Objective: to verify the qualification of the Nursing team and to describe their knowledge about the Hospital Accreditation process with the perspective of analyzing whether the Permanent Education was influenced by this process. Method: a descriptive case study, of quantitative approach, developed in a private hospital in Minas Gerais, Accredited level I. The data were collected through questionnaires applied to the Nursing team. Results: the majority of the Nursing team considered that the accreditation process influenced Permanent Education, in which (100%) of the nurses have specializations, and (53%) of Nursing technicians/assistants took short courses. Conclusion: the results showed similar opinions in which educational actions were influenced through the accreditation process with themes focusing on safety, quality of care and professional qualification. Descriptors: Accreditation; Education; Quality Management.
INTRODUCTION

In order to obtain quality and safe care, it is necessary that the patient receive comprehensive care. However, faced with the problems encountered in the practice of the health professional, changes are expected. These transformations can start from the awareness of the managers, and in this context, the Permanent Education in Health (PEH) is inserted as an instrument that will enable these professionals.¹

The strategy to qualify the health professional emerged in 2004, when the Federal Government instituted the National Policy of Permanent Education in Health (NPPEH), according to GM / MH Ordinance No. 198, of the Ministry of Health (MH). Thus, this strategy aimed to train and train health professionals in order to offer quality assistance to the population according to the principles of the Unified Health System (UHS).²

Subsequently, there was a change in the GM / MH Ordinance No. 1996, of August 20, 2007, directing new strategies and guidelines for the NPPEH implementation. The main focus was the transformation of the pedagogical and health praxis, favoring aid for the individual and collective development of health professionals.³

Given this context, it should be emphasized that educational actions are based on significant changes through teaching and learning, and these behaviors, present in the daily life of health professionals, which result in improvements for users, already seen as a concern of Brazil for more than ten years, focusing on the quality of health care.

The process of permanent education (PE) is one of the requirements for acquiring quality certification⁴, as well as personnel training, are considered relevant strategies for obtaining Hospital Accreditation and for developing the quality of health services in Latin America by the Organization World Health Organization (WHO) and the Pan American Health Organization (PAHO).⁵

Regarding the concept of training, it is an educational action directed to a particular function or task that the person will exercise in his place of work, according to his position.⁶

It can then be considered that the training aims to improve the functions that the professional performs in the institution, and with the technological and scientific advance, the training can be seen as an effective learning strategy, guaranteeing a primary impact.⁷

It should be noted that accreditation is related to the origin of the term acredit, to give credits, to be trustworthy and credible⁸, being defined as a process that evaluates and certifies the quality of health establishments, inserting educational actions with the purpose of constant improvement.⁹

Accreditation can be understood in two dimensions: as an educational strategy that encourages establishments providing health care services, as well as health professionals, to acquire a fair culture of quality; and, as an evaluation procedure and certification of the quality of these services, analyzing the performance achieved by the institution through predefined standards.¹⁰

These standards can be simple or complex, as long as they are fulfilled in full resulting in what is expected, being elaborated in three levels. When the health institution meets the requirements of level 1, it receives the certification in the condition of Accredited, level 2, Accredited Fully and level 3, Accredited with Excellence.¹¹

The Brazilian Accreditation Program has as a procedure the evaluation of a voluntary, periodic and reserved nature, and the PE of the health professionals collaborate to guarantee the quality of care.¹²

The labor market in health and technology has undergone significant changes. With this, the population is becoming more attentive, and demanding about their rights, arousing, in the health institutions, especially the private ones, the interest to seek the quality of the assistance and security of its users through accreditation.

There are several authors, each of which presents a definition of quality, not being simple, but very broad. However, many researchers prefer to see as a variety of dimensions and, thus, do not risk adopting restricted interpretations.¹³

In this perspective, in order for health establishments to remain in the market, the differential lies in the field of quality of personnel and professional action of their human resources ⁵, contained in aspects that are based on their competence, based on the strength of the EP.¹⁴

Finally, in order to obtain quality care by health professionals, with an emphasis on the Nursing team, which represents a greater number in health establishments, educational actions should be part of this context.

In Brazil, 1,856,683 Nursing professionals were identified ¹⁵, and, in the State of Minas Gerais, 178,177 were registered, representing 24.46% of nurses and 69.30% of Nursing assistants and technicians¹⁶, representing a
considerable amount of the workforce in the Health area.

It is added that nurses should be responsible for the planning of Nursing care, inserting the qualification of the team, as well as adequate working conditions for the delivery of safe and quality care.\textsuperscript{15}

Justified by the relevance of the theme, where PE is highlighted in government policies\textsuperscript{16} and inserted in the context of Hospital Accreditation, this process, which prompts institutions to adopt measures to improve the quality of care and patient safety, this research may contribute to reflection of Nursing workers, as well as health managers.

In this sense, the objective was to verify the qualification of the Nursing team and to describe their knowledge about the Hospital Accreditation process with the perspective of analyzing whether the Permanent Education was influenced by this process.

\section*{METHOD}

A case study, descriptive, quantitative approach, which was extracted from a dissertation.

The case study has as a characteristic the preservation of real events, being used in organizational and managerial studies, where its development is seen in the most diverse areas of knowledge.\textsuperscript{17}

The research, of the descriptive type, presents the standardized technique of data collection as a striking characteristic\textsuperscript{17}, allowing the description and interpretation of the facts and phenomena, without the intention of intervening in the sense of modifying the reality, but describing the object of the research with the purpose of identifying the frequency that occurs, characteristics, causes and relationships.\textsuperscript{18}

It is a private hospital, located in the State of Minas Gerais, Accredited level 1, in February 2013. It is classified as a medium-sized hospital, with 60 beds distributed in clinical and surgical units. It also has four operating rooms, ready 24-hour care, adult and neonatal ICU.

The study was conducted in accordance with Resolution 466/12 of the National Health Council, obeying the ethical principles of Research with Human Beings\textsuperscript{19}, approved by the Research Ethics Committee (CEP) of the Federal University of Alfenas under No. 38738214.3.0000.514.

Participants were asked to agree through the Free and Informed Consent Form (TCLE), ensuring anonymity and the right of withdrawal at any stage of the research.

The research population was comprised of Nursing assistants/managers and Nursing technicians/assistants of the referred hospital institution, totaling 46 Nursing professionals. Of these, 41 participated in the research and signed the ICF, with seven nurses, 33 Nursing technicians and one Nursing assistant.

The inclusion criteria were to be present in the period of data collection, with time available to respond to the questionnaire. Of the total, four Nursing professionals were absent due to vacations or leave and a Nursing technician did not sign the ICF, thus, the questionnaire was excluded from the data analysis of the research.

The data collection was performed by one of the authors in June 2015, at pre-scheduled schedules with the nurse manager, covering day and night shifts, guided by a questionnaire composed in two parts.

The first instrument allowed the socio-demographic characterization and professional training of the subjects of the study, being composed of: initials of the name, being this optional identification; age; sex; professional training / time / in the hospital institution, and professional qualification. The second instrument was composed of 16 questions, 15 questions of multiple choice and one open question, distributed to the Nursing team during the work shift and collected on the same day, at the end of the shift.

The data were organized in a figure and tables, with descriptive analysis, by means of absolute frequencies, followed by the discussion in relative frequency percentage for exploration. In the semi-structured question, the data were coded by means of acronyms, with the abbreviation TAE for Nursing technicians and auxiliaries, E for nurses followed by numbers (TAE 1 to TAE 14), (E 1 to E 5), being transcribed the answers in full, with descriptive and quantitative analysis.

\section*{RESULTS}

Regarding the characteristics of the subjects, it was verified that the Nursing team was composed of seven (17%) of nurses and 34 (83%) of Nursing technicians / assistants, of which 82.9% were female. As to age, it was verified that 80.5% are more than 30 years old. Most of the Nursing professionals, 83%, responded having more than four years of training and, as to the time of performance in the research institution, it was evidenced that 68.3% of the Nursing professionals
participated in the Accreditation process in said institution.

It is evident that the professionals with more than four years of age have been involved since the beginning of the accreditation process. However, professionals with a time of operation in the institution between two and four years of age can be considered relevant, since this period was marked by the process that preceded the certification, as well as during the period of revaluation carried out by the institution accredited by the ONA.

Regarding the professional qualification, seven (100%) of the nurses have specializations, however, none of them had a master’s degree or doctor’s degree. While for the Nursing technicians/assistants, 53% did short-term courses, but, did not describe the courses; 35.2% did not take courses and the others did not answer the question, corresponding to 11.8%.

The second instrument, the semi structured questionnaire applied to the Nursing team, were described in Figure 1, with absolute data, and in tables 1, 2 and 3, with absolute quantitative data and percentage.

Domingues AL, Martinez MR.

Permanent education and hospital accreditation...

<table>
<thead>
<tr>
<th>Questions</th>
<th>Yes</th>
<th>No</th>
<th>Partially</th>
<th>Did not answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-Do you have any knowledge about the Hospital Accreditation process?</td>
<td>23</td>
<td>4</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>2-Have you read the ONA Manual?</td>
<td>12</td>
<td>21</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>3-Did the Accreditation process, generally, favor this institution?</td>
<td>25</td>
<td>5</td>
<td>10</td>
<td>1</td>
</tr>
<tr>
<td>4-Is the proposal of the accreditation process shared with the entire health team?</td>
<td>22</td>
<td>5</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>5-Did permanent education favor the acquisition of knowledge related to the accreditation process?</td>
<td>28</td>
<td>2</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>6-Do the educational activities correspond to the needs of the service, Nursing workers and patients?</td>
<td>29</td>
<td>3</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>7-Are educational actions applied to all health staff, such as: Nursing, doctor, nutritionist, pharmacist and physiotherapist?</td>
<td>19</td>
<td>8</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>8-Is the amount of permanent education and training applied annually sufficient?</td>
<td>20</td>
<td>4</td>
<td>17</td>
<td>0</td>
</tr>
<tr>
<td>9- Is the time spent in educational actions appropriate?</td>
<td>22</td>
<td>8</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>10- Is the content of continuing education sufficient to improve Nursing care?</td>
<td>27</td>
<td>4</td>
<td>9</td>
<td>1</td>
</tr>
<tr>
<td>11- Is any instrument applied to evaluate the effectiveness of continuing education or training?</td>
<td>15</td>
<td>9</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>12- In practice, do the results of educational activities match the expectations of the service?</td>
<td>23</td>
<td>3</td>
<td>15</td>
<td>0</td>
</tr>
<tr>
<td>13- Did the training and permanent education influence the Accreditation process? Justify the answer.</td>
<td>26</td>
<td>4</td>
<td>9</td>
<td>2</td>
</tr>
</tbody>
</table>

Figure 1. Questionnaire applied to the Nursing team in June 2015, N = 41. Alfenas (MG), Brazil, 2015.

It was verified that 90.24% of the Nursing team have some knowledge about the Accreditation process. Of the four professionals who answered did not have knowledge, one nurse with three months in the institution and three Nursing technicians who worked six months, seven months and 21 years respectively, showing that 75% of these professionals did not participate during the Accreditation process.

Regarding the reading of the ONA manual, the results indicated that all nurses who participated in the Accreditation process five (71.42%), read the manual, one (14.29%), read partially and one (14.29%), read the manual. Did not read, and this professional was recently admitted to the institution and 21 (61.76%) did not read the manual.

The Accreditation process, generally, favored improvements in the institution in which 60.97% said yes and 24.39% partially. It is understood that this process, in order to have positive results, requires the involvement of all employees of the institution, and 53.65% of Nursing professionals stated that this proposal is shared with the health team, and 34.14% answered partially.

It is known that ONA’s proposal to evaluate improvements in patient care related to quality and safety in hospital institutions is done through educational actions. In view of this fact, it was verified that 68.29% of the Nursing professionals consider that the EP favored acquisition of knowledge related to the accreditation process and 26.82% answered partially.
It was added that these educational actions corresponded to the needs of the service, Nursing workers and patients, where 70.73% was affirmed by the respondents and only 7.31% disregarded. However, in the question that approached if the educational actions are applied to the entire health team, 46.34% said yes and 19.51% said no.

From the perspective of the number of PEs and training applied annually, 80.48% consider that the time spent is sufficient or partially. Additionally, it can be seen that the content of PE was enough to improve Nursing care, answered by 65.85% of respondents. The PE to provide benefits to the health team, resulting in improvements for the hospital institution and, for the patients. It is believed that this action could be evaluated and thus, evidence if it was effective. Considering this reflection, it was verified that 36.58% of respondents stated that some instrument is applied for such an evaluation and 39.02% answered partially.

In the question addressed, if in practice the results of the educational activities correspond to the expectations of the service, the majority of respondents consider that yes or partially, totaling 92.68%.

The last question in Figure 1, considered by the researchers as the most relevant, was to verify if the Nursing team considers that the training and PE influenced the Accreditation process, as well as the justification of the response. Of the 41 Nursing professionals, 39 (95.12%) answered the question, however, 19 (46.34%) justified the answer, five (71.42%) were nurses and 14 (42.17%) were technicians/auxiliaries of Nursing.

From the justifications analyzed, the results showed that all the nurses responded positively, that the Accreditation process was influenced by PE, justifying the response. Of the 14 Nursing technicians/assistants who answered the questionnaire, eight (57.14%) answered yes, four (28.57%) answered partially and two (14.29%) answered no, justifying that they already had Search for certification.

During the analysis of the justifications of the answers, two empirical categories were found: quality of care / patient safety and professional qualification, being transcribed in full.

Permanent education and hospital accreditation...

♦ Quality of care and patient safety

The trained staff offers quality and safety service. (E2)
For it is through daily improvement that you get quality assistance. (E3)
With knowledge, there is an improvement in the quality of care. (E4)
They are a key part of providing quality assistance. (E5)
Influenced in improvements and quality of service (TAE 5)
Quality and safety. (TAE 6)
Improving the quality of care provided. (TAE 7)
It is necessary to receive continuous training so that there is always quality in the services provided. (TAE 8)
Continuous improvement of work processes, ensuring patient safety (awareness), improving the level of accreditation. (TAE 9)

♦ Professional training

Best qualification and all professionals speak the same language. (E1)
Most, are recycling themes. (TAE 1)
Because this was a new thing and we did not know how insecure it would be to make a mistake. (TAE 2)
Sometimes, you need more. (TAE 3)
For somehow brings improvement to knowledge. (TAE 4)
For improvement of professionals. (TAE 10)
For it guides us how we should do our work. (TAE 11)
Although there were few educations helped us. (TAE 12)
We have always training (permanent education). (TAE 13)
We already had training before accreditation. (TAE 14)

It is understood that Nursing professionals responded that through educational actions, improvements are developed for the hospital institution, resulting in quality of care and safety for the patient, being affirmed by four (80%) nurses and five (35.71%) Nursing technicians and the others, one (20%) of the nurses consider that these actions improve the professional qualification, and nine (64.28%) of the Nursing technicians corroborate with the justification of the nurses.
Table 1. What had the greatest influence on the accreditation process. Alfenas (MG), Brazil, 2015.

<table>
<thead>
<tr>
<th>Occurrence</th>
<th>n=41</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>People Development (Training and Continuing Education)</td>
<td>7</td>
<td>17.07</td>
</tr>
<tr>
<td>Patient Care (Quality and Safety)</td>
<td>29</td>
<td>70.73</td>
</tr>
<tr>
<td>Other factors</td>
<td>5</td>
<td>12.20</td>
</tr>
</tbody>
</table>

The results of the issue addressed in table 1, showed that 70.73% of Nursing professionals consider that, during the accreditation process, patient care related to quality and safety had greater influence, 17.07% said to be the training and PE. These results corroborate with the ONA proposal, where educational actions can result in improved quality of care and patient safety.

Table 2. Topics most covered in lifelong education. Alfenas (MG), Brazil, 2015.

<table>
<thead>
<tr>
<th>Occurrence</th>
<th>n=41</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality and safety</td>
<td>24</td>
<td>58.54</td>
</tr>
<tr>
<td>Daily Problems</td>
<td>9</td>
<td>21.95</td>
</tr>
<tr>
<td>Equipment and material training</td>
<td>8</td>
<td>19.51</td>
</tr>
</tbody>
</table>

In the perspective of the most addressed themes during educational actions, the majority of those surveyed answered to be quality and safety, 21.95% said to be daily problems and 19.51% answered training of equipment and materials, demonstrating that mediators of these actions are concerned with issues that are proposed for the purpose of Level I Accreditation.

Table 3. Professionals who apply the most training and permanent education. Alfenas (MG), Brazil, 2015.

<table>
<thead>
<tr>
<th>Occurrence</th>
<th>n=41</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>32</td>
<td>78.0</td>
</tr>
<tr>
<td>Other health professionals</td>
<td>5</td>
<td>12.2</td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>9.75</td>
</tr>
</tbody>
</table>

The results pointed out that the minority of educational actions are mediated by third parties, 12.20% by other professionals and most by nurses, since the Nursing team, as a whole constitute a significant amount in hospital institutions. In this way, it was verified that these professionals have been actively working as educators.

DISCUSSION

In the first instrument approach applied to the Nursing team, the results related to age and sex, corroborated with results of scientific research, in which, until 2010, in Brazil, the majority of Nursing professionals are in the age group from 26 to 35 years, being 87.24% female.

The concern of analyzing the number of these professionals who participated in the Accreditation process of the studied hospital institution was had, considering the period of two years before and after this process, also analyzing their knowledge and professional qualification, resulting in a consolidation with the second instrument.

In this perspective, the nurse is the professional who has several functions, among them that of educating his team, and for that, it is necessary to have technical and scientific knowledge, that is, to be qualified so that he can share in daily practice with his team, and it was verified that 100% of the nurses have specializations, being the ones that most acted as mediators of the PEH.

Since the Nursing team is the largest workforce in hospital institutions, it has been verified that nurses are acting as educators and Nursing technicians/assistants as recipients of PEHs, corroborating with the Code of Ethics of Nursing Professionals, Resolution 311/2007, in Chapter III, Teaching, Research and Technical-Scientific Production in Art. 87 to have knowledge about teaching and research to be developed with people under their professional responsibility or in their place of work.21

The ONA manual is an extremely important instrument that guides health professionals who are involved in the search for accreditation, as well as for ONA evaluators22, and it is imperative that at least the nurses know about it. The results were very positive, considering that those who participated in the accreditation process, all carried out the reading of this instrument.

According to the Nursing team, in general, 85.36% stated that the search for quality certification favored improvements in the institution, and this process was shared with all health staff, affirmed by 87.79% of respondents.
Regarding educational actions, it was verified, that through the EP, the Nursing team was able to understand the importance of the accreditation process, and this understanding is fundamental for raising the awareness of professionals, not only in their adherence to this process, but also inserting corrective actions during this process. The daily work, with the same objective, to achieve patient safety according to level 1 requirement of Accreditation and, thus, meeting the expectations of the team, health users and the institution.

It is added that, most of the researched considered that the amount and time spent of the PEs and training applied annually were sufficient, suggestive that the workers of the institution has carried out these actions continuously.

The most discussed themes in the PEs were quality and patient safety, favoring the Nursing team to be aware of the accreditation process, corresponding to their expectations and corroborating with the ONA proposal.

CONCLUSION

The search for accreditation in Brazil has been increasing in recent years, especially, in private hospital institutions, because, through the certification of quality, demonstrate its differential in the competitive health market.

During the Accreditation process, the ONA accredited institutions evaluate all sectors of the hospital institution, where the Nursing team is the one that most interacts with other health professionals and support areas. In this way, the nurse as a leader, through management and assistance actions, has the function of promoting a safe and quality care, as well as enabling its staff to provide improvements to the institution, patients and their staff.

In view of the discussions presented, Nursing professionals considered that educational actions were influenced in relation to the themes focused on safety and quality of care, as well as on professional qualification, based on the search for accreditation.

The conclusions of this study contribute, therefore, to a reflection and awareness of health professionals, that safe behaviors involving the multiprofessional team can be achieved through educational actions and not through punishments, as described in the ONA Manual.

In this study, some limitations persist, reflecting that the research was carried out in only one hospital institution, as well as the fact that questionnaires were applied only to Nursing professionals, since the accreditation process involves all workers in a way general.

Although it is recognized, the limitations of the case study, it is considered relevant that, from the results obtained, can be reflected on the importance of educational actions in the scope of accreditation.

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