CASE REPORT ARTICLE

SELF-ASSESSMENT FOLDER FOR NURSE'S EMPOWERMENT IN PEDAGOGICAL PRACTICE* FOLDER AUTOAVALIATIVO PARA O EMPODERAMENTO DO ENFERMEIRO NA PRÁTICA PEDAGÓGICA FOLLETO DE AUTOEVALUACIÓN PARA EMPODERAMIENTO DEL ENFERMERO EN PRÁCTICA PEDAGÓGICA

Jairo Moraes Romani¹ , Lúcia Cardoso Mourão² , Ana Clementina Vieira de Almeida³

ABSTRACT

Objective: to report on the stages of making a self-assessment folder as a proposal for empowering nurses in pedagogical practice. **Method:** it is a descriptive study, type of experience report, about the elaboration of a product in the professional master's degree using, as a theoretical methodological reference, Institutional Analysis. **Results:** it shows, as a product, a folder composed of twenty questions, addressing themes on education, training and qualification, elaborated with the purpose of taking the nurse preceptor to reflect on his role as an educator in health services. **Conclusion:** it is considered that the success of the folder is linked to its acceptability with the nurse preceptors who are available to carry out the test, linking the answers of the questions to the actions they develop in daily life. Their actions are largely educational and it is intended that nurses feel empowered in the development of pedagogical practice. **Descriptors:** Nurses; Preceptorship; Education, Nursing; Health Education; Teaching; Education.

RESUMO

Objetivo: relatar sobre as etapas de confecção de um folder autoavaliativo como proposta de empoderamento do enfermeiro na prática pedagógica. **Método:** trata-se de estudo descritivo, tipo relato de experiência, sobre a elaboração de um produto no mestrado profissional utilizando-se, como referencial teórico metodológico, a Análise Institucional. **Resultados:** mostra-se, como produto, um folder composto de vinte questões, abordando temas sobre educação, formação e capacitação, elaborado com a finalidade de levar o enfermeiro preceptor a realizar reflexões sobre seu papel como educador nos serviços de saúde. **Conclusão:** considera-se que o sucesso do folder está vinculado à sua aceitabilidade junto aos enfermeiros preceptores que se disponibilizarem a realizar o teste vinculando as respostas dos questionamentos às ações que desenvolvem no cotidiano. Suas ações são, em grande parte, educativas e pretende-se que os enfermeiros se sintam empoderados no desenvolvimento da prática pedagógica. **Descritores:** Enfermeiros; Preceptoria; Educação em Enfermagem; Educação em Saúde; Ensino; Educação.

RESUMEN

Objetivo: informar sobre las etapas de confección de un folleto de autoevaluación como una propuesta para empoderar a los enfermeros en la práctica pedagógica. **Método:** es un estudio descriptivo, tipo de informe de experiencia, sobre la elaboración de un producto en el máster profesional utilizando, como referencia metodológica teórica, el Análisis Institucional. **Resultados:** se muestra, como producto, un folleto compuesto por veinte preguntas, que abordan temas de educación, capacitación y calificación, elaborada con el propósito de llevar al preceptor de enfermería a reflexionar sobre su papel como educador en los servicios de salud. **Conclusión:** se considera que el éxito del folleto está vinculado a su aceptabilidad con los preceptores de enfermería que están disponibles para realizar la prueba, vinculando las respuestas de las preguntas con las acciones que desarrollan en la vida diaria. Sus acciones son en gran parte educativas y se pretende que los enfermeros se sientan empoderados en el desarrollo de la práctica pedagógica. **Descriptores:** Enfermeros; Preceptoría; Educación en Enfermería; Educación en Salud; Enseñanza; Educación.

^{1,2,3}Federal Fluminense University/UFF. Niterói (RJ), Brazil. ¹ <https://orcid.org/0000-0002-8209-712X> ² <https://orcid.org/0000-0002-7058-4908> ³ <https://orcid.org/0000-0002-9342-6179>

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INTRODUCTION

It is informed that this study originated from the elaboration of the dissertation in the Professional Master in Health Education: Interdisciplinary Teacher Training for UHS, from the Pedagogical Training in Health research line, enabling the collective construction of the product reported here. It includes the preparation of a product as part of the requirements of the Professional Master's Program, recommended by the Coordination for the Improvement of Higher Education Personnel (CAPES), as one of the requirements for obtaining a master's degree.¹⁻²

It was intended, when starting the study, to collectively build educational material that would facilitate the work of nurses in their day-to-day teaching practices. However, it was found, in the course of it, that there was already a rich material of technical standards and operational procedures in the health unit that could be used by nurses, teachers, students and the team itself, in case of doubt, in performing a certain procedure. However, it is shown, as the study was developed, that the participants' statements revealed the insecurities and fears of nurses to be a preceptor carrying out a little collaborative pedagogical practice in the training of students. It can be seen in the reports that this insecurity came in a diversified way, including: university education, where participants had difficulties in relating theory and practice; individual characteristics, such as shyness; relationship difficulties and the thought that the role of educator would be up to the teacher.

With these reflections, the personal, affective and professional implications of the participants with the practical pedagogical institution were identified. It is explained, in this case, that the use of the terminology "implications" comes from the theoretical methodological framework used in the study, Institutional Analysis. In this framework, the concepts of institution, instituting, instituted, implication, analyzer, among others, are worked on. Institutional Analysis has the objective of understanding a certain social and organizational reality from the subjects' speeches and practices.³⁻⁴ Work is carried out to achieve this purpose, with interventions in specific groups and, in this study, it was decided to intervene along the lines of institutional socioclinics with a group of nurse preceptors, which result from studies by Gilles Monceau, in 1998, when introducing his use in the field of education as a new way of approaching reality, carrying out interventions that seek to collectively analyze a collective situation.⁵⁻⁶

The concept of implication, widely used in institutional analysis and in institutional socioclinics, refers to the personal and collective analysis of the researcher and participants during

the intervention, consisting of a powerful device to bring out the unspoken and contradictory present in the pedagogical practical institution. It is noteworthy that the implication should not be thought of as subjects' engagement or commitment in the development of their practices, but in the way they relate, even if unconsciously, with the institutions⁶⁻⁸

It was based on the assumptions of Paulo Freire, in relation to educational aspects, to support the concept of education, understood as liberation capable of giving autonomy to subjects in their actions and thinking. The Freirean framework is based on Five fundamental principles for educators: knowing how to listen; dismantle the magic vision; learn / be with the other; assume the naivete of the students and live patiently impatient.⁹⁻¹⁰ Education as a practice of freedom enables people to develop the capacity for reflection, allowing them to develop their potential, with respect to the choices and decisions regarding their own life in society. This freedom of action allows people to develop a critical awareness of the problems and difficulties that affect them as human beings.⁹⁻¹⁰ With this assumption, this conception was debated by the group and the proposal for the transformation of nurses' professional practices was guided by the reflections carried out in the meetings along the lines of an institutional socio-clinical intervention.⁵

The issues related to education and pedagogical practice were analyzed from the concepts of Institutional Analysis, understanding education as an institution that comprises a set of institutions and organizations, among them, the institution of pedagogical practice. Institutions are understood as logical compositions, a set of laws and principles that prescribe or proscribe behaviors and values, that is, it says what should be, what should not and what is indifferent. Institutions are believed to be abstract entities; organizations are the materialization of institutions in the form of an organism, an entity.³⁻⁴

During the debates with the participants, it was found that many nurse preceptors were instituted by the norms and rules of the institution of pedagogical practice, not acting with freedom and autonomy. Pedagogical practice is understood as a social practice capable of producing pedagogical knowledge related to the values of a given historical-social context.¹¹⁻²

It can be seen, in most situations reported during the debates, that the nurse preceptors did not exercise their creativity and freedom of thought, typical of the educating educators, who are not afraid to take risks, to show themselves as a subject of rights and duties closer to Freire's liberating thought.^{4,9,11-2}

The idea was adopted to develop a product that would lead the preceptor nurse to rethink about her pedagogical practice with students in training in the emergency service in order to try to minimize these obstacles, taken by the participants, as hindrances to the progress of the learning process in the Regional Polyclinic environment.

OBJECTIVE

- To report on the stages of making a self-assessment folder as a proposal for empowering nurses in pedagogical practice.

METHOD

This is a descriptive study, type of experience report, on the development of a product in the professional master's degree in health education. The product folder was built from collective debates using, as a theoretical and methodological framework, Institutional Analysis along the lines of institutional socio-clinical studies.¹³⁻⁵ With this methodology, it was possible to approach problems that were not explained in everyday life, such as cultural, personal, professional difficulties of each professional to act safely in the training of future nursing professionals.

The study scenario was a mixed UHS unit with low complexity outpatient and emergency care. Outpatient care is provided five days a week (Monday to Friday) and the emergency service is available 24 hours a day, seven days a week.

There were registered nurse preceptors, residents and nursing heads of the emergency service and the outpatient clinic that made themselves available to participate in the meetings along the lines of institutional socioclinics and the preparation of the folder. Please be informed that participation in the meetings was voluntary, with an average of eight to ten participants. It was respected, even in this report, where there was no identification of the participants or their speeches, the Resolution of the National Health Council nº 466, of December 12, 2012, with the approval by the UFF Ethics Committee under the number of opinion 1,826,042.

RESULTS

Positive situations were revealed during the debates by the participants, where the nurse preceptor is confident about his knowledge and takes pleasure in passing it on to the students, but in the debates, negative situations were also observed in relation to the training and pedagogical practice that led to the discussion and analysis during the preparation of the master's dissertation summarizing them in figure 1.

Barriers	Consequences
Relationships between education and health organizations.	There is a gap in training, as the teaching-learning process does not correlate theory with practice; There is a lack of interaction between teaching and service organizations.
The adequacy of the learning process.	There is an excess of content passed on to students, with no time for proper assimilation, insufficiently preparing them to act as preceptors for students.
The positions of the preceptors.	They reveal insecurities in the act of educating; Believe that they need specific skills to be educators; They highly value the role of the teacher as an educator and, even though they develop different teaching activities, they do not perceive themselves as educators.
The positions of students.	The training carried out in public or private organizations did not differ in relation to the difficulties in perceiving themselves as an educator. These are more linked to personal factors that the individual already has, such as his / her life history, such as, for example, the lack of commitment to the learning process during graduation.

Figure 1. Negative situations perceived in pedagogical training and practice. Rio de Janeiro (RJ), 2019.

These situations were analyzed and the participants started to think about strategies that would minimize the problems, mainly those related to the positioning of the preceptors that could be managed by the group. It is added that other situations revealed during the study, although of great relevance in the training and pedagogical practice of future professionals, escaped the sphere of action of the nurse

preceptors who participated in the preparation of the product. Below are the steps necessary to produce the product.

In the first stage, after the approval of the study by the ethics committee, an invitation was made to nurse preceptors and students who attend the health unit to participate in meetings along the lines of institutional socio-clinical intervention. Invitations were sent via WhatsApp,

e-mail, or in person, in order to get the membership to hold the collective debate on pedagogical practice. The inclusion criterion in the study was that all participants were nurses and / or students in training.

It was the second stage of the intervention in a meeting held in September 2018, in the auditorium of the Regional Polyclinic. It is revealed that five preceptor nurses attended, two residents, the advisor, the co-supervisor and a master's student, and the meeting lasted two hours, covering a brief presentation of the participants and debate on the following questions: Could they talk a little about how they were trained during the training, to act as educators? What could they report on the training received to act as educators in the preceptorship of the Unified Health System? From your point of view, what is the influence of the nurse's pedagogical practice for the training of future professionals? These questions were asked at random, and the course of the debates directed the application of this or that question, allowing the participants to speak freely about their experiences in relation to pedagogical practice and their training.

In the third step, the researcher's implications recorded in his research diary were analyzed. The diary, in the perspective of Institutional Analysis, is an intervention tool that has the potential to produce a movement of reflection of the practice itself, assuming the researcher's non-neutrality in the research process.¹⁵⁻⁶ The diary was filled in since the researcher's entry into the master's course, where they recorded everything from the researcher's personal difficulties as a student, to the daily events in the work environment.¹⁵⁻⁶ It is inferred that the analysis of the implications does not constitute a confession, but brings to the debate the crossings that everyone carries from the various social institutions to which they are linked / belong, whether they are religious, political or cultural.⁶⁻⁸ It is detailed that, during the elaboration of the dissertation, the implications of the participants and the researcher revealed the institutional crossings that allowed to know the cultural, social, professional positions that revealed feelings of fear, insecurity, discontent, power disputes and were important in the search of strategies to face them, culminating in the elaboration of the product.⁶⁻⁸

In the fourth stage, a new meeting was promoted, which, in institutional socioclinics, is called restoring the analysis of the results of the previous meeting ^{14,17-8} in november 2016, attending the meeting, which lasted an hour and thirty minutes, five nurses, a resident, the advisor and the co-supervisor. The statements already transcribed from the previous meeting were read and space was opened for the participants to expand the debates and reflections on what they

had discussed in the first meeting. It is explained that, at this stage, the group has already started to think about a product that would meet the needs of nurse preceptors if they perceive themselves as educators.

The fifth stage was dedicated to the elaboration of the product, with the presence of the researcher, the heads of Nursing, two nurses, in addition to the advisor and the co-advisor, based on the results of the debates held in the two meetings and the notes in the diary of the researcher. It is noteworthy that, at this stage, the use of the theoretical and methodological framework of Institutional Analysis, inspired by the molds of institutional socio-clinical studies, made it possible to approach problems that were not explained in everyday life, such as cultural, personal, professional difficulties of each professional to act safely in the training of future nursing professionals.^{13-4,17-8}

As a product, a folder was created that has a playful layout in its presentation, with drawings and colorful presentation, precisely to captivate the readers' attention, that is, the nurse preceptors and students. It is intended, through the folder consisting of twenty questions, to encourage reflection on educational practice by addressing topics on education, training, guidance and training that nurses, in general, perform in their daily lives. The nurse should, at the end of the test, add the affirmative and negative responses, enabling a self-assessment of their pedagogical practice.

The objective was, through the folder, to empower nurses, because, when answering the questions, they begin to realize that the vast majority of the actions they develop with students in training are permeated by educational acts allowing a rethink about their pedagogical practice and about your role as an educator in health services. It is thought, in this way, to allow the precepting nurses to start to develop a pedagogical practice with more security with the future professionals.

DISCUSSION

The theoretical-methodological framework of Institutional Analysis was shown to be adequate, in its institutional socio-clinical approach to the analysis of professional practices, for the constitution of subject groups that produce changes in the institutions that cross them. It was promoted, due to the researcher's non-neutrality and the collective analysis of the implications of all participants, the understanding of the movements of the institutions that are in permanent transformation from the practice of subjects.^{13-4,17-8}

It was evident, by bringing to the reflection the practical pedagogical institution of the nurse

preceptors, the strength established by the norms and routines proper to the health services that produce blindness in the professionals and prevents them from perceiving their instituting movement, which seeks to break with the standardized, creating alternatives for the performance of their care functions, as well as educators.^{4,11,19} In this respect, a study on preceptorship in a public hospital is highlighted, highlighting that actions aimed at teaching in real clinical situations, in the work environment, are able to favor reflective practices and, in this scenario, preceptors can facilitate learning as a support for students when articulating their expectations with the opportunities that occur in the work environment. It should be noted that the great challenge faced by health professionals and preceptors is precisely the lack of didactic preparation for this, since the training institutions do not qualify them for such a pedagogical commitment.¹¹⁻² It is revealed, when elaborating the product in the professional master's degree, that the educational process can be understood from its context, with each human being being a subject of his own formation, capable of carrying out a continuous reflection on his place in the world and about the reality in which you work as a professional.¹⁷⁻⁸ Critical thinking develops in the other, through the educational process, where the naive perception of reality gives way to a denser perception, that is, when people understand themselves as part of a reality, as they are able to perceive integration with reality, and intervene for its transformation.^{11-2,19-20}

It was proven, in the stages for the elaboration of the product, the involvement of all the participants with the pedagogical practice, including, in some moments, revealing the difficulties in perceiving themselves as educators and letting themselves be seen in the debates, which was up to, to teachers, the act of educating. They became able, when reflecting on the pedagogical practice using the product folder individually or collectively, to understand its implications always present in the conscious or unconscious actions with the act of educating, generating, in the participants, an empowerment about their functions as educators and making them think about their activities at levels similar to nurses who teach.^{6-7,19-20}

It is noticed that when folding on oneself, in this movement of the group, it is that the self-assessment folder emerged as a device that came to meet the need for reflection on the pedagogical practice, enhancing the necessary transformations in the institutions that go through them and allowing instituting attitudes to be taken in that context.¹¹⁻⁶

It was provided, from the pedagogical point of view, between students and educators, at all levels, which include the training process and the

debates that resulted in the elaboration of the product, an analytical survey about the difficulties of realization and recognition of the pedagogical practice carried out by preceptor nurses.³⁻⁴ It was manifested by the gaps in the training process, evidenced in the debates, that there are no complete ways of conducting the teaching-learning process, as it must be permanently built and rebuilt by educators, students and training centers in order to ensure that the educational practice is based on ethical principles, on self-criticism and on the social responsibility of each professional, trained and undergoing training, in facing diverse and sometimes adverse situations, such as in the emergency sector.^{10,19}

CONCLUSION

Using the folder product, although it is intended to be applied to nurse preceptors, teachers and students who attend the Regional Polyclinic, its use in all spaces where a collective reflection on the pedagogical practice of nurses is implemented. In this sense, the reach of the product can be quite comprehensive, depending on the interest of health organizations or other organizations and establishments that are concerned with the quality of services and with the qualification of trained and undergraduate nurses.

It is necessary to highlight that the product is permanently unfinished, because the very reflection that it will awaken in nurses, teachers and students will initiate new reflections and, consequently, changes in a dialectical movement between the instituting movements (the devices contained in the folder) and the instituted movement (the pedagogical practice of some professionals) that, from new reflections, can lead to changes favoring a permanent institutionalization of the pedagogical practice of nurses.

It is considered that the success of the folder is linked to its acceptability with nurse preceptors, teachers, residents and undergraduate students who are available to answer their questions and, thus, to reflect on their pedagogical practice in relation to activities they develop in their daily lives as health professionals. It should be noted that no less important is the need for the services to value the educational and formative dimension of the folder and to elaborate, together with the health units that use the product, mechanisms for monitoring and identifying possible changes in the practices of nurse preceptors, teachers and students who attend the health unit, allowing their evaluation and reformulation whenever they become necessary.

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Corresponding author

Ana Clementina Vieira de Almeida

Email: ana.vieiradealmeida@gmail.com

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