

# Competences of nurses in the Family Health Strategy: an integrative literature review

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## Abstract

The Family Health Strategy is recognized as a proposal for reorientation of the care model, carried out through the implementation of multidisciplinary teams in basic health units. The practical management of nurses is an important instrument for the implementation of health policies. The aim of this research is to identify the scientific evidence available in the literature on the competencies of nurses in the Family Health Strategy. The study presents the results of an integrative review of the literature on the process of practical management of nursing care in the Family Health Strategy. We analyzed 17 articles from the selection in the databases of the Virtual Health Library, with a time frame from 2018 to 2022. The PICo strategy was used, where P = Participants, I = Area of Interest, Co = Outcome of the study. The analysis of the literature highlights the importance of nurses inserted in the work process of the Family Health Strategy. The results show that practical management and care are inseparable for the work organization process.

**Keywords:** Nurses; Family Health Strategy; Primary Care; Health Management.

## 1. Introduction

The Family Health Strategy (ESF) is considered a proposal to reorient the care model, implemented through the implementation of multidisciplinary teams in basic health units. These teams accompany families in specific areas, perform recovery operations and rehabilitate common pathologies and injuries, focusing on promoting, preventing and maintaining the health of the population. In Brazil, the contributions of Primary Health Care (PHC) have been remarkable in the last 15 years, especially with the implementation of the ESF and with the institutionalization of the evaluation of Primary Care (PHC) in the Ministry of Health. In addition, PHC is a joint construction of users, managers, professionals and social movements (Macinko, Mendonça, 2018).

PHC is considered the main gateway to the Unified Health System (SUS), clarifying and integrating different services for individual and group care. This is one of the guidelines of the National Primary Care Policy

(PNAB). The ESF APS aims to change the care paradigm, expand and organize access to the population's health and positively impact on improving people's health, and is still under construction and expansion. In relation to the organizational practice of the team in the area, it is essential to include a management body focused on the organizational performance of the work. Thus, it presents characteristics related to training, such as leadership and organization, nurses perform practices to manage the DOMAIN of the ESF to identify and solve problems inherent to their function (Melo et al., 2018).

The nurse's managerial practice is a tool for the implementation of health policy, because it is characterized by mediation and interaction, the nursing management practice developed by nurses, determining the institutional direction of health services. Contextualizing the nursing management process in the ESF, is based on organizing health actions in designated areas, ensuring the health care of its users, in order to build a promising model of their insertion space, expand their insertion management processes, allowing the management of problems arising from the daily routine of the qualified review service, making the professional one of the participants within the ESF (Mendes et al., 2021).

In every organization, the performance of managers is necessary to solve, size resources, plan their application, develop strategies, make diagnoses of situations, ensure the performance of one or more people, among other activities that are essential for the performance in the ESF. Nurses are characterized and recognized for having an integral understanding of the human being, providing holistic care, identifying needs for health action, integrating various professional, users and community knowledge and seeking to optimize nursing interventions (Ferreira, Silva, 2020).

The nurse's work process has two extensions that complement each other: care and practical management. In the first, nurses perform interventions according to the needs of nursing care, with the purpose of comprehensive and quality care. In the second, nurses take as object the practical management, work organization and nursing agents, aiming to develop and implement adequate conditions of care for users and performance for workers (Sousa et al., 2020).

The health actions and interventions that nurses develop in the ESF according to the 2017 PNAB are: to provide health care to individuals and families registered in the teams, in all phases of human development (childhood, adolescence, adult hood and elderly) to perform nursing consultations, procedures and group activities, plan and manage supplies necessary for the proper functioning of the unit. The nurse also participates in the care management of the ESF, ranging from the monitoring of the performance of Community Health Agents, Nursing Technicians, care to users, the articulation with the community for the construction of intersectoral actions to pacts and commitments with local management (Melo et al., 2018).

However, the practical management of nurses in the ESF comprises the work process involving several resources to accomplish organizational purposes. Management, when properly executed, involves activities that include, among others, planning, evaluating, organizing, leading, controlling and making decisions inherent to the situation of the territory. Affirm that the practical management and care performed by nurses should be inseparable and complementary (Macinko, Mendonça, 2018).

Therefore, this study aims to identify the scientific evidence available in the literature on the competencies of nurses in the Family Health Strategy.

## 2 Methods

We opted for an Integrative Literature Review that allows seeking evaluations and analyses of scientific articles, as well as a current view of knowledge about the theme investigated, exposing the available evidence in a synthesized way with the proposal of the following guide question: what references are used to build the necessary competencies for nurses in the ESF?

The definition of the research question was based on the approach of studies on the double function of the work process of nurses in the ESF, performing community care activities. Moreover, it was based on the PICo strategy, which consists of: P (Target Population) = nurses and nurses, I (Area of Interest) = practical management of care, Co (Context) = ESF (Ferreira; Abrahão, 2020). The following steps were performed: identification of the theme and definition of the research question, establishment of inclusion and exclusion criteria, identification of pre-selected and selected studies, evaluation of selected studies, analysis and interpretation of results.

Table 1. Implementation of the PICo strategy.

<b>Acronym</b>	<b>Application</b>
(P) <i>Patient</i>	Nurses
(I) <i>Interest</i>	The competencies of the nurse
(Co) <i>Context</i>	The process of practical management of nursing care in the ESF.

Source: Prepared by the authors, 2023.

The bibliographic survey was carried out at the Virtual Health Library (VHL) portal in January and February 2023. The following research terms were used: Primary Health Care, Primary Care Nursing; Nursing; Family Health; Nursing Care; and Nurses and Nurses. There was a crossing of the terms with the descriptors in the database, in which they were: Nurses; Family Health Strategy; Primary Care; Primary Care Nursing, obtaining a significant sample of studies on the words presented.

The inclusion criteria of the material for the present study were: original articles, including field research, written in Portuguese language and english available in full form and published in the period 2018 to 2022. Furthermore, the studies should be in line with the right-line issue and the proposed theme. The exclusion criteria were: studies that did not answer the research question, theses, dissertations, publications that were not related to the research theme and duplicated.

The material was analyzed with the help of Bardin's thematic analysis method (2011), with the purpose of going beyond uncertainties and enriching the data collected based on preanalysis, material exploration, data organization, inference and interpretation, obtaining homogeneity and pertinence to the object of study. The process of encoding the data restricting the choice of record units, that is, is the cutout that will take place in the search. For Bardin, a unit of record means a unit to encode, and this can be a theme, a word, or a phrase.

### 3. Results and Discussion

The search in the literature resulted in the screening, selection and eligibility of 883 publications, where 652 were complete texts. After refinement, 226 articles were excluded by methodology, 256 by time frame and in another language, and 153 articles were excluded because they presented duplication or did not respond to the proposal of the present study. With the reading and selection of the studies, only 17 articles were considered in which they served as a data source for IR synthesis, being described in (figure 1) below:

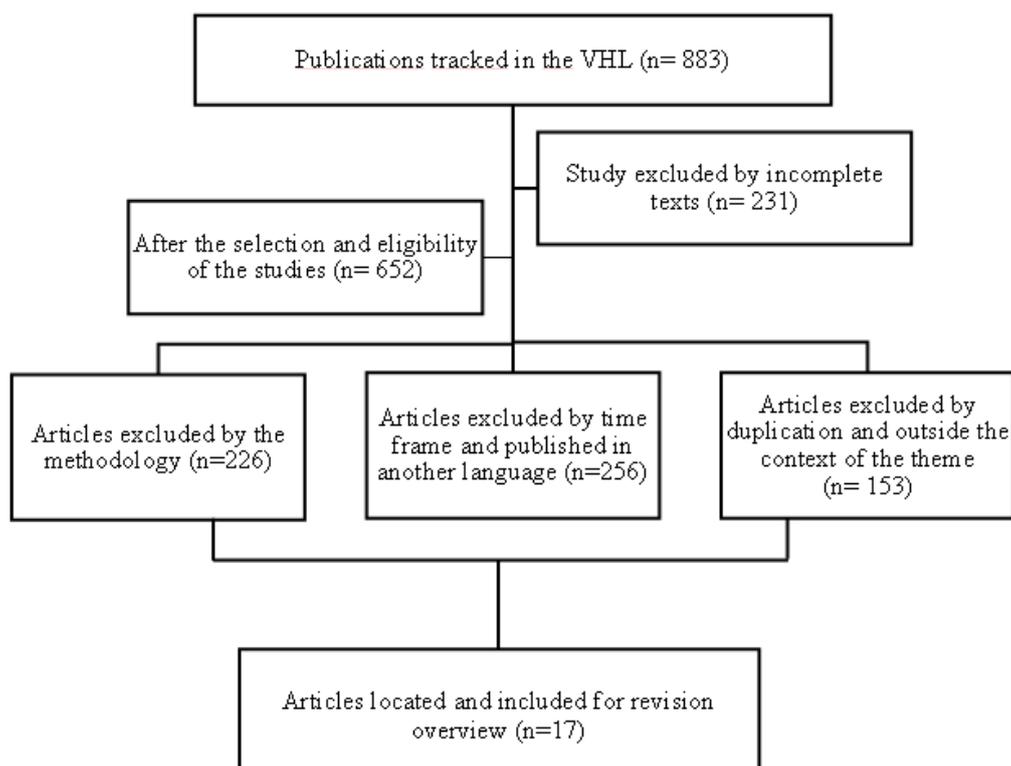


Figure 1. Organization chart to demonstrate the selection strategy of the articles, 2023.

The 17 selected articles presented a total of 274 nurses interviewed, showing their attributions configured in a set of individual and collective health actions, such as: management; team coordination; evaluation of patients; physical examinations; the holding of periodic consultations and lectures; conduct home visits; create strategies for community service; responsible for planning; execution and management of all actions related to care; promote self-care involving health promotion, prevention and protection. Subsequently, a table was formulated to describe the articles, with the following characteristics: authors, year, title, methodology, place of application of the study, research results and conclusions about the competencies that are necessary for nurses in the ESF.

Table 2. The distribution of articles according to the authors, year, title, methodology, results and conclusions

<b>Authors/ Year</b>	<b>Title</b>	<b>Methodology</b>	<b>Place of application of the study</b>	<b>Results</b>	<b>Conclusion</b>
JASMIM, J. S. et al. (2018).	Nurse competences in the Family Health Strategy.	Qualitative, descriptive and exploratory study.	ESF of the municipality of Vassouras, in the State of Rio de Janeiro, Brazil.	To provide guidance and health education in consultations and through support groups and waiting rooms, highlighting the need to promote the prevention of complications of the disease through self-care and patient training for this activity.	It considered that nurses have educational strategies, which are developed with competencies, since graduation, that manage care. The dissemination of the study will raise greater interest in the development of professional competence, contributing to quality care, being essential for the promotion of nursing teaching and research.
LEONELLO, V. M., VIEIRA, M. P. M., DUARTE, T. C. R. (2018).	Competencies for educational actions of Family Health Strategy nurses.	This is an exploratory, descriptive, qualitative research.	ESF of a municipality in greater São Paulo, Brazil.	There is a set of specific competencies for the nurse's educational action in the care work, aimed at meeting the health needs of users/community, and for action and educational in management work, focusing on the organization of the work of the health team, indicating the importance of this work in the context of the	The creation of competencies proved to be significant to reflect on the educational actions of nurses in the ESF and can be used as a strategy in the processes of continuing education.

				ESF.	
PEREIRA, J. G.; OLIVEIRA, M. A.C. (2018).	Nurses' autonomy in Primary Care: from collaborative practices to advanced practice.	Exploratory and descriptive research.	ESF with the Family Health Support Center (NASF) in the city of São Paulo, Brazil.	Results revealed that the professional autonomy of nurses is perceived through the following categories the possible autonomy, the autonomy dictated by the protocols and the subordination to medical work.	The study revealed that there was an expansion of the clinical scope of nurses, bringing it closer to medical work to some extent, and on the other hand, challenging her to overcome this approach in the sense of interprofessional collaborative practice and advanced nursing practice.
SODER, R. et al. (2018).	Challenges for the care management in primary health care: perspective of the nursing team	Descriptive-exploratory study with a qualitative approach.	ESF in the municipality of Rio Grande do Sul, Brazil.	For nursing, the formation of its identity enables greater recognition of the profession in its activities of care, education, management and research. Thus, it is necessary that nurses visualize themselves as protagonists of the strategies and actions of individual and collective activities, aiming at greater visibility to the profession and best practices to the community.	The challenges presented can be engines of change, through planned management actions developed collectively, according to the reality of each scenario.

<p>SOUZA, L. M. et al. (2018).</p>	<p>Family Health Strategy nurses' perception of patient safety</p>	<p>Exploratory-descriptive study, with qualitative approach.</p>	<p>In 6 Family Health Units enrolled in the Metropolitan Region of Porto Alegre-RS, Brazil.</p>	<p>Nurses are responsible for practicing effective communication, advising on current legislation on patient safety, adapting existing protocols to the reality of the ESF of the municipality. In addition, to promote actions that promote safety in care, create a bond between patients and professionals, professional secrecy and the preservation of patient privacy.</p>	<p>The final considerations of the theme showed that patient safety is not yet part of the care of Family Health nurses, but these perceive its importance. A safety culture needs to be implemented in the services through training of these professionals through a partnership with educational institutions.</p>
<p>VIEIRA D. S. et al. (2018).</p>	<p>Nursing practices in child care consultation in the Family health strategy.</p>	<p>Exploratory, observational and descriptive study, with quantitative approach.</p>	<p>Family Health Units of João Pessoa-PB, Brazil.</p>	<p>The results showed that the nurses performed actions of the following care: reception; anamnesis; growth assessment; assessment of the vaccination situation and supplementations; health education; physical examination; record in the child's medical records and</p>	<p>The care of nurses in the childcare consultation is below that established by the guidelines for child health care. Permanent education actions to qualify nurses for comprehensive child care can overcome these gaps.</p>

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				notebook.	
CARDOSO, H. M. et al. (2019).	Nurses' perceptions of primary health care vs. unit manager assignment.	This is a descriptive, exploratory study with qualitative and qualitative approaches.	In 21 ESFs. of the State of Mato Grosso, Brazil.	The attributions mentioned in the study were: democratic management, methods and strategies, team leadership, bureaucratic activities.	Through the research findings, it was found that nursing professionals face difficulties in working as primary care manager, processes resulting from the professional training model.
DIAS, R. M., MONIZ, M. A. (2019).	Nursing managerial competencies in the family health strategy: perceptions of nursing undergraduates.	This is descriptive research, a participant with a qualitative approach	ESF of a municipality in Rio de Janeiro, Brazil .	The nurse is responsible for leadership, communication, decision making, negotiation, teamwork, interpersonal relationship, flexibility, entrepreneurship, creativity, systemic vision, planning and organization, being educator, problem solving, management oriented to the needs and rights of the community.	The limited knowledge of nursing students about managerial competencies, indispensable to the qualified and autonomous practice of the nurse manager of the Family Health Strategy, revealed the need, in the formative context of this study, for interdisciplinary pedagogical actions aimed at a greater preparation of the student to perform such functions in the daily life in the territory.
BICA, M. C. et al. (2020).	Care management in family health strategies in nurses' perception	Descriptive qualitative study.	ESF of a municipality in the interior of Rio Grande do Sul, Brazil.	The nurses demonstrated skills and competencies inherent to management, and training directed to a care based on integrality.	Professionals at different levels of management need to add efforts to provide conditions that aim to meet the principle of integrality.
LOPES, O. C.	Competences of	This is an	Basic Health	Eight	The identification of a

A. et al. (2020).	nurses in the Family health Strategy	exploratory study with a qualitative approach.	Units with Family Health teams from a municipality in the South of Minas Gerais, Brazil.	competencies needed for nurses were identified, such as: leadership; continuing education; ethics; communication; management of people and material resources; teamwork; health care; as well as organizational and individual strategies to develop them.	profile of competencies for nurses should provoke reflection of health managers and training centers for the elaboration and implementation of essential institutional strategies that promote the improvement of these professionals, in order to guide their work.
OLIVEIRA, J. S. B. et al. (2020).	Nurses' perceptions of care management in the context of the Family Health Strategy	Exploratory research with qualitative methodology.	ESF in a municipality of Pernambuco, Brazil.	Nurses are responsible, through care, for the comfort, reception and well-being of patients, providing care and coordinating other sectors to provide care and promote users' autonomy. This includes sensitivity to be able to observe the real needs that that population demands.	The social representations of nurses working in primary care are directly related to the problems and needs that are experienced in the routine of the daily service that directly impact the management of care.
SILVA FILHO, J. A et al. (2020).	Mental health care practices developed by nurses in the Family Health Strategy.	Exploratory research, with a qualitative approach.	ESF of a municipality in the South-Central region of the State of Ceará, Brazil.	The role of nurses is directly linked to the performance of actions to optimize care and	Nurses offer superficial actions, without considering the real needs of users. It is pointed out, even if rarely, the reception,

				providing patients' access to the service.	listening, the concern with the return of users to the units and the referral of patients to specialized services.
SOUSA, N. C. B. et al. (2020).	Intervening factors in the care of elderly domiciled: analyses of primary health care nurses	Qualitative study.	ESF from the municipality of Boa Vista-RR, Brazil.	Creation of bonds with the community, home visits. In addition, nursing plays a fundamental role in promoting assistance to families, making it possible to prepare them according to the demands necessary for home care. Through guidance, support and monitoring contributes to the development of knowledge and skills, able to improve the quality of care provided to the community.	The intervening factors involved in the care of nurses were bonding, mediated by relationships of trust, approximation, exchanges of experiences, performance, collaboration, attention, support, and understanding, reinforcing the community's health guidelines.
ALCANTARA, A. B, DAMACENO, M. J. C. F. (2021).	The family health strategy in the municipality from the interior of São Paulo state and the nurse's attributions.	Cross-sectional study, quantitative approach.	Family Health Strategy Units of the municipality of Assis-SP, Brazil.	The attributions developed were frequent curative care practices, participation in Permanent Education and management of the Nursing Team and Community Health Agents.	It is suggested the implementation of Coordinating Nurse in the ESFs to give the nurse greater performance in care and prevention/ promotion actions, and meetings of Permanent Education of interdisciplinary character. As well as the realization of new

					research in the same scenario from the Primary Health Care Ordinance of 2017, contributing to the operationalization of this Policy.
ASSUNÇÃO, M. N. et al. (2021).	Nurses' perception of their managerial role and daily challenges in Primary Health Care.	Descriptive study with qualitative approach.	ESF of a municipality of Minas Gerais, Brazil.	The nurse is responsible for the management of the nursing team in primary care.	It is concluded that nurses are in the notion of the skills necessary for management, however, they point as a challenge the difficulty of implementing them in their daily work. Moreover, there is an unpreparedness to perform the managerial function in PHC attributed to the lack of permanent education.
MENDES, M. et al. (2021).	Nursing practices in the family health strategy in Brazil: interfaces with illness.	Study with qualitative approach.	The research was carried out in 20 ESFs, in 7 municipalities in Brazil: Araranguá and Florianópolis; Brasília; Rio de Janeiro; Manaus; New Olinda; Christmas.	Nurses perform home visits, prevailing the practices of the care dimension, followed by the administrative-managerial and educational dimensions.	The centrality of nursing practices in the dimension of care and administrative-management characterized professional work in Primary Care. The findings indicate that the improvement of working conditions can minimize the wear and tear of these professionals in this scenario.
PERUZZO, H. E. et al. (2022).	Educational intervention on managerial skills with nurses from Family Health Strategy	Qualitative research	ESF of a municipality in the Southern region of Brazil.	Nurses develop managerial competencies in the ESF, supported by two subcategories: Potentialities of	The nurses perceived the educational intervention as an important permanent education strategy to improve their managerial skills,

				intervention for the improvement of managerial competencies; Benefits of intervention on managerial competencies in nurses' work.	positively evaluated the chosen methodology and the contents worked, considering its applicability in the context of professional practice.
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Source: Prepared by the authors, 2023.

### **3.1 Competences of nurses in the Family health Strategy**

This study is based on scientific literature on the competencies of nurses in Primary Care. Enabling the construction of bibliographic discussions, which allow us to expand the health actions and interventions that this professional develops in the ESF. Highlighting management and the leadership process of the nursing team, motivated by the articulation of health services, in which they remain centered on normative, bureaucratic and technological behaviors. Thus, the practice of nurses makes it possible to contribute to the formatting and transformation of the entire health system. Acting their activities with the ethical principles inherent to the category (Soder et al., 2018), present in the synopsis (table 1).

Since the practices of nurses in PHC services are based on care protocols, regulated by law 7,498/86 of the nursing professional practice, together with decree 94,406/87, stating that it is privately up to the nurse to consult and prescribe nursing care. As a member of the health team, it is also up to him to prescribe drugs established in public health programs approved by the Ministry of Health (Pereira, Oliveira, 2018).

In addition, the nurse is in charge of conducting home visits, in order to create bonds with the community. In addition, nursing plays a fundamental role in promoting assistance to families, making it possible to prepare them according to the demands necessary for home care. Through guidance, support and monitoring contributes to the development of knowledge and skills, able to improve the quality of care provided to the community. The intervening factors involved in the care of nurses were bonding, mediated by relationships of trust, approximation, exchanges of experiences, performance, collaboration, attention, support, and understanding, reinforcing the community's health guidelines (Sousa et al., 2020; Mendes et al., 2021).

Based on this assumption, the study by Souza et al. (2018) highlights the nurse as responsible for care practice and effective communication, promoting patient safety actions and the creation of bonds during nursing care, preserving professional secrecy and client privacy during the consultation, considering situations related to professional ethics in the ESF, however, it signals the high turnover of professionals, which ends up compromising the creation of a bond between the team.

However, Oliveira et al. (2020) highlight that the nurses' attributions go far beyond nursing consultations, because this professional is directly linked to the educational process, emphasizing it as a reference for the integration, planning, articulation of education, health and well-being, through qualified guidance. Since, their competencies contribute to quality care, offering the promotion and prevention of the health of the active

community. Therefore, the nurse's action requires mobilization of constant activities, so that their practices obtain the consolidation, expansion and transformations of the ESF (Jasmine et al., 2018).

Nurses' competencies in a two-dimensional ESF: care dimension, in which the objective is to develop pedagogical strategies for group approaches, integrate health care in all life cycles, develop pedagogical strategies in groups, practice intersectionality and evaluate educational actions with users/groups/families and collectivity. The managerial dimension, in order to promote a team environment that shares ideas and doubts, plan educational actions with health professionals, develop shared leadership skills within the health team and perform procedural evaluations through their autonomy (Leonello, Vieira, Duarte, 2018).

These competencies are reinforced in a qualitative research, in which they revealed that the autonomy of the nurse of the ESF is perceived by care and managerial categories, in which the actions of the following care are linked: welcoming; anamnesis; growth assessment; assessment of the vaccination situation and supplementations; continuing education; physical examination; record in the patient's medical records and notebook; democratic management; methods and strategies; team leadership; bureaucratic activities; communication; decision-making; negotiation; interpersonal relationships; flexibility; entrepreneurship; creativity; systemic vision; and organization of teamwork (Vieira et al., 2018; Cardoso et al., 2019; Dias, Moniz, 2019). That is, the categories of care, followed by the administrative-managerial and educational dimensions, s centrality of nursing practices in the dimension of care and administrative-managerial characterized professional work in Primary Care. The findings indicate that the improvement of working conditions can minimize the wear and tear of these professionals in this scenario (Mendes et al., 2021).

It was also observed that in the study by Bica et al. (2020) nurses demonstrated skills in training directed to care based on integrality. Assuming the preponderant role with regard to the organization of the material necessary to develop its activities, through technical specifications, quality analysis, participation in the process of controlling activities and strengthening dialogue with the health team. According to Lopes et al. (2020) communication is a competence that is essential for nurses to develop teamwork, allowing to relate to the diversity of subjects acting clearly and objectively. Communication is a very important competence for nurses to work within the ESF, through it we standardize a constructive language to develop group activities. In addition, communicative plays optimization actions in care, providing access for patients to the service (Silva Filho et al., 2020).

The study by Alcantara and Damaceno (2021) highlighted that nurses' attributions are developed through curative care practices, participation in Continuing Education and the Management of the Nursing Team and Community Health Agents. In addition, the cytopathological examination was highlighted as an essential prevention activity, home visits, consultations with pregnant women and childcare. In order to highlight the nursing process, together with the implementation of coordination of the ESFs, to give the nurse greater performance in care and prevention/promotion actions, and contributing to the optimization and empowerment of nursing. Asunción et al. (2021) reinforces that nurses are responsible for the management of the nursing team and community health agents in PHC. However, the authors found the unpreparedness of many professionals to perform the managerial function in PHC attributed to the lack of permanent education.

Therefore, it is noted the need to adoption of educational strategies in this area, because the performance of

these professionals is of extreme relevance for basic care. Since nurses develop managerial competencies in the ESF, in which they are supported in two subcategories: intervention potentialities for the improvement of managerial competencies; benefits of the intervention on managerial competencies in the work of nurses. Thus, it is perceived that the educational intervention offered by nurses is an important strategy for the improvement of their managerial skills, considering its applicability in the context of professional practice (Peruzzo et al. 2022).

## **5. Conclusion**

It was identified that the scientific evidence presented in the present study recognizes the importance of practical management of care in the ESF performed by nursing professionals. As organizers of the work process in the units and in the territory. These professionals have technical and scientific knowledge to organize and plan the coordination of care, considering users as central elements of this system. Findings, the studies mentioned weaknesses regarding the practical management of care, such as lack of materials, equipment and insums, high turnover of professionals, non-resolution on the part of management, in complex cases, especially hospitalization and continuing education in health was little addressed in the studies, but it is an important tool in the scope of the ESF.

The materials used in this study relate the practical management of nursing care as professional competence and as organizer of the work process in the territory of the ESF. It is proposed, from this study where the nurse is configured as an actor, to reflect on the work process composed of a double function of the nurse, for practical management and for care. In the ESF, nurses are the agent who is in constant singular development when interacting with the population.

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