Nurses' professional training

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To reflect about nurses' training implies to take into consideration a relationship between two categories for the analysis: the work as it is, in part, determined by and determinant of one's professional development and continuing training, and the professional development and continuing training as they are determinant of and determined by work.

Another element that permeates that reflection and may help to explain it is the concept assigned to the terms qualification and professional competence.

Because these are polysemic concepts, the comprehension of the meaning of the term worker's training implies also understanding the terms qualification and competence, which have different meanings in different historical moments thus showing different realities of how the working process takes place.

One example occurred in the 1980's, in the productive system, when there was a change in the norms in the working markets and work force, forcing innovations into the productive system, to managing work dynamics and to workers' knowledge.

In this context, countries that are economically productive, and which up to that moment considered that having the specific technical knowledge and skills were central elements of the concept assigned to the term qualification, assign new meaning to the term, and now refer to as the capacity to decide, intervene and act in everyday situations as well as in those that are unpredictable.

The new capacities that workers are required to have in order to solve concrete and sometimes complex problems in their everyday work routine demand, in addition to technical training, the capacity to solve problems, initiative, creativity, communication, accepting competitiveness, and performing shared and group work.

Therefore, the differences existing between the concepts of qualification and competency generate qualitative elements, as the term qualification was once limited to the technical-scientific knowledge (particular of technical rationality) as an element of the conceptual essentiality, whereas the term competence incorporates psychosocial and cultural dimensions².

Using the same reference, the education category analyzed in the educational process domain assigns to qualification a meaning of professional preparation for the working market, in which the referred preparation results from school experience (diploma, certificate), and/or of concrete practical experience (professional career).

Because the reality of the workers' domain now demands having a differentiated profile, the meaning of competence, as a new term, now adds not only the need for professionals to be updated, continuously, with new knowledge and skills, but also the need to incorporate that knowledge to their practice, contextually and reflexively, using, testing and evaluating them together and with responsibility.

In this context, obtaining the meanings of the terms qualification and competence cannot be considered only from the semantic viewpoint; rather, under the light of the socioeconomic and cultural implications that interact and determine these meanings.

If on one hand the term qualification is limited to the training and performance of a worker/nurse in the domain of technical-scientific knowledge, competency widens this meaning, as it requires from the professionals features such as initiative, creativity, discernment, decision-making abilities, communication, and others. Hence, if the area of nursing practice is increased, there is also the establishment of a new requirement regarding the workers' training to perform the new demand.

One important point to be considered is that those demands are not within the ambit of technical-scientific competencies; rather, they are in the ambit of socio-educational and ethical-political competencies. In this direction, the new competencies required of health institutions need be analyzed also under the light of the interests and intentions of the institutions involved, despite their being public or private. If on one hand the professional advances towards using his or her potentials and assumes greater autonomy in their field of action, institutions advance to achieving their goals increasing quality without rising costs.

This reading of the reality does not often contemplate the context where the work is developed, as it requires new professional competencies and broadens the action domain, but does not offer better working conditions in return.

Concerning this idea, though not regarding the health area, administrators consider that competencies should add economic value to the organization and social value to the individual.

In the health area, specifically regarding nursing professionals, opposed to other fields of professional practice, the meanings of qualification, as well as those of competence, continue to use the production and organization of work as parameters.

That work is performed in the ambit of health institutions/organizations that are a service business, which features are essentially working with the human element (user/client/patient) or human/professional resource assisting health system users.

With certain caution, the reality implies to analyze and evaluate the performance of nursing professionals as, similar to what occurs in the productive system, the service business also establishes the context of demands, the available resources and power.

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relationships in the working world. Denying that reality does not permit to advance in the reading and, thus, in the proposals that could add, in return, social value to health organizations and economic value to the professionals that contribute with their work.

Therefore, to understand the new elements that are incorporated to the practice of nursing professionals it is indispensible to decode the competencies that offer the skills to their performance in a way that is compatible with their personal wellbeing and professional fulfillment.

To reflect on the meaning, ambit and dynamics of nurses’ field of practice forces a movement towards re-updating competencies, which is innovating but still insufficient to deal with the new challenges and conditions imposed by the concrete reality.

REFERENCES