ABSTRACT
Objective: to characterize the scientific production about assessment of health services in the context of the Unified Health System in Brazil. Method: it is an integrative literature review with sights to answer the following question "What has been published about the assessment of health services in the context of the Unified Health System in Brazil?". It was held in the following databases: Latin American and Caribbean Health Sciences (LILACS), Medical Literature Analysis and Retrieval System Online (MEDLINE) and virtual library Scientific Electronic Library Online (SciELO). Results: the highest number of publications took place in 2010, in the Southeast Region, involving studies in clinics and basic health units, with a quantitative approach. Conclusion: it is possible to characterize the scientific production about assessment of health services in the context of the Unified Health System in Brazil (known as SUS) and detect the need to increase the assessments of health actions to improve the quality of services. Descriptors: Assessment of Health Services; Assessment; Unified Health System.

RESUMO
Objetivo: caracterizar a produção científica sobre avaliação de serviços de saúde no contexto do Sistema Único de Saúde no Brasil. Método: trata-se de uma revisão de literatura integrativa com vistas a responder à seguinte questão: "O que se tem publicado e discutido acerca de avaliação de serviços de saúde no contexto do Sistema Único de Saúde no Brasil?". Foi realizada nas bases de dados: Literatura Latino-Americana e do Caribe em Ciências da Saúde (LILACS); Medical Literature Analysis and Retrieval System Online (MEDLINE) e na biblioteca virtual Scientific Electronic Library Online (SciELO). Resultados: o maior número de publicações ocorreu em 2010, na Região Sudeste, envolvendo estudos em clínicas e unidades básicas de saúde, com abordagem quantitativa. Conclusão: pode-se caracterizar a produção científica sobre avaliação de serviços de saúde no contexto do Sistema Único de Saúde (SUS) no Brasil e detectar a necessidade de aumentar as avaliações de ações de saúde para melhorar a qualidade dos serviços. Descriptores: Avaliação de Serviços de Saúde; Avaliação; Sistema Único de Saúde.

Descendants: Richardon Augusto Rosendo da Silva¹, Rhuama Karenina Costa e Silva²
INTRODUCTION

The assessment of health actions has been gaining prominence among the actions of planning and management. It is converted to consider the specificities of each context, including relationships that are processed and produce direct effects in the operationalization of health practices. The application of assessment in the field of health policies and programs unveils the dilution of a consensus about its meaning since, in this space, assessment can assume varied designs.1,2

Brazil has gradually developed several initiatives aimed at the health assessment, both in the scope of academic researches, with sight to the assessment of health services, and through the incorporation, on the part of the Ministry of Health, of evaluative researches with a view to supporting the development of sectoral policies and programs and the dissemination of their results.2

Under the scope of the Brazilian Unified Health System (SUS), the proposal of evaluative studies is considerably relevant and updated. Launched in 2011, the Assessment Program for Qualification of the SUS proposes the accomplishment of a performance assessment of systems of health services, aiming to find the quality of service and the managerial support in all three government spheres. This program considers the active presence of managers and health care professionals, with regard to the access to programs and services at all levels of care, as well as user satisfaction.3

In general, the assessment of quality of health services follows the theoretical concepts that address the three segments: structure, process and results. This triad, proposed by Donabidean, has been emphasized in the literature to make the assessment of health services. Structure focuses on the assessment of infrastructure, such as, for example physical space, stuffs and also the professionals involved in this context; process is assessed by the set of developed activities; as for assessment of results, it refers to changes in the health condition of the patient, also encompassing the user satisfaction.4,5

User satisfaction is an evident proof of quality, enabling the assessment of the quality of services provided by health staffs through the user, because its satisfaction is a valuable indicator of the care quality of health services.6

There is a difference between qualitative assessment and assessment with quality; the first corresponds to the analysis of dimensions that escape from indicators and numeric expressions, it is aimed to subjective production, and should not be restricted to structured instruments that lead to only numerical answers; as for second, assessment with quality focuses reachable dimensions, i.e., those susceptible to quantification, which excludes the intersubjective human dimension itself.1

The investigation of the patient satisfaction basically points out to two methodological natures: quantitative and qualitative approaches. The quantitative model is more usual, for being easier to handle due to the questionnaires with closed questions; it also has anonymous administration and low operating cost. Generally, the instruments presented in the literature do not have standardization and criteria for validity and reliability, especially when applied in health systems in which the investigatory items are not transferable or adaptable to the conditions of other services.2

The technical quality of health care depends not only on what is done, but rather on the obtained result, and it must be in accordance with the users’ perspective, otherwise the quality of treatment will let anything to be desired. The treatment results have received special attention of researchers and are traditionally assessed with objective measures on the clinical condition of the patient, before and after treatment, ideally in research designs with bias control, in order to get greater internal validity.4,7

The search for the quality of public health services is a concern for managers, since society is increasingly requiring excellence in the services provided to it. Nonetheless, this requirement makes it essential to create rules and mechanisms for assessing and controlling the quality in this sector. Thus, it is necessary to constantly measure the results, in order to obtain accurate and concrete information about the current situation and about what should primarily be improved, making it important to demonstrate encountered facts, conceptualize productivity in health and support the claims of continuous improvement of the above mentioned quality.8

The incorporation of assessment of health services is a challenge for the management of a complex system such as the SUS and has been debated by Brazilian society; thus, people should be aware, because the advancements in the field of health assessment, in most cases, were specific
initiatives that did not produce guidance for the managerial process. With this, researchers suggest the implementation of assessment systems aimed at capturing data that reflect the experience of the professionals inserted in the process of reorienting the health care practices.9

The participation of those involved in a given program is essential in elaborating the assessment planning. Accordingly, it is recommended that the indicators to be analyzed are grounded on the need and specific usefulness of each collective, so that the assessment results might be translated into real benefits, specific to each program.9

The services need proposals that allow people to manage the actions, work processes and resources related to health care. Indeed, the assessment of health programs and services is configured as one of these proposals, being that it is a process that determines the extent of achievement of goals and objectives and the way in which this evaluative, technical and administrative process provides subsidies for decision making. Given these considerations, the management of educational processes requires specific evaluative methodologies that meet the peculiarities of the health sector.5

This study is justified by the need to discuss the issue of assessment of health services, since it is an important tool for the planning and organization of health services. Moreover, the assessment might be translated into real benefits, whether for managers, professionals and users.

The study is relevant, because, in an attempt to provide decent services to the population through the SUS, it is important to reflect on the creation of measures that promote quality in health system.

**OBJECTIVE**

- To characterize the scientific production about assessment of health services in the context of the Unified Health System in Brazil.

**METHODOLOGY**

It is a research with quantitative approach of the integrative literature review type, chosen in a view to meet the proposal of the investigation. In order to develop this study, we went through the following steps: establishment of hypothesis and purpose of the integrative review; establishment of criteria for inclusion and exclusion of papers; definition of the information to be extracted from the selected papers; analysis of results; discussion and presentation of the results and, finally, the presentation of the review.

In order to guide this research, we have formulated the following question: what has been published about the assessment of health services in the context of the Unified Health System in Brazil?

For the survey of papers in the literature, we have performed a search in the Virtual Health Library (VHL), which includes the following databases: Latin American and Caribbean Health Sciences (LILACS) and Medical Literature Analysis and Retrieval System Online (Medline), Cochrane Online Library and Scientific Electronic Library Online (SciELO). Data were collected from October to December 2011, by using the following descriptors: assessment of health services; assessment; Unified Health System. All these descriptors are in line with the classification of the Medical Subject Headings (MeSH).

The criteria for including papers in this literature review pointed to studies on the issue: assessment of services in the scope of the SUS. We have prioritized works developed at a national level that addressed issues relating to the assessment of health services and whose full texts were freely accessible in the internet, published in the last five years (2007-2011), written in Portuguese. Thus, international studies and duplications were excluded.

In order to perform the analysis of the sample, we made use of an adapted instrument, which included the following aspects: instruments used, research locations, media and techniques employed in the assessments, as well as under the viewpoint from whom the service is being assessed, methodology used and its methodological approach, the study type, professionals and areas that most rated services; besides the publication year and region of the country that most published about the topic at stake.

After the complete reading of papers, highlighting the objectives, results and final considerations, the publications were classified and quantified. In order to maintain studies with quality in this survey, the pre-selected papers were classified as relevant and methodologically appropriate, by using a form for assessment of studies, which was prepared by the Critical Appraisal Skills Programme (CASP). The studies that reached a score of seven, given that the maximum possible was ten points, were included in the sample.
RESULTS

We have selected 14 papers, according to the above mentioned criteria, being that five are from the database BIREME and nine are from the SciELO; Caderno de Saúde Pública was the most productive journal (3) on the assessment of health services; followed by the journal of the Brazilian Society of Speech Therapy (2) and the journal of Science and Public Health (2); the others were: Epidemiology and Health Services (1), Brazilian Journal of Psychiatry (1), Revista de Saúde Pública (1), Journal of the Nursing School from the USP (1), Text and Context in Nursing (1), Acta Paulista de Enfermagem (1), Ciencia y Enfermería (1) and Journal of Public Administration (1). As for publication year, 2010 was the predominant, followed by 2011 and 2009, as shown in Table 1.

Table 1. Distribution of studies identified according to the publication year, 2011.

<table>
<thead>
<tr>
<th>Year</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>1</td>
<td>7,15</td>
</tr>
<tr>
<td>2008</td>
<td>1</td>
<td>7,15</td>
</tr>
<tr>
<td>2009</td>
<td>3</td>
<td>21,43</td>
</tr>
<tr>
<td>2010</td>
<td>6</td>
<td>42,85</td>
</tr>
<tr>
<td>2011</td>
<td>3</td>
<td>21,42</td>
</tr>
<tr>
<td>Total</td>
<td>14</td>
<td>100,00</td>
</tr>
</tbody>
</table>

Regarding the place of publications, the Southeast Region showed the greater number of published papers (6); the regions that less published on the issue at stake were Midwest and North, with one paper for each one, as can be seen in Table 2.

Table 2. Distribution of studies identified by Brazilian geographic regions, 2011.

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>1</td>
<td>6,67</td>
</tr>
<tr>
<td>Midwest</td>
<td>1</td>
<td>6,67</td>
</tr>
<tr>
<td>Northeast</td>
<td>3</td>
<td>20,00</td>
</tr>
<tr>
<td>South</td>
<td>4</td>
<td>26,66</td>
</tr>
<tr>
<td>Southeast</td>
<td>6</td>
<td>40,00</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>100,00</td>
</tr>
</tbody>
</table>

It was made clear that regarding the research type, we have found quantitative researches (6), qualitative researches (5) and mixed researches (quantitative and qualitative) (2). In relation to study type, there was a greater number of exploratory studies (6), followed by evaluative studies (4) and cross-sectional (3); one literature review study were also found.

The researches were conducted in several locations, being that medical centers (4) and basic health units (3) were the most chosen places for the accomplishment of researches, accounting for 30,77% and 23,08%, respectively. Other chosen study locations were: specialized services (2), hospital (1), clinics (1), FHP units (1), maternity (1) and, lastly, user residence (1).

With respect to the research objects, the professionals were the focus of attention of the studies (41,18%), followed by users (35,30%); as can be seen in Table 3, some studies had more than an study object, thereby counting for more than one category.

Table 3. Research objects used in publications, 2011.

<table>
<thead>
<tr>
<th>Objects</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professionals</td>
<td>7</td>
<td>41,18</td>
</tr>
<tr>
<td>Users</td>
<td>6</td>
<td>35,30</td>
</tr>
<tr>
<td>Users’ families</td>
<td>2</td>
<td>11,76</td>
</tr>
<tr>
<td>Managers</td>
<td>1</td>
<td>5,88</td>
</tr>
<tr>
<td>Academic</td>
<td>1</td>
<td>5,88</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>100,00</td>
</tr>
</tbody>
</table>

Concerning the area of operation of assessments and publications, the area of General Health was the most productive, without specifications (4). The area of Mental Health (3) and Dentistry (3) were the most productive specific areas; next, we can also find studies in the area of Speech Therapy (2), Nursing (1), Urgency and Emergency Department (1) and Women’s Health (1).

Regarding the use of assessment tools, the following data were obtained: use of questionnaire by four studies, use of interview scripts by six studies; semi-structured interviews were used in two productions and
systematic observation was observed in three
productions. See Table 4.

<table>
<thead>
<tr>
<th>Tools</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>4</td>
<td>30.77</td>
</tr>
<tr>
<td>interview scripts</td>
<td>6</td>
<td>46.15</td>
</tr>
<tr>
<td>Semi-structured interviews</td>
<td>2</td>
<td>15.38</td>
</tr>
<tr>
<td>Systematic observation</td>
<td>3</td>
<td>23.08</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>100.00</td>
</tr>
</tbody>
</table>

In relation to means and techniques employed in assessments; it was realized the use of several ways of assessment. The most commonly used method was the Chi-square Test, given that it was used in three of the analyzed studies, followed by the Tukey’s Test, which was used by two studies, equal to the means of Content Analysis. Some studies reported using more than one technique and only one of the analyzed papers did not mention the used technique. The means and techniques mentioned in the studies were: Chi-Square Test, Tukey’s test, Spearman correlation, Student T-Test, ANOVA, Donabidean, Likert’s Scale, use of the Critical-interpretative Strand, Content Analysis, Graduated Scale, Descriptive Statistics, Fourth Generation Assessment, Quality Indicators and Sampling Technique.

**DISCUSSION**

During the beginning of the cut-off period, between 2007 and 2008, we did not find many publications related to the assessment of health services. Nevertheless, we note that in the last few years, from 2008 to 2011, the flow in publications on the issue at stake has significantly increased, probably due to the prominence acquired by the assessment of health services in the scientific field.

The Southeast Region has concentrated the most of publications, and this fact might be explained because this is a geopolitical region in which there are the largest research centers in Brazil. It was also observed that the Northeast Region showed a small percentage, in comparison with the most productive regions, and that Midwest and North had only one (each) publication on the issue at stake.

In the last decade, according to data from the Ministry of Science and Technology, there was greater incentive to invest in researches in the scope of the post-graduation degree, both in federal and state institutions. Thus, we expect an expansion in the number of *stricto sensu* post-graduation courses in all regions, especially in less developed regions of the country, in order to hope for a significant increase in scientific productions in such locations.

It was found that the amount of studies conducted in clinics and basic health units is well above in relation to other research locations. It is necessary to note the small number of studies involving the patient’s home environment, which was observed in only one paper. Studies conducted in patients’ homes, where they are mostly inserted, allow the researcher to get closer to the social and emotional reality of the patient.

Regarding the methodological approach of researches, there was an almost equivalence in the choice of quantitative and qualitative methods in the surveyed papers. The largest number of quantitative researches might be interpreted by the fact that assessments make use of concrete data in their evaluative methods, besides it is more usual, for being easier to handle due to the questionnaires with closed questions; it also has anonymous administration and low operating cost. As for qualitative approach, it is held by the fact that there is constant use of interviews and observations in these evaluative studies; it is widely used by studies showing that qualitative research methodologies are those able to incorporate the question of meaning and intentionality as inherent to acts, relations and social structures.

The interview with professionals, who comprise the bigger portion of this research, is of paramount importance to obtain information to help in the comprehension of the factors that facilitate or hinder the operationalization of the assessed service; however, all research objects found are undoubtedly important for the development of studies of this lineage.

The prevalence of General Health leaves a very broad sense to the assessments; areas such as Mental Health and Dentistry have been highlighted with the publication of studies on the issue at stake, which serves as an incentive to other areas, such as Nursing, Speech Therapy and other that were not found, to researches and publications of the assessments of the services that these areas offer, in order to obtain answers about the quality of the provided service.

In relation to the means used for the performed assessments, it was possible to verify the use of questionnaires and interviews in nearly all publications, as well as Documental Analysis. These means are highly
required in the assessments of services, as suggested by Donabidean, mentioned by some researchers in our study. Some used techniques and instruments were observed, such as the techniques of observation and monitoring, Documental Analysis, Focus Group, use of Likert scales with 4 points, triangulation of methods and quality indicators.

The assessment of health actions, being a context of reflection and practice, involves a subjective and objective network, from which it is possible to envision possibilities and challenges. As it was observed in this study, the assessment of health actions is gaining prominence among actions for planning and management, and is present in several areas of knowledge, country regions and units that provide health services; therefore, it is something liable to be carried out with a wide range of options. Accordingly, it is extremely important that the variety of studies of assessment of health services can be enhanced, because studies assessing services in the context of the SUS are still scarce.

Nursing had not been highlighted in assessment of services, because, in most studies, the assessment of nursing services has emphasized the aspects punctuated by programs, amount of nursing staff in relation to the number of hospital beds and notes in the report of the medical chart of the patient. Nonetheless, these criteria are not considered sufficient for the assessment of the care quality. Thus, the contribution of nurses in performing evaluative studies on user satisfaction in the scope of the SUS might be seen as a way of contributing to the improvement of the health system and health care practices towards the population, and it is a topic that must be deepened.

**CONCLUSION**

It was observed that, in the analyzed papers, the used instruments were, mainly, interviews and questionnaires, being that systematic observations appeared in a lesser extent; medical centers and basic health units were the most valued research locations. The most used methodology and its methodological approach were, respectively, exploratory studies and quantitative researches.

The means and techniques employed in the assessments were various, with predominance of Chi-square Test, Tukey's Test and Content Analysis. Services, according to this study, are most valued from the viewpoint of professionals and users.

The region that published more items on the issue at stake was the Southeast; and the prevalent publication year was 2010. General Health was the area that has assessed more services, followed by the specialties of Dentistry and Mental Health.

Assessments are made using several techniques, tools and instruments, which can make it difficult to compare evaluations; however, this diversity is interesting to assess each service according to its differences and specialties. As already demonstrated, the assessment of the quality of health services follows the theoretical concepts that address the three segments: structure, process and results; but, even in the selected studies, it was not possible to observe the assessment following the above mentioned modalities.

We suggest a greater attention towards the productions about assessments of health actions to improve the quality of services and, along with them, the users’ satisfaction, given that this last factor is the most evident proof of quality.

**REFERENCES**


ISSN: 1981-8963
DOI: 10.5205/reuol.4773-39313-1-SM.0709esp201309

English/Portuguese

J Nurs UFPE on line., Recife, 7(spe):5703-10, Sept., 2013

5708


Monticelli M, Brüggemann OM, Guerini IC, Boing AF, Padilha MF, Fernandes VB. A...
h.xls&src=google&base=LILACS&lang=p&nextA
ction=lnk&exprSearch=549837&indexSearch=ID
h.xls&src=google&base=LILACS&lang=p&nextA
ction=lnk&exprSearch=547216&indexSearch=ID

Submission: 2013/02/12
Accepted: 2013/08/10
Publishing: 2013/09/15

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English/Portuguese
J Nurs UFPE on line., Recife, 7(spe):5703-10, Sept., 2013