



NURSING WORKING PROCESS IN PRIMARY HEALTH CARE: INTEGRATIVE REVIEW

PROCESSO DE TRABALHO DA ENFERMAGEM NA ATENÇÃO PRIMÁRIA À SAÚDE: REVISÃO INTEGRATIVA

PROCESO DE TRABAJO DE ENFERMERÍA EN LA ATENCIÓN PRIMARIA: REVISIÓN INTEGRADORA

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ABSTRACT

Objective: to analyze from the scientific production the nursing work characteristics in primary health care. **Methodology:** integrative review that sought to answer the question << What are the nursing team working process characteristics in Primary Health Care/Primary Care >> from searches of Medline and Lilacs, in January and February 2014; then the peer review of studies with the instrument for data collection, selecting 17 items. **Results:** process work with features of the biomedical model, and the nurse the key professional to guide public policies and programs for public health. Household, educational and collective activities prevailed in the nursing work process. In international studies prescription medications characterizes the practice nurse. **Conclusion:** the biomedical model features clashes with the health-disease characteristics' enlarged view. **Descriptors:** Nursing; Health Primary Care; Primary Health Care; Work; Family Health Strategy.

RESUMO

Objetivo: analisar a partir das produções científicas as características do processo de trabalho da enfermagem na Atenção Primária à Saúde. **Método:** revisão integrativa que buscou responder a questão << Quais as características do processo de trabalho da equipe de Enfermagem na Atenção Primária à Saúde/Atenção Básica à Saúde >>, a partir de buscas nas bases de dados Medline e Lilacs, nos meses de janeiro e fevereiro de 2014; posteriormente a análise por pares dos estudos com o instrumento para coleta dos dados, selecionando-se 17 artigos. **Resultados:** processo de trabalho com características do modelo biomédico, sendo o Enfermeiro o profissional-chave para nortear as políticas públicas e programas voltados para a saúde coletiva. Atividades domiciliares, educativas e coletivas prevaleceram no processo de trabalho da enfermagem. Nos estudos internacionais a prescrição de medicamentos caracteriza a prática do enfermeiro. **Conclusão:** características do modelo biomédico confrontando-se com características da visão ampliada do processo saúde-doença. **Descritores:** Enfermagem; Atenção Primária à Saúde; Atenção Básica à Saúde; Trabalho; Estratégia Saúde da Família.

RESUMEN

Objetivo: analizar adelante la producción científica de enfermería las características del trabajo en la atención primaria de salud. **Metodología:** revisión integradora que trataba de responder a la pregunta << ¿Cuáles son las características del equipo de enfermería en el proceso de trabajo de Atención Primaria/Primary Care >> partir de búsquedas en Medline y Lilacs, en enero y de febrero de 2014; a continuación, la revisión por pares de los estudios con el instrumento de recolección de datos, la selección de 17 artículos. **Resultados:** el proceso funciono con las características del modelo biomédico, y lo enfermero, el profesional clave para orientar las políticas y programas públicos para la salud pública. Hogar, actividades educativas y colectivos prevalecieron en el proceso de trabajo de enfermería. En los medicamentos de venta con receta estudios internacionales que caracteriza a la práctica enfermera. **Conclusión:** el modelo biomédico cuenta con enfrentamientos con vista a mayor escala las características de salud-enfermedad. **Descriptores:** Enfermería; Atención primaria de salud; Atención primaria de salud; trabajar; Estrategia Salud de la Familia.

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INTRODUCTION

The Health has constituted a new playing field for the Nurse in Primary Health Care (PHC)/ Primary Care (PC). This proposal requires a review of the way has been organizing and processing the job.¹

The nurse to provide skilled care needs to relate the factors that influence the functioning of family health, such as culture, social class, their families and health professionals involved in the care context.² The participation and involvement of families in health care are crucial to nursing practice, since the family contributes to the well-being and health of its members.¹ Active listening, comfort and health guidelines offered by Nurse strengthen the ties between staff and families.³

In the search context for comprehensive care, nursing has expanded its space in health care, both at the national and international context.⁴ In industrialized countries, the nurses have played an important role in PHC, evidenced by the development of health policy in which nurses collaborate significantly in care in this sphere of attention.⁵

Within AB, nursing is reorienting its actions to consider the health needs of users, not limited to medical curative.⁶ rationality In the Family Health Strategy (FHS) the work of the nurse has been studied with the order to follow the practice of this profession, particularly with regard to the influence of his work in the health-disease⁽⁷⁾.

Home visits by nurse, provided by the FHS, is an important instrument of the work process, since they provide greater approximation of health professionals with reality and an opportunity to highlight the basic needs of each individual and plan individualized care action.³

The role of care is closely linked to the autonomy that is being decreased with the progressive approach of the professional paperwork. Specifically on public health, the autonomy of the nurse becomes more expressive by meeting the people in the nursing consultations (NC) and in health education activities at the individual and collective.⁸

In this perspective the nurse needs to outline more and better your professional field and develop its political-legal project,

considering the human being as subject and social actor.⁴

In the current context of reversal of care model of PHC, coupled with the expansion of the role of nursing in this scenario, it is justified to know how such processes have been established at international and national level, in search of scientific evidence to guide the work process in FHS.

OBJECTIVE

- Analyze from the scientific production characteristics of the nursing work in primary health care.

METHODOLOGY

This integrative review followed all of the steps envisaged: ⁹ first, defined the subject of the study and the objective, the issue of emerging search < < *what characteristics of the process of work of the team of nursing in primary health care/basic attention to health?* > >

Next, set up the databases to be used and the criteria for inclusion and exclusion to search by selecting the sample; later, he moved to the categorization of studies, extraction of information in proper form, organization and systematization of information and training of the study database. Following held critical evaluation of studies included in the review, followed by discussion and interpretation of results. Finally, the last step was the presentation of the review. It is noteworthy that the whole process was permeated by collective discussion and validation by peers of the steps taken.

The databases used in the selection of the articles were MEDLINE (Medical Literature analysis and Retrieval Sistem online), available from PUBMED the US National Library of Medicine National Institutes of Health and LILACS (Latin American and Caribbean Health Sciences) from the Virtual Health Library (VHL). The search for articles was conducted in January and February 2014. The criteria for inclusion of articles in this review comprised the availability of the summary published in the last 10 years (March/2004-Feb/2014) in Portuguese, English or Spanish and study of humans.

In both bases they used descriptors and/or keywords related to the research question, as well as identical inclusion

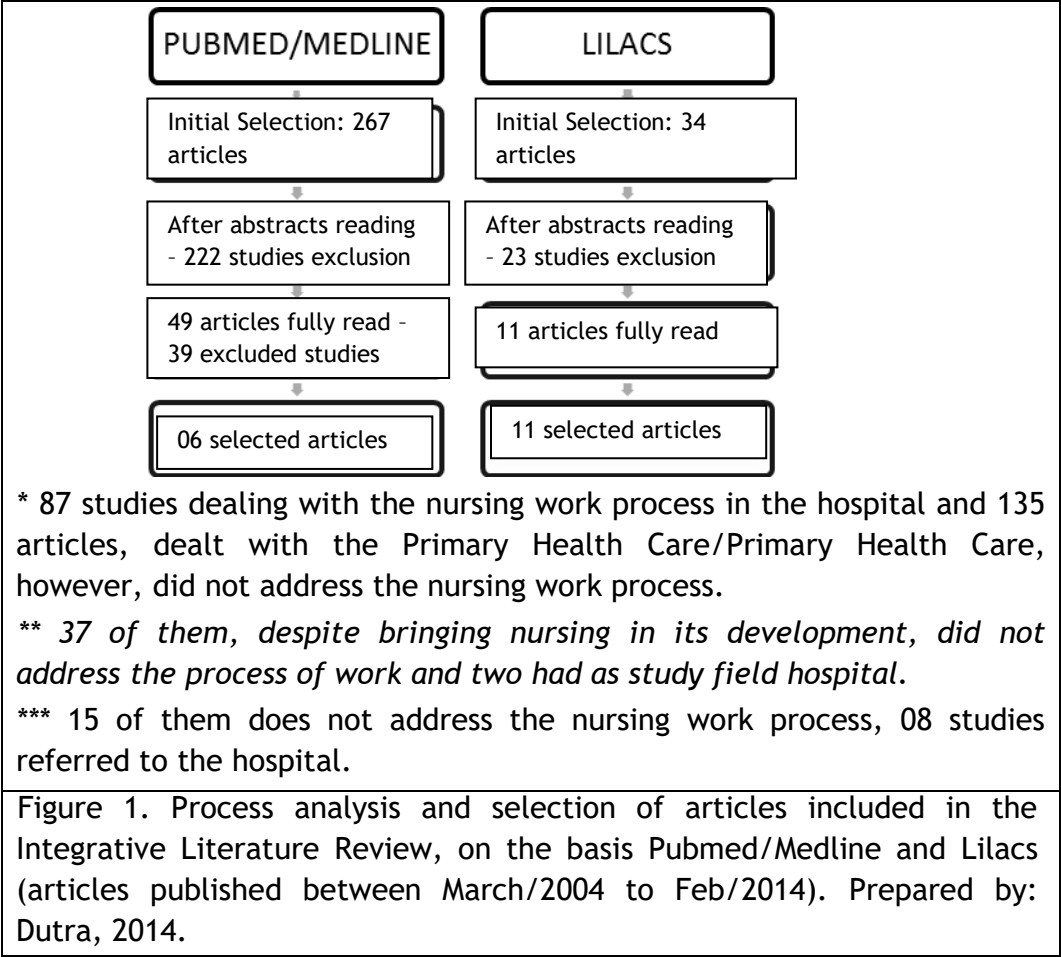
criteria, achieving coherence and avoiding possible biases.

Researched in the Medical Subject Headings (MeSH) the existence of the descriptors of interest to the study. the descriptors were defined controlled in English to PUBMED, namely Outcome and Process Assessment (Healt Care) Nursing and Primary Health Care. Then we proceeded to search for articles by online access, using the three descriptors linked by the AND connector in addition to the inclusion criteria, resulting in 267 pre-selected articles.

For the LILACS database, we used Care Nursing Primary, Primary Care Nursing and the Family Health Nursing as descriptors in Portuguese, being previously consulted the descriptor Health Sciences (DeCS). In

addition, we used the words Work Process and (given that when using these as descriptors, to cross them with the descriptors presented above, the search is presented zeroed). In the first search this basis, we used the Care Nursing descriptors Basic/Primary Care Nursing, surging 18 studies (when crossed with the words process and work, no items selected). Then we used the Health Nursing descriptor crossed family with the words process and work, resulting in 17 studies. An article was repeated in these searches, completing therefore a pre-selection of 34 articles.

After the first selection of both the base items passed to the analysis and final selection of articles that comprise this integrative literature review, as shown in Figure 1.



This integrative review consisted of 17 articles, which were submitted to an instrument with information regarding the identification of the publication, introduction, objectives/research question/hypothesis, methodological characteristics (study design, sample technique for data collection and analysis of data), evaluation of the results and conclusions.

For analysis purposes, the information of the articles were transcribed on a table in order to promote a broad view of the

reviewed studies, and to provide a summary thereof. In this table, the following aspects were considered: publication year, journal/periodical, origin of the principal investigator/university, author, title, objectives, categories and methodology (type of study, study participants, study site, collection technique data), theoretical framework.

The presentation of the results was done descriptively, with the help of a summary table which shows the purpose of this integrative review, ie consideration of

studies related to the work of the nursing team.¹²

RESULTS

The nurse is still seen as the key professional to guide public policies and programs for public health, especially for the ESF. Several studies have brought home how important setting for nursing practice in PHC, and educational activities related to this practice;⁴⁻⁷⁻¹³⁻¹⁴⁻¹⁵ Also, it was found that the collective activities consume much of the nurses' working process,⁷ getting scarce individual meetings in the daily routine of this professional, is the demand of consultations directed to the doctor,⁷ is the service actions that are delegated to technicians and nursing assistants,⁹ however, the care activities performed by nurse at home were recognized in three studies.³⁻¹⁴⁻¹⁵

The management activities were identified in studies¹⁻⁴⁻⁵⁻⁹⁻¹⁶, so the practice of health education and health needs identification is present in the work process of the nursing professionals in an attempt to approach the broader view of health,¹⁻³⁻⁴⁻¹³⁻¹⁴⁻¹⁵⁻¹⁶⁻¹⁷ However, despite the speeches of nurses present current concepts of health education in practice, there was reference to a normative perspective and prescriptive,

vertical, professional-user one-way, questioning the validity of these practices in the current context of PHC ⁽¹³⁾.

In international studies it was observed that the prescription medications is characteristic of the practice nurse.⁵⁻⁶⁻¹⁸ In the primary care setting, the nurses are recognized as efficient as medical professionals, improving the ability to service this level of attention.⁵⁻¹⁸

The obstacles in the work process of nursing were evidenced the difficulty in operationalizing control and social participation, 1 lack of teamwork characterized by the lack of discussion, planning and evaluation of the care process,¹⁻⁷ high human and material resources, as well as the lack of training for nursing.²

Two studies, describing the work process of nursing, considered the other team members.⁹⁻¹⁵ One of the studies show that the professional reference for the Auxiliaries and nursing technicians is not the nurse, but the doctor.⁹ In the other study the nurse is the reference professional for Community Health Agents (CHA).¹⁵

The following is a summary of the articles included in this review (Figure 2), showing, among other issues, the considerations of each study on the nursing work process.

Article Title	Authors	Origin Countries	Study Objective	Considerations of nursing work
Approach to cases of violence to the child by nursing in primary care	Aragon, AS Ferriani, MGC Vendruscollo, TS Souza, SL Gomes, R	Brazil	Analyze how cases of violence against children and adolescents are addressed by nursing basic care, identifying the limits and possibilities to deal with these cases	Practice based on the biomedical model, prevalence of biologicist bias to the detriment of reflection on the causes or the prevention, feeling of unpreparedness, not understanding of themselves as subjects in the process of coping with complex and multi-causal phenomenon as violence
The professional role of nurses in the NHS: community health family health strategy	Backes, DS Backes, MS	Brazil	A look back on the professional role of nurses in the SUS Brazilian as well as understanding the meaning of social practice	Expansion of activity and inclusion in the community and social field. Discomfort and insecurity due to the new way of thinking and acting, the need for active

	Erdmann, AL Buscher, A		in the field of discussions and theoretical-practical meanings A look back on the professional role of nurses in the SUS Brazilian as well as understanding the meaning of social practice in the field of discussions and theoretical-practical meanings	and responsible inclusion in community life, combined with the impregnation of the same fragmented logic, dichotomous and some resolute. Independent of the will are driven by the system to adopt a new policy stance in the different scenarios of health. Qualification for interactive and managerial activities, complete assistance, ability to accept and identify with the individual's needs and expectations and to promote dialogue between users and staff.
Sexuality and Breastfeeding: concepts and approaches of primary health care nursing professionals	Florencio, A Van der Sand, ICP Cabral, FB Colomé, ICS Girardon-Pelini, NMO	Brazil	Knowing the concepts of nursing professionals working in primary care on sexuality and identify how this theme integrates the care practices of these professionals to the women nursing mothers	Nursing practices centered on the biomedical model, considering biological and physical aspects of breastfeeding, with the purpose of, in most cases, ensure successful breastfeeding, and sexuality is addressed only if requested by the woman, knowing it or valorized the little, seemingly inexistent in nursing care
Health education: perception of primary care nurses in Uberaba (MG)	Cervera, DPP Parreira, BDM Goulart, BF	Brazil	Knowing the perception of nurses linked FHS will on health education	Education perspective in broad health, with a close relationship to the practice linked to home visits and nursing consultations. But even they realize this strategy of vertical form, institutionalized, with a professional-user one-way, with a focus on inference in community behavior, based on the normative and prescriptive perspectives. theoretical

				discourse with Current concepts of the subject.
The expression of the autonomy of nurses in the growth and development of children	Monteiro, AI Santos, ADB Macedo, IP Gurges, PKF Cavalcante, JMP	Brazil	Describe the autonomy of nurses in the planning process and implementation of collective accompanying proposal growth and development of children	Fragility of the biomedical model to meet all social needs and health demands, expressing the relevance of reinventing actions or strategies that will serve the people effectively. By placing the care as the center of their practice is acquired autonomy of the profession.
The nursing care to the elderly in the family health strategy	Rocha, FCV Carvalho, CMG Figueiredo, MLF Caldas, CP	Brazil	Describe and discuss the nursing care to the elderly in the FHS as well as to analyze the aspects that facilitate this care.	Home visits foster closer to reality, providing opportunity to raise the basic needs of the user. Limits so there is efficiency in care: lack of material resources, training and more human resources involved in the process.
Attributes mobilized by nurses in family health: approximation with performances in constructing managerial competence	Kawata, LS Mishima, SM Chirelli, MQ Pereira, MJB Matumoto, S Fortuna, CM	Brazil	Identify and analyze the attributes (knowledge, skills and attitudes) mobilized in work situations that characterize the performance of nurses in managerial competence area in family health	Supervision - education and control in order to check, correct and inform. Work articulated to the team for the production of care. Difficulty of dialogue with the other subjects to effect community participation. Development of actions to mobilize care, indicating links between managerial dimension and assistance in the development of health work. As for the planning there is a systematic process of evaluation of activities. Contradictions in the work of nurses: vertical character actions x seeks reversal of care model
Home visit: Space nursing care practices	Kebian, LVA Acioli, S	Brazil	Knowing the meanings attributed by	Practices focused on the investigation of the health needs

and community health agent				nurses and ACS RJ county FHS about the health practices developed in the RV	and carrying out welfare activities. Realization of active listening, observation of home and health education. Little professional interaction between nurse and ACS in the RV. Little use of the RV space to strengthen the bond with families and encourage professional interaction with the ACS.
Rol Del enfermero/a rural en la región de La Araucania Chile: percepción de usuários y enfermeros	Marilaf, MC Alarcón, AMM Illesca, MP	Chile		Discover the perception of users and nurses from rural areas about the role of nurses in rural stations of the Araucania region, Chile	Identified functions are grouped according to those internationally established: assistance, administrative and educational. As for the representation of professional: recognition and continuity of actions. Professional skills: knowledge, skill and ability. health care concept: relevance and quality of nurses' actions
Public and community health nursing interventions with vulnerable primary care clients: a pilot study	Kaiser, KL Farris, N Stoupa, R Agrawal, S	USA		To test the effects of the visits and nursing interventions with the establishment of mutual goals, on the intensity of the need for levels of care nursing and health behavior of vulnerable customers. Describe the changing customer behavior or health improvement goals	Interventions through home visits suggest significant positive effects intensity of the need nursing care, a significant reduction, and effective in changing health behavior, since they provide more effective motivation and involvement of patients
The nurse in the family health team: a case study	Schimith, MD Lima, MADS	Brazil		To analyze the work process of the inserted nurse in a team FHS, considering the interaction with the	Prioritization of preventive and administrative activities. clinical care demand exclusively for medical,

			professionals who make up the team in the work process microgap	perpetuating medical-hegemonic model. Establishing partnerships with coordination of various sectors of the community. The nurse is the reference professional for CHWs, but not for nursing assistants and technicians, but the doctor. Fragility of teamwork. care model centered procedure, fragmentary.
Systematic review of the effectiveness of primary care nursing	Keleher, H Parker, R Abdulwadud, O Francis, K	Australia	Report the results of a systematic review of literature evaluating the effectiveness of nurse primary community care in primary care settings	Providing effective healthcare, particularly in the promotion of patient knowledge and compliance of this
The genogram and the eco-map in nursing care in family health	Pereira, APS Teixeira, GM Bressan, CAB Martini, JG	Brazil	Knowing the ways of coping developed by families of people living with hypertension and DM	Difficult to exercise the expanded vision to understand that the work process is not restricted to acting on diseases and disorders, but give the family conditions to earn health in all its dimensions
Characterizing nurse practitioner practice by sampling patient encounters: an APRnet study	Deshefy-Longhi, T Swartz, MK Grey, M	USA	Describe the practice of members of the network, the extent of these practices and the types and content of meetings with patients over 6 months	Carefully targeted to the poorest and sick minorities. Prescription drugs in almost two-thirds of meetings with patients. Proffer activities to promote health and disease prevention in a higher proportion than other professionals (especially physicians)
An exploration of nurse practitioner care to homebound frail elders	Dick, K Frazier, SC	EUA	Identify and classify the activities of providing primary care nurses to frail elderly and describe the perceptions of nurses about the results of	Providing comprehensive social, functional, emotional and physical assessments, and educational activities, continuity of care, chronic disease management,

			their activities	care	diagnosis and treatment of new diseases independently
Advanced nurse roles in UK primary care	Sibbald, B Laurant, MG Reeves, D	United Kingdom	Presenting professional landscape of nursing	the of	Nurse practitioners replacing or complementing the medical practice is a plausible strategy for improving primary care capacity without compromising the quality of care or outcomes for patients
Welfare advice in general practice: a resource for community nurses	Greasley, P	England	Examine the contribution of community nurses in terms of referrals and outcomes for patients.		Coping needs of social and economic factors related to the health of patients

Figure 2. Considerations of each study on the nursing work process.

DISCUSSION

In study in AB, to seek to know the ways of coping families with chronic diseases through home visits, the researchers reported that had the difficult task of exercising the broader view required by the nurse to understand that the work process does not restricted to acting on diseases and disorders, but it is necessary to condition the person, the family and the community to win biological health, psychological, spiritual, social and environmental.¹¹

Such evidence corroborates study pointing weaknesses in the biomedical model related to compliance with all social needs and health demands. Express the relevance of the nurse in reinventing actions or strategies to serve the population effectively⁽⁹⁾.

In the same vein, the study carried out in England, the nurses who take the agenda of public health need to face the social and economic factors related to the health of their patients with the aim to develop a skilled care.⁸

In nursing practice based on the biomedical model, the study points out that much of nursing care is through the guidelines to the success of breastfeeding, focusing on biological and physiological aspects, making sexuality seems inexistent in assistance nursing dispensed to women.¹²

This situation was also demonstrated in a study that aims to investigate the role of the nurse in the Unified Health System (SUS). Under the PHC respondents stated that, with the creation of SUS, the nurse has extended the action and inclusion in the community and social field, particularly with the implementation of the FHS. But this new way of thinking and acting is still some discomfort and uncertainty for nurses professionals, the need for active and responsible insertion in the life of communities, due, in part, by the fragmented logic, dichotomous and some resolute still present in the institutions.⁴

In this same perspective, to analyze how cases of violence against children and adolescents were approached by Nursing in PC, the researchers found that, in general, this kind of violence is not recognized as a problem to be solved by the Nursing and there is no mention as the case discussion with the other members of the team, and shared action with other public or private subjects and that the feeling of impotence impels nurses to transfer the problem to other professionals, shall be entitled only to notify and/or forward, featuring a activities focused on the concept of health as absence of disease.⁶

In contrast, the nurse is recognized for being the interlocutor and the main agent of the catalyst directed policies and programs for public health, especially for FHS.⁴ Collective activities were coordinated and,

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as a rule, performed by the nurse, houses residents.⁷

In contrast, the lack of specificity of the nurse's role was evident in the division of tasks with the nursing team. The actions to assist customers generally competed for Technical and Nursing Assistants, while the nurses were responsible for management actions. However, when the nurse put care as the center of their practice, expressing the need to be present and to contribute in the care actions of people in their area, acquired autonomy and recognition of other team members.⁹

In a study of the meanings attributed by the nurse and ACS about the health practices developed at home visit found that the practice of the nurse was focused on the intervention in health, from the investigation of the affected requirements, failing to use the space of the home visit to strengthen the bond with families and encourage professional interaction with the ACS.³

Study in Boston/USA (USA) concluded that although the respondents agreed that nurses cared for the complaints, physical examination characterized the shortest time during the visit, as it focused on psychosocial issues and functional user.¹⁴

Another US study in the New England region showed that the nurses provided advice on disease prevention and health promotion in higher proportion than other professionals, even though they have the prescription medications inserted into your practice⁽¹⁷⁾. In another state the nurse's operational focus was on education, health promotion and protection.⁴

Similar results were found in the US study in Nebraska related to the intervention at home could motivate and engage customers more effectively in changing health behavior and reduce the intensity of the need for health care, such results were related the efficient health education provided in attendance.¹⁵

On the perception of nurses about health education, the researchers found that in the context of the FHS, was linked to home visits and nursing consultations, lectures and group work, and an institutionalized practice with inference goal in community behavior also guided the normative and prescriptive perspectives.¹³

At work supervision is an activity inherent in daily life, it involves the education of

dimensions and control and was articulated to team work to provide care, enabling a more comprehensive and resolute approach. The nurses were aware of the concepts of control and social participation, but could not operate them in everyday life, beyond the technical dimension of work.¹

The above situations are confirmed in a study in which respondents recognized the nurse as having interactive and associative ability, who walked and optimizes the health care interventions, performed interactive and managerial activities that required greater involvement, organization and commitment to the real needs health of the population.⁴

With regard to teamwork, study found different reality, since there was no evidence moments of team meeting, discussions and planning.⁷

In another study, the Nurses develop actions to mobilize the care, indicating the relationship between the managerial dimension and care dimension in the development of health work. The planning was directed to specific activities to promote health and continuing education, the scales and care, and there is a systematic process of evaluation of the activities developed by the services. Coordination was related to the organization of work for the production of care, and there are few initiatives to the broader planning returned to the territory and the assessment of individual actions, collective and health unit organization.¹

In a similar study conducted in Chile he pointed out that the functions identified by the informants were grouped in care, administrative and educational. The representation of the professional was characterized by recognition and continuity of actions and professional skills figured knowledge, skill and abilities.¹⁶

The study on elderly care in the FHS Nurses mentioned as limits to efficiency of care the lack of material resources, training and involvement of other human resources in the process.²

In contrast, systematic review of study in Australia showed international evidence that primary care nurses can provide effective care and achieve positive results for the health of patients, similar to those provided by doctors. Nurses were effective in managing care disease prevention and promotion of health.⁵ In the UK, the use of

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nursing professionals to replace and complement the medical care was a plausible strategy to improve primary care without compromising the quality of or health care outcomes for patients.¹⁸

CONCLUSION

In this integrative review, in relation to the nursing work process in the PHC/PC, it became clear that the process of transition between models of health care of the population was covered with attempts to abandon the biomedical model and at the same time, internalizing the new way of thinking and acting required by larger view of the health-disease. It appears that despite the difficulties and failures observed in the nursing work process, which now focuses on collective practices, extramural and education, now in care practices, individual and doctor-centered, the nurse was recognized as having essential features to the new way of seeing and doing health, being touted as able to bring the public policy of the team and the community, plan health activities, and coordinate actions and services.

Taking up the proposal of this integrative review, they observed strong and consistent evidence about the nursing work process in almost all regions of the country (South, Southeast, Northeast and Midwest) and on different continents (South America, North America, Europe and Australia). It should be noted that most national studies included in this review, although bringing important considerations about the nursing work process, did not have this as its main objective and focus of the study. Faced with this reality, we reaffirm the importance of knowing the nursing work process with contribution to the consolidation and recognition of nursing participation in people's health care policies.

Understanding that the nurse work process is based on the Nursing Consultation (whether within the limits of the Health Unit, at home or in the community, individually or collectively) was expected to find more focus of this practice in the studies that addressed the theme. Perhaps the low scientific production in this view, is probably related to the difficulty of the nurse put the current scenario of PHC/PC as self-employed and holder of specific technology profession, care, or nursing consultation, it is not yet recognized as a

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powerful instrument of Nursing work process.

Given this reality, ratifies the need to intensify efforts for the development of research to produce evidence on the subject investigated in the Brazilian scenario, as international studies have clearly demonstrated the characteristics of the nursing work process, as well as autonomy and recognition of the nurse's role in primary health care.

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