



RESEARCH ARTICLE

OPEN ACCESS

SYSTEMATIZATION OF NURSING ASSISTANCE AS A SCIENTIFIC PRACTICE IN ASSISTANCE TO PRENATAL IN A FAMILY HEALTH STRATEGY

¹Débora Dinnaly de Souza Cravo, ¹Gabriel Martins da Silva, ¹Ianny Ferreira Raiol, ¹Juliane Lima Alencar, ¹Luelma Pereira dos Santos Silva, ²Rubenilson Caldas Valois, Milena and ³Farah Damous Castanho Ferreira

¹Academic of the course of Bachelor of Nursing at the Metropolitan University Center of the Amazon
²Nurse, Ph.D. in Tropical Diseases by the Nucleus of Tropical Medicine, Professor at the State University of Pará and the Metropolitan University Center of the Amazon. Belém, PA, Brazil. Vice-leader of the research group on Educational Practices in Health and Care in the Amazon – PESCA
³Nurse, Master.in Management by University of Rio de Janeiro. Professor at the Metropolitan University Center of the Amazon. Belém, PA

ARTICLE INFO

Article History:

Received 27th March, 2019
Received in revised form
15th April, 2019
Accepted 20th May, 2019
Published online 30th June, 2019

Key Words:

Prenatal Care. Nursing.
Primary health care.

ABSTRACT

Objective: To report the experience after an educational action on the use of evidence-based practices in the systematization of prenatal nursing care in a family health strategy. **Methodology:** The activity was carried out by nursing students of the 6th semester and had the participation of a family health strategy team. The action consisted of a conversation wheel divided into three moments: 1) identify how the team organizes its work to provide care for pregnant women during prenatal care, 2) immersion of the proposed content, for the resolution of a clinical case from the Nursing Care Systematization perspective; 3) Application of the Free Words Association technique - FWAT, later evaluated by IRAMUTEQ to verify the assimilation of the proposed content through the similarity analysis. **Results and discussion:** It was divided into 3 categories: Understanding about Nursing Diagnosis in the process of Nursing care systematization; Utilization of the Systematization of nursing care in prenatal care; Analysis of similarity through the FWAT using the IRAMUTEQ software. **Conclusion:** There was a lack of knowledge about the systematization of nursing care as a scientific practice on the part of the unit's professionals and that the nursing performance based on its scientific evidence generates positive products for care.

Copyright © 2019, Débora Dinnaly de Souza Cravo et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Débora Dinnaly de Souza Cravo, Gabriel Martins da Silva, Ianny Ferreira Raiol, Juliane Lima Alencar, et al. 2019. "Systematization of nursing assistance as a scientific practice in assistance to prenatal in a family health strategy", *International Journal of Development Research*, 09, (06), 28204-28208.

INTRODUCTION

The Evidence Based Practice (EBP) is a health care tool where it is possible to design action based action on the best evidence. It involves the definition of a problem, the search and critical evaluation available, implementation of the evidence in practice and evaluation of the results obtained, which also characterizes the Nursing Process (NP).

*Corresponding author: Débora Dinnaly de Souza Cravo, Academic of the course of Bachelor of Nursing at the Metropolitan University Center of the Amazon

In addition, the EBP incorporates the professional's clinical competence, client's demands and the use of a systematized method (LACERDA *et al.*, 2011). In the context of public health nursing has several instruments, emphasizing the Nursing Care Systematization (NCS), a tool used in the management of care that provides subsidies for the organization of nursing care, with the EP being one of its large pillars (RIBEIRO; PADOVEZE, 2018). It is worth noting that the NP is regulated by the Law of Professional Exercise No. 7,498/1986 and by the Resolution of the Federal Nursing Council n° 358/2009 that has NCS. This resolution addresses the obligation to implement it in institutions that offer nursing

care, including Primary Health Care (PHC), noting that the entire process must be properly documented, that is, registered, so that it can also serve as support to the professional and scientific basis. In this way, Nursing in Primary Health Care (PHC) will encompass actions that extend from technical procedures, such as those related to the core of professional knowledge such as the interaction between users and workers, to broader elements such as health planning, assistance, coordination of care and evaluation of the actions developed by the team (ACOSTA *et al.*, 2018). In this perspective, the Ministry of Health (MH) implemented the Family Health Strategy (FHS), defined as a priority strategy for the organization of PHC in the country, aimed at strengthening actions to prevent diseases and diseases, rehabilitate and promote population health, including in this regard women's health during the pregnancy-puerperal cycle, and, in this direction, provide a service that is able to meet the demands inherent to that period (BRASIL, 2009). Decree No. 94,406 / 87, which determines the Law of Professional Exercise of Nursing, states that low-risk prenatal care may be followed by the nurse. That is, it is demonstrated that the nurse has support and understanding of the processes that permeate pregnancy-puerperal period. It is worth noting that the responsibility of nurses in prenatal care has repercussions on indicators such as maternal and neonatal mortality and goal setting (Brazil, 1987).

Nurses should know the SAE and apply them in their work by instituting their commitment to improving the quality of care and promoting autonomy. Among the actions and challenges of PHC, the nurse's performance in prenatal care programs involves her clinical preparation to identify real and potential problems of the pregnant woman, family and community, with a view to the proper management of the various practical situations (KRAUZER *et al.*, 2005). However, it is verified that the majority of professionals demonstrate a lack of knowledge about this methodology of work, not using it in professional practice or only performing part of its stages being reproduced by nurses in a way that is disjointed with reality (KRAUZER *et al.*, 2015). Therefore, this theme was chosen after the observation in the experience in the service in curricular stages and discussions in the classroom, where it was verified the lack of use of this instrument in the context of primary care, with the perspective of rescuing the magnitude of NCS as a of the main work tools that the nursing team has and take reflection on the benefits that are potentiated the team. In addition, the objective of the study was to report the experience after an educational action on the use of evidence-based practices in the systematization of prenatal nursing care in a family health strategy, ratifying its scientific, importance and benefits of its application in the context of basic health care, with emphasis on prenatal consultations.

MATERIAL AND METHODS

This is a qualitative-descriptive study characterized as an experience report about the use of Nursing Care Systematization as a scientific practice in prenatal care. The report was based on the experience of an educational action applied on April 17, 2019, carried out in a Family Health Strategy (FHS), in the neighborhood of Mangueirão, in the municipality of Belém/PA, with the participation of the FHS minimum team: one nurse, one physician, one nursing technician, four community health agents, and two nursing academics.

Regarding the ethical aspects, due to the present study being an experience report, there wasn't need for submission and evaluation of the Research Ethics Committee, according to Resolution 466/12 of the National Health Council (NHC) and Resolution 510 of 2016. The authors of the sources researched were respected, referencing the authors cited in the text and in the bibliographical references according to the current law that governs the copyright in the country. The educational action was carried out by nursing students from the 6th period, consisted mostly of a conversation wheel divided into three moments: 1) it was characterized by identifying how the team organizes its work to provide assistance to pregnant women and the application of pre-elaborated to verify prior knowledge about NCS, to guide the conversation round using illustrative banners to be explain the NCS and flow of work processes about prenatal; 2) The proposed content was immersed, where the participants were divided into two teams to resolve a clinical case from the NCS perspective; 3) Application of the Free Words Association Technique (FWAT) technique, with the following evocative words: Nursing theory, nursing care systematization, practice, result and team. Subsequently evaluated by IRAMUTEQ software (*Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires*), to verify the assimilation of the proposed content through the analysis of similarity.

RESULTS AND DISCUSSION

The educational action carried out in a Family Health Strategy (ESF), on April 17, 2019, which included the participation of the minimum ESF team: a nurse, a doctor, a nursing technician, four community health agents and two nursing academics. The results were investigated and distributed in three categories, namely: Utilization of the Systematization of Nursing Care in Prenatal Care, Understanding on Nursing Diagnosis in the Nursing Care Systematization Process and Similarity Analysis through the TALP technique using the IRAMUTEQ.

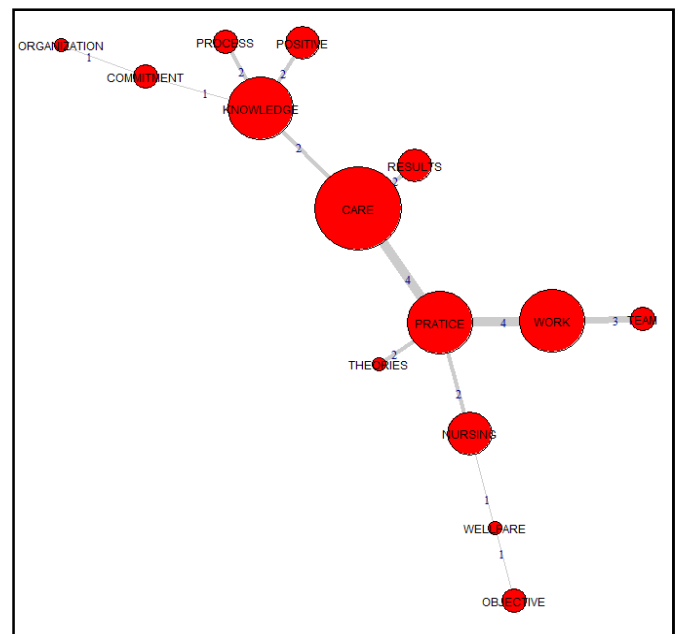
Use of nursing care system in prenatal care: At the first moment of the action, it was noticed that all the staff were well instructed on their attributions, capture, follow-up, treatment and prevention of prenatal problems, but when asked about the difference in relation to the attribution of the nurse and doctor did not know In contrast, the team was unaware of the nursing professional's assistance, since they believed that the nursing role was merely managerial. The application of NCS becomes complete from the moment of interaction between user and professional because its effectiveness comes from the cooperation of reports with the intention of drawing up an authentic and effective plan in view of positive results (VARELA *et al.*, 2012). Regarding the knowledge of the SAE and the EP and its implications, as a product it was found that no professional had knowledge or had heard about, other than being a professional nurse. In view of this, resolution COFEN 358/2009 establishes, under the guidance and supervision of the Nurse, that the Nursing Technician and the Nursing Assistant participate in the execution of the Nursing Process. In this way, it is important that the whole team understand the concepts of NCS and EP, so that they have the knowledge that they are included and participating in the accomplishment of this process within their competence and attributions. According to Moreno *et al.*, (2015) In the basic units nurses deal with innumerable activities to be developed that go from promotion to health, care and management, besides consist of

degrees of responsibility and complexity depending on the function exercised. Still, it is noticed that the team sees the nurse of the unit only as a professional manager, for not knowing how the nursing care process is exercised, in what grounds the invisibility of their care. Still, it is noticed that the team sees the nurse of the unit only as a professional manager, for not knowing how the nursing care process is exercised, in what grounds the invisibility of their care.

Comprehension Nursing Diagnosis in the Nursing Care Systematization Process: Regarding NCS, it was observed the misunderstanding of the team, with the exception of the nurse, on one of the stages of systematization, which was the nursing diagnosis (ND), which consists in structuring knowledge and seeking the definition of the role and of the nursing domain, while assisting in the evaluation of the care provided, directing care, promoting the teaching and defining the functions of the nursing team (Freitas *et al.*, 2017). It was also noted the lack of knowledge of these professionals about the manual used to formulate and name the ED, the American Association of Nursing Diagnoses (NANDA-International), which is a standard of terminology that categorizes and classifies nursing problems. Tannuree Pinheiro (2017), affirm that the use of NANDA is relevant for the accomplishment of clinical and practical nursing activities enabling identification of patients' problems aimed at rehabilitation and health promotion. However, the nurse of the unit is not based on the manual presented, having as reference the CIPESC (International Classification of Nursing Practice in Collective Health) being a process of implantation of a nursing vocabulary that was included in the computerized system of basic units of (RIBEIRO and PADOVEZE, 2018). The study was carried out in the context of the. In what was observed the justification of the non-use of the NANDA, it was because it has a look at the hospital scope and does not supply all the needs regarding the demands of collective health. Since the use of care based on the instruments available to nurses, it reflects in an individualized and humanistic attention (SALIMENA *et al.*, 2014).

Similarity analysis using the FWAT technique using IRAMUTEQ: The free words association technique (FWAT) is an instrument that is structured through the evocation of previously defined words, taking into account the sample or function of the object in research (COUTINHO, 2017). At the end of the educational process participants were asked to write on a sheet of paper five words that came to mind after hearing the following evocative phrases: Nursing theory; systematization of nursing care; practice; result and team. Later, these collected words were introduced in Excel spreadsheet and later transported to the Iramuteq program, using matrix analysis and represented in a similarity analysis (figure 1). It is based on graph theory and makes it possible to distinguish its result through the correlation between words within a textual corpus, differentiating the common and specific parts (SOUZA *et al.*, 2018). It was observed that there were four words that stood out most in the lines: "care", "practice", "work" and "knowledge". From them branch out others that have meaningful expressions: "result," "humanization," "positive," "organization," "commitment," "team," "nursing," "evolution," "theories," "well-being" (Figure 1). In this way, it can be inferred that the discourses of the participants confer with the exposed in the literature, in which the NCS becomes complete from the moment of interaction between user and professional, since its

effectiveness comes from the cooperation of reports with the intention to draw up an authentic and effective plan for positive results. (VARELA *et al.*, 2012). The implementation of the NCS, allows an improvement in the assistance and more effective interventions in the health quality (GALVÃO, SAWADA, 2013). In addition to this perception of the concept of the same, the analysis of the textual corpus is done, it was observed that the words practice and care are in central focus, and can be interpreted as dependent and complementary to one another, and the other branching words are integrated by adding value to the word "practice" and "care." Thus, it is demonstrated that practices based on scientific evidence are directly supporting the development of care, however for it to be effective, it is necessary that the professional has humanization to generate good results.



Nursing care is considered a primary function of the nurse, whose goal is health promotion, disease and injury prevention, rehabilitation and rehabilitation. The focus of care practice should be based on interaction that allows for dialogue and respect and needs to be ethical and based on scientific and personal knowledge. Nursing care, insofar as it causes repercussions both on the person who performs it and on the person who receives it, the patient's well-being is the result of the response, they compose the idea about nursing care. (Duarte *et al.*, 2012). Silva *et al.* (2015) states that in the gestational period, women seek health services more frequently in search of care. Whereas, in prenatal care they present misinformation about relevant aspects that involve pregnancy due to the occurrence of major changes in their body. Thus, professionals who are part of the team of the health unit should advocate for a qualified service, based on humanization and focused on a relationship of respect and cordiality with the user and their family. From this perspective, it can be understood that to carry out the care it is indispensable that there be scientific knowledge, since it is positive for the process of systematization of nursing care, being seen as an aid tool for the organization of care and the commitment of the team. Scientific knowledge enables nurses to be more confident in making clinical decisions, their search through training and professional updates to enhance nurses' skills and abilities, both for themselves and to share it with the nursing team, which has a greater impact recognition and

autonomy in the exercise, through training activities aimed at better care practices in the pregnancy cycle (COPELLI *et al.*, 2017). It is also evidenced the understanding of the team in understanding that the practices based on scientific evidence is a health care tool used by nursing, which supports the stages of the work process, mainly in the evaluation of the results obtained. In which this tool also encompasses nursing theories with the goal of providing the user's well-being. In addition to offering the best evidence to value the work and improve the synchronism of the team. It should be noted that theories work as a structural foundation for the implementation of NCS, directing nursing actions containing fundamental elements that provide a systematic means of collecting data to describe, explain and predict practice, promote it in a rational and systematic way, guided by goals and results, where its principles and assumptions understood correctly leads to adequate care for the population served (TANNURE; PINHEIRO, 2017).

Conclusion

At the end of the action, there was an ignorance of the systematization of nursing care as a scientific practice by other professionals of the FHT, not only in prenatal care, but in the general basic care setting. In addition, the educational action was very efficient in the prism of ratifying the scientific base of the NCS. In this perspective, the failure and invisibility of the NCS generate unsatisfactory products not only for assistance, but also regarding the recognition of the nursing attributions in the vision of the other professionals of the team and the population to which this professional provides services. In view of this, the continuous action within the services proves to be very important in that it involves the team to carry out an evaluation about their assistance practices, knowledge about the performance of each member of the team in order to potentiate improvement of actions. The result presented by *IRAMUTEQ* from the similitude analysis showed a satisfactory result about the verification of the knowledge obtained by participants after the action, that the care practices used in nursing care are intrinsically related to scientific bases, the organizational process of its actions and commitment of the team with the intention of offering humanized assistance prioritizing the well-being of its clients. Nursing actions are fundamental in the promotion of health and articulation of its organizational processes among its various axes of action, and understand that the systematization of nursing assistance and places the nursing profession as a science, and undoubtedly crucial to the nurse's conduct at all levels of complexity. Therefore, through SAE, it is possible to plan, perform and evaluate their actions, so as to use instruments such as nursing theories, to include the team members in the work process, thus enhancing a more systematic and cohesive process within their attributions.

REFERENCES

- Acosta, A. M. *et al.* 2018. Atividades do enfermeiro na transição do cuidado: realidades e desafios. *Revenferm UFPE online.*, Recife, v.12, n.12, p.3190-7, dez. disponível em: <https://doi.org/10.5205/1981-8963-v12i12a231432p3190-3197-2018>
- Brasil, Ministério da Saúde. 2009. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. O trabalho do agente comunitário de saúde. Brasília: Ministério da Saúde; Disponível: http://189.28.128.100/dab/docs/publicacoes/geral/manual_acs.pdf.
- Brasil, Ministério da Saúde. Decreto N°94.406/87: Dispõe sobre o exercício da Enfermagem. Brasília: Gabinete do Ministério, 1987. Disponível em: http://www.coren-ro.org.br/decreto-n-9440687-dispoe-sobre-o-exercicio-da-enfermagem-e-da-outras-providencias_767.html
- Conselho Federal de Enfermagem. Resolução n° 358/2009. Dispõe sobre a Sistematização da assistência de enfermagem e a implementação do processo de enfermagem em ambientes, públicos ou privados, em que ocorre o cuidado profissional de Enfermagem, e dá outras providências [Internet]. Rio de Janeiro: COFEN; 2009.
- Copelli, F. H. S. *et al.* 2017. Gerência do cuidado e governança de enfermagem em uma maternidade: teoria fundamentada. *Rev Bras Enferm* v.70, n.6, p. 1347-53. nov-dez. Disponível em: <http://dx.doi.org/10.1590/0034-7167-2016-0116>
- Coutinho, M. P. L. 2017. A técnica de associação livre de palavras sobre o prisma do software tri-deux-mots (version 5.2). *Revista Campo do Saber*. v.3, n.1 jan/jun. disponível em: <http://periodicos.iesp.edu.br/index.php/campodosaber/article/viewFile/72/58>
- Disponível em: http://www.cofen.gov.br/resoluo-cofen-3582009_4384.html
- Duarte, N. E. Ferreira, M. A. ; Lisboa, M. T. L. 2012. Dimensão prática do cuidado e representações sociais. *Esc Anna Nery* (impr.) abr -jun; v.16, n.2, p.227- 233. Disponível em: <http://dx.doi.org/10.1590/S1414-81452012000200003>
- Freitas D *et al.* 2017. Diagnósticos de enfermagem entre usuários de anticoagulante oral acompanhados em ambulatório. *Rev baiana enferm*; v.31, n.3, p.20356. Disponível em: <http://dx.doi.org/10.18471/rbe.v31i3.20356>
- Galvão CM, Sawada, N.O. 2003. Prática baseada em evidências: estratégias para a sua implementação na enfermagem. *Rev. bras. enferm.* 2003, vol.56, n.1, pp.57-60. Disponível em: <http://dx.doi.org/10.1590/S0034-71672003000100012>.
- Krauzer I.M. *et al.* 2015. Sistematização da assistência de enfermagem na atenção básica: o que dizem os enfermeiros?. *Ciência y enfermería XXI*; (2):31-38.
- Lacerda R *et al.* 2011. Práticas baseadas em evidências publicadas no Brasil: identificação e análise de suas vertentes e abordagens metodológicas. *REEUSP [Internet]*. 1jun.; v.45, n.3, p.777-86. Disponível em: <https://www.revistas.usp.br/reusp/article/view/40766>
- Moreno *et al.* 2015. Atribuições dos profissionais de enfermagem na estratégia de saúde da família, uma revisão das normas e prática. *Rev Brasileira de Ciências da Saúde*, v.19, n.3, p. 233-240.
- Pereira S.V.M.; Bachion M.M. 2005. Diagnósticos de enfermagem identificados em gestantes durante o pré-natal. *Rev Bras Enferm*. nov-dez; v.58, n.6, p.559-564.
- Ribeiro GC, Padoveze MC. 2018. Sistematização da assistência de enfermagem em unidade básica de saúde: percepção da equipe de enfermagem. *Rev Esc Enferm USP*. 52: e03375. DOI: <http://dx.doi.org/10.1590/S1980-220X2017028803375>
- SALIMENA, A. M. DE O. 2014. Diagnóstico de enfermagem mais frequentes no pré-natal de risco habitual. *HU Revista, Juiz de Fora*, v. 40, n. 1 e 2, p. 63-68, jan./jun. Disponível em: <http://periodicos.ufjf.br/index.php/hurevista/article/view/2270>

- Silva, A. L. S., *et al.* 2015. Atividades educativas no pré-natal sob o olhar de mulheres grávidas. Revista Cubana de Enfermería, [S.l.], v. 30, n. 1, mar. Disponível em: <<http://revenfermeria.sld.cu/index.php/enf/article/view/487/82>>.
- Souza *et al.* 2018. O uso do software IRAMUTEQ na análise de dados em pesquisas qualitativas. Rev. esc. enferm. USP, São Paulo v. 52, e03353. Disponível em: <http://dx.doi.org/10.1590/s1980-220x2017015003353>.
- Tannure, M. C.; Pinheiro, A. M. 2013. SAE - Sistematização da assistência de enfermagem: guia prático. 2. ed. Rio de Janeiro: Guanabara Koogan.
- Varela *et al.* 2012. Sistematização da assistência de enfermagem na estratégia saúde da família: limites e possibilidades. Rev Rene, v.13, n.4, p. 816- 824. Disponível em: <http://www.periodicos.ufc.br/rene/article/view/4039/3169>
