Humanization of care in an emergency room of a hospital organization: experience report

RESUMO | Objetivo: descrever a percepção do cliente de saúde sobre o atendimento humanizado realizado por uma professora e alunos do curso Técnico em Enfermagem durante a realização do estágio obrigatório supervisionado em um pronto-socorro que presta atendimento pelo Sistema Único de Saúde (SUS). Método: Trata-se de um estudo descritivo, do tipo relato de experiência realizado em junho de 2022. Resultados: os resultados demonstram que os professores e alunos do curso Técnico em Enfermagem realizam atendimento humanizado, com acolhimento e empatia, incluindo e percebendo as diferenças nos processos de gestão e cuidado. Conclusão: assim concluímos que estes aspectos são elementos importantes para a reabilitação física e emocional do paciente e de seus familiares.

Descritores: Humanização da assistência; Humanização; Humanização da assistência hospitalar; Humanização dos serviços; Programa Nacional da assistência hospital.

ABSTRACT | Objective: to describe the perception of the health client about the humanized care provided by a teacher and students of the Technical Nursing course during the mandatory supervised internship in an emergency room that provides care through the Unified Health System (SUS). Method: This is a descriptive study, of the experience report type carried out in June 2022. Results: the results show that teachers and students of the Technical Nursing course provide humanized care, with reception and empathy, including and perceiving the differences in management and care processes. Conclusion: we conclude that these aspects are important elements for the physical and emotional rehabilitation of the patient and their families.

Keywords: Humanization of care; Humanization; Humanization of hospital care; Humanization of services; National Hospital Assistance Program.

RESUMEN | Objetivo: describir la percepción del cliente de salud sobre la atención humanizada brindada por un docente y alumnos del curso Técnico de Enfermería durante el internado obligatorio supervisado en una sala de emergencia que brinda atención a través del Sistema Único de Salud (SUS). Método: Se trata de un estudio descriptivo, del tipo relato de experiencia realizado en junio de 2022. Resultados: los resultados muestran que docentes y estudiantes del curso Técnico de Enfermería brindan un cuidado humanizado, con acogida y empatía, incluyendo y percibiendo las diferencias en el manejo y procesos de atención. Conclusión: concluimos que estos aspectos son elementos importantes para la rehabilitación física y emocional del paciente y sus familiares.

Palabras claves: Humanización del cuidado; humanización; Humanización de la atención hospitalaria; Humanización de los servicios; Programa Nacional de Asistencia Hospitalaria.

Aline Paula Bombassaro

Nurse. Professor of the Technical Nursing Course at Faculdade Senac Concórdia. MBA in Health Auditing, 2017. Oral Health Assistant Course - ABD, EAD Modality, 2013. Lato Sensu Post-Graduation in Obstetric Nursing, 2010.

ORCID: 0000-0002-2349-6382

Alessandra Albara

Student of the Technical Course in Nursing at Faculdade Senac Concórdia. ORCID:0000-0001-6134-9271

Angela Michele Ritter

Student of the Technical Course in Nursing at Faculdade Senac Concórdia. ORCID:0000-0003-0509-8978

Elisângela Marta da Silva

Professor at Senac Concordia College. Specialist in Media in Education from the Federal Institute of Santa Catarina - IFSC. Graduated in Business Administration with qualification in Human Resources from the Higher Education Center of Amapá – CEAP. Graduated in Computer Science from the University of the West of Santa Catarina - UNOESC. ORCID: 0000-0002-0755-1986

Jaqueline Turatto

Librarian at Senac Concordia College. Specialist in Strategic People Management from Faculdade Senac. Specialist in Library Management at the State University of Santa Catarina - UDESC. Graduated in Librarianship from the Federal University of Santa Catarina

ORCID: 0000-0001-7252-4282

Leci Marina Harnisch

Psychologist. She works as a Professional Education Analyst at Faculdade Senac Concórdia. Postgraduate in Strategic People Management. Graduated in Psychology from the Contestado University UNC Santa Catarina. ORCID: 0000-0002-9174-4763

Verônica Paz de Oliveira

University Professor at Senac Concordia College. Doctoral Student in Regional Development, Research Line: Organizational Management and Market Dynamics Master in Development: Area of Concentration: Development Management and Policies - Research Line: Regional Integration and Sustainable Local Development. Specialist in Higher Education Didactics. Specialist in Sustainable Management of Agroecosystems. Graduated in Tourism (Unicruz, 2003).

ORCID: 0000-0002-9174-4763



Recebido em: 10/10/2022 Aprovado em: 12/11/2022

INTRODUCTION

n hospital organizations, humanized care has been constantly addressed as an important topic in the care process provided by nursing professionals. "Care, therefore, encompasses acts, behaviors and attitudes. The acts performed in care vary according to the conditions in which the situations occur and the type of relationship established". (1:58) In this context, it is important to highlight that in many moments the act of caring happens in a different way and that it can vary according to the situation and according to the professional who provides the care. (1:58) Thus, factors related to demand greater than supply, a lean nursing team and exhausting workload are elements that can affect the care provided by nursing professionals, especially when care is provided in the emergency room.

The emergency room of a hospital is a complex sector, as it "offers services of high complexity and diversity in the care of patients in situations of imminent risk of life". (2:231) Therefore, in the search for the stabilization of the patient's vital conditions, care is provided through life support, requiring agility and objectivity in doing so. In this sense, the work process is shaped in the fight against time to achieve balance. (2) That said, tension emerges as a decisive characteristic of this work environment, an environment in which the health team responsible for the emergency service lives daily under pressure caused by the need to gain time, by the speed and precision of the intervention/ attention, by the high demand for assistance and daily experiences of death. (2) Nursing developed in this context implies the provision of care to all individuals of multiple ages, with physical or psychological, perceptual or real changes, in need of intervention or without a diagnosis yet assigned. (3)

Based on the challenges that the emergency room presents, it is relevant to emphasize that humanization in care must be applied in this sector, as it is, in the vast majority, the gateway for patients seeking hospital medical care. It is in the emergency room that the patient has the first contact with the nursing professional, therefore, it is at this moment that there must be empathic communication, including active listening, paying attention to what is being reported and being interested in the subject being discussed, because every human being likes to be heard. This received attention provides a sense of well-being to the patient, it is at this moment that the health team is able to classify the risk and prioritize those who really need immediate care, making it more agile, safe and fair. (4)

In this context, humanization has stood out in health care and in hospital emergency room care. "The National Humanization Policy (PNH - Política Nacional de Humanização), created in 2003, seeks to put the principles of the SUS into practice in the daily life of health services, producing changes in the ways of managing and caring". (5:3) Humanized care, reception and empathy are essential in patient care, as they make all the difference in the physical and emotional rehabilitation of the patient.

> Humanizing translates, then, as the inclusion of differences in management and care processes. Such changes are built not by an isolated person or group, but collectively and shared. Include to stimulate the production of new ways of caring and new ways of organizing work. (5:4)

Humanization can be portrayed in small gestures, such as: good morning, how are you, in the personal presentation, I will accompany you during your stay here, establishing a bond and always respecting the condition of fragility,

fear and anguish of the patient, being attentive to their care needs. "Humanization is the ability to give dignified attention to people according to their culture, values and beliefs, in an environment with minimum conditions of care and work". (3:312)

In this sense, the PNH has as theoretical

and methodological principles: transversality, the inseparability between care and management and the protagonism of subjects and collectives (6) and it trains professionals who, in their work, articulate actions of technical and scientific efficiency, ethical posture, but who respect the need and uniqueness of each user, knowing that this coexistence is an unpredictable search and generates innovation in health practices. (6) Therefore, the professional, in addition to having technical training, knowledge and practical skills in his role, it is essential that he has behavioral attitudes aimed at humanized care.

Much is said about humanized care in schools for teaching nursing professionals, everything must be taken into account as an academic with the watchful eyes of their professors, in this way, teaching becomes an ally to the act of care along with the clinical picture. (6) Thus, it appears that humanization is an important topic to be studied, therefore, the objective of this experience report is to describe the perception of the health client about the humanized care provided by a teacher and students of the Technical Nursing course during the mandatory internship, supervised in an emergency room that provides care by the Unified Health System (SUS).

METHOD

This study is a descriptive study, of the experience report type, experienced by the teacher and the students of the Technical Nursing course during the supervised internship in the SUS emergency room in a hospital organization in the West of Santa Catarina.

This activity was developed in June 2022, at the time the hospital organization was receiving a great demand from SUS patients, due to the increase in dengue cases at the beginning of winter, consequently, increasing the cases of influenza. Concomitantly, on the same date, a renovation of the physical space was initiated to expand and improve care for SUS patients, expanding the challenges and behaviors.

This activity was developed in June 2022, at the time the hospital organization

was receiving a great demand from SUS patients, due to the increase in dengue cases at the beginning of winter, consequently, increasing the cases of influenza. Concomitantly, on the same date, a renovation of the physical space was initiated to expand and improve care for SUS patients, expanding the challenges and behaviors. (7)

RESULTS

The mandatory internship was carried out in a hospital organization in the emergency department (SUS) in the afternoon and night shifts. During this period, the hospital was receiving a great demand from patients due to the increase in dengue and influenza cases. In addition to the increase in cases, another factor that impacted the care provided by professionals in the sector was the renovation of the physical space, which resulted in an increase in demand, as both SUS patients and patients who had a private health insurance plan were treated in the same sector

The concentration of patients in the same physical space resulted in an overload of work and was a challenge for the students who were performing the internship during this period. Even with a high demand, the students were instructed to apply the techniques of good care focused on patient reception. First, the student introduced himself, informing his name, the teaching institution and the procedure or medication administration that would be performed.

Another factor that impacted the care was the time available to perform the necessary procedure, it was not possible to spend a long time with the same patient giving all the necessary attention,

because there were many patients who needed care, including bedridden patients who were waiting for care on stretchers and armchairs, some in the queue and others could not enter, as there was no longer a place to accommodate them properly.

In this way, to meet the demand of patients, the students focused on providing agile care, but not forgetting the humanized care, they prepared and administered the medicines, referred the patients for exams, carried out the applications, transported the patients between the sectors, guided the family members about the procedures that were being performed, solving their doubts.



The emergency room of a hospital is a complex sector, as it "offers services of high complexity and diversity in the care of patients in situations of imminent risk of life". Therefore. in the search for the stabilization of the patient's vital conditions, care is provided through life support, requiring agility and objectivity in doing so.



Students understood the pain of patients and family members, performed the service with cordiality, respect and empathy, while feeling tired, they sought to meet the demands presented with priority.

The teacher accompanied the students during the internship period, observing, guiding and solving doubts, as the students were exposed to different situations that generated physical and psychological exhaustion, therefore they also needed care.

It was possible to observe that even in the face of the challenges presented, the teacher and the students performed the necessary technical procedures for the patients, and at the same time they all sought to provide a welcoming treatment.

Without imagining that everyone was being observed, the teacher was surprised by the testimony of a father who accompanied his son's care in the emergency room. The father congratulated them for developing a job with so much humanity, even in such a complex and difficult environment, as in an emergency room.

Reports like this motivate everyone, even though the students and teacher could not remember who this service had been with, there were many shifts, many children were attended to. But the words of this father, made all the difference to the students and teacher. Moments like these are rewarding, regardless of how hostile the environment is, you can make a difference and there will always be someone watching.

DISCUSSION

When we talk about humanization, we reflect on how to take care of people, how to welcome them, how to minimize their pain and how to guide them in the best way. However, it is not only that, it is necessary to promote changes in all aspects and processes that involve patient care. It is necessary to rethink the physical structure, the working conditions of employees, the availability of financial, material and human resources. (5) In this case, the care management processes must be built collectively and in a shared way between workers, users and managers of the health service. (5)

Therefore, it is necessary for employees to feel part of this transformation, seeking to improve their work every day, that is, to humanize it. Users, in turn, will be the main beneficiaries of all this change, however, they have a share of responsibility and must assume the role of protagonists with the promotion of their health. $^{(5)}$

It is important to highlight the responsibility that health professionals have in the humanization process. And, due to their experience and ability to analyze them, it is necessary to include them in decision making, so that work processes can become more qualified and more humanized. (5)

The subjects involved in the processes of managing and caring affirm their autonomy when they become protagonists in the production of health and well-being. In this way, they share responsibilities in search of a humanized service in all instances, whether in internal or external service. The important thing is that the different realities, whether economic, political, institutional and cultural, are included in these processes. (8)

Regarding the cultural aspect, it is important to highlight that the environment where the patient will be treated needs to be prepared to understand their culture and the context in which the disease developed. In other words, "the meeting of cultures is always present when an individual seeks relief from their health problems". (9:73)

It is clear that each patient is different. Therefore, health professionals need to be aware that each one of them will be accompanied by their culture, with different opinions and beliefs. This requires attention to understand where it all started and, above all, respect for any and all patient positioning. The principles of humanized care are based on attitudes like this, of valuing and welcoming the patient, from their arrival at the reception and emergency care, until the moment they go home. (9)

CONCLUSION

It is possible to conclude how fundamental humanization is in the process of caring for patients and family members in the emergency room, as health clients when they need medical and hospital services are afraid, fragile and emotionally shaken. Therefore, it is at this moment that health professionals can show attention, respect, cordiality and empathy in the act of care.

Humanization is a topic that is being discussed a lot in the academy, and this is a factor that corroborates its importance and applicability both for Health Intuitions and for Teaching. In this context, it is possible to perceive that the professors and students of the Technical Nursing course provide humanized care in an emergency room, with embracement and empathy, including and realizing the differences in management and care processes, as they are important elements for the physical and emotional rehabilitation of patients and their families.

In this way, promoting their discussion of the academic and organizational environment results in reports like the one received by the internship supervisor teacher. Therefore, it is noteworthy that the objective was achieved, where it was possible to verify the patient's perception of the humanized care provided by a teacher and students of the Nursing Technical course during the mandatory supervised internship in an emergency room that provides care through the Unified Health System (SUS).

Referências

1.Cardoso K, Julião GG, Júnior LFR, Machado BFH, Sant'Anna, LC. Hotelaria, hospitalidade e humanização. Porto Alegre: Grupo A; 2020.

2. Daiane Dal Pai D; Lautert L. Suporte humanizado no pronto socorro: um desafio para a enfermagem. RevBrasEnferm (Internet). 2005 (citado 2022 ago. 20);58(2): 231-4. Disponível em: https://www.scielo.br/j/reben/a/ WhSNgCJsTNcnRM4F4cyqxTp/?format=pdf&lang=pt

3. Holanda FL, Marra CC, Cunha ICKO. Perfil de competência profissional

do enfermeiro em emergências. Acta Paul Enferm (Internet). 2015(citado 2022 set. 15);28(4):308-14. Disponível em: https://www.scielo.br/j/ape/a/ vqTpHvhZMLh75j4MrqYrhRR/?format=pdf&lang=pt

4. Fontes NC. Enfermagem em pronto-socorro, urgência e emergência: técnicas e práticas para lidar com o imprevisível. São Paulo, SP: Ed. Senac São Paulo: 2020.

5. Ministério da Saúde. Secretaria de Atenção à Saúde. Política Nacional de Humanização: PNH. 1ª ed. Brasília: Ministério da Saúde; (Internet). 2013 (citado 2022 set. 6);16(3). Disponível em: https://bvsms.saude.gov.br/bvs/ publicacoes/politica_nacional_humanizacao_pnh_folheto.pdf

6.Barbosa GC; Meneguim S; Lima SAM; Moreno V. Política Nacional de Humanização e formação dos profissionais de saúde: revisão integrativa. RevBrasEnferm; (Internet). 2013 (citado 2022 set. 15);66(1):123-7. Disponível em:https://www.scielo.br/j/reben/a/Xft5GGxBgzdgDWtHthCS5GQ/?format=pdf&lang=pt

7. Ministério da Saúde. Secretaria de Atenção à Saúde. Resolução nº466, de 12 de dezembro de 2012. Brasília: Ministério da Saúde; (Internet). 2013 (citado 2022 set. 26). Disponível em: https://conselho.saude.gov.br/resolucoes/2012/Reso466.pdf

8. Ministério da Saúde. Secretaria de Atenção à Saúde. Núcleo Técnico da Política Nacional de Humanização. HumanizaSUS: documento base para gestores e trabalhadores do SUS. 4ª ed. Brasília: Editora do Ministério da Saúde; (Internet). 2008. (citado 2022 ago. 24);01-72. Disponível em: https://link.sc.senac.br/sLdF99

9.Oliveira FA. Antropologia nos serviços de saúde: integralidade, cultura e comunicação. Interface - Comunic, Saúde, Educ (Internet). 2002 (citado 2022 set. 22);6(10):63-74. Disponível em: https://www.scielo.br/j/icse/a/ vFvhTFfR3yX6hXQ9kX6xPVG/?format=pdf&lang=pt