INTEGRATION EDUCATION-SERVICE: EXPERIENCE OF EDUCATION IN HEALTH MANAGEMENT

INTEGRAÇÃO ENSINO-SERVIÇO: EXPERIÊNCIA DA GESTÃO DA EDUCAÇÃO NA SAÚDE
INTEGRACIÓN ENSEÑANZA-SERVICIO: LA EXPERIENCIA DE LA GESTIÓN DE LA EDUCACIÓN EN LA SALUD

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ABSTRACT
Objective: describing the experience of the development of actions of Health Education Management.
Methodology: a descriptive study of experience report type, conducted through a survey of the actions achieved and planned by the Management of Health Education through records, reports and annual schedules of health 2011, 2012; and the Municipal Health Plan 2010-2013 of the Municipal Health of Cabedelo/Paraíba.
Results: strengthening of teaching and service relationship between its actors, organization of insertion and flow of students in the health system and conducting research.
Conclusion: Management Education in Health acted as a trigger for the co-management of health education and has been relevant to strengthening the teaching-service integration within the health in Cabedelo/PR. It is emphasized that it is important that the management of the teaching-service being based on the principles of Permanent Education in Health, seeking to extend the range of dialogues.

Descriptors: Education; Health; Teaching.

RESUMO
Objetivo: descrever a experiência do desenvolvimento das ações da Gestão de Educação na Saúde.
Metodologia: estudo descritivo, tipo relato de experiência, realizado por intermédio de um levantamento das ações alcançadas e programadas pela Gestão de Educação em Saúde por meio de registros, relatórios e programações anuais de saúde 2011, 2012; e o Plano Municipal de Saúde 2010-2013 da Secretaria Municipal de Saúde de Cabedelo/PR.
Resultados: fortalecimento da relação ensino-serviço entre os seus atores, organização da inserção e fluxo dos estudantes na rede de saúde e realização de pesquisas.
Conclusão: a Gestão de Educação na Saúde atuou como disparador de processos de cogestão da formação em saúde e tem sido relevante para fortalecer a integração ensino-serviço no âmbito da saúde em Cabedelo/PR. Ressalta-se que, é importante que a condução da relação ensino-serviço seja pautada nos princípios da Educação Permanente em Saúde, buscando ampliar os espaços de diálogos.

Descritores: Educação; Saúde; Ensino.

RESUMEN
Objetivo: describir la experiencia del desarrollo de las acciones de Gestión de la Educación en la Salud.
Metodología: estudio descriptivo, del tipo experiencia, realizado a través de una encuesta de las acciones realizadas y previstas por la Dirección de Educación para la Salud a través de los registros, informes y calendarios anuales de salud 2011, 2012; y el Plan Municipal de Salud 2010-2013 de la Salud Municipal de Cabedelo/Pará. Resultados: el fortalecimiento de la relación enseñanza-servicio de entre sus actores, la organización de la inserción y el flujo de estudiantes en el sistema de salud y realización de investigación.
Conclusión: la Gestión de la Educación en Salud actuó como disparador para la co-gestión de la educación sanitaria y ha sido relevante para fortalecer la integración enseñanza-servicio de la salud en Cabedelo/Pará. Se insiste en que es importante que la gestión de la enseñanza-servicio sea basada en los principios de la Educación Permanente en Salud, busca ampliar la gama de diálogos.

Descritores: Educación; Salud; Enseñanza.

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INTRODUCTION

In the most various fields of the role of the Unified Health System (SUS), the Permanent Health Education (EPS) points to a participatory management of health services, from the acting done by the workers, using as raw material health work. It proposes to consider and reflecting on the problematic installed in the work process, focusing on solving the problems experienced in everyday reality combined to work based learning, and practice, as a source of knowledge. Several approaches integrate their in-service training, management services and healthcare, with reference to the humanization of assistance.

It is understood that a policy of training and development for SUS should consider the concept of EPS as a way to articulating the needs of health services, combining the development of knowledge and experiences of operating in health, thus contributing to solving capacity services and participatory management of health policies.¹

Some initiatives indicate the movement of the stimulus changes in health training process, the most recent, similarly to (PRO-HEALTH) National Programme of Reorientation of Vocational Training in Health and the Education Program for Health at Work (PET-Health) has provided a connection between educational institutions and health services, which has succeeded in gradually some curriculum changes of the courses of health, it has also contributed to the quality of the interaction between health services and educational institutions. "The training for health should have as objective the transformation of professional practice and organization of work itself, and be structured from the questioning of the labor process".²

Under law, the national policy of permanent education in health (PNEPS) was established by Ordinance GM/MS No. 198 of 2004, and subsequently amended by Ordinance GM/MS No. 1,996 in 2007. In his new rules, the PNEPS extended the concept of lifelong education which now also designates the relationships between training and healthcare management, proposing the creation of the Permanent Committees for Integration of Teaching-Service (CIES) to act as interinstitutional forums and for regional co-management policy.

The policy of EPS represented the effort to meeting the goal of making public health a network of teaching and learning in the course of work. It meant for the first time to formulate a policy for health education that has the innovative way to overcome traditional forms of training of human resources in the health sector (CECCIM, 2005). However, the institutionalization of PNEPS as a management strategy requires that it be incorporated into the SUS managers as a strategic tool in making decisions to be experienced in everyday health services, as a constitutive process in relations with workers, managers, institutions forming and user participation.

OBJECTIVE

- Describing the experience of the development of actions of Education Management in Health.

METHODOLOGY

This is a descriptive study of case report type. We took time to review the creation of DES that occurred at the end of the second semester of 2010 until 2012. Therefore, we conducted a survey of actions planned and conducted by the Board through its records as annual reports and scheduled actions in the Municipal Health Plan from 2010 to 2013. We proceed with the description and analysis of the relationship of DES with educational institutions, analyzing the movements and dialogues conducted by the DES with IE contributed to the narrowing of the relationship between teaching and service.

This report also aims to provoking reflection about the EPS and on its implementation in the of health education field, trying to propose new ways to contribute to the strengthening of shares EPS in the context of health in Cabedelo (Paraiba). It is worth noting, finally, that it is the result of the Specialization Course in Management of Labor and Education in the National School of Public Health (ENSP) conducted by the Health Center Trainer in Human Resources (CEFOR) of the State of Paraiba (PB); thus, reflecting an exercise of reflection of a practice that allows the training and health work.

REPORT PRESENTATION

- In the paths for a new board of education on health

The DES is situated in the management of Work Management and Health Education of the Municipal Health Service (SMS) of Cabedelo. Initially it was composed only by the Director that started its work from the structure of the industry itself and the training of staff. It is noteworthy that, before the creation of the DES, existed in one Primary Care Coordination Health Education
which was responsible for articulating and conduct educational activities, such as lectures aimed at workers of Family Health Teams (FHT) and users. It also acted in organizing events, like vaccination campaigns, commemorative dates, among others, who were part of the work process demands of primary care.

These actions were in the field of continuing education that is characterized as representing a continuation of the centralized model in updating knowledge, a way of updating information with a defined duration.1

With educational approaches accompanied by a critical reflection of classic trends, the proposal of continuing education is an important change in the conception and practice of employee training, incorporating learning into everyday services and social and labor practices in which they occur. Thus, the EPS operates, “putting people as reflexive actors on practice and builders of knowledge and alternative actions, rather than receivers”.4

It is understood, therefore, that did not exist in SMS of Cabedelo/PB, a sector of health education responsible for facilitating and acting on collective learning-training for employees and managers, as well as the processes conjunction with teaching institutions, with the discussion about the training of new health professionals.

- **Strengthening the teaching-service integration**

At the beginning of the DES prioritized action coordination with educational institutions those health services have the Cabedelo network as a field of practice/learning. In this direction, the DES took as one of its priorities to transform local health services in training for the SUS. To foster the relationship with the educational institutions, initially, there was a first meeting with the participation of representatives of institutions that maintained an agreement with the municipality for submission of DES as a space for articulation and mediation of SMS with educational institutions. From that first meeting began a series of dialogues for the conclusion of new agreements and projects, which is one of the goals of the current Municipal Health Plan, having as parameter the training for the SUS and the new Law Internship No. 11.788, 2008. This process, some pacts were made and are being complied with, contributing to formalize the process with the support of the necessary elements, such as the obligation of the insurance policy by the IE, as well as the terms of issue of commitment stage from the model created by the DES.

After the formalization of agreements, other spaces for dialogues were held with IES through regular meetings. Some points were discussed and agreed, such that the integration of students in various departments of the attention network, considering the specificities of the local health network. It started to be given to trainees and tutors semiannual presentations of the health care network and management organization before internships.

In discussions togheter with the IE conducted by DES has been handled the need of integration of students and tutors of educational institutions in the processes of work of health services teams those are learning scenarios. It was therefore agreed to visit the tutors/teachers to the practice field before the start of implementation of the stages, so that they have an initial approximation to the staff, stating the object of the stage, while allowing the team to expose the reality of the service by initiating a dialogue between these actors, strengthening the relationship teaching-service.

The DES is also responsible for reviewing research projects conducted in the health area of the city. In the analysis are considered the specifics of reality and health of the local population, being stimulated goals of scientific research to bring to light new knowledge. Finally, it is adopted as one of the assessment criteria of the research projects the return of its results for the teams and units participating in the same, apart from publicizing data, motivating new researches.

This whole movement of co-participation in academic activities in health services relies on the understanding of the teaching-service integration as a collective, agreed and integrated work of students, tutors, health workers and managers aimed at the quality of health care and training and development of workers' satisfaction of services.5

Gains also featured in this relationship teaching-service worker, which, along with the team, is responsible for learning scenario. The health team should be crafted for the strengthening of the teaching-service integration, recognizing itself as responsible for the training of new health professionals. In this sense, it is necessary to creating media that operate the teaching-learning process, investing in sensitivity and on accession of the actors involved.

The absence of a greater understanding of SUS as training camp is a weakness
experienced in the learning process in health in Cabedelo, which indicates that it is necessary to better understand the role of preceptorship as the reference person team (preceptor) service, and other workers who receive / monitor and guide the trainees.

Working in the role of preceptorship, SUS is one of the challenges in training for health. And one of the forums for discussion of this and other issues related to health education is the CIES, which has as one of its tasks the joint institutions to propose a coordinated manner, intervention strategies in the field of training and development of employees, the light of the concepts and principles of EPS.

Some results have come to be viewed in strengthening the teaching-service integration, such as the organization of the integration of students in the health network, is creating and implementing flows up to all activities of teaching-service; the pact on the amount of students per learning scenario, considering the reality of the practice fields and training; increased interaction of professional services with dynamic learning; conducting research by students from issues raised during those stages in the learning process. And so come give recognition network health Cabedelo as training for SUS.

- Some experiences of integration conducted

The National Program of Reorientation of Vocational Training in Health (PRO-HEALTH) in its 2012 version, how Pro-PET-Health is composed by sub-projects that are interdisciplinary and multidisciplinary, composed of service professionals and health administrators, teachers and students.

In Pro-PET-Network, coordinated by the Federal University of Paraíba (UFPB), PET subprojects use continuing education as a tool for inquiry on the work process, from the immersion of its members in service activities, aimed at building Networks Attention to Health (RAS) in Cabedelo, João Pessoa and in State Department of Health.

The municipality of Cabedelo is part of the Education Program at Work for Health (PET-Health), since 2011, through the PET Mental Health that aimed to develop coordinated actions of the Network of Mental Health and intersectoral, turned to combat the use of crack, alcohol and other drugs, qualifying the attention from the needs of the services.

Among the actions of PET highlights the formation of a tutorial group with students from different graduate courses of UFPB; conducting training activities/skills of mental health teams in regards to addressing the use of crack and other drugs in the perspective of lifelong education; the construction of the mapping of territories and characterization of the profile of users of mental health services covered by the project.

In continuing health education, socio-organizational context in which the work develops informs the need for knowledge generated by the work process, pointing the way to the formation process. In this approach, the work is not viewed as an application of knowledge, but understood in its context with its various implications resulting from own work culture. It was with this understanding that the project has developed PET Mental Health in Cabedelo.

Given the experience of the PET Mental Health, Municipal Health joined in 2012, also in partnership with UFPB, the Pro-PET-Health, which is similar to PET Mental Health, which objectives are: to stimulate curricular changes with insertion of Students in Care Networks to the SUS Health; stimulate and strengthen initiatives to change the work process in health in the way of completeness, and develop research based on local needs.

In late 2011 the Management Committee was formed Local Extended (CGAL) Pro-Health/PET-Health, as the space for dialogue with the representation of healthcare courses at UFPB and managers of the Departments of Health in Cabedelo, João Pessoa, and the State Department of Health of Paraíba. The formation of the Commission aimed to foster this forum as a place of proposition and deliberation on the Pro-Health/PET-Health and teaching-service integration between the institutions involved in a broader sense.

Representatives of DES, along with technicians from the mental health area of the municipality of Cabedelo, participated in the discussion and preparation of PET subprojects that are part of Pro-PET health. The subproject approved to be held in the municipality in 2012-2014 was the day-care network, care to users of alcohol, Crack and other drugs that allows the continuation of actions developed by PET-Health in 2011.

Representatives from DES, along with experts in the field of Mental Health of the municipality of Cabedelo, participated in the discussion and preparation of PET subprojects that are part of the Pro-Health The PET subproject approved to be performed in the city in 2012-2014 was the Network Psychosocial Care, Care Users of Alcohol, Crack and Other Drugs which allows the continuity of actions undertaken by the PET-Health in 2011.
Another space of teaching-service integration is the Working Group of PET - Mental Health, with the following composition: two tutors from the university (UFPB) and 06 preceptors of services, with 04 of CAPS, one of the NASF and the technical area of Department of Health. This group operates from weekly meetings in the thoughts and actions of the subproject development Psychosocial Care Network, Caring for Users of Alcohol, Crack and Other Drugs of Pro-PET Health in Cabedelo.

It is believed that programs such as the PET-Health can contribute to curricular changes in health courses giving visibility to health needs of the population and SUS, stimulating the development of new methods of teaching-learning, as well as a more fundamentalist training with learning multidisciplinary team conducting learning activities that contribute to the training of professionals with expanded vision of quality care and population health.5

**FINAL REMARKS**

The Board of Education on Health has advanced in the relationship with academic institutions, having as its object the formation for the SUS. However, some difficulties still present themselves as a fragile co-participation between actors involved in the teaching-service integration. Through this sense, this paper proposes the formation of a Working Group of the Permanent Service-Learning Integration of SMS from Cabedelo, linked to DES, as a coping device of the weaknesses experienced in-service training, with the participation of preceptors of services, managers and guardians of the academy, a privileged space for discussion of the learning process. Among the topics to be discussed in this group highlight the preceptor appreciation of the service, thus working the role of preceptorship.

Another possibility that this study suggests is to creating discussion spaces in healthcare units, as one of the actions to be undertaken by the DES, in conjunction with other activity areas, to triggering processes of EPS from the involvement of workers and commitment of these on thinking about and discussing these in making the professional team, discussing care management.

Considering the work of DES with the relevant training institutions has been to strengthen the teaching-service integration within the health in Cabedelo, it is understood that there is still much further to go. However, it is important that the management of the teaching-service is based on the principles of EPS seeking to expand the opportunities for dialogue.

Through the natural transition of municipal management in Cabedelo and, consequently, the Health folder, the team that was ahead of DES in Cabedelo did not continued, but it is believed that the importance of the work that has been developed will continue. Finally, it is worth emphasizing the importance of developing and reviewing this study on our professional practices fostered by specialization we made that allows a reflection of the fundamental principles EPS as a training device in health, by and for the work. And, therefore, it considers that the inclusion of EPS as a tool to be experienced in everyday health services points to strong opportunities for favorable changes both for workers and for the management organization, using one of the axes in-service training from the teaching-service integration.

**REFERENCES**


Integration education-service: experience...


Submission: 2014/02/25
Accepted: 2014/06/04
Publishing: 2014/07/15

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