



NURSE MANAGEMENT IN THE URGENCY AND EMERGENCY SERVICE

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SUMMARY

This article's theme is the role of the nurse in managing urgency and emergency actions. The nursing team that works in urgency and emergency care has as its profession characteristics a high workload and speed of care, however, there are also functions who need autonomy in carrying out activities that do not only concern practices related to care, but that contribute to the process, such as filling out protocols, reporting on actions carried out and monitoring and evolution of care, as well as referrals that they proceeded. There is still a lot of bureaucracy in your daily life to be added to the institution's work activities. To carry out studies relating to the quality of nurse management in urgent and emergency situations, the aim is to achieve the objective of determining which attitudes the nursing professional should have to manage their actions with the purpose of achieving quality in care, knowing which are the functions and real characteristics that must permeate your work, establishing parameters so that quality of service is prioritized. The study is justified by the need for nursing professionals to reflect on their practice, valuing their knowledge with the application of skills that establish self-confidence and proactivity. This is a literature review study of an exploratory descriptive nature carried out on documents available for access in the Virtual Health Library (VHL), Pubmed, Lilacs, Medlaine. The Final Considerations point out that discussions about the factors related to the situation of emergency emergency care in our country require a new look at how to manage the actions carried out in this context **Keywords:** Health. Nursing. Urgent and emergency care

ABSTRACT

This article's theme is the role of the nurse in managing urgency and emergency actions. The nursing team that works in urgency and emergency care has the characteristics of the profession a high workload and speed of care, however, there are also functions who need autonomy in carrying out activities that do not only concern practices related to care, but that contribute to the process, such as filling out protocols, reporting on actions carried out and monitoring and evolution of care, as well as referrals that they proceeded. There is still a lot of bureaucracy in your daily life to be added to the institution's work activities. To carry out studies relating to the quality of nurse management in urgent and emergency situations, we seek to achieve the objective of determining what attitudes the nursing professional should have to manage their actions with the purpose of achieving quality in care, knowing which are the functions and real characteristics that must permeate your work, establishing parameters so that quality of service is prioritized. The study is justified by the need for nursing professionals to reflect on their practice, evaluating their knowledge with the application of skills that establish self-confidence and proactivity. This is a literature review study of an exploratory descriptive nature carried out on documents available for access in the Virtual Health Library (VHL), Pubmed, Lilacs, Medlaine. The Final Considerations point out that discussions about the factors related to the situation of emergency emergency care in our country require a new look at how to manage the actions carried out in this context **Keywords:** Health. Nursing. Urgent and emergency care

INTRODUCTION

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This work focuses on carrying out studies on work management actions in relation to the quality of nurses' performance in urgent and emergency situations. The intentions of study to be carried out to contemplate research, they are based on theories that mark the performance in

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The area of nursing, therefore, requires prioritizing the focus of the study based on clear objectives, determination of study sources and time allocated to carrying out the different steps to be developed.

The study is based on the reality of nursing professionals in urgent and emergency situations, with the interest of analyzing the validity of their actions and the quality of the service performed. Nursing is a profession that has specialized knowledge for caring for human beings, in the areas of health promotion, recovery and rehabilitation, as well as prevention of diseases and injuries.

The main link between the user and the health establishment occurs through the nursing service, as it constitutes the largest group of health professionals and maintains uninterrupted contact with the user, promoting the maintenance, recovery and rehabilitation of health, through care.

The urgency and emergency area comprises pre-hospital care provided in the places where the user is, requiring the nursing professional to be qualified to offer immediate and safe care to the patient, whatever their condition.

The quality of the nursing professional's work is based not only on the attention given to patients, but on all actions relevant to their role and which are guided by the service provided in the emergency, and for it to be effective, some factors must be observed, such as: organization of a system accessible to the entire population, use and control of appropriate equipment, monitoring of technological advances, competence and qualifications to provide immediate assistance, respecting individual and regional values and beliefs.

The research developed is a literature review study of an exploratory descriptive nature.

NURSING IN ITS REAL CONTEXT

Nursing is a profession of great importance in the broader and collective health work, and the actions developed by nurses are of great importance in the participation of health and well-being in partnership with other professional categories. Being on the front line of medical and hospital actions, nursing assumes many responsibilities in addition to needing to master different situations, especially when related to emergency care and urgent and emergency situations, these being the first professionals who interact with situations that need to be resolved immediately. Considering the interdependence and complementarity of knowledge to provide comprehensive assistance, its actions need to be carried out with autonomy and competence. (ARGENTA, ADAMY, and BITENCOURT,2020).

The quality of health care is not an abstract attribute and, rather, is constructed by care evaluation covering the analysis of the structure, work processes and their results, establishing an evaluative model in health based on components of structure, process and results (MENDES; BITTAR, 2014).

According to Carneiro.et.al (2010), professional nursing activities become subjective and especially in medical treatment they assume this perspective, however the responsibility and actions in relation to seeking a less painful and more comfortable situation for patients raises the actions relevant to care to another level. In this sense, the practice associated with the knowledge and procedures performed becomes therapeutic, forming part of a process of care not only for well-being, but for everything that guarantees its efficiency.

According to Morais and Melleiro (2013), the quality of health care is a factor that cannot be defined exactly, as the entire process involves, in addition to careful attention and care, knowledge and empathy as determinants for the quality of care. work carried out mainly in urgent and emergency situations in life care. Good performance is one of the constant needs in order to be applied to different aspects, properties, components or scopes of this type of attention.

According to the aforementioned authors:

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The main link between the user and the health establishment occurs through the nursing service, as it constitutes the largest group of health professionals and maintains uninterrupted contact with the user, promoting the maintenance, recovery and rehabilitation of health, through care. This can influence users' judgment regarding the hospital's image (MORAIS and MELLEIRO, 2013, p 113)

In this way, all the care and attention provided to users in relation to health care are associated with quality that can be considered as a social construction, produced from the

experiences in service and care situations, which generates an assessment of the quality of the service provided and the effectiveness of the actions carried out.

To this end, Donabedian (1988) presents a triad structure in which the process carried out and the results obtained can be compared, making it possible to evaluate urgent and emergency health services, considering the following dimensions:

Structure: corresponds to the relatively stable characteristics of the institution, such as organizational structure, human, physical, material and financial resources;

Process: refers to the procedures used and the development of the activities of the professionals involved in providing services to the user, as well as the professional-user relationship;

Result: characterized by the consequence of the activities carried out, demonstrating the combination of factors from the environment, structure and process (MORAIS, MELLEIRO, 2013, p. 114)

In this sense, it is understood that the quality of health care becomes one of the greatest benefits to be offered to users, guaranteeing them satisfaction and safety in relation to the procedures to be carried out. Therefore, making urgent or emergency work relevant and the way in which the process is carried out defines situations that enable success and what is expected of the function as an achievable priority according to the available resources and existing social values, because, according to Santos (2019, p.16): "the new challenges that are posed to health professionals arise through the social, scientific and technological changes and changes that have been taking place in society in general and, in particular, , In the health area."

The nursing professional's work is full of emotions and situations that involve other professionals, patients and their families and companions, as well as the intrinsic factors in each situation, facts that need to be controlled.

Specificities of urgent and emergency care

In the context of urgent and emergency care, nurses experience many ethical and legal dilemmas in relation to professional responsibility, autonomy in relation to other professional categories, in addition to the legal competence to carry out procedures. They need to pay extra attention when carrying out their work, as they serve the serious user who undergoes complex procedures, most of the time linked to qualified protocols with specificities, also, for the nurse's role. Therefore, the moment emergency care is given requires speed and the nurse needs to be legally supported to carry it out.

Although the hospital urgency/emergency unit presents peculiar characteristics of its specialization and still has specific responsibilities, the professionals who work there need to be constantly prepared and also have resources that allow them to perform their functions with quality and determination.

In relation to the actions carried out by nursing, whether in health centers in emergency care units or in the hospital network, it is pertinent to deal with situations pertinent to the urgency for life and care. The actions to be carried out do not always depend solely on your actions and palliative care often ends up being the best option, especially in relation to situations in which it is possible to meet the entire demand, especially in situations generated by traffic accidents, violence and illnesses. several etiologies in which the priority of quickly providing first aid arises in order to reduce more severe traumas and death (MENDES,2011).

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There are situations that are out of control, there are relevant risks and there are still several situations that surround the entire list of procedures that need to happen quickly and effectively. In these situations known as emergency and urgent situations, the nursing professional must maintain control of the situation and perform as much as possible, even if this requires him to take on different roles.

Cavalcante et.al (2013) clarifies that according to the opinion of COREN n° 005/2010 it is up to the nurse to assume responsibility for the initial assessment of the patient, starting with obtaining initial data in relation to the classification of the situation and referring the user within the emergency unit for appropriate clinical care, being the first person to monitor the flow of patients, demonstrating autonomy during assistance.

From then on, it is possible to say that when managing their professional activities, nurses needs to be based on the Professional Practice Law No. 7,498, of June 25, 1986, as well as the Code of Ethics for Nursing Professionals, with the Cofen/Coren system as the regulatory body, ensuring that its activities meet what is required the legislation in relation to the duties of the professions included in nursing services (BRASIL, 1986).

In this way, it is clear that the nurse's responsibility involves situations related to the knowledge and actions of this profession, being linked to ethical, human feelings, in the context of the integrality and multidisciplinary of the actions proposed by the Unified Health System (SUS) (BRASIL 2010).

One of the great debates today regarding procedures that seek to adapt the humanization process within a hospital vision, a space in which awareness and competence are present so that the work takes place with precision, highlighting the satisfaction of duty accomplished. and the quality of the health service (BRASIL,2013).

As the work that needs to be done is not enough, it still needs to be prepared to keep up with technological advances in health sciences and the profession, doubts emerge regarding professional responsibility in its legal aspects WINCK (2010).

MATERIALS AND METHODS

This study consists of a descriptive bibliographical research, which aimed to analyze the selected articles and identify the actions developed in relation to nurses and the management of urgency and emergency actions to understand the importance of personal relationships and humanization regarding their professional activities. This is a descriptive literature review study using scientific studies, derived from literature reviews on the topic presented.

According to Alves, Mazzotti (2002), the literature review or bibliographical review has two purposes as its principle: the first refers to the construction of a contextualization for the problem and the second to the analysis of the possibilities present in the literature consulted for the conception of the theoretical framework. of the research.

This methodology is highly recommended for surveying available scientific production and for building networks of thoughts and concepts, which articulate knowledge from different sources in an attempt to follow paths in the direction of what one wishes to know (ALVES, MAZZOTTI, 2002).

In the literature review, the material collected by the bibliographic survey is organized by origin, that is, scientific sources from articles, periodicals, dissertations and theses, and dissemination sources and, based on its analysis, it allows the researcher to prepare the contextualization, using the research undertaken, with Noronha and Pereira (2000, p. 193-195) stating about the literature review:

As for the purpose, they can be analytical, when they are carried out as an end in themselves, by researchers who are dedicated to carrying out, sporadically or periodically, reviews on specific topics, so that the sum of these studies can, in the long term, provide an overview general development of a given area, with its peculiarities, successes and failures.

For the theoretical foundation, articles available in the electronic database will be used: Scientific Electronic Library Online (SciELO). Articles published in Portuguese will be selected, with summaries published in the aforementioned database in the period from 2010 to 2021 and indexed by the descriptors and keywords: Management, Public Health, People management.

It will be descriptive research, as it is clear that the methodological procedures necessary to carry out the proposed research are based on descriptive research, through a qualitative approach. Since it is rich in descriptive data, it has an open and flexible plan and focuses on reality in a contextualized way.

Descriptive research has the following fundamental characteristics: discovery, interpretation in accordance with text, seeks to portray reality in a concrete and profound way, has a variety of information, reveals a vicarious experience, seeks to represent different points of view in a social situation and the reports have more accessible language.

Results and discussions

The hospital urgency and emergency sector requires extra attention and a lot of preparation from nursing professionals, who remain at the forefront of all the dynamics of procedures performed. To this end, it is essential that they have detailed knowledge about the different health situations, maintaining control over the particularities of assistance, such as quick reasoning, manual dexterity and resolving the problems that arise, taking into account the large number of procedures. To be developed, the patient's health status and the limitation of the time factor (ALMEIDA, PIRES 2007 apud OLIVEIRA et al., 2004).

However, according to Wehbe and Galvão (2001), in Brazil, the training of nurses who work in urgent and emergency units was postponed until the 1980s, as well as a reduced number of nurses prepared to work in the hospital urgency/emergency area, causing a deficit in meeting the needs of the clientele. Added to this scenario is the inadequate physical structure of many institutions, the scarcity of materials, equipment, medicines and the unprepared work team.

Faced with so many situations narrated in the vast bibliography and reports from Health Departments throughout the Brazilian geographic space, one can observe the need to train professionals who work in the area, in addition to shouting for the reason for continued training and courses in service involving updates, workshops, training with teams, seeking to improve technical expertise and increase professionals' self-confidence (FISCHER; AZEVEDO; FERNADES, 2006).

Nursing ends up being asked to participate in the elucidation of most of the problems in a hospital unit, whether an emergency situation or not, because despite the nurse having his/her academic training focused on the care area, this professional ends up being involved, most of the time, in carrying out administrative tasks (BATISTA; BIANCHI, 2006).

THE DUTIES OF THE NURSE IN URGENCY AND EMERGENCY

Nursing in the urgency and emergency sector has the primary function of offering the maintenance of the individual's vital physiological functions in relation to the care and preservation of life, seeking to do as much as possible to reestablish order. The combination of different actions provided in relation to health care and the determination and commitment of professionals to the quality of actions are necessary requirements for success in the different environments in which they operate, being key elements for their future and that of others involved, constituting a major concern in relation to the different levels of success achieved (GOULART; CHIARI, 2010).

The quality of the nursing professional's work is, therefore, linked not only to the attention given to patients, but to all actions related to their role in the service. As Cordeiro et.al., (2018) assert, the work carried out by nursing must maintain its standard of quality of care in order to achieve its proposal of developing essential care work, thought out and planned with other areas that equally provide care. differentiated healthcare.

In order to obtain good results, some factors must be observed, such as: organization of the system accessible to the entire population, organized and well-equipped spaces and rooms, keeping up with technological advances, having professionals qualified to provide immediate assistance, respecting individual and regional values and beliefs, because due to the different problems that the sick person faces, due to the physiological changes of the pathological process, this becomes a great challenge for health professionals to adopt a holistic approach focused on the essence of the human being (SANTOS,2019).

That is why the main link between the user and the health establishment occurs through the nursing service, as it constitutes the largest group of health professionals and maintains close contact uninterrupted interaction with the user, promoting the maintenance, recovery and rehabilitation of health, through care (MORAES, SANTOS, MERIGHI, & MASSAROLLO, 2014).

Emergency Units (UE) are part of the Brazilian health system as a place where users seek solutions to their health needs, whether emergency or not, with the care team being responsible for remedying the necessary situations in a way that guarantees the best possible action.

Therefore, it can be said that this function is directly linked to the business that an organization can or cannot carry out, according to its standards and rules. It thus establishes a relationship of dependence between the attendant, the organization and the customer or user.

Excellence in service refers to the quality of service provided, regardless of whether it is

performing it, when it is done with quality and that meets the customer's needs, it becomes effective and provides satisfaction, which will contribute to the growth of the company or to the appreciation of the professional providing the service (OLIVEIRA, 2008).

For good service to occur, there are some prerequisites and the challenge for the front line is to provide good technical service, in addition to transmitting attention and friendliness. Employees who are in direct contact with customers make their performance a key factor in the effectiveness of a business unit, and directly affect the quality and productivity of goods and services, involving two dimensions of service with regard to dimension of technical care and ethical care (FRACOLLI; ZOBOLI 2011)

Therefore, with the specific aim of making work safe and of high quality for the professionals who work there, technical responsibility falls as well as the necessary attention and dealing with others, with attitudes that demonstrate the value of interpersonal relationships, as in some cases, it is not only the patient who needs special attention at the moment, but the people who accompany him/her. , especially in situations generated by accidents and traumas, the shock and nervousness of those who are with the patient can generate other emergency situations.

From this perspective, it is observed that the search for these units sometimes occurs to the detriment of the precariousness of basic care units, thus highlighting distortions in the current health system. As a result of this context, the EU has provided services beyond their installed capacity, which represents a serious and relevant problem in the health system, especially in developing countries, where long queues and excessive numbers of services often result in The quality of the service leaves something to be desired, causing criticism, impatience and embarrassment on both sides.

The progressive worsening of this situation amplifies discussions about the factors related to the chaotic situation of emergency care in our country, which portray the main causes of the population's dissatisfaction with health services, including those related to emergency services, such as such as low installed capacity, lack of reception, overload with low complexity care, inadequate back-up and inadequate training of professionals.

The professional who works in this area must be sensitive and have a theoretical- well-supported scientific and based on maximum dedication in its performance (CORDEIROS et.al., 2018).

The problem identified was the overcrowding of the observed service. This saturation occurs for several reasons, among them, we can mention the inability of the Basic Family Health Units to not accommodate their acute or acute chronic patients from their assigned area, causing them to look for a care establishment to health at an emergency level (BRASIL, 2006).

Another problem observed was the scarcity of material, which generates, according to Batista and Bianchi (2006), the adoption of an accelerated pace of work to complete pre-determined tasks due to insufficient human and material resources in emergency units. , which has often resulted in service of dubious quality and below expectations.

Final considerations

At the end of this research, we hope to understand how the management of actions carried out by nursing in hospital urgency and emergencies occurs, mainly in relation to the link between the user and the health establishment, as it constitutes the largest group of health professionals and which maintains uninterrupted contact with the user, promoting the maintenance, recovery and rehabilitation of health, through care.

The quality of health care is difficult to define and involves some criteria, determined in the form of value judgments, which can be applied to different aspects, properties, components or scope of this type of care.

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In this way, reflecting on practice in this context of approach is something that cannot be discarded, since from it it is possible to follow a very rich path, full of experiences that contributed to the great globality of the professional in this area of activity.

Thus, referring to the quality of health care, attitudes that promote they aim to obtain greater benefits at the expense of lower risks for the user, benefits that, in turn, are defined in terms of what is achievable according to available resources and existing social values.

It is worth noting that the user's perception of the factors involved in the quality of care is in line with the causes mentioned above. From this perspective, it is believed that research that points to



questions relating to user satisfaction with health services should be used as evaluation parameters. Satisfaction is defined as the product of relationship management and service expectations, referring not only to the quality of the service, but also to access, location, courtesy, responsiveness and human attention to the user.

It can also be understood as the comparison of the user's expectations with their perceptions regarding the encounter with the real service. In this way, general satisfaction with the service is the result of the various perceptions that the customer has throughout the sequence of moments of contact with a provider, and this, therefore, occurs in the consumption phase and in the post-consumption phase.

Emergency Units (UE) are part of the Brazilian health system as a place where users seek solutions to their health needs, whether emergency or not, with the care team being responsible for remedying the necessary situations in a way that guarantees the best possible action. Based on the profile of the globalized professional and the demands of the modern world, the manager faces major challenges in leading increasingly qualified groups and identifying talents and skills aimed at activities where their potential will be properly utilized.

Therefore, knowing how to manage everyday situations experienced in urgency and emergencies is a task that requires speed and knowledge, but above all dedication and empathy. Because, in addition to being essential for subsequent processes, the EU is responsible for a large part of the work carried out in health units and therefore needs to be understood in its role and importance.

Nursing professionals must follow the transformations in society through constant updates in new areas, especially in management and leadership, as these professionals deal with different technologies and play a fundamental role in the process of disseminating knowledge. It is a science that has been evolving and gaining ground, but has a lot to develop, as in addition to assisting, planning and managing, it must be recognized for its leadership and people management work.

As nurses gain space and seek to assume their duties autonomously, following technological advances in health sciences and the profession, doubts emerge regarding professional responsibility in its legal aspects. The nurse's responsibility interfaces with other issues that involve public health policies and the limits of action and autonomy between different professional categories, encouraging discussions about professional acts considered private or shared, in the context of completeness and multidisciplinary of the proposed actions by the Unified Health System.

Mendes, Eugênio Vilaça Health care networks. / Eugênio Vilaça Mendes. Brasília: Pan American Health Organization, 2011. 549 p.: ill.