

PERMANENT EDUCATION: THE ROLE OF NURSES IN THE TEACHING- LEARNING PROCESS IN A HOSPITAL ENVIRONMENT

Bianca Merchak Silveira

Nurse, graduated
Centro Universitário São Camilo
São Paulo, Brazil

Maria do Socorro Saturnino

Nurse, graduated
Centro Universitário São Camilo
São Paulo, Brazil

Eliana Suemi Handa Okane

Nurse, Professor of Centro Universitário São
Camilo
São Paulo, Brazil

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Abstract: **Introduction:** Permanent education is essential for health professionals because of the importance of disseminating information and learning for a continuous evaluation of health education actions in order to improve the care of the population with safety and quality. **Objective:** Considering the information presented, the objective of the present study stands out, to address continuing education in the hospital service and its benefits. **Methodology:** This is an integrative review study which was shaped by the guiding questions: “What is it, what is the importance and what are the benefits of Continuing Education for health professionals?” and “What is the role of nurses in education?”. Data collection was through secondary data extracted from 15 selected articles, according to inclusion criteria. **Result and discussion:** As a result, it was possible to find the answers to the guiding questions. Permanent education is a construction of knowledge within a dynamic and continuous process in which they are incorporated into the daily life of organizations. It is a managerial competence attributed to nurses, which helps in the qualification of care, interacting with the entire team, improving and developing professionals. The following topics were discussed for discussion: National Policy on Permanent Education in Health (PNEPS) definition of education, concept of permanent education, evolution in Brazil, permanent health education, role of nurses in education, benefits of continuing education, evaluation of effectiveness of continuing education. **Conclusion:** The contribution of continuing education in professional practice is evident through the attitudes and responsibility that the professional assumes while caring for the patient and in the implementation of actions to train professionals and, thus, have more quality in the care provided.

Keywords: Nursing Education,

Empowerment, Hospital Education Service, Distance Education, Continuing Education.

INTRODUCTION

In the contemporary world we can observe the need for Continuing Education because only then will the professional achieve competence and excellence. In the health area, Continuing Education is defined as learning at work. It is a tool that involves the training and development of health professionals to meet the needs of the population. In order to improve the quality and safety of care.¹⁴

It is essential that health professionals, teachers and students are properly qualified. It is important to understand that improving knowledge can influence the safety of professionals in sharing information and guidance.⁹

It is important that hospital institutions know and manage the factors that determine and influence the participation of professionals in continuing education activities and use strategies to strengthen educational processes in daily work with a view to improving quality and care safety.¹⁴

It is worth emphasizing the importance of systematically and continuously disseminating information for the monitoring and evaluation of health education actions, in order to recognize and give visibility to innovative practices. Considering that the growing use of web platforms to interact, generate, access and disseminate information is an increasingly used practice among health professionals to carry out permanent education.⁹

The objective of the present study was to address continuing education in the hospital service, and to understand the benefits of continuing education in the hospital environment.

METHODOLOGY

It is an integrative literature review,

according to Souza (2010), the integrative review is performed to analyze, identify and synthesize results of studies on the same subject and also determines current knowledge on a specific topic.

The first step (phase 1) was the choice of guiding questions for the study which, in line with the proposed objective, was shaped in: “What is it, what is the importance and what are the benefits of Continuing Education for health professionals?”, and “What is the role of nurses in education?”.

In the second step (phase 2), the keywords described by the Health Sciences Descriptors (DeCS) available in the virtual health library (BVS), in Portuguese (Distance Education, Continuing Education) were used to search the literature, Nursing Education, Training and Hospital Education Service).

The search was carried out in the Regional Portal database of the Virtual Health Library (VHL) from March 2020 to April 2020, comprising articles from 2015 to 2020. The following exclusion criteria were adopted: texts not available in the full text, published in other languages not previously defined, articles published more than 5 years ago and articles that were not related to the subject of the study.

From the search process, a total of 21 articles were obtained, which were read in full, in pairs, in order to identify the topic addressed. After this process, 6 articles were excluded with the justification that the subject was not consistent with the theme, duplicate article, dissertation, unavailable text, another language and not free according to exclusion criteria.

In phase 3, data were extracted from the 15 articles from which they were selected. For this, all articles were read in full again and summarized containing the most relevant information according to the guiding questions.

For the analysis (phase 4), each sample article was read again and a brief summary was made containing relevant data which contained answers to the guiding questions.

In phase 5, secondary data extracted from a literature search was used to discuss the results, according to pre-established keywords, according to categorization and discussion, in text, according to the theoretical framework.

The results (phase 6) were presented through a table (table 2) containing the answers to the guiding questions. Since both the analysis and the synthesis of the data extracted from the articles were carried out in a descriptive way, making it possible to observe, count, describe and classify the data, in order to gather the knowledge produced on the topic explored in the review.

RESULTS

Table 1 below demonstrates how the search strategy was performed. According to the objective, keywords were developed and used to search for articles in the Virtual Health Library (VHL). 21 articles were found, 15 of which were part of the sample.

Table 2 identifies the articles in the study sample containing the origin, article title, authors, journal (volume, number, page, year) and answer to the guiding question, respectively.

DISCUSSION

THE NATIONAL POLICY ON PERMANENT EDUCATION IN HEALTH (PNEPS)

The strategy to qualify health professionals emerged in 2004 when the Federal Government instituted the National Policy for Permanent Education in Health (PNEPS), according to Ordinance GM/MS, number: 198, of the Ministry of Health. (MS).⁵

Among the constructive events that articulate education and practice, is the

Keywords	Search Strategy	Number of articles found
Nursing Education + Training + Hospital Education Service + Distance Education + Continuing Education	tw:(nursing education OR training OR hospital education service OR distance education OR continuing education) AND (fulltext:(“1”) AND mj:(“Health Education” OR “Nursing Education”) AND la:(“pt” OR “en”)) AND (year_ cluster:[2015 TO 2020])	21

Table 1: Search strategy updated on 03/07/2020 in the VHL. Sao Paulo, 2020.

Source: the authors.

Number	Origin	Article title	Authors	Diary (volume, number, page, year)	Answer to the guiding question
1	Lilacs	A hospitalização como espaço para educação em saúde às pessoas com diabetes mellitus	ARRUDA, Cecilia <i>et al.</i>	Rev. Pesqui. (Univ. Fed. Estado Rio J., Online) ; 12jan.-dez. 2020.	It is important for health promotion. Health education is an instrument for the construction of knowledge aimed at adherence to treatment and a simple way to increase the quality of life.
2	Medline	Trainability of Cricoid Pressure Force Application: A Simulation-Based Study.	NOLLI, Eric <i>et al.</i>	Anesth Analg ; 128(1): 109-116, 2019.	
3	BDEF	Tecendo A Educação Permanente Em Saúde No Contexto Hospitalar: Relato De Experiência	ADAMY, Edlamar Kátia <i>et al.</i>	Rev. enferm. Cent.-Oeste Min ; 8mar. 2018.	In-service education is understood as a dynamic and continuous process for the construction of knowledge.
4	Lilacs	Práticas exitosas dos preceptores de uma residência multiprofissional: interface com a interprofissionalidade	ARNEMANN, Cristiane Trivisio <i>et al.</i>	Interface (Botucatu, Online) ; 22(supl.2): 1635-1646, 2018.	The education of health professionals has been (re)discussed widely in the world.
5	Lilacs	Gestão em centro cirúrgico sob a perspectiva da educação permanente em saúde	MEDEROS, Sandra Marcia Alves	Niterói; s.n; 2018. 92 p.	Permanent education in health is learning at work, where learning and teaching are incorporated into the daily life of organizations.
6	Lilacs	Educação permanente: uma estratégia na promoção, prevenção e controle de infecção hospitalar	MARTELETO, Cristiane de Assis	Niterói; s.n; 2018. 110 p.	Continuing education was placed as a deepening and advancement in the training of professionals.
7	Lilacs	Educar para humanizar: o papel transformador da educação permanente na humanização da atenção básica	LOPES, Maria Tereza Soares Rezende <i>et al.</i>	Rev. enferm. UERJ ; 25: [e26278], jan.-dez. 2017.	Permanent education can be understood as a problematizing practice that starts from the daily work.
8	Lilacs	Educação permanente e suas interfaces com as condições sensíveis à atenção primária	SILVA, Charlene Ester Machado <i>et al.</i>	Rev Rene (Online) ; 18(6): 794-802, nov. -dez 2017.	

9	Lilacs	Apoio Matricial nas ações de Alimentação e Nutrição: visão dos profissionais da Estratégia Saúde da Família	FITTIPALDI, Ana Lúcia de Magalhães; BARROS, Denise Cavalcante de; ROMANO, Valéria Ferreira Romano	Physis (Rio J.) ; 27(3): 793-811, Jul.-Set. 2017.	According to Freire (1996), education is understood as a participatory pedagogical practice.
10	Lilacs	A gestão do cuidado sob a ótica de enfermeiros supervisores	COSTA, Maria Antônia Ramos <i>et al.</i>	Rev Rene (Online) ; 18(4): 476-482, jul - ago 2017.	Continuing education is conceived as a managerial competence to be developed in the training of nurses. It is a tool for change that assists in the qualification of care, by encouraging professionals to develop the skills necessary to meet health demands.
11	BDENF	Avaliação da contribuição da acreditação hospitalar no processo de educação permanente em saúde	DOMINGUES, Adriana Lopes <i>et al.</i>	Rev. enferm. UFPE on line ; 11(supl.5): 2177-2184, maio 2017.	According to the Federal Council of Nursing (COFEN), one of the functions of nurses is their continuous improvement and that of their team in the educational, care and management dimensions, which can be obtained through Permanent Education in Health (EPS)
12	BDENF	Educação permanente e acreditação hospitalar: um estudo de caso na visão da equipe de enfermagem	DOMINGUES, Adriana Lopes; MARTINEZ, Maria Regina	Rev. enferm. UFPE on line ; 11(supl.5): 2208-2216, maio 2017.	In order to obtain quality and safe care, it is necessary, in view of the problems encountered in the practice of health professionals, that changes occur. These transformations start from the awareness of managers and, in this context, Permanent Education in Health (EPS) is inserted as a training instrument for these professionals.
13	Lilacs	Impacto de ação educativa na manutenção do decúbito elevado como medida preventiva de pneumonia associada à ventilação mecânica em Unidade de Terapia Intensiva	MANSANO, Fabiana Petruske Niyama <i>et al.</i>	ABCS health sci ; 42(1): 21-26, 26 abr. 2017.	Learning is the concept that beings acquire new knowledge and skills, causing relatively durable changes in their behavior. This way, despite being an internal and personal event, only manifest actions allow us to conclude whether or not there was learning.
14	Lilacs	Educação permanente no contexto hospitalar: a experiência que ressignifica o cuidado em enfermagem	FLORES, Giovana Ely <i>et al.</i>	Trab. educ. saúde; 14(2): 487-504, mai.-ago. 2016.	Even though nurses have been trained in a traditional perspective of education, it becomes possible for them to forge other ways of educating in their workspace, as well as producing movements for change at individual, collective and institutional levels.
15	Lilacs	Educação em saúde e prática humanizada da enfermagem em unidades de terapia intensiva: estudo bibliométrico	SILVEIRA, Rodrigo Euripedes da; CONTIM, Divanice.	Rev. pesqui. cuid. fundam. (Online) ; 7(1): 2113-2122, jan.-mar. 2015.	The nurse is an agent of change, who interacts with the entire nursing team through strategies for training and improvement, stimulating the integration and development of these professionals.

Table 2: Identification of the articles in the study sample and answer to the guiding questions. Sao Paulo, 2020.

Source: the authors.

National Policy for Permanent Education in Health (PNEPS), which sought to direct training and development strategies for workers in the Unified Health System (SUS), in view of the need to consolidate the health reform. Brazilian. The PNEPS aims to transform work in the health area, stimulating critical, reflective, committed and technically efficient action, respecting regional characteristics and the specific training needs of workers.¹⁰

Corroborating the consolidation of this articulation and, to (re)signify training, the MS instituted the National Policy for Permanent Education in Health (PNEPS), in order to contribute to the transformation of training processes, pedagogical practices and health care and for the organization of services. The PNEPS was reformulated by the Cabinet of the Minister (GM)/MS 1996/07 ordinance, which defined its conduct at the regional level, through the creation of Teaching-Service Integration Commissions (CIES), under the coordination of the Regional Intermanagement Commissions (CIR) to adapt it to the guidelines and regulations of the Pact for Health. The decree, number: 7508 of June 28, 2011 reinforces the need to advance the implementation of the PNEPS as a human resources policy for the SUS (Unified Health System), with a focus on valuing health work, workers, intersectoriality and comprehensive care.¹

EDUCATION DEFINITION

According to Freire (1996), education is understood as a participatory pedagogical practice, which needs to accommodate the objective conditions of the subjects (which make them live in a certain way) and their subjective representations (which make them interpret their place in the world).⁷

Learning is a complex process, which involves many variables and is subject to the

influence of internal, individual and external factors. It can also be understood with the concept that beings acquire new knowledge and skills, causing relatively durable changes in their behavior. This way, despite being an internal and personal event, only manifest actions allow us to conclude whether or not there was learning.¹¹

CONTINUING EDUCATION CONCEPT

Continuing education can be understood as a problematizing practice that starts from the daily work, leading to reflection on the actions that are carried out on a daily basis, which can generate a new way of acting and doing, resulting in improvements in the way of production of work. and assistance. Continuing education is in line with continuing education, which refers to the continuity of the traditional school model with a focus on updating knowledge. Usually developed in the form of courses and periodical training, being centered on professional categories, practically disregarding the notion of team.¹⁶

It is worth mentioning that continuing education is conceived as a managerial competence to be developed in the training of nurses. This way, it can present itself as a tool for change that helps in the qualification of care, as it encourages professionals to develop the skills necessary to meet the health demands of the population, which are notoriously increasingly complex.⁴

PERMANENT EDUCATION EVOLUTION IN BRAZIL

In Brazil, the continuing education project started to be discussed with more emphasis in the 70's and 80's, by the ideologues of care teaching integration, referring to educational complementation programs for professionals (doctors and nurses, mainly). This discussion was also linked to an extension proposal

disseminated in Brazil by the Pan American Health Organization (OPAS).¹²

Continuing education was placed as a deepening and advancement in the training of professionals. This need was also incorporated into the professional sectors of education, which required the development of national or regional policies in response to problems characteristic of our educational system.¹²

PERMANENT EDUCATION IN HEALTH

Health education in hospital care is an important source for health promotion. During hospitalization, people are more sensitive to their chronic health condition and express a desire to take better care of themselves. Health education is an instrument for the construction of knowledge aimed at adherence to treatment, and a simple way to increase the quality of life.³

The demands for in-service education are not defined only as a list of individual updating needs, but also as a basis for work organization problems, which configures Permanent Health Education (EPS). EPS is a fundamental strategy for transformations in work processes, so that this is the position of critical, reflective, purposeful, committed and technically competent action.¹

The education of health professionals has been widely discussed in the world. According to the World Health Organization, the education of health professionals is still considered fragmented, decontextualized and the producer of a static curriculum when evaluating the dynamics of changes that occur in this area. The EPS is part of a political project that encompasses proposals for changing the training of health professionals. One of the changes already implemented was the creation of Multiprofessional Health Residencies (RMS). The RMS were created with the objective of stimulating practices

that respond to the demands of the SUS, constituting spaces for the development of EPS actions.²

Permanent education in health is learning at work, where learning and teaching are incorporated into the daily life of organizations and work. Continuing education is based on meaningful learning and on the possibility of re-signifying professional practices, based on the problems faced on a daily basis, and takes into account the knowledge and experiences that people already have, proposes that the education processes of health workers are made from the problematization of the work process and believes that the training and development needs of workers are guided by the health needs of people and populations.¹³

Permanent Education makes it possible to reveal the complexity and articulation of different problems in work processes and makes evident the need for multiple strategies, which, in order to be proposed and implemented, require articulation with the management of the health system in an intersectoral, interdisciplinary, multidisciplinary and interprofessional. In this sense, it is also presented as a management strategy, so that the resources necessary for the organization of work processes can be mobilized to face health challenges from the perspective of the integrated network.¹³

Analyzing the trajectory of health education, it can be seen that initially it was known by the term training of professionals, which aimed to train people so that they had the competence to develop a certain activity. With the development of scientific knowledge occurring at an accelerated rate, there was a concern of society with the training of health professionals.¹²

In order to have quality and safe care, it is necessary for the patient to receive comprehensive care. However, given the problems encountered in the practice of

health professionals, changes are expected to occur. These transformations can start from the awareness of managers and, in this context, Permanent Education in Health (EPS) is inserted as an instrument that will train these professionals to have more quality in the care provided.⁶

EDUCATION AND THE ROLE OF THE NURSE

According to the Federal Council of Nursing (COFEN), one of the functions of nurses is their continuous improvement and that of their team in the educational, care and management dimensions, which can be obtained through Permanent Education in Health (EPS).⁵

In hospital institutions, EPS is predominantly performed by nurses, being defined as activities performed continuously in the workplace that arise from some situation/problem, with the aim of promoting favorable transformations for the improvement in the services of health professionals.⁵

This study presents significant contributions, allowing a better understanding that Permanent Education in Health is extremely important in the hospital environment. This by collaborating with the acquisition and sharing of knowledge among professionals, being driven, from the search for the Accreditation process. This way, it tends to offer safety and quality in assistance to users of health services.⁵

In this sense, the educational process directed by the Nurse in the ICU, through programs of Continuing Nursing Education (ECE) or complementary training, can be understood as: dynamic process of teaching-learning, active and permanent, aimed at updating and improving the capacity of people, or groups, in the face of scientific-technological evolution, social needs and institutional objectives and goals.¹⁷

In this context, the Nurse also assumes the responsibility for the development of educational and training processes that are timely in view of the needs and difficulties presented by their team. In the hospital environment, the updating and training of professionals are linked to the Continuing Education Service (SEC), which must be concerned with the characteristics of learning as a dynamic, continuous, global, personal, gradual and cumulative process.¹⁷

It can be pointed out that the graduation did not sufficiently prepare the facilitating nurses to assume the necessary dialogue between caring and educating, considering that both activities complement each other. There is also a distance of these professionals in relation to the proposals and current health training policies.⁸

However, the analysis revealed that even if nurses have been trained in a traditional perspective of education, it becomes possible for them to forge other ways of educating in their workspace, as well as to produce movements for change at individual, collective and institutional levels.⁸

It was concluded that the existence of a permanent education program in the hospital context favors the construction of strengthened collectives, as it promotes significant learning and expands the possibility of implementing the desired changes in in-service education actions, even if, in this space, models still coexist. traditional and expanded models of nursing training.⁸

BENEFITS OF CONTINUING EDUCATION

The existence of EPS, in the hospital context, provides collective construction, encourages meaningful learning and expands the possibility of implementing desired changes in in-service education actions. In the hospital care scenario, we are faced with

constant technical-scientific innovations, which require updating and permanent qualification of workers, managers and subjects (students and educators) who represent the training institutions.¹

Learning is a complex process, which involves many variables and is subject to the influence of internal, individual and external factors. It can also be understood with the concept that beings acquire new knowledge and skills, causing relatively durable changes in their behavior. This way, despite being an internal and personal event, only manifest actions allow us to conclude whether or not there was learning.¹¹

EVALUATION OF THE EFFECTIVENESS OF CONTINUING EDUCATION

It is emphasized here that the Educational Process favors the involvement of the participating subjects, between the target audience of the training and the object to be learned, and also with the instructor, facilitator of this process, so that the knowledge resulting from the activity is better fixed and used.¹⁷

And also considering the ICU, this relationship requires a more concrete relationship between theory, practice and reality, abstracting the problems of work and directing strategies that favor the understanding and improvement of knowledge, for intervention in reality. The periodic evaluation of results, one of the planning phases, aims to verify the effectiveness of the program, aiming to provide feedback to the SEC so that it redirects or maintains its actions.¹⁷

This way, observation constitutes a fundamental parameter for humanization and for permanent, continuous or recycling educational processes, in which daily life and routines become pillars for the improvement of practices, improvement of interpersonal relationships between staff, family members

and users and object of transformation to improve the quality of service in the Intensive Care Unit.¹⁷

CONCLUSION

The contribution of continuing education in professional practice is evidenced through the attitudes and responsibility that the professional assumes while caring for the patient, this commitment must be signed with himself, through the motivation for the search for self-knowledge, improvement and updating. We must understand that continuing education in nursing and health is a goal to be followed throughout your life. In nursing, the search for competence, knowledge and updating is essential to guarantee the survival of both the professional and the profession itself.

It is expected that the practice of training in Continuing Education in nursing is not limited to the implementation of specific actions, but rather to those consistent with the assumptions and mission of a health institution articulated with an educational institution, to train these professionals to thus become have more quality in the service provided.

However, there is a need for further studies, mainly aimed at evaluating the impact of educational actions carried out, having as parameters the National Policy on Permanent Education in Health (PNEPS), according to Ordinance GM/MS, number: 198, of the Ministry of Health. (MS).

In this context, permanent education is seen, understood as a constant search for learning, as one of the actions that enable the development of this process of change, aiming at the professional qualification of nursing and, consequently, at the accomplishment of competent, conscious and responsible professional practice.

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