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Permanent education: instrument for health management in the Unified Health System (SUS)

Educación permanente: instrumento para la gestión de la salud en el Sistema Único de Salud (SUS)

Educação permanente: instrumento para gestão em saúde no Sistema Único de Saúde (SUS)

ABSTRACT

Objective: to discuss the role of Continuing Education in Health as a tool for health management within the Unified Health System. Method: this is a literature review study, using the Scientific Electronic Library Online as a data source (SciELO), among the inclusion criteria: scientific articles in full text, in Portuguese, English and Spanish, published in the period between 2010-2020. However, scientific articles that escaped the proposed theme were excluded, thus 13 articles were included in the study. Results: Continuing education is capable of providing collective agreements, strategic actions in health, protagonism, transformation of care, management and social control practices and the production of public policies based on SUS principles and guidelines. Conclusion: conceptual changes in the scope of health education are still a challenge for both managers and professionals, therefore, it is necessary to know and encourage the implementation of continuing education in health, especially within the scope of the Unified Health System.

DESCRIPTORS: Continuing education; Health management; Health Unic System.

RESUMEN

Objetivo: discutir el rol de la Educación Continuada en Salud como herramienta para la gestión de la salud dentro del Sistema Único de Salud. Método: se trata de un estudio de revisión de la literatura, utilizando como fuente de datos la Scientific Electronic Library Online (SciELO), entre los criterios de inclusión : artículos científicos en texto completo, en portugués, inglés y español, publicados en el período 2010-2020. Sin embargo, se excluyeron los artículos científicos que escapaban a la temática propuesta, por lo que se incluyeron 13 artículos en el estudio. Resultados: La educación continua es capaz de brindar convenios colectivos, acciones estratégicas en salud, protagonismo, transformación del cuidado, prácticas de gestión y control social y la producción de políticas públicas basadas en los principios y lineamientos del SUS. Conclusión: los cambios conceptuales en el ámbito de la educación en salud siguen siendo un desafío tanto para los gestores como para los profesionales, por lo que es necesario conocer y fomentar la implementación de la educación continua en salud, especialmente en el ámbito del Sistema Único de Salud.

DESCRIPTORES: Educación continua; Manejo de la salud; Sistema Único de Salud.

RESUMO

Objetivo: discutir sobre o papel da Educação Permanente em Saúde como instrumento para a gestão em saúde no âmbito do Sistema Único de Saúde. Método: trata-se de um estudo de revisão de literatura, tendo como fonte de dados a Scientific Electronic Library Online (SciELO), dentre os critérios de inclusão: artigos científicos em texto completo, com idioma português, inglês e espanhol, publicados no período entre 2010-2020. Entretanto, foram excluídos os artigos científicos que fugiram ao tema proposto, dessa forma foram incluídos ao estudo 13 artigos. Resultados: A educação permanente é capaz de proporcionar acordos coletivos, ações estratégicas em saúde, protagonismo, transformação das práticas de atenção, de gestão e de controle social e produção de políticas públicas fundamentadas nos princípios e nas diretrizes do SUS. Conclusão: as mudanças conceituais no âmbito da educação em saúde configuram-se ainda como um desafio, tanto para gestores e profissionais, portanto, se faz necessário conhecer e incentivar a implementação da educação permanente na saúde, principalmente no âmbito do Sistema Único de Saúde.

DESCRIPTORES: Educação permanente; Gestão em saúde; Sistema Único de Saúde.

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INTRODUCTION

The National Policy for Continuing Health Education (PNEPS - Política Nacional de Educação Permanente em Saúde) was implemented by Brazil in February 2004, through Ordinance GM No. 198/2004, presenting itself as a strategy of the Unified Health System (SUS - Sistema Único de Saúde) that aims at training and development of health workers, proposes in its framework changes in health education activities, where health workers can bring contributions and acquire the ability to recognize themselves as active participants in the training process, while creating new ways of produce health and management in health institutions. Since the entry of Permanent Education in Health (EPS Educação Permanente em Saúde) to the SUS agenda as a public policy, significant changes have been observed in the specific norms that regulate its insertion in the field.¹

EPS is considered a management tool, as it enables the reorganization of the management of health services and systems through problematization, a process guided by the tensions arising from the diversity of interests of management, workers and the population.²

It is understood that the field of EPS is a process of continuous construction crossed by different logics, which de-

pends on the subjects that are on the scene in the political context, in addition to the ideological and epistemological influences that move these subjects. In this way, the conceptions about EPS are reflected in the normative texts and in the policy operationalization strategies, which demarcate, textually, the discursive expressions that make up the narratives of each period.¹

One of the aspects that has drawn attention in the context of health management, in which the views of managers are particularly concerned with the qualification of human resources, being considered one of the central points of the process of change in management and healthcare in the country. The scarcity of qualified staff to exercise the management of systems and services, in addition to the precariousness of work relationships, added to the inadequacy of profiles and the lack of commitment of most professionals and health workers to the SUS, constitute, today, one of the great challenges to its consolidation.³

Therefore, this work aims to discuss the role of Permanent Education in Health as an instrument for health management within the Unified Health System.

METHODS

This is a literature review study that

sought to collect articles on the interrelationship of continuing education and health management, using the Scientific Electronic Library Online (SciELO) as data source.

According to the Health Sciences Descriptors (DeCS), the following descriptors were selected: "Educação permanente (Permanent Education)", "Gestão em Saúde (Health Management)", "Sistema Único de Saúde (Unified Health System)" in the Portuguese language. The inclusion criteria were: scientific articles, available in full text online, published in Portuguese, English and Spanish, in the temporal scope of the last ten years (2010-2020). As exclusion criteria, scientific articles that escaped the theme of the proposed research were excluded. For the selection of articles and their subsequent inclusion in the results, there was an initial reading of the titles and abstracts. Then, the selected articles were submitted to a more careful evaluation by reading the text in its entirety, being included in the results only those that responded to the theme of the proposed investigation.

Initially 2,736 publications were surveyed. With the descriptor "Educação permanente", 1,221 publications were found, applying the following filters: period 2010 to 2020; article; Brazil; Portuguese, English and Spanish resulting in 618 articles. With the descriptor

"Gestão em Saúde" we obtained 4.394 publications, after applying the filters resulted in 1.869 articles in the database. By combining the descriptors "Educação permanente" AND "Gestão em Saúde", 237 publications were obtained, after applying filters, 186 publications were obtained.

After the searches, according to the previously established inclusion and exclusion criteria and, after analyzing the titles and abstracts, 13 selected studies were obtained for their full reading, included in the results, according to Table 01, presented in the results.

RESULTS

Characteristics of the selected studies. The studies selected for this review were numbered and had their titles, authors, year of publication and objectives tabulated for better understanding of each one (Chart 01).

Chart 01- List of articles selected for the composition of the final article. Brazil, 2020.

STUDY NO.	AUTHORS AND YEAR OF PUBLICATION	TITLE	OBJECTIVE
01	Leite; Pinto; Fagundes, 2020	Permanent health education: reproduction or counter-hegemony?	Reflect on the conceptual bases of permanent health education in the light of the concepts of reproduction, by Bourdieu, and counter-hegemony, by Gramsci
02	Silva et al., 2019	Analysis of discourses related to permanent health education in Brazil from 1970 to 2005.	To analyze the process of construction of Permanent Education in Health, identifying its transformations, continuities and ruptures in the socio-historical context from the 1970s to 2005
03	Carvalho; Merhy; Sousa, 2019	Rethinking Health Policies: in Brazil Permanent Education in Health focused on encounter and knowledge of experience	Discuss training in Continuing Health Education (EPS), called "EPS in Motion"
04	Gonçalves et al., 2019	The resumption of the implementation process of the National Policy on Permanent Health Education in Brazil.	Describe and analyze the most recent initiatives carried out, within the scope of the federal administration, for the implementation and strengthening of the National Policy on Permanent Education in Health (PNEPS).
05	Cavalcanti, Guizardi, 2018	Continuing or permanent health education? Analysis of Pan American Health Production	Review the discussions held by the Pan American Health Organization, between 1974 and 2002, in relation to health education practices, in order to understand the lines of force, intentions and power games involved in this debate.
06	Bedin et al., 2014	Reflections on health management in a municipality in southern Brazil	Deepen knowledge about management concepts in public health and reflect on practices in the area, based on the experience of Sapucaia do Sul (RS).
07	Cavalcanti; Padilha, 2014	Qualification of management and care processes in the city of Caaporã, PB: reports of permanent education in health tutoring	Report the training in Permanent Health Education (EPS) of Family Health Teams (ESF) in the city of Caaporã - PB
08	Lima; Albuquerque; Wenceslau, 2014	Permanent health education according to management professionals in Recife, Pernambuco	Discuss what management professionals think about the processes of permanent health education in the city of Recife, Pernambuco
09	Mâcedo; Albuquerque; Medeiros, 2014	The challenge of implementing permanent education in the management of health education	Identify the main theoretical-conceptual conceptions regarding the management of health education in Brazil from 2003 to 2009
	Ellery; Bosi; Loiola, 2013	Integration of Teaching, Research and Health Services: background, strategies and initiatives	Identify and analyze national and international experiences that postulate the integration of teaching, research and health services.
10	Araújo, Pontes, 2012	Constitution of subjects in health management: advances and challenges in the experience of Fortaleza - CE	Analyze how a management moves or not towards favoring the expression of less submissive and resigned men and women, active and with greater degrees of autonomy

11	Stroschein; Zocche, 2012	Continuing education in health services: a study of experiences in Brazil	Analyze the six experiences of continuing education in health services in Brazil from the PNEPS
12	Mendonça; Nunes, 2011	Needs and difficulties of tutors and facilitators to implement the permanent health education policy in a large city in the state of Paraná, Brazil.	Investigate the needs and difficulties experienced by tutors and facilitators of continuing health education in the city of Londrina - PR
13	Pinho et al., 2010	Developments in permanent health education in the city of Vitória, Espírito Santo	Discuss the unfolding of the process of training facilitators and the work of implementing 'wheels' of Permanent Health Education (EPS) in health service units in the city of Vitória, Espírito Santo

DISCUSSION

Conceptions about continuing education in the context of health services in the Unified Health System

The edition of ordinance n. 198/04, which established the PNEPS, brings some innovations that represent ruptures in the way of conceiving the training of professionals to work in the SUS.⁴ Among these innovations, we have training perceived as a strategic policy of the federal government for the training and development of a set of health professionals, instead of just another specific program of the Ministry of Health.⁵

The EPS consists of a service management policy, in which the qualification of health work processes is based on the problematization of the scenario of practices, with the objectives of resoluteness, integrality and humanization of care.⁶

Continuing education provides, among the actors involved, collective agreements, strategic actions in health, protagonism, transformation of care, management and social control practices and production of policies rooted in the principles and guidelines of the SUS. Therefore, it is important that all professionals are engaged with the PNEP proposal.⁷

A study points out that EPS can be performed through numerous devices, as well as being performed at the research site by the researchers, where resources such as matrix support, institutional support, use of a singular therapeutic project and shared consultation were used during meetings with professionals for discussion of clinical cases.⁸

The research shows that permanent education is configured in two conceptual matrices. The first is characterized by the understanding that health education should promote educational moments, even if individual, in which workers could remedy the knowledge deficit. The second matrix considers health work arising from interprofessional relationships and with users, where it considers this the main device of educational processes.⁹

EPS, as a counter-hegemonic proposal, presents needs and difficulties for health workers who aspire to implement it in their daily lives. Thus, a series of needs are found, among which the following stand out: the support of the team, the creation of spaces for discussion, the valuation of the professional and, above all, the support of the management in the process of implementing the EPS.¹⁰

Interrelation between management and continuing education in health

From the 1980s to the 1990s, the construction of the SUS represented a milestone in redefining the direction of health in the country. In this process, not only was the ideological conception of health a right of citizenship redefined, but important initiatives were also launched to support the idealization. From a concrete point of view, the training of health personnel took on a new meaning, and with it the EPS is reconfigured with new contours.¹

Considering the normative framework with ordinance n. 198/04, the training and development of professionals to work in the SUS began to be referenced in the

principles of EPS, which proposed that the training processes aimed at transforming professional practices and the organization of work itself.⁵

Assuming that public policies are the result of a set of actions produced in the territories, the issue of the materialization of these policies by workers in the encounter with users and management can be considered.¹¹

Finally, the importance of advancing studies that identify epistemological bases in health management as a path that can bring thinking and doing is shown, as this approach favors the identification of theories that can influence and justify decisions both in micro and macro-political levels.¹²

In view of this, it emphasizes that the confrontation of these difficulties identified in the context of EPS has generated the development of several proposals for solutions and arrangements for the management of health workers, particularly at the state and municipal levels, due to the decentralization process.³

Thus, it is necessary to deepen the interrelationship between subject and management, through the inclusion of the perspective of other actors in the health system or research on other experiences.¹³ Thus, this theme leads us to perceive a consensual point between the various authors consulted and also in government policies and programs and international and national organizations, the need for an improvement in the training of health professionals, in particular, as one of the determining elements to solve the crisis in the sector.¹⁴

CONCLUSION

Based on the considerations made, the importance of the dimensions of monitoring and evaluation in the process of implementing a health education policy is highlighted, as they enable the results to be reviewed and modified in the course of activities in order to adapt to local realities. However, it is worth noting that conceptual changes in the scope of health education are still a challenge, both for managers and professionals.

Based on this premise, we leave here the provocation and the invitation to deepen the reflections and development of new investigations that can respond to the concerns raised and the broad challenges of work and education in the context of health management, since it is necessary knowing, monitoring and evaluating the different health education actions within the Unified Health System, as it requires special atten-

However, it is worth noting that conceptual changes in the scope of health education are still a challenge, both for managers and professionals.

tion in relation to the implementation of its principles and foundations, such as the component of participation, social control and integrity, among others.¹⁵

COLLABORATORS

FSV: Writing of the article and relevant critical review of the intellectual content, analysis and interpretation of data and final approval of the version to be published. RSM: Article writing and relevant critical review of the intellectual content. GCS: Relevant critical review of intellectual content and final approval of the version to be published. DLMP: Relevant critical review of intellectual content and final approval of the version to be published. MLSSM: Relevant critical review of intellectual content and final approval of the version to be published. BOS: Relevant critical review of the intellectual content and final approval of the version to be published. ■

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