



Permanent education in health: a macro strategy for work process review

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1 INTRODUCTION

The difficulty of the population to access health services generates dissatisfaction among users. It is closely linked to the methodologies/models of scheduling appointments. The traditional model works using the criterion of complete scheduling for a predefined period of time, one of its problems is the delay between the time of the appointment and the service, which generates absenteeism and ends up putting the reception in second place, bureaucratizing access and driving away users who possibly need primary care services the most.

The Advanced Access proposed by Murray & Berwick (2003) is a system that is based on the capacity of the agenda, in order to allow the user to receive care on the same day of demand, with a consequent reduction of pre-scheduled appointments and expanding the space on the agenda for the demands of the day. It is also based on the continuity of care, allowing the maintenance of the follow-up with the referring physician, improving the bond and consequently the user's satisfaction with the health service.

Research shows that for a person or an organization to decide to change the way they act, it is necessary to go beyond training. It is necessary to detect and contact with the discomforts experienced in the daily work to realize that the current way of doing or thinking is insufficient or unsatisfactory. Thus, in order to think about the new health care model, it is essential to give new meaning to the work process.

2 OBJECTIVE

Continuing education in health (PE) has been proposed by the MS as a strategy to transform the practices of training, management, policy formulation, popular participation and, especially, professional practices and the organization of work itself (SANTOS et al., 2019; ALMEIDA et al., 2016). It proposes the creation of collective spaces with the purpose of leading health workers to



reflection and evaluation of their acts produced in everyday life, in order to seek the transformation of health practices, as assumption education is performed 'in' and 'for' work.

With a view to enabling efficiency for access and timely reception, it is necessary to assume the reorganization of the health service. In this context, this descriptive work in the form of an experience report aims to bring the process of continuing education that anchored the implementation of advanced access in primary care in the municipality of Barueri.

3 METHODOLOGY

The Coordination of Basic Health Actions (CABS) due to the absenteeism rates (31-36%) in Primary Care services and the dissatisfaction of users due to the delay between the time to schedule an appointment and the time of service, in a strategy to improve access, implemented the advanced access through the nucleus of agendas, which started with the medical clinic in May/22. Concomitantly, it felt the need to propose a macro action of permanent education for the primary care staff (n=1450) to discuss the work processes linked to this new form of welcoming, to discuss the Previne Brazil and its indicators, to discuss the attention network and presentation of the care lines in effect.

Two 4-hour meetings per class (n=250) were planned, totaling 6 meetings in two periods. In the first meeting we aimed to provide participants with a theoretical framework of the themes and in the second meeting we addressed practices and plenary discussions. Active and mobile learning methodologies were used with the Mentimeter® technology, which enabled greater interaction and engagement among the participants, generating the establishment of concepts in real time, such as the construction of word clouds and surveys (MORAIS, REIS, 2022).

At the end, a plenary discussion was held with all the directorships that make up the CABS.

Participants were asked to evaluate the two sessions they attended through a note, a word, and an *emoticon* (happy or sulky or sad).

4 DEVELOPMENT

Of the 1450 participants, 577 (39.79%) responded to the evaluation through a note for session 1, with 82.66% of the participants giving scores from 7 to 10. In this same session 444 (30.62%) chose words with the most frequent being satisfaction (7.43%), knowledge (6.08%), learning (5.40%), gratitude (4.05%), good (2.70%). Some participants pointed out lack of time for discussion (0.90%). Only 326 participants (22.48%) chose *emoticons* in the evaluative process, from session 1 of these 212 chose the happy face, 89 the sulky face and 25 the sad face.

In session 2, 295 (20.34%) participants evaluated with grades, with 79.66% conferring grades from 7 to 10. In the words item 14.27% evaluated this way and the most frequent words were enlightening (12.07%), satisfaction (5.79%), knowledge (4.34%), good (3.86%) and gratitude (3.86%).



Only 144 participants (9.93%) chose *emoticons* in the evaluative process, from session 2 of these 96 chose the happy face, 41 the sulky face and 7 the sad face.

5 CONCLUDING REMARKS

The inclusion of the "Advanced Access" care system, adapting it so that it does not conflict with the precepts of the National Program for Improving Access and Quality of Primary Care; increase the use of idle time of the health team due to high rates of absenteeism; improve the link through a more proactive, agile and quick service, as well as discuss the performance indicators of PREVINE Brazil as a reflection of the work processes of care at the tip were on the agenda of CABS/Barueri for the year 2022. In this context, proposing a macro action of continuing education provided a space for professionals to rethink their practices and behaviors, understand and reflect on the proposed work process in which they are inserted.

By evaluating the proposed action of permanent education at all times, the team responsible was able to seek improvement of the actions, as well as the reorientation and re-direction of the processes in real time.

The Permanent Education in Health is an essential strategy in the work process to qualify health education and management, with a committed, reflective, and competent performance, strengthening the Brazilian public health system.



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