

# Legislation and quality of nursing education in the context of the COVID-19 pandemic

*Legislação e qualidade da educação em enfermagem no contexto da pandemia de COVID-19*  
*Legislación y calidad de la educación en enfermería en el contexto de la pandemia de COVID-19*

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## ABSTRACT

**Objectives:** to reflect on the governmental normative acts issued for higher education during the COVID-19 pandemic and on the repercussions of these acts on the quality of nursing education in Brazil. **Methods:** this is a reflection on the repercussions for the quality of nursing education, based on the normative acts applied to higher education, enacted from March to December 2020, available on the Ministry of Education website and in the current literature on the subject anchored in the National Curriculum Guidelines for the Undergraduate Nursing Course. **Results:** educational legislation, in the context of the pandemic, distanced education from the world of work, as well as from the quality of training established in the guidelines. **Final Considerations:** remote teaching in nursing makes it difficult to train professionals with the capacity to effectively teach and learn in the real world of care and health promotion in the Unified Health System.

**Descriptors:** Legislation; Graduate Education; Nursing Education; Pandemics; Coronavirus.

## RESUMO

**Objetivos:** refletir sobre os atos normativos governamentais editados para a educação superior durante a pandemia de COVID-19 e sobre as repercussões desses atos na qualidade da educação em enfermagem no Brasil. **Métodos:** trata-se de uma reflexão acerca das repercussões para a qualidade do ensino de enfermagem, baseada nos atos normativos aplicados ao ensino superior, promulgados no período de março a dezembro de 2020, disponíveis no site do Ministério da Educação e na literatura vigente sobre a temática, ancorada nas Diretrizes Curriculares Nacionais do Curso de Graduação em Enfermagem. **Resultados:** a legislação educacional, no contexto da pandemia, distanciou o ensino do mundo do trabalho, assim como da qualidade da formação estabelecida nas diretrizes. **Considerações Finais:** o ensino remoto na enfermagem dificulta a formação de profissionais com capacidade para a efetividade do processo de ensinar e aprender no mundo real do cuidado e da promoção da saúde no Sistema Único de Saúde.

**Descritores:** Legislação; Educação Superior; Educação em Enfermagem; Pandemias; COVID-19.

## RESUMEN

**Objetivos:** reflexionar sobre actos normativos gubernamentales editados para la educación superior durante la pandemia de COVID-19 y las repercusiones de estos en la calidad de la educación en enfermería en Brasil. **Métodos:** reflexión sobre las repercusiones para la calidad de la enseñanza de enfermería, basada en actos normativos aplicados a educación superior, promulgados entre marzo a diciembre de 2020, disponibles en sitio del Ministerio de la Educación y en la literatura vigente sobre la temática, ancorada en Directrices Curriculares Nacionales de la Graduación en Enfermería. **Resultados:** la legislación educacional, durante la pandemia, alejó la enseñanza del mundo del trabajo, así como de la calidad de la formación establecida en las directrices. **Consideraciones Finales:** la enseñanza remota en enfermería dificulta la formación de profesionales con capacidad para efectividad del proceso de enseñar y aprender en el mundo real del cuidado y promoción de salud en el Sistema Único de Salud.

**Descriptor:** Legislación; Educación Superior; Educación en Enfermería; Pandemias; COVID-19.

## INTRODUCTION

This study presents a reflection on higher education legislation during the COVID-19 pandemic and its impact on the quality of nursing education (QNE) in Brazil.

In March 2020, the World Health Organization recognized the spread of the SARS-CoV-2 virus and declared the COVID-19 pandemic, demanding international efforts to control the virus and the emergence of new variants. In addition to vaccination, the main measure implemented was social distancing, which, in turn, brought changes to all sectors of contemporary society, which include health and education.

These changes required legal action and immediate responses. In Brazil, the Ministry of Education (MEC) issued several legal acts to discipline the provision of education, determining the suspension of face-to-face classes at all levels of education.

Social distancing has established non-face-to-face teaching, in the form of remote teaching. The undergraduate courses began to adapt their teaching plans in order to contemplate synchronous and asynchronous activities of theoretical content; professors, students and administrative technicians started to have virtual interaction; practical classes and internships were suspended, and research and extension activities were significantly compromised; the adoption of remote methodologies was made possible, as a way to avoid the interruption of the academic year, without, however, considering the specificities that involve the teaching of practices and internships in health training, as well as the current conditions of the scenarios of practices in facing the pandemic<sup>(1)</sup>.

In the area of health and, more specifically, in undergraduate Nursing, remote teaching did not favor meeting the requirements that this teaching modality requires, and this can compromise the quality of academic activities, particularly regarding teaching-research-extension integration and practical and internship activities<sup>(2)</sup>.

The training of critical, reflective professionals, qualified to exercise the profession with scientific and intellectual rigor and based on ethical principles, as guided by the National Curriculum Guidelines for the Undergraduate Nursing Course (NCGs/UNC)<sup>(3)</sup>, requires the insertion of students in different practice scenarios, so that they can experience the entire health/nursing work process. Nursing teaching activities are reiterated in student involvement with the caregiving and care production dimension, indispensable for the development of professional skills, therefore, unfeasible in distance learning.

Still, the literature that addresses the laws on QNE, in the COVID-19 pandemic, has been little explored, both from a technical and theoretical perspective. This fact justifies the accomplishment of the present study, which seeks to subsidize the adoption of measures that can ensure quality standards compatible with the guidelines of the NCGs/UNC. The study is also justified by offering educational institutions a source of consultation for new studies that can contribute to the advancement of knowledge in the area of nursing.

## OBJECTIVES

To reflect on the governmental normative acts issued for higher education during the COVID-19 pandemic and on the

repercussions of these acts on the quality of nursing education in Brazil.

## METODOLOGY

This is a reflection on the repercussions for the quality of nursing education of government normative acts enacted for higher education during the pandemic, between March and December 2020, and available on the MEC website.

Twelve documents related to educational legislation were analyzed from a critical perspective and anchored in the NCGs/UNC, which made it possible to discuss the reality of nursing education, in its dynamics and contradictions, recognizing it and relating it to the pandemic moment of provisional and transformation: and in the totality of its insertion in public education policies in the context of the pandemic.

## HIGHER EDUCATION LEGISLATION

Educational legislation (EL) is a set of laws from the perspective of teaching and issues related to the educational sector. It covers the laws emerging from the Federal Constitution and those approved by the National Congress and sanctioned by the Presidency of the Republic. It may also include decrees, provisional measures, ordinances, resolutions, and ministerial and inter-ministerial opinions; has a regulatory and regulatory character. Regulatory legislation manifests itself through federal, state, or municipal laws. Regulatory legislation, on the other hand, is prescriptive and establishes rules for the execution of laws, prescribing fundamental actions for the functioning of educational institutions<sup>(4)</sup>.

In Brazil, the standard of teaching quality is guaranteed in the Law of Directives and Bases of National Education, Law nº 9.394/96 (LDB/96), which explains the guarantee of the "minimum standard of teaching quality"; establishes, among others, the need to stimulate the development of the scientific spirit and reflective thinking; to encourage scientific research, the development of science and technology; promote the extension, open to the participation of the population, aiming at the dissemination of achievements and benefits resulting from scientific and technological research generated in the institution<sup>(5)</sup>.

In the area of nursing, teaching is based on the LDB/96<sup>(5)</sup> and the NCGs/UNC<sup>(3)</sup>, which regulate the principles, foundations, conditions and procedures for training. They also explain the principles that underlie quality education, such as: comprehensive training, interdisciplinarity, articulation of theory and practice, teaching/research/extension inseparability, general and specific skills and abilities for the promotion of knowledge required for health care, in the individual and collective scope, at all levels of complexity; communication and interactivity with patients, groups and communities; leadership in multidisciplinary teamwork; between others<sup>(3)</sup>.

In addition to the highlighted principles, the NCGs/UNC point out the need for committed training aimed at the implementation of the principles of the Sanitary Reform and the Unified Health System (SUS), as well as the advancement of the formation of a critical individual, a citizen, prepared to learn, create, propose and build<sup>(3)</sup>.

## REGULATORY ACTS EDITED FOR HIGHER EDUCATION DURING THE COVID-19 PANDEMIC

In view of the health emergency caused by the new coronavirus, the Ministry of Health, through Ordinance MS/GM n° 188, of 02/03/2020, declared a Public Health Emergency of National Importance. This Ordinance, as a policy regulation instrument, defined instructions for the implementation of Law No. 13,979, of 02/06/2020, adopting, among other measures, social distancing. This Law was regulated by Decree n° 10.282, of 03/20/2020, which established essential activities during the COVID-19 pandemic. Education, in this Decree, was not included as an essential activity for society. Therefore, the functioning of higher education became temporarily regulated by Ordinances and Opinions of the MEC and the National Council of Education (CNE). Table 1 presents an overview of these legal acts issued for higher education with repercussions on undergraduate nursing education.

## REGULATORY ACTS AND THE QUALITY OF NURSING EDUCATION

The normative acts edited reflect the ideology of the contemporary world, in which social problems can be solved with the speedy creation of legal norms that, in the face of the COVID-19 pandemic, established the replacement of face-to-face teaching by remote teaching in all higher educational institutions of the country.

Teaching was remodeled by the adoption of digital technological tools for information and communication and was renamed "Emergency Remote Teaching", that is, there was a temporary change from the face-to-face teaching modality to the remote modality, in order to comply with the rules of social distancing<sup>(6)</sup>.

Emergency remote teaching demanded quick decision-making from higher education institutions (HEIs), limiting or not contemplating the execution of fundamental steps, such as

**Chart 1** – Normative acts edited for higher education in the period of the COVID 19 pandemic

ORD	LEGAL ACT	ORGANIZATION	CONTENTS
01	Ordinance No. 343, of March 17, 2020	Ministry of Education	Provides for the replacement of face-to-face classes with classes in digital media while the COVID-19 pandemic situation lasts.
02	Ordinance No. 345, of March 19, 2020	Ministry of Education	Amends MEC Ordinance No. 343, of 03/17/2020.
03	Ordinance No. 356, of March 20, 2020	Ministry of Education	Provides for the performance of students of health courses in the fight against the COVID-19 pandemic.
04	Ordinance No. 492, of March 23, 2020	Ministry of Health	Establishes the Strategic Action "Brazil count on me", aimed at students of health courses, to face the COVID-19 pandemic.
05	Ordinance No. 374, of April 3, 2020	Ministry of Education	Provides for the anticipation of graduation for students of Medicine, Nursing, Pharmacy and Physiotherapy courses, exclusively to act in actions to combat the COVID-19 pandemic.
06	Ordinance No. 383, of April 9, 2020	Ministry of Education	Provides for the anticipation of graduation for students of Medicine, Nursing, Pharmacy and Physiotherapy courses, as an action to combat the COVID-19 pandemic and revokes MEC Ordinance No.
07	Opinion No. 5, of April 28, 2020	National Board of Education	Provides for the reorganization of the School Calendar and the possibility of calculating non-face-to-face activities in order to comply with the minimum annual workload, due to the COVID-19 pandemic.
08	Ordinance No. 544, of June 16, 2020	Ministry of Education	Provides for the replacement of face-to-face classes with classes in digital media while the COVID-19 pandemic lasts and revokes MEC Ordinance No. 343, of 03/17/2020; No. 345, of 03/19, 2020; and No. 473, of 05/12/2020.
09	Recommendation No. 4, of July 1, 2020	National Board of Education	Recommends that the Ministry of Education observe Technical Opinion No. 162/2020 regarding internships and practices in the health area during the COVID-19 pandemic.
10	Law No. 14,040, of August 8, 2020	Presidency of the Republic	Establishes the exceptional educational standards to be adopted during the state of public calamity recognized by Legislative Decree No. 6, of 03/20/2020; and amends Law No. 11,947, of 06/16, 2009.
11	Ordinance No. 1030, of December 1, 2020	Ministry of Education	Provides for the return to face-to-face classes and the use of digital educational resources to complete the workload of pedagogical activities while the COVID-19 pandemic lasts.
12	Ordinance No. 1038, of December 7, 2020	Ministry of Education	Amends MEC Ordinance No. 544, of 06/16, 2020, which provides for the replacement of in-person classes with classes in digital media while the COVID-19 pandemic lasts; and MEC Ordinance No. 1,030, of 12/01, 2020, which provides for the return to face-to-face classes and the use of digital educational resources to complete the workload of pedagogical activities while the COVID-19 pandemic lasts.

Source: [www.mec.gov.br](http://www.mec.gov.br)

planning, training of those involved, preparation of technological infrastructure and administrative activities, review of academic activities of practices and internships, particularly with regard to teaching-research-extension integration, making quality education unfeasible<sup>(1,7-8)</sup>.

Still from the point of view of compromising the quality of teaching, the HEIs were exempted from the mandatory number of days of effective academic work provided for in the LDB, maintaining, however, the requirement of the workload observed in the pedagogical projects (Ordinance n° 544 and Law No. 14,040). Contradictorily, the shortening of the duration of the courses in the health area was allowed, provided that 75% of the internship hours in medicine or 75% of the curricular internship in the other courses in the health area were fulfilled.

Another contradictory aspect was the public call for last semester students and professionals recently graduated from higher education in health, to work in health services, without adequate security guarantees, going against the recommended for non-presential teaching, which aimed to protect students and professionals.

In addition, it is observed that, in the replacement of classroom teaching by remote teaching to comply with the academic calendar, conditions were not established for the real maintenance of the purposes of higher education proposed by LDB/96, such as stimulating knowledge of the problems of the world present, the provision of services and establishment of a relationship of reciprocity with the community<sup>(5)</sup>. Remote teaching also contradicts the NCGs/UNC, whose recommendation is that theoretical and practical activities be present from the beginning of the course, permeating the entire training of the nurse, with a view to developing knowledge, skills and attitudes to achieve quality training<sup>(3)</sup>.

Thus, it is understood that the measures adopted omitted the numerous structural and organizational challenges of training institutions and providers of health services. In this sense, they pointed out, as a priority, a concern to prevent the spread of the virus and address the deficiencies of health services, without due attention to the quality of training of future health and nursing professionals.

The normative acts analyzed, when adopting social distancing, did not consider the specificities that involve practices and internships in health training and, more specifically, in nursing, nor the reality of the scenarios of practices in facing the pandemic. They did not consider that some skills and competences cannot be developed in non-presential teaching, such as basic social skills and technical skills, in addition to the need for teaching-learning opportunities arising from the coexistence of students in health services<sup>(1)</sup>.

The development of teaching in the world of work encourages students to reflect on their attitudes, to build critical thinking about their performance in the scenarios of practices and to create bonds and relationships of trust, developing interpersonal relationship skills and challenging the possibilities of education not presential<sup>(1)</sup>.

It is understood, therefore, that nursing training disconnected from the world of work can reduce training to a merely theoretical education, without developing and/or problematizing social issues; without adopting the SUS as the foundational axis of

training; and without taking into account the social environment in matters of teaching, research and extension.

Teaching distant from the world of work makes it impossible to operationalize the social relevance of nursing practice and makes it difficult both to develop critical thinking in the face of situations experienced for decision-making and to sustain a reflective and active relationship based on experiences in the world of work<sup>(9)</sup>.

The development of face-to-face teaching in the world of nursing work favors the performance of essential practical activities aimed at welcoming actions for the patient, family, and community. The world of work is constituted, therefore, in spaces that involve the dimension of care production, indispensable for the formation and development of professional skills, impossible to be carried out at a distance, as attributes of the quality of care and health education<sup>(9)</sup>.

Another highlight is that, when establishing the replacement of face-to-face teaching with remote teaching, the legislation left, at the discretion of educational institutions, the responsibility for making tools available to students. However, the drop in budgets that educational institutions are already suffering was not considered, with deficient infrastructure (academic and administrative) and difficulties in having adequate equipment, quality internet access and training of their teachers for the pedagogical use of virtual tools.

The legal documents analyzed did not take into account, either, the results of the evaluations carried out by INEP, in 2019, in which the Preliminary Course Concept measured the quality of undergraduate courses. Of the 793 undergraduate Nursing courses evaluated, the majority (51.4%) only had a performance corresponding to Concept 3<sup>(10)</sup>.

It can be seen, therefore, that training institutions and health services, teaching-learning scenarios, were not considered in their needs nor invited to discuss possible and safe paths for nursing training to be articulated with the world of work, in view of the Brazilian reality and the health situation experienced with the COVID-19 pandemic. The normative acts were edited vertically, with no space for dialogue and search for other possibilities.

## FINAL CONSIDERATIONS

The governmental normative acts enacted for higher education during the COVID-19 pandemic had repercussions on the maintenance of the "minimum quality standard" ensured by the LDB/96 by shortening the duration of courses in the health area, provided that 75% of the course load was completed. The curricular internship; when making public calls for final semester students and newly graduated professionals to work in health services, without adequate safety guarantees; and by replacing face-to-face teaching with remote teaching, weakening the training of professionals capable of effective care and health promotion in the SUS.

In this understanding, in view of what has been experienced in higher education, it is important to highlight that the remote teaching modality does not include the training of nursing professionals in its entirety. Therefore, it is necessary to pay attention to the possibilities of post-pandemic pressures to generalize this

modality, due to the economic interests involved and the lack of a commitment to quality education.

Technological mediation in nursing education does not imply merely transposing face-to-face teaching to the remote context. Its adoption, replacing the totality of face-to-face activities, alerts to the wide use of the remote teaching modality to expand the open space for distance learning. This modality limits the perspective of using methodologies and technologies intended for laboratories and interaction processes that can enable practical activities and internships in nursing workspaces, violating the principles of quality issued by the NCGs/UNC.

This reflection highlights the need for the nurse's training process to be based on the production of knowledge through the insertion in concrete realities, that is, training focused on praxis. There is no way to quickly translate the planning of face-to-face courses into courses based on remote work. The use of virtual technologies should be incorporated as an auxiliary pedagogical device in the teaching process, not to replace face-to-face

teaching, but to strengthen and qualify it in order to consolidate its use in a coherent way with the quality of teaching.

The search for guaranteeing the QNE reaffirms the commitment to defending face-to-face training in practice scenarios that provide working conditions, adequate physical and psychosocial protection measures for the subjects of the training process and the strengthening of the SUS. In these scenarios, the highest standards of care practices and health/nursing education in the country must be developed.

The contributions of this study are in the sense of highlighting the weaknesses and gaps of the legal measures edited by the MEC, in the context of the pandemic, and relating them to the principles of quality of nursing education in the NCGs/UNC.

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