

199 - HOSPITAL INFECTION AS PERCEIVED BY THE ACCOMPANYING PERSON OF A HOSPITALIZED CHILD

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INTRODUCTION

In Brazil, the public politics gone back to the child and the adolescent, especially, the approval of the Child's Statute and of the Adolescent (ECA), regulated by the Law 8.069/90, it has been making possible transformations in the practice pediatric for attendance (BRASIL, 1990).

In your Article 12, ECA forces the institutions of health to offer reception conditions to the companion during the whole period of the child's internment, what implicates changes in the dynamics of the hospital work and, consequently, it influences the process of the professionals' of the health work by virtue of enlarging the focus of attention and the intervention object, starting to include the family as care object (BRASIL, 1990).

The relative's presence during the child's therapeutic process can also cause changes in the modality of the pediatric attendance as it not provides to the team of health a vision multidimensional and a practice more centered in the pathology, but in the child and your family.

In relation to the attendance to the child's health, your beginning happened in France, spreading the other countries, with base in knowledge concerning the growth and normal development, including corporal hygiene and of the atmosphere, feeding and prenatal and powder-native cares immediate (ROCHA; ALMEIDA, 1993).

The nursing, however, it developed your actions based on the rules and rigorous techniques of isolation, maintaining the confined children and avoiding the visits, for considering them a risk for the crossed infections, tends in view the lack of aid of antibiotics.

It enrolls, as initial mark of the attendance to the child, the construction of the first infantile hospital in Paris, with date of 1802, what generated the need of specific training in pediatrics (WAECHTER; BAKLE, 1979).

However, the origin of the modern nursing pediatric appears associated to the pediatrics as medical specialty about 1888, with the creation of pediatrics department in the medical schools (ROCHA; ALMEIDA, 1993).

This way, it is pointed out that the initial program of teaching of the formation of the nursing pediatric in the period from 1830 to 1840, was centered in the knowledge of the disease, worrying more about the technical and less aspects with the growth and the child's normal development, what evidences a formation stepped on in the disease and in the cure (ROCHA; ALMEIDA, 1993).

However, at the end of the decade of 30, the pediatric nurses start to identify the child as a to be in growth and development, separate from your family in the moment of the hospitalization, and, starting from the forties, they rethink your work processes and they try to reorient your practice (ROCHA; ALMEIDA, 1993).

In this sense, it is told that after the publication of the document of the World Organization of Health (OMS), in 1951, concerning the maternal privation as cause of disturbance of the child's mental health, important transformations happen in the hospital attendance pediatric. One of them happened in England, in 1959, by the publication of the report Platt - the child's well-being in the hospital, that brought great disputes concerning the process of the child's hospitalization (COLLET; OLIVEIRA, 1998).

In Brazil, the foundation of public and social politics gone back to the child and the adolescent feels starting from projects of character for health that they were addressed for programmed actions, but that the family was summoned to be copartner in the promotion of the child's health (MIRANDA; FERRIANI, 2001).

The Program of Integral Attendance to the Child's Health (PAISC), servant in 1984, stands out about the great mark of a politics for the attendance in health in the last twenty years, aiming at the decrease of the infant's morbidity and mortality in the country. The community participation is noticed as an important aspect of the program, that happens through the use of the popular knowledge and of the incorporation of the technical knowledge for the population (MALVEIRA; SOUZA, 1998).

Though, it is evidenced, in relation to the infantile attendance, the permanence of the traditional model of attendance with emphasis in the pediatric medical consultation, opposing to the interaction perspective of PAISC.

A significant progress in the attendance to the child happens in the decade of 90, through the regulation of ECA that assures, to the hospitalized child, the accompaniment right for a relative in integral time (BRASIL, 1990).

It moves, then, the form of taking care in Pediatrics and it is imposed, to the professionals of health, the challenge of including the family in the child's therapeutic process. However, studies evidenced, still, the nursing professionals' little preparation in working with the companions in the hospital atmosphere and the difficulty of sharing, with them, the information (COLLET; ROCHA, 2004; MORORÓ, 2006).

Like this, the companions assume the cares considered elementary, while the nursing preserves the actions addressed to the therapeutic process, configuring a subdivision of the manual work. This fact proves the companion's effective participation in the execution of procedures and it evidences the imperative need of the accomplishment of educational activities with the objective of informing them as the measures of prevention of the hospitals infections.

In this perspective, it is understood that these measured they should permeate all the actions accomplished in the hospital and infirmary level in reason of your vital importance in the safety and improvement of the quality of the attendance, being taken into account, mainly, the child's peculiarities.

A group of factors contributes to hospitals infections incidence in children, such as: the slow maturation of your immunology system, becoming more accentuated in children of smaller age, the interaction of objects, toys and atmospheres among the children, the sharp malnutrition, the presence of congenital anomalies, the use of medicines, especially the corticosteroide, and the diseases hemato-oncology (ANDRADE, 2006).

In this aspect, the fundamental importance is emphasized of looking at the practice of hygiene of the hands, that, although a simple procedure is considered, it is relegated to a secondary plan (ANDRADE, 2006).

It becomes, then, indispensable the involvement of every team of health, that should be conscious on those measured

and, especially, on the importance of guiding the companions, that are involved in the attendance to the child tends in view your direct participation in the process of taking care.

This way, this article has as objective presents the results of a research on the child's companion's knowledge hospitalized concerning the hospital ambient infection and on the prevention measures and control.

METHODOLOGICAL PROCEDURES

It is a study of case of qualitative nature, accomplished in March of 2008, in a pediatric hospital of teaching, integral of SUS and reference in pediatrics to Rio Grande do Norte. The collection of data was accomplished through the focal group, that " has as objective the identification of perceptions, feelings, attitudes and the participants' " ideas (DIAS, 2003).

The focal group was accomplished on March 06, 2008, at the 16 hours, in the room of study of the hospital, programmed with the due antecedence, after contact with all the companions of the section and in conformity with your schedule readiness. They participated in the study 07 companions of children, all of the feminine sex, of the which 06 were mothers and 01 were kindred of first degree. The time of the children's internment varied on average of 05 days.

The number of participants followed the orientation of Kitzinger (2005) in the which explains that this number should be from 06 to 15. The companions were of different infirmaries of the pediatrics as: general, neonatology, surgery and oncology.

The criterion for inclusion was to present risk factors for hospital ambient infection: lingering internment, postoperative of hipospádia, traqueotomia and neoplasias bearers. These were hospitalized in the month of March of 2008 and they were invited to participate of the research through personal contacts.

After the focal group, the following stages were proceeded: transcription of the speeches in the complete system and grouping of the speeches according to the likeness of the meanings, constituting the following analysis categories: Perceptions and the companion's practices on the hospital infection, the companion's participation in the Prevention and Control of the hospital ambient infections and transmission of specific knowledge.

The treatment of the collected information was accomplished by the methodological approach of content analysis, with base in Bardin (1979).

The study was approved by the Committee of Ethics in Research of UFRN, under the opinion n° 015/2008, having accomplished all the established demands for the Resolution n° 196/96 of the National Council of Health.

RESULTS AND DISCUSSION

Knowledge and existence about the hospital infection

In relation to the companions' knowledge concerning the hospital infection, these place:

I don't understand what is hospital infection (companion).

I think the hospital infection happens when some thing is infected, badly taken care, it dirties (companion).

Some companions expose the ignorance on the hospital infection, another associate the infection with negligence and dirtiness. In spite of being information comes of the common sense, it is known that the number of hospitals infections can be reduced, in great scale, through good hygiene practices.

In a pediatric hospital, the hygiene relationship with the hospital infection has larger fame, in reason of the child's peculiarity whose development mental or physical favors inadequate hygiene practices. Besides this factor, your constant movement in the hospitals spaces and the utilities of objects, toys and atmospheres with other children demands a rigorous care with the cleaning and disinfection (CARDOSO; CORRÊA; MEDEIROS, 2005)

It was observed, then, that, in a general way, the companions demonstrate an insufficient knowledge on the theme, although explicit, in your speeches, an existence with the hospital infection as she can observe below in the speeches:

Once I interned my daughter in a hospital to receive blood and she caught pneumonia because she had a child with pneumonia (...). She was more seven days interned with pneumonia (companion).

This explicit report the companion's real contact with the hospital infection as it lived, directly or indirectly, some case. It is pointed out, like this, the relative's relevance to know what is infection and which the damages that can cause your son to wake up your responsibility in the prevention. However, it is important to understand that the relative's participation in the accomplishment of the cares to the child doesn't discard the nursing professionals' responsibility in the accompaniment of this process.

THE COMPANION'S PARTICIPATION IN THE CARE WITH THE PREVENTION OF THE HOSPITAL INFECTION

In the speech below, the companion tells the form how she can contribute to the prevention of the hospital infection.

She has a simple measure of avoiding infection that is to wash the hands and the most necessary, the most important, nobody nor it imagines him all it is important (...). (...) the companion can help a lot to avoid the infection, if he is clean (companion).

It is pointed out as positive the adhesion declaration to the wash of the hands as form of prevention of the infection. The hygiene of the hands is considered the more important measure in the prevention of infections in the services of health, being, naturally, related with the reduction of the risks of transmission of patógenos nasocomiais. In spite of all the scientific evidences, with relationship your pertinence for the control of the infections, studies alert for the little adhesion of this practice for the professionals of health (SANTOS, 2008).

The perception of the mothers' group on the wash of the hands as form of prevention of the infection reinforces the need of educational activities that they seek to offer information on the hygiene of the hands, hygiene habits and another measured of prevention of hospital infections for the relatives, among other reasons, for the fact of these, besides they supply cares to your children, they try to help other unaccompanied children.

TRANSMISSION OF TECHNICIAN-SCIENTIFIC KNOWLEDGE

Being taken into account reviews it of the professionals' of health information for the companions in what they concern to the prevention measures and control of the hospital infections, the mothers identify some situations where this reviews it would be happening:

In the hospitals she has meeting there with the mothers she leaves us informed of a lot of thing, of the rules of the hospital, what is that we can do to help in the cleaning (...) I saw in television that you wash your hand in the bathroom but it diffuses in the knob, you already dirtied again the hand. (...) (companion).

One of the companions mentions the fact of having seen in the television comments on the wash of the hands, evidencing that, although it has not been an information reviewed by the professionals of health in the hospital atmosphere, the procedure was well assimilated.

The expressed speech, also, the way of the information supplied by the professionals of health to the companions for the norms of the hospital, organization of the infirmaries and hygiene cares, inexistent a specific approach concerning the hospital infection and your prevention forms.

Data fellow creatures were found in other study, which revealed that the information received by the parents during the hospitalization they were more addressed to the reason of the procedures and internment, health condition and the son's treatment and that the more frequently supplied by the nurses they are relative to the norms and routines and reasons of the procedures, having little reference concerning the participation in the cares (SABATÉS; BORBA, 2005).

It is emphasized, however, that a humanized practice involve an educational and informative process between team and companion and that the humanized attitudes are related with the communication style adopted, and the not humanized they are translated by attitudes that value the hospitals rules, the lack of attention and the low empathy on the part of the professionals (FRAQUINELO; HIGARASHI; MARCON, 2007).

The following speech evidences the form as the companion it is involved in the process of taking care:

I am learning how to aspirate my son, that he has a syndrome, I change the curative, I am learning how to do the tie of the traqueostomia, he had never given the bath, I had to lose the fear, I am giving bath, changing of clothes, making everything. (...).

The companions' speech evidences your direct involvement in the accomplishment of basic cares to the child that you/they are, in reality, of competence of the nursing and they expose the difficulties in developing, without help, the hygiene procedures, demonstrating to recognize the importance of those cares.

In consonance, a study concerning the attendance to the hospitalized child evidenced the relative's involvement in the accomplishment of procedures as: the administration of medicines, therapeutic baths, aerosol and tapotagem, whose "trainings" are accomplished, frequently, for the nursing assistants, being the supervision of the care rarely accomplished (it FILES; ROCK; SCOSHI, 1999)

The relative's inclusion in the participation of the cares involves, also, a to rethink in these professionals' formation that should be based in taking care of the companion. However, it understands each other that the process of the professional's of health formation is still centered in the technical learning and individualized, with few initiatives for the exercise of the critic, creativity and sensibility (FERNANDES; ANDRAUS; MUNARI, 2006).

FINAL CONSIDERATIONS

The result evidenced an understanding of the companions concerning the hospital infection with base in the knowledge of the common sense. This fact points for the need of educational activities that they have as focus, especially, the companions, in order to turn them multipliers and partners of the teams of health and of CCIH.

It is verified, then, the importance of performance of CCIH together with the professionals of health in the establishment, systematic, of educational actions gone back to the prevention and the control of the hospitals infections, in order to offer to the companions a minimum understanding for the reach of an appropriate acting in the preventive actions.

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HOSPITAL INFECTION AS PERCEIVED BY THE ACCOMPANYING PERSON OF A HOSPITALIZED CHILD ABSTRACT

This is a case study carried out in a pediatric teaching hospital aimed at analyzing the knowledge of an accompanying person about hospital infection, given that it plays a direct role in child care, even though an absence of an educational practice promoting qualified care can be observed. Data collection used the focus group technique with persons accompanying hospitalized children in March 2008. The results identified were: insufficient knowledge on the part of the accompanying person; failure to transmit information about institutional norms and routines and little sharing by the professionals of the child's health condition and of information about preventing and controlling infection. Thus, a critical reflection must be made on the co-participation of family members in care and on the role of the professional in sharing not only tasks, but mainly, knowledge about humanized care, achieved by adopting permanent health education protocols.

KEYWORDS: hospital infection; child; family.

CONTRE LES INFECTIONS NOSOCOMIALES DANS LA PERCEPTION DE L'ENFANT HOSPITALISÉ RÉSUMÉ

Il s'agit d'une étude de cas menée dans un hôpital d'enseignement pédiatrique dans le but d'analyser la connaissance du compagnon sur l'infection à l'hôpital, car il est directement impliqué dans le soin des enfants, bien qu'il y ait un manque de promoteur de la pratique éducative du personnel de soins. Pour la collecte des données que nous avons utilisé la technique des groupes de discussion avec des parents d'enfants hospitalisés en Mars 2008. Les résultats identifiés: le manque de connaissances par le compagnon, le transfert de renseignements adressées à des règles / routines institutionnelles, et peu de partage par des professionnels, la situation sanitaire des enfants et des informations sur la prévention et le contrôle des infections. Ainsi, il est nécessaire de réfléchir de manière critique sur la co-intervention dans les soins de la famille et le rôle professionnel en ne partageant pas seulement des tâches, mais surtout d'une connaissance des soins de l'homme, par l'adoption de protocoles pour l'éducation continue en santé.

MOTS-CLÉS: infection; enfant; famille.

LA INFECCIÓN HOSPITALARIA EN LA PERCEPCIÓN DEL ACOMPAÑANTE DE LOS NIÑOS HOSPITALIZADOS.

RESUMEN

Es un estudio de caso realizado en un hospital pediátrico de enseñanza con el objetivo de analizar el conocimiento del acompañante acerca de la infección hospitalaria, ya que él mismo participa directamente de los cuidados al niño, aunque se perciba la ausencia de una práctica educativa promotora del cuidar bien calificado. Para coleccionar las informaciones se utilizó la técnica del grupo focal, con los acompañantes de los niños hospitalizados en el mes de marzo de 2008. Los resultados identificaron: insuficiencia de conocimiento por el acompañante; repase de informaciones acerca de las normas/rutinas institucionales; y poco compartimiento, entre los profesionales, acerca de la situación de salud del niño e informaciones sobre la prevención y control de infecciones. De esa manera, se hace necesario reflexionar críticamente la participación de los familiares al lado de los profesionales en el cuidado y cuál es papel de los últimos en el compartimiento, no sólo de las tareas, sino, especialmente, del conocimiento para un cuidar humanizado, tras la adopción de protocolos de educación permanente en salud.

PALABRAS-CLAVE: infección hospitalaria, niños, familia.

A INFEÇÃO HOSPITALAR NA PERCEÇÃO DO ACOMPANHANTE DA CRIANÇA HOSPITALIZADA RESUMO

Trata-se de estudo de caso realizado em um hospital pediátrico de ensino com o objetivo de analisar o conhecimento do acompanhante sobre a infecção hospitalar, uma vez que o mesmo participa diretamente dos cuidados à criança, embora se observe a ausência de uma prática educativa promotora do cuidar qualificado. Para coleta das informações utilizou-se a técnica do grupo focal, com acompanhantes de crianças hospitalizadas no mês de março de 2008. Os resultados identificaram: insuficiência de conhecimento pelo acompanhante; repasse de informações direcionadas às normas/rotinas institucionais; e pouco compartilhamento, pelos profissionais, da situação de saúde da criança e informações sobre prevenção e controle de infecções. Assim, torna-se necessário refletir criticamente sobre a co-participação dos familiares no cuidado e o papel do profissional no compartilhamento não apenas de tarefas, mas, principalmente, de conhecimento para um cuidar humanizado, mediante a adoção de protocolos de educação permanente em saúde.

PALAVRAS-CHAVE: infecção hospitalar; criança; família.

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