# **Continuing education in times of Covid-19**



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#### **ABSTRACT**

The chances of contamination of professionals who work in symptomatic patients are high. The nurse sees in his role as caregiver, leader and educator, a reference in the team, in the prevention of COVID-19. The study is a bibliographical, systematic, and reflective review, the descriptors Nursing, Education and COVID-19, accessing and selecting data in the Virtual Health Library. The need to update and modify the practices of health professionals made Permanent Education (PE) a health policy, turning the theme into a challenge to be faced by all health categories. The arrival of the COVID-19 pandemic required a rapid response, especially in diagnosis and preparation to receive the demand. The need to work with the techniques of contagion prevention, especially with the paramentation and undressing, demanded from the Nursing revision of techniques, in the use of the main individual protective equipment. Finally, the review and correction of contagion prevention techniques should be a daily practice, using PE as a resource to promote educational processes.

Nursing, Continuing **Keywords:** education. COVID-19.

#### 1 INTRODUCTION

At the beginning of the year 2020 we were surprised by the appearance of a new disease in our country, which significantly affected our lives, as human beings inserted in a society and as health workers. (SILVA et al, 2020, p.228). In times of scientific technical advancement society is faced with a pandemic:

> Science is coming across a new type of coronavirus, named SARS-CoV-2 and identified as the causative agent of the COVID-19 disease. The high transmissibility of this virus culminated in a pandemic, with significant impacts on the economy, health systems and the population. (RIOS et al, 2020, p. 247)

Culminating, according to statics, in Brazil, by February 10, 2022, "the disease had already reached more than 27 million people and caused more than 635,000 deaths." (JHU CSSE, 2022) The chances of contamination of health professionals who work in the care of symptomatic patients are high, according to the 2020 study:

> The chances of contamination of health workers working on the front line to COVID-19, the factors are greater due to multiple factors, such as the activities they perform, the length of the working day, the sizing of the staff, the exposure to the viral load (number of patients they serve), the correct use of personal protective equipment (PPE), This includes the wearing and undressing, correct disposal or sanitization (when not disposable) and the training of these workers on safety and health aspects related to the work environment. (MOREIRA & DE LUCCA, 2020, p.156)

The reasons cited are revealed in feelings reported by nursing professionals in a research conducted by the Regional Nursing Council of São Paulo:

A survey of nursing professionals showed that about 80% of the workers interviewed were afraid to work during the COVID-19 pandemic, mainly because of the fear of contaminating family members and not having safe conditions to work. In addition, frontline professionals pointed out a lack of PPE, training, flows in care and work overload. (COREN-SP, 2020)

Alarmed by the high chance of contagion, the professionals saw in the qualification and training a way to prevent the new disease. In 2004, through Ordinance No. 198 of February 2004, the Ministry of Health (MS) proposed "the National Policy of Permanent Education in Health (PNEPS) as a strategy of the SUS for the training and development of its workers" (MS, 2004), seeking "to articulate the integration between teaching, service and community, in addition to assuming the regionalization of SUS management, as a basis for the development of qualified initiatives to face the needs and difficulties of the system" (MS, 2018), Permanent Education in Health (EPS) aims to "guide the training and qualification of professionals inserted in public health services, with the purpose of transforming professional practices and the organization of work itself based on the needs and difficulties of the system." (FERREIRA et al, 2019, p.224).

In the curricular bases of undergraduate nursing, nursing has in its curriculum, the preparation in addition to specific techniques the role of educator:

The nurse, according to his training, should have in his professional profile, in addition to caregiver, that of educator, therefore, a possible facilitator of Permanent Education. On the one hand, this professional is expected to make decisions based on scientificity, the exchange of experiences and orientations aiming at a better perception of the individual, the team and the community. (MELLO et al, 2018, p.3)

In view of the latest events in our society at a global level and the emphasis on the importance of nursing in this context, and the insertion of nurses in the context of caregiver, leader and educator, we aim in this study to analyze the role of the nurse as a team reference in continuing education in times of the COVID-19 pandemic.

The motivation of this study occurred after experience and several readings on the subject, in an attempt to work permanent education in the nursing team, in times of COVID-19 pandemic and the unbridled search for personal professional safety, of the team and in relation to patients with suspected or confirmed diagnosis of COVID-19.

# **2 DEVELOPMENT**

The present study is a bibliographical, systematic and reflective review, divided into three categories: in the first category the descriptors were used: Nursing and Permanent Education, in the

second category: Nursing Team and COVID-19 and finally, in the third category, the descriptors Nursing, Permanent Education and COVID-19 were used, being selected 43 articles from the databases of the Virtual Health Library (VHL) and after analysis of the abstracts, Fourteen articles were selected.

The choices of the categories occurred due to the low number of studies found, in the use of the descriptors already used. For a better analysis of the results, descriptors were chosen, which are the starting points for finding the answers to the initial question of this study.

# 2.1 NURSING AND CONTINUING EDUCATION

Nursing, being a profession that involves several ways of "educating", be it the professional or the patient, needs support to achieve the goal. Teaching and learning should be involved in everyday activities, as we find in the following reading:

Permanent Education can be defined as learning at work, where learning and teaching are incorporated into the daily life of organizations. Through the local reality it is possible to establish actions that are effectively received by the workers. It is based on the possibility of modifying professional practices, using different ways to teach, going beyond the valorization of techniques and specific training, with dialogue as the main tool of education. It guides the development initiatives of the professionals, not removing the personal responsibility of the process of constant updating. (NOGUEIRA DE SÁ et al, 2018, p.88)

The need to modify and update the practices of health professionals made permanent education become a policy of the Unified Health System (SUS) in Brazil, through the National Policy of Permanent Education in Health (PNEPS). Within the strategies of the PNEPS, we find the training, one of the resources used to improve the safety of the professional and the patient.

Training is recognized by the National Policy for Permanent Education in Health (PNEPS) as one of the most used strategies to strengthen knowledge, skills, attitudes and practices for the provision of care. Studies report that professionals see permanent education as an opportunity to update their knowledge, aiming at professional qualification to better serve their clients. Thus, as the results indicate that health work demands education as an opportunity for evolution, transformation and improvement. (MACEDO et al, 2019)

The insertion of the theme of Permanent Education in Health, within the health teams, whether in primary care or in the hospital is a challenge for all those involved in the scenario:

Permanent Education in Health (EPS), in the hospital context, is a challenging theme, due to the diversity of patients and pathologies, added to the demand of the service, make this space conducive to the realization of educational actions directed to permanent education, since its principles enable the construction of knowledge of the subject's autonomy. (MELO, 2017, p.14)

In nursing, permanent education is one of the managerial competencies to be developed by nurses throughout their academic and professional training. "By taking into account these aspects, the National Curricular Guidelines (DCN) for Undergraduate Nursing Education point out the general competencies for nurses with regard to their education" (MELLO et al, 2018, p.2), highlighting the nurse's education profile.

A study related to the theme, highlights that "all the interviewees considered permanent education as a fundamental part of their work" (NOGUEIRA DE SÁ et al, 2018, p.91), as well as: "permanent education contributed to the updating and improvement of their practices, thus improving the care provided." (NOGUEIRA DE SÁ et al, 2018, p.90)

Finally, continuing education sessions should make use of active methodologies that may include workshops, practical trainings, conferences, slide presentations or interactive moments and discussions, employing multiple teaching modalities that meet the diverse learning styles and create an active and constructive environment, favoring a transformative education.

# 2.1.1 Nursing Staff and COVID-19

The arrival of the pandemic brought the need for the health system to provide a rapid response, especially in the diagnosis of the disease and the system prepared to receive this demand, as addressed in this study:

In the case of COVID-19, it includes the need for readiness in the testing of the population, logistical and productive capacity of supply chains, for example, from the acquisition of personal protective equipment (PPE) to the availability of beds for hospitalization in hospitals, Intensive Care Unit (ICU) beds, as well as trained professionals to develop preventive and care actions. (CHAVES et al, 2020, p.12)

Nursing, because it is the first access of the patient, in the search for care, proved to be strong and pertinent, in the face of the unknown, as represented by the author of a 2020 study:

Nursing is this body, represented by nurses, technicians and auxiliaries, always active in any circumstances of patient care, from emergency care units to hospitals, exposed to risks arising from the precariousness of health services. (GONCALVES, p. 1, 2020)

The high potential for transmission of SARS-CoV-2 by droplets, aerosols and contact has led health professionals to review appropriate work practices that ensure the prevention of biological risk and adopt policies to cope with daily stress, due to the high impact caused by the pandemic on the mental health of workers. Although the pandemic generates occupational stress and is an important indicator of psychic exhaustion, health professionals end up developing coping tactics when exposed to highly challenging or traumatic situations, as highlighted in the 2020 study:

"[...] there are reports of psychic illness, such as the manifestation of generalized anxiety disorders, depression, changes in sleep quality, Obsessive-Compulsive Disorder (OCD), panic

attacks, Burnout syndrome or professional exhaustion, Post-Traumatic Stress Disorder (PTSD), even in the case of suicide. (MOREIRA & DE LUCCA, p.158, 2020)

In addition to facing the unknown, nursing needs to deal with existing problems, but with the arrival of the pandemic the problems have become more evident and visible in the eyes of society:

The nursing category faces problems associated with work overload, poor working conditions, lack of resources and low professional valuation, including issues of gender bias, leadership, regulation and the performance of multiple functions. (MOREIRA & DE LUCCA, p.157, 2020)

Finally, society showed solidarity with health professionals, with the launch of several campaigns in favor of Nursing, but it is necessary to emphasize the importance of being recognized full-time, because the pandemic will pass and the consequences will remain.

# 2.1.2 Nursing, Continuing Education and COVID-19

The coronavirus pandemic brought to the teams the need to work on permanent education with professionals, in an attempt to prevent professionals from contagion, working mainly on the techniques of dressing and undressing, as highlighted in the 2020 study: "Permanent Education in Health (EPS), staff training, the acquisition of personal protective equipment (PPE) and the removal of professionals from risk groups stood out as main agendas." (RIOS et al, 2020, p. 248). Continuing with the same author: "It was decided to suspend elective care and perform an immediate screening in the individual's access to the unit." (RIOS et al, 2020, p. 249)

According to Silva *et al*, we can add:

The actions of permanent education carried out in a circle with active participation of the professionals as essential subjects of the process reached their initial purpose, the teaching and learning of the technique of dressing and undressing of PPE. (SILVA et al, 2020, p. 232)

Given the importance of the need to dress properly and know how to manage the disease, expressing the interest of the participants was observed, as highlighted below:

"... In training, there was no dispersion but very attentive, worried looks. Some reports of fear of the new, in addition to demonstration of insecurity regarding the techniques, especially the undressing, since recent studies from other countries have evidenced the increase in contamination in the execution of this technique." (SILVA et al, 2020, p. 231)

The same study highlights the doubts that arose before the techniques of dressing and undressing:

Basic weaknesses in relation to the techniques of dressing and undressing emerged, although the professionals have years of hospital experience, such as: correct technique of hand hygiene; adequate removal of the apron and gloves of procedure without becoming contaminated; notions of efficacy and differences of the surgical mask, N95 or PFF2. The professionals reported, in their great majority, the need for the use of gloves and many minimized the importance of hand hygiene demonstrated insecurity and distrust in the use of only one pair of gloves, as recommended by ANVISA. (SILVA et al, 2020, p. 231)

In addition to the techniques of dressing, nursing had to adapt to changes in work processes and patient flows, such as the use of specific areas for COVID-19 patients, exclusive elevators, redeploy employees from the risk group to non-COVID-19 areas, resize the number of professionals in the COVID-19 area and among others, Being necessary to adopt strategies, as an example we find in this experience report:

One strategy found to alleviate this situation was to conduct the training together with the immediate managers and CCIH in sectors where the flows were in progress, so that the questions were heard and remedied with propriety, thus minimizing the anguish and insecurity of the professionals. (SILVA et al, 2020, p. 232)

The training of dressing and undressing of Personal Protective Equipment (PPE) became one of the priorities, so that it was possible to organize flows for care, with quality and safety:

In the provision of services by professionals, the concept of biosafety is present and should be prioritized, and health services must meet the Regulatory Standards - NR, being NR 32, of the Ministry of Labor and Employment, which establishes the basic guidelines for the implementation of measures to protect the safety and health of workers in health services. It recommends for each risk situation, the adoption of preventive measures and the training of workers for safe work. (SILVA et al, 2020, p. 229)

The use of EPIS, in general is recommending the use of surgical mask, these "should be used to avoid contamination of the professional's nose and mouth by respiratory droplets when the professional acts at a distance of less than 1 meter from the patient suspected or confirmed of infection with the new SARS-Cov." (CARVALHO et al, 2021, p.2)

Equipment such as gloves, bonnet, *Full-face*, are used when there is dispersion of aerosols or contact with exposure of the professional to contaminated material, as already used in practice. Publication of the year 2021, highlights how protection should be in suspected or confirmed cases:

In suspected or confirmed cases: use surgical masks and tissues (when coughing, sneezing or nasal discharge); frequently sanitize hands with soap and water and/or alcohol 70%; Health professionals (in procedures that do not generate aerosols): wear goggles or face shield, surgical mask, apron, procedure gloves and cap; sanitize hands; Health professionals (in procedures that generate aerosols): wear goggles or face shield, N95/PPF2 mask or equivalent, apron, procedure gloves and cap; sanitize your hands. (CARVALHO et al, 2021, p.3)

Finally, the review of the techniques of dressing and undressing, hand washing, the care with the installation and management of patients with oxygen support, the review of the care of patients in cardiorespiratory arrest, are some of the examples, that nursing can work in continuing education, to avoid contamination of professionals with COVID-19.

#### 2.2 DISCUSSION

Permanent education within nursing has always been a very discussed agenda, sometimes beneficial and/or sometimes controversial. The need to update the practices of health professionals has made permanent education a policy of the Unified Health System (SUS) in Brazil, being a more efficient and accessible strategies in strengthening knowledge and practical skills.

The Nurse, in the competence of his attributions, can and should make use of these strategies to ensure access to knowledge and review of practices, thus being a fundamental part of his activities and subsequent improvement in the execution of patient care. On the other hand, it is observed in practice and in the literature review, the work overload and the lack of support from some managers, ends up hindering the adherence to educational activities, occurring delay to achieve the objectives and demotivation of the team.

The arrival of the pandemic brought the need for the health system to provide a rapid response and meet a demand far above normal. In addition, the acquisition of essential equipment and supplies for patients with suspected or confirmed diagnoses of COVID-19.

Nursing, because it is the first access of the patient, in the search for care, proved to be strong and pertinent, in the face of the unknown, becoming the front line of coping with the pandemic of the new Coronavirus. Thus, the nurse had to approach with his team, with plans of different competencies and managerial focuses, in addition to dealing with daily stress, due to the high impact caused by the pandemic on the mental health of workers.

Nursing in the face of the pandemic used permanent education to prevent professionals from contagion, working mainly on the techniques of dressing and undressing. In addition, the changes in work processes and patient flows, relocation of professionals from risk groups and resizing of when of professionals. In addition to the reinforcement of hand hygiene, care with the installation and management of patients with oxygen support and other items that each care unit should have with its peculiarity.

### **3 CONCLUSION**

The cases recorded since the beginning of the pandemic to the present moment are alarming, reaching more than 1,039,120 deaths in the world, in the first week of October 2020, and bringing us as the only hope the vaccine, which is in tests in several countries, with the research funded with the support of several research centers, from all over the world. While the arrival of the vaccine does not

occur, it follows the planning of organizations to avoid the second wave of the disease, in places where there has already been a drop in the number of infected and daily deaths.

The revision of techniques and their correction should be a daily work on the part of all members of the nursing team, because there are always chances of improvement, to prevent contagion.

Thus, permanent education can be understood as a resource to promote differentiated educational processes for the nursing categories (nurses and technicians). This is because the performance of their functions in the hospital is distinct, due to the division of labor, and this requires these professionals to develop unique skills in their work process, for this we highlight the importance of all members in the process of permanent education, to avoid the spread of the disease.

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