



Tecnologia e Inovação para o Cuidar em Enfermagem

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Silene Ribeiro Miranda Barbosa
(Organizadora)

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APRESENTAÇÃO

A coleção “Tecnologia e Inovação para o Cuidar em Enfermagem” é uma obra que retrata as discussões científicas diante das experiências diárias da enfermagem, dividido em capítulos que nortearam a aplicabilidade da ciência do cuidado.

O objetivo da proposta foi apresentar a coleção com assuntos atualizados de caráter informativo e gerador de reflexões visando o crescimento profissional. O contexto fundamenta as discussões, desde os cuidados de enfermagem, dentro da assistência hospitalar e da Atenção Primária Básica de Saúde (UBS), passando pela educação em saúde e por fim, e não menos importante, na enfermagem contemporânea, atualizando a proposta da oferta de ações e cuidados de enfermagem.

Os trabalhos estão divididos em três volumes a fim de subsidiar as informações, contextualizando junto à praticidade do cuidado. A apresentação dos conteúdos demonstra a evolução do conhecimento em consonância com a praticidade da oferta do cuidado.

A enfermagem contemporânea configura na preocupação com a saúde e na qualidade de vida profissional, assim como na oferta e na expansão dos cursos, com metodologias inovadoras de ensino e suas repercussões. O tema Educação em Saúde retrata ações em saúde que possibilitam a melhora individual e profissional que repercutiram na conduta profissional. O tema Cuidado em Enfermagem deslancha experiências contextualizadas que fortaleceram a dinâmica da assistência de enfermagem, tanto a nível Hospitalar quanto em nível de Atenção Básica.

Assim sendo, a obra Tecnologia e Inovação para o Cuidar em Enfermagem, traz fundamentalmente os resultados diante das oportunidades e das experiências vivenciadas pelos autores, embasados cientificamente. A conhecer a dedicação e fundamentação da Editora Atena por um material de qualidade é que destaco a confiabilidade na contribuição do conhecimento.

Silene Ribeiro Miranda Barbosa

SUMÁRIO

CAPÍTULO 1.....1

A IMPORTÂNCIA DA ASSISTÊNCIA DE ENFERMAGEM EM CLIENTES POLITRAUMATIZADOS NO ÂMBITO INTRA-HOSPITALAR – UMA REVISÃO INTEGRATIVA

Renato Ferreira Negrão

Rauane Rodrigues Teixeira

Cristiane Cavalcante Amorim

Taline Monteiro Barros

Geovana Ribeiro Pinheiro

Leandro Silva Pimentel

DOI 10.22533/at.ed.9552016101

CAPÍTULO 2.....6

AÇÕES EDUCATIVAS SOBRE A IMPORTÂNCIA E OS BENEFÍCIOS DA LAVAGEM DAS MÃOS ANTES DO CONSUMO DE ALIMENTOS

Nayanne Victória Sousa Batista

Narla Daniele de Oliveira Souza

Kalyane Kelly Duarte de Oliveira

Erika Evelyn da Costa

Maria Jussara Medeiros Nunes

Marcelino Maia Bessa

Karlina Kelly da Silva

Lucas Souza Leite

Thaina Jacome Andrade de Lima

Flávio Carlos do Rosário Marques

Maria Valéria Chaves de Lima

Francisco Clebyo da Silva

DOI 10.22533/at.ed.9552016102

CAPÍTULO 3.....12

ATUAÇÃO DO ENFERMEIRO NAS LESÕES TRAUMÁTICAS PÓS-CIRÚRGICAS NA PERSPECTIVA DA ARTICULAÇÃO DAS REDES DE ATENÇÃO À SAÚDE

Danielle Bezerra Cabral

Daniela Cristina Zanovelo

Larissa Gabriella Schneider

Jacira Batista de Oliveira

Renata Mendonça Rodrigues

DOI 10.22533/at.ed.9552016103

CAPÍTULO 4.....24

APLICAÇÃO DA FERRAMENTA SENTIMENTOGRAMA NA EDUCAÇÃO EM SAÚDE SEXUAL E REPRODUTIVA COM ADOLESCENTES

Gabriela Silva dos Santos

Ana Beatriz Azevedo Queiroz

Cosme Sueli de Faria Pereira

Dirlei Domingues dos Santos

Felipe Baima dos Santos
Alison Malheiros de Castro
DOI 10.22533/at.ed.9552016104

CAPÍTULO 5..... 32

AS DIMENSÕES ASSISTIR E GERENCIAR NO CUIDADO DE ENFERMAGEM NA ATENÇÃO BÁSICA DE SAÚDE

Sarah Masson Teixeira de Souza
Beatriz Francisco Farah
Fernanda Esmério Pimentel
Juliana Nazaré Bessa-Andrade
Nádia Fontoura Sanhudo
Herica Dutra Silva
Maria Tereza Ramos Bahia
Denise Barbosa de Castro Friedrich
Thays Silva Marcelo

DOI 10.22533/at.ed.9552016105

CAPÍTULO 6..... 48

AS GLOSAS NO SERVIÇO DE INTERNAÇÃO DOMICILIAR: ERROS E CUSTOS

Adam Carlos Cruz da Silva
Vivian Schutz

DOI 10.22533/at.ed.9552016106

CAPÍTULO 7..... 57

ATUAÇÃO DA EQUIPE INTERDISCIPLINAR NO ALEITAMENTO MATERNO

Rebecca Camurça Torquato
Ana Paola de Araújo Lopes
Ana Raquel Bezerra Saraiva Tavares
Kesia Cartaxo Andrade
Maria Solange Nogueira dos Santos
Vanusa Maria Gomes Napoleão Silva
João Emanuel Pereira Domingos
Lidiane do Nascimento Rodrigues
Aliniana da Silva Santos
Edna Maria Camelo Chaves

DOI 10.22533/at.ed.9552016107

CAPÍTULO 8..... 66

ATUAÇÃO DO ENFERMEIRO E O DIREITO À SAÚDE: A ADVOCACIA DO PACIENTE

Eloá Carneiro Carvalho
Helena Maria Scherlowski Leal David
Norma Valéria Dantas de Oliveira Souza
Thereza Christina Mó y Mó Loureiro Varella
Sheila Nascimento Pereira de Farias
Bruno Soares de Lima
Karla Biancha Silva de Andrade

Sandra Regina Maciqueira Pereira
Samira Silva Santos Soares
Midian Oliveira Dias
Carolina Cabral Pereira da Costa
DOI 10.22533/at.ed.9552016108

CAPÍTULO 9..... 78

AUDITORIA DE ENFERMAGEM COMO MÉTODO EDUCACIONAL EM UMA UNIDADE DE TERAPIA INTENSIVA

Gislaine Saurin
Fernada Braga Azambuja
Anelise Ferreira Fontana
Jeane Cristine de Souza da Silveira
DOI 10.22533/at.ed.9552016109

CAPÍTULO 10..... 86

AUTOESTIMA E SAÚDE MENTAL: RELATO DE EXPERIÊNCIA DE UMA OFICINA TERAPÉUTICA EM UM CENTRO DE ATENÇÃO PSICOSSOCIAL

Valéria da Silva Matos Lima
Deylane Abreu dos Santos
Naiara de Jesus Teles Gonçalves
Whellen Auxiliadora Lobato Silva
Brenda do Socorro Gomes da Cunha

DOI 10.22533/at.ed.95520161010

CAPÍTULO 11..... 93

AVALIAÇÃO DA VIABILIDADE DAS MÍDIAS SOCIAIS PARA ORIENTAÇÃO DA POPULAÇÃO SOBRE TEMAS RELACIONADOS À SAÚDE

Ana Heloísa Lopes da Silva
Luana Lucas dos Santos
Reginaldo Dias
Kelly Cristina Suzue Iamaguchi Luz

DOI 10.22533/at.ed.95520161011

CAPÍTULO 12..... 99

GERENCIAMENTO DA DOR E ESTRESSE NO RECÉM-NASCIDO: PROPOSTA DE PROTOCOLO

Ana Carolina Santana Vieira
Anne Laura Costa Ferreira
Anyele Albuquerque Lima
Beatryz Rafaela Santos Lima
Bruna Luiy dos Santos Guedes
Camila Thayná Oliveira dos Santos
Izabelly Carollynnny Maciel Nunes
Ingrid Martins Leite Lúcio
Lara Tatyane Ferreira Santos Honório
Luana Cavalcante Costa Ferraz
Rossana Teotônio de Farias Moreira

DOI 10.22533/at.ed.95520161012

CAPÍTULO 13.....113**IMPACTO DA ESTOMIA INTESTINAL PARA A SEXUALIDADE DA PESSOA
ESTOMIZADA: REVISÃO INTEGRATIVA DE LITERATURA**

Francisco Gleidson de Azevedo Gonçalves

Viviane da Silva de Santana

Suellen da Silva Nascimento Rosa

Ariane da Silva Pires

Eugenio Fuentes Pérez Júnior

Ellen Marcia Peres

Lidianne Passos Cunha

Albert Lengruber de Azevedo

Deyvyd Manoel Condé Andrade

Kelly Cristina Freire Doria

DOI 10.22533/at.ed.95520161013**CAPÍTULO 14.....127****MÉTODO CUMBUCÁ: UMA PROPOSTA DE GESTÃO DO CONHECIMENTO NO
AMBIENTE HOSPITALAR**

Ligia Lopes Ribeiro

Nathália Telles Paschoal Santos

Elizabete da Silva Dantas de Jesus

José Wattylla Alves dos Santos Paiva

Paula Taciana Soares da Rocha

DOI 10.22533/at.ed.95520161014**CAPÍTULO 15.....134****NURSE PERFORMANCE IN HEALTH EDUCATION: LITERATURE REVIEW**

Ilka Kassandra Pereira Belfort

Pablo Mafra Silva

DOI 10.22533/at.ed.95520161015**CAPÍTULO 16.....149****O OLHAR DE ENFERMEIROS SOBRE PESQUISA QUANTITATIVA COM
AGENTES COMUNITÁRIOS DE SAÚDE**

Isadora Caldeira Belini

Heloisa Campos Paschoalin

Rosangela Maria Greco

Norma Valéria Dantas de Oliveira Souza

Denise Cristina Alves de Moura

Rejane da Silva Rocha

Caio César Batista Andrade

DOI 10.22533/at.ed.95520161016**CAPÍTULO 17.....155****O PAPEL DO ENFERMEIRO NA AUDITORIA DE DISPENSAÇÃO DE MATERIAIS
HOSPITALARES**

Werbeth Madeira Serejo

Wanberto dos Reis Pinto
Wemerson Campos Furtado
Jairon dos Santos Moraes
Igor Ricardo de Almeida Vieira
Cleidiane Cristina Sousa da Silva de Oliveira
Márcia Fernanda Brandão da Cunha
Marina Apolônio de Barros Costa
Rafael Rocha de Melo
Hedrielle Gonçalves de Oliveira
Nathália Cristina Ribeiro Pinheiro Silva
Raylena Pereira Gomes

DOI 10.22533/at.ed.95520161017

CAPÍTULO 18..... 164

ORIENTAÇÕES DE ENFERMAGEM PERIOPERATÓRIAS VISANDO O AUTOCUIDADO NO DOMICÍLIO

Natália Machado Passos da Silva
Rafaele de Oliveira Santos
Norma Valéria Dantas de Oliveira Souza
Ariane da Silva Pires
Francisco Gleidson de Azevedo Gonçalves
Carlos Eduardo Peres Sampaio

DOI 10.22533/at.ed.95520161018

CAPÍTULO 19..... 176

PERCEPÇÃO DOS ADOLESCENTES SOBRE PAPILOMAVÍRUS HUMANO E A IMPORTÂNCIA DA VACINAÇÃO

Antônia Samara Pedrosa de Lima
Alyce Brito Barros
José Rafael Eduardo Campos
Sabrina Martins Alves
Maria Leni Alves Silva
Petrúcyra Frazão Lira
Emanuel Cardoso Monte
Thayná Bezerra de Luna
Francisco Rafael Soares de Sousa
Dayse Christina Rodrigues Pereira Luz

DOI 10.22533/at.ed.95520161019

CAPÍTULO 20..... 189

PROCESSO DE ENFERMAGEM NA EMERGÊNCIA DE UM HOSPITAL DE REFERÊNCIA DA REGIÃO NORTE DO BRASIL

Mallany Lurya dos Santos Miranda
Tatiana Peres Santana Porto Wanderley
Guiomar Virginia Vilela Assunção de Toledo Batello
Marcia Pessoa de Sousa Noronha

DOI 10.22533/at.ed.95520161020

CAPÍTULO 21..... 200**RECONHECIMENTO DA DETERIORAÇÃO CLÍNICA PEDIÁTRICA POR ENFERMEIRAS NA EMERGÊNCIA: ESTRATÉGIAS E CUIDADOS**

Jéssica Costa da Silva Sena
Juliana de Oliveira Freitas Miranda
Rebeca Pinheiro Santana
Keize Araújo de Oliveira Souza
Maricarla da Cruz Santos
Thaiane de Lima Oliveira
Francisca Claudia Pinheiro Barbosa

DOI 10.22533/at.ed.95520161021

CAPÍTULO 22..... 217**TECNOLOGIAS EDUCATIVAS MULTIDISCIPLINARES PARA GESTANTES EM UMA PERSPECTIVA DE CUIDADO AMPLIADO**

Deylane de Melo Barros
Marystella Dantas Magalhães
Jaira dos Santos Silva
Layana Maria Melo Nascimento
Laiz Alves Coutinho
Hallyson Leno Lucas da Silva
Mariza Inara Bezerra Sousa
Mayron Raphael Pereira Viana
Ayla Cristina Rodrigues Ramos da Costa
Thalita de Moraes Lima
Mayna Maria de Sousa Moura
Francisco Lucas de Lima Fontes

DOI 10.22533/at.ed.95520161022

CAPÍTULO 23..... 228**USO DO TELEMONITORAMENTO E TELENFERMAGEM COMO ESTRATÉGIA DE CUIDADO AO PACIENTE CRÔNICO AMBULATORIAL DURANTE A PANDEMIA COVID-19**

Alessandra Sant'Anna Nunes
Alyne Corrêa de Freitas Reis
Ariane da Silva Pires
Bruna de Jesus Freitas
Carla Tatiana Garcia Barreto Ferrão
Cíntia Araujo Duarte
Eugenio Fuentes Pérez Júnior
Fernanda Henriques da Silva
Kelly dos Santos Silva Pêgas
Patrícia Ferraccioli Siqueira Lemos
Rachael Miranda dos Santos
Raíla de Souza Santos

DOI 10.22533/at.ed.95520161023

CAPÍTULO 24.....**241****VISITA DOMICILIAR DO ENFERMEIRO AO ADOLESCENTE EM SITUAÇÃO DE VULNERABILIDADE: RELATO DE EXPERIÊNCIA**

Ellen Marcia Peres

Helena Ferraz Gomes

Francisco Gleidson de Azevedo Gonçalves

Gabriela Porto Salles de Assis

Dayana Carvalho Leite

Priscila Cristina da Silva Thiengo Andrade

Ariane da Silva Pires

Bruna Maiara Ferreira Barreto Pires

Inez Silva de Almeida

Andréia Jorge da Costa

Karine do Espírito Santo Machado

Gabriela Francisco Silva

DOI 10.22533/at.ed.95520161024**SOBRE A ORGANIZADORA.....****255****ÍNDICE REMISSIVO.....****256**

CAPÍTULO 15

NURSE PERFORMANCE IN HEALTH EDUCATION: LITERATURE REVIEW

Data de aceite: 01/10/2020

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ABSTRACT: Permanent Health Education (EPS) is described as a teaching method that adopts specific tools that generate critical reflection on care in health actions and services. The nurse as a health professional and provider of the care exercise must act on a scientific basis through permanent health education to improve the actions and services offered to the patient. The objective of this research was to analyze in the literature through a bibliographic review the role of nurses in health education. It was an integrative literature review. The data survey was carried out using the following databases: Latin American Literature in Health Sciences (LILACS), Nursing Database (BDENF), Scientific Electronic Library Online (SCIELO) and US National Library of Medicine (PubMED), using the following Health Sciences Descriptors (DeCS): Permanent education. Health Education. Nursing. The sample selection followed the following inclusion criteria: articles with full text available electronically and free of charge, written in the Portuguese language, published in the period between 2010 and 2020. As exclusion criteria, the following were established: case studies, works without abstract, editorials, dissertations, theses and scientific articles duplicated in more than

one database. After the search, 43 articles were pre-selected, after the search the inclusion and exclusion criteria were applied in the pre-selected scientific productions, the research sample resulted in 08 articles that were categorized and are displayed in a table (Chart 1). It is concluded that permanent education is a primordial tool in the health care process and the nurse as a professional who expresses his action through care must adopt it to guarantee the integrality of the assistance offered.

KEYWORDS: Permanent education. Health Education. Nursing.

RESUMO: A Educação Permanente em Saúde (EPS) é descrita como um método de ensino que adota ferramentas específicas que geram reflexão crítica sobre o cuidado assistencial nas ações e serviços de saúde. O enfermeiro enquanto profissional de saúde e provedor do exercício do cuidar deve atuar com base científica através da educação permanente em saúde para aprimorar as ações e serviços ofertados ao paciente. O objetivo desta pesquisa foi analisar na literatura através de uma revisão bibliográfica a atuação do enfermeiro na educação em saúde. Tratou-se de uma revisão integrativa da literatura. O levantamento de dados foi realizado através das seguintes bases de dados Literatura Latino-Americana em Ciências de Saúde (LILACS), Banco de Dados da Enfermagem (BDENF), Scientific Electronic Library Online (SCIELO) e US National Library of Medicine (PubMED), utilizando os seguintes Descritores em Ciências da Saúde (DeCS): Educação permanente. Educação em Saúde. Enfermagem. A seleção da

amostra obedeceu aos seguintes critérios de inclusão: artigos com texto completo disponível eletronicamente e de forma gratuita, redigidos no idioma português, publicados no recorte temporal entre 2010 a 2020. Como critérios de exclusão, foram estabelecidos: estudos de caso, trabalhos sem resumo, editoriais, dissertações, teses e artigos científicos duplicados em mais de uma base de dados. Posterior à busca foi pré-selecionados 43 artigos, após a busca aplicou-se os critérios de inclusão e exclusão nas produções científicas pré-selecionadas a amostra da pesquisa resultou em 08 artigos que foram categorizados e estão dispostos em quadro (Quadro 1). Conclui-se que a educação permanente é uma ferramenta primordial no processo do cuidado em saúde e o enfermeiro como profissional que expressa sua ação através do cuidado deve adotá-la para garantir a integralidade da assistência ofertada.

PALAVRAS-CHAVE: Educação permanente. Educação em Saúde. Enfermagem.

BACKGROUND

Health education is configured to promote services for individual and collective care with a focus on health promotion, disease and disease prevention, treatment and rehabilitation. These are educational actions that generate physical, psychological and social comfort. The nurse as a health professional who manages the care process contributes to the teaching of behaviors that effect self-care.

Permanent Health Education (EPS) is described as a teaching method that adopts specific tools that generate critical reflection on care in health actions and services. It is, therefore, an educational and strategic process that aims to improve the care provided and, consequently, improve the quality of health services (MOREIRA et al., 2017).

The concept of EPS was initially approached in the 80s and 90s by the Pan American Health Organization (PAHO) due to the need to expand and generate comprehensive health actions and services. This educational concept became public policy in Brazil in 2004 with the implementation of the National Policy for Permanent Education¹ (PNEPS) which aimed to train professionals and health, promoting changes and transformations that would meet the real needs of the population (HOLANDA; MINEIRO, 2018).

Thus, permanent education enhances the skills and abilities developed in health services, based on the valorization of knowledge and educational projects that aim to improve care, establishes critical and reflective behaviors, based on an instrument for professional updating (ABREU; CARNEIRO, 2018).

Within this context, regarding the competences attributed to health professionals, it is necessary to include a critical view that favors the development

¹ Ordinance No. 198 / GM on February 13, 2004 Institutes the National Policy for Permanent Education in Health as a strategy of the Unified Health System for the training and development of workers for the sector and takes other measures

of an articulated form of contextualization of services. Nursing is defined as a social practice historically built to care, manage and educate, and insofar as it adopts educational interactions, it can contribute to the execution of more organized practices.

In view of the above, the relevance of this study was justified by the need to analyze the gaps related to EPS and the activities attributed to nursing in hospital contexts, with emphasis on the difficulties of carrying out the actions inherent to EPS, since EPS constitutes if it is a tool that qualifies the nurse's performance in face of the complexities of the profession.

Thus, this research aimed to analyze in the literature through a bibliographic review the role of nurses in health education. While, the specific objectives of this research consisted of: Discussing health education and the improvement of care and describing the role of nurses as health educators.

This study is divided into four chapters: Introduction, which presents a survey on nursing and health education. The second chapter consists of the methodology used to compose the present research, in the third chapter there is the theoretical development that addresses the research object. The fourth chapter deals with final considerations.

LITERATURE REVIEW

Permanent Health Education as a strategy for improving care within the scope of the Unified Health System

Education is described as a global change strategy. Educating generates adjustments to human variations, allowing continuous evolution, updating of knowledge, breaking of paradigms, insertion of pedagogical standards that have a scientific basis and nature, that is, guided, above all, in science.

In 1987, the Pan American Health Organization (PAHO) characterized Permanent Health Education (EPS) as a strategy linked to the teaching process, with the aim of improving the performance of people and groups. EPS suggests the modification of professional practice, works in the line of critical thinking, with an approach in the cognitive, affective and psychomotor areas (SANTOS; LINO, 2018).

Permanent Education is based on the principle that the teaching-learning methodology must be conceived based on personal and joint training. It is an articulation with the formation of specific professional profiles, the search for the structuring of measures that highlight the issues of problematization of the work process (OTTO, et al., 2019).

In 2003, the Ministry of Health's Secretariat for Labor Management and

Education (SGTES)² was created. SGTES has the purpose of generating and coordinating the activities related to the training of human resources in the health area. SGTES elaborates, creates, plans and organizes activities related to professional development that reflects in the improvement of health care, promoting intersectoral articulations and educational bodies, strengthening activities that stimulate constant and continuous training processes in the health sectors, in addition, it formulates also policies that help to strengthen the interactions between education and health.

SGTS's mission is to motivate, propose modifications and improvement in the technical training, mid-level, undergraduate and postgraduate courses inherent to health services, as well as to stimulate the process of permanent training of health work with the purpose of strengthening the premises of SUS (BRAZIL, 2003).

In this way, SGTES elaborates and executes actions for integration and improvement of the activities carried out in the health area. These are actions designed to promote the participation of workers in the Unified Health System with an emphasis on knowledge that positively changes the assistance provided to health users.

It is, therefore, a department of technical, political-administrative, financial and operational responsibility with states and municipalities, teaching units, organizations that mobilize education and institutions that generate pedagogical education in order to establish the norms inherent to professional development.

The teaching-learning process restructures and reconfigures the professional who remains inserted in it, it is a constant variant of changes that contributes to the improvement of the actions carried out. Permanent health education is carried out through mechanisms of evaluation, appreciation and modification of professional practice (RODRIGUES et al., 2018).

Within this premise, it is emphasized that education generates new models of professional behavior, acts in the assistance restructuring, enables the continuous resizing of objectives. Educating encompasses learning and teaching, aims at a progressive search for innovations and establishes theories based on overcoming fragmentation and problems (SADE et al., 2019).

In 2004 the National Policy for Permanent Education in Health (PNEPS) was instituted in order to strengthen professional development measures with an emphasis on qualifying and improving health actions and services. Such policy states in its Art.1 that it is a strategy of the Unified Health System (SUS) for the training and development of workers for the sector (BRAZIL, 2004).

Within this context, it is possible to affirm the legal mechanisms established

² The Ministry of Health's Secretariat for Labor Management and Education (SGTES), created by Decree No. 4,726, of June 9, 2003.

over the years were crucial for the improvement of health care within the scope of SUS. Such mechanisms have the affirmations that contribute to the continuous modification of the work through the main agent, in this case, the health professional, providing him with strategies to improve his services (RIBEIRO et al., 2018).

Among the functions inherent to the PNEPS, the identification of training and qualification needs of professionals within the scope of the Unified Health System, the construction of strategic measures that act in the process of qualifying health care, assistance and management, specific training of health managers with an emphasis on the health care network making integral care and overcoming fragmentation, that is, acting in an intercomplementary way (BRAZIL, 2004).

In addition, it is up to the PNEPS to propose intersectoral policies based on the need to improve the formulation of health care policies, as well as to encourage changes in the methods used in health practices with the implementation of normative instructions and national curricular guidelines for services. in health, as well as establishing relationships and articulations across the country in favor of improving and strengthening the health education process (BRAZIL, 2004).

The attributions of the legal measures established to corroborate health assistance through the organization and training of the teaching-learning process in the training of health workers, demonstrate that the educational basis reflects directly on the services performed, and consequently on the scenario in the health field. (CORREIA; BONETTE, 2018).

Thus, it is emphasized that the strategies intrinsic to the improvement of management and care practices based on the process of permanent health education are developed around an ordering axis of the sets of activities performed, transforming the new models of educating, teaching and learning .

In 2007, the Ministry of Health launched ordinance 1.996, which provides for the guidelines for the implementation of the National Policy on Permanent Education in Health. This policy aims to provide specific measures to overcome the fragmentation of health services according to regional inequalities.

Art. 1 Define new guidelines and strategies for the implementation of the National Policy for Permanent Education in Health, adapting it to the operational guidelines and the regulation of the Pact for Health.

Single paragraph. The National Policy for Permanent Education in Health must consider regional specificities, overcoming regional inequalities, training and development needs for health work and the already installed capacity for institutional provision of formal health education actions (BRAZIL, 2007).

The planning process of health actions and services is evaluated, monitored

and coordinated through an organizational flow that begins in the learning process of health professionals. Promoting a structural basis that amplifies the teaching process directly reflects on the quality of health services offered to the population.

Health education actions and strategies have cooperative and ordering co-management in all areas of the system (municipal, state and federal) to act in the construction of plans that contribute to the permanent health education measures already defined and established (CORREIA; BONETTE, 2018).

The concept of permanent health education incorporates organizational activities that envision work learning, the teaching process, the mechanisms of learning, teaching and monitoring, as well as, action plans, proposed action guidelines, planning and training, stimulating the adoption of a stance based on mutual responsibility, that is, educational and health (RODRIGUES et al., 2018).

Thus, the process of training and qualification of health professionals must have as reference the realistic scenario of the country. Social inequalities and regional discrepancies in relation to the population's socioeconomic profiles as well as in the provision of health actions and services must be a determining factor in defining the strategies and tools that will be adopted as institutional and pedagogical practices are carried out to train the healthcare professional (SADE et al., 2019).

The training processes related to permanent health education are defined by a wide situational analysis, taking into account the epidemiological, political, social, economic and work scenario, as well as the recognition of problems of an educational nature.

Permanent Education in Health is, therefore, a political articulation that focuses on the perspectives of educational practice with up-to-date training and techniques and that guarantees the adequate premises to exercise actions and services and health in an integral way.

The role of the nurse as a health educator

Promoting health education consists of performing activities that significantly contribute to improving the quality of life within the uniqueness of each individual, as well as for society in general. The nurse as a collaborator of practices that contribute to health carries out educational actions that work in the face of complaints, fears, expectations, understanding physical, psychological and social needs, with a posture capable of listening and welcoming each patient.

Nursing has been increasing its space in the health area every day, both in the national context and in the international scenario. Currently, the practice of nursing is presided through Law 7,498 of 1986³, which in its text describes the necessary

³ Law No. 7,498 / 86, of June 25, 1986, which provides for the regulation of the exercise of Nursing and provides other measures.

requirements for obtaining the title of nurse, nursing technician, nursing assistant, and midwives. Such Law is regulated by Decree 94,406 of 1987⁴, which also provides for the exercise of nursing.

Nursing is integrated with its own framework of technical and scientific knowledge, built and reproduced by a set of social, ethical and political practices that are processed through teaching, research and assistance. The historical and legal precepts inherent to the profession translate it as science of the care process in a unique way, in the family and / or community (LAVICH et al., 2017).

The work of the nurse and the multidisciplinary health team meets two basic aspects. The first is to preserve, respect and recognize the particularity, individuality and variability of users' situations and needs; the second, in turn, is to comply with certain rules, regulations and general values, in addition to permanently inserting / integrating the activities of the multidisciplinary team. Nursing, defined as a social practice historically built to care, to manage and to educate (REZENDO; OLIVEIRA; FRIESTINO, 2017).

Within this context, it is emphasized that nursing has the ability to intercede in the health-disease process, conducting measures that recover and preserve health through activities performed through the inherent attributions of the profession as well as those performed together with other professionals in the field. team.

As the professional nurse is an instructor who is inserted in the scenario that guides Health Education, it is necessary to guide the population, and why not expose, to develop alternatives for the population to take actions that promote health in its broadest sense. The education instructor is the professional who uses languages and gestures as a working tool in this collective battle. Health education encompasses all health attitudes must be introduced in the nurse's daily practice (KIRSCH; SLOB, 2018 p.225).

The nurse must have information inherent to health care and provide it to the patient, family and society in general. In addition, the nurse must accompany the patients and be available to resolve doubts whenever necessary, building a relationship of trust and communication (SANTOS; LINO, 2018).

When providing guidance, patients' needs for knowledge and clarification must be raised, respecting their level of education so that communication is effective, thus contributing to the effectiveness of treatment. Health education is to ensure that health measures permeate professional practices, being disseminated in daily life through care during the performance of activities of daily living (REZENDO; OLIVEIRA; FRIESTINO, 2017).

The professional practice of nurses requires that they are willing to perform

⁴ Decree No. 94,406 of 1987, which regulates Law No. 7,498, of June 25, 1986, which provides for the exercise of Nursing, and provides other measures.

functions that fit their competence and are associated with great results, as well as singular results, so that there can be no aggrandizement of one another, but that resolvability in any circumstances (LAVICH et al., 2017).

The nurse professional performs important activities inserted in the care process, since his actions are guided by health policy and planning activities aiming at health promotion, protection and recovery. The work of the nursing team is configured by the concern with the therapeutic environment, the administration of parts of the medical act, including planning, administration, and the provision of continuous nursing care (GEOVANINI et al., 2013).

Within the scenario that is involved the nurse professional through a critical and ethical sense promotes the adaptation of care, aiming to generate primordial conditions of propagation for self-care. Rodrigues (2017) states in his study that nurses improve health actions and services when educating the patient.

Permanent health education is seen as an important management tool, based on the assumption that it enables personal changes. In nursing, permanent education promotes the transformation of health actions with the aim of providing an improvement in the quality of care (CORREIA; BONETTE, 2018).

The nurse must adopt care measures that establish specific practices within the uniqueness of each patient. Establishing a safe relationship with the patient allows the continuity and execution of the care and assistance provided. The continuous training of the exercise through permanent education in health enables nursing to promote the updating of the team, reflecting in the improvement of the offer of care to patients (SADE et al., 2019).

Adherence to this educational-based paradigm triggers new actions, such as enabling the patient to understand the descriptions of his clinical and symptomatic condition in a clear and succinct way, which corroborates the awareness of the practices that must be adopted to improve the quality of life.

The nurse promotes close care. Health care and systematization of assistance are the activities inherent to the profession. In this way, nursing professionals carry out actions that aim to satisfy the population's health needs and defend the principles of public health and environmental policies, which guarantee the integrality of care, resolution, preservation of people's autonomy (HOLANDA; MINEIRO, 2018).

However, despite the inclusion of measures that aim to improve health care as the adoption of the practice that stimulate the process of permanent training, some issues can be considered as an obstacle when it comes to the provision of care, as nursing professionals are usually overloaded with bureaucratic activities, this reflects in direct patient care, making nursing care flawed, fragmented and robotic (LAVICH et al., 2017).

Therefore, nursing professionals in the profession of their profession are

susceptible to work in scenarios of personal demotivation with a lack of recognition and devaluation, these factors being directly interfering in the assistance providing few encouraging results.

Thus, it is relevant, therefore, to emphasize that, through planned and safe assistance with the implementation of permanent health education strategies, nurses develop direct and continuous assistance, exercising a social practice based on a dynamic process that it involves a network of relationships, interactions, associations and meanings that reflect on the improvement of health care.

METHODOLOGY

It was a literature review. This research model allows a detailed approach in which it seeks to solve a hypothesis by means of theoretical references already published referring to the other research methods, analyzing and discussing the various scientific contributions that can guide a new methodological production (PIZZANI et al., 2012).

The data survey was carried out through the following research bases: Latin American Literature in Health Sciences (LILACS), Nursing Database (BDENF), Scientific Electronic Library Online (SCIELO) and US National Library of Medicine (PubMED) , using the following Health Sciences Descriptors (DeCS): Permanent education. Health Education. Nursing.

For the selection of articles, the following inclusion criteria were established: articles with full text available electronically and free of charge, written in Portuguese, published in the period between 2010 and 2020. As exclusion criteria, the following were established: case studies, works without abstract, editorials, dissertations, theses and scientific articles duplicated in more than one database.

During the selection process, the following steps were followed: 1) search for articles using the health descriptors in the databases previously defined, resulting in 43 articles, followed by the second step; 2) recognition of the articles with the object of study of the research in order to verify the existence of the correlation of the findings with this study, discarding 20 articles; 3) application of the inclusion and exclusion criteria; 4) definition of the total sample of 08 articles that were categorized and are displayed in a table (Chart 1).

With regard to ethical aspects, this research respected the authorship of the information used during all stages of the study, guaranteeing the veracity of the data of the scientific productions used, and obtaining only interest in the formulation of bases in a scientific nature in health.

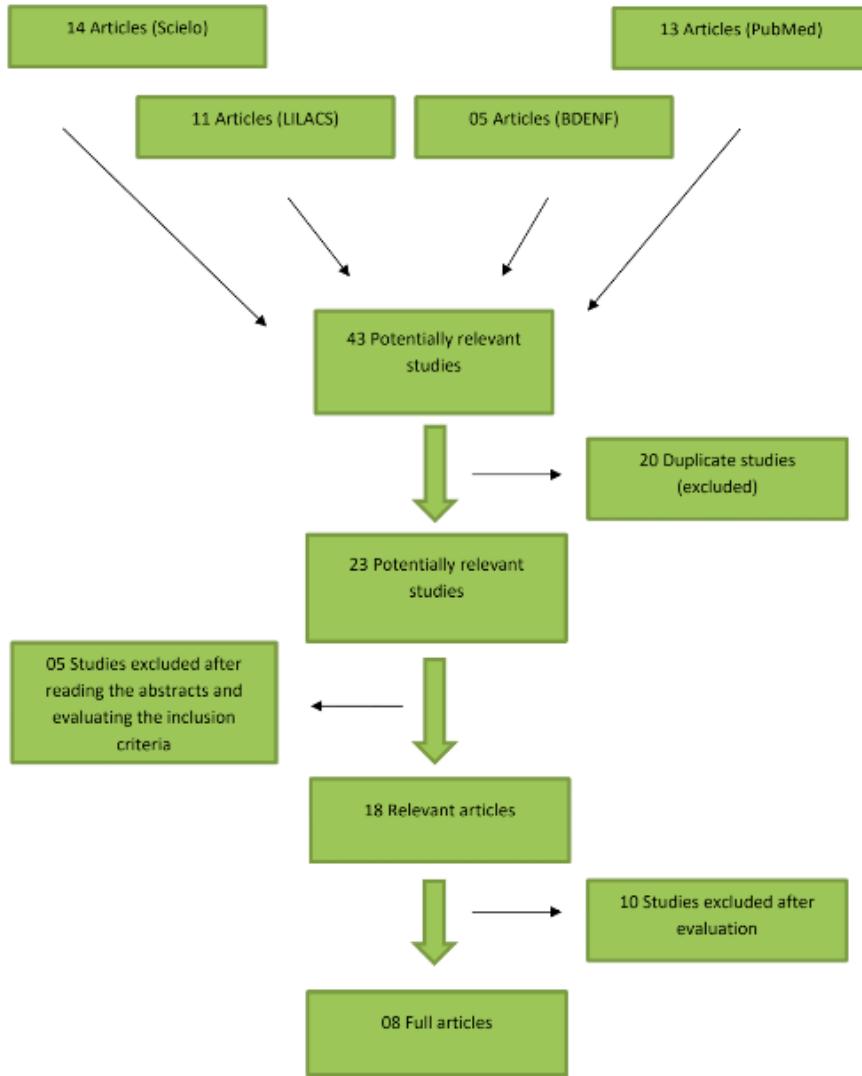


Figure 1 - Flowchart for the selection process of articles to compose the research.

Fonte: (Elaboração própria)

RESULTS AND DISCUSSIONS

News	Authors	Title	Year	Results
01	Rodrigues et al.	Permanent education as an object of transformation: literature review	2018	It was found that health education is characterized as an object of transformation that aims to meet the improvement of activities carried out through continuous learning and reflection of practices.
02	Otto et al.	Permanent health education and nursing.	2019	In view of the above, permanent health education aims to awaken a critical view of the nursing team, strengthening and improving care through a committed professional posture.
03	Ribeiro et al.	Health education as an object of improving care.	2018	However, it is important to emphasize that health education provides the planning of actions, encourages updating and qualification, in addition to organizing the health service making it more humanized and safer.
04	Correia; Bonette.	Permanent health education as an instrument of transformation.	2018	The speeches define the health education process as a strategy to improve care, establishing safety in the exercise of nursing.
05	Santos; Lino.	Nursing performance and the process in health education.	2018	This paper concludes that health education directly supports the exercise of safe and updated nursing.
06	Rezende; Oliveira and Friestino.	Permanent education in nursing and the use of technologies: an integrative review	2017	It was possible to identify that the technologies associated with permanent education are present in the daily practice of nursing, both in management and care practices.
07	Lavich et al.	Permanent education actions for nurses facilitating a nursing education center	2017	It is believed that EPS can be present in different health scenarios, incorporated in the work of nurses and other professionals who are part of a health team.
08	Sade et al.	Demands of permanent nursing education in a teaching hospital.	2019	The results show that permanent health education considers the need for educational actions to provide nursing improvement.

Chart 1. Identification of the articles selected to compose the research according to:
title, authors, journal, year (2010 to 2020).

Source: (Own elaboration)

During the search for the scientific findings, in the first stage of the research, she identified 43 productions that showed initial similarity with the object of study of the present study. Subsequently, a detailed reading was carried out, which enabled the disposal of 20 productions that did not meet the premises previously established, addressing different objectives and target audience. Consequently, the inclusion and exclusion criteria were applied, which defined a total sample of the productions resulting in 08 articles.

After the analysis of the selected articles, it was identified that the majority of publications occurred in 2018 with 04 articles published, followed by 02 publications from 2019 and 02 productions from 2017. The presentations of the selected productions were categorized, highlighting: authors of the research, title, year of publication and study results.

In short, the selected articles define permanent health education as an instrument that helps to improve the care and actions offered in health, through the planning of strategies, protocols, manuals and institutional standards with continuous updating.

According Rodrigues et al (2018) permanent health education enables the adoption of tools that contemplate the articulation of measures and that generate an educational process that can be operationalized within different contexts. Lavich et al (2017) describes that health education generates the construction of actions based on a dialogical relationship between health professionals, articulating them according to the diagnosed deficiencies.

Other scientific findings define that the concept of health education means personal training, structuring the professional base, changing practices, promoting interventions and solving problems, generating self-analysis, self-management and transformation.

Correia and Bonette (2018) propose that the devices used in the promotion of permanent health education meet the specificities of the context in which they will be implemented, aiming to meet the needs of the institutions according to the daily life of the nursing team professionals.

Permanent education is based on premises that simultaneously generate teaching and learning, incorporating teaching-learning organizations. The methods that encompass permanent health education consider the construction of a changing reality that meets the transformation of health care actions and services.

However, Sade et al (2019) evidences in their study that some factors such as work overload regarding the accumulation of skills aimed at nursing professionals directly interfere in their participation in training programs.

Corroborating with these findings Santos and Lino (2018) point out in their research that the health education process must be established aiming at updating the

assistance offered by the nursing team concomitantly with the solution of problems, however, faced with scenarios camouflage the use of measures and strategies that make permanent education feasible, including the burden of nursing professionals.

Ribeiro et al (2018) point out that nursing must present a basis adopted in the design of an educational paradigm that puts in place measures and strategies that highlight the adversities and resistance found in the daily lives of professionals.

Thus, it is understood that permanent health education as a tool that modifies nursing work generates impacts centered on transformations and changes, elucidating the development of tasks in an organized and effective way through educational actions.

CONSIDERATIONS

Permanent health education is a strategy that makes the health care process viable in a holistic way, generating a wide view of the scenario in which care measures will be implemented in a singular or pluralized way. It is, therefore, a method of implementing changes and modifications based on methodologies in order to improve the quality of services.

The productions selected for the discussions of this present research point out that permanent health education has a historical context that sought to implement and simultaneously improve this theme over the years and that is understood until today and remains in constant improvement.

In addition, studies show that nursing as a provider of direct care to the patient, and that it must be able to change and modify it to improve the activities performed in the scope of care. The nurse takes care, listens, understands and welcomes the patient, the care process is inherent to nursing and this must be passive to adaptations.

Thus, the methodology used to insert the educational processes in the health field trigger changes that require the improvement of the work developed, generating a continuing education in consensus with the literature on concepts, with the perspective of contributing to the improvement of the assistance provided to the user and the community .

The practice of nursing faces difficulties that prevent the defragmented operationalization of health care, these must be overcome in order not to interfere in the patient's health care. Permanent health education is a tool that corroborates the identification of the problem, strategic planning, teaching-learning methods and practices, awakening an expanded and critical view, enabling possibilities for changes, in addition to understanding the professional difficulties of nursing.

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ÍNDICE REMISSIVO

A

- Ações educativas 6, 24, 26, 30, 229
Adolescentes 24, 26, 27, 28, 29, 30, 31, 176, 177, 178, 179, 180, 181, 182, 184, 185, 186, 187, 188, 214, 226, 242, 244, 245, 246, 247, 248, 251, 252
Advocacia do paciente 66, 67, 68, 72, 74, 75, 76, 77
Agentes comunitários de saúde 149, 151, 152
Aleitamento materno 57, 58, 59, 60, 61, 62, 63, 64, 65, 102, 103, 104, 108, 218, 220, 221, 222, 224
Ambiente hospitalar 76, 127
Ambulatorial 17, 49, 175, 216, 221, 228, 229, 231, 232, 235, 245, 252
Articulação das redes 12
Atenção básica de saúde 32, 65, 245, 246, 247
Atenção psicossocial 86, 87, 89, 92, 223, 252
Auditoria em enfermagem 56, 79, 84, 155, 157, 160, 161, 162, 163
Autoestima 86, 88, 90, 91, 92, 114, 115, 120, 121, 123, 124

C

- Clientes 1, 2, 3, 4, 7, 9, 10, 114, 119, 160, 162, 166
Covid-19 228, 229, 230, 231, 232, 233, 234, 236, 237, 238, 239, 240
Cuidado em enfermagem 41, 46

D

- Direito à saúde 66, 67, 68, 69
Dispensação de materiais 155
Dor 58, 63, 99, 100, 101, 102, 104, 105, 106, 107, 108, 109, 110, 111, 112, 191, 205

E

- Emergência 3, 4, 93, 95, 155, 188, 189, 190, 191, 192, 193, 195, 197, 198, 199, 200, 202, 203, 204, 205, 206, 207, 208, 210, 211, 214, 227, 232, 245
Enfermeiro 3, 4, 12, 15, 16, 20, 33, 34, 35, 39, 40, 41, 42, 43, 44, 45, 46, 47, 58, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 81, 82, 83, 84, 108, 122, 123, 124, 134, 135, 150, 155, 156, 157, 158, 159, 160, 161, 162, 163, 165, 171, 172, 173, 174, 189, 190, 191, 195, 197, 198, 206, 207, 223, 227, 231, 238, 241, 242, 243, 246, 248, 250, 252
Equipe interdisciplinar 57, 58, 59, 63, 243
Estomia intestinal 113, 114, 116, 120, 125, 175

Estratégia 26, 30, 35, 36, 45, 46, 71, 75, 97, 104, 105, 107, 121, 128, 130, 131, 175, 200, 207, 212, 220, 223, 226, 227, 228, 229, 232, 233, 234, 237, 238, 246, 247, 248, 250, 252, 254, 255

Estresse 68, 99, 101, 102, 104, 105, 106, 109, 191, 198, 199

F

Ferramenta 20, 24, 26, 29, 30, 31, 43, 79, 132, 135, 155, 156, 158, 195, 206, 209, 210, 219, 224, 226, 232, 237, 242

G

Gerenciamento 32, 33, 34, 35, 36, 40, 41, 42, 43, 45, 46, 71, 99, 101, 102, 106, 107, 110, 132, 161, 234

Gestantes 59, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227

Gestão do conhecimento 127, 128, 129, 130, 132, 133

Glosas 48, 50, 51, 53, 54, 55, 56, 160

H

Health 7, 13, 25, 33, 45, 46, 48, 58, 65, 67, 85, 87, 93, 100, 110, 111, 127, 134, 135, 136, 137, 138, 139, 140, 141, 142, 144, 145, 146, 147, 148, 150, 154, 156, 177, 190, 198, 216, 218, 227, 230, 240, 242

Hospital de referência 59, 189, 192, 195, 196, 197

I

Impacto 45, 48, 64, 78, 79, 84, 86, 89, 94, 113, 118, 224, 227, 243

L

Lavagem das mãos 6, 7, 8, 9, 10, 11

M

Método cumbuca 127, 130, 131

N

Nurse 13, 33, 46, 58, 67, 134, 135, 136, 139, 140, 141, 146, 147, 150, 156, 190, 213, 242, 254

P

Paciente crônico 228

Pandemia 228, 229, 230, 231, 232, 233, 234, 236, 237, 238, 239

Papilomavírus humano 176

Performance 33, 58, 67, 134, 136, 140, 144, 148, 156, 213

Pesquisa quantitativa 149, 151, 154

Politraumatizado 3, 4

População 2, 8, 14, 15, 16, 35, 39, 40, 41, 42, 43, 44, 50, 51, 60, 74, 93, 94, 95, 96, 97, 115, 128, 129, 149, 152, 153, 154, 177, 178, 187, 192, 203, 223, 232, 235, 237, 239, 243, 244, 249, 250, 251, 252

Processo de enfermagem 24, 46, 158, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199

Proposta de gestão 127

Protocolo 12, 15, 16, 20, 60, 99, 101, 103, 104, 108, 109, 110, 111, 206, 208, 213

R

Recém-nascido 99, 100, 102, 110, 111, 112, 218, 220, 221, 222, 224, 225

S

Saúde mental 86, 87, 88, 89, 90, 92, 155, 223, 226

T

Tecnologias educativas 217, 218, 219, 220, 221, 223, 225

Telemonitoramento 228, 229, 231, 232, 233, 234, 236, 238

Telenfermagem 228, 229, 239

Terapia intensiva 60, 78, 80, 83, 85, 100, 110, 111, 112, 122, 204

V

Vacinação 176, 178, 184, 186, 187, 188

Viabilidade das mídias 93, 94

Visita domiciliar 241, 242, 245, 250, 252

Vulnerabilidade 188, 241, 242, 243, 244, 245, 246, 250, 254

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