tr>
<tr>
<td>Semester of undergraduate studies (in progress)</td>
<td>5th semester</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>6th semester</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>7th semester</td>
<td>3</td>
</tr>
<tr>
<td>Undergraduate semester of initial contact with NCS</td>
<td>4th</td>
<td>8</td>
</tr>
<tr>
<td>Discipline of initial contact with NCS</td>
<td>Semiology and Semiotecnhique</td>
<td>8</td>
</tr>
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</table>
the discipline of Nursing Semiology and Semiotechnique, thus revealing that this discipline promotes the articulation of theoretical and practical aspects of the profession, teaching nursing techniques together with knowledge on NCS.

The Nursing students constructed a scenario by answering the proposed question, wrote out a description of their representations, and shared the achieved results with their colleagues through the construction of a humanopoietic mandala.

Similar to the study that used the focal group technique, aimed at analyzing truth regimes that permeate the Nursing profession, as manifested by the 10 students who had recently entered the undergraduate nursing course, the group dynamic was not limited to the simple alternation between questions and answers. This led to the unfolding of discussions and reflections that expanded the possibilities of understanding the studied phenomenon.14

The analysis of the Nursing students’ reports, together with the contemplation of their scenarios and their written descriptions, allowed, according to the guiding principles of Zeferino7 and in the light of the referential theory of Alfred Schutz, the researchers to unveil the ideal type of participants regarding the implementation of NCS, passing through three thematic axes: the benefits of NCS, which translate into reason-for believing in the positivity of this work tool; the experienced problems, revealers of the daily lifeworld of today’s nursing professionals; and the possibilities for improvement, revealing the typical action of the student who believes in the effective implementation of NCS.

In the end, it was possible to trace the ideal type that this study sought to understand, outlining the investigated phenomenon – the implementation of NCS – alongside its reasons-for and its reasons-why, in turn elucidating the typical doll of the Nursing student who believes in the consolidation of NCS.

**BENEFITS: THE REASONS-FOR CONSOLIDATING NCS**

The benefits of NCS highlighted by the Nursing students translate into the reasons-for believing in the positive and imperative character of this nursing tool, which are: the organization of knowledge, professional recognition and growth, systematized care found within critical rationale, individualized care, holistic and humanized care, the staff’s effective communication, professional-professional and professional-user interaction, and the optimization of time.

Reflections from the participants elucidated, at times implicitly, that the NCS provides innumerable improvements to the profession and to professionals, given that these possess a fundamental bedrock: knowledge.

[...] I began to think about what NCS was. NCS needs knowledge, so I put these letters all mixed-up, which would represent disorganized knowledge. So the NCS is also the combination of the empirical with science. So this combination of the empirical with science is going to organize my knowledge [...] (AE7).

From the moment in which NCS provides a concept of nursing found with the concept of knowing, which allows for a qualified doing, the participants express the possibility of achieving one of the most sought after goals in nursing: their professional visibility, their growth, and their recognition.

Professional recognition is understood as one of the main benefits of NCS, both through investigations that seek to recognize the perception of Nursing students,15,16 and through those that investigate the understanding of the nurses themselves17 and of other healthcare professionals regarding NCS.

In this manner, it becomes clear that the systematization of care implies the use of a work methodology with a scientific basis, offering support for the development of Nursing as a discipline and a science, whose knowledge is unique and specific.17

For professionals to achieve such a level of recognition, the nursing students expressed the need to solidify the other possible benefits. Initially, NCS is viewed as a path toward facilitating and qualifying communication: the registering of care provided as proposed by NCS in a systematized manner is one way to promote the growth of the profession, as it makes it possible for others to recognize/perceive nursing activities (AE3). This view is shared by other studies.15-17

From Nursing students’ point of view, nursing care based on NCS is also additionally benefitted: found in systematization – “[...] you knowing what the patient is feeling, acting, and diagnosing to provide care and, finally, analyzing the care provided to the patient” (AE1); this is based on critical reasoning and the user’s individuality, “[...] when we use the NCS, we make it possible to formulate doubts, hypotheses, which are represented by the asking of questions, and of new ideas, which is the exclamation” (AE6); and seek the integrity of care, humanizing nursing care – “[...] the professional will not look only at the patient’s complaints and treat the pathology, he/she will talk [with the patient] to collect the anamnesis, touch [the patient] to perform the physical exam, give advice to trace the results, and, above all, take care of the patient [...]” (AE7).

The optimization of time was referred to as one benefit of NCS, a reason-for consolidating it. In this same sense, one study, which aimed to describe the experience of implementing the NP through worker experiences, concluded that the consolidation of NCS diminishes hospitalization time, it being “[…] possible to verify that the patients submitted to care systematization showed a good clinical evolution.”16,54

DOI: 10.5935/1415-2762.20150025

REME • Rev Min Enferm. 2015 abr/jun; 19(2): 59-66

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The participants, however, went deeper into their own reflections, referring to time as an uncertain element when discussing NCS, at times a benefit, at times an experiential problem – “[...] it will save time, this will optimize, but, to achieve this, it is necessary for people to perceive this. If they do not perceive that in the beginning, you will need a longer times, but after this, it will be satisfactory” (AE5).

**EXPERIENCED PROBLEMS: THE DAILY LIFEWORLD OF NURSING**

The *daily lifeworld* consists of a space in which human beings situate themselves with their daily problems within an intersubjectivity with their counterparts, constituting not only a natural world, but also a social, historical, and cultural world.6,8 The action of the *daily lifeworld*, in this sense, is viewed as a process based on the functions of motivation.

Therefore, this concept deals with a space where the origins of subjects’ experiences echo and thus constitute, within the microspace of the present investigation, the possibility of viewing the aspects that hinder the true implementation of NCS within the nursing practice.

During the sharing of results, the Nursing students cited the following as obstacles to the consolidation of NCS: predominance of the biomedical model, lack of time, work overload, lack of knowledge, conflicts among the staff, dehumanization of care, disregard for nursing, discouragement and non-compliance of the professionals, mechanized manner of viewing NCS, and poor working conditions.

Similar to the fact that the search for knowledge was indicated as the main benefit of NCS, as an influence over all others, it was also possible to identify a core problem in the non-implementation of NCS, from the point of view of the Nursing students: the persistence of a mechanized care, a reflection of the continuing hegemonic biomedical model.

One study carried out in the Rehabilitation Center (RC) of a public hospital of the State Secretary of Health (SSH) of the Federal District of Brasília (DF) – a center in which five stages of NCS have been implemented – through the retrospective analysis of 25 medical records, revealed that the nurses give emphasis to the care geared toward medical assistance for biological needs,19 thus proving the aforementioned observation.

As regards the problems, it is the existence of professionals that rigorously follow the biomedical model that act in the exact same manner with all patients, without observing their particularities, in addition to conducting the nursing practice without a clinical reasoning, following a purely technical method (AE8).

Another study that analyzed the teaching-learning process of NCS, using the communicational method of *Boulding* among 34 university Nursing students, also pinpointed this as the main obstacle so that the NCS would be solidified within the “paradigm paralysis”, based on the techno-bureaucratic model.13

Add this to the existing conflict within the nursing staff itself – “[...] a barrier that exists many times among the healthcare professionals, where one finds him/herself to be superior to the other, and this complicates things, hindering systematization” (AE2). Consequently, a complex problem arises, covered in many etiologies: a historical fruit of the dichotomy between doing and thinking; a reflection of a heterogeneous profession of many categories that still remains divided; resulting from a formation that neglects the participation of the nursing technician in the NCS.

As regards the element of education, the lack of knowledge, discouragement, and non-compliance were also cited as visible obstacles, which are not found only in the higher categories: "while the knowledge on methodology is restricted to nursing practice, it is quite improbable that the other categories of the nursing staff will contribute with their knowledge and disclosure."20,29,6

AE1 translated this concern in his report: “I think that the benefits outweigh the difficulties, but this must be clarified, because many people don't know what it is, so [...]” Thus, the Nursing students revealed an ideal type that, at the same time that it does not neglect the problems experienced by the profession, it also believes in the benefits of NCS and, to achieve this, highlights possibilities for improvements.

The search for systematized nursing care, found within the concept of the *daily lifeworld* from Schutz, takes on a challenge: “[...] the core conflict is not to cohabit the space, but rather to coexist within this space, attempting to construct a specific group project stemming from the singularity and from the coincidence of motivations and interests of the people with the projects of others.”9,95,6

The Nursing students have also reflected on this challenge.

**POSSIBILITIES FOR IMPROVEMENTS: THE TYPICAL ACTION AS A PATH TO TREAD**

The *typical action* was traced considering the reflections woven around the problems experienced in the *daily lifeworld* of nursing and, by contrast, around the reasons-for the implementation of NCS, based on its benefits. In other words, the actions that should be practiced so that the NCS can be effectively implemented were listed as follows: the staff must be united and motivated, a humanized care must be consolidated, the permanent training of the staff must be solidified, the professional must be focused, and the environment must be appropriate. AE4 synthesized these thoughts:

...
To improve the scenario of experienced difficulties, what becomes necessary is the agility of the professional, focus to maintain his/her objectives, a unified staff and interaction with the patient, an adequate environment to develop activities and knowledge of their patient as a whole in order to provide high-quality and comprehensive care. In addition to the updating of scientific knowledge on the part of the nurse, seeking always to improve him/herself more and more (AE4).

All of these essential elements contain the basis of permanent education, understood as the incomplete process that fundamentally begins in the academic environment, both for professionals with a higher education, as well as for technicians. It is of utmost importance to provide the Nursing student, at all levels, with the opportunity to encourage reflection, initiative, and the search for innovative solutions.

THE IDEAL TYPE OF NURSING STUDENTS REGARDING NCS: THE UNVEILING OF THE PHENOMENON

The unveiling of the phenomenon made it possible to understand that the category of action highlighted by the Nursing students is that of effectively implementing the NCS, with the reasons-for including: organizing the nursing knowledge, seeking professional recognition and growth, systematizing and individualizing care, promoting a holistic and humanized care, making the communication among the nursing staff efficacious, and optimizing time.

The reasons-why that lead the Nursing students to believe and defend the consolidation of NCS is brought about by their academic education, which defends an effectively implemented NCS, and whose first contact with the theme occurs in the 4th period in the discipline of Semiology and Semio-technique in Nursing.

For an effective implementation of NCS, the following typical action is necessary: seeking the unity of the staff and its motivation, consolidating a humanized care, solidifying the permanent training of the staff, making the professional focused, and adjusting the working environment.

The ideal Nursing student is, therefore, a critical and reflective subject who believes in the positiveness of NCS, defending that its benefits overcome the difficulties experienced in the daily lifeworld of Nursing. Moreover, the ideal Nursing student seeks to experience the change in search of a nursing profession based on the concept of knowing, opening a possible path to be tread as a team, so as to achieve qualified, holistic, and resolutive care.

FINAL CONSIDERATIONS

The present investigation allowed the phenomenon to be unveiled: it shed light on the ideal type of Nursing students regarding the implementation of NCS. Their reflections, which represent the beliefs and motivations of future professionals in nursing, highlighted an NCS with benefits that surpass the difficulties experienced in the daily lifeworld of nursing, opening a possible path to be tread as a team, so as to achieve qualified, holistic, and resolutive care.

The interwoven discussions, which were benefitted by the use of the focal group technique, in light of a humanistic experiential learning, can thus contribute to the development of other studies, encompassing other perspectives so that, through a more well-understood and representative prism, means through which to overcome obstacles to the effective implementation of NCS can be achieved.

It should be noted that the results presented herein represent one specific reality, influenced by the educational curriculum of the Nursing students, aspects that translate into the limitations of this study. From this point of view, it is suggested that the reflections be reproduced in each microspace of Nursing, involving not only higher education students, but also technicians, in addition to professionals who already work in the field.

It is hoped that this work will contribute for the science of Nursing to become more and more consolidated and recognized, understanding that such a process must begin within the profession itself, integrating professionals who give value to and solidify their essential working tools.

In addition, upon elucidating that the ideal Nursing student believes vehemently in the implementation of NCS, one might ask: were the professionals who are in the workforce today, in their days in academia, motivated to defend the effective implementation of NCS? Could the answer for the non-implementation of NCS be rooted in the education that such professionals received or in the fact that they did not believe in NCS? These are only a few of the main concerns that still remain to be unveiled.

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