CUIDADO É FUNDAMENTAL

Escola de Enfermagem Alfredo Pinto – UNIRIO

INTEGRATIVE REVIEW OF THE LITERATURE

DOI: 10.9789/2175-5361.rpcfo.v14.11534

PERMANENT EDUCATION ON PALLIATIVE CARE FOR NURSING PROFESSIONALS: AN INTEGRATIVE LITERATURE REVIEW

Educação permanente sobre cuidados paliativos para profissionais de enfermagem: uma revisão integrativa da literatura

Educación permanente en cuidados paliativos para profesionales de enfermería: revisión integradora de la literatura

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ABSTRACT

Objective: to identify current scientific evidence in the literature about continuing education in palliative care for nursing professionals. **Method:** integrative literature review carried out in six steps: 1- definition of the guiding question; 2- Literature search in the databases: Latin American and Caribbean Health Sciences Literature, Database in Nursing and Medical Literature Analysis and Retrieval System Online by combining the Portuguese Descriptors: "Palliative Care", "Nursing" and "Education Continued"; 3- definition of the information to be extracted from the studies; 4- critical evaluation; 5- interpretation of results; 6- content synthesis. **Results:** six articles selected for full reading, emerging two categories for discussion. **Conclusion:** this is a recent theme, but on the rise. There was a small number of studies, indicating the need for further research in the field of palliative care and continuing education in this area.

DESCRIPTORS: Palliative care; Nursing; Continuing education.

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Received: 11/23/2021; Accepted: 12/13/2021; Published online: 10/05/2022

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How cited: Barbosa APM, Santo FHE. Permanent education on palliative care for nursing professionals: an integrative literature review. *R Pesq Cuid Fundam* [Internet]. 2022 [cited year mouth day];14:e11534. Available from: https://doi.org/10.9789/2175-5361.rpcfo.v14.11534





RESUMO

Objetivo: identificar na literatura evidências científicas atuais acerca de educação permanente em cuidados paliativos para profissionais de enfermagem. **Método:** revisão integrativa da literatura realizada em seis etapas: 1- definição da questão norteadora; 2- busca na literatura nas bases de dados: Latin American and Caribbean Health Sciences Literature, Base de Dados em Enfermagem e Medical Literature Analysis and Retrieval System Online por meio da combinação dos Descritores português: "Cuidados Paliativos", "Enfermagem" e "Educação Continuada"; 3- definição das informações a serem extraídas dos estudos; 4- avaliação crítica; 5- interpretação dos resultados; 6- síntese do conteúdo. **Resultados:** seis artigos selecionados para leitura na íntegra, emergindo duas categorias para discussão. **Conclusão:** trata-se de uma temática recente, porém em ascensão. Observou-se um número reduzido de estudos, indicando a necessidade de novas pesquisas no campo dos cuidados paliativos e educação permanente nessa área.

DESCRITORES: Cuidados paliativos; Enfermagem; Educação continuada.

RESUMEN

Objetivo: identificar la evidencia científica actual en la literatura sobre la formación continua en cuidados paliativos para profesionales de enfermería. **Método:** revisión integradora de la literatura realizada en seis pasos: 1- definición de la pregunta orientadora; 2- Búsqueda de literatura en las bases de datos: Literatura Latinoamericana y del Caribe en Ciencias de la Salud, Base de Datos en Enfermería y Sistema de Análisis y Recuperación de Literatura Médica en Línea mediante la combinación de los Descriptores Portugueses: "Cuidados Paliativos", "Enfermería" y "Educación Continuada"; 3- definición de la información a extraer de los estudios; 4- evaluación crítica; 5- interpretación de resultados; 6- síntesis de contenido. **Resultados:** seis artículos seleccionados para lectura completa, emergiendo dos categorías para discusión. **Conclusión:** este es un tema reciente, pero en aumento. Hubo un pequeño número de estudios, lo que indica la necesidad de realizar más investigaciones en el campo de los cuidados paliativos y la educación continua en esta área.

DESCRIPTORES: Cuidados paliativos; Enfermería; Educación contínua.

INTRODUCTION

The Nursing team represents the largest category of health professionals in Brazil and, in the context of Palliative Care, acts in an interdisciplinary manner with a view to professional care which aims to reduce suffering and promote comfort and human dignity to the person with serious illness and his/her family, in a perspective of attending to the basic human needs affected.¹

Palliative care is an approach that improves the quality of life of patients (adults and children) and their families when facing problems inherent to a life-threatening illness. They prevent and alleviate suffering through early identification, assessment, and correct treatment of pain and other problems, whether physical, psychosocial, or spiritual.²

According to the World Health Organization (WHO) and the World Alliance for Palliative Care (WHA) more than 20 million people need this type of treatment every year worldwide, but only 10% receive adequate treatment. In Brazil, there are few palliative care services that offer care based on scientific and quality criteria. There is still a gap in the formation of health professionals related to this theme, essential for adequate care, due to the scarcity of quality specialization and post-graduate courses.^{3–4}

In order to promote a dignified end of life for the patient, even in the hospital environment, palliative care is increasingly important. To palliate means to protect. The word derives from the Latin pallium, a term for the cloak knights used to protect themselves from storms on the roads they traveled. Palliative care, therefore, is a form of protection, aiming to alleviate pain and suffering, whether of physical, psychological, social, or spiritual origin.⁵

The difficulty in accepting death as a natural process is related to the paradigm of cure, which includes the military virtues of fighting and persevering in the fight against the disease. This fact is also related to the silencing of issues related to terminality in the training process of health professionals, since educational institutions almost always emphasize curative treatment and new technologies, but do not prepare professionals to deal with death.⁶⁻⁷

In this context, the difficulty that patients, family caregivers, and health professionals encounter in dealing with the process of death and dying during hospitalization stands out. Although the health care teams are technologically prepared for life maintenance, it is observed the difficulty that these professionals have to care for the terminally ill patient and to deal with the demands presented by their families.⁷

Faced with this challenging scenario, Palliative Care presents itself as an innovative and beneficial form of health care and nursing assistance to patients and their families, with progressive ascension in Brazil in the last decades, but still with low coverage.

According to Resolution No. 41 of October 31, 2018, which provides guidelines for the organization of palliative care within the Unified Health System (SUS), palliative care should be part of the integrated continuous care offered, being eligible for such every person affected by a life-threatening disease, whether acute or chronic, from the diagnosis of this condition. And it brings, as one of its objectives, to offer permanent education for health workers within the SUS.⁸

The National Health Education Policy (PNEPS) was instituted in 2004 and represents a landmark for health education and work in Brazil. According to its guidelines, continuing education in health (HPS) is understood as meaningful learning at work, in which the teaching and learning processes are developed in the daily life of health institutions and in the work process as a possibility to achieve the transformation of professional practice and work organization.⁹

This articulation between the concepts of education and health aims to minimize the existing gaps between the training process and practice, as it has the function of articulating the needs of health services and the possibilities of professional development observing the resolving capacities of each service and the social management of health policies. It must be based on the identification of the problems faced in the work reality, considering the existing ones, as well as the health needs of people and populations.⁹⁻¹⁰

Thus, the research question was: What is the current scientific evidence on continuing education about palliative care for nursing professionals?

Given the above, this study aimed to identify scientific evidence in the literature about continuing education in palliative care for nursing professionals.

METHOD

This is an integrative literature review, since it aims to provide the synthesis of knowledge and the incorporation of the applicability of the results of significant studies in practice.¹¹ And to conduct this review, the six steps were followed according to the guidelines left by the authors.

The first stage of this study comprised the choice of the guiding question. To formulate the research question the PICo strategy was used,¹² where each element of the acronym was composed of descriptors: P (Population: nursing team); I (Interest: continuing education); Co (Context: palliative care). From this interaction the following question emerged: What is the current scientific evidence on continuing education about palliative care for nursing professionals?

The second stage is the literature search, which took place in November 2020. For the search and selection of studies, the following databases were consulted: Latin American and Caribbean Literature on Health Sciences (LILACS), Nursing Database (BDENF) and Medical Literature Analysis and Retrieval System Online (MEDLINE) via the Virtual Health Library (VHL). The combination of the following Descriptors in Health Sciences (DeCS) in Portuguese was used: "Cuidados Paliativos", "Enfermagem" and "Educação Continuada" accompanied by the Boolean operator "And". The following filters were used: full texts in English, Portuguese and Spanish, available free of charge and a time frame of the last five years (2015 to 2020). Inclusion criteria were: original studies that addressed the theme of continuing education in palliative care for nursing professionals. The exclusion criteria were: repeated articles, being considered only once; monographs, dissertations, theses, and review articles. Thus, following these parameters, the database search resulted in the identification of 29 articles. After exclusion of the duplicates, screening of titles and abstracts, and evaluation of the full texts, 6 studies were selected for inclusion (Figure 1).

In the third step, the information to be extracted from the selected studies was defined. The data were collected using a form produced by the authors, with the objective of guaranteeing the development of the review with methodological rigor. The information extracted from the studies included content related to: identification of the publication, identification of the researchers, and characterization of the studies included in the RIL, applying initially the analytical reading, ordering the information from the sources, allowing the obtaining of answers to the problem, followed by the interpretative reading, relating what the author states as possible solutions

The fifth step was the interpretation of the results. For the discussion stage of the results obtained in the research, a comparison was made with theoretical knowledge about the theme

The sixth step corresponds to the presentation of the knowledge review/synthesis, consisting of the grouping of the main results evidenced in the analysis of the studies involved.

Since this is a literature search and does not directly involve human beings, approval from the Research Ethics Committee was not necessary.

RESULTS

After searching the literature and applying the filters, six articles were selected for reading in full. Regarding the year of publication, it comprised the period from 2015 to 2019, with emphasis on the years 2017 and 2019, with two publications each. This finding shows that this is a recent theme, but it is under increasing discussion. The theme has been more addressed in foreign countries, with a predominance of publications in English, with five articles (83%) and only one (16%) in Portuguese, but the research was not conducted in Brazil, which highlights the scarcity of national studies on the subject. Descriptive studies predominated (83%) and with level IV of scientific evidence according to the Oxford Centre for Evidence-Based Medicine Classification (100%).

Chart 1 shows the results regarding title, author, year and country of publication, database, study design, setting, level of evidence, main results and conclusion.

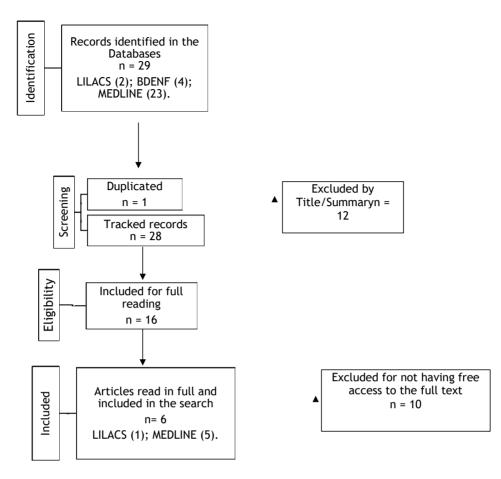


Figure 1 – Flowchart of search and selection of articles

Chart 1 – Presentation of the synthesis of studies included in the integrative review

N°	Title	Authors	Objectives	Year, country, database	Study design, participants, setting	Level of Evidence	Results
01	Implementation of knowledge- based palliative care in nursing homes and prepost post evaluation by cross-over design: a study protocol	Gerd Ahlström, Per Nilsen, Eva Benzein, Lina Behm, Birgitta Wallerstedt, Magnus Persson, Anna Sandgren	Describe an educational intervention model aimed at implementing knowledge-based palliative care in nursing homes; Describe the design of the effectiveness evaluation regarding the implementation of knowledge-based palliative care.	2018 Sweden Medline	Cross-over study 200 Participants	IV	Transforming research-based knowledge into routine practice through staff education is necessary to realize the goals of palliative care. The project contributed new knowledge on how to implement palliative care, based on the WHO definition of palliative care in a nursing home setting. The research showed that changing the practice of healthcare professionals is more likely by means of interactive education than by using more passive lectures and similar formats.

Chart 1 – Cont.

N°	Title	Authors	Objectives	Year, country, database	Study design, participants, setting	Level of Evidence	Results
02	Palliative care nurse specialists' reflections on a palliative care educational intervention in long-term care: an inductive content analysis	Rosemary Frey, Deborah Balmer, Michal Boyd, Jackie Robinson, Merryn Gott	To explore the experiences of palliative care nurse specialists regarding the benefits and barriers to implementing a palliative care educational intervention.	2019 New Zealand Medline	Inductive content analysis. 5 participants Long-stay institutions	IV	Emerging categories include the importance of relationships, knowledge exchange, communication, and the challenges of providing palliative care in a long- term care setting.
03	Teaching nurses to teach: A qualitative study of nurses' perceptions of the impact of education and skills training to prepare them to teach end-of-life care	Barbara A. Jack, Karen Kinloch, Mary R. O'Brien	To explore nurses' perceptions of the impact of a program designed to train them to teach end- of-life care.	2019 England Medline	Descriptive, qualitative. 20 participants. Hospices	4	Two main themes were identified; learning to teach and developing skills to change teaching practice. Participants felt more confident and better prepared to teach.
04	The end of life nursing education nursing consortium project	Betty Ferrell, Pam Malloy, Rose Virani	To share the international experiences of the ELNEC Project and to raise awareness of what needs to be advanced in palliative care internationally.	2015 United States Medline	Descriptive (experience report) 38 participants	IV	After completing the course, the participants, usually nurse educators, went back to their schools, health systems, and communities and presented the content in nursing curricula, and new employee orientation.
05	Training the Workforce: Description of a Longitudinal Interdisciplinary Education and Mentoring Program in Palliative Care	Stacie Levine, MD, Sean O'Mahony, MB, BCh, BAO, MS, Aliza Baron, Aziz Ansari, Catherine Deamant, Joel Frader, Ileana Leyva, Michael Marschke, Michael Preodor	Describe the development, implementation and evaluation of a regional interdisciplinary training program in Palliative Care.	2017 United States (Chicago) Medline	Descriptive, longitudinal. 30 participants Hospitals	IV	Long-lasting, interdisciplinary relationships were built at all levels of healthcare organizations. Fellows made significant increases in knowledge and self-reported confidence in adult and pediatric PC and program development skills and frequency of performing these skills. Fellows and mentors reported high satisfaction with the educational program.
06	Conhecimentos em cuidados paliativos dos profissionais de enfermagem de um hospital espanhol	Elena Chover- Sierra, Antonio Martínez-Sabater, Yolanda Lapeña- Moñux	To determine the level of knowledge in palliative care among the nursing staff of a Spanish tertiary care hospital	2017 Spain Lilacs	Descriptive Cross-sectional 159 participants Hospital	IV	54,7% had experience in palliative care and 64.2% had training (mostly basic). The mean score on the questionnaire was 54%, with statistically significant differences according to the participants' training and experience in palliative care.

Source: Prepared by the authors. Study data. Brazil, Rio de Janeiro, 2020.

DISCUSSION

Service Education Strategies

Most studies presented educational strategies based on seminars, courses, lectures and training, involving the multiprofessional team and, in some cases, the patients and their families. In general, the educational strategies focus on promoting evidence-based palliative care practice, whether in the hospital setting, at home, or in long-term care facilities for the elderly.

As part of the development of the strategies, many studies have included a search of publications on palliative care, evaluation of the content by experts, and a survey of the needs of the services. A study carried out in a tertiary care hospital in Spain, with the objective of determining the level of knowledge of the nursing staff about palliative care, identified that the worst results correspond to the psychosocial aspects, which implies the need to deepen this theme since undergraduate training in nursing and even after graduation, using participatory methodologies that encourage reflection and the development of knowledge, abilities, and attitudes.¹³

The National Policy of Continuing Education in Health (PNEPS) was instituted with the purpose of forming and training health professionals to meet the real needs of the population, in order to improve care for SUS users. Continuing education is a pedagogical concept in the health area, to establish organic relations between teaching and the actions and services, adding learning, critical reflection on the work, and resoluteness of the clinic and health promotion.⁹

Ahlström's 2018 study promoted a series of workshops and met every 4-5 weeks over a six-month period. The participants belonged to different professions and held different positions in nursing homes: unit manager, nurses, and other staff members such as occupational therapists, physical therapists, and physicians. The workshop groups were led by two experienced clinical nurses and researchers in the field of palliative and geriatric care. The participants in the groups reflected together on the content of the course material and discussed how they could apply the knowledge and skills described in their own daily work to achieve evidence-based palliative care.¹⁴

Already in the study by Frey et al. in 2019, a program was developed to exchange experiences about palliative care practice among staff from different institutions for the elderly, as a way to systematically promote knowledge exchange between palliative care specialist nurses from hospices and direct care staff from other units. Subsequently, the strategy was evaluated, through interviews with the participants, to see if it was contextually appropriate. It was evidenced that the content was well accepted and the approach, through exchange of experiences, favored assimilation of the theme and application in practice.¹⁵

Similarly, the study by Cezar et al. in 2019 proposed to better understand how a continuing education proposal could contribute to the improvement of health professional knowledge regarding palliative care, identifying the reduction of insecurity of professionals and the improvement of knowledge after the completion of the educational action.¹⁶

It is important that education in nursing permeates the work process, with the responsibility to update and empower nursing professionals through the insertion of educational actions, motivating self-knowledge, professional improvement and updating, and providing the acquisition of new knowledge to achieve professional capacity and personal development according to the social and institutional reality.¹⁷

The End of Life Nursing Education Consortiun, described in the 2015 study by Ferrell et al., was developed to educate nurses and other healthcare professionals about end-of-life care. It was a course divided into modules that included introduction to palliative care in nursing, pain management, symptom management, ethical conflicts, cultural and spiritual considerations, communication, loss, grief and bereavement, and final hours. Upon completion of the course, the participants, besides being better trained in the practice of palliative care, also shared the content learned with other employees in their institutions.¹⁸

The 2017 study by Levine et al. featured a longer (2-year) course offered to nurses and physicians through lectures, self-directed studies, and individualized mentoring. Participants received guidance on how to design, implement, and evaluate improvements to practice to address gaps in palliative care in their institutions. The results observed were significant increases in knowledge and self-reported confidence and skills for palliative care practice.¹⁹

Thus, we observed that several educational strategies can and should be used with the objective of updating knowledge and promoting the construction of new knowledge and practices for professionals already in practice. In general, the results are positive and bring benefits to care, favoring evidence-based practice, as well as improvements in quality and patient safety.

Nurses as Multipliers of Knowledge and Practice

Educating is an important and inherent competence in the work of nurses, which must be continually developed and evaluated, since health education requires the development of critical and reflective thinking, allowing the proposal of transforming actions that lead the individual to autonomy and the ability to propose and opine in health decisions for the care of oneself, one's family, and the community.²⁰

Throughout the studies included in this research, the role of nurses as disseminators of knowledge acquired through various educational strategies was remarkable. Nurses, as leaders, find it easier to share new knowledge and practices with their team members, as well as to influence them through their own practice.

The 2019 study by Frey et al. highlighted that the sustained relationship between nurses and other components of the health-care team, was a key factor in supporting the implementation of the palliative care educational intervention. Challenges remain, however, in relation to staffing levels, which further emphasizes the importance of the presence of the palliative care nurse specialist as a point of stability.¹⁵

Thus, as evidenced in the 2017 study by Levine et al. the applied educational interventions, in addition to building specific knowledge and skills in critical areas of palliative care, also prepare participants to project the acquired content and promote interpersonal, interprofessional, and even between other institutions. In this way, the knowledge acquired in a single educational strategy is not restricted to the public present, but is diffused through them, taking on unexpected proportions.¹⁹

The scenarios in which health professionals work are the most diverse and with the rapid and constant development of new technologies. Besides the daily demands involving emotional intelligence and interpersonal relationships, it is necessary that there is something beyond graduation that can make professionals always able to act in a way that guarantees the integrality of care and the safety of themselves and the users. Thus, the role of service institutions in the development of professionals' capabilities becomes fundamental.²¹

The study by Jack et al. in 2018, which set out to investigate the perceptions of the impact educational strategy impact on nurses, evidenced that all participants valued the program and felt it had been a positive experience. In addition, they reported that planning was essential in helping them feel prepared to teach. They felt that the course equipped them with tools to take with them in their day to day experiences and allowed them to apply what they learned in the course to their professional practice.²²

Continuing education in health consists of educational actions based on the problematization of the work process in health, with the objective of transforming professional practices and the organization of the work itself, taking as a reference the health needs, the reorganization of sectorial management, and the expansion of the links between training and the exercise of social control in health.²³

It is evident, therefore, that the educational strategies aimed at the practice of nursing professionals are effective and bring positive feedback to the practice. The involvement of the institution is important, so that the content addressed is in accordance with the needs of care. The nurse has an educator profile and becomes a fundamental part for the dissemination of new knowledge to other members of the multiprofessional team, as well as to the patient and community.

CONCLUSION

The analysis of the scientific production showed that continuing education strategies on palliative care are necessary and generate significant results for nursing practice, providing theoretical subsidies so that the professional feels better prepared and able to implement them in practice. It is also noted that, once qualified, professionals feel the need to pass the knowledge on, disseminating new evidence-based knowledge to the work team.

The actions need to be planned in order to fill the gaps identified according to the reality of each institution and solve the difficulties experienced by professionals, in a way that is attractive and relevant.

A reduced number of studies was observed in the sample of this review, indicating the need for new studies in the field of palliative care, as well as continuing education in this area, particularly in relation to the practice of nursing professionals.

ACKNOWLEDGMENTS

This study received financial support from the Research Support Foundation of the State of Rio de Janeiro (FAPERJ), through the edict E_12/2019 (Support to Programs and Courses of Postgraduation STRICTO SENSU of the State of Rio de Janeiro).

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