

Residency in Family and Community Nursing: one of the ways to strengthen Primary Health Care*Residencia en Enfermería Familiar y Comunitaria: una de las vías para fortalecer la Atención Primaria de Salud**Residência em Enfermagem de Família e Comunidade: um dos caminhos para o fortalecimento da Atenção Primária à Saúde***Cristina Antunes Mota¹**

ORCID: 0000-0002-9655-1266

Lucélia dos Santos Silva²

ORCID: 0000-0002-6816-5042

Rita de Cássia Pereira Lima¹

ORCID: 0000-0002-3055-4915

¹Universidade Estácio de Sá. Rio de Janeiro, Brazil.²Escola Nacional de Saúde Pública/ Fiocruz. Rio de Janeiro, Brazil.**How to cite this article:**

Mota CA, Silva LS, Lima RCP. Residency in Family and Community Nursing: one of the ways to strengthen Primary Health Care. *Glob Acad Nurs.* 2021;2(Sup.1):e121. <https://dx.doi.org/10.5935/2675-5602.20200121>

Corresponding author:

Cristina Antunes Mota
E-mail: cristinaantunes.sms@gmail.com

Chief Editor: Caroliny dos Santos
Guimarães da Fonseca
Executive Editor: Kátia dos Santos
Armada de Oliveira

Invitation submission: 06-09-2021

In Brazil, multiprofessional and professional health care residencies were regulated in 2005, with the aim of training professionals to work in the Unified Health System (SUS)¹. This training model, considered the gold standard for developing specialists, is guided by the principles and guidelines of the SUS and, in line with the National Policy for Primary Care (PNAB), prioritizes the loco-regional specificities of each state. For a country that chose Primary Health Care (PHC) as the guide of the Health System, there is an urgent need to train powerful professionals who act in an ethical, critical, reflective manner and respond to the population's health needs.

In-service training, within the scope of PHC, has great relevance and impact to produce health care. The family health teams are composed of doctors, nurses, nursing technicians, community health agents, among other professionals who are behind the Family Health Strategies (ESF). Multiprofessional work strengthens PHC and gives society back better ways of health care².

In addition to learning the value and tools for teamwork, for some categories it is necessary to develop core clinical skills within their specialty, enhancing health outcomes.

Nursing produces care in offices, in the health unit, in the territory and in the community, considering the impacts of Social Determination in the clinical encounter, collaborating to achieve positive impacts for the improvement of people's living conditions and implied in epidemiological conditions, territorial and priority agendas for Health in Brazil.

Thus, investing in the training of nurses and nurses with clinical skills aimed at PHC, in the form of residency, has been a strategy supported by researchers in the Family Health area and by the Ministry of Health.

This Residency program uses theoretical-practical educational strategies as a pedagogical axis through active teaching-learning methodologies, guided by the development of transdisciplinary practices in the field of knowledge and by the integration between the knowledge and practices inherent to the nursing profession.

The training of resident nurses is fundamentally developed through in-service education, with the monitoring and supervision of the preceptor, in the

sense of strengthening teaching-service-community integration. The inclusion of residents in the practical activities of the Residence brings to the reflection some questions related to pedagogical training, since it presupposes a work of articulation between theory and practice to be carried out by professors from the educational institutions, tutors, preceptors, and workers of the Health Units.

With new professional profiles, based on knowledge, skills and attitudes developed for the specialty, nurses and family and community nurses help drive new models of care for nursing, based on scientific evidence, for clinical practice.

The experiences lived by residents in high technological density Health Units and in other specialized services provide an integrated approach and knowledge of different points of care of the Health Care Networks.

Supporting and subsidizing the process of training family and community nurses for Primary Health Care, with specific skills for clinical practice of family nursing in PHC and expanding the scope of practices, makes these professionals highly qualified and resolute in PHC. The perspective is of a comprehensive, interprofessional, qualified and resolute care, with a focus on the person, the family and the community, in which their professional practice is incumbent. The ethical and political commitment to the construction of the SUS is essential to strengthen and qualify the PHC network, recognizing its attributes as the guiding axis of training with a focus on understanding that PHC practices present complexities and require the incorporation of new values, giving back to society professionals who can support the construction of the subjects' autonomy.

References

1. Ministério da Educação (BR). Residência Multiprofissional [Internet]. Brasília (DF): Ministério da Educação; 2020 [acesso em 08 jun 2021]. Disponível em: <http://portal.mec.gov.br/residencias-em-saude/residencia-multiprofissional>
2. Organização Pan-Americana da Saúde (OPAS). Ampliação do papel dos enfermeiros na Atenção Primária à Saúde [Internet]. Washington (D.C.); 2018 [acesso em 08 jun 2021]. Disponível em: <https://iris.paho.org/handle/10665.2/34960>