

# Advances in the Health Training Process Quality: Links between Education, Service and Community

**Tainara Lôrena dos Santos Ferreira, Fábيا Barbosa de Andrade**

Faculty of Health Sciences of Trairi (FACISA), Federal University of Rio Grande do Norte (UFRN), Santa Cruz, Brazil

Email: [tainara\\_lorena@hotmail.com](mailto:tainara_lorena@hotmail.com), [fabiabarbosabr@yahoo.com.br](mailto:fabiabarbosabr@yahoo.com.br)

Received 11 May 2015; accepted 28 December 2015; published 31 December 2015

Copyright © 2015 by authors and Scientific Research Publishing Inc.

This work is licensed under the Creative Commons Attribution International License (CC BY).

<http://creativecommons.org/licenses/by/4.0/>



Open Access

---

## Abstract

This study proposes to discuss the experience lived by Pró-Saúde and PET-Saúde team of FACISA/UFRN together with the Municipal Health Department of Santa Cruz/RN from a critical-reflexive perspective about the interaction between education, service and community as well as advances in approach and the strengthening between the school and Primary Health Care. This is an exploratory study with an experience report approach of the Pró-Saúde and PET-Saúde team from 2012 to 2014. The integration of these programs in experimental scenarios of the Unified Health System and the strengthening of the proposed training of human resources capable of the current health-care system were observed. Thus, contributions in health in undergraduate courses and practices of health services are important, since the approach to the reality of the population and their social needs contribute to the vocational training quality.

## Keywords

**Human Resources, Higher Education, Unified Health System, Primary Health Care, Education, Service, Community**

---

## 1. Introduction

Historically, the health training process of professionals was centered in assisting the user individually and offered from specialized services, being influenced by a mechanistic approach, fragmented and reductionist, resulting in a shortage of health professionals oriented to act in public health according to social needs of the Unified Health System (SUS).

Since the Constitution of 1988, the regulations of SUS by the Organic Health Law 8080/90 and therefore the performance of professionals in the public health service and recently in the Family Health Strategy (ESF), it becomes evident that the qualified human resources training topic is to realize the need for professionals facing the demands of the population and limitations in the training process of health education.

With regard to the integration of education, service and community, proposes of the National Policy Reorientation of Vocational Training in Health are implemented, currently by the Reorientation National Program for Professional Training in Health (Pró-Saúde) established by Ministerial Decree Number 2.101 of November 3, 2005 and by the Labor Education Program for Health (PET-Saúde), regulated by Ministerial Decree Number 421 of March 3, 2010.

Currently SUS is the largest health labor market in Brazil, and is in the routine of health services that the knowledge is gained [1]. In this perspective, Health Sciences College of Trairi/Federal University of Rio Grande do Norte (FACISA/UFRN) since 2012 has been developing activities with students of undergraduate courses in Nursing, Physiotherapy and Nutrition, in Santa Cruz, state of Rio Grande do Norte, strengthening its partnership with the Municipal health Department (SMS), to strengthen the training of human resources for health in the provision of comprehensive and interdisciplinary care.

The reorientation of vocational training through Pró-Saúde and PET-Saúde provides high technical, scientific, technological and academic training of health professionals, based on citizenship, critical thinking and social function, guided by the principle of the indivisibility of teaching search and extension [2]. In this context, this study aims to discuss the experience lived by Pró-Saúde and PET-Saúde team of FACISA/UFRN together with SMS of Santa Cruz/RN from a critical-reflexive perspective on the interaction between education, service and community as well as advances in approach and the strengthening between school and Primary Health Care.

## 2. Methodology

This is a study of exploratory and descriptive type of approach anchored in the experience report of the Pró-Saúde and PET-Saúde team of FACISA/UFRN, in Santa Cruz, Rio Grande do Norte. The health care system of the city has twelve (12) Family Health teams; one Psychosocial Care Center (CAPS); a maternity hospital and a midsize general hospital. The experience took place from 2012 to 2014.

PET-Saúde FACISA-UFRN/SMS took place in the context of Primary Health Care (APS) being implemented in the Family Health teams from Santa Cruz in August 2012, with a team consisting of four tutors (teachers), twelve mentors (health services professional) linked to the Municipal Health Department, thirty-two students of undergraduate courses in Nursing, Physiotherapy and Nutrition, and twenty-four scholarship students and volunteers. Thus, two networks were chosen for PET-Saúde: Cegonha Network and Psychosocial Network.

With regard the methodology, active, problem-solving, reflective and different methodologies were used. To Mitre *et al.* [3], the collective reflection, dialogue, new perspectives and the recognition of the context allow the construction of new ways in searching mind-body comprehensive, theory and practice, teaching and learning, promoting independence, social participation and dialogue through reflective and critical practice.

Among the actions developed in Cegonha Network there are: Pregnant women groups in the Basic Health Units; Preparation of booklets, manuals and flyers; Humanized outpatient care; Postpartum home visits; Educational activities in the UBS and institutions (kindergartens, schools, Social Assistance Reference Center); Dialogued exposure in waiting rooms; Consultation with DATASUS/MS databases (Notebook Information/SIA/SIH/SIAB/SIM/SINASC); Training and courses; Creation of a flowchart for Cegonha Network to help the team and PET group sending users in the Health Care Network.

As for the activities developed in the Psychosocial Network, there were: Conversation groups and group activities with groups of women, men, adolescents, drug addicts and registered LGBT to the Social Assistance Reference Center (CRAS), Reference Center Service Specialized Social (CREAS) and Psychosocial Center Care (CAPS); Educational activities in schools; Training on addiction and reduction of occupational health services damage; Construction of booklets, brochures and banners on addiction, healthy lifestyles and to publicize the project; Dialogued exposure in waiting rooms of UBS; Participation and presentation of work in the First Brazilian Congress on Mental Health and Substance Dependence and 16<sup>o</sup>; Brazilian Congress of Nursing Councils; Creating the flowchart of Psychosocial Network in order to integrate social health care for operation purposes in network used by professionals, managers and users. It is important to highlight the strengthening of labor interaction between the Municipal Departments of Education, Social and Health Care.

The dynamics of team work that involves the local managing committee have weekly meetings to discuss plans and activities, with tutors, mentors and scholarship and non-scholarship students in order to assess the activities developed and study issues relevant to the development of activities.

### 3. Results and Discussion

The link of education, service and community brings the perspective of changes in the structure of healthcare work setting. Therefore, there is the need for reorientation of health practices and the transformation of the educational process in health. Thus, seeking to achieve effective impact to the population's health needs, Pró-Saúde and PET-Saúde of FACISA/UFRN, together with SMS, search the reorientation of professional training for the courses offered, integrating them with ESF in strategic areas of the Ministry of Health (MS), being chosen the Cegonha Network and Psychosocial Network.

In Brazil during the last 30 years, there were improvements in delivery and birth care, result of a series of efforts and initiatives of the government and society. However, although access to prenatal care is almost universal, the reduction of maternal and infant mortality remains a challenge [4]. Therefore, the maternal and child health has emerged as one of the current government priority. In 2011, the Ministry of Health created Cegonha Network, regulated by Decree Number 1594 of June 24, 2011, aimed at expanding access and improving the quality of prenatal and delivery care, postpartum and child up 24 months of life.

As for Psychosocial Network, it is known that from the Psychiatric Reform there were great advances in the mental health setting. However, there are still challenges to be met, and the training of human resources is fundamental to the effectiveness of assistance provided individual and collective level by SUS principles. Thus, the Psychosocial Network emerged, established by decree Number 3088, of December 2011, in order to expand access to psychosocial care of the general population, and the linkage of people with mental disorders and needs arising from the use of crack, alcohol and other drugs and their families to SUS care centers [5].

The comprehensive of SUS and guidelines of the education-service rescue the inseparability of education- research-extension, being reorienting axis of teaching practices in health, seeking to strengthen from the curricular changes, since this approach students with the current public health policy in the country, human resources training capable of providing the health care guided in principles of the health system are expected.

The team's performance in Cegonha Network and Psychosocial Network in the city offers different scenarios in the promotion and protection of health, prevention of diseases and disorders, health maintenance, and recovery of the individual. The reorientation of the educational process in health, from the approach to health services, has been confirmed for their contribution so the future professionals understand the needs of the public health system and population, being centered on Primary Health Care.

Given the reorientation of professional training, higher education needs a new problem-solving and more integrated model of education, which, unlike the banking education, aims at the training process based on the development of critical consciousness and freedom in order to overcome the contradictions of reality [6]. In this reality, it is worth noting that the students of Nursing, Physiotherapy and Nutrition strengthened their integrated practice as a multidisciplinary team, in addition to bringing this experience to the school environment, sensitizing other colleagues how important is the teamwork in the recovery process and rehabilitation of SUS users.

The experiences in Cegonha and Psychosocial Networks from the actions mainly developed in the inclusion of students in health services within the APS, groups formed with service users, preparation of booklets, manuals and flyers, dialogues in waiting rooms, educational activities in UBS and institutions, training courses for continuing education, consultation and information systems, reveal the positive aspects of education, implemented by the improvement in the search for health services with a focus in health promotion, disease prevention and population health problems, and the great proposal in health and education which is the continuity and follow-up of the attention given to the population and to encourage popular participation and redemption of autonomy.

Efforts for education-service integration give the possibility of new construction and invest in establishing relations, where products and fruits are shared. Acting in care networks is to contribute to the integral, ethical, qualified and resolute care towards the population's needs, still being a challenge for the current system. Therefore, it is worth noting the strengthening of this proposal through the training with emphasis on management and planning that provides the articulation and integration.

Thus, it is clear that the activities developed in Pró-Saúde and PET-Saúde have strengthened the education-

service integration and knowledge of health policy and continuing education, which expanded knowledge for SUS focusing on APS. It is worth noting the strengthening of health actions integrating the courses offered in FACISA/UFRN, Nursing, Physiotherapy and Nutrition, enabling the training of professionals guided by the multidisciplinary, contributing to the improvement of care provided to the population.

The permanent health education absorbs SUS guidelines and highlights the system's decentralization and local-regional capacity building, lying in the proposed regionalization of the health system, a practice of teaching and learning that integrates its different dimensions, being involved with the system of reality and social needs [7].

It is noticed continuing education as a fundamental element for changes in the professionals health training scenario, since it approaches teachers and students in the practical scenario by SUS, and redefines the necessary theory and practice. Such health services as SUS experimentation scenarios promote dialogue between knowledge and reflection on teaching practices and care.

Experiences in APS services rather than focusing only on hospital practices, also favor multidisciplinary and interdisciplinary consolidation, based on the expanded concept of health and SUS principles, focusing on the user, on their biopsychosocial dimension in the environment territory and community that is proposed at the primary level. This is in line with the guideline proposed by the Pact for Life strengthening of primary care.

As strategies in building greater commitments of universities with the SUS at the national level, have to experience achievement placements in local health systems as they allow a new learning space, which is the daily work of service health, understood as an educational principle that enables the formation of ethical and politically committed professionals with the health needs of population [8].

Thus, the adoption of health education grounded in health promotion model mainly centered on health care should be understood from modifications and restructuring within the undergraduate courses, and the professional of health service already active should seek continuing education in the strategy for changes in health care settings. Therefore, the participation in the community and the integration of health services propose a change in professional training models and reconstructs the social role of the university and higher education.

Investment in education and promotion of community health, different from traditional institutionalized practices, helps to widen the relations and interactions by the bond with users of health, families and communities and strengthen democracy and the autonomy of both the professional and the user [9]. In addition, the integration of academics in services demonstrates the great opportunity to meet the full operation of health services, the reality of the education-service integration in the professional training of the SUS and its principles, enabling the theory-practice integration, multidisciplinary and the ability to share knowledge [10].

Thus, the links between education, service and community enable the understanding of health policy, management and health care as a proposal of the Ministry of Health together with the Ministry of Education. When approximation and integration among higher education students in the health care setting occur, it contributes to the correction of errors, strengthening the professional practice of quality and provision of multidisciplinary, transdisciplinary and interdisciplinary team model for SUS. Meanwhile, it is noticed the quality of training of students participating in Pró-Saúde and PET-Saúde and the constitution of the critic, reflective professional graduation dealing with national curriculum guidelines of the courses in Brazil.

#### 4. Conclusions

The reorientation of professional training shows a scenario with deep partnerships between the Ministries of Education and Health, to link education, service and community. From the experiences, actions and proposals developed by Pró-Saúde and PET-Saúde, especially in the performance of Cegonha Network and Psychosocial Network, there are great contributions in Nursing, Physiotherapy and Nutrition courses, as well as the practices of health service, giving the knowledge of dialogue between students, teachers and professionals of health services.

The tutor/teacher-care integration, which occurs in order to diversify the learning scenarios, also promotes the strengthening of assistance based on the principles and guidelines of the Unified Health System, as well as the multidisciplinary and interdisciplinary approach. Although the reorientation of health education process has undergone changes that contribute to the formation of human resources according to the needs of the system and the population, it is expected to strengthen and increase such programs in order to achieve even better results.

Furthermore, it is noteworthy that the experiences from Pró-Saúde and PET-Saúde in community activities

and within the APS, promote the strengthening of education-research-extension and their inseparability in order to achieve multiplier effect of program actions and the closer approach to graduate programs in order that the individual can develop the necessary skills to act as a transforming agent of society. Therefore, it is expected to contribute to the socialization of knowledge in this area and thereby to expand the efforts and possibilities of changes in undergraduate courses in health and practices in services.

## References

- [1] Cavalheiro, M.T.P. and Guimarães, A.L. (2011) Training for the NHS and the Challenges of Integration Education Service. *Caderno FNEPAS*, **1**, 19-27.
- [2] Ministry of Education, Ministry of Health (BR) (2009) Reorientation National Programme of Vocational Training in Health—Pro-Health: Objectives, Implementation and Potential Development. Ministry of Health, Brasília.
- [3] Mitre, S.M., Siqueira-Batista, R., Girardi-de-Mendonça, J.M., Morais-Pinto, N.M., Meirelles, C.A.B., Pinto-Porto, C., *et al.* (2008) Active Teaching and Learning Methodologies in Formal Education in Health: Current Debates. *Ciência & Saúde Coletiva*, **13**, 2133-2144.
- [4] Ministry of Health (BR), Secretariat of Health Care (2011) Practical Handbook for implementation of Stork Network. Brasília (DF).
- [5] Office of the Minister, Ministry of Health (BR) (2011) Order No. 3088 of 23 December 2011. Establishing the Psychosocial Care Network for People with Mental Distress or Disorder and Needs Arising from the Use of Crack, Alcohol and Other Drugs within the National Health System. Ministry of Health, Brasília.
- [6] Almeida, M.M., Morais, R.P., Guimarães, D.F., Machado, M.F.A.S., Diniz, R.C.M. and Nuto, S.A.S. (2012) From Theory to Practice Interdisciplinary: Pro-Health Experience Unifor and His Nine Undergraduate Courses. *Revista Brasileira de Educação Médica*, **36**, 119-126. <http://dx.doi.org/10.1590/S0100-55022012000200016>
- [7] Ferla, A.A., Ceccim, R.B., Schaedler, L.I., Daron, V.L.P., Bilibio, L.F.S., Santos, L., *et al.* (2009) Continuing Education and the Regionalization of the State Health System in Bahia: Teaching-Learning and Health Policy as Time Composition. *Revista Baiana*, **33**, 7-21.
- [8] Lemos, M., Rocha, M.N.D. and Peixoto, M.V.S. (2012) Experience Stage in the SUS-BA: Reorientation of Vocational Training Strategy in Health. *Revista Baiana de Saúde Pública*, **36**, 263-269.
- [9] Backes, D.S., Backes, M.S. and Erdmann, A.L. (2009) Promoting Citizenship through Nursing Care. *Revista Brasileira de Enfermagem*, **62**, 430-434. <http://dx.doi.org/10.1590/S0034-71672009000300015>
- [10] Pizzinato, A., *et al.* (2012) The Teaching-Service Integration as a Strategy for Vocational Training for the Unified Health System. *Revista Brasileira de Educação Médica*, **36**, 170-177. <http://dx.doi.org/10.1590/S0100-55022012000300025>