Review Article



Managerial dimensions in the academic education of nurses: an integrative review

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ABSTRACT

The objective of the present study was to carry out a survey of the scientific production on the learning process of nurses for the development of managerial skills in Primary Health Care. It is an integrative review on the LILACS, BDENF, MEDLINE and PUBMED databases, resulting in 14 articles for analysis. It was shown that there are gaps in managerial skills in the learning of nurses. However, the literature indicates that, despite these challenges, nurses continue to be the most qualified healthcare professional for managerial positions. The papers reflect the necessity for continuing education of professionals for the reorientation of work practices to include their managerial activities. Thus, the importance of a more significant managerial dimension in the learning process is emphasized, as it would lead to meeting targets and to construct an integral, autonomous and remedial practice for the exercise of an efficient management regarding its actions and responsibilities.

Descriptors: Family Health Strategy; Education, Nursing; Health Management.

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INTRODUCTION

The Family Health Program (FHP) (PSF - *Programa de Saúde da Família*) corresponds to a public health policy started in 1994 at the initiative of the Health Ministry. Despite the term "program", the nomenclature Family Health Strategy (FHS) (ESF - *Estratégia Saúde da Família*) was adopted, as the program entails a structural strategy for the reorientation of Primary Health Care (PHC) (APS - *Atenção Primária à Saúde*) in the Unified Health System (UHS) (SUS - *Sistema Único de Saúde*)⁽¹⁾.

Therefore, in qualifying for UHS and the care models derived from it there are many and varied challenges, which run through the teaching and training of the professionals that make up the public healthcare network⁽²⁾.

Despite some advances, studies show that the learning process of healthcare professionals is still far from integral care and, moreover, the profile of these workers demonstrates insufficient qualification for changes in practices⁽³⁾.

Faced with this fragility, the education of nurses for the field of work is an important aspect to be discussed, here understood as a process that aims to construct the competences that should occur in scenarios of complex challenges, considering globalization, increased professional competitiveness and health problems exacerbated by constant changes in Brazil's political and economic context⁽⁴⁻⁵⁾.

Within this perspective, teaching institutions have sought to encompass the necessary content and practices on their curriculums for the development of professionals that will work in the UHS. However, the changes promoted in education do not sufficiently correspond to the demands of the job market⁽⁶⁾.

Furthermore, the demands of UHS require the education of healthcare professionals to proportion skills related to management and administration, since the National Curriculum Guidelines for graduation in Nursing are oriented to the development of generalist humanist professionals that are critical and reflexive, capable of assessing, systematizing and deciding upon the most appropriate conduct based on scientific evidence, and are able to be entrepreneurs, managers, employers or leaders in the healthcare team⁽⁷⁾.

Studies show that PHC is marked by management problems that are reflected in the physical structure, the services, the profile of the managers and staff, access to resources and the effectiveness of their policies. Providing excellent service is considered an essential part of management. Therefore, the management of a Basic Healthcare Unit (BHU) (UBS - *Unidade Básica de Saúde*) is a necessary and important instrument in healthcare, since it produces certain directionality to the work process⁽⁸⁾. The nurse takes on a significant participation in this role, given their engagement and commitment to individual and collective health, and the fact of successfully relating to other members of a multi-professional team⁽⁹⁾.

The scientific literature also reveals that, while managing care, nurses utilize actions in relationships and interactions between people as complex individuals that experience organicity of the care system, with their own managerial skills or those inherent to the professional activities of nursing. This occurs through the planning of care actions, and the prevision and provision of necessary resources for the organization of care at a BHU⁽¹⁰⁾.

However, considering the premise of the current context of working in healthcare, authors recognize that the development of nursing skills that sustain qualified managerial practice is a challenge, especially due to the learning process which, at most institutions, remains focused on the development of technical support actions⁽¹¹⁾.

Thus, the mismatch between the learning process and nursing practice results in tension, demotivation and conflict⁽¹⁰⁾. The choice of content in nursing management is related to the differentiated functions that nurses have been developing in the healthcare scenario in Brazil, whereby nurses are progressively assuming management positions⁽¹²⁾. This justifies the fact that the studies in the present research are not limited only to the management of a BHU, or care management, or management of work processes, but encompass research and discussions on management in the broadest sense within the scope of PHC.

Within this perspective, researchers of this theme indicate the necessity for constant reflection and discussion on the different forms of management^(5,13) that nurses have been performing in PHC, considering that this is the gateway to UHS, where quality administration of work processes, care and management of the BHU can define changes in healthcare practices⁽¹⁴⁾.

Furthermore, recognition and characterization of the teaching of nurses for the development of managerial skills in PHC is considered relevant, based on the supposition that the intended contribution of this study is to promote discussions that seek to provide support for remodeling the teaching models aiming to meet the necessity for reorganization in the care management model.

As such, the following guiding question was defined: What is the evidence in the scientific literature that directs teaching in Nursing towards the development of managerial skills within the scope of Family Healthcare Strategy?

In the midst of all this effervescence of learning processes and healthcare, the present study aimed to carry out a survey of the scientific production on the learning process of nurses for the development of managerial skills in Primary Health Care.

METODOLOGY

This is an integrative review, permitting the inclusion of studies with different methodological approaches, grouping results with identical or similar themes obtained from a set of primary studies⁽¹⁵⁾.

The search was conducted using the Virtual Health Library (BIREME - *Biblioteca Virtual de Saúde*), in the period of May and June 2017, and included the following databases: International Literature in Science and Health (MEDLINE), Latin American and Caribbean Literature in Science and Health (LILACS), Database on Nursing (BDENF) and the U.S. National Institutes of Health's National Library of Medicine (PUBMED).

Standardized terminology of Descriptors in Science and Health (DECS) were used to provide article selection. As such, the Portuguese descriptors used for research on the MEDLINE, LILACS and BDENF databases were: "*Estratégia Saúde da Família*", *"Educação em Enfermagem*" and *"Gestão em saúde*", while on PUBMED "Family health strategy", "nurse education" and "health management" were used. It should be pointed out that there is a high degree of similarity between the descriptors of PUBMED and those used on the databases cited above.

The methodological pathway was operationalized through the following stages: elaboration of the guiding question; establishment of descriptors; identification and selection of articles using inclusion/exclusion criteria; characterization of the studies; analysis and discussion in respect to the learning process of nurses for the

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development of managerial skills in PHC and synthesis of knowledge from the analyzed articles⁽¹⁵⁾. This process is illustrated in Figure 1.

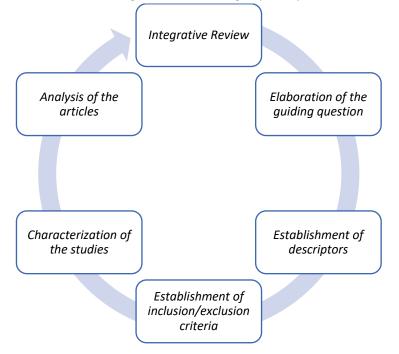


Figure 1: Flowchart with the stages of the methodological pathway. Sobral, CE, Brazil, 2017.

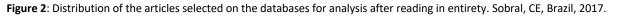
The three descriptors selected for the MEDLINE, LILACS and BDENF databases were combined, with "Estratégia Saúde da Família" AND "Educação em Enfermagem" AND "Gestão em saúde" being adopted as a combination, obtaining a sample of 319 articles. In relation to the search on PUBMED, combining of the descriptors "family health strategy, nurse education and health management" generated a total of 31 articles. It is worth remembering that the Boolean operator AND was used between the descriptors on the consulted databases in all the searches.

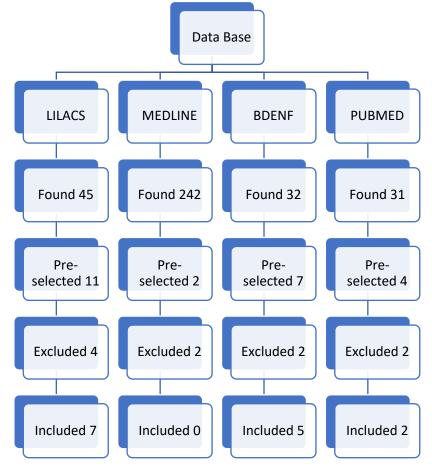
The inclusion criteria defined for selection of the scientific productions were: complete articles in Portuguese and English from the last 10 years (2007-2017), available in electronic format, which portray the studied theme. The following were considered as exclusion criteria: technical documents, abstracts from congresses, annals, editorials, literature reviews, dissertations and doctorate theses. Thus, application of these filters resulted in 350 articles.

As such, a total of 24 articles were pre-selected through reading of titles and abstracts, which were subsequently submitted to reading in their entirety to verify compliance with the inclusion criteria. The results of this process are shown in Figure 2.

Analysis of the findings was carried out through detailed reading of the productions with the intention of determining adherence to the objective of the present study, thus obtaining 14 articles for further analysis. As such, to facilitate content analysis of the productions, an instrument of data collection was developed by the authors with the objective of constructing a database of easy access (Table 1).

In order to critically evaluate the studies, classification of the type of evidence in the studies was identified and classified as: Level I. Evidence arising from systematic review or meta-analysis of all the relevant randomized controlled clinical trials or resulting from clinical guidelines based on systematic reviews of randomized controlled clinical trials; Level II. Evidence derived from at least one well-designed randomized controlled clinical trial; Level III. Evidence obtained from a well-designed clinical trial without randomization; Level IV. Evidence resulting from well-designed cohort and case-control studies; Level V. Evidence originating from systematic review of descriptive and qualitative studies; Level VI. Evidence derived from a single descriptive or qualitative study; Level VII. Evidence arising from the opinion of authorities and/or specialist committee report⁽¹⁶⁾.





Then, analysis and synthesis of the data extracted from the articles was carried out descriptively, enabling the examination and classification of the data. Presentation of the results can be highlighted, along with their discursive analysis, which aimed to bring together knowledge on the referred theme in this integrative review.

RESULTS AND DISCUSSION

Table 1 presents the list of the 14 articles including their title, level of evidence, authors, year, periodical, objective, methodological design, sample and results.

Table 1: Characterization of the scientific productions selected for the study as per title, level of evidence, authors, year,

periodical, objective, methodological design, sample and re	sults. Sobral, CE, Brazil, 2017.
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TITLE / LEVEL OF EVIDENCE / AUTHORS / PERIODICAL / YEAR	OBJECTIVE	METHODOLOGICAL DESIGN / SAMPLE	RESULTS
Processo de trabalho e competências gerenciais do enfermeiro da Estratégia saúde da família ⁽¹⁷⁾ / VI / De Paula M, Maris PA, Elizabeth B, Eduardo EA, Macagi STS / Revista RENE / (2013)	To identify the dimensions of nurse's work process in an FHS unit and correlate the skills necessary for the development of managerial activities	Descriptive study using the technique of non-participative observation for 160 working hours of four nurses	In the managerial dimension the nurse exercises administrative functions and general and specific skills to carry out their activities. The Continuing Education in Healthcare program (CEH) (EPS - <i>Educação Permanente em Saúde</i>) appears as a managerial skill that articulates knowledge to the professional that make up the team and users of the system.
Coordenação de unidades de saúde da família por enfermeiros: desafios e potencialidades ⁽¹⁸⁾ / VI / Melo RC, Machado ME / Revista Gaúcha de Enfermagem / (2013)	To analyze the coordination of the Family Healthcare Units (FHU) (USF - <i>Unidades de</i> <i>Saúde da Família</i>) carried out by nurses	Descriptive study with a qualitative approach conducted with eight nurses from the basic care network of Porto Alegre/RS	The results demonstrate challenges and qualities present in the work of coordinating nurses. As one of the difficulties, academic learning was indicated as being insufficient to cope with coordination of a FHU
O planejamento estratégico situacional no ensino da gestão em saúde da família ⁽¹⁹⁾ / VII / Kleba ME, Krauser IM, Vendruscolo C / Texto e contexto Enfermagem / (2011)	To analyze the application of situational strategic planning (SSP) as a management tool in collective healthcare	Experience report based on reflections on the implementation of situational strategic planning stages in the selected units	The exercise of SSP enabled the students to develop skills of communication, leadership, decision-making and administration and management, besides promoting greater approximation between those acting in teaching and those in service
A função gerencial do enfermeiro na Estratégia Saúde da Família: limites e possibilidades ⁽²⁰⁾ / VI / Jonas LT, Rodrigues HC, Resck ZMR / Revista de Atenção Primária à Saúde / (2011)	To understand and analyze the limits and possibilities of the managerial work process of the nurse in a Family Health Program team	Qualitative study with participation of professional from two Family Health teams in the municipality of Alfenas- MG, totaling 15 subjects	The nurse takes on the role of manger, coordinating the work of the Family Healthcare Units and of the team members, observing not only the Nursing work and the Community Health Agents, but broadening this observation to all of the multi-professional team.
Educação permanente em saúde: construções de enfermeiros da Estratégia Saúde da Família ⁽²¹⁾ / VI / Santos AR, Coutinho ML / Revista Baiana de Saúde Pública / (2014)	To analyze the participation of nurses from Family Healthcare Units in Itajuípe, Bahia, in actions in Continuing Education in Healthcare developed in the municipality.	Qualitative study. Eight nurses participated, two being active in specific programs in the Basic Healthcare Unit and the remainder being responsible for the FHUs	The results indicate a strong association on the part of the healthcare professionals of the CEH to education processes aimed at the necessities of the population and not at the universe of the work process in healthcare
Sistema Único de Saúde e da Família na formação acadêmica do enfermeiro ⁽²²⁾ / VII / Costa RKS, Miranda FAN / Revista Brasileira de Enfermagem / (2009)	To reflect on the movements of change in Nursing graduation, emphasizing professional preparation to comply with the current conformation of the healthcare sector, based on consolidation of UHS/FHS.	Reflexive Study	The academic learning of the nurse has undergone modifications over the years with the new socio-health reality of Brazil. However, there is a necessity for effective changes on curriculums as a way of intervening in the reorganization of the care model

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TITLE / LEVEL OF EVIDENCE / AUTHORS / PERIODICAL / YEAR	OBJECTIVE	METHODOLOGICAL DESIGN / SAMPLE	RESULTS
A prática gerencial do enfermeiro no PSF na perspectiva da sua ação pedagógica educativa: uma breve reflexão ⁽²³⁾ / VI / Bôas LMFMV, Araújo MBS, Timóteo RPS / Ciência e Saúde Coletiva / (2008)	To contribute to reflection on the managerial work of the nurse on the FHP, coordinating the pedagogical/educational actions.	Qualitative reflexive study.	The nurse in FHS develops activities related to the fields of care, management and training. It is within a multi- dimensional perspective that the duties and actions of the Nursing professional should be understood, a broader vision, capable of complying with new arrangements and challenges in UHS, being necessary.
Gestão do trabalho em unidades básicas de saúde ⁽⁸⁾ / VI / Celedônio RM, Fé MCM, Mendes AHL, Mendes AHL, Chaves TLF / Revista de Enfermagem da UFPE / (2017)	To analyze administration of the work process of managers at Basic healthcare Units	Descriptive-explorative study with a qualitative approach, conducted at eight Family healthcare Centers with eight nurses	The nurses presented various activities at the BHUs besides management, being overburdened at work, which may generate such dissatisfaction on the part of the professional as to prejudice the care service.
Exercício da liderança do enfermeiro na Estratégia Saúde da Família ⁽²⁴⁾ / VI / Lima FS, Amestosy SC, Jacondino MB, Trindade LM, Silva CN, Fuculo Junior PRB / Revista de Pesquisa: Cuidado é fundamental / (2016)	To know the leadership exercise of the nurse in FHS, as well as the difficulties and strategies adopted by the nurses in order to lead.	Qualitative, descriptive and exploratory study conducted with 12 FHS nurses in Pelotas, RS	It was found that the nurse, while leading, is seen as an example to be followed, responsible for contributing to team motivation.
O uso de indicadores como ferramenta de gestão na estratégia saúde da família ⁽²⁵⁾ / VI / Paes LG, Bellato TMS, Machado BP, Lima SBS / Revista de Enfermagem da UFSM / (2015)	To verify the use of health indicators in the daily work routine of managing nurses of FHS, in a municipality in Santa Catarina, Brazil.	Descriptive study with a qualitative approach carried out with thirteen managing nurses of FHS	The indicators are conceived as a possibility for planning and assessment of healthcare actions in the FHS, despite a certain distance between theory and practice having been demonstrated.
Estilos de liderança dos enfermeiros que atuam na estratégia de saúde da família ⁽²⁶⁾ / VII / Costa SEM, Peres AM, Bernardino E, Sade PMC / Revista Ciência, Cuidado e Saúde / (2015)	To relate the activities developed by nurses operating in Basic Healthcare Units in a municipality in South Brazil to the principal situational leadership styles proposed by the Hersey and Blanchard model.	Quantitative and exploratory study with nine units with 17 nurses	The results of the study indicate a predominance of leadership of "Determine" style, such that the nurses most frequently use directive leadership, in which more attentive supervision of subordinates stands out, with a maturity level of low to moderate, which requires the development of activities based on specific orientations given by the leader.
Enfermeiros coordenadores de equipe do programa saúde da família: perfil profissional ⁽²⁷⁾ / VI / Rocha BS, Munari DB, Bezerra ALQ, Melo LKA / Revista de Enfermagem da UERJ / (2009)	To characterize the professional profile of FHP nurses acting in team coordination.	Descriptive study with a quantitative approach carried out with 94 FHP nurses	The results show that most of the nurses are women (97.9%); who rarely perform territorialization or mapping in their areas of coverage and that the professionals under their supervision rarely carry out activities of health education through their own initiative.

Table 1: Characterization of the scientific productions selected for the study as per title, level of evidence, authors, year, pariadical objective methodological design cample and results. Sobral. CE. Brazil. 2017.

 periodical, objective, methodological design, sample and results. Sobral, CE, Brazil, 2017.	

TITLE / LEVEL OF EVIDENCE / AUTHORS / PERIODICAL / YEAR	OBJECTIVE	METHODOLOGICAL DESIGN / SAMPLE	RESULTS
Evaluation of an interactive web-based nursing course with streaming videos for medication administration skills ⁽²⁸⁾ / VI / Sowana AK, Idhailba JA / Rev. Families, Systems & Health / (2014)	To report the experience of nursing students with new teaching strategies in Nursing	Mixed qualitative study	A deficiency in teaching on Nursing courses was shown, including the incapacity of students to understand procedures as a whole and a fragmented curriculum, impeding problem based learning.
The participant's perspective: learning from an aggression management training course for nurses. Insights from a qualitative interview study ⁽²⁹⁾ / IV / Birgit HRN, Breimaier HERN, Halfens RJG, Jos MGA, Hahn S / Scand J CaringSci / (2016)	To explore and describe, from the point of view of the nurse, the learning obtained from attending an aggression management training course	Qualitative descriptive study	In practice, nurses are continually challenged to deal with emotional impacts, it being important to strengthen the capacity to manage situations, promoting skills of confrontation and resilience.

Although not all the articles surveyed and studied can be considered as actually being about the training of nurses for the development of managerial skills within the scope of FHS, the results also show different, important aspects in the management practices of this professional in healthcare services.

Based on this evidence, for the present study it was judged necessary to present a category on the work process of the managing nurse prior to gathering the productions that directly emphasize the training of nurses for the development of managerial skills.

Thus, for more substantiated discussion on the theme, three thematic categories were identified as follows: "Work process of the managing nurse: powerful tool to drive healthcare practices", "Continuing education in Healthcare as a qualification strategy for managerial practice of the nurse" and "Managerial activities in Nursing: impacts of the learning processes", which will be addressed and discussed below.

Work process of the managing nurse: powerful tool to drive healthcare practices

As previously stated, this category is presented as extra given that it is judged pertinent to address the challenges and potentialities of the work of the managing nurse, so as to provide greater support to the discussions fostered in the third category referring to the learning processes, and because these aspects have stood out significantly in the analyzed productions.

In Brazil, activities in the managerial dimension stand out in the work process of nurses and aim to guarantee the quality of Nursing care, as well as the good operation of Family Healthcare Units⁽¹⁷⁾.

Researchers define managerial activity as a complex and dynamic practice, requiring skills with the capacity for critical analysis and decision making, besides the capacity for dialogue, with the aim of establishing connections both among staff members and between care agents and users of the services⁽³⁰⁾.

Therefore, the performance of the nurse as manager is becoming a more frequent activity, it being regulated by the Federal Council of Nursing, which establishes management duties, planning, organization, coordination and Nursing service assessment as one of the main instruments for the managerial exercise of the nurse⁽⁸⁾.

Therefore, among such managerial practices, authors describe planning as essential for the development of actions that are carried out by nurses in the routine of healthcare services, with emphasis on the idea that these professionals may simultaneously carry out care and management activities⁽³¹⁾.

Thus, research shows that the nurse is recognized as the professional that most holds information on the operation of the healthcare service, being constantly demanded of to clarify and resolve situations in the provision of care⁽³²⁾. Therefore, as one of their professional prerogatives, management of staff and Nursing services has approximated the nurse to the role of managing the healthcare unit.

A recent study corroborates such assertions, showing the unanimity of nurses exercising management and coordination roles at the eight Family Healthcare Centers analyzed by the study, and thereby constituting a coordinating agent of actions developed by the staff and an organizer of care⁽⁸⁾. Another study shows that of the 108 BHUs studied in the state of Paraná, 107 were managed by nurses⁽⁹⁾.

Authors relate this aspect to the fact that nurses have a significant appropriation of knowledge and practices in the fields of Public Health and Collective Health, especially of PHC. Another determining question to

be considered is the length of service of nurses in the same location, which provides ample knowledge on the place and establishes a connection with the community. Moreover, a third aspect is probably justified by the low value paid for the position of manager, the job market in Nursing being constrained by a policy of low salaries, which may generate greater adhesion of nurses to the position in relation to other healthcare professionals⁽¹⁵⁾.

The legislation regulating the National Policy on Basic Care (NPBC) ⁽³³⁾ does not list unit management as a competence of the nurse, but attributes to the nurse participation in managerial processes for the running of the unit. However, participants in a study on managerial function of the nurse attribute the exercise of service management functions to this professional.

Even with the review and changes to the guidelines of the new NPBC, the duties of the nurse in PHC remain as the act of planning, administrating and evaluating actions developed by Nursing Technicians/Auxiliary Nurses, Community Health Agents and Endemic Disease Control Agents together with members of staff, but nurses are not allocated as managerially responsible for the unit⁽³⁴⁾.

Therefore, it is necessary to capitalize on this condition to position themselves and conquer greater space in the job market, besides going in search of professional recognition and appreciation, especially at the level of PHC, in which the practice areas have been consolidated for nurses and have grown progressively⁽²⁰⁾.

In view of the above, the great challenge to managerial nurses is the necessity to review their practice in the face of new paradigms, whereby rethinking of work processes is indispensable, as well as adopting different methodologies, instruments and knowledge to those currently prescribed⁽²³⁾.

For this, a study suggests that the management of these processes should be shared in co-administration, promoting participative project construction, so as not to overburden the nurse. Within this perspective, this study reflects on these aspects that run through the work of this professional in the FHS, as based on the comprehension of their real duties and strengthening the participation of staff members, the nurse may minimize their work overload and direct their efforts to consolidating their attention to healthcare⁽²⁴⁾.

This statement corroborates a review study on nursing practices in the context of PHC, which demonstrates that nurses often develop care and management actions simultaneously, so as to be seen as versatile team members. However, the authors suggest that managerial actions should be carried out collectively by the entire health team so that nurses do not carry out activities that are the responsibility of other professionals⁽³¹⁾.

Within this perspective, when coordinating an FHS team, the nurse has the duty of encouraging collective work to implement working as a team, achieving maximum productivity and a level of quality of service in healthcare. However, it is not always skills or suitable academic education that are considered for the exercise of this function⁽²⁷⁾.

As such, research shows that the lack of specific training may be considered a difficulty for management, especially where knowledge in relation to decision making is concerned. Also, managerial development, defined based on an assistance model centered on care, contributes to redefinition of the managerial role, although it is necessary to adopt a dialectic approach during analysis of the organizations⁽³⁰⁾.

Faced with this challenge, a study mentions the Continuing Education in Healthcare program (CEH) (EPS -*Educação Permanente em Saúde*) as an innovative strategy to promote the qualification of healthcare professionals to overcome the deficiencies and gaps existing in their learning in regard to managerial processes of nurses⁽²¹⁾. Thus, the role of the managerial nurse should be promoted and reinforced not only in the academic education, but as a process of continuing education in the daily routine, based on the demands of professional life.

Continuing Education in Healthcare as a qualification strategy for managerial practice of the nurse

This category arose from the evidence found in the selected studies of the immediate necessity for investment in the qualification of teams and administrators, whereby studies indicate the CEH as a strategic axis for the strengthening of management mechanisms and social control oriented by the commitment to user health^(17,21,23-25).

Within this context, researchers emphasize the CEH presents as a proposal for strategic action capable of contributing to the transformation of learning processes, pedagogical and healthcare practices and to the organization of services, which works coordinately with the healthcare system, in its various management spheres, and educational institutions⁽³⁵⁾.

Within this perspective, studies show that the shortcomings of graduate curriculums concerning performance in PHC have motivated professional nurses to seek out multiple specializations, which has fostered an identity dilemma, leading diverse professionals to a lack of definition in their roles, influenced by a learning process driven to specialization and by a fragmented and precarious work situation⁽³²⁾.

Faced with this fragility, some authors defend the use of new teaching strategies that come to enhance the learning of the Nursing student, whereby emphasis is placed on the change of role of the students so that they become more independent, highlighting innovative teaching as an essential strategy for the transformation of education⁽²⁸⁾.

A study indicates that nurses, in their workplace, feel the necessity for continuing education, as they often face difficulties and limitations in their daily activities and need periodical updates for effective practice, with better resolvability and sharing between the work collectives. Thus, it can also be affirmed CEH is the most suitable proposal for working on the construction of new ways of running the Brazilian healthcare system, since it enables the coordination of management, care and training in order to confront the problems of each healthcare team⁽²¹⁾.

As such, authors affirm the characteristics of its basic instruments make the CEH favorable to Nursing, given that its practice requires skills and abilities based on communication, observation, application of scientific principles, manual dexterity, planning, assessment, team work and the use of community resources⁽³⁶⁻³⁷⁾.

Given the importance of CEH to the reorientation of the healthcare model and the FHS model for the consolidation of UHS, it is essential to have knowledge on the ways in which nurses have used this tool to improve their work process at the units, and for reorientation of the care and management model⁽²¹⁾.

Therefore, based on the reading of the scientific productions selected for this review, it is evident that EPS is a necessary and important tool that enables improvement to the work process, so as to offer a substantial dimension to characterize such relevance. However, here it is worth highlighting the care that professionals and managers should take in associating EPS with activities that merely update, disregarding one of the prerogatives of EPS, which is the problematization of the reality experienced by the healthcare teams.

Based on what has been shown in this category, it is crucial that administrators and managers are now inserted in a bold process of EPS so that they may competently administrate all the processes involved in healthcare management with the aim of guaranteeing a more integral, autonomous and remedial practice for the exercise of effective management according to their actions and responsibilities⁽³⁷⁾.

Managerial activities in Nursing: impacts of the learning processes

According to the literature consulted, it was possible to infer that to carry out good management, the nurse should approximate to the essence of their work, the care, and understand its process as a set of actions which encompass all care and managerial activities and are aimed at meeting the health necessities of the users. Thus, it is understood that the learning process of the nurse needs to have coordinated approaches, so that there is no divergence in care and management activities in professional practice⁽²⁰⁾.

However, as can be seen in previous categories, education of healthcare professionals has been criticized for not being aimed at the health necessities of society. Most professionals have extensive training in clinical and biomedical fields, but little training in Social and Human Sciences, which reduces their skills in managing the political, social, cultural and economic issues demanded by management⁽²²⁾.

Authors are in agreement when they state that more historically well-known administrative theories, the knowledge of which is present in the daily Nursing routine, are used with little criticism or reflection, frequently determining reductionist actions. Among the principal characteristics of these models, fragmentation of work can be highlighted, along with the separation between conception and execution, managerial control of the production process associated with a rigid hierarchy, rationalization of the administrative structure, the impersonal nature of interpersonal relationships and the emphasis on systems of procedures and routines⁽¹⁰⁾.

Within this context, opportunities are scarce for learning how to direct social, economic and political powers that interfere in the healthcare sector. Furthermore, learning centers seem to be distant from the place where decisions are made on the provision of services and healthcare policies⁽³⁰⁾.

Studies carried out in Brazil have discussed this issue and have shown the limitation of coordinating FHS nurses in respect to specific formation for taking on managerial activities, as well as the challenges of this professional for being in a role still under construction. Therefore, the teaching of Nursing should seek reorganization, promoting the development of professionals that interact with the rapid transformations present in contemporary society⁽¹⁸⁾.

Even with the referred limitations with regard to the learning in the management field, the healthcare team comprehends the nurse as a significant element in the network of relationships and interactions, being seen as both mediator and leader. Moreover, FHS nurses perform an important function together with the healthcare team, providing clinical support in care planning and management of the healthcare unit by contributing to the establishment of good relations, directing team activities and conducting the information flow⁽²⁴⁾.

As such, authors are also in agreement when showing that Nursing professionals are perpetually challenged to deal with emotional impacts, it being important to strengthen the capacity to cope with various situations, promoting confrontation and resilience skills ⁽²⁹⁾.

Researchers state that such a situation occurs as a result of the gap that exists between nurses and other healthcare professions, as nursing education has subjects related to managerial knowledge in approximately 25% of the training content⁽²⁰⁾.

Thus, the specific competences of the managerial dimension of the nurse practice are constructed during the nurse's education, as per the demands of the National Curriculum Guidelines, and are developed during day-to-day experiences⁽³⁰⁾. Effectively, learning and professional practice of the nurse should transit between work process dimensions, to construct pathways in the development of skills, with greater interaction between teaching and service^(5,16).

Within this perspective, studies indicate the necessity for teaching institutions to define a Pedagogical Policy Project (PPP), in which universities, service and community are involved, which has been strengthened by the inter-ministerial policy aiming for change in healthcare education at all levels. This should have the premise of forming professionals with the necessary profile to meet the demands and healthcare necessities of the population⁽²³⁾.

With this proposal, authors report an experience of situational strategic planning, which, in its PPP, established management as one of the conducting axes of the course alongside health promotion and holistic care. As such, managerial content is worked on all through the course as cross-cutting themes to the practice of care, so as to promote recognition in the student of planning as an essential component of healthcare, as well as promoting their leadership role as a member of a multi-professional team. The PPP of the course stresses the relevance of mastery of managerial instruments to consolidate autonomy of the profession, and to be capable of interacting with other workers and interjecting in the course of healthcare at various instances⁽¹⁹⁾.

The literature is vast when indicating the necessity to continue updating the managerial processes used in Nursing teaching and learning. The way work is organized in healthcare should surpass the logic of systematic production that reflects little, that is, overcoming the Taylorist model of production and creatively including triangulation of theories in coproduction of work in healthcare^(18,30).

Faced with this premise, a study suggests investing in research that indicates the limitations and difficulties facing the nurse coordinating teams in FHS, considering regional differences in particular, besides the application of innovative teaching strategies that may develop the nurse manager and improve their performance regarding administration abilities. This knowledge may add a set of guidelines to direct the learning process of nurses so that they are, in fact, agents of change and consolidation of national healthcare policy⁽²³⁾.

FINAL CONSIDERATIONS

Based on the considerations above, it is possible to affirm that there is scientific evidence that emphasizes the importance of the managerial dimension within the learning process of nurses. However, it was also found that professionals have extensive training in the field of biomedicine, but incipient instruction in Social Sciences and Human, Bureaucratic and Behavioral Relations, resulting in gaps for the exercise of effective management.

Even with such learning fragilities, the study enabled the inference that the nurse is considered the most suitable professional for managerial positions and, based on this, the necessity arises for nurses to seek improvement in the field of management. Thus, this search for learning, specialization and training for developing managerial skills occurs when nurses already occupy a managerial position, and often is achieved through the EPS, which should be aimed at continuing and complementing the academic learning rather than developing managerial nurses.

Therefore, it is relevant to think that the logic of Nursing teaching should be grounded in the critically reflexive production of managerial work, transversely integrating and relating teaching theories in healthcare with professional practice, throughout graduation in Nursing. Furthermore, the importance can be perceived of introducing and stimulating the use of teaching strategies that enhance the role of student for more independent practice, so as to promote the acquisition of managerial empowerment in search of more effective, remedial and efficient actions.

Thus, the product of this learning process will result in a professional with management skills capable of meeting the current healthcare demands of the population in accordance with the rapid epidemiological and demographic transformations being experienced in Brazil.

Finally, given the vast amount of literature on managerial skills and the teaching in this context, the continual progression of research in this area has become essential to providing support to the learning centers in the recognition and identification of challenges and limiting factors, so that they are confronted and overcome for incorporation of new teaching strategies that strengthen the managing nurse, based on the inseparable coordination between management and care in the PHC.

REFERENCES

1. Lima DC, Pereira AA, Drummond ES. Percepção dos acadêmicos de odontologia da UNIFAL/MG quanto à formação em Saúde da Família. Rev Odontol Bras Central [Internet]. 2013 [cited 2018 nov 28];21(60):50-5.Available from: http://www.robrac.org.br/seer/index.php/ROBRAC/article/view/670.

2. Nunes EFPA, Carvalho BG, Nociletto SCS, Cordoni Junior L. Trabalho gerencial em Unidades Básicas de Saúde de municípios de pequeno porte no Paraná, Brasil. Interface (Botucatu) [Internet]. 2016 [cited 2018 nov 28];20(58):573-84. Available from: https://doi.org/10.1590/1807-57622015.0065.

3. Araújo NP, Miranda TOS, Garcia CPC. O estado da arte sobre a formação do enfermeiro para a gestão em saúde. Revista Enfermagem Contemporânea [Internet]. 2014 [cited 2018 nov 28];3(2):165-80. Available from:

https://www5.bahiana.edu.br/index.php/enfermagem/article/view/365.

4. Trevisan DD, Minzon DT, Testi CV, Ramos NA, Carmona EV, Silva EM. Formação de enfermeiros: distanciamento entre a graduação e a prática profissional. Ciênc. cuid. saúde [Internet]. 2013 [cited 2018 nov 28];12(2):331-7. Available from: https://doi.org/10.4025/cienccuidsaude.v12i2.19643.

5. Ángel Jimenez GM, Lopera Arrubla CP. Relevancia y nivel de aplicación de las competencias de gestión en enfermería. Invest Educ Enferm [Internet]. 2013 [cited 2018 nov 28];31(1):9-19. Available from: <u>http://www.scielo.org.co/scielo.php?pid=S0120-53072013000100002&script=sci_arttext&tlng=es</u>.

6. Regis CG, Batista NA. O enfermeiro na área da saúde coletiva: concepções e competências. Rev Bras Enferm [Internet]. 2015 [cited 2018 nov 28];68(5):830-6. Available from: <u>https://doi.org/10.1590/0034-7167.2015680510i</u>.

7. Resolução CNE/CES nº 3, de 7 de novembro de 2001 (BR) [Internet]. Institui Diretrizes Curriculares Nacionais do Curso de Graduação em Enfermagem. Diário Oficial da União. 09 nov. 2001 [cited 2018 nov 28]. Available from:

http://portal.mec.gov.br/cne/arquivos/pdf/CES03.pdf.

8. Celedônio RM, Fé MCM, Mendes AHL, Mendes AHL, Chaves TLF. Gestão do trabalho em unidades básicas de saúde. Revista de Enfermagem UFPE Online [Internet]. 2017 [cited 2018 nov 28];11(Supl.1):341-50. Available from: https://periodicos.ufpe.br/revistas/revistaenfermagem/article/view/11914.

9. Carvalho BG, Peduzzi M, Nunes EFPA, Leite FS, Silva JAM. Management of basic health units in municipalities of different size: profile and management instruments. Rev Esc Enferm USP [Internet]. 2014 [cited 2018 nov 28];48(5):907-14. Available from: https://doi.org/10.1590/S0080-6234201400005000018.

Barreto RMA, Vasconcelos MN, Melo ES, Araújo MAF, Lira RCM, Albuquerque IMAN.

10. Santos JLG, Pestana AL, Guerrero P, Meirelles BSH, Erdmann AL. Práticas de enfermeiros na gerência do cuidado em enfermagem e saúde: revisão integrativa. Rev Bras Enferm [Internet]. 2013 [cited 2018 nov 28];66(2):257-63. Available from: https://doi.org/10.1590/S0034-71672013000200016.

11. Soto Fuentes PE, Reynaldos-Grandón K, Martínez-Santana D, Jerez-Yáñez O. Competencias para la enfermera/o en el ámbito de gestión y administración: desafíos actuales de la profesión. Aquichan [Internet]. 2014 [cited 2018 nov 28];14(1):79-99. Available from: https://doi.org/10.5294/aqui.2014.14.1.7.

12. Okagawa FS, Bohomol E, Cunha ICKO. Curso de especialização em gestão em enfermagem: propostas de melhorias segundo discentes. REME Rev Min Enferm [Internet]. 2014 [cited 2018 nov 28];18(2):320-6. Available from: <u>https://doi.org/10.5935/1415-2762.20140025</u>.

13. Almeida E, Piexak DR, Ilha S, Marchiori MRCT, Backers DS. Leadership of the nurse technically responsible: a necessity for the professional practice. Revista de Pesquisa: Cuidado é Fundamental Online [Internet]. 2014 [cited 2018 nov 28];6(3):998-1006. Available from: http://www.seer.unirio.br/index.php/cuidadofundamental/article/view/3069.

14. Peiter CC, Caminha MEP, Oliveira WF. Perfil dos gerentes da Atenção Primária: uma revisão integrativa. Espaço para a saúde – Revista de Saúde Pública do Paraná [Internet]. 2017 [cited 2018 nov 28];18(1):165-73. Available from: http://inesco.org.br/publicacoes/revista/18-1/REpS18-1.pdf.

15. Mendes KDS, Silveira RCCP, Galvão CM. Revisão integrativa: método de pesquisa para a incorporação de evidências na saúde e na enfermagem. Texto Contexto Enferm [Internet]. 2008 [cited 2018 nov 28];17(4):758-64. Available from: https://doi.org/10.1590/S0104-07072008000400018.

16. Melnyk BM, Fineout-Overholt E. Making the case for evidence-based practice and cultivating a spirit of inquiry. In: Melnyk BM, Fineout-Overholt E. Evidence-based practice in nursing & healthcare: a guide to best practice. A guide to best practice [Internet]. 2nd ed. Philadelphia: Lippincot Williams & Wilkins; 2005 [cited 2018 nov 28]. p. 3-24. Available from:

http://file.zums.ac.ir/ebook/208-Evidence-Based%20Practice%20in%20Nursing%20&%20Healthcare%20-%20A%20Guide%20to%20Best%20Practice,%20Second%20Edition-Be.pdf.

17. Paula M, Peres AM, Bernardino E, Eduardo EA, Macagi STS. Processo de trabalho e competências gerenciais do enfermeiro da estratégia saúde da família. Rev Rene [Internet]. 2013 [cited 2018 nov 28];14(4):980-7. Available from: http://periodicos.ufc.br/rene/article/view/3633.

18. Melo RC, Machado ME. Coordenação de unidades de saúde da família por enfermeiros: desafios e potencialidades. Rev Gaucha Enferm [Internet]. 2013 [cited 2018 nov 28];34(4):61-7. Available from: https://doi.org/10.1590/S1983-14472013000400008.

19. Kleba ME, Krauser IM, Vendruscolo C. O planejamento estratégico situacional no ensino da gestão em saúde da família. Texto Contexto Enferm [Internet]. 2011 [cited 2018 nov 28];20(1):184-93. Available from: https://doi.org/10.1590/S0104-07072011000100022.

20. Jonas LT, Rodrigues HC, Resck ZMR. A função gerencial do enfermeiro na Estratégia Saúde da Família: limites e possibilidades. Revista de APS [Internet]. 2011 [cited 2018 nov 28];14(1):28-38. Available from: <u>https://aps.ufif.emnuvens.com.br/aps/article/view/977</u>.

21. Santos AR. Educação permanente em saúde: construções de enfermeiros da estratégia saúde da família. Revista Baiana de Saúde Pública [Internet]. 2015 [cited 2018 nov 28];38(3):708-24. Available from: <u>https://doi.org/10.22278/2318-</u>2660.2014.v38.n3.a695.

22. Costa RKS, Miranda FAN. Sistema Único de Saúde e da família na formação acadêmica do enfermeiro. Rev Bras Enferm [Internet]. 2009 [cited 2018 nov 28];62(2):300-4. Available from: https://doi.org/10.1590/S0034-71672009000200021.

23. Bôas LMFMV, Araújo MBS, Timóteo RPS. A prática gerencial do enfermeiro no PSF na perspectiva da sua ação pedagógica educativa: uma breve reflexão. Cien Saude Colet [Internet]. 2008 [cited 2018 nov 28];13(4):1355-60. Available from: https://doi.org/10.1590/S1413-81232008000400033.

24. Lima FS, Amestosy SC, Jacondino MB, Trindade LM, Silva CN, Fuculo Junior PRB. Exercício da liderança do enfermeiro na estratégia saúde da família. Revista de Pesquisa: Cuidado é Fundamental Online [Internet]. 2016 [cited 2018 nov 28];8(1):3893-906. Available from: https://doi.org/10.9789/2175-5361.2016.v8i1.3893-3906.

25. Paes LG, Bellato TMS, Machado BP, Lima SBS. O uso de indicadores como ferramenta de gestão na estratégia saúde da família. Revista de Enfermagem da UFSM [Internet]. 2015 [cited 2018 nov 28];5(1):40-9. Available from: https://doi.org/10.5902/2179769214150.

26.

26. Costa EMS, Peres AM, Bernardino E, Sade PMC. Estilos de liderança dos enfermeiros que atuam na Estratégia Saúde da Família. Ciênc. cuid. saúde [Internet]. 2015 [cited 2018 nov 28];14(1):962-9. Available from:

https://doi.org/10.4025/cienccuidsaude.v14i1.20756.

27. Rocha BS, Munari DB, Bezerra ALQ, Melo LKA. Enfermeiros coordenadores de equipe do Programa Saúde da Família: perfil profissional. Rev. enferm. UERJ [Internet]. 2009 [cited 2018 nov 28];17(2):229-33. Available from: <a href="http://www.facenf.uerj.br/v17n2/v17

Barreto RMA, Vasconcelos MN, Melo ES, Araújo MAF, Lira RCM, Albuquerque IMAN.

28. Sowan AK, Idhail JA. Evaluation of an interactive web-based nursing course with streaming videos for medication administration skills. Int J Med Inform [Internet]. 2014 [cited 2018 nov 28];83(8):592-600. Available from: https://doi.org/10.1016/j.ijmedinf.2014.05.004.

29. Heckemann B, Breimaier HE, Halfens RJ, Schols JM, Hahn S. The participant's perspective: learning from an aggression management training course for nurses. Insights from a qualitative interview study. Scand J Caring Sci [Internet]. 2016 [cited 2018 nov 28];30(3):574-85. Available from: https://doi.org/10.1111/scs.12281.

30. Caveião C, Zagonel IPS, Coelho ICM, Peres AM, Montezeli JH, Venturi KK. Competências na disciplina de administração em enfermagem: pesquisa exploratória descritiva. Online Brazilian J Nurs [Internet]. 2014 [cited 2018 nov 28];13(4):602-12. Available from: https://doi.org/10.5935/1676-4285.20144770.

 Barbiani R, Nora CRD, Schaefer R. Nursing practices in the primary health care context: a scoping review. Rev Lat Am Enfermagem [Internet]. 2016 [cited 2018 nov 28];24:e2721. Available from: <u>https://doi.org/10.1590/1518-8345.0880.2721</u>.
 Ferreira SRS, Périco LAD, Dias VRFG. The complexity of the work of nurses in Primary Health Care. Rev Bras Enferm [Internet].
 [cited 2018 nov 28];71(supl. 1):704-9. Available from: <u>https://doi.org/10.1590/0034-7167-2017-0471</u>.

33. Portaria nº 648, de 28 de março de 2006 (BR) [Internet]. Aprova a Política Nacional de Atenção Básica, estabelecendo a revisão de diretrizes e normas para a organização da Atenção Básica para o Programa Saúde da Família (PSF) e o Programa Agentes Comunitários de Saúde (PACS). Diário Oficial da União. 29 mar. 2006 [cited 2018 nov 28]. Available from:

http://bvsms.saude.gov.br/bvs/saudelegis/gm/2006/prt0648_28_03_2006.html.

34. Portaria nº 2.436, de 21 de setembro de 2017 (BR) [Internet]. Aprova a Política Nacional de Atenção Básica, estabelecendo a revisão de diretrizes para a organização da Atenção Básica, no âmbito do Sistema Único de Saúde (SUS).). Diário Oficial da União.
22 set. 2017 [cited 2018 nov 28]. Available from: <u>http://bvsms.saude.gov.br/bvs/saudelegis/gm/2017/prt2436_22_09_2017.html</u>.
35. Macêdo NB, Albuquerque PC, Medeiros KR. O desafio da implementação da educação permanente na gestão da educação na saúde. Trab. educ. saúde [Internet]. 2014 [cited 2018 nov 28];12(2):379-401. Available from: <u>https://doi.org/10.1590/S1981-77462014000200010</u>.

36. Salum NC, Prado ML. Continuing education in the development of competences in nurses. Texto Contexto Enferm [Internet]. 2014 [cited 2018 nov 28];23(2):301-8. Available from: <u>https://doi.org/10.1590/0104-070720140021600011</u>.

37. Sade PMC, Peres AM. Development of nursing management competencies: guidelines for continuous education services. 0080-6234 [Internet]. 2015 [cited 2018 nov 28];49(6):988-94. Available from: https://doi.org/10.1590/S0080-623420150000600016.