


MANAGER'S COMPETENCIES OF A PUBLIC HOSPITAL IN THE FACE OF THE COVID-19 PANDEMIC**COMPETÊNCIAS DE GESTORES DE UM HOSPITAL PÚBLICO NO ENFRENTAMENTO DA PANDEMIA DE COVID-19****COMPETENCIAS DE LOS DIRECTORES DE HOSPITALES PÚBLICOS ANTE LA PANDEMIA DEL COVID-19** <https://doi.org/10.56238/sevened2025.014-00>**Rosana Pereira Madeira Grasso¹, Magaly Cecilia Franchini Reichert², Maria Cristina Mazzaia³, Karina Franco Zihlmann⁴****ABSTRACT**

In the face of the Covid-19 pandemic, the role of hospital managers has stood out in the search for ensuring adequate care in a context that is challenging in several aspects, especially within the scope of the Unified Health System. The objective of this article is to present the results of a survey that sought to understand the perceptions of hospital managers regarding the objective and subjective demands in facing the pandemic, highlighting the specificities of their contributions. A qualitative survey was conducted in a public maternity hospital with technical-administrative hospital managers through in-depth individual interviews about mobilization in the face of this pandemic. The participants reported that the experience was extremely difficult, demanding mobilization of personal and professional skills related to the capacity for adaptation and resilience, highlighting different needs at different times of the pandemic. The trajectories of learning and overcoming lead us to the need to recognize and value their protagonism and contributions in the face of an unprecedented scenario that mobilized everyone. To this end, a technical educational product was created in the form of a short video that is available openly, online and free of charge.

Keywords: Covid-19. Hospital Management. Unified Health System. Competencies.

RESUMO

Diante da pandemia de Covid-19 o papel de gestores hospitalares se destacou na busca da garantia de atenção adequada em um contexto desafiador em vários aspectos, especialmente no âmbito do Sistema Único de Saúde. O objetivo do presente artigo é apresentar os resultados de uma pesquisa que procurou conhecer percepções de gestores hospitalares quanto às demandas objetivas e subjetivas diante do enfrentamento da pandemia, destacando as especificidades de suas contribuições. Realizou-se uma pesquisa qualitativa em uma maternidade pública com gestores hospitalares técnico-administrativos

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por meio de entrevistas individuais em profundidade sobre a mobilização diante desta pandemia. Os participantes relataram que a experiência foi extremamente difícil, demandando mobilização de competências pessoais e profissionais relacionadas à capacidade de adaptação e resiliência, destacando-se diferentes necessidades em diferentes momentos da pandemia. As trajetórias de aprendizado e superação nos levam à necessidade de reconhecer e valorizar seu protagonismo e contribuições diante de um cenário inédito, que mobilizou a todos e, para isso, foi criado um produto técnico educacional na forma de um vídeo de curta duração disponível de modo aberto, online e gratuito.

Palavras-chave: Covid-19. Gestão Hospitalar. Sistema Único de Saúde. Competências.

RESUMEN

Ante la pandemia de COVID-19, se ha destacado el papel de los gestores hospitalarios para garantizar una atención adecuada en un contexto complejo en muchos aspectos, especialmente en el Sistema Único de Salud (SUS). El objetivo de este artículo es presentar los resultados de una encuesta que buscó comprender las percepciones de los gestores hospitalarios respecto a las exigencias objetivas y subjetivas de afrontar la pandemia, destacando las especificidades de sus contribuciones. Se realizó una investigación cualitativa en una maternidad pública con gestores técnico-administrativos mediante entrevistas individuales en profundidad sobre su movilización ante esta pandemia. Los participantes relataron que la experiencia fue extremadamente difícil, exigiendo el desarrollo de habilidades personales y profesionales relacionadas con la adaptabilidad y la resiliencia, lo que evidencia diferentes necesidades en distintos momentos de la pandemia. Sus experiencias de aprendizaje y superación nos llevan a la necesidad de reconocer y valorar su protagonismo y sus contribuciones ante un escenario sin precedentes que movilizó a todos. Para ello, se creó un producto educativo técnico en formato de video corto, disponible de forma abierta, en línea y gratuita.

Palabras clave: Covid-19. Gestión Hospitalaria. Sistema Único de Salud. Competencia.



1 INTRODUCTION

At the end of 2019, a new type of coronavirus was identified in the city of Wuhan, China. This virus was called *SARS-CoV-2*, which causes a severe acute respiratory syndrome that was later called Covid-19. This new virus caused an outbreak of this syndrome that spread throughout the world in a pandemic phenomenon (Fonseca, 2021).

Globalized societies and intense population mobility in large urban agglomerations contributed to potentiating the contagion of Covid-19, causing the infection to advance rapidly (Hermann, 2020). Such dissemination was most strongly observed in the year 2020 - although also in its subsequent years - this being a year marked in world history as the year of the Covid-19 pandemic.

In practice, it was observed that this new virus was highly transmissible and there was no immunity in the affected populations, and the most severely affected groups were the elderly and patients with chronic diseases, requiring highly complex hospital care, such as admissions to Intensive Care Units (ICU). Given this scenario, the health systems of all countries suffered many pressures due to the great demand, since they were not prepared to provide care for so many severe cases of high complexity (Fonseca, 2021; Hermann, 2020).

At the first moment of the pandemic, no proven effective, preventive, or curative treatment was known, and patient care was carried out empirically and with different therapeutic strategies, which generated intense scientific discussion and even ideological and political clashes (Fonseca, 2021).

In Brazil, the first cases registered by the Ministry of Health occurred at the end of February 2020 and, after that, there was an exponential demand for care of severe cases that overwhelmed the country's public health system. The most diverse health care needs were expressed differently in different regions of a country with continental dimensions and socioeconomic diversity, as is the case of Brazil (Araújo et al., 2020).

In addition, Brazil, as well as the rest of the world, was faced with the need to take positions and strategies in the area of Public Health, such as, for example, social isolation and the reduction of the circulation of people, even in urban centers. However, in health services, especially hospitals, the scenario was of great demand and, in many places, true chaotic contexts were recorded, with people dying due to lack of emergency care

and ventilatory support, which was one of the most relevant demands for severe respiratory cases (Diehl Barbosa, 2020).

The scenario showed, on the one hand, empty cities - with the population restricted to their homes, strongly concerned about health risks, in addition to concern about the financial impacts of this restriction of social circulation - with the contrasting situation of public and private hospitals, with intense demand for care for patients with serious conditions, few available beds and a contingent of health professionals devoid of protective supplies and safe guidelines for to take care of the population and their own health. The so-called "health emergency" was expressed through constant demands on the health system, especially hospitals, without the proper immediate counterpart of financial and human resources to deal with such demands, never before faced by the actors involved (Grasso, 2023).

Thus, the global crisis caused by the Covid-19 pandemic imposed on the Brazilian Unified Health System (SUS) another immense challenge, forcing the authorities and the whole society to reflect on its role and its limits - in the face of various contexts of public underfunding - of this health system that was strongly impacted in the face of the pressing demands for care for a heavily ill population, without resources and, often, desperate.

This scenario of many insecurities, destabilizing the entire social organization and evidencing human fragility in the face of the possibility of death, made mandatory the need to institute "new ways of organizing life and relating to others, in addition to the adoption of extraordinary measures, many of them only known in states of war. Such changes lead to restlessness, disturbance, and existential insecurity" (Hermann, 2020, p. 3). The pandemic has brought lessons to life, highlighting that:

(...) recognizing vulnerability and overcoming the abyss of omnipotence are imposed as a condition of empathy and solidarity to sympathize with the suffering of the other, which in the pandemic takes on great proportions, both due to illness and death.... we learn the lesson that there is no progress in overcoming the epidemic without solidarity and cohesion of efforts (Hermann, 2020, p. 5)

In the context of the emergence and confrontation of the Covid-19 pandemic, especially with regard to the role of managing a hospital institution, the principle of Universality of the SUS was evidenced, as it is the one that sustains and guarantees

adequate care to all who seek care in cases of greater complexity. Araújo et al. (2020) comment that the confrontation with Covid-19 led to many reflections on issues such as the global economic, social, and health systems, the defense of the sovereignty of States in a completely connected world, the globally instituted mode of production associated with the corruptive structure of some states, and, most notably, the understanding of health as a human right. The pandemic challenged nations, leaders, and society as a whole, calling for joint efforts so that it was possible to respond in an agile and resolute way, with universal public policies, in order to save human lives.

Thus, the pandemic led to a high demand for hospital care, imposing the need to develop management strategies to cope with it, as well as to reorganize all work processes, especially those related to care. Santos et al. (2020) discuss the challenge imposed by the pandemic for effective management strategies that could provide structures capable of offering care conditions in hospital settings at that time.

In view of this type of considerations, there is a need to reflect on the ethical role involved in management processes, at the time, as a responsibility to act in the shortest possible time, in the search for innovative and problem-solving strategies and arrangements. Managers were responsible for decision-making considering "political-economic-health" issues that guaranteed minimum conditions for the proper functioning of all levels of care in the SUS (Araújo et al., 2020; Santos, 2020).

People management is a field that is undergoing major transformations around the world, mainly due to the inadequacy of traditional management models. Positive experiences allow us to observe the existence of new premises and concepts for understanding the relationship between organization and people: people management articulated by competencies (Dutra, 2007; Moreira; Rodrigues, 2023).

In the globalization process, and with the numerous socioeconomic and cultural changes, organizations need more autonomous people with greater initiative, with a profile very different from the traditional obedience and submission expected of the so-called "good employees". Thus, the manager has to make decisions in an increasingly decentralized and sensitive way to the local scope, counting on the commitment of people to the organizational objectives and strategies, which already places the relationship of professionals on a different level, for which the ability to generate and sustain, even in

challenging conditions, is valued. responding to demands imposed by the environment in which they are inserted (Dutra, 2007).

In the traditional conception of competencies, a collection of knowledge and skills supposedly available by a person to perform a certain task is expected. However, this concept has been expanded and complexified and, currently, what has been most considered within the scope of the concept of competencies is the ability to add value and effectiveness in a given context, regardless of the person's position (Dutra, 2007; Moreira; Rodrigues, 2023).

Thus, this conception of competencies (Dutra, 2007) can be considered relevant for understanding the context of facing the Covid-19 pandemic, because, evidently, there was no technical and practical knowledge to deal with the specificities of this demand, but it was necessary for all those involved to be able to position themselves in an active, flexible and available way to face an absolutely unusual context, in which each one brought a framework of experiences, but was exhorted to go beyond what they "knew", which brings us to the contemporary concept of competence, in which the person uses his skills with the necessary creativity to deal with unusual situations. Because of this, this article highlighted the competencies that were updated or developed in the context of facing the Covid-19 pandemic, since managers were strongly demanded in actions that depended on strategies of cooperation and flexibility among all those involved, typical of this contemporary conception of competence.

Therefore, this article aims to present the results of a research carried out by Grasso (2023) that sought to know the perceptions of hospital managers regarding the objective and subjective demands in the face of the Covid-19 pandemic, highlighting the specificities of their contributions.

2 METHOD

A descriptive, cross-sectional and qualitative research was carried out through individual in-depth interviews conducted online, with seven hospital managers of a public maternity hospital located in the city of Santo André, State of São Paulo, Brazil.

Professionals occupying positions of direction, management, coordination and supervision, who had an institutional link in the hospital between 2020 and 2022, when

the context of the Covid-19 pandemic and the demands for hospital care became evident in Brazil. Participants without formal ties to the institution and who had not been involved in the management task for at least one year were not included. It was understood that this period would be the minimum necessary for the professional to have sufficient experience in the context of interest in this study.

The research took place at the Women's Hospital (HM) which is a public hospital located in the city of São André that had a multiprofessional team composed of doctors, nurses, nursing technicians, physiotherapists, nutritionists, psychologists, speech therapists, among others, the institution has 117 beds, including maternity, Neonatal Intensive Care Unit (NICU), Conventional Intermediate Care Unit (UCINCo), Kangaroo Intermediate Care Unit (UCINCa), Adult Intensive Care Unit, Obstetric Pathology and Surgical Clinic, in addition to a Normal Birth Center (CPN), Surgical Center with beds for Post-anesthetic Recovery (RPA), Outpatient Clinic and 24-hour Emergency Room in the areas of Gynecology, Obstetrics and sexual violence.

The HM is the main reference in the municipal SUS network for cases of High-Risk Pregnancy (GAR), also providing care for obstetric and gynecological urgencies and emergencies, being the reference for cases of sexual violence in the municipality's health network.

At the beginning of 2020, in view of the demands of the Covid-19 pandemic in Brazil, the HM underwent organizational changes with a new management team that took on the challenge of maintaining the full operation of current services and, in addition, adapting the service to the new need imposed by the emergence of Covid-19. Such a context required a process of adaptation and construction of management strategies to propose urgent coping actions that could support the work of the operational teams and (re)organize the demands and risk situations.

Data collection took place between June and November 2022. The interviews took place remotely and were conducted by the performing researcher based on a thematic script of questions that addressed the initial mobilization in the face of the Covid-19 pandemic outbreak, practical actions to cope with it and their perceptions regarding the aspects experienced in this context.

All participants signed the Free and Informed Consent Form, which faithfully complies with Resolution 466/12 and 510/2016 of the National Health Council. The research project was approved by the institution where data collection was carried out and by the Research Ethics Committee of UNIFESP under CAAE number 57015422.6.0000.5505 and the final approval opinion number 5.382.513.

The interviewees' discourses were transcribed in full by the performing researcher and were categorized by the thematic Content Analysis method (Bardin, 2011). In this analysis, a floating reading of the participants' reports was initially carried out, highlighting the most frequent thematic nuclei and the singular themes. The themes were organized into categories and subgroups, following a methodological path that started from the more specific aspects of the thematic nuclei of the discourse to the more general and abstract aspects, thus expanding the complexity of the categories.

In this article, we present the non-a priori, thematic categories related to the competencies and skills that emerged in the thematic content analysis carried out, considering the competencies listed by the World Economic Forum (World Economic Forum, 2020) as being relevant to contemporaneity. Each of the competencies was exemplified by excerpts from the participants' speeches.

For each participant in the research, a pseudonym was chosen based on the names of birds of the Brazilian fauna, in order to preserve the confidentiality of their identities. The decision to assign a code name to each participant named after a type of bird is due to the researchers' desire that this refers to the challenging moment of the Covid-19 pandemic that required each participant to reach new horizons to overcome themselves.

3 RESULTS AND DISCUSSION

Seven professionals from the management area (direction, management, coordination and supervisor) participated in the research. The mean age of the participants was 44 years (minimum of 37 years and maximum of 51 years). Most participants were female (n=5; 71%).

Of the seven interviewees, five had higher education in the area of Health and two had degrees in the areas of Law and Accounting. All had postgraduate degrees, one with

a doctorate degree, two masters and four specialists. As for the time occupying a management position in the hospital, considering the period that covers until the end of 2022, the time ranged from 14 months to 60 months working as hospital management.

In the survey, it was possible to observe through the participants' speeches that the Covid-19 pandemic effectively brought a series of challenges, since they were forced to deal with the significant increase in demand and, at the same time, ensure the safety of patients and employees. Another crucial aspect was related to the scarcity of resources and inputs, demanding from managers an attentive and continuous management, with quick and accurate decision-making in an environment in constant change (Soares et al., 2020).

Thus, hospital managers had to reorganize and restructure themselves to meet the serious demands that were presented, and for which no one was, in fact, prepared to face. The participants were unanimous in recognizing that the role of the manager was of fundamental importance for the conduct of the actions of the health teams that, in the most crucial moments, depended on their leadership, safety and balance (Massuda et al., 2022).

The participants' previous experience in facing the Covid-19 pandemic also revealed that they had to mobilize, and even develop personal and professional skills and competencies to adapt to the poignant needs that presented themselves dramatically in everyday life (Felipe et al., 2021).

The participants did not have the exact dimension of the skills that were developed, since the results obtained in the research revealed that the participants still felt very impacted by the experience and that they could only verify that they tried to act in the best possible way in the face of the demands that were presented, always in an emergency manner. Thus, it was clear that managers were forced to act quickly and effectively in the condition of the health emergency, but had not yet been able to elaborate or even understand the dimension of the lived experience and what had been required of each one of them.

Grasso (2023) identified in the reports of the participants of his research some skills that were required for the execution of care actions in the pandemic context and searched the literature for elements that could dialogue with his findings and highlight the

merits of hospital managers who experienced such challenges. To this end, it found a document entitled "The Future of Jobs report 2020" published by the World Economic Forum that presents an overview of the global labor situation in the coming decades, in the face of the experience of the Covid-19 pandemic. In this document, business leaders on the front line of decision-making from several developed and emerging countries brought their perspectives for the future and concluded that, in the face of the Covid-19 pandemic, world leaders must be prepared to face future crises and, in addition, the document brought, among other discussions, a survey of competencies that were considered necessary to face crises within the scope of the work, considering the challenges foreseen for the future after Covid-19 (World Economic Forum, 2020).

3.1 COMPETENCIES AND SKILLS DEVELOPED BY THE HOSPITAL MANAGERS PARTICIPATING IN THE RESEARCH

In view of the reports of the interviewees, it was possible to draw parallels between the competencies⁵ identified as key in the report *The Future of Jobs Report 2020* published by the World Economic Forum (2020). Thus, the conceptualizations of the competencies adopted in this report are presented below, followed by brief comments on what was observed in the discourses of the hospital managers participating in the research regarding these highlighted aspects.

- Ability to identify and solve complex problems.

Competency Description: Identify complex problems, use analytical and critical thinking to evaluate information, and the use of logic and rationality to deal with issues and problems. Obtain and articulate informed information to develop and evaluate options and solutions.

Application in the research situation: In the case of the managers participating in the research, armed with little information on how to deal with the infection at the beginning of the pandemic, it was necessary to seek information about similar previous experiences, seeking plausible approximations and creative solutions to deal with the problems. It was

⁵ The original terms of the document in English have been translated by us and, in addition, we have tried to synthesize the information. Only some of the competencies presented in the report were highlighted, so we suggest that readers look for the original text for further study.

also necessary to evaluate the demands and implement solutions urgently and effectively. Calopsita's speech illustrates this aspect:

The big challenge I think was studying, because we had to study a lot! Every day was something new, new news, everything new and everything still very recent (...) with few indications, but it was what we had, so I had to "devour" literature (Cockatiel).

- Development of strategic planning.

Description of the competency: the activities carried out in the field of work management require careful strategic planning that must take into account not only the local socioeconomic context, but also the pertinent articulations with other contexts. Thus, planning is presented as a plan that signals guidelines, goals and challenges, so that participants can have before them a perspective to build their trajectory of actions.

Application to the research situation: The Brazilian Ministry of Health proposed a Contingency Plan (CP) to confront Covid-19 as a fundamental instrument to guide the response to the Public Health emergency, suggesting that it should be carried out by managers at any level of care, including hospitals, basic health units, and emergency care units (Araujo et al., 2020; Brazil, 2022). In the hospital where the research was carried out, a PC was built based on the Ministry of Health plan, as a guiding axis for care protocols. However, over time, the management team had to readjust the PC to each new orientation of the health surveillance agencies, as more knowledge about the specificities of this infection was developed, as we highlight in Sabiá's statement:

(..) At the right time, we suspended elective exams, we suspended elective surgeries, we directed resources to the care of the population affected by the pandemic. So I think that the strategies adopted, both the creation of new flows, the screening of the construction of the Contingency Plan, the forwarding of exams, everything that was built was done in an assertive way (Sabiá).

- Management of financial and material resources.

Competency Description: Financial resource management, i.e., determining how money will be spent to perform the work and accounting for those expenses. As for the

management of material resources, obtain and ensure the proper use of equipment, facilities and materials necessary to carry out the task/work.

Application in the research situation: there was an unbridled increase in the use of inputs, especially those related to personal protective equipment (PPE), such as masks, aprons and gloves, combined with an unexpected and abusive increase in the costs of replacing them. There was a need to equalize the needs with the available stocks, as well as the realization of exhaustive negotiations with suppliers and distribution companies, aiming to guarantee safe service. Such situations were also observed by Soares et al. (2020) and can also be observed in Calopsita's statement:

(...) we even had to make a provision of PPE, so it's not that we rationed, there was no shortage, but we had to use it very rationally so as not to run out. So I had to think a lot about how to distribute this (Cockatiel).

- People management.

Description of the competency: Human resources management, motivating, developing and directing people while they work, identifying the most appropriate positions for each profile in order to ensure the accomplishment of the work.

Application in the research situation: managers needed to motivate, develop and direct the team during work, as well as develop the competence of emotional intelligence, which is the demonstration of sensitivity to the needs and understanding of the feelings of the other, that is, a feeling of solidarity, cooperation and mutual support in the team, as also observed by Massuda et al. (2020). Colibri also contributed in his speech with these reflections:

(...) I always told the team that they have to believe in the project and that the changes that were made in the course of this whole journey were for the improvement of the project as a whole. The relationship was very good, it was very positive because it often started from their observation, from the experience they had, and my look was the look of the whole, taking each area and making the most of it that could be in favor of the whole and not in isolation (Colibri).

- Ability to exercise positive leadership and social influence.

Competency description: Work requires a willingness to lead, take charge, and offer

opinions and guidance, leading to a social influence that encourages interaction among team members in a productive way.

Application in the research situation: managers had to take charge of the team, guiding and helping to overcome difficulties, and were also able to anticipate needs and promote actions to ensure the continuity of the work, which was also identified by Santos (2020). As for social influence, it was evidenced that the positive and productive attitude of the managers, guiding and offering effective support to the team proved to be essential and, in addition, in the participants' reports it was clear that leadership was sought by example, in which they themselves assumed necessary activities to contribute to coping with the crisis situation, in a cooperative posture that sought to stimulate an environment of empathetic and solidary social exchanges, something also highlighted by Beija-flor:

I think what made the difference was how much the manager was emotionally prepared or how much the manager was able to prepare himself emotionally to build this presence with the employees. Perhaps, at first, we didn't think this was necessary. So you go there and attack in your best way: 'boss, I'm here, we're doing it!' But suddenly everyone is "dispossessed"... Then you realize that you no longer need to be that strong person all the time because that's not what people need... (Hummingbird).

- Ability to communicate with the team and others involved in the work processes.

Description of the competency: the ability to express needs in a clear, objective and assertive way is a fundamental competence for a manager. To do so, it is necessary to act respectfully, accepting suggestions and encouraging collaborative work in all contexts. Application in the research situation: in addition to seeking information to act on the problems, it was necessary for the managers to establish teamwork based on open and effective communication. The information had to be transmitted in a clear and concise way, so that the health team could act safely and quickly. In addition, there was a need to negotiate the purchase of inputs, reorganize work schedules, and all of this required great assertive communication skills on the part of the research participants. This scenario was also observed in other contexts such as the one pointed out by Cesar and Neves (2020) and can also be observed in Canário's statement, below:

Over time, we really created strong bonds, establishing a working relationship based on trust and communication (...) I qualify my time in the sector as extremely positive, especially from the point of view, from the *feedback* we had over this time, right? From the employees of the sector themselves who gave positive *feedback* in the sense of really improving the activity. *Feedback* from another part of the audience, to say that it was really a little easier, communication and the understanding of some information (Canary).

- Monitoring of the problem-situation.

Competency Description: Monitor/evaluate the performance of self, other individuals, or organizations to make improvements or take corrective action.

Application in the research situation: the managers, at all times, evaluated the context in its complexity, identified the needs and prioritized the most urgent demands of objective aspects (such as inputs, equipment, among others) to make the best decisions. In addition to the objective demands, there was a need for human resources management, since several employees fell ill and had to be removed, further overloading the understaffed health teams, as illustrated by Andorinha's statement:

(...) The working group was very positive, and I am very grateful to be able to participate in the group (...) for me it was a thing of improving the work not to be isolated only in management and not to be isolated only in the care part. You have to know how to bridge the two sides and I think that's one of the hardest parts. Always manage thinking about the whole (Andorinha).

- Active learning capacity and construction of learning strategies.

Competency description: understand the implications of new information, both for the present and for the future, seeking and anticipating problem solving and decision-making. Ability to build learning strategies, that is, in the face of a new and unknown situation, build training and training processes that meet expectations and work demands.

Application in the research situation: managers had to be able to leave a passive position and actively seek knowledge, identifying needs and creating/inventing new ways to deal with challenges, in addition to understanding the complex implications of the situations that presented themselves and proposing training actions in a fast, effective and broad way. Cesar and Neves (2020) also observed this need and João de Barro's statement below also illustrates this aspect:

(...) I had the opportunity to learn and identify myself as a key person in the processes, achieving success in most of my performance, and I believe that this was very important in the whole process of coping (João de Barro).

- Capacity for initiative, creativity and innovation.

Description of the competency: the job requires a willingness to take on responsibilities and challenges with initiation and protagonism. In addition, it requires creativity and alternative thinking to develop new ideas and answers to work-related problems.

Application in the research situation: in the case of facing the Covid-19 pandemic, it was necessary for everyone to be able to take an active position, seeking alternatives for solving problems in a shared and cooperative way. In this sense, managers had to rely on the creativity and flexibility of all those involved in the imminence of the health emergency.

We ended up reviewing several other diseases and manifestations that we didn't see, or saw less, less frequently. We ended up updating again, I think this was a positive aspect (...) I think we managed to develop a partnership within what we had in terms of availability and need at each moment. Every day was a new moment, I think I learned a lot, both in management and humanization, in short, in everything and personal growth (Cockatiel).

- Adaptability and flexibility.

Description of the competency: it is the ability to observe changes in contexts and make the necessary adaptation to ensure the accomplishment of the task. To this end, the professional must be able to adopt a more open and flexible posture to build new action strategies. Be open to change (positive or negative) and considerable variations in work scenarios.

Application in the research situation: in the case of hospital managers, the ability to adopt these skills was essential to promote a change in behaviors, ideas, and practices in the face of new information about coping with the Covid-19 pandemic, since there were successive updates of information that directly impacted all planning decisions. In this sense, it was necessary to encourage all those involved to open themselves to the

necessary adaptations and investment in actions and experiments aimed at making practices and expectations more flexible.

If we hadn't shown our human presence, called people... Sometimes it was a difficult situation that led us to have these conversations, but in the middle of these conversations we discovered very positive things, in listening to the human side, the human difficulty of these people, and this united the team even more, made the team work harder. Surprisingly, even with all the fatigue, with everything, people sympathized with the patients... I think that was the biggest lesson (Hummingbird).

- Resilience capacity.

Description of competence: it is the human capacity to overcome adversity, sustaining and enduring moments of crisis without losing the performance required for the execution of the work.

Application in the research situation: hospital managers had to adapt quickly to changes and make difficult decisions to keep the teams safe for the full functioning of the hospital, even in the face of a situation of deep crisis and work overload, something illustrated in the speech of João de Barro:

So, from the positive aspects, I believe that we had to adapt to the unknown, we had to reinvent ourselves, create opportunities, implement new processes, so it was a way for us to learn from all this (João de Barro).

- Ability to self-control and tolerance to stress.

Job description requires maintaining composure, keeping emotions in check, managing anger, and avoiding aggressive behavior, even in very difficult situations. In addition, the job requires accepting criticism and dealing calmly and effectively, even in situations of high demand and stress.

Application in the research situation: managers had to conduct their activities and responsibilities, even in unfavorable contexts, keeping the focus on performing the necessary tasks and overcoming different difficulties. Managers had to be able to deal with urgent and emergency situations in order to achieve objectives and goals necessary to solve the problems that arose at all times, seeking to overcome difficulties.

(..) The challenge was to deal with the emotional state of the employees... That many times we, managers, were fragile, worried about everything that was happening and we had to stand firm to be able to pass on security. So (the challenge) was the emotional of the employees (João de Barro).

- Emotional intelligence and focus on cooperative work.

Description of competence: it is the ability to be sensitive to the needs and feelings of others and oneself, identifying people's reactions and understanding their motivations, adopting an understanding and empathetic posture in the work environment. In addition, it is necessary to encourage cooperative work that can, in fact, connect people, stimulating the sharing of social ideas that promote personal fulfillment through work.

Application in the research situation: in the face of the challenges of the pandemic, hospital managers had to adopt postures strongly oriented towards cooperative work, strengthening spaces for discussions and exchanges of experiences among those involved, in addition to great openness to welcoming listening to the team's demands, in the search for possible and shared solutions in such a complex scenario. Cesar and Neves (2020) also highlighted the importance of the ability to deal with emotions in a mature and shared way, as we see in Calopsita's speech, below:

The main difficulty, I think, was in relation to containing this anxiety and fear because we had the responsibility of treating these patients, attending and treating these patients. So, we had to have a lot of flexibility not to pass this anxiety on to them (Cockatiel).

Therefore, the research identified that during the pandemic crisis it was essential to highlight adaptable competencies in the workplace, as also observed by Presti and Mendes (2023). These authors highlighted that, in the face of the Covid-19 pandemic, in addition to technical skills, interpersonal skills were also fundamental to face biopsychosocial pressures that were present in the workplace, through the strengthening of empathetic and flexible postures adopted by workers during the pandemic.

Finally, in view of the depth of the information shared by the hospital managers participating in the research, it was decided to build a technical product in education (PTE) in the form of a short video that was made available openly, online and free of charge.

The title of the video is "A chat with the manager in times of the Covid-19 pandemic", and Figure 1, below, illustrates the image at the opening of the video:

Figure 1

Image of the cover of the presentation of the video entitled "A chat with the manager in times of the Covid-19 pandemic"



Source: Grasso; Mazzaia; Zihlmann (2023). Available at: <https://youtu.be/DhCpvBv-ISE>

It is a video widely disseminated to health professionals, as well as society in general, which includes a recognition of the trajectory and experiences of overcoming hospital managers in the face of the needs of facing the Covid-19 pandemic. In their reports, it was observed the demand for practical actions, as well as the overcoming of complex emotional experiences in the face of a dramatic situation that took the national and global context. In addition, the video also highlights the different moments of facing the Covid-19 pandemic from the perspective of hospital managers, their challenges and learnings that required the development of various skills.

In the video, the hospital management professionals were represented by a character who talks to a character who plays the role of a researcher. In this dialogue, the experience of the managers was narrated and, for each topic addressed, an articulation was made between the lived experience and the development of competencies that were required in that context, promoting a reflection on the contributions of those involved in this process.

4 FINAL CONSIDERATIONS

This article sought to give visibility to a unique and unprecedented experience, involving dimensions that are difficult to describe due to this complex context, which made the role of the manager of fundamental importance for the management of health teams, which in the most crucial moments, depended on their leadership, safety and balance.

On the other hand, in the discourses of the managers participating in the research, it is noted that, in addition to the difficulties of an objective nature (restriction of access to inputs, resources, beds, among others) and of a technical nature (initial lack of knowledge about how to deal with this new virus, for example), it was evident that there were also difficulties of a subjective or emotional nature, since the reports revealed that, Managers often felt helpless and isolated in their functions, due to the need to lead the teams and coordinate coping measures, having to seek evidence, or even try to create the best conditions to plan actions and decide on the best practices in the face of the scarce technical knowledge available.

This scenario of needs and uncertainties imposed in the face of the challenge of the Covid-19 pandemic ended up mobilizing health teams in a way that caused extreme stress and great emotional exhaustion. In addition, the discourses of the research participants emphasized that the need for innovation and flexibility of practices was challenging, however, at the end of the process, it brought great learning.

Furthermore, it was evidenced that the experience of health management in the context of a pandemic impacted the lives of many managers, who, on several occasions, found themselves inserted in painful personal conjunctures imposed by the pandemic itself, at the same time that they had to face the professional challenges that presented themselves.

Finally, it is highlighted that the experience studied, in the perception of managers, was extremely challenging and demanded deep dedication and the mobilization of personal and professional skills related to the ability to adapt, overcome and resilience, in the face of an unprecedented scenario, such as the confrontation of the Covid-19 pandemic. Therefore, the proposal of the present work highlights the appreciation of the lessons learned to contribute to facing future challenges that lie ahead, always considering humanization and comprehensive care as ethical horizons.

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