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How to cite this article • Copyright©

Lima LS, Santos BLC, Padovan T, Cintra TCB, Bevilaqua WJ, Monteiro CMC, Esteves RB. Beyond the Standard: Contribution to the Initial Implementation of Regulatory Standard 1 and the Strengthening of Psychological Safety in Nursing. Rev. Tec. Cient. CEJAM. 2026;5:e202650050. DOI: <https://doi.org/10.59229/2764-9806.RTCC.e202650050>.

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Submitted

08-31-2025

Accepted

10-20-2025

Experience Report

Beyond the Standard: Contribution to the Initial Implementation of Regulatory Standard 1 and the Strengthening of Psychological Safety in Nursing

Além da Norma: Contribuição para a Implementação Inicial da Norma Regulamentadora 1 e o Fortalecimento da Segurança Psicológica na Enfermagem

Más Allá de la Norma: Contribución a la Implementación Inicial de la Norma Reguladora 1 y al Fortalecimiento de la Seguridad Psicológica en Enfermería

Abstract

Objective: To describe the innovation strategy applied as a contribution to the initial implementation of the psychosocial risk guidelines of Regulatory Standard 1 (RS-1) in a psychiatric hospital, using Nursing Week as a catalyst for building psychological safety and organizational justice. **Method:** An experience report, guided by the SQUIRE 2.0 directive, on the "Caring for the Caregiver" initiative. The experience involved offering voluntary activities (therapeutic group, auriculotherapy, yoga) and a qualitative analysis of the team's receptiveness (N=86) through participant observation and spontaneous feedback. **Results:** The initiative achieved high adherence (105 participations), with auriculotherapy (29.1%) and the therapeutic group (17.4%) being the highlights. The latter was consolidated as a safe space for sharing work-related stressors (overload, violence), perceived as an act of organizational care. **Conclusion:** The strategy proved to be a humanized and effective way to begin compliance with RS-1. By turning a regulatory requirement into an opportunity to strengthen psychological safety, the experience represents an innovation model with a direct impact on the quality of care.

Descriptors: Occupational Health; Occupational Risks; Risk Management; Psychiatric Nursing.

Resumo

Objetivo: Descrever a estratégia de inovação aplicada como contribuição para a implementação inicial das diretrizes de riscos psicossociais da Norma Regulamentadora 1 (NR-1) em um hospital psiquiátrico, utilizando a Semana da Enfermagem como um catalisador para a construção da segurança psicológica e da justiça organizacional. **Método:** Relato de experiência, orientado pela diretriz SQUIRE 2.0, sobre a iniciativa "Cuidando de quem cuida". A experiência envolveu a oferta de atividades voluntárias (grupo terapêutico, auriculoterapia, yoga) e a análise qualitativa da receptividade da equipe (N=86) por meio de observação participante e feedback espontâneo. **Resultados:** A iniciativa obteve alta adesão (105 participações), com destaque para a auriculoterapia (29,1%) e o grupo terapêutico (17,4%). Este último consolidou-se como um espaço seguro para a partilha de estressores laborais (sobrecarga, violência), sendo percebido como um gesto de cuidado organizacional. **Conclusão:** A estratégia demonstrou ser uma via humanizada e eficaz para iniciar a adequação à NR-1. Ao transformar uma exigência normativa em uma oportunidade para fortalecer a segurança psicológica, a experiência representa um modelo de inovação com impacto direto na qualidade do cuidado.

Descritores: Saúde Ocupacional; Risco Ocupacional; Gestão de Riscos; Enfermagem Psiquiátrica.

Resumen

Objetivos: Describir la estrategia de innovación aplicada como contribución a la implementación inicial de las directrices sobre riesgos psicosociales de la Norma Reguladora 1 (NR-1) en un hospital psiquiátrico, utilizando la Semana de la Enfermería como catalizador para la construcción de la seguridad psicológica y la justicia organizacional. **Método:** Relato de experiencia, orientado por la directriz SQUIRE 2.0, sobre la iniciativa "Cuidando de quienes cuidan". La experiencia consistió en la oferta de actividades voluntarias (grupo terapéutico, auriculoterapia, yoga) y el análisis cualitativo de la receptividad del equipo (N=86) mediante la observación participante y el feedback espontáneo. **Resultados:** La iniciativa obtuvo una alta participación (105 participaciones), destacando la auriculoterapia (29,1 %) y el grupo terapéutico (17,4 %). Este último se consolidó como un espacio seguro para compartir los factores estresantes del trabajo (sobrecarga, violencia), y se percibió como un gesto de cuidado organizacional. **Conclusión:** La estrategia demostró ser una vía humanizada y eficaz para iniciar la adaptación a la NR-1. Al transformar un requisito normativo en una oportunidad para fortalecer la seguridad psicológica, la experiencia representa un modelo de innovación con impacto directo en la calidad de la atención.

Descritores: Salud Laboral; Riesgos Laborales; Gestión de Riesgos; Enfermería Psiquiátrica.

INTRODUCTION

The premise that the well-being of healthcare professionals is an integral part of patient safety and quality of care is well established in the scientific literature. Far from being a "soft" or secondary issue, the mental health of caregivers emerges as a fundamental pillar for the resilience of health systems⁽¹⁾. Robust evidence, consolidated in systematic reviews and meta-analyses, demonstrates a direct and unequivocal correlation: burnout in nursing teams is associated with worse safety indicators, including higher rates of medication errors, patient falls, nosocomial infections, and, consequently, lower patient satisfaction with the care received⁽²⁻⁴⁾. Caring for caregivers, therefore, is not an isolated humanitarian goal, but a central strategy for clinical excellence.

This axiom takes on particular urgency in the context of psychiatric nursing. In this field, professionals are immersed in an environment of emotional complexity and inherent psychosocial risks, creating a true paradox of care. Those who dedicate their lives to treating the psychological suffering of the population are themselves exposed to a unique constellation of stressors, such as chronic work overload, shortage of human resources, and, notably, the constant threat of physical and verbal violence⁽⁵⁾. This scenario of heightened vulnerability increases the likelihood of developing burnout, compassion fatigue, and post-traumatic stress, compromising not only the health of the worker but also their ability to establish effective therapeutic relationships.

In response to this situation, Brazilian legislation has moved forward with the update of Regulatory Standard No. 1 (RS-1), see Ordinance of the Ministry of Labor and Employment (MLE) No. 1,419/2024⁽⁶⁾, which now requires organizations to explicitly include psychosocial risk factors in Occupational Risk Management (ORM). This requirement has been extended to 2026, according to MLE Ordinance No. 765/2025⁽⁷⁾. Such risks are defined as aspects of work design, organization, and management that have the potential to cause psychological or physical harm⁽⁸⁾. Although it represents a regulatory milestone, RS-1 poses a formidable implementation challenge. The guideline establishes "what" should be done, but leaves a gap on "how" to do it effectively and humanely, especially in highly complex environments such as psychiatric hospitals.

The objective of this study is to describe the innovation strategy applied as a contribution to the initial implementation of the RS-1 guidelines on psychosocial factors in a psychiatric hospital, using Nursing Week as a catalyst for building a culture of psychological safety, and to discuss the potential of this approach as a replicable model for transforming caregiver care.

METHOD

Type of Study

This is a descriptive and qualitative report on an experience of applied innovation. To ensure methodological rigor and transparency in the report, this manuscript was written in accordance with the international guideline Standards for *Quality Improvement Reporting Excellence* (SQUIRE 2.0 - Brazilian Portuguese version)⁽⁹⁾. The use of this guideline is part of *the Equator Network's* recommendations for the adequacy of studies and improvement of the quality of experience report publications.

Setting and Period of the Experience

The experience was developed in a large public psychiatric hospital, partially managed by the Centro de Estudos e Pesquisas "Dr. João Amorim" (CEJAM), located in a medium-sized municipality in the interior of the state of São Paulo. The institution is a reference in the care of patients from the Unified Health System (UHS) with various psychopathologies. The strategic intervention was planned and executed during Nursing Week, which took place from May 12 to 23, 2025.

Subjects Involved in the Experience and Ethical Aspects

The population eligible for participation, which was voluntary, consisted of 86 professionals from the institution. This contingent was composed of 70 members of the nursing team (17 nurses and 53 nursing technicians) and 16 professionals from the multidisciplinary team (including psychologists, occupational therapists, and social workers).

The conduct of the experiment and the subsequent preparation of this report were guided by strict ethical precepts. The total anonymity of the participants and the confidentiality of the institution were ensured, in line with the guidelines of Resolutions No. 466/2012 and No. 510/2016 of the National Health Council⁽¹⁰⁻¹¹⁾. Furthermore, as this is a report of a successful experience that emerged from everyday professional practice and follows all recommendations for research ethics, it was not necessary to submit it to the human research ethics committee.

Description of the Experience

The central intervention was Nursing Week, reframed under the theme "Caring for those who care." The event transcended the traditional celebration to function as a vector for cultural change. A diverse program of voluntary activities was offered, including: Therapeutic Group, Auriculotherapy, *Quick Massage*, Self-Defense, Yoga, Relaxation Practice, Beauty Day, and Care Workshop.

Data Analysis

Observations about the experience were collected qualitatively through participant observation by members of the organizing committee and recording of spontaneous verbal feedback from participants. Thematic analysis of these records was used to assess engagement and identify emerging themes. To mitigate observation bias, measures of qualitative rigor were adopted, such as Data Triangulation (involving observation, spontaneous feedback, and adherence data) and Traceability (SQUIRE 2.0 guideline). Given the descriptive and qualitative nature of the experience report design, the main outcomes analyzed were adherence and perceived psychosocial impact, without the application of formal inferential statistical analyses.

RESULTS

The Nursing Week "Caring for those who care" was received with remarkable engagement by the team, validating the premise that there was a latent demand for care actions directed at professionals. Overall participation was significant, totaling 105 participants throughout the event. Given that employees could sign up for more than one activity, this number, which exceeds the total of 86 eligible employees, reflects a high degree of interest and involvement. Table 1 details the distribution of these participations, allowing for an analysis of the reach of each specific intervention.

Table 1 - Participation in Nursing Week Activities in Absolute and Relative Numbers among Eligible Teams (n=86), Psychiatric Hospital, Ribeirão Preto (SP), Brazil, 2025.

ACTIVITY	n	(%)
Therapeutic Group	15	17.4
Auriculotherapy	25	29.1
Quick Massage	12	14.0
Self-Defense	11	12.8
Yoga	10	11.6
Relaxation practices	10	11.6
Beauty Day	9	10.5
Care Workshop	13	15.1

Source: Prepared by the authors (2025).

Note: The column 'n' represents the number of participants in each activity. The percentage (%) was calculated based on a total of 86 eligible employees.

The qualitative analysis of receptivity, summarized in Table 1, revealed that, beyond the numbers, the initiative had a profound impact on the team's perception. The high demand for auriculotherapy (29.1%) and *Quick Massage* (14.0%) points to the need for interventions that offer immediate symptomatic relief for physical and mental stress. The interest in the Self-Defense class (12.8%) reflects a real concern for physical safety. However, it was the Therapeutic Group (17.4%) that emerged as the most powerful device from a psychosocial point of view, consolidating itself as a safe space for sharing critical stressors such as work overload and fear of violence.

Table 1 - Applied Innovation Matrix: Alignment between Interventions, Risks (RS-1), Psychiatric Hospital, Ribeirão Preto (SP), Brazil, 2025.

Activity	Psychosocial Risk (RS-1) Addressed	Psychological Impact Mechanism	Organizational Impact Mechanism
Therapeutic Group	Lack of support at work; Poor working relationships; Violence.	Promotion of psychological safety; Validation of experiences; Development of collective coping.	Strengthening interpersonal and procedural justice; Creation of an active listening channel.
Auriculotherapy	Excessive demands (overload); Acute stress.	Symptomatic relief of stress and anxiety; Improvement of immediate well-being.	Signaling Organizational Care; Investment in physical and mental well-being.
Personal Defense	Violent or traumatic events.	Increased self-efficacy and self-confidence; Reduced perception of vulnerability.	Recognition of specific risks in the environment; Empowerment of the team.
Yoga Relaxation	Excessive demands; Low control over work.	Development of self-regulation skills; Reduction in reactivity to stress.	Promotion of self-care tools; Investment in individual resilience.
Care Workshop	Poor relationships at work; Lack of support.	Strengthening interpersonal bonds; Promoting team cohesion.	Improvement of organizational climate; Strengthening of horizontal trust.

Source: Prepared by the authors (2025).

DISCUSSION

The analysis of the results goes beyond simply counting participation and reveals the strategic sophistication of the initiative. The experience represents a model of innovation applied by intelligently articulating tactical actions with profound cultural transformation mechanisms.

Critical literature on occupational health warns against the trend of resilience washing: the practice of focusing exclusively on interventions that aim to increase individual resilience, placing the burden on workers to deal with problems that are, in fact, systemic and organizational⁽¹²⁾.

The strategy described here differs fundamentally from this trap. Although it offered tools for developing individual skills (yoga, relaxation), the central pillar of the intervention was the creation of an intrinsically systemic device: the Therapeutic Group.

This space was not intended to teach individuals to "cope" better with stress, but rather to create an organizational structure in which stressors could be shared, validated, and understood collectively.

In doing so, the initiative signaled a shift in focus: from recognizing individual responsibility to recognizing organizational responsibility for creating a work environment that is itself healthier and psychologically sustainable.

The real innovation, therefore, was not in the isolated activities, but in the combination of individual-focused interventions with a systemic-focused intervention.

The success and depth of the discussions in the Therapeutic Group can be understood through the concept of psychological safety, the shared belief that the environment is safe for interpersonal risk-taking⁽¹³⁾. The Therapeutic Group functioned, in practice, as a laboratory for building this organizational asset.

By creating a confidential and non-judgmental space, management offered an opportunity for employees to test the hypothesis that they could be vulnerable. This practical exercise in vulnerability and acceptance is the fundamental mechanism by which psychological safety is built, and is an essential precondition for a robust patient safety culture⁽³⁾.

The high receptivity to the initiative can also be explained by the perception of fairness. Organizational Justice theory posits that employees' perceptions of fairness in the workplace profoundly influence their attitudes and trust⁽¹⁴⁾.

The "Caring for Caregivers" initiative activated multiple dimensions of this justice: distributive (by investing in well-being), procedural (by creating a transparent process and a listening channel), and interpersonal (by treating people with dignity and respect). These acts of organizational justice serve as a gesture of reparation of the psychological contract, the set of unwritten expectations between employee and employer⁽¹⁵⁾, strengthening trust in leadership and engagement with the institution.

Limitations of the Experience

This study is an initial experience report focused on a single institution, so the results have low generalizability.

The absence of a quantitative pre- and post-intervention assessment with validated scales prevents objective measurement of the impact of the actions and is considered a crucial limitation for generalization. The incorporation of instruments is a recommendation for future iterations of the project.

Contributions of the Experience

This experience offers a practical and replicable model of how to align a regulatory requirement with an opportunity for cultural strengthening in healthcare environments.

In practical and institutional terms, the initiative demonstrated its sustainability by being incorporated into the hospital's annual planning, aligning with the requirements of RS-1 and the unit's Risk Management Program.

This concrete action serves as a model for other healthcare institutions to adopt similar approaches that combine individual well-being with systemic listening interventions.

To ensure a complete cycle of innovation and evaluation, the results will be disseminated through submission to scientific journals and presentation at scientific events.

CONCLUSION

The experience of the Nursing Week "Caring for those who care" proved to be a humanized strategy, relatively low cost, and highly effective as a contribution to the initial implementation of the psychosocial guidelines of RS-1 in a psychiatric hospital environment.

The innovation applied does not lie in isolated activities, but in the integrated strategy that transformed a commemorative date into a vector for cultural change, transforming a normative obligation into a genuine opportunity for care.

The lessons learned from this experience point to the importance of valuing the active participation and listening to workers. The high receptivity to the therapeutic group, in particular, signals a pent-up demand for spaces of welcome and validation. This reinforces the thesis that investing in the well-being of the team is not a cost, but a direct investment in the quality and safety of patient care.

Based on this, we recommend the continuity and institutionalization of the actions initiated. This includes transforming the therapeutic group into a permanent program, training leaders to identify and manage psychosocial risks, and, as the next step in the continuous improvement cycle, conducting a Preliminary Ergonomic Assessment of psychosocial risks, as recommended by RS-1.

It is also recommended to adopt validated scales for measuring well-being and psychological safety, allowing for a more robust cycle of assessment and intervention.

Valuing healthcare professionals is not only a desirable goal, but an essential pillar for excellence in care and the sustainability of the healthcare system.

AUTHORS' CONTRIBUTION

Transparency in authors' contributions according to the [CRediT Taxonomy](#).

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STATEMENTS

Conflicts of interest	Not applicable
Funding	Not applicable
Ethical approval	Not applicable
Acknowledgments	Not applicable
Preprint	Not applicable
Artificial Intelligence	During the preparation of this manuscript, artificial intelligence tools were used as verification assistants. Specifically, the Article Verification Assistant (CEJAM/ChatGPT) and Gemini (Google) were used to support the checking of the formatting of bibliographic references in Vancouver style. All suggested content was submitted to human curation, with manual verification and correction performed by the authors based on the journal's guidelines and primary sources. Document similarity verification was conducted using CopySpider software.

TRANSLATION

The translation of this article was assisted by [DeepL Translator](#) artificial intelligence from the original version written in Portuguese (Brazil). The translated version was submitted to the editorial team for curation, consisting of a limited scope editorial review. Translations assisted by artificial intelligence may vary from the native language.

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