158 - THE LEVEL OF LIFE QUALITY IN THE WORK OF NURSING TECHNICIANS OF ICU SECTOR IN A UNIVERSITY HOSPITAL FROM NATAL / RN

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1. INTRODUCTION

The search for Quality is the moment's tonic, and makes out all sorts of efforts of all Brazilian companies, which means bringing positive results in some way. However, to obtain a continued success, the company has to be "expert" in the search for results (quality of products and services), in maintaining a climate of internal motivation and openness to innovation and flexibility. In other words, hardly a company that does not exempt the proper care to the essential dimensions that affect behavioral aspects, will have full success in meeting the targets, in terms of quality, productivity and competitiveness.

The concern with the balance and integration of the technological, economic and social dimensions shows itself as, at least, an intelligent attitude on the part of leaders in the deployment of Total Quality Management, under penalty of the programs fail for lack of support in the process main factors.

In this sense, for operate the foundations of Total Quality Management, what is need is a part of a specific state of mind from the leaders as well as managers, supervisors and employees, which can be designated as basic awareness to Quality. On the other hand, what is need is to do systematic and daily life appeal to a whole battery of techniques and management tools (*data collection, cause and effect diagrams, histogram, graphs control analysis*), which does not relieve a level of preparedness and training of all involved, in terms of a consistent behavior with the spirit of Quality, in the course of meetings, parties, in control indicators and customer-supplier intern relations, for the smooth progress of work. These requirements emphasize the Assertion that the human element is actually the difference factor of business competitiveness.

2. REFERENCIAL THEORY

2.1. Quality and Participation

Nowadays, much has been written about Total Quality (QT), understood as the company's will or fixed desire to make quality products or provide quality services. A not lower or upper quality, but the necessary and sufficient one.

Giving employees an opportunity of expression and participation in decisions is, therefore, crucial for the improvement of working methods, products and the streamlining of costs. But it is, above all, a form of recognition of the employee's intelligence, which has been reflected in their life quality and productivity for the organization, with gains for all. As it's known, it is virtually impossible to obtain the satisfaction of customer when apart from the employee satisfaction because, "after all, Quality is first of all, an attitude. Who does and ensures the quality are people, far more than the systems, tools and working methods " such stressed BARÇANTE and CASTRO (1995) in their book "*Listening to the Voice of the Intern Customer* ", emphasizing the need to "transform the employee in a partner".

Such considerations on the participation become necessary because we cannot think of quality that comes without commitment of all involved.

Indeed, it is obvious the wishes and expectations of the people for greater participation in decisions affecting them, in their situation at work. Those companies that are aware of the need for people to participate and be heard has sought appropriate technologies to give voice to a more informed working class with new social expectations, new scale of values and new and more conscious attitudes and demands, increasing, with this posture, their chances of survival and success in the implementation of Total Quality programs. Participation in this sense, is an approach supported in managerial motivation, focusing particularly on technical group, giving it the same increased productivity, performance and satisfaction at work, essential to the effectiveness of organizations.

2.2. Concepts of Life Quality at Work

Despite the origin of the LQW movement back to 1950 with the emergence of social-technical approach, only in the 60s have boost after initiatives from social scientists, union leaders, businessmen and government officials, in search for better ways of organizing work in order to minimize the negative effects of employment in the health and well being of workers.

The movement by LQW was extended until 1974, when the energy crisis and high inflation hit the Western countries, particularly the United States, causing a significant drop in interest in the subject and a shift of attention from the companies for a form of survival, moving the officials' interests to a second plan.

According to RODRIGUES (1994, p.76), "the life quality at work has been a concern of mankind since the beginning of its existence with other evidence in other contexts, but always turned to facilitate or bring satisfaction and well-being for the employees in performing their task".

Classic authors, such as Maslow, investigated the LQW as motivational factors linked to performance, basing it in these authors, consider that there is LQW when individuals can meet their important personal needs, through the organization in which they work.

As the above notes, there is no definition on literature that deals with the issue, and the expression LQW may be used to bring together all the experiences of humanization of work and that has been agreed to be called Industrial Democracy.

2.3 The Life Quality In and Outside Work

This item aims to present some research that clarifies the relationship and importance of Life Quality inside and outside work. The organizational work is vital and can be seen as an inseparable part of human life. And the LQW influences or is influenced by several aspects of life outside work. Therefore, it is necessary to analyze a worker's life outside the organizational environment, so it can be measured the importance and interconnection of these "two lives".

Because it means both survival and life quality, work is also the most important element of social production. All work requires some physical and mental endurance that, in that case, is called the virtue of work.

Much has been spoken on the LQW. It is necessary to understand that satisfaction at work cannot be isolated from the individual's life as a whole. The work took major proportions on the lives of contemporary man, what makes the organizations main means for humans acquire their identity and their happiness.

2.3.1 Researches of Vrederiburg and Sheildan

Based on several surveys on Life Quality, VREDENBURGH and SHERIDAN (1979) says that "the quality of life structure includes several social indicators and individual perceptions of dissatisfaction with different areas of our life experience and municipality, leisure, housing, financial conditions". Another concern in studies about life quality relates six basic dimensions that define alienation. They are: impotence; insignificance; abnormality; cultural hostility, self-hostility, social isolation.

These authors confirm the association between the specific experiences of work and perceived life quality, suggesting that dissatisfaction with work influences alienation and dissatisfaction with other areas of life. They claim that this association is related to individual and organizational factors. Among them, we can cite: sex, race, age, marital status, education, "status", social-economic pattern, occupation, hierarchy level, supervision, labor characteristics, importance of work and community size.

This conclusion, according to the authors, suggests that our contentment with life is built on the concept of satisfaction with specific areas of life, such as the experiences in work and family.

Knowing this study, we can say that LQW is a vital point, not only for the realization of man at work, but also throughout its existence.

3. The Institution "ONOFRE LOPES UNIVERSITY HOSPITAL"

3.1. Historical Background

The trajectory of the Onofre Lopes University Hospital (HUOL) resembles the very history of the hospital, which in its foundation, in different societies, played the role of providing charity care for poor or destitute patients.

At the time of the first hospital was built up at Natal, families with better financial conditions, when in need for medical care, used family medicine, that is, these people received medical treatment in their homes, while the poorest people, which did not have the means to receive home treatment, was unassisted. Thus, it arose the need to create a place where it could be offered to this population a minimum of assistance (NASCIMENTO, 1997).

It was then that in 1909, through a decree dated August 21st, which the governor Alberto Maranhão determined that the reorganization of health services in the state had to be started. So, the governor bought for the state, a country house, located at Mount Petrópolis that, at the time, served to the summer vacation of Albuquerque e Maranhão family.

On 1909 September 12th, starts the operation of the first general hospital of the state, called "Juvino Barreto Charity Hospital", whose name was given in honor of Governor Alberto Maranhão's father-in-law. In 1935, it came to be called "Miguel Couto Hospital".

From the federalization of University Hospitals in 1960, by decree signed by the President of the Republic Juscelino Kubitscheck, the Miguel Couto Hospital receives the designation of "Clinical Hospital" and it turns into School Hospital, becoming an integral part of the Federal University of Rio Grande do Norte UFRN, under direct orders of the Dean.

On 1984 November 1st, by act of Dean Genibaldo Barros, approving the resolution 64/84-CONSUNI, the name is changed to Onofre Lopes University Hospital, to honor the illustrious Professor Onofre Lopes da Silva.

Currently, the Onofre Lopes University Hospital has beds for intern patients in several areas of clinical and surgical clinics, Intensive Care Unit, Renal Transplant and Hemodialysis. It also has an ambulatory that assists the needy population of the entire state, in various medical specialties.

3.2. Environment of the research: an Intensive Care Unit ICU

The Intensive Care Unit of the Onofre Lopes University Hospital was created aiming to meet the needs of full assistance to potentially serious and life-threatening patients. The intensive treatment needed for these patients requests some particular requirements, such as special equipment, trained personnel, appropriate environment, full and intensive care.

Aiming to improve patient care assisted in that sector and qualify the assistance provided, there was replacement of old and outdated machinery for new last-generation equipment and general physical reform of the sector, which had until then, only four beds and now operates with twelve beds including a bed for isolated patients with infectious and contagious disease.

Due to efforts to modernize the sector, there is a gap regarding the qualification and development of human resources, getting to the desired preparation offered to professionals in this crowded sector, including use of temporary staff, as interns and trainees, without proper specific qualification, what compromises the quality of service provided.

The interest in preparing this study emerged after observing that the prolonged coexistence of Nursing Technicians with the environment of ICU sector does not contribute to the creation of adequate conditions for Life Quality at Work.

4. Research Results

Table 1 General statements of research results

INTERV.	FUNC TION	ORG. CULTURE	ORG. STRUCTU RE / PHYLOS.	WORK ORG.	MAN AND MONEY	ORG. AND SOCIAL INTEGR.	ORG. RESULTS	TOTAL	LQW LEVEL (%)
1	28	12	22	21	07	17	16	123	58,57
2	26	07	01	21	02	10	07	74	35,23
3	27	21	19	20	15	15	15	132	62,85
4	23	30	27	26	18	07	15	146	69,52
5	21	11	21	14	07	11	12	97	46,19
6	28	17	28	19	11	14	12	129	61,42
7	28	20	28	27	14	24	29	170	80,95
8	25	17	20	21	10	10	12	115	54,76
9	24	21	15	18	03	02	12	95	45,23
10	27	11	17	11	03	07	06	82	39,04
11	27	17	29	28	11	09	10	131	62,38
12	28	12	17	19	02	15	09	102	48,57
13	25	07	13	13	04	05	09	76	36,19
14	30	28	30	26	25	22	20	181	86,19
15	29	28	28	21	29	28	18	181	86,19
16	22	22	20	15	15	16	17	127	60,47
17	18	24	29	25	05	09	11	121	57,61
TOTAL	436	305	364	345	181	221	230	2082	58,31

This study used, to data collection, the method of statistical statement through a structured questionnaire, applied to a population composed of seventeen nursing technicians. This method consists of a questionnaire composed by questions, problems of units, placed in natural positions, to get answers that may be submitted to quantitative analysis. This method can be operationalized through two types of surveys: the descriptive and explanatory. The variables used in this study were defined as: ***The function, the organization culture, the organizational structure and philosophy, the work organization, the man and money, organizational and social integration and the organization results***.

After applying the questionnaire, were established levels of life quality at work, by calculating the average percentage of

variables for each interviewee, with a variation between 35.23% and 86.19%. Then, it was calculated the arithmetical average of the individual interviewees, reached to an overall average in percentage terms that represents the level of life quality in the work of the Onofre Lopes University Hospital ICU nursing technicians, Nqvt=58,31%.

This result shows that the level of life quality of ICU nursing technicians of Onofre Lopes University Hospital, in the vision of the own interviewees, is somewhat satisfactory, because it's beyond the mark of 50%. When analyzing the answers obtained in the questionnaires, it appears that levels of satisfaction are higher on items relating to issues related to the individual, but the levels will decline in questions concerning the organization, showing that the line between the personal goals and organizational objectives do not converge to the same point.

4 CONCLUSION

Overcoming challenges and achieve goals of any quality program depends mainly on the mobilization of people for the development of actions of this program. Moreover, what is observed is that, although the organizations are investing in technology, there is an imbalance regarding the strategies of involvement of staff in relation to quality. However, this factor, considered one of the most important for achieving the goals of the organizations, is awakened by participatory programs, since they focus on Life Quality at Work.

The first item to be considered, is the imbalance between the importance given to technological aspects, without the same concern with the human potential, both regarding training, and in relation to the conditions and organization of work. The development of methods to optimize human potential in companies is fundamental to total quality management, but also to offer better Life Quality at Work.

It is known that it is necessary to create a stream of satisfaction and involvement for the participation and commitment of everyone who can, somehow, concentrate efforts to achieve the goals and objectives of Quality.

The involvement and participation are achieved through "a little more", offered to each worker. This "something more" can be translated as motivating factors or conditions that may generate a better life quality for those who produce, in a way that there must be a return on the quality of what is produced. This way, the relationship between Life Quality and Quality of Products and Services can be understood. It is within this thinking that the need to know the levels of Life Quality at Work of the people who make up the groups of employees of organizations is highlighted.

The research developed in this study also was designed within this perspective, and we can see that, despite the pessimistic expectations regarding the levels of Life Quality at Work of the Nursing Technicians of Onofre Lopes University Hospital, because the working conditions are somewhat adverse, in addition to the lack of investment in skills and development of human resources, the results caused surprise, but it appears, from the responses received, that the respondents has a sense of security arising from public service, in addition to the natural process of adaptation to hostile conditions, naturally occurring in the sector of Intensive Care. Moreover, is observed a good level of interpersonal relationship, thus generating adequate conditions for overcoming adversity.

It would also appear that does not occur homogeneity on the views of respondents, occurring significant changes in the form of each measure the values assigned to each variable searched.

It could not pass unnoticed the possibility of raising significant levels of Life Quality at Work of the Nursing Technicians of the University Hospital, if the managers of the organization reassess the issues of related to deficiency of training and improvement and the lack of greater participation of nursing technicians in decisions that directly affect their activities.

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THE LEVEL OF LIFE QUALITY IN THE WORK OF NURSING TECHNICIANS OF ICU SECTOR IN A UNIVERSITY HOSPITAL FROM NATAL / RN.

Introduction: The concern with the integration of technological, economic and social dimensions and the implications in the health sector with developments on the health of population, has been the object of study in a view of knowledge and practice transformation (MEDEIROS, 2000). In Brazil, interest in the topic Life Quality can be considered recent and there are still doubts about the exact meaning of the term (VERAS, 2003). **Objectives**: To analyze the level of Life Quality at Work (LQW), in terms of nursing technicians in an Intensive Care Unit (ICU) of a university hospital. **Methodology**: Descriptive investigation with quantitative approach about conceptions of LQW of the instrument which was applied by means of literature research and questioning, following a simplified model of teacher Marcos Vinicius Carvalho Rodrigues, whose effectiveness had been proven before. **Results**: We found levels of LQW, by calculating the average percentage of variables for each interviewee, with a range between 35.23% and 86.19%. Then calculated the arithmetic average of the interviewees' individual average, reached to an overall average in percentage terms that represents the technicians level of life quality at work, Nqvt = 58.31%. This result shows that, in view of the interviewees, is somewhat satisfactory, because it's beyond the mark of 50%. In analyzing the responses, it appears that levels of satisfaction are higher on items relating to individual issues, but the decline in organizational issues shows that the line between personal and organizational goals are divergent. **Conclusion**: The issue of quality in organizations is of relevant importance

regarding the achievement of organizational objectives and, specifically, the LQW is a decisive factor in achieving these goals, taking into account the increasing importance of human performance, with its peculiarities, to produce the results expected by the organizations.

Keywords: LQW, Nursing technician, ICU.

LE NIVEAU DE LA QUALITÉ DE VIE AU TRAVAIL DES INFIRMIER(E)S AUXILIAIRES DANS LE SECTEUR « UNITÉ DE SOINS INTENSIFES » (USI) DANS UN HÔPITAL UNIVERSITAIRE À NATAL/RN (BRÉSIL).

Introduction: La préoccupation avec l'intégration des dimensions technologiques, économiques et sociaux et les implications dans le secteur de la santé avec des conséquences pour la santé de la population, viens d'être objet d'études dans la perspective de transformation des connaissances et pratiques (MEDEIROS, 2000). Au Brésil, l'intérêt par le theme Qualité de Vie au Travail peut être consideré récent et il y a encore des doutes quant au significat exact du terme (VERAS, 2003). **Objectif**: Analyser le Niveau de Qualité de Vie au Travail (QVT), dès le point de vue des infirmièr(e)s auxiliaires d'une Unité de Soins Intensifes (USI) d'un hôpital universitaire. **Méthodologie**: Investigation descriptive avec un abordage quantitatif, à la lumière des conceptions de QVT de l'instrument appliqué, que a été fait à travers de recherche bibliographique et questionnaire, en suivant un model simplifié du Professeur Marcos Vinícius Carvalho Rodrigues, dont l'efficacité avait déjà été éprouvée auparament. **Résultats**: Niveaux de QVT ont été apurés, à travers le calcul des moyennes percentiles des variables pour chaque interviewé, ayant une variation entre 35,23% et 86,19%. Ensuite calculé la moyenne arithmétique des moyennes individuelles des interviewés, en arrivant à une moyenne générale que répresente en termes percentiles le niveau de qualité de vie au travail des auxiliaires Nqvt=58,31%. Ce résultat révèle que, dans la vision des interviewés, est, de certaine manière, satisfactoire, puisque excède la marque des 50%. À l'analyse des réponses, il est observé que les niveaux de satisfaction sont majeurs dans les items référents aux questions individuelles, passant a décliner dans les questions organisationnelles, laissant transparaitre que la syntonie entre les objectifs personnels et organisationnelles sont divergents. **Conclusion**: La question de la Qualité dans les Organisations est d'une grande importance dans ce que régard la consécution des objectifs organisationnelles et spécifiquement, la QVT est facteur décisif pour la consécutions de ces objectifs, prenant en considération l'importance chaque fois plus grand de la performance humainde, avec ses spécificités, pour l'obtention des résultats espérés par les organisations.

Mots-clés: QVT, Infirmier(e) Auxiliair(e), USI.

EL NIVEL DE CALIDAD DE VIDA EN EL TRABAJO DE LOS TÉCNICOS DE ENFERMERÍA DEL SECTOR UTI, EN UN HOSPITAL UNIVERSITARIO EN NATAL/RN.

Introducción: La preocupación con la integración de las dimensiones tecnológicas, económicas y sociales y las implicaciones en el sector salud con desdoblamientos en la salud de la población, está siendo objeto de estudios en la perspectiva de transformación de los conocimientos y prácticas (MEDEIROS;2000). En el Brasil el interés por el tema Calidad de Vida puede ser considerado reciente y todavía existen dudas cuanto al significado exacto del término(VERAS;2003). **Objetivos:** Analizar el Nivel de Calidad de Vida en el Trabajo, (CVT);del punto de vista de los técnicos de enfermería de una Unidad de Terapia Intensiva (UTI) de un hospital Universitario. **Metodología:** Investigación descriptiva con abordaje cuantitativa, a la luz de las concepciones de CVT ,del instrumento aplicado que se dio a través de investigación bibliográfica y cuestionario, siguiendo un modelo simplificado del profesor Marcos Vinicios Carvalho Rodríguez, cuya eficacia ya había sido comprobada anteriormente. **Resultados:** Fueron comprobados niveles CVT, a través del cálculo de los promedios porcentuales de las variables para cada entrevistado; habiendo una variación entre 35,23% a 86,19%, Enseguida calculado el promedio aritmético de los promedios individuales de los entrevistados, lse llegó a un promedio general que representa en términos porcentuales el nivel de calidad de vida en el trabajo de los Técnicos Nqtv =58,31%. Este resultado revela que en la visión de los entrevistados, es de cierta forma satisfactorio, pues ultrapasa la marca de los 50%. Al analizar las respuestas , se observa que los niveles de satisfacción son mayores en los items referentes a las preguntas individuales pasando a declinar en las preguntas organizacionales, dejando transparecer que la sintonía entre los objetivos personales y organizacionales son divergentes. **Conclusión:** El asunto de la Calidad en las Organizaciones es de relevante importancia en lo que respecta a la consecución de los objetivos organizacionales y específicamente: a CVT que es factor decisivo en la consecución de estos objetivos, llevándose en consideración la importancia, cada vez mayor del desempeño humano, con sus especificaciones, para la obtención de los resultados esperados por las organizaciones.

Palabras Claves: CVT, Técnico de enfermería, UTI

O NÍVEL DE QUALIDADE DE VIDA NO TRABALHO DOS TÉCNICOS DE ENFERMAGEM DO SETOR UTI EM UM HOSPITAL UNIVERSITÁRIO EM NATAL/RN.

Introdução: A preocupação com a integração das dimensões tecnológicas, econômicas e sociais e as implicações no setor saúde com desdobramentos na saúde da população, vem sendo objeto de estudos na perspectiva de transformação dos conhecimentos e práticas. (MEDEIROS, 2000). No Brasil, o interesse pelo tema Qualidade de Vida pode ser considerado recente e ainda existem dúvidas quanto ao significado exato do termo (VERAS, 2003). **Objetivos**: Analisar o Nível de Qualidade de Vida no Trabalho (QVT), do ponto de vista dos técnicos de enfermagem de uma Unidade de Terapia Intensiva (UTI) de um hospital universitário. **Metodologia**: Investigação descritiva com abordagem quantitativa, à luz das concepções de QVT do instrumento aplicado que se deu através de pesquisa bibliográfica e questionário, seguindo um modelo simplificado do professor Marcos Vinícius Carvalho Rodrigues, cuja eficácia já havia sido comprovada anteriormente. **Resultados**: Foram apurados níveis de QVT, através do cálculo das médias percentuais das variáveis para cada entrevistado, havendo uma variação entre 35,23% a 86,19%. Em seguida calculada a média aritmética das médias individuais dos entrevistados, chegando-se a uma média geral que representa em termos percentuais o nível de qualidade de vida no trabalho dos Técnicos Nqvt=58,31%. Este resultado revela que, na visão dos entrevistados, é de certa forma satisfatório, pois ultrapassa a marca dos 50%. Ao analisar as respostas, observa-se que os níveis de satisfação são maiores nos itens referentes às questões individuais, passando a declinar nas questões organizacionais, deixando transparecer que a sintonia entre os objetivos pessoais e organizacionais são divergentes. **Conclusão**: A questão da Qualidade nas Organizações é de relevante importância no que diz respeito à consecução dos objetivos organizacionais e especificamente, a QVT é fator decisivo na consecução destes objetivos, levando em consideração a importância cada vez maior do desempenho humano, com suas especificidades, para a obtenção dos resultados esperados pelas organizações.

Palavras Chave: QVT, Técnico de enfermagem, UTI.