

NURSING SPECIALIZATION IN THE RESIDENCE MODELS: A QUALITATIVE STUDY ON THE EXPERIENCE OF GRADUATES

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Abstract: Nursing residencies are a Postgraduate modality, in the form of Specialization, in the form of In-Service Training, for Nurses, in the Residency Models, which provides a scholarship and sets the workload of 60 week hours. The present study aims to describe the experience lived in the personal and professional trajectory from the perspective of the graduates of the postgraduate course in Nursing in the form of Residency, in the area of concentration in Clinical and Surgical, of “Universidade Federal do Rio de Janeiro”, who completed the course in the period between 2020 and 2022. This is an exploratory research with a qualitative approach. Which had as participants the nurses, residents, from the last 3 groups and the interviews were carried out in person, through a semi-structured instrument (questionnaire), with the interviewee. The research followed the ethical precepts established by CNS resolutions number: 466 and number: 510, and was approved with opinion number: 5,534,194. For data analysis, Bardin’s content analysis technique was used. The sociodemographic results of the interviewees were: mostly female (83.3%), single marital status (66.7%) and less than 5 years since graduation (75%). After exploring the material, two categories were selected: 1st) Professional Career - subdivided into three subcategories, Skills and Competences, Education and Training; and, 2nd) Personal Trajectory, with three other subcategories, Experiences, Interpersonal Relationships and Social Condition. We concluded that there are dualities between feeling satisfied with the completion of the course and feeling frustrated with some theoretical contents, which form the basis for professional practices, with the personal relationship with the team in which they are inserted, among others. However, it was unanimous among the graduates that doing residency was a unique opportunity in

their lives and for the development of most of the professional skills required of nurses, but further studies on the subject are needed.

Keywords: Nursing; Nursing residence; Graduates, Nursing Education.

INTRODUCTION

Nursing residences, according to the Bill of Law n.º 5.905/73, article 10, they are a Lato Sensu Graduate modality, in the form of a Specialization Course, under the responsibility of Universities, Higher Education Institutes or Public and Private Research Institutes, defined by the objective of deepening scientific and technical knowledge, based on in-service education, on a full-time basis. (AGUIAR et al, 2005).

The Specialization Course in Nursing in Residence Molds, was created in 1995, at “Universidade Federal do Estado do Rio de Janeiro”- UNIRIO, through agreements with the Ministry of Health, the State Secretary of Health of Rio de Janeiro and the Municipal Secretary of Health of Rio de Janeiro and the Brazilian Navy/Hospital Naval Marcílio Dias. (AGUIAR et al, 2005).

The Graduate Course complies with the University’s rules and the Medical Residency Resolutions, defined by Federal Decree number: 80,281/77 and other Resolutions; in Specialization Level, according to CNE/CES Opinion number: 908/98; in the form of In-Service Training, in accordance with the Organic Health Law, Federal Law no. 8.080/90, article 30; for Nurses, in the Residence Molds in accordance with Federal Law number: 6932/81, article 4, which provides for a scholarship and sets a workload of 60 hours per week. (AGUIAR; MOURA; SÓRIA, 2004).

In Brazil, in 2005, PROJÓVEM created, within the scope of the Ministry of Education, the National Commission for Multiprofessional Residency in Health - CNRMS, whose organization and functioning

occur in a joint act of the Ministers of Education and Health. They are guided by the principles and guidelines of the Unified Health System (SUS), based on local and regional needs and realities. They enable in-service training that guarantees a good formation of theory and practice, which favors the qualified insertion of young health professionals in the labor market. (CASTRO, 2014).

According to Silva (2013), "specialization does not mean unique knowledge, protocol, but rather a deepening in an area, without losing sight of general knowledge, demanding flexibility and creativity from the professional".

It is very difficult to make the transition from recent graduates to a specialist, which is why many nurses opt for residency, as it is a form of continuing education, which prepares nurses in real service, linked to an academic practice, with a training of excellence to qualify, specialize and update nurses. (ZANONI et al., 2015).

It is notorious that, through bibliographical research of the materials studied and professional experience itself, that the long-awaited job and theoretical-practical training, many times, is not achieved only with graduation, requiring specialization, and many seek this basis. in the residences, because, according to a survey with graduates of a nursing residency in the ICU, they mentioned how the course was able to generate self-confidence, security and development of practical skills, it was an active instrument for personal and professional growth, which culminated in the opportunity and getting a job. (ZANONI et al., 2015).

It is necessary to monitor through surveys with professionals who have already completed the residency course, so that there is a constant evaluation of the training process offered. It is known that achieving a space for social and economic advancement is a constant challenge, due to several changes

in scientific and technological development and the high global competitiveness of the economy that has affected the supply and quality of jobs. (CASTRO, 2014).

Thus, the present study aims to describe the experience lived in the personal and professional trajectory from the perspective of the graduates of the postgraduate course in Nursing in the form of Residency, in the area of concentration in Clinical and Surgical and Focuses in Pediatrics, Cardiology and Traumatology and Orthopedics, from 'Universidade Federal do Rio de Janeiro', who completed the course in the period between 2020 and 2022.

METHOD

This is an exploratory research with a qualitative approach. Which had as participants the nurses, residents who graduated from the Postgraduate Course in Nursing in residency molds (CPGEMR), from the last 3 groups, from 2018 to 2020, and for the proximity in being able to schedule such interviews.

Inclusion criteria were: Nurses of any age group; Who have completed the CPGEMR course and have a specialization title in the area of concentration in Clinical and Surgical and in Approaches, domiciled in the city of Rio de Janeiro, regardless of color/race, ethnicity, sexual orientation, income, and clinical condition, who wished to participate in the interviews.

The data of the interviewees were obtained through the collection of the Postgraduate Nursing Course in Moldes de Residencia, with the consent of the Course Coordination and Management of the Alfredo Pinto School of Nursing, an invitation to participate was sent via e-mail. of the interview, which contained information about the research, theme, objectives, responsible researchers, benefits of participation in scientific research,

methods of guaranteeing confidentiality and other clarifications, interviews, face-to-face and ways to mitigate the risks of infection, in the context of the COVID-19 pandemic, such as the need to use masks, distancing and use of alcohol gel during interviews

The interviews were carried out using a semi-structured instrument (questionnaire), containing objective questions of a sociodemographic nature and five subjective questions, developed by the researchers, based on the research objectives; being recorded in audio for later transcription. Previously, the content of the research was presented and the Informed Consent Form (TCLE) was delivered, in two copies, for signature, if there was agreement to participate.

Sociodemographic data were analyzed using the Excel 2010 platform resource, calculating and evaluating the percentage of responses issued and the content of the subjective questions were analyzed from the perspective of "Content Analysis" by Bardin.

The research followed the ethical precepts established by CNS resolutions 466 of December 12, 2012 and 510 of April 7, 2016, and was approved by the research ethics committee by the Plataforma Brasil of the institution where the research was carried out, having as CAAE number: 58318322.5.0000.5285 and opinion number: 5.534.194.

RESULTS AND DISCUSSIONS

The target population of the study consisted of three 2018/202 classes, with 101 Residents; from 2019/2021, 93 Residents and from 2020/2022, 88 Residents. 288 invitations were sent. Nineteen e-mail responses were obtained, of which two do not live in the city of Rio de Janeiro, three did not return contact, one refused to participate and one of the interviews was lost, leaving 12 interviews.

SOCIODEMOGRAPHIC PROFILE OF GRADUATES

When carrying out the analysis of the sociodemographic profile, it was possible to trace a line of thoughts of the characteristics and demographic dynamics, of the educational situation and level of occupation of the interviewees.

Table 1 presents the sociodemographic characteristics of the 12 interviewees, it being possible to observe that the most frequent age group corresponded to those under 30 years old (50%). According to Carvalho (2018), this data may be related to the early insertion of young people in graduation and the search for methods that can provide professional growth, for the development of skills and knowledge, not obtained in graduation.

The female gender is mostly present in the graduates (83.3%), having participated in the interview, only two men (16.7%). The study data reflect the feminine character of nursing, which is preserved over the years, being a striking characteristic that constitutes women as the image of this professional category (SILVA, 2012).

The most prevalent marital status among the interviewed graduates was single (66.7%), followed by those who declared themselves married (33.3%). For Carvalho (2018), this characteristic may be related to the most frequent age group among respondents, who are those under 30 years old, who are possibly people who are still looking for professional and financial stability, and still do not have marital ties.

As for the time of training as nurses, those with less than 5 years of training predominated (75%), followed by those with more than 10 years (16.7%). The need for exclusive dedication to carry out the residency can be a factor that limits the access of professionals who have graduated for a longer time, as it is presumable that they are already inserted

in the job market, unlike recent graduates (SILVA, 2012).

CHARACTERISTICS (N=12)	No.	%
Age Group		
< 30 years	6	50%
31 to 40	5	41.6%
41 and over	1	8.4%
Gender		
Feminine	10	83.3%
Masculine	2	16.7%
Marital status		
Single	8	66.7%
Married/Stable Union	4	33.3%
Divorced	0	0
Others	0	0
Time since graduation in nursing		
< 5 years	9	75%
5 to 9 years	1	8.3%
> 10 years	2	16.7%
Currently works as a Nurse		
Yes	8	66.7%
No	4	33.3%

Table 1- Sociodemographic characteristics of the interviewed graduates of the Residency Course in Clinical and Surgical Nursing (n=12).

Source: Prepared by the authors of the project.

In Table 2, it is possible to observe the information referring to the institutions, in which, the graduates of the Residency Course, carried out their training. Most came from private educational institutions (66.7%), concentrated in the State of Rio de Janeiro. Previous studies on the profile of graduates of the residency pointed out that there is a predominance in carrying out the nursing graduation in Public Education Institutions, different from what is demonstrated in this study (SILVA, 2012; CASTRO, 2014;

CARVALHO, 2018).

CHARACTERISTICS OF THE INSTITUTIONS (N=12)	No.	%
Type of Institution		
Public	4	33.3%
Private	8	66.7%
Graduation Institutions		
Universidade do Planalto Central Prof. Aparecido dos Santos	1	8.3%
Universidade Bezerra de Araújo	2	16.7%
Universidade Castelo Branco	1	8.3%
Universidade Estadual do Rio de Janeiro	1	8.3%
Universidade Grande Rio	1	8.3%
Universidade Federal do Rio de Janeiro	2	16.7%
Universidade Estadual do Rio de Janeiro	1	8.3%
Universidade Estácio de Sá	2	16.7%
Pontificia Universidade Católica do Rio de Janeiro	1	8.3%

Table 2 -Characterization of the Academic Training of graduates of the Residency Course in Clinical and Surgical Nursing (n=12).

Source: Prepared by the authors of the project.

Table 3 presents the characteristics of the training in the CPGEMR, carried out by the interviewees, and it is possible to observe the predominance of graduates from the Clinical and General Surgery course (83.3%), in which the majority (50%) completed the residency between the years 2019 to 2021. It is noteworthy that the In-Service Training Units, with a significant number of participants were the Federal Hospital of the State Servers (41.7%) and the Hospital Naval Marcílio Dias. (41.7%).

COURSE CHARACTERISTICS (N=12)	No.	%
Concentration area		
Clinic and General Surgery	10	83.3%
Clinical and Surgical with a Focus on Pediatrics	2	16.7%
Clinical and Surgical with a Focus on Cardiology	0	0
Clinical and Surgical with a Focus on Traumatology and Orthopedics	0	0
Period of completion of the Residency		
2018/2022	3	25%
2019/2021	6	50%
2020/2022	3	25%
Service Training Unit		
Federal Hospital in Andaraí	2	16.6%
Federal Hospital of State Servers	5	41.7%
Marcílio Dias Naval Hospital	5	41.7%

Table 3- Characteristics of the Residency Course in Clinical and Surgical Nursing carried out by the interviewed graduates (n=13).

Source: Prepared by the authors of the project.

About the academic trajectory after completing the residency, about 62.5% completed another specialization during or after completing the studied course, 12.5% of respondents completed another residency. However, about 18.8% did not carry out any other specialization in Nursing. The specialization course most frequently reported by respondents was Intensive Care (30.7%)

ACADEMIC TRAVEL AFTER THE RESIDENCE (N=16)	No.	%
Postgraduate	10	62.5%
Residence	2	12.5%
Master's degree	1	6.2%
Doctorate degree	0	0
None	2	18.8%
Specialization Courses (n=12)		
Surgery Center	1	7.6%
Palliative care	1	7.6%
Stomatherapy	1	7.6%
Hospital management	1	7.6%
Nephrology	1	7.6%
Oncology	1	7.6%
Mental health	1	7.6%
Intensive Therapy	4	30.7%
Neonatal and Pediatric Intensive Care	1	7.6%

Table 4- Specialization Courses taken after completion of residency.

Source: Elaborated by the authors of the project.

ANALYSIS OF INTERVIEW DATA

The present study describes the personal and professional trajectory of the graduates of the Nursing Residence, from the 12 interviews carried out between the months of August and October, totaling 2 hours and 17 minutes of audio recordings, which were transcribed through the Voicemeeter system, which is a virtual mixing console and sound card running on the Windows operating system and allows the processing of any audio signal, whether its physical or virtual source, to physical audio devices and/or applications and the voicedictation system accurately transcribes speech into text In real time.

These systems have the function of adapting the time of the narrative to the time of understanding and typing, which facilitated the hearing of the recorded speeches, reduced the transcription time, the correction of errors

and allowed a better identification of laughter, crying, reaching the fidelity of records.

The use of Bardin's Content Analysis technique for the questions followed the pre-analysis step. In this step, the material from the interviews is organized to follow up with the other stages of the analysis.

Content analysis is between numerical accuracy and subjectivity of communication. Therefore, it relates the semantic structure and the sociological structure with the social and psychological aspects involved, and with the context where the interaction took place (MINAYO, 2008).

In the second phase, also known as the material exploration phase, the floating and exhaustive readings of the 12 transcribed interviews were carried out and from that, the comparable categorization units were selected for thematic analysis, through phrases and paragraphs, which had representations of the experiences lived by the graduates.

The context units were organized into six worksheets, where the Attitudes of the interviewees' responses were inserted, emerging categories according to the study objectives, for the development of the Record and Context Units. After grouping and coding, two categories and six subcategories emerged.

The third and final phase, known as treatment of results - inference and interpretation, has the mission of bringing meaning and validity to these data, interpreting them beyond the content exposed in the documents (BARDIN, 2011).

The first category that emerged was Professional Trajectory, consisting of the thematic units in which the graduates exposed their experiences in the professional sphere, subdivided into three subcategories, Skills and Competences, Education and Training.

The second category Personal Trajectory, in which the thematic units in which the graduates expressed their personal experiences

during the residency were included, consisted of three other subcategories, Experiences, Interpersonal Relationships and Social Condition.

FIRST CATEGORY: PROFESSIONAL CAREER

During the speech analysis process, it was found that most of the interviewees recalled information related to the two-year period of residency. Many were the expressions they had when remembering their passage through this great stage of their lives, such as: laughter, crying, nervousness, euphoria, frustration, sincerity, among others.

There were dualities pointed out by them, some with more positive points and others with more negative points and the most evident were: moral harassment, physical and emotional exhaustion, complaint of the extensive and tiring workload, theoretical insufficiency, lack of professional qualification of the preceptors, preceptors with a lot of experience, conflicts with other professionals in the sectors, little credibility, good placement in the job market, career enhancement, theoretical and practical knowledge, opportunities, objective achieved, differential, self-knowledge, mastering skills, interpersonal relationships and others.

Respondents were identified with the letter "E" followed by the number corresponding to their interview. This means that the first respondent received the identification E1; the second interviewee, E2; and so on until the twelfth interviewee, E12.

The study showed that, despite all the obstacles faced by Residents during the training process, the practical experience they had was satisfactory in terms of developing theoretical-practical skills and interpersonal relationships, in addition to opportunities in the various areas they are currently working in, contributed to their training. This can be observed in the speech of the interviewee

identified by the number “E3”.

“I think it’s a very broad area, which adds a lot of knowledge, and is very enriching for the career” (E3).

Galdino Júnior and Barbosa (2021) mention that in current times, the job market is increasingly looking for qualified professionals, with residency being a title that favors this entry, confirmed by the vast majority of reports in this research of those who are working at the moment.

It is notorious nowadays that university training at undergraduate level is almost common, as the job market currently requires a creative, versatile, flexible professional who has the ability to relate, communicate, lead and solve problems. problems, going beyond the curriculum offered, is what graduate students seek. (GALDINO JUNIOR, 2021).

It is necessary that residency programs in health constitute strategic actions articulated between training institutions and the public health system in order to rebuild the work process in the daily life of services, and also the training process and pedagogical practices in health (BARBOSA et al., 2022).

In this context, it is evident that graduates can work in different areas, for assistance as well as for management, teaching and research, which demonstrates that the residency is theoretical and practical support that allows the resident individualized professional and personal growth, considering that opportunities are offered so that he becomes a competent and qualified professional for the demands of the labor market. (ZANONI et al., 2015).

SUBCATEGORY: SKILLS AND COMPETENCIES

This subcategory, as a way of expressing that the skills and competences were developed in the training process of the resident nurse, as the residency encourages the search for

scientific improvement, which results in greater professional qualification, therefore, most graduates seek other specializations, master’s and doctorate. Therefore, institutions began to address the need to train professionals with a new profile, capable of assuming responsibilities, proposing changes and making decisions, seeking resolution in complex situations (SILVA, 2013).

In a statement by a graduate, it is clear that doing a specialization along the lines of residency greatly improves the condition of the individual, as these professionals, often young, with no experience, become specialized professionals, recognized and valued by the job market. work, with a satisfactory financial condition. (ZANONI et al., 2015). Observed in the speech of the interviewee “E8”.

“Total, total, total, it really was the direction of my life, today I have two jobs and a reasonable salary and all that thanks to residency” (E.8).

However, doing residency contributes to the insertion of graduates in the labor market, a useful tool that enables the professional side of the individual, given the teaching-learning scenario they have gone through, and thus generates a positive image before the groups, facilitating knowledge about themselves in the institutions. (LIMA et al., 2022).

According to Silva (2013),

“It is in the exercise of the profession that doubts, questions, fears, apprehensions arise and, thus, the professionals’ need to know, to know how to do, and to know how to intervene, to build and rebuild their knowledge, to be personal and professional. considering them, the nurse, aware of the richness of opportunities that the practice can offer him, opts for a Course based on in-service training as a way of appropriating specific knowledge”.

What stands out in one of the lines:

“It takes away the insecurity, which is very important, it added a lot to me, it was great mainly to lose the fear of the practice” (E.3)

With a theoretical-practical basis, the resident acquires professional security for the development of their functions, becomes aware of the need for additional learning by choosing priorities, integrates with the teams, providing better working conditions and raising the quality standard of institutional care. (ZANONI et al., 2015). It is evidenced by an interviewee:

“So I needed something that would really sustain me, that would give me rice and beans, and the residency was the rice and beans I needed. It’s worth it, as you can see, I already had years of experience, but I came back, precisely because I needed to go through these steps that I had not gone through, and it was worth it” (E.2).

For a nurse, a dose of motivation is necessary, and when choosing the residence, the same because of the course, it provides greater technical training, facilitating the insertion in the job market and the development of theoretical and practical skills, which for many is pending after the end of graduation. (BARBOSA et al., 2022).

When a nurse goes through the experience of being a resident, the individual matures, as he unites several unique moments of experiences, such as: taking a stand in the face of unexpected situations or having to live and manage conflicts, while developing technically in his skills and still by demonstrating emotional control and by living with the multidisciplinary team, family members and patients with different imbalances. It is possible to observe in the speech of an egress:

“It gave me much more autonomy to work today with general nursing, with pediatrics, adults, the elderly, all age groups.” (E4).

Therefore, it is mentioned by former residents that this direct contact with real situations of nursing practice, their day-to-day, the relationship with the clientele within the organization, as well as an infinity of

circumstances that occur in daily professional practice, at the heart of specificity, predictable or not, favors the construction and reconstruction of instrumental, cultural, social and ethical theoretical knowledge. (SILVA, 2013).

SUBCATEGORY: TEACHING

In this subcategory, it is possible to observe some of the dissatisfaction of the graduates, who almost unanimously pointed out that there is still a lack of training for the professionals who accompany the resident in their academic path, which is evidenced in this speech:

“It’s knowing how to deal with the frustration of your preceptor knowing much less than you, and your preceptor is doing the wrong thing and very wrong, so you have to understand that it’s wrong because you’re studying, right” (E.8).

Within a hospital, where in-service and teaching-learning practices are developed, the resident develops professional skills and abilities, mediated by the figure of the preceptor, this is the professional who accompanies the resident in these different practice scenarios, articulates technique to knowledge scientist, share their work experiences, provide pedagogical support, thus becoming a facilitator of the teaching-learning process in residency programs in health (BARBOSA et al., 2022).

For the same author, the preceptor has a fundamental role in this process, as it requires the professional to have a theoretical and also pedagogical foundation, sufficiently built during his trajectory, that allows him to sustain the demands requested in the development of his professional activities and in the different scenarios, and in the various circumstances of action, always seeking to articulate theoretical knowledge to the construction of their own knowledge that can be used in the practical

exercise of the profession. (BARBOSA et al., 2022).

Lima (2022) believes that many residents seek to find, within the scenario where they are, qualified professionals who are willing to share their knowledge and daily practices, and with that they build different experiences at work, creating social and affective bonds, which help in their professional path, and this is only possible when tutors and preceptors have adequate qualifications to perform the function.

There is also a lack of theoretical learning, as practical learning is always superior to theoretical learning. (LIMA et al., 2022). It is noticeable in this speech:

“The theoretical part, the theoretical part for me was really flawed, I remember that I was very thirsty for theoretical content, I was one of the students who made a complaint, I’m sure the teachers hate me” (E.9).

Most residents reported during the interviews that they sought theoretical knowledge on their own, through books, video classes and even other online specializations to learn the content of their practical experience, and what stands out as essential in initial training is the ability to develop, in the individual, the motivation to learn how to learn, since learning is intertwined with living and as such is the individual’s total responsibility and depends, essentially, on his or her motivation. (SILVA, 2013).

TRAINING SUBCATEGORY

It is necessary to discuss training within the scope of residencies, a fundamental piece to shape the future specialist. Thus, to compete for a vacancy in the world of work, the professional thinks about seeking a Specialization Course to differentiate himself and meet the prerequisites demanded by the labor market. And this happens under the need to acquire new skills and/or to

improve them. Thus, the postgraduate course often becomes for the professional the only possibility to meet these needs and facilitate their insertion in the market, and can be considered a milestone for the redefinition of this professional. (SILVA, 2013).

It’s frustrating for some graduates to go through the theoretical part and realize that it didn’t reach what was expected by the course: “Some classes during the residency were of no use, because there wasn’t really a focus, which is what we were doing, you know, there wasn’t much that, it was more focused on getting us into the field of research” (E.5).

The whole training process is challenging, especially for managers and educators due to the complexity of stimulating professional, interpersonal and humanistic skills at the same time, and they need to maintain a critical sense of social responsibility in the student at all times. Residency programs are at the forefront in our country by encouraging active and participatory multidisciplinary practices in health care (CARNEIRO, 2021). This is confirmed by the words of one of the interviewees:

“Certainly, I think that no postgraduate course, no college, gives the experience that the residency gives, I think that’s the difference even for nurses to do residency” (E.4)

Taking a postgraduate course these days is a differential in the search for a better placement and insertion in the job market. On the other hand, this accelerated and disorderly expansion of Undergraduate Nursing Courses produces a growing number of recent graduates who insistently seek a differential that facilitates their insertion in the world of work. However, some authors say that graduation diplomas do not guarantee the individual a place in the market. In turn, it is also not possible to guarantee specialists their permanence or even their insertion in the labor market. (SILVA, 2013).

Finally, it is necessary to carry out knowledge about graduates of nursing residency, as it enables the analysis of training and allows knowing and identifying other issues, such as the labor market and insertion in this work process, personal satisfaction with work, changes in activities and profession, continuing education, professional development, among others. (CASTRO, 2014).

SECOND CATEGORY: PERSONAL TRAJECTORY

The second category deals with the discussion and exploration of the personal trajectory of the nurses who graduated during the Residency in Clinical and Surgical Nursing.

In this category, it was possible to observe that each egressed resident has particular views and expectations about their trajectory, presenting questions that correlate with their basic training, internal and external challenges and the adversities to be faced daily. These aspects were analyzed from three thematic subcategories that emerged from the Personal Trajectory category.

SUBCATEGORY: PERSONAL EXPERIENCE

According to Mosquera and Stobaus (2001, 2006)

“The life trajectory of a professional contemplates both personal and professional dimensions and these are inseparable. When talking about an individual’s personal experience during their professional training, it is necessary to permeate and seek the factors that lead this multidimensional process”.

Among these factors, it was possible to observe the prevalence of the personal development narrative, which in a very particular way exposes, to the resident who

becomes a graduate, to identify in himself the confrontation of personal and environmental conditions, which shaped him as a new professional.

The following excerpts are excerpts that exemplify this awareness about the changes in themselves, after the residency experience:

“[...] For me it was a watershed, before the residency I didn't feel like a nurse yet and here was the opportunity for me to feel like a nurse and when I left, I left completely different, much more confident in my profession [...]” (E1)

“ [...] The challenge of losing fear, of losing insecurity and internal challenges, which I felt myself overcoming every day, every day was a new learning experience, I left here very different from how I entered [...]” (E1)

Through these speeches, it is possible to observe that during the professional practice in the residency, the nurse has the opportunity to deepen his knowledge about himself, when experiencing challenging situations.

According to (SILVA, 2012), entering the world of work provides new graduates with the acquisition of new and specific knowledge, reflection on their professional performance, as well as the reconstruction of professional identity, the perception of moral ethical values and identification of weaknesses in your training.

This way, the training of this professional boosts social recognition and growth, due to the opportunity it offers the nurse, to show himself to the job market, differentiating him in the type of qualification, which distinguishes him from other professionals (SILVA, 2012).

The SARS-CoV-2 Pandemic was a theme highlighted by the graduates about their personal experience during the residency, considering that this study was carried out with residents who graduated from 2020 to 2022. COVID-19 significantly impacted the routine of health professionals, who, unlike

other professional categories, could not meet the recommendations of social isolation.

The following statements demonstrate how coping with a pandemic was reflected in the training of graduates:

"[...] in relation to the pandemic. Because we had a very bad period and it interfered in our assistance, in our professional training, because everything was focused on the pandemic, so we stopped learning some other specificities of the field [...]" (E6)

" [...] I think one of my difficulties was because when I started doing it, there was the consequence of COVID, I came along with COVID, I was in the SC and the surgeries decreased, [...] there was a moment of afraid of passing on COVID to them, I lived with my grandparents, there was a moment when I didn't come, I stopped coming, I stayed at home [...]" (E1)

Changes in hospital routines were necessary to face the pandemic, such as the suspension of consultations and elective surgeries, closure of sectors and creation of isolation wards for those infected with the virus. These necessary changes had a negative impact on the resident's experience, as it deprived them of experiencing the common routine of the In-Service Training Units, to which they were allocated. However, they brought other experiences never experienced before.

The residency program promotes the resident nurse to adapt and face challenging events, related to internal and external pressures, which can generate stressful situations (NOGUEIRA-MARTINS & JORGE, 1998). As can be the case with being part of a team, or changing sectors frequently.

"We are kind of passing through a sector, when you get used to the team, when you start working for real, you change sectors. People start to trust you, you say goodbye, you need to go somewhere else. Each month is a different fight." (E7)

The nursing resident's difficulty in feeling

like an integral part of the teams arises due to the short time he remains in the sectors. As the interviewee "7" clarifies.

The resident's training process is also influenced by the performance of the multidisciplinary team in which he is involved, due to the exchange of knowledge and integration between these professionals. (FERNANDES, 2013).

The Postgraduate course at the Specialization Level, in the form of In-Service Training for Nurses, along the lines of the UNIRIO Residency, has in its curriculum the sectors of minimum performance in the In-Service Training Units, corresponding to the area of concentration Clinical and Surgical, in which residents go through the first and second year, depending on the availability of low and medium complexity and high complexity respectively.

" [...] It makes a lot of difference too, in personal knowledge, although you stay 1 month in each sector, you end up seeing a lot of things that normally you would not have access to [...]" (E7)

"[...]Oh yes, of course, it was a great opportunity, not everyone has this opportunity, it was very important, a differential....]" (E3)

The opportunity to carry out a Specialization along the lines of a Residency is of great enrichment, as residents have the opportunity to deepen their theoretical and practical knowledge in medium and high complexity scenarios (PEREIRA, 2017).

SUBCATEGORY: INTERPERSONAL RELATIONSHIP

Intra and interpersonal interactions, which occur within the resident's professional and educational scope, are directly related to the quality of self-care, to care for others (SILVA, 2012).

In the development of the present study, it was possible to observe the predominance

of the Interpersonal Relationship theme, as shown in the statements below:

“ [...] it is in the form of interpersonal relationships at work, not only the patient relationship, but the relationship between nurse and nurse, a multidisciplinary team nurse.” (E4)

“ [...] For me because of my personality, it was the interpersonal relationship, dealing with the team, having to talk, having to communicate, for me it was the biggest challenge, every month it was an anxiety attack, I'm shy too much [...]” (E3)

“ [...] The most difficult thing was not dealing with the patient, it was not dealing with care itself, [...] it was the team, that was the most difficult thing [...]” (E5)

Interpersonal relationship refers to the relationship, connection or bond between two or more people, in which they are in the same context (UNISC, 2021).

Professionals working in the health area have, in their daily lives, the need for teamwork, which due to several factors, these relationships can be weakened and not harmonious between multidisciplinary teams (MARTINS et al, 2014).

The nurse is highlighted in this issue, taking into account the shift regimes, and sometimes the working conditions favor negative consequences on the body and mental health of these workers, as well as on the assistance that is provided (MARTINS et al, 2014).

SUBCATEGORY: SOCIAL CONDITION

It is of fundamental importance to do a residency, as it better trains professionals, making them professionals more committed to the work process. And this process offers technical and scientific support for residents to work in different fields, to develop care, management, teaching and research activities with competence and quality. (LIMA, 2022;

ZANONI, 2015).

It was observed in the speeches of the interviewed graduates, the positive perception about their career, due to the participation in a residency program in nursing, according to the following speeches:

“In general, the idea of residency, I think it's very important because, you know, every day with a patient in the hospital environment, I think it adds a lot to a nurse's career.” (E5)

“ [...] The residency prepares us to deal with our career, right, and while you're a student, it seems easier for you to deal with things, for you to make choices, in short for you to act, right, and that makes you prepares you to be the professional you want to be, you are still a student, as if you don't have full responsibility, but they give you that responsibility.” (E4)

Resident nurses acquire, in a way, notoriety in their social environment, due to the fact that the Course has practical-theoretical structural characteristics, making it different from those who only have a postgraduate certification, so common today. (SILVA, 2012).

Residency programs contribute to the entry of graduates into the labor market, as it favors personal marketing in the sphere of teaching and learning to which they are inserted, creating a positive and diverse image of themselves in the institutions they have as UTS (CARVALHO, 2018).

Zanoni et. al (2013), points out that residency courses in the nursing area, due to different access to institutions during the course, favors the expansion of the network, and consequently generates advantages for new professional opportunities and possible hiring.

For the elaboration of this research, there were limitations in data collection, many invitations were sent to egressed residents and, although a significant number of e-mails were sent, the response to the interviews was much lower than the expectations of the

researchers. This fact indicates the assumption of a lack of free time to participate in the face-to-face interview and being a study carried out at a single university may not allow extrapolations for graduates from other places.

FINAL CONSIDERATIONS

The results achieved in this study show that most nursing graduates do not feel confident about starting professional practice, and many of them seek professional skills and competences in postgraduate residency programs, in order to meet the needs of the job market, which has become increasingly competitive.

The research found dualities, among the researched graduates, in feeling satisfied with the completion of the course and in feeling frustrated with some theoretical contents, which are the basis for professional practices; in the personal relationship with the team in which they are inserted, among others. And, in relation to this context, as seen in this study, the interviewees suffered favorable and unfavorable conditions, very particular, during the experience of their trajectory.

Despite the unfavorable points pointed out by them, it was unanimous among the graduates that doing residency was a unique opportunity in their lives, for the development of most of the professional skills required of nurses, giving them a basis to become a safe and differentiated professional.

Based on the results, the study allowed us to verify that the perception of graduates is influenced by personal and impersonal influences that permeate a condition of transition between being newly graduated nurses and specialist nurses, able to face the daily challenges that the profession requires.

The research showed the need for further studies on the subject to deepen the challenges and weaknesses faced in the resident's trajectory, since the study was essential

for this approach, and the elaboration and implementation of new educational and pedagogical strategies to improve mental health is indispensable. /psychology of those who propose to take a postgraduate course along the lines of residency.

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