

**PROFILE OF MANAGERS OF PRIMARY HEALTH CARE OF A CITY OF MINAS
GERAIS, BRAZIL**

**PERFIL DE GERENTES DA ATENÇÃO PRIMÁRIA À SAÚDE DE UM MUNICÍPIO
DE MINAS GERAIS, BRASIL**

**PERFIL DE GERENTES ATENCIÓN PRIMARIA DE SALUD DE UNA CIUDAD DE
MINAS GERAIS, BRASIL**

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Abstract

Objective: know the profile of the managers of primary health care (PHC) of a city of Minas Gerais, Brazil. **Method:** A cross-sectional research carried out with 21 managers (58.3%) of APS in August and September of 2013. **Results:** females (71.4%); aged 21 to 30 years (35%); skin color white (85%), married (47.6%); with higher education (81%), followed by high school (14.3%); dental surgeon (26.7%), nurses (20%), business administrator and physiotherapist (with 13% each); with 2 years 11 months and even 29 days of graduation (33.3%); working in APS in until 1 year (42.9%) and until 1 year as Manager (52.4%), and 52.4% inform have training runs. **Conclusions:** It was found that low graduation time and expertise in making visible the need for APS actions of training and review the insertion of inexperienced managers in PHC and with medium-level training.

Descriptors: *Health Services Administration; Management; Primary Health Care.*

Resumo

Objetivo: Conhecer o perfil dos gerentes da Atenção Primária à Saúde (APS) de uma cidade de Minas Gerais. **Método:** Pesquisa transversal realizada com 21 gerentes (58,3%) de APS em agosto e setembro de 2013. **Resultados:** sexo feminino (71,4%); com idade de 21 a 30 anos (35%); cor da pele branca (85%); casadas (47,6%); com ensino superior (81%), seguido de ensino médio (14,3%); cirurgião dentista (26,7%), enfermeiro (20%), administrador de empresas e fisioterapeuta (com 13% cada); com até 2 anos 11 meses e 29 dias de formação (33,3%); atuação em APS em até 1 ano (42,9%) e, até 1 ano como gerente (52,4%), e 52,4% informam ter formação em gerência. **Conclusões:** Verificou-se baixo tempo de graduação e atuação em APS deixando visível a necessidade de ações de capacitação e a revisão na inserção de gerentes sem experiência em APS e com formação em nível médio.

Descritores: Administração de serviços de saúde; Gerência; Atenção Primária a Saúde;

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Resumen

Objetivo: conocer el perfil de los gerentes de atención primaria de salud (APS) de una ciudad de Minas Gerais, Brasil. Método: Estudio transversal hecho con 21 gerentes (58,3%) de la APS en agosto y septiembre de 2013. Resultados: mujeres (71,4%); edad entre 21 a 30 años (35%); piel de color blanca (85%); casadas (47,6%); con educación superior (81%), seguido de preparatoria (14,3%); cirujano dentista (26,7%), enfermeras (20%), administrador de empresa y fisioterapeuta (con 13% cada uno); con hasta 2 años 11 meses y 29 días de graduación (33,3%); trabaja en APS en hasta 1 año (42,9%); hasta 1 año como gerente (52,4%), y 52,4% informan que tienen formación gerencial. Conclusión: Se encontró que hay bajo tiempo de graduación y experiencia em APS, lo que se muestra visible la necesidad de acciones de entrenamiento y revisión de la inserción de gerentes sin experiencia en APS y con formación de nivel preparatório.

Descriptor: *Administración de los Servicios de Salud; Gerencia; Atención Primaria de Salud.*

INTRODUCTION

Restructuring of the National Policy of Primary Health Care occurred from the 1990s and the establishment of the Family Health Strategy (FHS) have contributed to the viability of the Unified National Health System (SUS), by highlighting as a priority the integrality of the actions and the commitment to the universal, equitable, and continuous healthcare, offering resolvability for the demands of the population health¹.

Such facts have been accompanied by massive investments in the expansion of access to health services and by decentralization of resource management, making necessary the construction of a new agenda in the field of human resources policies and in its way of management.^{2,3} So, it was created the demand for managers with the knowledge and skills to

efficiently meet the health needs of the population at the local level.

Management in health understands the process of working with people and resources which ensure the achievement of organizational objectives, considering among other actions, planning, evaluation, organization, leadership and control⁴.

However, the lack of preparation of professionals who undertake management positions at the public health service has been pressing concern, highlighting the situation of leadership positions occupied by professionals who were not qualified for such a role, since training and permanent education of these professionals are, most of the time, misaligned management trends. Such facts are expressed by difficulties observed in daily life, such as lack of understanding of government strategies and adoption of a secondary leadership or non-existent

posture, leading to inconsistencies in the actions that are provided to the population⁵.

It is noteworthy that the role played by the Manager of a Unit of Primary Health Care (PHC), understood as the entrance door of the user to SUS services, has a fundamental importance to ensure the implementation of the assistance model proposed, as well as to the achievement of the effectiveness of the current public health policies⁶.

Linked to these perspectives, this study aimed to know the profile of the PHC managers through the identification of sociodemographic, training and professional experience characteristics, in the context of a municipality of Minas Gerais state.

MATERIAL AND METHODS

It is a cross-sectional study, with universal sampling, considering the population of the managers of the Primary Health care (PHC) units in the municipality of Uberaba, Minas Gerais. All managers were invited to participate in the research. As inclusion criterion, it was considered the workplace of the professional as a manager at least for a month, in the respective PHC unit, at the time of data collection. Of the 36 managers, to 58.3% (21) agreed to

participate in the research by signing the Free and Informed Consent Statement.

A structured questionnaire was used, designed by the researchers for the achievement of the purposes of the study and applied in loco, in the period from August to September 2013. Nursing undergraduate students from the Federal University of Triângulo Mineiro (UFTM) participated in data collection, previously trained for the application of the research instrument.

Study variables included: sex, age, skin color, marital status, family income, schooling, professional education, time of work, time of work in PHC and in the management of Basic Health Unit, in addition to the management training. Data were entered, tabulated and consolidated using the Microsoft Excel program by double entry and independent typists. Database has been imported into the Software Statistical Package for Social Sciences (SPSS) version 20.0 for statistical analysis. Variables were described as the numeric values and frequency.

It is emphasized that the research is part of a project entitled “Health Education for the Elderly: the need for training of health professionals and the creation of groups in the municipality of Uberaba” which received financial support from the Fundação de Amparo à Pesquisa de Minas Gerais (FAPEMIG) - (Minas Gerais State

Research Foundation (FAPEMIG). The research was guided by the ethical principles included in the resolution 466/12 of the National Health Council, whose protocol was submitted to the Ethics Committee in Research (CEP) of UFTM under the number 1658/2010, receiving the assent and consent of the Municipal Health Secretary (SMS) of the municipality of Uberaba.

RESULTS

Sociodemographic characteristics of the managers

Among the respondents, it was observed a predominance of the female sex (71.4%), with ages ranging between 23 and 74 years, with particular emphasis to the age group of 21 to 30 years (35%). Most part of respondents referred to white skin color (85%), being married (47.6%), with family income between R\$4,001.00 a R\$ 6,000.00 (47.1%), as shown in Table 1.

Training and professional experience

In table 2 are listed the schooling, professional category, time of performance and experience of managers, in addition to management training. With respect to educational level, the majority of managers have complete higher education (81%), only 1 (4.8%) has post-graduate degree and 3 (14.3%) have only complete high school.

Among those with higher education, the professional category most often mentioned was the surgeon-dentist (26.7%), followed by nurses (20%). The professional category was not reported by 3 participants at a higher level.

As to the time of professional performance, one-third of the investigated individuals (33.3 percent) reported having between 1 to 2 years, 11 months and 29 days of experience, 5 participants (27.8%) reported having between 10 and 19 years, 11 months and 29 days of experience, and 4 (22.2%) reported having more than 20 years of professional experience. Related to the time of management performance at basic units, the majority (52.4%) of the participants reported performance in a period of less than one year, 4 (19%) occupy the position between 3 and 4 years, 11 months and 29 days, the same proportion as the other 4 managers who reported experience between 5 to 9 years, 11 months and 29 days.

Concerning the qualification to act in the role of managers, 11 participants (52.4%) have reported having attended a specific management course and 10 (47.6%) reported having not attended any course in this area.

DISCUSSION

The development of this study allowed us to evaluate the socioeconomic

and training profile of managers working in at the Primary Health care (PHC) in Uberaba, Minas Gerais. With respect to the sociodemographic variables, it is noteworthy the predominance of the female sex and the age group between 21 and 30 years.

The fact of the management in PHC being predominantly practiced by women was similar to several studies⁷⁻¹⁰, what expressively reflects the femininity trend of the health workforce, and more specifically in PHC management. This may be the reflection about the economic changes occurred in Brazil in the last decades, which have led to greater openness of the labour market for women, especially in the tertiary sector of the economy and with gradual advancement to other instances and sectors.¹¹

With regard to the age of the respondents, the predominant age group was consenting with other investigations.⁹⁻¹⁰ Considering that this research was carried out in a medium-sized municipality, it corroborates the perceptions of Carvalho et al.⁸, who point out that younger professionals, in the beginning of their career, are more likely to undertake management positions in small and medium-sized cities. However, as noted in that study, with predominance of the young managers, management instruments were less used, with low rates

of instrument institutionalization, lack of structure and low management capacity linked to the work.⁸

Related to the form of knowledge acquisition, the majority has a bachelor's degree, with two professionals standing out for their graduate degree in Administration. On the other hand, of the twenty-one managers interviewed, three did not report having higher education degree. Data relating to schooling are similar to those of the literature in the sense that the majority of managers have higher education degree.⁸⁻¹⁰

The majority of the respondents were formed by dentists, followed by nurses. In the literature there seems to be a certain predominance of nurses taking on this role. However, studies mention a range of training courses, usually health professionals, when characterizing the managers. It indicates that the National Curriculum Guidelines (DNC - Diretrizes Curriculares Nacionais) for Nursing Graduation include the contents of administration/management among those considered essential to the development of professional skills and competence, being the only one among the congeners of graduate courses in health sciences in which these contents are present.¹²

Regarding the training to undertake the post of manager the majority (52%) referred having some course in the

management area. A study carried out with UBS managers and experts in health area of health showed that for the majority of the managers and more than 50% of the experts, the profile of the manager training should be: to have academic training in health sciences and specific training in health care management.⁵ Some studies reflect on the need for specialization and management training to the occupants of these positions, in order to ensure a systemic, comprehensive and long-term view, have effective communication, know how to negotiate, manage changes and conflicts, develop and gather teams, have political competence, be a good negotiator, know how to lead and work with plans, actions and results.^{5,11,13,14}

It is worth highlighting the length of experience in health care management. It was found that most professionals have little time of experience in this management position, and, in general, little work time both as a professional and in primary care, showing that recently graduated professionals are being assigned as PHC managers.

The ability to manage a health care team requires a balanced professional, able to provide assistance based on SUS principles, and to overcome the limitations the service offers, such as deficit of staff, materials and resources. Additionally, this professional must possess the competence

to work on interpersonal relationships, minimizing the conflicts existing within the organizations.¹⁵

It is important to say that professional qualification is one of the ways for the health management professionalization.⁹ There are other current needs, and more and more, it is necessary to have specific skills and training to the function. Preparing people, indistinctly, whether as leaders or as administrators, does not bring the expected result, since a skill is developed only when it already exists, and the programs for skill development act only as support in its strengthen.^{5,16}

According to Pinheiro¹⁷ every manager needs updated, reliable and complete information in order to make decisions about the operations and performance of the unit actions, or service under his/her responsibility. However, the need for management training includes not only the characterization of the desirable management profile and the implementation of appropriate training strategies, but also the search for new paradigms and the application of new methods, considering the incorporation of electronic and computational tools, systems, and methods of evaluation and social participation, aligned to the needs of the population assisted.¹⁸

If, on one hand, most of the managers interviewed had no clear concept of health indicator, and consequently, did not make use of them for planning and decision making, the alternatives to change PHC management practice include the conducting of workshops at the central level of administration (municipal, regional or state) discussing new forms of management. It is raised the new management profile that assumes levels of autonomy in assessment, programming and operation of the unit; the search for greater contact with reality to identify strategic issues, encourage the participation of health workers and the community in the management process, in the Health Conferences and meetings of the municipal health council and collaboration in the formation of Local Health Boards.¹⁹

In addition, there are specialized programs for management professional training, such as ProgeSUS – Qualification and Structuring Program Management of Labour and Education in SUS, implemented in 2006 by the Ministerial Decree no. 2.261. This program has the objective of proposing organizational directives, and provides mechanisms for the professionalization of work and education management in the municipal and state health Secretaries.²⁰ In this way, managers' qualification and professionalization can encourage

improvements in care practices and in the resolvability of services, strengthening the principles that underlie the actions in primary health care.

CONCLUSION

Through data found in this study, it was possible to describe the profile of the PHC managers of an interior city of the Minas Gerais state. With regard to the sociodemographic issues, the prevalence was of managers of the female sex, married, with white skin color and with age ranging between 21 and 30 years. In relation to the training and professional experience to undertake the management position, it was identified that the majority of the managers reported having complete higher education degree; however, the postgraduate courses have been scarce. In addition, we have identified managers who had only high school education, not having any training compatible with the health management position.

Time of professional experience, PHC experience, and management performance were short, reported by the majority of managers, being associated with the hiring of recently graduated managers, and a link slightly strengthened among managers, professionals and community. Concerning the training to act in the role of managers, despite most of them have attended a specific course, this

type of training does not cover all the professionals involved in the management, contributing to an ineffective qualification.

In the face of data found in this study, it is observed the need of establishing a suitable profile for management positions; since these require highly trained professionals to deal with different situations, ethically acting in a variety of levels involving policy, negotiation, and leadership. It is also necessary to consider that the bond among these professionals and their teams and the community are strengthened over time; and that the performance in the same location, associated with the continuous formation, are enablers to the improvements in quality of care.

Also noteworthy is the importance of state-level health (State Health Department) to be more the protagonist (by the strategic position in the organization of the management that governs, coordinates and evaluates health actions and services), in the greater empowerment of PHC managers. It is necessary this department play its role as technical support to assist the organization of municipalities connected to it.

Despite the relevance of this issue, it is important to point out that this study was conducted in only one medium-sized city in the interior of Minas Gerais, which may represent a limitation for the

inferences of these prospects in other levels of health care. However, this research may contribute with relevant information to the knowledge and analysis of the managers with their management practices, which are key factors of efficiency and effectiveness in the delivery of health services.

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