

Performance of the city tutor in the Health Care Planning project: intervening factors**Atuação do tutor municipal no projeto Planificação da Atenção à Saúde: fatores intervenientes****El papel del tutor municipal en el proyecto Planificación de la Atención a la Salud: factores intervinientes**

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 Aurilvia Carolinne Lima Barros¹,  Eduardo Padilha Barros²,  Wihlerlan do Vale Nascimento³
 Sandra Maria Belmonte Pereira Moreira⁴**Abstract:**

Objective: to identify and explore the factors involved in the performance of city tutors in planning health care in municipalities in a health region in the Brazilian Amazon. **Methods:** documentary, quantitative research, in which activity reports and validated monitoring spreadsheets provided by the granting institution were used. The work was carried out with participating laboratory units in 2023. Twelve factors were investigated regarding the presence or absence of tutors. The analysis was descriptive. **Results:** 21 tutors were considered, inserted in 21 laboratory units, of which 71.4% managed to achieve all the stages proposed for execution. The intervening factors with the most significant presence in the findings were: *Technical Knowledge, Openness to Change, Attendance in activities, and Management Stability*. As for the factors whose absence was most significant, the following were found: *Unstable employment relationship*, with 81%, and *Impact of political influences*, with 71.4%. **Conclusion:** most tutors were able to successfully complete the activities of the Health Care Planning project, thus generating effective health results for the population in their area of operation.

Keywords: Education, Public Health Professional; Health Management; Planning; Regional Health Planning.

Resumo:

Objetivo: identificar e explorar os fatores intervenientes na atuação do tutor municipal na planificação da atenção à saúde em municípios de uma região de saúde na Amazônia brasileira. **Método:** pesquisa documental, quantitativa, na qual foram utilizados relatórios de atividades e planilhas de monitoramento validadas, fornecidos pela instituição cedente. Trabalhou-se com unidades laboratório aderidas, realizada em 2023. Foram investigados 12 fatores quanto à presença ou ausência na atuação do tutor. A análise foi descritiva. **Resultados:** considerou-se 21 tutores, inseridos em 21 unidades laboratório, das quais 71,4% conseguiram alcançar todas as etapas propostas para execução. Os fatores intervenientes com presença mais significativa nos achados foram: *Conhecimento Técnico, Abertura à Mudança, Assiduidade das atividades e Estabilidade da Gestão*. Quanto aos fatores cuja ausência foi mais significativa, verificou-se: vínculo empregatício instável com 81% e impacto de influências políticas com 71,4%. **Conclusão:** a maior parte dos tutores conseguiu concluir as atividades do projeto de Planificação da Atenção à Saúde com êxito, gerando, assim, resultados sanitários efetivos para a população de seu território de atuação.

Palavras-chave: Educação Profissional em Saúde Pública; Gestão em Saúde; Planejamento; Regionalização da Saúde.

Resumen:

Objetivo: Identificar y explorar los factores intervinientes en el papel del tutor municipal en la planificación de la asistencia sanitaria en los municipios de una región sanitaria de la Amazonia brasileña. **Método:** Investigación documental cuantitativa a partir de informes de actividad y planillas de seguimiento validadas proporcionadas por la institución transferente. Se trabajó con unidades laboratorio adheridas, realizada en 2023. Se investigaron 12 factores relativos a la presencia o ausencia de tutoría. El análisis fue descriptivo. **Resultados:** se incluyeron 21 tutorías en 21 unidades laboratorio, de las cuales el 71,4% consiguieron alcanzar todas las etapas propuestas para su implantación. Los factores intervinientes con presencia más significativa en los resultados fueron: *Conocimientos Técnicos, Apertura al Cambio, Asistencia a las actividades y Estabilidad en la Gestión*. Los factores cuya ausencia fue más significativa fueron: relación laboral inestable (81%) y el impacto de las influencias políticas (71,4%). **Conclusión:** la mayoría de los tutores consiguieron completar con éxito las actividades del proyecto de *Planificación de la Atención a la Salud*, generando así resultados sanitarios eficaces para la población de su área de trabajo.

Palabras-clave: Educación en Salud Pública Profesional; Gestión en Salud; Planificación; Regionalización.

Corresponding Author: Aurilvia Carolinne Lima Barros – aurilvia.barros@gmail.com

1. Barros Tecnologia LTDA. Sinop/MT, Brazil

2. Municipal Health Department of Belém/PA, Brazil

3. Health Department of Buriticupu/MA. São Luís/MA, Brazil

4. State Health Department of Goiás. Anápolis/GO, Brazil

INTRODUCTION

In Brazil, the discussion around the concept of Health Care Networks (*Redes de Atenção à Saúde* - RAS) has been ongoing for several decades. RAS were formally incorporated into the Unified Health System (*Sistema Único de Saúde* - SUS) through Ordinance No. 4,279¹ of December 30, 2010, which established the guidelines for their organization, and in Decree No. 7,508² of June 28, 2011, which regulated the Organic Health Law. In this way, the aim is to advance in the face of the challenges of fragmentation of health actions and services through the implementation of RAS^{3,4}, which are made up of three fundamental elements: population and health regions, operational structure, and health care model.

The organization of RAS should be based on the definition of the health needs of a population. This approach involves a territorial perspective to pinpoint gaps in care within an expanded regional context, aiming for systemic integration and comprehensive care. This care must be implemented in this territory through an operational structure, which is embodied in the nodes of the networks and in the material and immaterial connections that communicate with each other. The third component concerns the healthcare model, that is, the logical system that organizes the functioning of RAS, articulating the components in an integrated manner and generating health results⁵.

When we consider the context of insertion and the elements that underpin RAS, we can glimpse the great challenge that presents itself. Firstly, because healthcare faces several obstacles to its implementation; from the complexity of the human being, to the historical context of the organization of healthcare services in Brazil⁴ and in the world, and confronting the investments necessary for this care network to be effective in practice.

Human beings are multidimensional, with differences due to life cycles, genetics, social factors, psychology, economy, culture, among others. Health professionals need to be familiar with all these aspects of the population they care for, as they must offer specific care for each user and promote health actions and services that enable care that is as close as possible to the concept of health that is still adopted today, going beyond the treatment of the disease and contributing to the promotion of social well-being.

However, promoting health in a comprehensive and longitudinal context⁶ is not an easy task, as the history of Brazil reveals several attempts to provide access to health for the population that failed to provide the comprehensive care proposed. Such models continue to be disseminated in many training, educational, care and management spaces.

Undermining outdated health care models from the work of professionals requires not only the formulation of laws that guide new models, but also a major mobilization throughout

the training and professional structure in health services. It is necessary to promote understanding, adherence, education and action so that, gradually, new care models are inserted into the educational and professional context, and old models are abandoned.

In addition to the characteristics of the population in its territory and the performance of professionals in health services, we have yet another challenge when it comes to implementing RAS and organizing health services^{4,7}. It is not possible to provide adequate health services, with trained and involved professionals, for a conscious and participatory population, if there is no structured network to serve them.

And this structured network can only be achieved through suitable, serious, technically competent management, with managers and professionals capable of planning, executing, monitoring, evaluating and reflecting on their steps and results of their actions, as well as promoting awareness and social participation and the continuity of government policies over the years, regardless of changes in government.

Faced with this challenge, the Brazilian National Council of State Health Secretaries (*Conselho Nacional de Secretários Estaduais de Saúde - CONASS*) proposed the Health Care Planning (*Planificação da Atenção à Saúde - PAS*) methodology for organizing, integrating and managing RAS based on the coordination of the Primary Health Care (PHC)⁷.

This methodology has been pioneered by CONASS in states throughout the country, through innovation laboratories, since 2004, with encouraging results over the past twenty years. These results led the management of CONASS⁷ to the understanding that this methodology would be fully adequate to promote the actual implementation of Health Care Networks in Brazil.

Seeking to implement this methodology on a large scale in the country, the Brazilian Ministry of Health and CONASS established, through the SUS Institutional Development Support Program (*Programa de Apoio ao Desenvolvimento Institucional do SUS - PROADI-SUS*), partnerships through projects to implement the Health Care Planning methodology in health regions in the states, throughout the country⁷.

This study aims to identify to explore the factors involved in the performance of city tutors in planning health care in municipalities in a health region in the Brazilian Amazon.

METHODS

This research is registered on the OSF.io platform, under DOI 10.17605/OSF.IO/9GW5R. This is documentary research and adopts a qualitative and quantitative approach, based on the question: *What are the factors that influence the performance of city tutors in planning health care in municipalities in a health region in Northern Brazil?*

The following factors that influenced the performance of city tutors in planning health care in municipalities in a region of the Brazilian Amazon were taken into consideration: connection with the unit; technical knowledge; understanding of methodology; openness to change; leadership profile; access to and dialogue with management; Attendance in activities; stable employment relationship; management stability; support from manager; impact of political issues; and impact of external factors.

The documentary research is based on the search for concrete information in the various documents selected to structure the research and outline its results. Unlike bibliographic research, which is based on previously analyzed materials, documentary research uses materials that have not yet received analytical treatment, thus being primary sources^{8,9}.

Brazilian studies^{8,9} indicate that this methodology can use several documentary sources, not only written documents without analytical treatment, but also legal documents, images, videos, newspaper clippings, among others. Document analysis allows the capture of the content communicated in the message presented in the document, being one of the content analysis techniques. With this, one can immerse oneself in the universe of information, in search of the reality it represents, its construction process and its meanings¹¹.

Document analysis uses technical procedures to examine and understand the content of different types of documents, and to obtain the most significant information from them, according to the established propositions⁸. Validated activity reports and monitoring spreadsheets provided by the granting institution were used, with anonymous information to ensure ethics in the research.

Following the guidelines of other publications^{8,9}, the documentary analysis begins with a preliminary assessment of each document, considering the context, reliability, among others; and this analysis involves a process of deconstruction and reconstruction of the analyzed material.

In this way, we sought to explore the information identified in the monitoring reports and spreadsheets, with the aim of identifying characteristics that could contribute to the understanding of the factors that, in some way, were positive or negative, influencing the

performance of municipal tutors in Health Care Planning, over three years of continuing education actions and practical activities.

It was considered that not all municipalities in the health region joined the project, and that, among those that joined, it was possible to define individually the number of laboratory units to participate in the activities. The reality of some laboratory units, even within the same city, could be differentiated according to some factors intervening in the tutor's work: internal or external.

Therefore, it was decided to use the laboratory unit as the unit of measurement in this study. Thus, we worked by reference unit, with the number of laboratory units involved, defining an N(21). This N corresponds to the number of tutors, since each laboratory unit had a tutor responsible for it.

After defining the reference unit to identify the frequency of the characteristics researched, we proceeded to read the material in full to identify relevant information for the formation of the research tables and charts, as instructed in the methodology^{8,9}. The focus on identifying the factors that intervened in the performance of municipal tutors in health care planning, in itself, reached 12 factors.

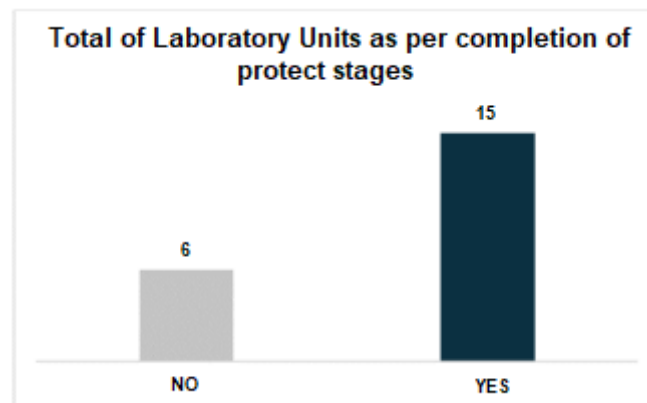
Then, we proceeded to investigate the presence or absence of these factors in the performance of each municipal tutor, either by identifying descriptive information in the activity reports, or by signaling in the monitoring spreadsheets and execution charts made available.

Each factor was analyzed according to the assessment presented in the documentary corpus regarding personal and technical characteristics of the tutors; places and conditions of work; and geographic and political profile of the municipalities where these professionals and health units studied are located.

RESULTS

The health region monitored regarding the performance of the municipal tutor had the participation of 21 laboratory units in the project activities, and, respectively, 21 tutors over the three-year period. Of these, 15 (71.4%) reached all stages of the project (Graph 1).

Graph 1. Status of Laboratory Units regarding the completion of project stages. Belém/PA - Brazil, 2023.



Twelve factors that affect the performance of municipal planning tutors in laboratory units in the region studied were analyzed. The most significant intervening factors in the findings were *Technical Knowledge*, *Openness to Change*, *Attendance in activities*, and *Management Stability*. All of these factors were present in 71.4% of city tutors. The most significant factors that were absent were *Stable Employment Relationship*, with 81%, and *Impact of Political Issues*, with 71.4% (Figure 1).

The factor of *Connection with unit* was present for 66.7% of city tutors, while it was absent for 19% of tutors, and it was partially present for 14.3% of tutors. Regarding *Technical knowledge*, 71.4% presented this characteristic, 9.5% did not present it, and 19% presented it partially. *Understanding of methodology* was presented by 66.7% of the municipal tutors, it was absent in 9.5% of these tutors, and 23.8% presented partial understanding of the methodology (Figure 1).

As for *Openness to change*, 71.4% of city tutors presented this characteristic, 9.5% did not present it, and 19% presented it partially. The *Leadership profile* appeared in 61.9% of city tutors, having not been identified or partially identified in 19% of them. *Access and dialogue with management* was present in 52.4% of tutors. 28.6% did not have access and dialogue with management and 19% had it partially (Figure 1).

Attendance in activities was present in 71.4% of tutors; 19% of tutors did attend activities and 9.5% attended them partially. The results reveal that 81% of the sample did not have a stable employment relationship; while 19% of these tutors had stability. *Management stability* was noted was present according to 71.4% of tutors. However, 23.8% did not experience such stability, and 4.8% of them experienced it partially (Figure 1).

It was observed that *Manager's support* was present in 52.4% of the units analyzed, 14.3% did not have manager's support and 33.3% had it partially. *Impact of political issues* was

absent in 71.4% of units, being evident only among 28.6% of tutors monitored. Furthermore, when considering the *Impact of external factors*, it was possible to show that this impact was present in 61.9% of cases, while 38.1% of tutors saw no impact of external factors on their performance (Figure 1).

Table 1. Factors intervening in the performance of the municipal tutor in the Planning of Health Care in Laboratory Units of municipalities in a health region in the Brazilian Amazon. Belém/PA - Brazil, 2023.

Intervening Factors	SCORES N (%)		
	YES	NO	PARCIAL
Connection with the unit	14 (66.7%)	4 (19%)	3 (14.3%)
Technical knowledge	15 (71.4%)	2 (9.5%)	4 (19%)
Understanding of methodology	14 (66.7%)	2 (9.5%)	5 (23.8%)
Openness to change	15 (71.4%)	2 (9.5%)	4 (19%)
Leadership profile	13 (61.9%)	4 (19%)	4 (19%)
Access and dialogue with management	11 (52.4%)	6 (28.6%)	4 (19%)
Attendance in activities	15 (71.4%)	4 (19%)	2 (9.5%)
Stable employment relationship	04 (19.0%)	17 (81%)	-
Management stability	15 (71.4%)	5 (23.8%)	1 (4.8%)
Manager support	11 (52.4%)	3 (14.3%)	7(33.3%)
Impact of political issues	6 (28.6%)	15 (71.4%)	-
Impact of external factors	13 (61.9%)	8 (38.1%)	-

DISCUSSION

The results of this study showed that the tutors' performance was significant, and that most of them were able to successfully complete all stages of the project in their unit. The factors had a varied impact on the implementation of conceptual alignment activities and on the practice in the laboratory unit.

It was observed that, of the 12 factors considered, most of them influenced the tutoring process due to their presence, while some influenced it due to their absence. Of these factors, 10 influenced the tutor's performance mainly due to their presence, while two influenced it due to their absence. The greatest impact on the tutors' performance in their units is related to internal factors, that is, the personal factors that influence their performance in the project activities. In addition, there is the impact of factors related to micro and macro political actions in the unit and municipality.

Studies related to professional practices for carrying out the work indicate the importance of the individual and professional skills of the workers for the successful execution of the work^{7,12}. Furthermore, the interference of micro and macro political factors in the development of this professional's performance impacted the progress of their activities in their work.

Among the most significant intervening factors identified as present in the tutor's performance, three were highlighted, related to their individual characteristics. They are: *Technical knowledge*, *Openness to change* and *Attendance in activities*, which reinforces the importance of hard and soft skills among health professionals as distinctions for their performance in health services. The importance of technical knowledge for any professional in their area of activity is undeniable. However, if this knowledge is not related to other types of knowledge that enable its application, it is difficult for this professional to achieve success in the actions they propose.

Some studies point to the importance of technical knowledge in the speed and effectiveness of the conduct adopted by health professionals in their work environment, impacting the outcome of their professional attitudes¹²⁻¹⁵.

Another factor that positively affected the performance of tutors in their activities (external factor) was *Management stability*, since, when it is uninterrupted, there is greater follow-up of government plans and maintenance not only of the teams, but also of their work planning.

Factors that have a negative impact: *Lack of stability of management* and *Impact of political issues in the municipality*. In a study carried out in a Primary Health Care service¹⁶, it was observed that factors such as lack of stability of management and the Impact of political issues can influence the results of the work of the technical team.

Carrying out the actions of the Health Care Planning project in municipalities requires the tutor to work directly in a health unit. This work implies direct contact with the team and even with the users served by this team. The choice of tutor is a prerogative of the manager, who sometimes chooses professionals from within the team itself, most often a nurse, or from another team, or even from coordinators from the municipality itself, who will develop the project actions together with the professionals from the laboratory unit.

Not only in the project, but as a premise of the Family Health Strategy, bonding is a necessary characteristic for the success of work with the community. Thus, the bonding of this professional is necessary both for the implementation of the project and for the strengthening of Primary Care through the organization of the proposed work process.

The construction of bonds, identified in more than 60% of the relationships between tutors and teams, is a significantly relevant factor in proving the importance of bonding for the team's adherence to the proposed actions. In the context of this tutor's work, which is Primary Health Care, in the Family Health Strategy teams, the importance of this factor in carrying out

the work is considered, since this team must act within the logic of the health policy in which it is inserted.

A study carried out in the Brazilian Northeastern region¹⁷ highlighted the importance of building bonds as a facilitator for the development of more feasible health practices in relation to the reality of individuals. Another study conducted by a group of dentists pointed out the importance of bonding for longitudinality and comprehensiveness of care in Primary Health Care⁶. A research finding analyzed the performance of community health agents during the pandemic, and pointed to the bond as an element that allows knowledge of the reality of the territory and the vulnerabilities of the population¹⁸.

Regarding the importance of technical knowledge for the good development of the work of professionals, in professions that have specific regulations, all point to the importance of expertise for work performance, as well as the technical and civil impacts generated by the unskilled performance. In this research, it was identified that more than 70% of professionals evaluated presented technical knowledge compatible with the topics addressed in the activities.

Several studies, in different scenarios, have pointed out the importance of technical knowledge and non-technical skills of health professionals for the good progress and outcome of health care¹³⁻¹⁵. As in the case of the investigation carried out on nursing care in a neonatal intensive care unit¹³, a study related to the technical knowledge of health professionals regarding the management of syphilis¹⁴, and on the importance of knowledge of primary care nurses regarding public policies for women's health¹⁵.

In addition to technical knowledge, understanding the methodology used, in order to enable understanding among these tutors and dissemination to the teams in which they actually worked, can meet not only the proposals of the project, but also the real needs of the team itself for the qualification of its work and the scope of health care for the population served. Thus, more than 60% of tutors working on the project had an adequate understanding of the methodology used.

The actions of organizing health services often require changes in habits and work strategies. Therefore, it is essential that professionals understand the logic behind the guidelines provided, as well as perceive the possibility of their implementation in practice. To this end, the diversification of teaching methodologies, the use of andragogy and the motivation of professionals are fundamental for this adherence and understanding of the methodology used^{12,19}.

71.4% of the tutors in the laboratory units were open to change, mainly, the change of habits and work processes. The search for continuous improvement becomes a reality in the context of these professionals' work, enabling the change from mechanized action to reflective work practice.

Research on the implementation of Health Care Planning⁷ indicated that there was a personal and professional change in workers through planning in the context of work development, which allows us to infer that the qualification of these professionals' work is related to the way in which the professional sees themselves in their work process.

Regarding the resolution of PHC, the Family Health Strategy assumes a leadership role in the Health Care Network, mainly because it is the coordinator of care and the main gateway for users to the Unified Health System. In this study, 61.9% of the tutors in the laboratory units presented a leadership profile, leading us to understand that they had skills that contribute to the organization of care in the RAS.

PHC, in its principles of the National Primary Care Policy (*Política Nacional de Atenção Básica - PNAB*)²⁰, provides for the coordination of care and organization of networks²¹. Based on this, the use of RAS in the SUS allows for the development of a new care model, in which the population is a source of guidance and promotion of health care, based on the guarantee of rights and expanding access to this system for all²².

When thinking about greater effectiveness of PHC, there is a need for qualified interaction with management. The study revealed that 52.4% of tutors had access to and dialogue with management. However, 28.6% of these tutors still did not have this access, demonstrating the fragility of dialogue not only between professionals, but also between them and management, impacting the governance and organization processes of the RAS. Therefore, if this access did not exist, it is believed that PHC in these units would not be seen as a priority and as the main gateway for users.

Aspects that influence the performance of managers and their workloads in PHC reinforce the importance of their work in implementing health policies. Combined with the lack of human and material resources, there are challenges to management practices, such as inexperience and lack of training of managers, organization and work relations, and insufficient assessment tools²³. In many cases, the difficulty in dialogue and access to management is due to insufficient training of managers, who, in the vast majority, are more influenced by political parties than by technical means.

The attendance of tutors in project activities exceeded 70%, which demonstrates the interest of these tutors in participating in the activity. However, the absence of this tutor often

signals not only their lack of interest in participating or carrying out the actions proposed by the project, but also involves a broader context of management policy, both in terms of organizing the health service in the municipalities and prioritizing activities, as well as in the impact of logistical issues.

According to the principles of the National Primary Care Policy²⁰, in agreement with the National Policy for Continuing Education in Health²⁴ and the Health Care Planning, it is recommended to analyze the situation of the territory, as well as to set aside time for teams to study, discuss and plan actions, promoting qualified professional practice in the complex context of health work, according to the dynamics of this territory, in its different aspects.

The results revealed a polarized situation in relation to the employment relationship. This situation is not exclusive to the Brazilian Amazon, but is part of the employment reality of most Brazilian workers linked to the public health service. More than 80% of the sample did not have job stability. This reality characterizes the different scenarios involving the management of health work, including the adoption of various arrangements for hiring these professionals, directly impacting the actions of implementing the Health Care Planning, which weakens the organization of work processes in these units.

Changes in work relations are evident throughout the Brazilian economic chain, popularly referred to as the “uberization of work”²⁵, with a severe increase in hiring of services from individuals through legal entities²⁶ and a major impact on the physical and emotional health of these professionals²³. The instability of employment relationships can impair work, since professionals who do not have a stable employment relationship are more susceptible to suffering the impact of issues related to job insecurity and job discontinuity.

In this study, in almost 30% of cases, the tutors worked in municipalities that changed their managers two or more times in a four-year period; in specific cases, due to legal issues. Those municipalities where political-partisan influences have less impact also show greater success, not only in the development of actions, but in the longitudinality of the quality of the health service provided.

In Brazil, not only at a municipal, but also at a state and federal levels, there is a major impact of political-partisan interference^{27,28} in various scenarios and aspects of professional activity. Every two years, party politics interferes more clearly in the development of professional actions in services as a whole, especially in health services. It is essential that managers from different government spheres are able to separate political-party issues from health policies, allowing professionals technical and managerial autonomy to act in their work environments, ensuring the effectiveness of health care.

The project methodology recommended a monthly meeting for conceptual alignment of these tutors, with a view to deepening technical knowledge and using the instruments of the stages. The support of the manager was essential, since it was characterized both by protecting the agenda and by making resources available for the acquisition of supplies, in the execution of activities in the unit, in the travel of tutors, and others. This support was present in 52.4% of the units.

The manager's understanding of the process and the support given to the tutor and the team enable the more effective development of actions, through the involvement, motivation and commitment of professionals; the availability of the resources needed to carry out the workshops and agreed actions and the participation of the Municipal Health Council²⁹.

However, in 14.3% of units, this support was absent, especially in the lack of support for the tutors to travel to participate in the monthly alignment meeting. The absence of the tutor at the alignment meeting did not prevent the workshop from being held, but it made it difficult for the tutor to work with the unit team.

The support of the management is an intervening factor in the coordination and facilitation to enable the teams to provide user-centered care, given the growing care needs³⁰.

The political-partisan impact did not interfere with the work of 71.4% of tutors. However, the discontinuity of municipal management, with the constant change of municipal health secretaries, was a preponderant factor in several municipalities participating in the project. In other words, even though it was not present in all units, the impact of this factor was highly relevant in the units where it occurred, with changes in the team, making it difficult and even preventing the progress of the project's actions in the municipalities in question, as in the case of two municipalities that withdrew from participating in the project due to these factors.

Political-partisan influence interferes in municipal management and can compromise the managerial capacity of its managers, making it essential to prioritize technical criteria of professional competencies for the appointment of a municipal health secretary³¹, as well as in the selection of professionals to work in the various sectors of the health service, and that these are combined with other essential criteria, such as employment relationship and continuing education.

The impact of external factors was verified in the reality of the work of 61.9% of tutors. However, it is possible to point out the resilience that these professionals often showed, whether by seeking alternatives to participate in activities, or by carrying out actions in the laboratory units where they worked.

Despite this, even in the face of adverse circumstances, health professionals managed, when motivated and aware of their role, to carry out actions that seek professional qualification and improvement of work processes, with a view to offering better services to the population, generating positive health results.

CONCLUSION

This study identified 12 factors that affect the performance of municipal tutors in planning health care in municipalities in a health region in the Brazilian Amazon. Most of these factors influenced the tutoring process through their presence.

The greatest impact on the performance of tutors in their units is related to internal factors, but also to factors related to micro and macro political actions in the territory of the unit and municipality.

Among the most significant factors that affect the performance of tutors, the following stood out: technical knowledge, openness to change, assiduity in activities and management stability.

The following factors influenced the performance of tutors due to their absence: a lack of stability of management and the impact of political issues. Even in a scenario of scarcity of logistical and financial resources for the development of actions, and despite the challenges faced, most tutors managed to successfully carry out the activities of the Health Care Planning project, thus generating effective health results for the population in their area of operation.

The study's limitations include the research setting, since it only covered one health region. However, it is believed that the findings of this study will be corroborated by other regions of the country. Therefore, similar research is suggested in other Brazilian territories where the project is implemented.

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