

Permanent education in nursing: survey to identify the necessities and the expected results based on the workers conception*

EDUCAÇÃO PERMANENTE EM ENFERMAGEM: LEVANTAMENTO DE NECESSIDADES E RESULTADOS ESPERADOS SEGUNDO A CONCEPÇÃO DOS TRABALHADORES

EDUCACIÓN PERMANENTE EN ENFERMAGE: LEVANTAMIENTO DE LAS NECESIDADES Y RESULTADOS ESPERADOS SEGÚN LA CONCEPCIÓN DE LOS TRABAJADORES

Dionize Montanha¹, Marina Peduzzi²

ABSTRACT

This study analyzed the educational activities of nursing workers with the objective to survey the needs and expected outcomes, according to the workers' perception. This is a qualitative research, in which data was collected by means of semi-structured interviews performed with twenty-five workers in a teaching hospital in the municipality of São Paulo. The empirical material was submitted to thematic analysis. Results show that the needs are surveyed mainly based on technical performance issues and on the acquisition of new equipment; and that the expected outcomes, in the short term, are mostly the improvement in procedure performance and, in mid and long term, increasing their critical thinking towards work. In conclusion, there is a general perception about continuing education in terms of surveying the needs as well as for outcome expectations.

KEY WORDS

Education, nursing, continuing. Inservice training. Work.

RESUMO

Estudam-se as atividades educativas de trabalhadores de enfermagem, com o objetivo de analisar o levantamento de necessidades e os resultados esperados, segundo a concepção dos trabalhadores. Trata-se de pesquisa qualitativa, com coleta de dados através de entrevista semiestruturada com vinte e cinco trabalhadores em um hospital de ensino no município de São Paulo, e análise temática do material empírico. Os resultados mostram que o levantamento de necessidades é realizado predominantemente com base em problemas no desempenho técnico e na aquisição de novos equipamentos; e que os resultados esperados, no curto prazo, são majoritariamente a melhora no desempenho de procedimentos e, em médio e longo prazo, ampliação da reflexão crítica do trabalho. Conclui-se que predomina a concepção de EC tanto no levantamento de necessidades como nas expectativas de resultados das ações educativas, convivendo com a concepção de EP, o que mostra uma complementaridade entre ambas as concepções de educação no trabalho.

DESCRIPTORIOS

Educação continuada em enfermagem. Capacitação em serviço. Trabalho.

RESUMEN

Se estudian las actividades educativas de trabajadores de enfermería con el objetivo de analizar la detección de necesidades y los resultados esperados según la concepción de los trabajadores. Se trata de una investigación cualitativa con recolección de datos a través de entrevista semiestructurada con 25 trabajadores en un hospital de enseñanza del municipio de San Pablo, y análisis temático del material empírico. Los resultados muestran que la detección de necesidades es realizada predominantemente con base en problemas en el desempeño técnico y en la adquisición de nuevos equipamientos, y que los resultados esperados, en el corto plazo, son mayoritariamente la mejora del desempeño de procedimientos y, en medio y largo plazo, la ampliación de la reflexión crítica del trabajo. Se concluye en que predomina la concepción de EC, tanto en la detección de necesidades como en las expectativas de resultados de las acciones educativas, conviviendo con la concepción de EP, lo que muestra una complementariedad entre ambas concepciones de educación en el trabajo.

DESCRIPTORIOS

Educación continua en enfermería. Capacitación en servicio. Trabajo.

* Extracted from the thesis "Análise das atividades educativas de trabalhadores de enfermagem em um hospital de ensino: público participante, levantamento de necessidades e resultados esperado", University of São Paulo School of Nursing, 2008. ¹Nurse. Master in Nursing by the University of São Paulo School of Nursing. Professor of the School of Nursing at Centro Universitário Lusíada da Fundação Lusíada. Santos, SP, Brazil. dionize@globo.com ²Nurse. Associate Professor of the Department of Professional Orientation at University of São Paulo School of Nursing. São Paulo, SP, Brazil. marinape@usp.br

INTRODUCTION

Human resources management has been acknowledged, both internationally and nationally, as a critical component to assure the efficiency, efficacy and effectiveness of the healthcare systems⁽¹⁾. As such, the implementation of the Unique Health System – *Sistema Único de Saúde (SUS)*, based on the conception of healthcare integrality⁽²⁾, teamwork and joint management is understood to allow for the education of the workers as an indispensable component for the construction of intended changes and quality of the services provided to the population⁽³⁾.

The nursing worker's education theme is mentioned in literature under three different denominations: continuing education (CE), education at work and permanent education (PE)⁽⁴⁻⁵⁾, which, on the one hand, show the absence of consensus about education for nursing professionals and, on the other hand, the existence of two more consolidated proposals, with a complimentary instead of an exclusionary character, although with marked conceptual differences – CE and PE.

CE is traditionally developed in the nursing and healthcare sector as a sequence or extension of the academic model, mostly focused on science as the source of knowledge, therefore supported on technical-scientific knowledge, emphasizing courses and training oriented to each professional category⁽⁴⁻⁷⁾.

In spite of the growing valuation of CE, the aforementioned characteristics highlight the goal of adapting the professionals to the work in their respective units, in order to work while guided by pre-established, institutionalized knowledge and behaviors. As such, CE does not constitute as a space for reflection and criticism about the users' healthcare needs and its corresponding practices, but as the reproduction of approaches that have been proven by instrumental reality. Instrumental, in this case, means that it is directed towards a pre-defined goal, regardless of the vicissitudes of healthcare in the daily routine of the services. As such, the conception of CE tends to replicate the predominant values in the organization of the nursing work, as well as the healthcare sector, which refer to the fragmentation of actions, the hierarchy of working relations, the individualization of work per individual and the technical-scientific paroxysm⁽⁸⁾.

A recent study presenting a theoretical reflection about the concepts of CE, PE and education at work in the nursing area shows that the conception of CE is the one closest to the authors and the experts consulted during the review⁽⁴⁾.

This study adopts the conception of PE according to the approach named permanent healthcare education (PHE), whose origins lie in the debates introduced by the Pan-American Healthcare Organization (PAHO) in the 1980s⁽⁹⁾,

increasing with the implementation of the current public policies of education and development of healthcare workers in the country⁽³⁾ and recent articles⁽¹⁰⁻¹²⁾.

Therefore, the PE approach is understood to be a political-educational project aimed at transforming the nursing and healthcare practices according the perspective of integrality, teamwork and increasing the citizenship and autonomy of the subjects involved – workers and users⁽¹¹⁾. In this theoretical-conceptual viewpoint, the analysis of the educational actions of the workers is performed according to two inter-related aspects: assessing needs by considering the triad user, worker and service; and the results expected from educational actions of nursing workers, since every educational action demands monitoring and has a two-way, reciprocal relationship, with the apprehension of needs.

In this context, the purpose of the study is to analyze the survey of needs and for the implementation of educational activities for nursing workers and the results expected from these activities, according to the conception of the nursing staff (healthcare nurses, managing nurses and nursing assistants).

...the implementation of the Unique Health System – [...] (SUS), [...] is understood to allow for the education of the workers as an indispensable component for the construction of intended changes and quality of the services provided to the population.

THEORETIC REFERENCE

The study is based on the theoretic reference of the nursing and healthcare work process, permanent healthcare education, continuous education, teamwork and integrality, highlighting the distinction between CE and PE.

As seen before, the conception of CE is mostly oriented towards the preparation of a given function and better worker performance, focused on training sessions, lectures and courses, according to the scientific and technological evolution. Other authors⁽¹³⁾

have a more comprehensive conception, in the sense of transforming the organization, within a critical and responsible perspective, that will result in the construction of knowledge for the organization, the profession and society. *Changes in attitudes and behaviors in the cognitive, affective and psychomotor areas of the human beings, in the perspective of transforming their practices*⁽⁵⁾ are mentioned, focusing on the changes and transformation of the individual instead of the social practices.

A study based in conceptions of nursing managers⁽¹⁴⁾ shows that there is unanimity about the importance of CE; however, it is still a very fragile education in the context of work, focusing on trainings and recycling processes developed from problems that occurred in the service, aimed at the satisfaction of the clients and the image of the institution. CE is designed to develop knowledge that will adapt the professional to the workplace, and the offer of educational activities occurs due to the arrival of new equipment as well, which is when training sessions are held⁽¹⁵⁾. As each

professional category is focused according to its given social and technical functions, healthcare ends up fragmented, as do the teams and the working process⁽¹⁶⁾.

However, along with education at work being centered in training sessions and technical updates, certain changes with more impact have been introduced in the qualification of healthcare and nursing personnel, especially proposals that attempt to join education and work, both conceived as social practices. These proposals are aligned to the PE conception.

Literature about the topic^(6-7, 9-12, 16) and official documents of PE policies⁽²⁾ allow for the identification of a group of characteristics of the PE conception: valuation of work as a source of knowledge; attempts at articulating the educational processes of workers with the daily routine of working processes, as well as the articulation with healthcare, management and social control; acknowledging that practices are defined by multiple factors and dimensions; orientation of educational actions of workers towards the integration of work in multiprofessional and interdisciplinary teams; the use of contextualized and participative educational strategies and the attempt to transform nursing and healthcare practices given the acknowledgement of the limits of the current approaches to integral healthcare provided to the healthcare needs of users and the population.

Considering the care provided to users in the dimension of healthcare integrality, their needs and the survey of the necessity of educational users for workers are the core of the healthcare educational process, and later analysis and evaluations are indispensable to identify the practical impact produced in healthcare quality.

In spite of the mobilization of the healthcare institutions to implant educational actions at work, the results are not very encouraging regarding the quality of the healthcare services provided^(6,10).

As mentioned before, the PAHO has been working with the PE concept since the 1980s, and has promoted a proposal to identify the needs according to the survey of the healthcare needs of the population. For the results, it is necessary for the workers to show improvements in the products or the working processes, as well as in their own attitude⁽⁹⁾.

PE means learning at work, where learning and teaching are incorporated to the daily routine of the organizations and work. It is based on different theoretical aspects, among which lie the proven contributions of Paulo Freire, especially the concepts of problem-based education and meaningful learning, where the previous experiences and knowledge of people are considered^(3,11).

According to his conception of education at work, the Ministry of Health, specifically through the Secretariat of Work Management and Healthcare Education, instituted a permanent healthcare education policy in 2003, with the

purpose of improving the healthcare services offered by the healthcare network of the country. This policy was being built in places named Centers of Permanent Education in each city; however, with regulation GM/MS #1,996 (3), passed in August 2007, they are to be constituted by regional management collegiate, with the special participation of Permanent Commissions of Professional Education Integration – *Comissões Permanentes de Integração Ensino-Serviço (CIES)*. The composition of the CIES must have the participation of representatives of healthcare services, institutions that promote the education and development of healthcare staff, healthcare workers, social movements and healthcare councils in the comprehended area. These instances are constructed collectively. It is a strategy that will contribute to transform and provide quality healthcare; the organization of actions and services; the educational processes; the healthcare and educational processes. Therefore, it is necessary to articulate the healthcare system and the educational institutions, highlighting the education and development of the workers.

METHOD

Considering the study object and goal, a qualitative student was chosen⁽¹⁷⁾.

The study field was a school hospital integrated to the Unique Healthcare System – *Sistema Único de Saúde (SUS)*, in the city of São Paulo, which has the goal of promoting education, research and extension of services to the population. The institution was chosen because it has had an educational support service (ESS) since its beginnings, over two decades ago, committed to maintaining the nursing team with a high level of technical-scientific and ethic qualification. Four nurses take part in the ESS, with one of them being the manager of the service.

The institution is characterized as a medium-complexity general hospital, with around 250 beds and 1800 employees, and 666 employees in the nursing area: 181 nurses, 215 nursing technicians and 262 nursing auxiliaries.

The study subjects were the nursing managers of the unit (13 managers), healthcare nurses and nursing assistants of one of the units, selected according to the indication of the nurse in charge of the ESS (12 workers), which added up to 25 collaborators. Two of them refused, namely one of the managers and one of the nursing technicians.

The study was approved by the Review Boards of Escola de Enfermagem da Universidade de São Paulo (file #423/2004/CEP-EEUSP) and the studied hospital. All the subjects in the study provided written consent.

Data collection was performed from April to June 2007, with a semi-structured interview based on a script that contemplates issues about the conception of education of nursing workers at the service; how the hospital activities are developed; the survey of the needs that results in the activi-

ties, considering the users, the workers and the service, as well as the results expected in the short, medium and long term. The interviews were recorded, transcribed, checked and edited, deleting slang, language quirks and references to own names, with an average length of one hour.

The analysis of the empiric material was performed according to the thematic analysis technique⁽¹⁷⁻¹⁸⁾. With the technique of impregnation, it started with a floating reading, followed by in-depth reading of each report, until each report was firmly under control and had a written synthesis. Next, a horizontal analysis was performed – firstly for each of the three occupational segments (nurses; nursing auxiliaries and technicians; nursing managers) and, finally, the horizontal reading of the dataset. This procedure of analysis allowed for the establishment of relations between the empiric material and the theoretical reference, especially the aforementioned conceptions of CE and PE, which were the base for the interpretations of the conceptions of the nursing staff about the studied object⁽¹⁷⁻¹⁸⁾.

Regarding the survey of needs for the educational actions of nursing workers, the articulation between the statements and the conceptual situation enabled the construction of the following empiric categories: survey of needs according to the problems, in the nursing supervision, in spaces of user-service exchange, in demands of nursing assistants and in the articulation with other areas. As for the results expected of the educational activities, the following categories were identified: improvement of the technical performance and reduction of flaws in procedures; increased reflection and criticism of work; avoiding automatic behaviors in the execution of the work; improving the autonomy of the nursing staff; uniformization of the behaviors of the nursing staff and clear definition of the attributions of the nursing staff.

RESULTS AND DISCUSSION

Survey of needs

Regarding the survey of needs, the reports of the nursing staff show, in accordance with literature⁽¹⁴⁻¹⁵⁾, the predominance of educational activities performed according to the problems identified at the units, especially in the technical nursing procedures, and also with the introduction of new equipment. This supports the focus on the technical dimension of work based on the technical-scientific method, in consonance with the CE conception regarded as dominant among the nurses⁽⁴⁾.

This result agrees with the few references about ascertaining needs of educational actions for workers, which address the identification of needs as an isolated actions, opposed to educational practices supported on reflections about the daily professional routine that regards not only

the technical dimension, but also the communicative dimension and the articulation of healthcare actions⁽¹⁵⁾.

Conversely, the results allow for the observation that there are other sources from which needs can be ascertained. In the reports of healthcare and managing nurses, the action of supervision, understood as inherent to the nurse's working process is regarded as the source to ascertain needs that require educational actions for nursing assistants. However, supervision is highlighted in the dimension of control, also observed in other studies⁽¹⁹⁻²⁰⁾, which strengthens the survey of needs according to the acknowledgement of flaws, completion of tasks and verification of the work.

Only one nurse conceives supervision as *doing it together*, which expresses an educational approach to this action. Therefore, the conception of the healthcare nurses interviewed about supervision make up control and *doing it together*, which may be understood by their proximity with the nursing assistants that they supervise. This result corroborates the findings of another study⁽²⁰⁾, which shows, in the action of supervision in nursing, the educational and control dimensions in nursing being executed together. However, among the nursing managers, the conception of supervision is markedly related to controlling the working process, which corresponds to the emphasis of managerial nursing work in the control and organization of the processes.

The reports show another approach in the survey of needs that expresses an approximation with the user, as it refers to a space of service-user exchanges by means of meetings with parents or accompanying partners. This meeting is an important space to listen to the user, being emphasized in the reports of healthcare nurses and nursing assistants. It is worth noting that, among managers, this meeting is only mentioned in three reports. The professional listening and dialogue between nursing workers and users lead to the conception of PE, where the core of the educational process for workers are the healthcare needs of the users, and the goal is the transformation of healthcare and nursing practices in the perspective of integrality^(3,7,9-10).

The survey of needs for the educational action can also be generated with the employees' requests when faced with difficulties to provide care. This approach was observed in five reports by managers and two reports by nursing assistants. Therefore, if educational actions are a result of problems and flaws, which indicates CE, the workers, on the other hand, mention educational needs related to the provision of healthcare with the focus on the users, which shows the concept of PE, where the education of the workers should be a result of the needs of the users, the employees and the service⁽⁹⁾.

The articulation of work in different areas is related to the process of survey of educational needs of workers only

The survey of needs for the educational action can also be generated with the employees' requests when faced with difficulties to provide care.

as stated by managers, who refer to the Hospital Infection Control Commission, and, in a single report, also to the Pharmacy department. This result shows that the planning of educational activities for nursing workers is centered in the specificity of nursing itself, which strengthens work that is individualized by category, in detriment of multiprofessional and interdisciplinary work^(7,16). Considering the conception of PE adopted in this study, which assumes multiprofessionality and interdisciplinarity of nursing and healthcare work, and therefore the necessity of articulating and integrating the working processes and their respective workers, it should be understood that educational activities of the agents should contemplate, in addition to specificities, the perspective of interprofessional practice.

Expected results

The set of nursing workers reports regarding the results expected from the educational activities shows that the expectancy of improving healthcare quality tends to predominate, although there are different meanings for that, especially regarding short-, medium- and long-term results.

In the short term, the speeches allow for the observation of a consensus in improving the technical performance, i.e., reduce the occurrence of failures in the technical procedures. They also mention the necessity of qualifying the technical-scientific knowledge that supports the nursing procedures. This approach leads to the CE conception, as it emphasizes the valuation of science as the source of knowledge, favoring knowledge over practice. However, as the workers master the contents of their work, they enlarge their sphere of autonomy, creating spaces where they can discuss, argue, make claims and interfere in the decisions of the working process⁽²¹⁾.

As for the results expected in the medium- and long-term, the interviewees considered issues related to communication and interaction, as well as the increase of the nursing workers' critical reflection about healthcare, i.e., so that workers can articulate theory-practice, develop awareness about work and therefore be better prepared to assist and provide care to users, which reflects in the improvement of healthcare quality.

These findings agree with the conception of PE, supported in the concept of problem-based education and meaningful education, where the teaching-learning process stems from the reality experienced by the actors involved, based on the problems and experiences encountered with disquiet, their questioning, and the quest for change^(6,10-12).

Medium- and long-term results also agree with PE, since this conception relies on transformation of practices after critical reasoning, in collective spaces, based on the problematization of the daily routine of work and the necessity of educational actions. According to this conception, workers must be actors of education- and work-related settings, products and producers of the current settings, and, from them, the impact caused on the *subject being* of each participant, transforming the practice towards

the healthcare needs of the population, in accordance with the integrality and teamwork⁽¹¹⁾.

For the managing and the healthcare nurses, changes in behavior will not necessarily occur in the medium- or long-term, as the proposals to make the worker aware of the nursing care needs may yield results in the short-term regarding changes in behavior. As such, the speeches use the kangaroo method as an example, implanted in the institution, which had quick responses from the employees who experienced the educational action, even though it represented an expressive change in the healthcare process. According to the reports, the acquired knowledge was put into practice immediately after the action was finished, as it provided the necessary worker awareness regarding the users' needs and nursing care.

Considering that the nursing working process is primarily oriented by the users' needs of nursing care, the possible changes in the execution of work are understood to possibly being potentialized as the expected behaviors are related to the object of intervention. The speeches of the healthcare nurses and nursing assistants relate the results of improved healthcare quality to more and better qualification among the staff, since it allows for orientations that are more pertinent to the users, as well as strengthening the continuity of healthcare outside the institution.

Regarding changes in the work due to educational actions focused on workers, it is worth noting, as stated before, the necessity of distinguishing the reference to the transformation of practices and behaviors. The first regards work as a social action, i.e., the way in which the users' healthcare needs and the responses offered by the workers and the service are apprehended; the second refers to the workers' individual changes in attitudes. This is a relevant issue for the current object of study, as it allows for more clarity in the acknowledgement of the PE and CE conceptions.

According to nurses and nursing managers, educational activities must be continuous. The permanent character of these actions is strategic so that workers do not acquire bad habits while performing their work. Although the interviewees do not present this aspect of the theme for the results expected from PE, the aforementioned bad habits are understood to express the risk for automatization and fragmentation of healthcare actions, which may and should be avoided according do reflections about the practice, i.e., a problem-based approach about the users' needs and the meaning of work.

Nursing auxiliaries and technicians relate the results expected from educational actions to the necessity of monitoring the work performed, i.e., supervision, in order to increase their professional autonomy. This monitoring should be educational, not punitive.

Every healthcare and nursing worker has a certain level of autonomy at work, since it is not possible to fully define the healthcare action before its execution, which places the

necessity of judgment and technical decision-making in the execution of the intervention ⁽²¹⁾. It could be inferred that the autonomy of nursing assistants is restricted by the lack of appropriate technical knowledge that will support decision-making, since autonomy is related to judgment and technical decision-making.

Another approach performed by the nursing managers, auxiliaries and technicians deals with uniformity of actions, since educational activities must allow for the establishment of some uniformity in nursing healthcare among all the unit staff and in every period.

A clear definition of the attributions of each category that make up nursing work is also mentioned by the nursing assistants as results expected from educational actions. This could be understood as a reflex of the division of work existing in the nursing field, which, due to the increasing technological incorporation and complexity of the nursing and healthcare work as observed in the past three decades, makes the attributions of each category imprecise, even to the point of causing conflicts and stress among the staff. The definition of the attributions of the nursing staff is also related with the perception of a certain "artificiality", established in the distinction between nursing auxiliaries and technicians, because studies show that these are two different professional categories that perform similar tasks ⁽²¹⁾.

It is also possible to identify, in the interviews with nursing assistants, that their compliance with change occurs more easily when the professional is inserted in the decision-making process. As such, it is important to develop a more articulate work in the team, so that the nursing assistants, who perform most of the nursing care, take part in the decisions about the care provided to the users.

Two of the managers mentioned circular improvements in quality, as link between users, professionals and the service. The educational action for workers must reflect in the quality of the services provided to the population. It is worth noting that the circular aspects of the triad users, nursing staff, and services provided expresses a dynamic and dialectic conception, in the sense of mutual influence among the elements that comprise the phenomenon addressed in the present study: the survey of needs and the expected results according to permanent nursing education.

FINAL CONSIDERATIONS

Regarding the survey of educational needs of the nursing staff, results shows that the focus lies on the failures identified and the most common problems, which unfolds in educational actions centered on the technical nursing procedures that lead to the reiteration of the hegemonic, biomedic healthcare model, and also the dominant con-

ception of CE. Other minor sources are also used when planning educational activities.

Conceptions about results expected from short-term educational actions for workers also point to the same direction, improvements in the performance of techniques and reduction of failures in procedures, reiterating the valuation of science as the source of knowledge, the importance of the technical dimension of work and the conception of CE.

However, in the medium and long term, the expected results move towards the increase of critical reasoning at work, as well as interaction between professionals and users, and the articulation between theory and practice, in an evident conception of 'education at work' guided by PE.

To a lesser degree, the conceptions about expected results also point to other aspects related to avoiding bad habits in the execution of work, uniformization of actions and defining the attributions of the different nursing workers more clearly.

The findings in this study also note the necessity of supervision, in an educational character, and the necessity of increasing professional autonomy, especially regarding the nursing assistants.

It should be noted that this study is an excerpt in the context where permanent education in nursing is inserted, and, therefore, has limitations in the comprehensiveness of its results. However, there are advances in the knowledge about the studied topic – educational actions of nursing workers, especially related to two conclusive aspects presented next.

The empiric evidence of the study presents a contradiction – between the everyday investment in ascertaining the needs and the expectancy of technical results, eminently guided by the instrumental rationality, and the strategic horizon, the expectancy of promoting critical reflection and increasing the autonomy of the nursing staff as social subjects and citizens. The question is: is it possible to invest in an emancipator horizon based on a daily routine restricted to the reiteration of the technical-scientific paroxysm?

The results also attest the predominance of educational actions of nursing workers oriented by the conception of CE, living with the identification of the nursing staff itself – nurses, auxiliaries, technicians and managers – of the necessity and possibility of educational activities with new formats, contents and meanings, in the perspective of PE. This brings the first response to the aforementioned question, corroborating with the comprehension that CE and PE may be complementary, and that a clear distinction between both allows for acknowledging the space they must occupy in work management.

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