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Continuing education with community health agents: potentials of training guided by multiprofessional

Educação permanente com agentes comunitários de saúde: potencialidades de uma formação norteada por residentes multiprofissionais

Educación continua con agentes comunitarios de salud: potenciales de la formación orientada por residentes multiprofesionales

RESUMO

Objetivo: A educação permanente é uma medida político-pedagógica que visa favorecer o trabalhador por meio do processo ensino-aprendizagem dentro de sua rotina, capaz de contribuir para a melhoria dos serviços e condições de trabalho incorporando princípios de problematização e contextualização da realidade. O artigo objetiva relatar experiências vivenciadas nas práticas de educação permanente realizadas por Residentes Multiprofissionais em Saúde para Agentes Comunitários de Saúde, Realizaram-se capacitações com temas pertinentes à saúde coletiva. As ações aconteceram através da Secretaria Municipal de Saúde em parceria com a Residência Multiprofissional pela Escola de Saúde Pública do Ceará. Estas ações oportunizaram uma qualificação para os Agentes Comunitários de Saúde, para potencializar suas orientações à comunidade. Permitiu aos residentes a oportunidade e experiência de promover a saúde e prevenir agravos dentro de uma abordagem multidisciplinar, desenvolvendo habilidades e permitindo a construção de espaços que fomentem a promoção à saúde a partir das necessidades territoriais e profissionais.

DESCRITORES: Educação Permanente; Agente Comunitário de Saúde; Promoção da Saúde.

ABSTRACT

Objective: Continuing education is a political-pedagogical measure that aims to favor workers through the teaching-learning process within their routine, capable of contributing to the improvement of services and working conditions by incorporating principles of problematization and contextualization of reality. The article aims to report experiences in continuing education practices carried out by Multiprofessional Health Residents for Community Health Agents. Training was carried out with themes relevant to collective health. The actions took place through the Municipal Health Department in partnership with the Multiprofessional Residency by the School of Public Health of Ceará. These actions provided opportunities for qualification for Community Health Agents, to enhance their guidance to the community. It allowed residents the opportunity and experience to promote health and prevent injuries within a multidisciplinary approach, developing skills and allowing the construction of spaces that encourage health promotion based on territorial and professional needs.

DESCRIPTORS: Continuing Education; Community Health Agent; Health promotion.

RESUMEN

Objetivo: La educación permanente es una medida político-pedagógica que tiene como objetivo ayudar a los trabajadores a través del proceso de enseñanza-aprendizaje dentro de su rutina, capaz de contribuir a la mejora de los servicios y las condiciones de trabajo mediante la incorporación de principios de problematización y contextualización de la realidad. El objetivo de este artículo es relatar las experiencias de prácticas de educación continuada realizadas por Residentes Multiprofesionales de Salud para Agentes Comunitarios de Salud. La capacitación fue impartida en temas relevantes para la salud pública. Las acciones se realizaron a través de la Secretaría Municipal de Salud en asociación con el Programa de Residencia Multiprofesional de la Escuela de Salud Pública de Ceará. Estas acciones proporcionaron formación a los Agentes Comunitarios de Salud para mejorar su orientación a la comunidad. Brindó a los residentes la oportunidad y la experiencia de promover la salud y prevenir enfermedades dentro de un enfoque multidisciplinario, desarrollando habilidades y permitiendo la construcción de espacios que fomenten la promoción de la salud en función de las necesidades territoriales y profesionales.

DESCRIPTORES: Educación Continuada; Agentes Comunitarios de Salud; Promoción de la Salud.

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INTRODUCTION

he National Policy for Permanent Health Education (PNEPS - Política Nacional de Educação Permanente em Saúde) is defined as an important teaching-learning process for workers within their daily work routine, capable of establishing a critical reflection on professionals' work processes, aiming to establish a strategy to train and develop professionals who work in the Unified Health System (SUS), being fundamental for the implementation of quality and excellent health services, promoting advances in the area of health.(1)

Thus, the scope of the Family Health Strategy (FHS), in turn, continually seeks to develop skills, program creative solutions and accommodate diverse demands from the community and work team within the context of Primary Health Care (PHC), taking permanent education actions as an example, which allows different perspectives, expanding the possibilities for innovation in care practices, increasing the potential for resolution. (2,3)

In the municipality studied, there is

a Multidisciplinary Residency in Family Health (RMSF - Residência Multiprofissional em Saúde da Família) through the School of Public Health of Ceará (ESP--CE), which arose through the need to change the training of health professionals, seeking qualifications to carry out their duties in the SUS.

The Ministry of Health supports the RMSF as it considers this lato-sensu postgraduate category capable of bringing professionals in the area closer to services, encouraging training to work in health policy, in addition to the development of potential and skills related to professional praxis.

The Community Health Agent (CHA) is also part of the FHS, acting as an expert in the health sector who is part of the Family Health team, with exclusive operation in the context of SUS. Putting into practice, under the supervision of the site administrator, disease prevention and health promotion actions, through home or community care, collectively or individually, created in accordance with the guidelines incorporated by this system.

CHAs portray the community within the primary health care unit, and must be qualified to understand the reality of the population, their needs and address them clearly.(4)

Based on these assumptions, the decision was made to carry out this experience report after the Multiprofessional Residency team carried out ongoing education with ACS professionals in Camocim - CE, given that, once these new professionals enter the service, initial training is necessary for guidance and exchange of knowledge. The writing of this article arose from the guiding question: How did permanent education occur with Community Health Agents guided by Multiprofessional Residents?

The work is justified by the process of Multidisciplinary Residency in Family Health as a modality of Permanent Education in Health, providing the development of Health Professionals based on their experiences, transforming practices and qualifying them to act in accordance with the principles of SUS. This reinforces the need for a continuous discussion about the SUS's competence in ordering the training of human resources in the health area, seeking to evaluate the effec-

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Table 1: Programming/Themes covered.	
DATE	SCHEDULE
05/05/2021 8 AM to 1h30 PM	 CHA COVID-19 testing Opening Organization and functioning of the local health system Role of the Community Health Agent and its responsibilities Law of Incentive
05/06/2021 8 AM to 1h30 PM	 Handbook for dealing with COVID-19 Women's health (Prenatal care, postpartum care, family planning, prevention). Oral Health Bolsa Família (an income transfer program with health and education conditionalities)
05/07/2021 8 AM to 1h30 PM	■Forms used by the Community Health Agent / ESUS / Use of the Tablet. ■Person with Disabilities Form
05/10/2021 8 AM to 1h30 PM	 Children's Health and Vaccination Calendar Adolescent Health Men's Health Sexually Transmitted Infections
05/11/2021 8 AM to 1h30 PM	 Attention to Persons with Disabilities Elderly Health Mental health Hypertension and Diabetes Mellitus
05/12/2021 8 AM to 1h30 PM	 Diseases transmitted by vectors (mosquitoes, insects, molluscs) / Leprosy and Tuberculosis. Family violence Vaccination of CHAs and delivery of uniforms.

tiveness of strategies such as RMSF.

The relevance of this work occurs when permanent education is carried out. The CHA now have their demands heard, resulting in user guidance based on technical knowledge, through an interference strategy where there is an ethical stance, professional accountability, allowing the worker in the respective area to express their concerns, anxieties, and at the same time, strengthen your knowledge, ensuring decisive attention to assistance.

Thus, this article aims to report the experience of continuing education with CHA guided by multidisciplinary residents, presenting the strategies used and discussing how professionals adhered to this work process.

METHOD

This is a descriptive study, of the experience report type, prepared from the perspectives of Multiprofessional Health Residents, based on the activities carried out based on the continuing education provided to the CHA public.

This type of study allows the description of situations experienced by the authors, seeking to demonstrate the importance of the achievement in the construction and remodeling of scientific and popular knowledge.

Experience report is a methodological form that allows the description of lived experiences, of a qualitative nature since they highlight subjective aspects of the human being based on the experience of implementing reception on spontaneous demand in a primary care unit.

The municipality of Camocim is located on the northwest coast of the State of Ceará, almost at the tip of Piauí, approximately 370 km from the capital Fortaleza, with a population of just over 60 thousand inhabitants (IBGE, 2010)

The practice scenario has 19 Primary Health Care Units (UAPS - Unidades de Atenção Primária de Saúde), 01 Team from the Expanded Center for Family Health and Primary Care (NASF-AB) and 106 ACS, adding to this number the 25 who were called from the last competition in 2019. The UAPS offer basic care in Pediatrics, Gynecology, General Clinic, Nursing and Dentistry, characterized as a gateway.

The CHAs, in turn, are responsible for

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carrying out prevention and health promotion activities, based on popular education strategies (at home or in communities), as recommended in the SUS guidelines. The target audience of the article were the new CHAs who participated in the training offered by the Municipal Health Department in partnership with the Multiprofessional Residency.

The following participated in the course: twenty-five (25) Community Health Agents, having as facilitators professionals from the municipal health department (nurses and dentist) and Multi-professional Residents from the Family Health and Mental Health emphases (nurses, social workers, psychologists, physiotherapists, nutritionist and pharmacist).

The theoretical-methodological development of the course had the following steps: adapting the content to the municipality's health context; preparation of the e-book and slides - used for course development; planning, preparation of the schedule and its application.

For the training, audiovisual resources were used to present the content (slides, pictures, films, music, etc.), group dynamics techniques for the development of some proposed themes (conversation circles, questions and answers, for example), workplace gymnastics and expository presentations.

The workshops were divided into two weeks of activities, where - in partnership and with mutual contribution, the Health Department was responsible for the 5th to 7th of May 2021 and the professionals of the Multiprofessional Residency, for the 10th to 12th of May 2021.

Through a survey of the main themes related to the territory in which the ACS operates, workshops were organized to present and discuss the issues listed with the aim of training these professionals to work with the UAPS and the NASF-AB team. The topics covered and the days are described in table 1.

RESULTS

The activities began with workplace

gymnastics, providing a moment of stretching and relaxation for the body and mind. Then the lectures began according to the theme of the day, being directed in a dynamic and participatory way, covering the aspects of learning and reflection necessary for permanent education.

At the end of each presentation, questions were asked so that the subject could be assimilated in the best way possible, highlighting that the themes covered would not end with training, considering that the search for knowledge is daily and permanent, always under construction, as the territory is dynamic and continually changes.

These activities played an extremely important role in promoting quality of life and strengthening bonds between professionals, turning these continuing education actions into pleasurable moments of learning and exchanging knowledge, through direct contact between team members.

At the end of each day, manuals relating to the topics covered were drawn and provided as a reference for later consultation. On the last day of the workshop, an evaluation was carried out to obtain feedback regarding the speakers, topics presented and learning.

Training for the new CHA was a unique moment for this professional category, as, with their arrival in the communities, the population will be able to count on the support of qualified people prepared to build an integral and equitable SUS, considering that they are the ones at the forefront ensuring that the information/service reaches the people who need it most. When they enter service, they will be the spokespersons for the community, which is often invisible in the face of issues that permeate social determinants of health and, consequently, the vulnerabilities to which they are subjected.

DISCUSSION

The SUS is based on the health context, and its constitutional competence is to order the training of professionals in the area. Based on this premise, the National Policy for Permanent Health Education was created with the aim of reorienting health teams, encouraging professionals to look for something more, helping with the management and dynamics of healthcare, learning and sharing at every moment of their lives, providing opportunities for the development of skills. (5,6)

PNEPS aims to stimulate, monitor and strengthen the professional qualifications of workers. Through continuing education, it is possible to transform health practices, guided by the principles of the Unified Health System (SUS). The workshops, through the topics covered, promoted knowledge and debate about health promotion, enhancing the performance of these professionals in the territory and consequently, the qualification of the service offered to users.

> "In this way, in addition to processes that allow the incorporation of necessary technologies and references, it is necessary to implement spaces for discussion, analysis and reflection of the practice in daily work and the references that guide these practices, with matrix supporters from other areas, activators of institutional change processes and facilitators of collectives organized for production." (7)

As a result, the Multiprofessional Residency became essential in the training of CHAs, given its nature that encompasses several professional categories, the strong space given to continuing education as a potential device for promoting the changes sought by health professionals and the technical knowledge of each one provided the workshop with significant learning.

Establishing this exchange of experiences (between Residents and CHA) and providing reflection brings to training a unique character of professional maturation. This is what constitutes the process of change necessary for the improvement and quality of professional practice, in addition to the success in the services provided to the community.

The difference of the Residency lies in this aspect: the professional is inserted

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in a teaching modality that allows work and qualification (postgraduate) at the same time. The professionals who make up the UAPS teams are often exhausted by so many services, excessive bureaucratic demands, management's disregard for taking breaks to plan, study, set goals, as a result of which they are not always able to carry out ongoing education, with residents being responsible for bringing about this possibility.

In this context, the participation of Residents was essential, as in addition to being able to share their knowledge and strengthen continuing education, they were able to respond to demands arising from the CHA and relieve the work of professionals in the UAPS.

> "If we are active actors in the training and work scenes (products and producers of the scenes, in action), the events on stage make us different, affect us, modify us, producing shocks in our "subject being", placing us in permanent production. The permanent thing is the here-and--now, faced with real problems, real people and real teams." (7)

In this way, it is clear how necessary it is to provide moments like these, as professionals and the population benefit. The first has the opportunity to share knowledge, exchange knowledge, promote health and prevent injuries through continuing education strategies; the latter receives qualified and humanized care.

CONCLUSION

The use of active methodologies in conducting activities brought a better understanding of the issues covered, and in a transformative way, contributed to better knowledge of CHA professionals and also in the elaboration of the conduct faced by multi-professionals when carrying out activities.

The learning on the job of new CHAs incorporates the method of learning and teaching into their daily lives, transforming professional practices based on relevant problematizations, subjective to each person involved in this process, the great expectation is that the organic and permanent relationships between management practices and the network, in addition to health care services (professionals and their practices) through acquired/shared knowledge, increase relevance and commitment to work, and consequently, bring positive impacts on service to users.

The perceived challenges begin since the pandemic did not allow a greater number of participants, as with social distancing and care with crowds, as well as it was not allowed to carry out training covering all CHAs, it is extremely necessary to carry out this leveling, as issues related to health change daily, especially in relation to vaccination in general and the COVID-19 pandemic.

Another point to be rethought is the issue of time available for presentations and discussions. There were many topics covered, some CHAs had no experience in the health sector, so there ended up being a lot of content covered without adequate time for comprehension and comprehension. Therefore, the suggestion is to plan more moments like this to ensure the exchange of experiences between professionals and Residents, in addition to providing opportunities for improvement in the service offered to the population served.

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