

The model professionalism in the implementation of the Nursing Process (1979-2004)

O profissionalismo exemplar na implementação do Processo de Enfermagem (1979-2004)

El profesionalismo ejemplar en la implementación del Proceso de Enfermería (1979-2004)

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How to cite this article:

Benedet SA, Padilha MI, Gelbke FL, Bellaguarda MLR. The model professionalism in the implementation of the Nursing Process (1979-2004). Rev Bras Enferm [Internet]. 2018;71(4):1907-14. DOI: <http://dx.doi.org/10.1590/0034-7167-2017-0226>

Submission: 04-11-2017

Approval: 06-12-2017

ABSTRACT

Objective: to assess the contribution of the introduction and implementation of the Nursing Process of the University Hospital of the Federal University of Santa Catarina (*Universidade Federal de Santa Catarina — UFSC*) for the progress of the profession from 1979 to 2004. **Method:** qualitative and social-historical study. We used oral and documentary sources for data collection, through semi-structured interviews with 14 nurses and documentary analysis. The study was analyzed under Eliot Freidson theory of content and theoretical reference, on the sociology of professions. **Results:** the challenges mentioned were lack of knowledge; nurses overloaded with responsibilities; precarious physical space and materials; lack of consideration of the Nursing Process by the multiprofessional team. The political participation of the professors of the Nursing Department was fundamental for the successful introduction of the Nursing Process. We emphasize the professional commitment of nurses to face the challenges presented. **Conclusion:** the introduction and implementation of the Nursing Process contributed to the progress of nursing in the state of Santa Catarina regarding appreciation and professionalization.

Descriptors: Nursing Processes; Professional Practice; History of Nursing; Professionalism; Nursing.

RESUMO

Objetivo: analisar a contribuição da implantação e implementação do Processo de Enfermagem do Hospital Universitário da Universidade Federal de Santa Catarina para o desenvolvimento da profissão no período de 1979 a 2004. **Método:** estudo qualitativo histórico-social. Para a coleta de dados foram utilizadas fontes orais e fontes documentais, mediante entrevistas semiestruturadas com 14 enfermeiros e análise documental. Analisado sob técnica de análise de conteúdo e referencial teórico de Eliot Freidson, sobre sociologia das profissões. **Resultados:** foram apontados com desafios enfrentados: falta de conhecimento, excesso de atividades, precariedade do espaço físico, materiais e desconsideração do Processo de Enfermagem pela equipe multiprofissional. A participação política dos docentes do Departamento de Enfermagem foi fundamental para o êxito da implantação do Processo de Enfermagem. Destaca-se o compromisso profissional dos enfermeiros no enfrentamento dos desafios encontrados. **Conclusão:** a implantação e implementação do Processo de Enfermagem contribuiu para o avanço da Enfermagem catarinense em termos de reconhecimento e profissionalização.

Descritores: Processos de Enfermagem; Prática Profissional; História da Enfermagem; Profissionalismo; Enfermagem.

RESUMEN

Objetivo: analizar la contribución de la implantación e implementación del Proceso de Enfermería del Hospital Universitario de la Universidad Federal de Santa Catarina para el desarrollo de la profesión en el período de 1979 a 2004. **Método:** el estudio cualitativo histórico-social. Para la recolección de datos fueron utilizadas fuentes orales y fuentes documentales, mediante entrevistas semiestruturadas con 14 enfermeros y análisis documental. Analizado bajo la técnica de análisis de contenido y referencial teórico de Eliot Freidson, sobre sociología de las profesiones. **Resultados:** fueron apuntados con desafíos enfrentados: falta de conocimiento, exceso de actividades, precariedad del espacio físico y de materiales y desconsideración del Proceso de Enfermería por el equipo multiprofesional. La participación política de los docentes del Departamento de Enfermería fue fundamental para el éxito de la implantación del Proceso de Enfermería. Se destaca el compromiso profesional de los enfermeros en el enfrentamiento

de los desafíos encontrados. **Conclusión:** la implantación e implementación del Proceso de Enfermería contribuyó para el avance de la Enfermería en el estado de Santa Catarina en términos de reconocimiento y profesionalización.

Descripciones: Procesos de Enfermería; Práctica Profesional; Historia de la Enfermería; Profesionalismo; Enfermería.

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INTRODUCTION

The assessment of nursing work from a historical perspective proves the quest for qualitative change in their professional practice. Thus, this work must advance in the professionalization process and see it as a path that aims to achieve quality care. Professionalism is defined as the set of attributes of professionals. We highlight commitment to work and career in a way that it is combined with identity and emphasis on the service provided to the public, not on their own benefit⁽¹⁾.

In this sense, professionalism refers not only to knowledge and technical training, but also to attitudes that imply ethical values, commitment to the quality of work, continuous search for knowledge acquisition and development of new skills; as well as empathy, honesty, integrity, altruism, loyalty, respect for others, and finally, reflection on decisions and actions⁽²⁾. We understand that for nursing, the sense of professionalism is permeated by values based on the concern to perform work which provides quality care to users and presupposes, in addition to knowledge and expertise, involvement with and commitment to face challenges.

The implementation of the Nursing Process in different scenarios of care practice has proved to be one of the paths that nursing, throughout its history, has been adopting to make its professionalization and, consequently, the quality of its practice better. This work tool refreshes critical thinking, provides the construction of the knowledge of the professionals besides encouraging clinical and investigative reasoning. Thus, this tool reflects the commitment of nurses to their patients, their commitment to care and to fulfilment of the health needs of population⁽³⁾.

However, while this tool presents itself as an opportunity for the professional progress of nursing, its introduction and implementation has required a great involvement and commitment of the nurses, when referring to the list of principles understood within professionalism⁽¹⁾. These attributes, allied to hard work, were part of the professional practice of the nurses who introduced the Nursing Service of the Hospital Polydoro Ernani de São Thiago of the Federal University of Santa Catarina (UH, UFSC).

Launched in May 1980, its construction was encouraged by the expansion of the number of University Hospitals to meet the demands of the growing medical schools in Brazil. In Nursing, this period was marked by achievements with important repercussions for the professional progress of the area, such as the expansion of labor market; update the professional legislation; and consequent broader autonomy and specific attributions of nurses, as well as changes in the practice of care with the introduction and implementation of the Nursing Process⁽⁴⁾.

This socio-political context favored the introduction of the Nursing Process in the hospitals throughout the country. Although there were favorable conditions, this historical moment of the Brazilian Nursing demanded dedication and commitment from

all the involved, specially the professors of the UFSC Nursing Department. They were the main responsible actors for planning and carrying out the implementation of the Nursing Process at the UH, contributing to the progress of the professionalization of nursing.

This study aims to raise visibility of this historical moment for the profession, through reflection on its impact on the professional development of Brazilian Nursing. We highlight the search for solutions to concrete problems of the health care of individuals, using instruments coming from science, more than by contributing to science, by worrying about the problems of individuals and less with the problems of groups or statistical units, which is a genuine exercise of professionalism.

OBJECTIVE

To analyze the contribution of the introduction and implementation of the Nursing Process of the UH, UFSC for the progress of the profession from 1979 to 2004. This assessment is based on the ideas about professionalization and professionalism by Eliot Freidson, the main exponent of the Sociology of Professions.

METHOD

Ethical Aspects

The development of this study met the norms of ethics in research, and it was approved by the Committee of Ethics in Research in Human Beings (*Comitê de Ética em Pesquisa com Seres Humanos*) of UFSC. The interviews were recorded and performed in places chosen in agreement by interviewees and researchers. The interviews were then transcribed by researchers themselves soon after it was conducted. The texts transcribed were sent to the interviewees for checking and validating them, in compliance with Resolution No. 466/2012 of the National Health Council (*Conselho Nacional de Saúde/CNS*)⁽⁵⁾. All the interviewees allowed the disclosure of their name in the study and proceeded to the donation by signing the Term of Assignment of Oral Testimony for the collection of the Laboratory for the Study of the History of Nursing and Health Knowledge (*Termo de Cessão de Depoimento Oral para o acervo do Laboratório de Estudo da História do Conhecimento Enfermagem e Saúde — GEHCES*), of the Nursing Department of UFSC allowing the creation of documentary sources. All people cited during the interviews have been identified with the letters &&, to preserve their anonymity.

Type of Study

Study with qualitative, historical-social design. The time observed was from 1979 to 2004, which corresponds to the creation of the Administrative Rule n ° 358/79 by the Dean Caspar Erich Stemmer. This Administrative Rule sets forth the appointment of a commission responsible for the implementation

of the UH, UFSC and organization of the Nursing Service that included the introduction of the Nursing Process. The final time-cut relates to the beginning of computerization of the Nursing Process in the referred hospital.

Methodological processes

The primary sources were: Basic Document in Nursing of the UH, UFSC containing the objectives, philosophy and the whole Nursing Care Methodology; the Referential for the Assistance of Nursing of the Ambulatory of the UH, UFSC and the article published in the Journal Text Context in Nursing (*Revista Texto Contexto Enfermagem*) in 1995 called 'In the pursuit of a Dream' (*Em busca de um Sonho*), in which the authors, teaching and care nurses who participated in the introduction and implementation of the Nursing Service of the UH, UFSC report the main activities developed by the Nursing Group of the Introduction Committee of the UH, UFSC. As oral sources, we interviewed 14 nurses, six of whom were teachers and eight were assistants.

We defined as inclusion criteria the performance of the interviewees in the introduction and/or implementation of the Nursing Process of the Hospital during the studied period, availability of time and preserved memory. As for the documents, a search was conducted to identify them, considering as inclusion criteria: date of preparation and relation of the document with the studied period and theme.

The data collection took place from November 2014 to March 2015, through semi-structured interviews according to the technique of thematic and oral history, which allows the recording of testimonies and the access of history within history and, in this way, extend the possibilities of interpretation of the past⁽⁶⁾.

After validation, the interviews were submitted to the copy-desk process⁽⁶⁾, which provided the adequacy of the text to the scientific language, removing jargon and current use of colloquial language. The selected data were submitted to internal and external evaluation and related to the historical context⁽⁶⁾.

The analysis and interpretation, as well as the categorization of information, were carried out under Eliot Freidson content analysis technique and his theoretical benchmark on the sociology of professions.

From this process, three categories have appeared: The challenges to implement the Nursing Process; the contribution of professors from the Nursing Department for the introduction and implementation of the Nursing Process; and the implementation of the Nursing Process and the commitment to the Brazilian Nursing.

RESULTS

The challenges faced in implementing the Nursing Process

This category points out the challenges faced by nurses in implementing the Nursing Process of the UH, UFSC in the historical period corresponding to the preparation of its introduction, which took place in 1979 and the early 1980s until 2004, when its computerization has begun.

The implementation was initiated in 1980 with the beginning of the activities of the hospital. It was the first hospital in the state of Santa Catarina to have its practice systematized by a Nursing Process and based on a Nursing Theory, that of Wanda Horta⁽⁷⁾.

According to the narratives, one of the main challenges was the lack of knowledge of nurses about the Nursing Process, specially about how to implement its stages, besides the difficulty in understanding the concepts and assumptions of the Theory of Wanda Horta.

For us, the introduction of the Nursing Process was also news, we had no experience on how to apply the Theory of Basic Human Needs. Everything was unknown for us; we wanted to apply it but we didn't know how to do it. At the same time, there was this responsibility to make it right, because it was something new, it was the introduction of a new service. Now I understand, there was this resistance to the Theory of Basic Human Needs, not because it was inadequate but because we didn't know how to use it. (Assistant female nurse Salete Virgínia de Souza Sakae)

The lack of knowledge was also reported during the process of computerization of the Nursing Process in 2004. In this case, the difficulty was related to the incorporation of new technologies into the nursing records.

I still remember that during the introduction of the computerized process there was some resistance by the nurses to accept it. The greatest barrier for the nurses was that they were not prepared for computerization. They were afraid of typing or clicking on something and delete everything. Some of them didn't even know how to turn on the computer. (Teaching nurse Maria Anice da Silva)

The non-acceptance of the Nursing Process by the medical professionals appeared on the narratives as a major challenge, given that in the context of multiprofessional work it is essential to respect the activities developed by the members of the team.

At the beginning, doctors did not accept much that we prescribe, but we did our prescription of nursing. There was great resistance in the ICU. This is because they did not want it, they [the doctors] used to think nurses had no right to prescribe care for critically ill patients. (Assistant nurse Margareth Rose Gramkow)

The precarious physical space, the lack of materials, equipment and supplies have also appeared as challenges faced by nurses who started the implementation of the Nursing Process in the hospital to which this study refers. Difficulties related to physical space and materials hinder the implementation of the Nursing Process. It is essential for implementing its stages, to have an adequate environment (including thermal comfort), privacy for conducting physical examination and interviews, and materials for verifying anthropometric data, vital signs and others.

The physical space has never favored us much, until present days. The physical plan of this hospital was modelled after a Canadian hospital. It remained in the plan almost 40 years until it was inaugurated, it was supposed to have air conditioning. We did not have windows, the working conditions were terrible. I remember the cold and the heat it was in the hospital I almost don't believe it! The physical space of the outpatient nurses was precarious. I would perform physical

exams on my writing desk! I ordered some small mattresses and put them over the table to examine children. But, when I wanted to examine the gait of a child, for example, I would do it in the hall because the room was too small. (Assistant female nurse Salete Virginia de Souza Sakae)

Work overload and, consequently, the lack of time to conduct the Nursing Process have also appeared as major challenges faced during its implementation. In the speeches emerged from the narratives, anguish was evident due to the large number of activities that the nurses working in the hospital studied had to perform in that historical context.

Another discussion that arose was that nurses really looked forward to being close to their patients; they wanted more time to make their visit, supervise the sera, check punctures and curatives. This is when we began to find out we are not omnipresent. It is difficult for you to be in a room examining a burned patient, then there is a patient with an ulcer, and at the same time a new person is there for you to teach them, an employee did not come. (Assistant nurse Alda Isabel da Silveira Melo)

Another challenge reported by the participants of the study was that the nursing team raised awareness of the importance of the Nursing Process. At the beginning of the operation of the hospital, the nursing team comprised nurses, attendants, assistants and nursing technicians. Most of them were nursing assistants, following the reality of Brazilian nursing, whose nursing workforce consisted of 63.8% of attendants⁽⁴⁾.

We spent a long time on methodology procedures! Attendants and assistants of nursing used to say we weren't working, just writing. They wouldn't understand that was an assignment of nurses. (Assistant nurse Tania Soares Rebello)

This challenge was a barrier to be transposed by the nurses who started the implementation of the Nursing Process, since the nature of nursing work is to be performed in team. Therefore, the stages of the Nursing Process in that period were performed by the assistants, auxiliaries, nursing technicians and other nurses. Moreover, the care initiatives planned to the hospitalized patients are conducted 24 hours a day, which means the understanding of the objectives of the method of care employed by all nursing staff is essential.

Therefore, the entire team must be engaged and committed to provide care to their patients, guided by the same method and ensuring the quality of this care. In addition, this challenge has certainly contributed to creating a conflicted work environment in the midst of shaken interpersonal relations.

Contribution of the professors of the Nursing Department for the introduction and implementation of the Nursing Process

The participation of the professors of the Nursing Department of UFSC in the introduction and implementation of the Nursing Process in the UH, UFSC began with the constitution of the Commission to Introduce the University Hospital of Santa Catarina State (*Hospital Universitário de Santa Catarina, CIHUSC*). This group began the initiatives to organize the Nursing Service seen that the hospital would be inaugurated six months later.

The teaching faculty of the Nursing Department outlined the basic guidelines for introducing the Nursing Service such as philosophy, the objectives of the assisting teaching integration and the care process, based on the Weed Method. Using these guidelines, the group prepared the documents containing the Personnel Policy, Material Policy and Care Policy. The Nursing Process and the Weed Method integrated the Care Policy. Seen that, this category highlights the importance of the participation of these professors in the introduction and implementation of the Nursing Process in the UH. It identifies from the narratives how this participation took place and which aspects of professionalism acquired were influenced by their presence in the institution.

One perspective highlighted in the speeches was the political participation of professors. It refers to the ability to organize and leader but also the ability to act and manage situations using diplomacy.

One aspect that forcefully appears in the narratives was the struggle for the nursing position as the Board of Directors in the hierarchical structure of the Hospital. It is clear that the political participation of the professors of the Nursing Department was configured as the determinant for this achievement to happen.

It was a huge battle of nursing because we reached the same hierarchical level as medicine, the Care Support Board and the Administrative Board. This used to be a constant discussion! Because they would ask themselves, 'how is nursing up there'? And we would always justify: "we are the professionals who stay here 24 hours a day with patients!" (Teaching nurse Márcia Cruz Gerges)

After the inauguration of the Hospital, the political participation of the professors continued, through the occupation of senior positions in strategic services for the operation of the Institution, such as the Division of Internal Patients and the Division of External Patients. This management strategy allowed nursing to continue to occupy political spaces in the Hospital and in the University, influencing the achievement of autonomy, status and knowledge, characteristics present in professionalism.

One of the ways of political participation of the professors of the Nursing Department identified from the narratives was organizational, through the support to the nursing assistants in the conflicts and litigations present in the daily work. It is important to contextualize that most of the nurses were newly graduated, experienced a national political scenario led by the military dictatorship in which any activity of claim and disagreement with the status quo was considered as subversion and therefore prohibited.

We were greatly supported by the professors; they would guide us on how to act, they would fight for us. So that doctors would accept our methodology, we once decided not to answer what they asked about patients. When they would ask us about patients we'd say: you have not read the evolution of nursing? ... We had to step up every day. We would say them the same thing for years. (Assistant nurse Alda Isabel da Silveira Melo)

The presence of the professors of the Nursing Department at the hospital studied has contributed, according to the narratives,

to the follow-up and orientation of the nursing assistants as of the introduction of the Nursing Process.

Later, &&& came and professor Lidvina was here in the Division of Internal Patients with us. She used to call us daily to talk, discuss the progresses and everyone was very enthusiastic. (Assistant nurse Alda Isabel da Silveira Melo)

The teaching and service integration appears in the speeches as an important aspect because the hospital represented a model site for the practical classes. At the same time, the Nursing Process was being implemented, making teaching and learning easier.

There was this combination of facts that led to the introduction of systematization and created a reference, which is still a reference for a better nursing education here at the Federal University of Santa Catarina. I might say that nursing education today would be much more fragile if there were not this UH benchmark. I believe this is an anchor... I guess that, in a way or another, the UH having managed to sustain systematization until present days is an important anchor for teaching. Not only from the point of view of competence, but also from the point of view of commitment to the profession. I guess this is also important. (Teaching nurse Jorge Lorenzetti)

As mentioned above, it is clear the importance of the implementation of the Nursing Process as one of the foundations in the construction of the service and teaching integration in nursing. In the introduction of the Nursing Process, the application of the theoretical elements in clinical practice was taking place, whereas the hospital served as a field for practical undergraduate classes, which made it possible to contextualize the elements that are part of its operation, making learning easier.

The implementation of the Nursing Process and the commitment to the Brazilian Nursing

This category highlights the commitment, struggles and persistence of nurses who participated in the implementation of the Nursing Process of the hospital at hand. Because it has been the first hospital of Santa Catarina State to introduce the Nursing Process, this has demanded from people involved characteristics such as persistence and discipline so that its implementation could be initiated and kept for more than 30 years.

Grit, persistence and the ability of professionals there introducing the Process were the aspects that made everything easier. Many nurses who supported the idea would say "we will succeed at introducing it, we will for sure." I think that this initial group of the UH was hugely important because they were trained, they really incorporated the care philosophy and this was fundamental. If nurses of the units had not had this desire to incorporate, to believe that this was a scientific nursing, that had a method of working, nothing would have happened. This was essential for us to succeed later. (Teaching nurse Márcia Cruz Gerges)

Responsibility with the profession was another feature found in the narratives of this study. This responsibility is represented by the commitment to the quality of nursing care provided to

patients. This was mainly achieved through the implementation of the Nursing Process, since this work instrument provides individualized and safe care in encouraging the scientific knowledge of nurses.

The professional commitment present in the implementation of the Nursing Process appeared in the narratives as the definition of the role of nurses. As a private activity of the nurse its execution depends, among other actions, on an adequate evaluation of the patient being assisted by nursing.

There was a consensus among nurses about the importance of methodology, the need for the patient to have this, but that was one of the duties of the nurses and they could not fail to do that, as well as direct care. (Assistant nurse Tania Soares Rebello)

The responsibility and commitment to nursing present in the implementation of the Nursing Process can also be identified in the defense of the Nursing Process when the validity of this work instrument was challenged by the own professional colleagues. In addition, given this is a teaching hospital there was the commitment to the formation of new professionals.

The methodology has always been the flagship of nursing. I remember once having had a meeting in the auditorium about one item of the methodology and of the new nurses stood up and said it was boring, that it took a long time, that they needed to have more time with patients. Nurse &&& stood up and said: "here's the thing: those who do not want to use the care methodology go away, you are in the wrong hospital. Everyone working in the UH must use this methodology; otherwise you should resign and leave. Do your best for this hospital and let's get to work. We must not ignore the methodology." Since the beginning we have supported this Process, which professor Lidvina and other professors that thought the UH was feasible have done the same. We would stand up for nursing. (Assistant nurse Margaret Rose Gramkow)

The Nursing Process is shown as an instrument that differentiated the group of nurses of the hospital studied from those of other hospitals in the state of Santa Catarina. Such difference appears in the narratives as pioneering because it was the first hospital in the state to introduce the Nursing Process.

I think that nursing in the UH became respected. It was a benchmark; other hospital institutions did not have it. They would perform their work, but they would not plan their care and the records in a systematized manner... Sometimes, we would attend a congress, a conference, and our nursing work was looked at differently. Because our nursing was creating a systematization and a care which are models. (Assistant nurse Elizabeth Flor de Lemos)

Scientific knowledge created and encouraged by the implementation of the Nursing Process is identified as one of the responsible for the status that nurses achieved, represented by the recognition of the population that uses the health services offered by the hospital, as well as the academics and other members of the health team.

DISCUSSION

The history of the introduction and implementation of the Nursing Process to which this study refers is full of examples of dedication and commitment to the profession. The professionals involved in this unique event for the development of Brazilian Nursing experienced a favorable historical moment for the introduction of the Nursing Process, considering the promotion of teaching this instrument of work in undergraduate and postgraduate schools occurred in the 1970s.

This period was also marked by the influence of Wanda de Aguiar Horta in several events related to Brazilian Nursing, such as her participation in 1972 at the Anna Nery Nursing School (*Escola de Enfermagem Anna Nery*), which instituted the first master's Degree in Nursing in Brazil and in 1976 at UFSC, as a guest teacher of the Master's degree in Nursing⁽⁷⁻⁸⁾. Despite the favorable historical moment for the introduction of the Nursing Process in Brazilian hospitals, this period, as well as the others that came in the first years of its implementation, was also marked by challenges faced by the nurses involved in this process. Among these challenges, this study identified lack of knowledge, inadequate physical space and materials, overwork, non-acceptance of the Nursing Process by medical professionals, other members of the nursing team and even some nurses as the main challenges faced. Lack of knowledge relates to this study, both to the understanding of concepts of the theoretical reference used and the stages of the Nursing Process, as well as to the knowledge about the subjects that support the clinical practice of nursing.

Lack of knowledge in the application of the Nursing Process is related to the poor educational preparation of nurses on the conceptual aspects of the Nursing Process and on fundamental contents for clinical practice. In addition to lack of organization and uncertainty of what to include in the patients' records and also the resistance of some nurses to changes. This is why the acceptance of the Nursing Process as a tool for care is still incomplete in many countries⁽⁹⁾.

Inadequate physical space and materials, besides work overload evidenced as challenges for the implementation of the Nursing Process in this study, are still reported in other similar experiences, constituting threats to the development of the Nursing Process in developing countries⁽¹⁰⁻¹²⁾.

Considering that the Nursing Process provides care based on scientific principles, it contributes to the achievement of some of the attributes of professionalism such as knowledge, expertise, status and professional autonomy⁽¹⁾. Moreover, autonomy allows professionals to offer services of better quality to society and occupy important spaces in the workforce, since they perform specialized work activities supported by abstract technical expertise⁽¹³⁾.

This group of nurses reclaimed an ideology that prevailed for the commitment to the performance of their work with quality, which included mainly the operation of the Nursing Process, contributing to the modification of the image of the profession and, especially, of nurses, to the population cared and the health team. Knowledge encouraged and created from this care practice was clear and, in this way, influenced the achievement of autonomy of nurses working in hospital studied.

This situation made it possible for these professionals to offer better quality care to patients. The concept of autonomy, in this case, comes with two hugely different implications— autonomy of the influence or power of others and autonomy to influence or exercise power over others⁽¹⁾. That is, nurses have achieved the position of independence that included their protection in face of the competition from other professionals and the interference of hospital management. And the autonomy to define which nursing activities patients need to receive, how and when to receive them. This autonomy was legitimized with the approval of Law 7.498/1986, which defines nursing prescription and consultation as private nurse activities, representing a major advance in terms of autonomy and definition of nurses' role⁽¹⁴⁾.

Therefore, the autonomy and power of medical hegemony were shaken, creating conflicts between nurses and physicians, whose main reaction was the non-acceptance of the Nursing Process.

Regarding this context, when discussing the hierarchy within the division of health work, the more a profession of consultation or occupation is autonomous the greater the potential for conflict, legally or in any other way⁽¹⁾. Professions of consultation are those that offer patients without expertise on the issue services to solve their problems and whose organization is influenced by their needs⁽¹⁾.

The non-acceptance of the Nursing Process by the attendants, assistants and nursing technicians in the studied period can be understood from the perspective of the power differentials present in the nursing team. The origin of the difficulties to implement the Nursing Process is represented by a range of elements of a distinct nature, involving the environment, knowledge and power relations and resistance present in the nursing team⁽³⁾.

The participation of professors of the Nursing Department in the introduction and implementation of the Nursing Process was decisive, given the relevance of the political strategies idealized and made effective by this group to overcome the challenges faced. The consolidation and development of the Nursing Process were influenced by its capacity for political articulation, by establishing a cohesive group of nurses and defender of this work instrument.

Professionals depend on economic capital and political power for their own survival, as well as specialized knowledge. From this perspective, maintaining and enhancing the position of the profession in the division of work requires continuous political activity. The profession must become an interest group so that it can promote its objectives and protect itself from those who have competing objectives⁽¹⁵⁾.

The incentive for political participation is based on the understanding of nursing as a profession of consultation that should constantly seek good relations with the bodies of power, actively participating in the elaboration and supervision of public policies⁽¹⁶⁾.

In the historical context studied, the participation of professors of the Nursing Department at *CIHUSC* outlined their political participation in the introduction of the Nursing Service and the Nursing Process, guaranteeing the status of the profession in the organizational structure of the hospital.

However, the recognition of the profession by society goes through the organization and internal structuring as a class, through an understanding of the role and importance of nurses in the health team⁽¹⁷⁾.

The establishment of the Nursing Process as a guiding component of its work process allowed nurses to define and reaffirm their role in the health team. In this reality, nurses are recognized for their ability to comprehend the human being in an integral, individualized way, by receiving and identifying with the needs and expectations of patients, to understand social differences and to integrate patients and health professionals⁽¹⁸⁾.

Both professional commitment and the responsibility were configured as attributes present in the actions of the nurses, which enabled the successful coping with the challenges that arose in the implementation of the Nursing Process. In addition, this action based on professionalism helped in the scope and definition of the nursing space within the health team.

Professionalism, self-valorization of the profession and social awareness are recognized as professional values of nursing, understood as qualities needed to solve problems quickly and correctly. Moreover, the presence of these values as the ground of the actions of nurses decreases the level of work-related stress and increases professional satisfaction⁽¹⁹⁾.

Moreover, the actions based on the professionalism of nurses in this study contributed to the formation of a favorable professional image of nurses before the community of patients and health professionals. Given that, in this context, the Nursing Process has become an indisputable element to make this image visible, it has made concrete the knowledge of these professionals to act with technical-scientific competence, based on humanistic values. This positive image of nurses in this study is presented in history as a marketing strategy, which is a benchmark of that care space, reverberating up to the present time. For nurses, this image represented professional fulfilment, more than professional status.

In the studied reality, nurses have contributed in an effective way to the dissemination of a positive image of nursing towards society. This image was configured based on the characteristics of professionalism, such as expertise, scientific knowledge and autonomy, which have been fostered throughout the implementation of the Nursing Process.

Study limitations

The main limitations of the study are related to the stage of data collection, specifically regarding selection and contact with participants of this study, since most of them are retired,

traveling or living in cities far from the researcher. This situation required that the data collection be delayed several times and the interviews carried out in several stages, as well as long displacement to its accomplishment.

Contributions to the nursing, health or public policy sectors

The knowledge about the history of the introduction of the Nursing Process that this study provided gave visibility to its contributors and brought to light the peculiarities of this history, allowing one to glimpse its current and future potentialities. It raised reflections on the theoretical and philosophical bases that inspired the professionals of this history, the motivations that propelled them and that peaked the offer of the needed tools for the construction of the professional bases of the working class. It is worth noting that management strategies are adopted to strengthen knowledge and expertise of nurses. This study has considered knowledge and expertise as the main professional attributes aroused by the implementation of the Nursing Process.

CONCLUSION

The introduction and implementation of the Nursing Process, the focus of this study, allowed nursing to advance in its professionalization process, through the performance of teaching and assistant nurses. This study has pointed out that the characteristics of professionalism, such as responsibility, professional commitment, commitment to knowledge acquisition and, above all, the quality of care provided to society were essential for the success achieved during this process.

The political participation of professors of the Nursing Department was a vital condition for the successful introduction of the Nursing Process, involving the establishment of strategies that enabled the political and organizational conditions needed for its implementation. Nurses, the protagonists of this historical moment for the Brazilian Nursing, were pioneers of a profession in search of the definition of their role in the health team, historically dominated by physicians.

Therefore, we must recognize the pioneering nature of this group of professionals by proposing scientifically based nursing care, with autonomous attributions and defined by an instrument of work slightly known at the time, even within the nursing professionals.

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