

CHALLENGES IN NURSING COMPETENCY DEVELOPMENT

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Technological transformations have favored changes in a wide range of social contexts, especially in health, demanding new competencies, critical thinking and decision-making skills from professionals.

Nursing activities have also been affected in different contexts; one example is clinical patient assessment, which used to be for physicians only until a few decades ago, nowadays, it is performed by nursing, although with a different goal. Another demand on professionals is precision in diagnostic and therapeutic attributions.

In this evolution, teaching and learning strategies have diversified, providing their contributions in the search for these goals. Some of them also originate in this technological development, associated or not with teaching and learning models. Acquiring knowledge through these strategies and being familiar with their job has become a necessary condition for nursing professionals⁽¹⁾.

Among these advances, simulation stands out, an interactive method for learning theories, assessment models, technologies, skills and clinical reasoning. Simulation has been used for some years now as a teaching strategy; the first models were static (full or partial mannequins) and used for knowledge or skill acquisition in specific procedures⁽²⁾.

Nowadays, resources are available to acquire more complex skills, such as the invasive techniques nurses develop at critical care units, using the most recent technologies. One example are simulators with attached programs, which report clinical situations that are sensitive to the learners' answers, making them identify data, make judgments, intervene and observe results, whether adequate or not⁽³⁾. In addition, computer assisted simulation is an opportunity to learn about nursing care delivery without any risks for patients⁽⁴⁾.

It should be reminded that students have positively assessed the use of these strategies, considering them more realistic, reducing the time needed to perform the procedure in real situations and the fear of direct procedure execution on patients. This also offers the opportunity for students to practice in a safe environment before any interventions in clinical situations⁽⁵⁾.

The use of other strategies in the Brazilian scenario is still incipient, which is also true for distance education, with new information Technologies, such as videoconferencing, on-line teaching and use of CD ROM, stimulated since 1996 by the new law that regulates education in Brazil [Lei de Diretrizes e Bases]. The use of these technologies varies among different nursing education centers.

More sophisticated technological advances are expected. Thus, nursing will be changed by the influence these technologies exert on the teaching-learning process. Faculty members and education institutions need to prepare for these new challenges, which already appear, in the way they conduct the professional training process in nursing. Schools should provide for investments in infrastructure and technological training⁽⁶⁾.

Research involving an analysis of these new technologies and their contribution in constructing the competencies health professionals need is both necessary and welcome.

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