



# Nursing internship programs in the pandemic COVID-19 times

*Estágio curricular supervisionado de enfermagem em tempos de pandemia da COVID-19*

*Pasantía curricular supervisada de enfermería en tiempos de pandemia de COVID-19*

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## ABSTRACT

**Objective:** Reflect upon the administrative acts of the Brazilian Ministry of Education concerning Internship Programs in the health field during the COVID-19 pandemic and the consequences for the nursing field. **Method:** this study, with a theoretical-reflective approach, was based on the literature addressing Internship Programs in Brazil, considering eight ordinances in the field of education, intended to present decisive measures to deal with the challenges imposed by the pandemic. **Results:** The purposes underlying the administrative acts issued by the Ministry of Education, gaps, weaknesses, and challenges imposed to Internship Programs within the settings in which these programs are implemented are discussed considering the pandemic context and the possibility of implementing remote teaching modalities. **Final considerations and repercussions for the practice:** The changes, uncertainties, and challenges discussed in this study are expected to encourage prudence in decision-making when considering alternatives to adapt Nursing Internship Programs during and after the pandemic.

**Keywords:** Quality of Nursing Education; Internship Programs; Pandemic.

## RESUMO

**Objetivo:** Refletir sobre os atos administrativos do Ministério da Educação do Brasil relacionados ao Estágio Curricular Supervisionado na área da saúde durante a pandemia do COVID-19 e as repercussões na enfermagem. **Método:** Estudo com abordagem teórico - reflexivo, com base na literatura sobre Estágio Curricular Supervisionado no Brasil, tendo como referencial oito portarias governamentais na área da educação que se apresentam como medidas resolutivas para o enfrentamento aos desafios do contexto da pandemia. **Resultados:** foram explicitadas as intencionalidades subjacentes aos atos administrativos do Ministério da Educação, as lacunas, fragilidades e desafios na realidade do Estágio Curricular frente aos cenários das práticas de ensino no contexto da pandemia e as possibilidades de atividades remotas. **Considerações finais e repercussões para a prática:** Espera-se que as mudanças, incertezas e desafios, destacados neste estudo, despertem cautela na tomada de decisão e condução de alternativas de adequações para o Estágio Curricular Supervisionado em enfermagem no contexto de pandemia e no percurso pós-pandemia.

**Palavras-chave:** Qualidade da Educação em Enfermagem; Estágio Curricular Supervisionado; Pandemia.

## RESUMEN

**Objetivo:** reflexionar sobre los actos administrativos del Ministerio de la Educación de Brasil, relacionados a la Pasantía Curricular Supervisada en el área de la salud, durante la pandemia del COVID-19 y sus repercusiones en la enfermería. **Método:** estudio con abordaje teórico reflexivo, con base en la literatura sobre Pasantía Curricular Supervisada en Brasil, teniendo como referencial ocho ordenanzas gubernamentales en el área de la educación que se presentan como medidas resolutivas para el enfrentamiento de los desafíos en el contexto de la pandemia. **Resultados:** fueron explicitadas las intencionalidades subyacentes en los actos administrativos del Ministerio de la Educación, los vacíos, fragilidades e desafíos en la realidad de la Pasantía Curricular, frente a los escenarios de las prácticas de enseñanza, en el contexto de la pandemia y las posibles actividades remotas. **Consideraciones finales y repercusiones para la práctica:** se espera que los cambios, incertidumbres y desafíos, destacados en este estudio, despierten la precaución debida en la toma de decisiones y conducción de alternativas de adecuaciones para la Pasantía Curricular Supervisada en enfermería en el contexto de la pandemia y en el período de pospandemia.

**Palabras clave:** Calidad de la Educación en Enfermería; Pasantía Curricular Supervisada; Pandemia.

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## **INTRODUCTION**

This study discusses Internship Programs in the nursing field during the COVID-19 pandemic.

Nursing education is not a new subject and has been discussed and studied for many decades in the various contexts of the field. However, the COVID-19 pandemic, triggered by the etiological agent SARS-CoV-2, with high transmissibility rates and lethal potential, has negatively affected various spheres of society at many levels, including health and education. Hence, this topic has become relevant worldwide and has been recognized as a severe public health problem<sup>1</sup>.

Therefore, reflecting on current and future changes in nursing education, more specifically regarding Internship Programs, is essential considering the context imposed by the pandemic and the Brazilian government measures intended to deal with this critical sanitary crisis.

The COVID-19 pandemic has disorganized academic planning and social relations at all levels, leading managers to adopt various control measures such as suspending in-person academic activities to contain the virus' dissemination and prevent hospitalizations, especially in Intensive Care Units<sup>2,3</sup>.

Among the main intervention strategies to fight the COVID-19 pandemic, social distancing became the strategy most frequently recommended and adopted by sanitary authorities, demanding the population adapt to a new way of living and working<sup>4</sup>.

If, on the one hand, social distancing decreases, or at least postpones the risk of being infected with the virus and consequently requiring healthcare, on the other hand, it imposes social, economic, cultural, and political challenges<sup>5,6</sup>.

This restrictive context has also affected higher education. Teaching institutions were closed, practical classes and internships were suspended, the academic schedule was changed, research and extension activities were reorganized, and the quality of teaching was considerably compromised, the repercussions of which are not yet dimensioned<sup>7</sup>.

Six months after the pandemic reached Brazil, ministerial ordinances authorized academic programs to adopt remote classes in an attempt to save the school year while complying with social distancing measures. These ordinances, however, did not consider the specificities involved in the teaching of practical course work and internships in the health field and the current context of practices in the fight against the pandemic.

The courses in the health/nursing field began being offered in the remote modality. However, this modality is not compatible with the academic demands of education in this field. At the same time, teaching institutions have restricted infrastructure and limited human resources qualified for this teaching modality, which impairs the quality of academic activities, especially in terms of integrating teaching, research, and extension activities, as well as practical course work and internships<sup>8</sup>.

Additionally, the Unified Health System (SUS), the primary context in which health workers receive training in Brazil, is attempting to meet the population's health needs accruing from

the COVID-19 pandemic. However, structural and organizational barriers SUS has historically faced were aggravated with the emergence and high demand for services and care actions imposed by the pandemic.

The settings in which teaching/learning practices are implemented deal with lack of equipment and material to diagnose and provide care to patients; an insufficient number of hospital beds, especially in ICUs; poor working conditions reflected on a lack of personal protective equipment (PPE), work overload, undersized staff, workers unprepared to deal with the novel virus, and consequently, an increase in the number of workers infected by the SARS-CoV-2<sup>5,8</sup>.

According to the WHO, more than a year after the first case was registered in China, on February 5<sup>th</sup>, 2021, the novel coronavirus has already infected more than 143 million people, causing more than 2,250,000 deaths worldwide. In Brazil, more than 9 million people were infected by the same time, with 227,000 deaths<sup>9</sup>.

Despite advancements in studies and research, many questions remain unanswered while new variants are recorded worldwide. The vaccine represents hope to overcome this virus that has imposed so many changes, much suffering, and uncertainty.

However, going back to normal life as we knew it before the pandemic is a distant, and perhaps, unreal possibility. The changes imposed by the novel coronavirus may remain for an indefinite time or may even be permanent.

Given the previous discussion and considering the government's administrative actions, what is the situation of Internship Programs in the health field during the pandemic? In this sense, it is essential and necessary to reflect on nursing education, especially in terms of Internship Programs in this new economic, social and epidemiological context in Brazil. This study's objective was to reflect on the administrative actions of the Brazilian Ministry of Health concerning Internship programs in the health field during the COVID-19 pandemic and the consequences for nursing.

## **METHOD**

This theoretical-reflexive study was based on eight governmental ordinances in the field of professional health education in Brazil available at the Ministry of Education (MEC) portal. These measures are intended to deal with the challenges imposed by the COVID-19 pandemic and enabled an analysis of the implementation of Internship Programs and the pandemic. Notes, considerations, recommendations, and specific deliberations were extracted from these documents regarding practical training and internships in healthcare units. This analysis is essential to reflect, from a critical perspective, the underlying intentions of the Brazilian legislation to deal with the pandemic, as well as gaps and weaknesses considering the specificities of training and national curricular guidelines in the nursing field.

Relevant characteristics were found in these references; that is, ideas and reflections concerning Internship Programs in the pandemic context emerged, establishing connections between the topic and the complex nature of the nursing field and with the whole context.

The theoretical reflection grounded on the literature and the authors' experience with the topic enabled understanding the current context and acquiring more comprehensive knowledge.

Two theoretical reflective aspects were categorized. The first addresses the legislation concerning Internship Programs in the COVID-19 pandemic context, and the second highlights the main challenges and alternatives for the educational process within Internship Programs in the nursing field.

## **INTERNSHIP PROGRAMS AND THE COVID-19 PANDEMIC: WHAT DOES THE LEGISLATION SAY?**

Law 9,394/96 (LDB/96) established that Internship Programs are a curricular component, guided by principles intended to connect theoretical and practical foundations to allow the students to acquire practical experience in the world of work<sup>10</sup>.

Internship Programs were implemented in undergraduate nursing programs through Resolution No. 3/2001 from the National Council of Education, which provides on the National Curricular Guidelines of the Nursing Undergraduate Programs (DCN/ENF), determining that Internship Programs are mandatory in the last two school years, with a 20% minimum workload of the program's total workload, being part of the pedagogical project<sup>11</sup>.

Internship Programs in the nursing field are composed of a set of practical activities developed within SUS; activities that are supervised by professors and workers in actual healthcare settings promoting critical reflections; activities that promote reflection and systematization of theoretical and practical, technical-operational, ethical-political knowledge; and are an essential instrument to promote critical reasoning and promote the students' interventional, propositional, and investigative skills<sup>6,12</sup>.

From this perspective, Internship Programs are supposed to take place in practical settings, real-life situations involving a complex set of different types of knowledge and activities within the production of care, characterized by diverse and complex training intended to prepare and train health workers.

The sanitary situation resulting from the COVID-19 pandemic and the need for the population to comply with social distance measures created an inflection point for academic activities, mainly practical course work in healthcare settings. Therefore, to simultaneously resume teaching activities and combat the pandemic, MEC issued eight ordinances in 2020, implementing measures to higher education institutions.

Ordinance No. 343, from March 17th, 2020<sup>13</sup>, exceptionally authorized remote classes during the social distancing measures. However, it did not consider internship programs, which caused

uneasiness in the academic milieu, and the legal text had to be changed. Ordinance No. 345 maintained that remote classes would replace in-person classes but prohibited internship programs and laboratory activities<sup>13,14</sup>.

In order to optimize health services within SUS, the Ministry of Health (MS) issued Ordinance No. 492 in March 2020, called strategic action "*O Brasil Conta Comigo*" [Brazil counts with me] in agreement with Ordinance No. 356 from MEC. It exceptionally authorizes students regularly enrolled in the last two years of the medical program and last year of the nursing, pharmacy, or physical therapy programs, to perform mandatory practical course work in primary health care units, emergency rooms, hospitals, or communities while the COVID-19 pandemic endures<sup>15,16</sup>.

These ordinances recommended that health care students registered in the respective professional councils are supervised by professors, preferably from the *Universidade Aberta do SUS* (UNA-SUS) [SUS Open University], without the need to have any connection with the teaching institution responsible for these students' training. After the internship proposed by the strategic action "*O Brasil Conta Comigo*" is concluded, students present a certificate of participation with the respective workload to replace the hours corresponding to the internship program.

Aligned with the MS's strategy, MEC issued Ordinance No. 37417 in April 2020, authorizing the graduation of students regularly enrolled in the last school year who had already met 75% of their internship workload to work in the fight against the COVID-19. Seven days later, the Ordinance was revoked and replaced by Ordinance No. 383, which conferred the certifications of completion and diplomas issued after the Ordinance the exact value of those issued before the pandemic, no longer demanding students to work in the pandemic context or giving a bonus for residency programs. It, however, maintained that students who met 75% of their internship workload could ask anticipated graduation<sup>17,18</sup>.

In June 2020, when revoking Ordinances No. 343 and No. 345, MEC issued Ordinance No. 544 and exceptionally approved in-person classes to be replaced by remote activities using digital resources and also authorized practical course work to be replaced by remote activities that could be implemented at a distance as long as the programs' curricular guidelines were complied with. This Ordinance enabled teaching institutions to define how in-person classes would be replaced and which resources would be available for students to attend classes and academic activities<sup>19</sup>.

This Ordinance presents a proposal different from the strategic action "*O Brasil Conta Comigo*". Ordinance GM/MS No. 492 allows students to work in the front line against the pandemic without clarifying how the teaching institutions would monitor their academic development or the strategies used to ensure the students' physical and psychosocial safety<sup>15</sup>. MEC's Ordinance No. 54419 authorizes internship programs or practical course work demanding specialized laboratory be

replaced by remote activities as long as the National Curricular Guidelines are complied with. In this sense, remote activities replacing practical activities shall be part of specific teaching plans previously approved by the respective programs and included in the pedagogical project.

## **CHALLENGES AND ALTERNATIVES TO IMPLEMENT INTERNSHIP PROGRAMS IN THE NURSING FIELD WITHIN THE PANDEMIC CONTEXT**

These legal actions reveal a concern in addressing the deficiencies of the health services by facilitating the training process. These measures disregard the various structural and organizational challenges faced by health services such as operational capacity in terms of the number and qualification of workers, a lack of equipment and beds, in addition to precarious working conditions<sup>8,20-21</sup>.

As a result, much has been discussed in the academic milieu, and there is a concern with the quality of training, especially regarding internships and the inclusion of students and professors in health services.

The strategic action “O Brasil Conta Comigo”<sup>15</sup> seems to have been implemented to strengthen the staff of health workers fighting against the COVID-19, expanding the coverage of patients cared for by the SUS at all care levels. However, this strategy was established without aligning teaching institutions with healthcare providers to ensure the quality of the training process and the safety of students working in health care settings, ensuring fewer errors and patient safety as some of the attributes of quality care delivery<sup>22</sup>.

In this sense, MEC Ordinance No. 383, which authorizes anticipating the graduation of students who attended 75% of their internship workload, accelerated the graduation of new health workers to meet the current demands of the Brazilian job market<sup>18</sup>. Hence, many students graduated without fully complying with the mandatory internship workload as provided in the programs’ curricular guidelines, preventing these students from consolidating their theoretical knowledge and developing technical skills and behaviors for their professional development.

It is worth noting that remote activities brought up conceptual discussions concerning remote teaching and distance learning. In-person classes were not replaced by distant learning; instead, they were replaced by communication and information technologies. These are two different formats: Distance Learning is a modality in which professors and students do not share the same teaching virtual space or time. The students interact asynchronously with professors/tutors to clarify doubts, while the professors of respective curricular courses administer remote classes live using online platforms and tools. Therefore, distance learning is not to be confused with remote teaching to avoid mischaracterizing training-specificities within the nursing field<sup>6,20</sup>.

Digital teaching activities, information and communication technology, or other conventional means enable the remote implementation of practical activities and internships, favoring course work that is distant from real-life health care settings, contrary to what is established in DCN/ENF<sup>11</sup>.

The centers of knowledge and practice provided for in the DCN/ENF<sup>11</sup> are intended to promote the quality of the training process in all the dimensions of teaching/learning practice settings, which involves a need for listening, otherness, empathy, and communication skills that are developed when directly interacting with patients through inter-relational practices and in the daily routine of SUS. Thus, such training is not equivalent to that provided through technologies that replace the direct contact between workers and patients<sup>6,20-22</sup>.

Therefore, the settings where health/nursing practices are implemented, as spaces of teaching/learning activities, are essential to link theory and practice, to connect the world of work to the training process, to build knowledge that meets the health needs of the population and train critical, reflective professionals, capable of transforming the social context, of being agents of change, in line with the DCN/ENF<sup>11</sup>.

These diversified settings favor essential practical activities focusing on welcoming patients, families, and communities in primary health care units, outpatient clinics and hospitals, child day care services, and nursing homes. These are spaces where individuals construct their professional identities, involving the caring dimension and production of care, encompassing a complex set of different types of knowledge and promoting knowledge that is coherent to the population’s care needs. Thus, these spaces are indispensable for training and developing professional skills, unfeasible when implemented remotely<sup>8,20</sup>.

The National Health Council’s recommendation No. 48, from July 1st, 2020, supports this understanding, recommending MEC to comply with Technical Report No. 162/2020 regarding internships and practical course work in the health field during the COVID-19 pandemic. This report opposes the implementation of internships and practice in distant learning and/or remote modalities during the pandemic, arguing that the training of health workers should be based on ethics, fewer occurrences of errors, and patient safety, some of the attributes necessary to ensure the quality of care and health education<sup>22</sup>.

Remote classes demand professors and students to access technological equipment and resources that are not widely available in teaching institutions or among most students. The possibility to implement remote classes was adopted without ensuring that students could access this teaching modality. On the other hand, including students in health services requires that proper working conditions be provided to professors and students, with appropriate physical and psychosocial protective measures to develop skills and competencies safely<sup>22</sup>.

Therefore, it seems that bureaucratic procedures and virtual instruments have priority, which is misaligned with a search for quality training, without social or sanitary commitment with SUS and the population’s health<sup>15</sup>.

Nonetheless, given the current and challenging context, universities cannot paralyze academic, research, or extension activities and have to fulfill their role of meeting the demands of society. In this sense, teaching institutions seek new teaching/learning techniques within the virtual context to overcome the current challenges<sup>23</sup>.

In these authors' experience, professors have made an effort to adequate the curriculum to this novel remote teaching modality, working at different spheres, such as: advising students, composing undergraduate and graduate final examination committees; developing research; offering synchronous and asynchronous classes; organizing virtual events and debates; in addition to other technical-scientific activities that can be implemented remotely. These experiences, however, expose some barriers, such as the use of the Internet and quality equipment, which is not a reality for many Brazilian students, which deepens social inequality and compromises the quality of education.

Note that faculty members need to receive training to properly use the technologies available for remote classes, considering this is not a modality with which they are familiarized. Additionally, there is a need to provide emotional support to both students and professors to cope with the psychological effects of this challenging context<sup>22</sup>.

Virtual Technologies should be considered a teaching alternative to strengthen the quality of education, rather than an instrument to replace in-person classes, not to mention practical activities, in which most of the professional skills and competencies provided in the DCN/ENF<sup>11</sup> are developed, in which being physically present is an essential condition.

Despite the role of remote methodologies, no equipment can replace in-person classes or processes in which there are social interactions, through which practical course work take place in the nursing field. By itself, the use of these resources cannot be a reference for quality in health education. Remote classes are adopted to deal with an emergency, but the quality of education should be preserved.

The quality of Internship Programs in nursing includes more than the structural (re)organization of programs because it implies attitudinal actions from the recipients of education, so they adopt innovative practices that promote critical reasoning, reflection, dialogue, bonds, and interactions.

For practical course work to take place in the current context, public agencies responsible for fighting the pandemic are expected to authorize and prepare an institutional plan intended to ensure safety protocols, sanitary measures, and the availability of personal protection equipment for professors, students, and preceptors.

The previous discussion reveals that returning in-person practical coursework is vital. However, prudence is necessary to resume practical activities in the health field according to SUS' principles and guidelines to deal with adversities and the population's health conditions. Thus, technical and ethical

conditions must be ensured to avoid a dichotomy between training and professional practice.

## FINAL CONSIDERATIONS AND IMPLICATIONS FOR PRACTICE

The discussion presented here regarding Internship Programs in the nursing field during the COVID-19 pandemic in the Brazilian context contributes to discussions regarding the quality of education in the nursing field. It also favors debates regarding the training process in higher education institutions and health services from the perspective of reorienting this process within SUS, mainly to deal with the challenges imposed by the pandemic to implement Internship Programs in health/nursing.

The new remote modality currently implemented is one of the impacts caused by the COVID-19 pandemic on the implementation of Internship Programs in nursing. Internship Programs are mainly hands-on experience directed to health care, in which competence and purpose are vital to promote critical reasoning and prevent alienation.

These aspects impacted the quality of teaching with implications on the working conditions of professors and administrative technicians and study conditions. The most significant problem has been the difficulty in meeting the DCN/ENF quality parameters to train workers capable of providing quality care and promote health within SUS effectively.

There is a need to reflect on the teaching of practical course work in nursing so that measures are adopted to ensure quality standards based on the DCN/ENF, compatible with the training of professionals capable of knowing, interpreting, and interfering in the world; to reflect about teaching technologies as a pedagogical approach, rather than mere technology. Additionally, understanding the difference between distance learning and remote methodologies is vital to preserving the quality of care.

Note that practice and education merge in Internship Programs in nursing. The world has changed, as have nursing education and health care settings. In-person classes may be enriched by remote resources but not replaced.

Because of these uncertainties, the following questions were raised: What lessons will the novel COVID-19 pandemic leave to Internship Programs in nursing? How will Internship Programs be resumed after the novel virus pandemic? Questions we are currently unable to answer.

This study contributes by highlighting current changes, uncertainties, and challenges, urging caution when making decisions that concern alternatives to adapt Internship Programs in nursing within the pandemic context.

While challenges remain, those responsible for implementing Internship Programs in nursing and for meeting the requirements of DCN/ENF should seek alternatives to ensure the quality of education within SUS settings, linking teaching and practice in healthcare settings, advancing in the provision of care and

development of science, not coherent with training that is mediated by remote technologies that replace the direct contact between workers and patients.

It is important to note that neither Brazil nor the world will go back to normality after the pandemic. Hence, resuming Internship Programs in the nursing field should be prudent because care delivery and training workers to provide care is challenging. We cannot forget that quality of education and healthcare translates into saving and protecting lives.

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