







CHARACTERIZATION OF THE ETHICAL NURSING PROCESSES IN THE STATE OF ALAGOAS

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ABSTRACT

Objective: to analyze the infringements related to the opening of disciplinary ethical processes against Nursing professionals in the state of Alagoas, Brazil. **Method:** this is a documentary, exploratory and retrospective study with quantitative analysis, carried out at the Regional Nursing Council of Alagoas, from November 2020 to January 2021. By consulting the physical process, with the aid of a collection script, the data were analyzed using descriptive statistics. **Results:** 68 ethical processes were analyzed from 2009 to 2020. The infringements referring to interprofessional relationships (37.03%) and negligence (20.99%) stand out; the most applied penalty was verbal warning (42.22%) and the main complainant was the Regional Nursing Council of Alagoas (27.94%). **Conclusion:** it is necessary to emphasize the issues related to the infringements by the permanent education centers, to strengthen communication between the professionals. The research contributes to giving visibility to the ethical processes faced by Nursing professionals.

DESCRIPTORS: Code of Ethics; Nursing; Nursing Ethics; Professional Ethics; Nursing Legislation.

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INTRODUCTION

Professional deontology regulates the rights, duties and prohibitions of the profession, providing guidance on what may or may not be done in the field. In the Nursing field, the Federal Nursing Council (Conselho Federal de Enfermagem, COFEN) and its respective Regional Councils (CORENs) were created through Law No. 5,905 of July 12th, 1973, in order to discipline, normatize and supervise the Nursing practice in the search for ethics, care quality and commitment to the user and society⁽¹⁻³⁾.

Considering item III of article 8 of Law No. 5,905/1973, the COFEN system prepares the Code of Ethics for Nursing Professionals (Código de Ética dos Profissionais de Enfermagem, CEPE), currently in force through COFEN Resolution No. 564/2017, which integrates the legislation that regulates the profession and the principles that guide it. These principles are fundamental for the promotion and restoration of health, the prevention of injuries and diseases and the alleviation of suffering⁽³⁻⁴⁾.

Supervision of the profession is contained in the professional practice legislation and in the CEPE, deliberating that professionals must answer for their actions during the professional Nursing practice, which is supported by Law No. 7.489 of June 25th, 1986, and regulated by Decree No. 94,406, of June 8th, 1987, which provides for the Nursing practice throughout the Brazilian territory⁽⁵⁻⁶⁾.

The CEPE considers an ethical infringement and disciplinary action, omission or connivance that implies disobedience and/or non-compliance with its provisions. In this way, if there are facts that characterize infringements, the professional will be judged in an ethical disciplinary process (EDP), initiated and conducted under the terms of COFEN Resolution No. 370/2010, which establishes the procedural rules for the application of processes in all jurisdictions of Nursing councils^(4,7).

The EDP's function is to determine, investigate and apply the applicable penalties for each ethical infringement provided for in the CEPE. It starts as an administrative process (ADP) through denunciation and, later, the rapporteur issues an admissibility opinion to be voted on in an ordinary plenary meeting (OPM) for the opening of the EDP. The appointed instruction committee issues the final report after collection and organization of evidence and depositions, and another counselor issues the conclusive opinion with the applicable penalties, which will be decided in another OPM, with a deadline being offered to the parties to file an appeal⁽⁷⁾.

There are five penalties that can be applied, four of which are determined by the COREN, which are as follows: verbal warning; a fine of one to 10 times the annuity value according to the professional category and the amount fixed in the state; censorship, which is equivalent to a nominal warning published on the official COFEN/COREN communication channel and in major newspapers; and suspension of the Nursing practice for a period of up to 90 days. As for cassation, the professional loses the right to exercise the Nursing function for a period of up to 30 years, as determined by the COFEN⁽⁴⁾.

Currently, it is perceived that Nursing professionals undergo disciplinary ethical processes at a considerable and progressive frequency⁽⁸⁾; therefore, this theme should be deepened due to the lack of studies in this area at the national level. In this perspective, this study aims at analyzing the infringements related to the opening of ethical disciplinary processes against Nursing professionals in Alagoas, Brazil, seeking to elucidate the ethical infringements in order to enable the development of educational strategies to minimize the occurrence of processes.

METHOD

This is a documentary, exploratory, retrospective and quantitative analysis study carried out at the Regional Nursing Council of Alagoas – COREN/AL. The population consisted of the ethical disciplinary proceedings filed against Nursing professionals registered at COREN/AL, having as inclusion criteria the processes from January 2009 to December 2020, concluded and filed by December 2020, which had an outcome for analysis and available in the collection of the research site.

Disciplinary ethical proceedings were analyzed based on CEPE Resolutions No. 311/2007 and No. 564/2017^(4,9). The EDPs opened between 2009 and 2010 were governed by Resolution No. 252/2001 and the others, by Resolution No. 370/2010; both provide for the code of ethical processes of the Nursing councils, and the 2010 resolution was published with new information and updates in its chapters and articles^(7,10).

Data collection was carried out from November 2020 to January 2021, by consulting the physical process, using the collection script containing the following variables: total ethical processes in COREN/AL; sociodemographic profile of the accused; reason for the complaint; penalty applied to the accused; outcome of processes; ethical infringements by chapter; time variation from initiation to completion and from completion to archiving; characterization of the complainants; characterization of the occurrences; and variation of the time between occurrence and complaint.

The data obtained were organized in Excel® spreadsheets and analyzed using descriptive statistics. To ensure anonymity of those involved in the processes, the system of codes in Roman numerals was used, randomly, during data extraction, in addition to being filed in physical and electronic documents and eliminated after the research.

In all phases, the ethical aspects contemplated in Resolutions No. 466/2012 and No. 510/2016⁽¹¹⁻¹²⁾ were respected, and the research was approved by the Research Ethics Committee of Centro Universitário Tiradentes, through substantiated opinion No. 4,312,765.

RESULTS

A total of 68 ethical disciplinary processes filed with COREN/AL in the period from 2009 to 2020 were analyzed. 2010 had the highest incidence with 11 (16.17%) cases, followed by 2017 with 10 (14.70%) cases, and 2013 and 2020 with only one (1.47%) file; therefore, less frequently when compared to the other years, as shown in Figure 1.

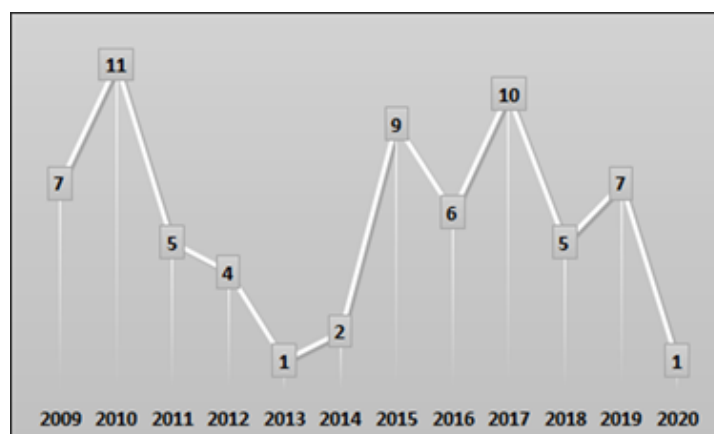


Figure 1 – Total processes analyzed in COREN/AL. Maceió, AL, Brazil, 2021. Source: The authors (2021).

According to Table 1 and excluding the unknown data, regarding the professionals reported, 82 (64.06%) were female and 13 (10.15%) were male; in relation to the most recurrent age group, 17 (13.29%) were between 28 and 38 years old; with regard to social class, it was mentioned in only one (0.79%) process, being middle class; as for marital status, the single group predominated, corresponding to 26 (20.31%) professionals; and, in the classification of race/skin color, three (2.34%) individuals considered themselves brown-skinned.

Table 1 – Sociodemographic and training profile of the accused. Maceió, AL, Brazil, 2021 (continues)

Variable	n	%
Gender		
Female	82	64,06
Male	13	10,15
Unknown	33	25,79
Age group		
28 – 38 years old	17	13,29
39 – 49 years old	16	12,5
50 – 60 years old	8	6,25
61 – 70 years old	2	1,56
Unknown	85	66,4
Social class		
Lower class	0	0
Middle class	1	0,79
Upper class	0	0
Unknown	127	99,21
Marital status		
Single	26	20,31
Married	25	19,53
Divorced	9	7,03
Widowed	0	0
Unknown	68	53,12
Ethnicity		
White	0	0
Brown	3	2,34
Black	1	0,79
Asian	0	0
Indigenous	0	0
Unknown	124	96,87
Professional category		

Nurse	63	49,21
Nursing technician	43	33,6
Nursing assistant	17	13,29
Nursing attendant	2	1,56
Midwife	0	0
Unknown	3	2,34
Training time		
1 - 10 years	5	3,9
11 - 21 years	1	0,78
22 - 33 years	1	0,78
Unknown	121	94,54
Registration time at COREN/AL		
From 1 month to 1 year	2	1,56
From 2 to 12 years	30	23,43
From 13 to 23 years	17	13,29
From 24 to 30 years	3	2,34
Unknown	76	59,38
Criminal records and aggravating circumstances		
Good criminal records	15	11,71
Criminal records and aggravating circumstances	1	0,79
Unknown	112	87,5
TOTAL	128	100

Source: The authors (2021).

Regarding the professional profile of the accused (Table 1), excluding the unknown variables, the category of nurse was the most affected, with 63 (49.21%) complaints. With regard to training time, five (3.90%) accused individuals had from one to 10 years. Furthermore, 30 (23.40%) of these professionals had been registered at COREN/AL for two to 12 years and 15 (11.71%) had a good criminal record.

However, the age group, social class, marital status, race/skin color, time since graduation, registration time and criminal records variables are compromised in the analysis, as they show, respectively, the following numbers of unknown and/or blank data: 85 (66.40%), 127 (99.21%), 68 (53.12%), 124 (96.87%), 121 (94.54%), 77 (59.38%) and 112 (87.50%).

In all 68 cases, there is more than one reason in the complaint, totaling 81 reasons, and they were grouped into nine categories and 24 themes (Chart 1). As for the categories, 30 (37.03%) refer to interprofessional relationships, 17 (20.99%) to negligence, nine (11.11%) to illegal practice of the profession, eight (9.88%) to aggression and mistreatment, six (7.40%) to code of ethics, five (6.17%) to iatrogenics, three (3.70%) to crimes, two (2.47%) to responsibility of the nurse, and one (1.23%) to attendance and punctuality.

Chart 1 – Reasons and categories of the complaints. Maceió, AL, Brazil, 2021

Categories	Reason of the complaint	Frequency	Total
Iatrogenics	1 – Related to negligence, imprudence and malpractice	4	5
	2 – Medication related to negligence, imprudence and malpractice	1	
Illegal exercise of the profession	3 – Illegal practice of Medicine	7	9
	4 – Illegal exercise of the Nursing profession	1	
	5 – Illegal exercise of the profession of nursing technician or assistant	1	
Interprofessional relationships	6 – Moral harassment	10	30
	7 – Abuse of power	5	
	8 – Verbal aggression	7	
	9 – Physical aggression	2	
	10 – Insubordination	3	
	11 – Persecution	2	
	12 – Prejudice	1	
Code of ethics	13 – Not complying with the council's deadlines	2	6
	14 – Disrespecting the council	3	
	15 – Disclosing confidential information	1	
Negligence	16 – Negligence	17	17
Aggression and mistreatment	17 – Verbal aggression	1	8
	18 – Physical aggression	1	
	19 – Mistreatment	6	
Responsibility of the nurse	20 – Responsibility of the nurse	2	2
Attendance and punctuality	21 – Absence of attendance and punctuality	1	1
Crimes	22 – Theft of medications and materials	1	3
	23 – Falsification in medical records	1	
	24 – Document falsification	1	

Source: The authors (2021).

In accordance with Table 2, of the cases filed at COREN/AL, 41 (60.29%) had the outcome of acquittal, characterizing most of the cases, and 21 (30.88%) of them were penalized. In these, 25 (19.53%) accused were found guilty, and received 45 penalties, as there is more than one penalty and more than one person involved in some cases, with verbal warning standing out, applied 19 (42.22%) times.

Table 2 – Outcomes and penalties applied to the processes. Maceió, AL, Brazil, 2021

Variable	Frequency	%
Outcomes		
Tried and acquitted	41	60,29
Tried and penalized	21	30,88
Conciliation	3	4,41
Filed due to prescription time (five years)	3	4,41
TOTAL	68	100
Penalties applied		
Verbal warning	19	42,22
Fine	15	33,33
Censorship	11	24,45
Suspension of the professional practice	0	0
Cassation of the professional practice	0	0
TOTAL	45	100

Source: The authors (2021).

The infringements were divided into chapters according to the COFEN resolutions and, in total, 39 articles were infringed. Regarding Resolution No. 311/2007(10), it was observed that 66 (77.65%) of the infringements refer to responsibilities and duties (articles 5, 6, 7, 12, 13, 17, 20, 21, 25, 40, 41, 48, 49, 51, 53, 72, 105, 106, 107, 108 and 109), 17 (20%) to prohibitions (articles 8, 9, 30, 31, 32, 33, 34, 56, 57, 58 and 78), and that two (2.35%) are about rights (articles 1 and 46); while in Resolution No. 564/2017(4) there were only three (37.50%) infringements related to the responsibilities and duties (articles 25 and 26) and five (62.50%) related to the prohibitions (articles 61, 71 and 83).

Regarding the variation in processing time, six (8.82%) cases had a time of less than one year, 43 (63.23%) of one year to less than five years, and 19 (27.95%) of five to 10 years. The mean time for analysis and completion of the protocols was 37 months, the minimum time was three months and the maximum time was 90 months, with a standard deviation and mode of 24 and a median of 26. Regarding the variation in the completion time for filing the cases, 42 (61.76%) had a duration of less than one month, 24 (35.30%) from one month to less than one year and two (2.94%) from one to five years.

With regard to the complainants, it is observed that, in terms of their nature, 44 (64.70%) were individuals and 24 (35.30%) were legal entities; their types were categorized into 19 (27.94%) COREN/AL, 17 (25%) victims, 12 (17.64) relatives of the victim, nine (13.23%) Nursing professionals, five (7.35%) other bodies, three (4.41%) other types of professionals, two (2.94%) relatives of the accused, and one (1.47%) unknown.

The time between the occurrence and the complaint being filed with the council was less than 30 days in 25 (36.76%) protocols, from one to six months in 21 (30.89%), from seven to 30 months in eight (11.76%), one day in three (4.41%), more than 30 months in three (4.41%) and unknown in eight (11.76%). As for the location, 49 (72.05%) occurred in the capital of Alagoas, 17 (25%) in the inland, and two (2.95%) were unknown. Regarding the category of the institutions where the occurrence took place, 48 (70.59%) were in public units, 13 (19.11%) in the private network, five (7.35%) in philanthropic institutions, and two (2.95%) in other institutions.

DISCUSSION

In this study, 68 ethical processes from 2009 to 2020 were analyzed, with those initiated from 2009 to 2017 governed by Resolution No. 311/2007; the EDPs which were in progress after 2017 continued to be analyzed according to the aforementioned Resolution, to avoid nullity of the EDP and, since April 2018, the cases were judged by the provisions set forth in Resolution No. 564/2017^(4,10).

The new CEPE incorporates clearer and more objective language, organized into five chapters that address rights, duties, prohibitions, infringements, penalties and their applications, seeking to confer more security to the professional practice. However, Resolution No. 564/2017 revoked Resolution No. 311/2007; therefore, since April 5th, 2018, all cases were judged in accordance with the current resolution and following the instructional stages set forth in Resolution No. 370/2010^(4,8,10).

Among the professional categories reported, that of nurses predominates, even though this category represents only 8,428 (27.5%) of the professionals registered at COREN/AL. However, it is noteworthy that nurses have greater professional responsibility, measured by Law No. 7,498/86, covering activities such as assistance, management and planning, plus responsibility for the Nursing team, which can be related to the result found. Some studies identified in the literature differ from the data found in this study, by stating that technicians and assistants are mostly involved in the complaints^(9,13-18).

The predominant gender of the accused was female; this is related to the information provided by the COFEN, that Nursing is performed in large numbers by women, which can be related to the historical factor of the evolution of Nursing. The profession was mainly developed by women who fought against the prejudices and stereotypes established in society about health care. This cultural construction about care, reflected until nowadays, was attributed only to women and was passed on in a hereditarily educational manner^(16,18-22).

Based on the results, the age group evidenced is from 20 to 40 years old, that is, young adults, which characterizes a reverted Nursing workforce. On the other hand, this means a newly formed class with little experience, reasserting the importance of the quality of the training courses, being fundamental to carry out training sessions and qualifications to consolidate knowledge and, thus, increase the quality of the assistance provided^(16,18,23).

Regarding the marital status of the accused, single people predominated, being accompanied by married people; however, a study expected the opposite, based on the assumption that married people had more responsibilities and extra professional tasks, allowing for errors at work⁽²¹⁾. However, considering the post-modern factors related to globalization, the insertion of women in the labor market, cultural changes, growth in the economic market and increased professional competitiveness, they follow a late family construction, justifying the result found⁽²³⁾.

With regard to the training profile of the accused, duration of the course was from one to 10 years and COREN registration was from two to 12 years, that is, professionals who are still beginners in Nursing. These findings corroborate the importance of in-depth preparation in the training of these professionals, combining technical and theoretical practices, as well as the implementation of updating and training policies, including the area of Bioethics, which precedes the legislation competent to Nursing. It is important to note that, in the case of recent graduates, it is assumed that their knowledge is more recent and, when hired, they are supervised and monitored by another professional with more experience^(21,23).

Criminal records are assessed at trial and, according to the results, only one (0.79%) professional presented a bad record. This condition influences imposition of the penalty, provided for in article 113 of Resolution No. 564/2017, which highlights nine aggravating

circumstances, one of which is criminal records. On the other hand, article 112 of the aforementioned resolution provides for six mitigating circumstances, which are also considered in judgment of the sentence⁽⁴⁾.

Interprofessional relationships and negligence stand out in the light of the categories and reasons for the complaints. While the first are associated with disagreements between the Nursing team members, disfavoring and affecting the dynamic relationships of these professionals and, in most cases, is related to bullying, the second is characterized by behaviors that cause harms to the patient, thus defined as a professional failure involved in the assistance provided^(15,17-18,23).

Regarding the outcomes and penalties of the EDPs, the preeminent penalty was verbal warning, which is when the offenders receive a call, confidentially, recorded in their professional record, with the presence of two witnesses; in turn, the most recurrent outcome was filing and acquittal, as it refers to the absence of evidence or of hints suggestive of ethical and disciplinary infringement provided for in the CEPE^(4,9,15,18-19,21-23).

The articles infringed in Resolution No. 311/2007, related to prohibition, refer to promoting or colluding with offense and defamation, practicing or colluding with crime, administering medication without knowing the drug, prescribing medication, providing a service that is responsibility of another professional, provoking or cooperating with any form of violence, performing actions contrary to the CEPE, accepting a vacant position due to dismissal, carrying out actions that harm property, and abusing the power that has been conferred⁽¹⁰⁾.

In turn, the processes governed by Resolution No. 564/2017, referring to the infringed articles related to the prohibitions, concern the performance of actions contrary to the code of ethics, promoting offense and defamation and practicing moral harassment⁽⁴⁾. Once again, the importance of the class knowing the legislation that governs its profession is highlighted, as this relationship is strictly linked to the quality of the services provided, as well as to the legal support of the professional⁽⁹⁾.

As for the type of complainants, COREN/AL stands out, through inspections, which seek to ensure the practice of safe and harm-free Nursing. Victims and family members come in second and third place, differing from the research data found, which show these complainants with less notoriety, justified by the lack of information about their rights, as well as the difficulty accessing the complaint channels^(9,15,18,21).

The capital of Alagoas stands out in terms of the complaints' location, when compared to inland cities, as it has several service networks; therefore, it has a greater number of professionals working in the area. Another evident data refers to the public and private units with the highest number of complaints; however, the public network stands out even more, corroborating the discrepancy in the assistance provided and in terms of the training of the professionals^(17-18,21,23).

Among the study limitations, there are the variables of the sociodemographic profile and training of the accused (age group, social class, marital status, race/skin color, training time, registration time at COREN/AL, and criminal records and aggravating circumstances), whose existing numbers, for the most part, were unknown or blank, restricting the deepening of these topics in the discussion. In addition to that, the lack of recent studies dealing with ethical processes faced by Nursing professionals was also a limitation.

CONCLUSION

Development of this study made it possible to identify the categories and reasons for the infringements related to the opening of disciplinary ethical processes in COREN/AL, in

which the main infringements that lead Nursing professionals to suffer disciplinary ethical processes are based on interprofessional relationships and negligence. Therefore, most of these infringements can be prevented, as they arise from abuse of power and negligence. Consequently, it is necessary to emphasize the issues related to the infringements by the service, commissions or permanent education centers, especially those pertaining to Nursing, to strengthen communication between the professionals in order to minimize possible ethical occurrences and harms to the patients.

This research produces current knowledge to provide opportunities for the CORENs to act incisively on this issue, and contributes to giving visibility to the ethical processes faced by Nursing professionals, showing the main reasons, causes and outcomes and, with this, providing subsidies to improvements in the services and in the ethical behaviors.

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