



Quality of Reception with Risk Classification in Urgent and Emergency Services

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Authors' contributions

This work was carried out in collaboration among all authors. Author WRDSL designed the research. Authors VLN, TDLVT, FSDS, VHAL, TAFDA and DSDS wrote the manuscript. All authors read and approved the final manuscript.

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ABSTRACT

Introduction: The Reception with Risk Classification (ACCR) is an important tool for the Urgency and Emergency Services (SUE). Objective: To describe the frequency with which publications on ACCR have been occurring in the Brazilian scientific literature in recent years.

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Methods: A bibliographic study was carried out, with a qualitative approach, for literature review based on the use of the keyword "reception with risk classification", in the Regional Portal of the VHL using two databases.

Results: We found 102 publications, 68 belonging to the LILACS database and 52 to the BDEF database, where 13 articles that were published between 2015 and 2019 were selected for full reading. It was noted that most of the publications focused on 2015, with emphasis on the southern region, in addition to most portraying the evaluation of the ACCR by the nurse.

Conclusion: It is evident the need to expand research on quality in the ACCR both for the qualification of nursing professionals, as well as in the structural and human resources sectors, especially in the northern region of the country.

Keywords: Screening; health; survey; tertiary health care.

1. INTRODUCTION

The services with urgent and emergency care aim to welcome and properly attend to users, using a rapid form of evaluation, stabilizing the disease and thus providing immediate access to the care unit [1].

Humanization is one of the factors that start from a good organization, bureaucratization, technology, working conditions, the organization of care and the mechanization of work [2]. Thus, in a simplified way, although the two definitions – urgency and emergency – submit to immediate care, urgency is characterized by a condition with or without potential risk of death, while emergency results in imminent risk of death or intense suffering [3].

The Urgency and Emergency Services (SUE) aims to assist people with acute health problems. However, the users, in a mistaken way, seek the service for often outpatient care. In this way, the care process that should be carried out in primary care, ends up having to be solved in tertiary care [4]. Thus, characterizing itself as one of the potentially decisive interventions in the reorganization and realization of health promotion in the network, welcoming with risk assessment and classification occurs from the analysis, problematization and proposition of the team itself, which is integrated as a subject of its work process [5].

In this way, the "triage" came to be designated as risk assessment and classification (ACR) and aims to verify the patients who need emergency care, according to the risk presented, with a service directed to the user, thus bringing new practices, where it is not in the routines but in a diversified and dynamic service [6].

The purpose of welcoming with risk classification (ACCR) is not to reject or exclude the user, but

rather to organize the flow of patients, selecting the best care within the system for the diagnosis and treatment of the health problem presented by the user [7].

Studies focused on knowledge about the ACCR by nurses can help in the care management of clients in the urgency and emergency sector, improve the flow of care, as well as increase professional and user satisfaction, in addition to providing greater visibility of the service [8].

Given the importance of the ACCR within hospital units, the general objective of the present study is to describe the frequency with the process of welcoming and evaluation with risk classification that has been published in the scientific literature in Brazil and how this theme has been addressed.

The research seeks to deepen the theme and the possible changes in the ways of operating the care, seeking more effective means for the care provided to the user.

2. MATERIALS AND METHODS

To carry out the literature survey on the ACCR, we opted for the bibliographic research, using a qualitative approach.

Data collection took place in a virtual location, being the Regional Portal of the Virtual Health Library (VHL), using the LILACS and BDEF (nursing database) databases.

The inclusion criteria were: articles in Portuguese and in English that were published in the last 5 years, being excluded those that presented only abstracts or that required the purchase of the material. Data collection was conducted in June 2019.

Due to the nature of the study, where there was no manipulation and research with human beings, there was no need to submit the project to the ethics committee, in this bias the study is supported by resolution 510 of 2016 [9].

3. RESULTS

We found 102 publications using the keyword "reception with risk classification" in the VHL Regional Portal using two databases: LILACS and BDEF. Of the 102 publications, 69 belonged to the LILACS database and 52 to the BDEF database, which were selected for full reading only articles that were published between 2015 and 2017 that dealt with the ACCR in the urgency and emergency unit.

After reading the publications, 9 were selected from the LILACS database and 3 from the BDEF database, totaling 12 titles searched.

Regarding the research method, 5 presented the quantitative approach, 5 the qualitative approach and 2 presented both approaches (Table 1).

In the present study, the regions in which the most research in ACCR was concentrated were the southeast (3), south (2) and north (1). In addition, the 13 publications observed portrayed the quality of the ACCR, with 9 evaluations by professionals and 3 by users. It was also observed that the largest number of scientific publications on the subject occurred in the year following this Resolution of the CFM (Federal Council of Medicine) n. 2079 of August 14, 2014, in 2015, when 7 publications were counted; followed by the year 2016 (3 publications), and no publications on ACCR were found in the year 2017 in this research, but a study of the year 2019 was found, as can be seen in Table 1 below:

Table 1. Presentation of scientific publications about the reception with risk classification with authors' names, year of publication, name of the journal, methodological approach and size of the study

Magazine	Type of publication	Author/ year	Study location	Type of premises	Methodological approach	Dimension
UERJ Nursing Magazine	ARTICLE	Júnior et. al. (2015)	Rio de Janeiro	Hospital	Cross-sectional / quantitative	Fulfillment Process
Anna Nery School Nursing Magazine	ARTICLE	Costa et. al. (2015)	Paraná	Hospital	Exploratory-descriptive, with a quantitative approach	ACCR Service Evaluation
Bahian Public Health Magazine	ARTICLE	Bartel et. al. (2015)	Rio Grande do Sul	Unidade Básica de Saúde	Experience Report	ACCR Service Evaluation
Magazine Health in Debate	ARTICLE	Feijó et. al. (2015)	Rio de Janeiro	Hospital	Individuated / transverse	Risk Rating Analysis
Acta Paulista Nursing Platform	ARTICLE	Inoue et. al. (2015)	Paraná	Hospital	Exploratory with a quantitative approach	Evaluation of the ACCR Screening System
Nursing Mining Magazine	ARTICLE	Inoue et. al. (2015)	Paraná	Hospital	Descriptive-exploratory, with a quantitative approach	Evaluation of the workers: the structure, the process and the result of the implementation in the ACCR
Nursing Mining Magazine	ARTICLE	Rates et. al. (2016)	Minas Gerais	Hospital	Quantitative approach	Nurses' work process at ACCR
Journal of the Nursing Network of the Northeast	ARTICLE	Sakai et. al. (2016)	Paraná	Hospital	Qualitative	Feelings of nurses in the ACCR
Journal of the Nursing Network of the Northeast	ARTICLE	Weykam p et. al. (2016)	Rio Grande do Sul	Hospital	Descriptive, exploratory with a qualitative approach.	Nurses' knowledge about the ACCR
Nursing Mining Magazine	MASTER'S THESIS	Martins (2016)	Minas Gerais	Hospital	Qualitative approach as a research method	To analyze the work processes of nurses in urgency and emergency
Journal of	ARTICLE	Nogueira	Pará	Instituição de	Descriptive,	The knowledge of a

Magazine	Type of publication	Author/ year	Study location	Type of premises	Methodological approach	Dimension
Nursing and Health Care		et. al. (2016)		Ensino Superior (IES)	exploratory research with a qualitative approach	group of students from the Undergraduate Nursing Course
CARE Magazine	ARTICLE	Pagliotto et. al. (2016)	São Paulo	Hospital	Quantitative, retrospective, cross-sectional and descriptive study	Present the profile of the urgency and emergency sector, according to the ACCR
Brazilian Journal of Health Promotion	ARTICLE	Campos et al. (2019)	Rio Grande do Sul	Hospital	This is a descriptive exploratory study with a qualitative approach.	To analyze the perception of health professionals and users in relation to ACCR in urgency/emergency

4. DISCUSSION

When analyzing the researches reported here, it can be observed a higher concentration of publications on ACCR in the southern regions of the country, a phenomenon that can be explained by the presence of a greater number of nursing courses than the others, since it is a region that grows the most economically in Brazil, with a centralization of undergraduate courses in the country and an increase in competitiveness in search of job vacancies [10].

As can be seen in the articles in Table 1, it was noted that almost 70% of the publications were evaluations performed by health professionals. A fact that can be corroborated by the routine performance of nurses as first contact professionals in most health services, given that this professional controls the flow of supply and demand of users in emergency services, thus cooperating to reduce morbidity and mortality [6], becoming the protagonist agent of the ACCR scenarios.

It is worth mentioning that Resolution CFM (Federal Council of Medicine) n. 2079 of August 14, 2014 made mandatory the implementation of Reception with Risk Classification for the care of patients in all 24-hour emergency services of the intermediate complexity network (UPAS – Emergency Care Units) and hospitals. This may explain a greater number of publications shortly after the implementation of the new protocol of Welcoming with Risk Classification and its real effectiveness in the quality of care, either as a measure to support the change of rules, previously neglected, or even to demonstrate that this policy can serve as a more effective protocol for patient safety and optimization of the effectiveness of care by professionals in health services. Since

after these studies have observed such optimizations, the theme is no longer unpublished, and has become routine, which explained an increase in the loss of interest in this research theme, with only 3 years of implementation, justifying the scarcity of research found after this period [11].

5. CONCLUSION

It is noted that, within the scope of the ACCR, the focus is almost entirely on the nursing professional, because he, in fact, leads this type of care, becoming a key piece for its agility. This fact is evidenced by the greater amount of research focused on the evaluation of the ACCR by nurses.

However, the proper functioning of the ACCR in the urgency and emergency units does not depend exclusively on the nurse, because in addition to the need to have qualified professionals for this care, it is also necessary to identify any weaknesses that may exist, ranging from the structure of the hospitals to the management of the service.

In this sense, the expansion of research that evaluates the SUE in a more comprehensive way is necessary to identify the real problems of the units, taking into account not only the capacity and agility of the nursing professional in welcoming, but it is also important for these studies to subsidize structural and human resources improvements so that the logic of care is transformed.

It is also necessary to broaden the discussions on welcoming, especially in the northern region of Brazil, so that academic publications on the subject are encouraged in order to promote reflections on the practice of health care processes.

Qualitative research is a good tool for approaches that involve social issues, as in the case of public health, because it allows to elucidate the thinking and acting of the subjects involved in a given theme.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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