



Journal of Nursing

Revista de Enfermagem

UFPE On Line

ISSN: 1981-8963

INTEGRATIVE REVIEW ARTICLE

NURSING MANAGEMENT FOR INTEGRAL CARE: INTEGRATIVE REVIEW GERENCIAMENTO DE ENFERMAGEM PARA O CUIDADO INTEGRAL: REVISÃO INTEGRATIVA GESTIÓN DE ENFERMERÍA PARA ATENCIÓN INTEGRAL: UNA REVISIÓN INTEGRADORA

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ABSTRACT

Objective: describing the aspects of nursing management that favor integral care in care practice. **Method:** an integrative review with the guiding question << Which aspects of nursing management described in the nursing scientific publications in Brazil favor the comprehensive care in care practice? >> A search was performed in LILACS, BDENF databases, and virtual library SCIELO in May 2014 by the keywords "comprehensive health care", "management" and "nursing". Nine articles were selected for analysis. **Results:** a systematization of nursing care, care planning and communication were scored separately as aspects that favor comprehensive care. **Conclusion:** nursing management linked to comprehensive care is addressed in studies so little evident; however, communication is shown more clearly as a facilitator for comprehensive care. **Descriptors:** Health Comprehensive Care; Management; Nursing.

RESUMO

Objetivo: descrever os aspectos do gerenciamento de enfermagem que favorecem o cuidado integral na prática assistencial. **Método:** revisão integrativa com a questão norteadora << Quais aspectos do gerenciamento de enfermagem descritos nas publicações científicas de enfermagem no Brasil favorecem o cuidado integral na prática assistencial? >> Foi realizada busca nas bases de dados LILACS, BDENF e na biblioteca virtual SCIELO em maio de 2014 mediante os descritores "cuidados integrais de saúde", "gerência" e "enfermagem". Foram selecionados nove artigos para análise. **Resultados:** sistematização da assistência de enfermagem, planejamento da assistência e comunicação foram pontuados isoladamente como aspectos que favorecem o cuidado integral. **Conclusão:** o gerenciamento de enfermagem atrelado ao cuidado integral é abordado nos estudos de maneira pouco evidente, entretanto, a comunicação é evidenciada de forma mais nítida como facilitadora para o cuidado integral. **Descritores:** Cuidados Integrais de Saúde; Gerência; Enfermagem.

RESUMEN

Objetivo: describir los aspectos de la gestión de enfermería que favorecen la atención integral en la práctica asistencial. **Método:** una revisión integradora con la pregunta guía << ¿Qué aspectos de la gestión de enfermería descritos en las publicaciones científicas de enfermería en Brasil favorecen la atención integral en la práctica de la atención? >> Se realizó una búsqueda en las bases de datos LILACS, BDENF y SciELO biblioteca virtual en mayo de 2014 por la palabra clave "salud integral", "gestión" y "enfermería". Nueve artículos fueron seleccionados para el análisis. **Resultados:** la sistematización de la asistencia de enfermería, la planificación de la atención y la comunicación fueron evaluadas por separado como aspectos que favorecen la atención integral. **Conclusión:** la gestión de enfermería vinculada a la atención integral se aborda en los estudios de alguna manera obvia, sin embargo, se muestra una comunicación más claramente como un facilitador para la atención integral. **Descriptor:** Salud de Atención Integral; Gestión; Enfermería.

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INTRODUCTION

Nursing as social practice inserted in health care is marked by historical, social, economic and political factors.¹ The working process of the nurse inserted in this practice is viewed from care, management, education and research, and these dimensions coexist or not at any given time, service or institution,² making their professional practice.

Nursing management can be historically contextualized since the second half of the nineteenth century, when the institutionalization of nursing through the Florence Nightingale's work in the Crimean War, due to the need of organizing and leading hospitals of Scutari - Turkey, where it was most of the wounded and sick of war. Florence stands out in this sense, because through the management and care can cause significant changes, including decreased mortality.³

Since that time, nursing work is organized so that knowledge and administrative practice itself are decoupled, ie the organization and implementation of care. Also the training was different, in which the students called special lady nurses that enhance administrative knowledge and the nurses, considered common students, perfected the practical knowledge,³ thus instituting the technical and social division of nursing staff. Thus it is for technical professionals the assistance activities and nurses with higher education, the care management activities and unit management.¹

Since then distinguished the process of taking care of the process of managing; the first expresses the implementation of nursing care for obtaining comprehensive care with a view to the health needs of the population, and the second has as its object the work organization and human resources necessary to effect such care.¹

Thus, it is understood that management is perceived as a specific work process; and, using its elements or instruments - planning, dimensioning of nursing staff, recruitment and selection, continuing education, supervision, performance evaluation and other is a tool for process of care.¹

The care with views to the health needs is guaranteed to the population since the Federal Constitution and later with its deployment in Law 8.080 / 90 and Law 8.142 / 90, which allowed the implementation of the Unified Health System (SUS).⁴

The SUS is organized from the guidelines: decentralization, community participation and comprehensive care.⁴ Decentralization

comprises a single management in each sphere of government; community participation expresses the democratization of services and decisions in relation to health; and finally, comprehensive care involves preventive and curative, individual and collective action in order to facilitate appropriate solutions to the health needs.⁴

SUS is made up of health actions and services, organized in a network of regionalized and hierarchical manner, which allows the understanding that comprehensive care should be guaranteed, avoiding fragmentation of health actions.⁴ Therefore, the term that there is an articulation at all levels of complexity, so that the services, technologies or professionals can be accessible to the individual.⁵

Thus, the managerial work process of nurses is critical for building a mode of health care focused on health needs, through the organization of nursing work process aiming at quality care.¹

Nursing management activities should aim the achievement of quality care, as it is a main feature of the nursing work process, thus as the nursing management is linked to the practice of care, both facing to meet the health needs, can contribute to the promotion of comprehensive care and comprehensive care.⁶

Based on the assumption that nursing management is one of the tools to promote comprehensive care, this study will guiding principle of the senses of comprehensive care:⁷ the idea that the individual is a full human being, subjected to various situations of life and work that lead to illness and death, and therefore, requires multiple care. Thus, it is understood that nursing care is part of the care provided by a team of professionals, and that comprehensive care is a result of the links between the various professionals and care offered by these to the user, both with regard to nursing care itself, offered in a comprehensive manner, the care provided by the various professionals of the multidisciplinary team. In this context, this research is guiding question: What aspects of nursing management described in the journal of nursing in Brazil favor the comprehensive care in care practice?

OBJECTIVE

- Describing the aspects of nursing management that favor integral care in care practice.

METHOD

For the proposed objectives be achieved there was held an integrative literature review. This method provides the synthesis of knowledge and the incorporation of the applicability of results of significant studies in practice;⁸ thus providing a knowledge based on quality care practice in nursing.⁹

To perform the integrative review it does imply six distinct phases, as in a standard search, as follows: theme identification and relevance of research question for health and nursing; establishment of criteria for inclusion and exclusion of studies to literature search; definition of information to be extracted from the selected studies; evaluation of studies; interpretation of results and review of the presentation.¹⁰

First phase: this research has as guiding question << ***What aspects of nursing management described in nursing scientific publications in Brazil favor comprehensive care in care practice?*** >>

Second phase: to answer this research problem it was held data collection in May 2014, in the databases Latin American and Caribbean Health Sciences (LILACS), Nursing Database (BDENF) and in the virtual library Scientific Electronic Library Online (SciELO), using the combination of descriptors included in descriptors of Health Sciences (MeSH): "comprehensive health care", "Management", "Nursing". Since such a combination were located 199 publications from both databases. Inclusion criteria were all scientific articles published in English, Portuguese and / or Spanish, between the years 2005-2014, which found in their titles or abstracts aspects related to the objectives of this research related to care practice in Brazil, available online, free and in full.

Exclusion criteria were: dissertations, theses, editorials, repeated manuscripts in both databases or those that needed to be acquired, and other files not named as articles. Thus, the final sample consisted of nine articles.

Third stage: to define the aspects to be analyzed elaborated a collection instrument of information in order to answer the core question of this review. The analysis and interpretation were carried out in an organized manner and synthesized hereby understood that the variables: title, year, participants, objectives, periodic, geographic location, and methodology, level of evidence and summary of results. This step consists in organizing and summarizing the information in a concise way, forming a database accessible.¹⁰

Fourth phase: after carefully read, the selected studies were critically analyzed by

means of the variables described above, including in this sense, the classification of the level of evidence of the articles, namely:¹¹ evidence level I - meta-analysis or systematic reviews; level of evidence II - clinical trial randomized, controlled; III - clinical trials controlled trial without randomization; IV - cohort or case-control; V - systematic review of qualitative or descriptive studies; VI - qualitative or descriptive study; VII - opinion or expert consensus.

Among the various methods proposed for data analysis, there was opted the content analysis,¹² in view of the need to recover all relevant information. Therefore, after the organization of the material, thorough reading of the same, fragmentation of texts after several readings, encoding each fragment analysis and later building units, the semantic categorization is performed, so that the relevant information contained in the studies were grouped into categories from submitted by the same relations, thus enabling achieve the objective of this review.¹²

Finally, there is the processing of data in order to make them meaningful and valid, confronting them with the literature available on the subject.¹²

This data analysis technique was appropriate, given the fact that each manuscript as a whole did not address all aspects related to nursing management related to comprehensive care, so removed from the fragments was possible to rescue all the necessary information the achievement of objectives.¹²

Fifth stage: the results of the review were discussed and compared with current knowledge in this way it was possible to identify aspects of nursing management that favor the integral care in care practice, as well as knowledge gaps and priorities for future studies.^{8,10}

Sixth stage: presents the findings of the study.

RESULTS

In the presentation of the results will be highlighted data referring to the journals, considering the variables: year of the study period, geographic location, the study participants, methodological aspects, level of evidence and summary of results. Then will appear the categories of study.

Of the articles analyzed, it was observed that 77.7% (n = 7) were published in Brazilian journals, of which 33.3% (n = 3) in the Journal of Nursing, the other periodic presented an article each, which represents 11.1%. Regarding the period analyzed, it was found that the publications are given from 2009 (Figure 1).

Most of the studies,^{6,13-17} were articles involving human subjects (66.6%), of which 83.3% had nurses participants, ^{6,14-17} and only one¹³ involved the entire nursing team (Figure 1).

In these studies, the setting was predominantly hospital,^{6,13-17} being the most

common place Rio de Janeiro^{15,17} (33.3%). The other locations, with one study each, were Sergipe,¹³ Sao Paulo,⁶ Rio Grande do Sul¹⁴ and Curitiba (Figure 1).¹⁶

Title	Year	Journal	Location	Participants
Programming of the change of shift from the standpoint of nursing professionals ¹³	2013	Global Nursing	University Hospital Sergipe/ Brazil	Nursing professionals
2. Relationship between managerial dimensions and work process of the outreach nurse ⁶	2009	Text & Context Nursing	Private Hospital in São Paulo / Brazil	Nurses
3. Conceptions of communication in Hospital Nursing management among nurses managers of a University Hospital ¹⁴	2011	Journal of the Nursing School of the University of São Paulo	University Hospital Rio Grande do Sul/ Brazil	Nurses
4. Nursing management: situations that facilitate or hinder care in coronary unit ¹⁵	2010	Aquichan	University Hospital in Rio de Janeiro/Brazil	Nurses
5. Management of nursing care in hospital scenarios: the construction of a concept ¹⁸	2011	Journal of the Nursing School of the University of São Paulo	-	-
6. Institutional demands and care management nurses in the emergency room ¹⁶	2011	Brazilian Nursing Magazine	Emergency room in a teaching hospital. Curitiba/Brazil	Nurses
7. Communication from the nursing staff and the relationship with management in healthcare institutions ¹⁹	2010	Gaucha Nursing Magazine	-	-
8. Systematization of nursing care as care management tool: case study ¹⁷	2011	Anna Nery Nursing School Magazine	Infectious diseases service of a university hospital. Rio de Janeiro / Brazil	Nurses
9. Classification system for pediatric patients: construction and validation of categories of care ²⁰	2010	Journal of the Nursing School of the University of São Paulo	-	-

Figure 1. Title, year, journal, location, participants.

Figure 2 shows the data of the manuscripts with the type of research, level of evidence and the synthesis of the results. From the selected articles, 55.5% were qualitative^{6,14-17} 11.1% quantitative,¹³ and other studies

included various types of literature searches,^{15, 18-20} totaling 33.3% of the sample. All manuscripts were classified as level of evidence VI (Figure 2).

Title	Research Modality	Level of Evidence	Synthesis of Results
Programming of the change of shift from the viewpoint of nursing professionals ¹³	Descriptive-exploratory with a quantitative approach	VI	It was possible to generate strategic alternatives capable of contributing to the improvement of care management.
Relationship between managerial dimensions and work process of the outreach nurse ⁶	Qualitative approach. Semi-structured interview	VI	Articulation of managerial dimension to health care can be observed in reference to the visit of the nurse and the systematization of nursing care as actions that allow management and care interventions.
3. Conceptions of communication in Hospital Nursing management among nurses managers of a University Hospital ¹⁴	Exploratory-descriptive. Qualitative approach	VI	Communication as a fundamental instrument for managing.
4. Nursing management: situations that facilitate or hinder the care in coronary unit ¹⁵	Bibliographical research in the Scielo database. Qualitative Approach. A semi-structured interview	VI	Nursing management facilitating aspects - the use of instruments of distribution of staff; good communication and interpersonal skills.
5. Management of nursing care in hospital scenarios: the construction of a concept ¹⁸	Analysis of Concept Archaeological Analysis Lexical Analysis	VI	Theoretical definition of nursing care management concept in hospital scenarios
6. Institutional demands and care management nurses in the emergency room ¹⁶	Qualitative approach. A semi-structured interview	VI	Management geared to meet the demands of nursing care, which prioritizes care focus of managerial activity.
7. Communication from the nursing staff and the relationship with management in healthcare institutions ¹⁹	Integrative review of literature	VI	Through efficient communication the nurse ensures identification of individual and collective problems and relates them with the analysis of the situation encountered and direct them to effective planning.
8. Systematization of nursing care as a care management tool: case study ¹⁷	Study of qualitative nature, single case study type.	VI	The subjects include a relationship between SAE and careful management.
9. Classification system for pediatric patients: construction and validation of categories of care ²⁰	Methodological study. Literature review and evaluation of the validity of content through the Delphi technique.	VI	Validation of the categories of care subsidized the construction of a system of classification of pediatric patients that could contribute to the decision-making process of the orderly management and assistance in practice.

Figure 2. Title search mode, level of evidence, summary of results.

The results presented in this study were obtained from a prior design of comprehensive care and nursing management, which allowed us to recover the fragments manuscripts concerning the purpose of the study, given that each manuscript found in this review did not show as a whole a clear relationship with nursing management linked to comprehensive care.

From the analysis of the results of studies consisted themes: The relationship between the Systematization of Nursing Care and Care Management; Care planning; and Communication. These categories consist of the aspects found in isolation, favoring the comprehensive care.

DISCUSSION

• **Articulation between the Systematization of nursing care and care management**

Some studies bring the Systematization of Nursing Assistance (SAE) as a facilitator for the nursing management process, understood as an instrument that qualifies care in order to be tool for planning and organization of care.^{6, 16} SAE, pointed as analogous to the management of care, enables nurses to articulate assistance and management, ensuring quality of care through management activities, in other words, organizing care.^{6, 17}

Care management while nursing tool for the coordination and systematization of care

requires constant human interaction, which means that to implement the SAE nurses must predict and provide material and human resources necessary.¹⁷

Therefore, careful management must turn to the health needs and the integration of services, thus enabling the promotion of integrated care and consequently, the completeness of care.⁶ Thus, care management is considered the cornerstone of nursing actions.¹⁶

Conceptually, the management of nursing care involves a dialectical relationship between the know-how related to the management and care, enabling an interface between these two processes in professional nursing practice.¹⁸ Is characterized by expressive and instrumental actions of direct care and indirect, coordination and interface of the technical, political, social, communicative, development and organizational citizenship, involving nursing practice in hospital settings, in different hierarchical levels and any health institutions.¹⁸

Therefore, we understand the relationship established between the management of care and the SAE as the care management is contained in the SAE as they deal with all aspects necessary for the operation of this, contributing to the achievement of the nursing process.

The basis for the realization of SAE is the Nursing Process, defined as an instrument for the implementation of assistance, consisting of steps defined in Cofen Resolution 358 of 15/10/2009, which range from data collection that allows the identification of nursing diagnosis, care planning, implementation of care and evaluation.^{16,21-22}

The SAE is how to organize the work of nurses, both with regard to the method, human and physical resources, enabling the operation of the nursing process.²¹ The latter understood as a methodological tool that guides the professional care of Nursing and the professional practice.²¹ documentation can be understood as a methodological tool providing the care and the means for this to occur, the scientific approach, enabling nurses to monitor, evaluate and manage the care.¹⁷ However, it should not be understood as the total nursing care, nor the management, as both comprise various other aspects.¹⁷

Thus, it can be inferred by means of the analyzed studies, the integration between SAE and care management, which can be deduced that this is a facilitator aspect of comprehensive care in the design of nursing

care, given that comprehensive care obtained through the work of several professionals was not related to this subject category. However, the quality of care delivered by the whole multidisciplinary team depends on various work processes, among these, the nursing.

♦ Planning assistance

The studies address care planning as fundamental to qualifying care, especially when accompanied by the interaction and relationship with the patient.⁶ It is noteworthy that effect the management of planning action and care of the care action itself as articulated in ensuring care of the individual needs, based on their health needs.⁶

The daily planning with well-defined objectives favors nursing care; however, it should pay attention to the characteristics of the institution and the needs of each user, favoring quality care and specific to the various health problems.¹⁵

Planning is mentioned as an important pillar for the assistance and essential to the effectiveness of the process of care.¹⁶ In this sense, human resource management stands in nursing daily as a tool for the pursuit of quality of nursing care.¹⁶

Another aspect related to planning, evident in the studies, is to classify the level of dependence on nursing care of patients.^{16, 20} The patient's classification is essential for the management of a unit, which contributes to the decision-making process of the nurse the management and care practice.²⁰

Also observed in this category, nursing care is the only aspect verified when referring to planning. However, it is important to mention that the planning of nursing care also affects the effectiveness of the work in multidisciplinary team, since this happens coupled that.

♦ Communication

Communication is one of the main tools for managerial practice nurse, configuring them an important means of interaction with the multidisciplinary team and the nursing team and contributing to the provision of quality care.^{14-15,19,23}

Communication is identified from two concepts in one study, one related to dialogical and interactive perspective and other guided by the understanding of formalized communication, based on the transmission and maintenance of standards and hospital routines.¹⁴ Thus, one can understand how proceeds communication in nursing management in the hospital, understood beyond the formal aspects, it is also marked on dialogue and interaction with

people, allowing you to assign meaning to actions taken.¹⁴

Therefore, it is for the nurse manager transmitting information beyond trailers matters to the administration of the service, for as issuer, must seek a close relationship with all staff, encouraging social interaction, and generating integration possibilities.¹⁴ Service for both no need for the development of communication skills, team coordination and interpersonal skills that can contribute to the assistance managed by the nurse in the health services.²⁴

The quality of the communication influences the management, which confirms the perception of nurses in a study that consider fault and fragmented among other reasons because of this nursing direction of the hierarchy at their institution, which does not help the communication process continuous.¹⁴

Considering this aspect, communication process should be strengthened to occur efficiently, which ensures the identification of problems of individuals, establishing relations between them with its context and direct a care planning appropriate.¹⁹ It has been in this context the shift change as a tool for communication in the hospital setting, favorable to care management,¹³ and, which guarantees continuity of care.¹⁹

Along these lines, communication by effectively managing done by nurses affects the work in multidisciplinary team is essential to meeting the health needs of individuals,¹⁹ one of the determinants for comprehensive care. This perspective meets fragmented care and the act alienated from professionals when they are unaware of their professional role and ignore their contribution in health care.⁶

Interdisciplinary work requires constant discussion,²⁵⁻²⁶ this is justified by the fact that the relationship between the health team structure all the activities thereby implementing comprehensive care, which implies in different knowledge.²⁵

The scope of this care is possible when all professionals standardize their actions as a team, avoiding diversified conduct that may interfere with the production of comprehensive care.²⁶ Thus, before the reconfiguration of health since the Federal Constitution, are new challenges for professionals, that need to be organized properly to respond to problems as the individual work before responding to a demand, it is currently not resolving.²⁵

This aspect is in line with one of the studies in this review that highlights the method of organizing work as a factor that

influences the quality of communication between professionals.¹⁹ In this context, the current management models and considered more modern, organized in a decentralized way, characterized among other things by teamwork and lateral communication, differs from traditional models, more hierarchical, mediated by the fulfillment of tasks and individual work of each professional.¹⁹

The new management models suggest the participation of all in decision making and the modification of traditional charts, creating production units, extinguishing departments and sections organized by occupation and by replacing units as the working logic, consisting of multidisciplinary teams.²⁷⁻²⁹

Thus, it is noteworthy that the nurse as a link between the multidisciplinary¹⁹ team can contribute to the improvement of the communication process in the multidisciplinary team is essential in the new management models and fundamental to the consolidation of the SUS.

Communication is evidenced as a vital contribution to the care practice, encouraging work in multidisciplinary and nursing staff, strengthening the nursing work spaces, especially because of its administrative tools in relation to their management; allowing the link between the multidisciplinary team favor integral care to the individual; and establishing daily relations with the nursing staff in a productive way and facilitator for care.

CONCLUSION

Nursing management linked to comprehensive care is addressed in studies of little obvious way. Although the articles found down isolated aspects related to comprehensive care, they are not formalized as such, and do not allow contextualize it in all its senses, nor relate it to management or this that. Note that the aforementioned comprehensive care goes beyond nursing care itself, which is only one aspect; allows us to apprehend the individual as the center of health actions, which has many needs and therefore requires several looks.

Despite this concept of comprehensive care were identified and described aspects isolated from nursing management that favor the integral care in care practice, even if not elucidated as such in their articles. Thus, the SAE inter-related care management while taking strict connotation with nursing care, one aspect of comprehensive care, can be seen as essential to the full care provided also by the multidisciplinary team, as the latter depends on the effectiveness of the various

work processes of all professionals, guaranteed by SAE regarding the nurses' working process.

It has been found in some studies the relationship between SAE and the management of care, as the operation that is possible through this, mediated through the nursing process.

Planning is essential for the correct resolution of the problems of individuals, clearly translates as important mechanism for the creation of comprehensive care, achieved by meeting the needs.

Among the aspects described, communication as a management strategy is evidenced more clearly as a facilitator for comprehensive care, both in terms of working in multidisciplinary team, as the work done by the nursing staff. Importantly, the strengthening of the communication process in the multidisciplinary team is essential to reach the comprehensive care thus faced with the challenge of a comprehensive care; professionals should be organized to meet that of the SUS, which is in line with the new management models, characterized mainly by teamwork and lateral communication.

Given the above, it is incipient in the literature studies that address nursing management relations with comprehensive care, showing a gap to be filled, even considering the lack of studies with a high level of evidence of the articles selected for analysis. It is important to consider that the nursing management although specific to a profession does not preclude the scope of comprehensive care for all, for the work of nurses, determined among other things by the increased length of stay in the health services in relation to other professionals of the multidisciplinary team allows the articulation necessary for comprehensive care.

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Submission: 2014/12/16

Accepted: 2014/12/28

Publishing: 2015/06/01

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