



<https://doi.org/10.56238/emerrelcovid19-035>

Amanda Caroline Oliveira Henriques Mendes

Educational Institution: Federal University of Pernambuco

Manuela Wanderley Ferreira Lopes

Educational Institution: Federal University of Pernambuco

Maria da Conceição de Barros Correia

Educational Institution: Federal University of Pernambuco

Válery Muniz de Sousa

Educational Institution: Federal University of Pernambuco

Micaela Maria de Sousa

Educational Institution: Federal University of Pernambuco

Kátia Maria Gonçalves Marques

Educational Institution: Federal University of Pernambuco

Leonardo Cavalcanti Bezerra dos Santos

Educational Institution: Federal University of Pernambuco

Márcia Maria Dantas Cabral de Melo

Educational Institution: Federal University of Pernambuco

Zilma Ribeiro do Nascimento

Educational Institution: Federal University of Pernambuco

Niedje Siqueira de Lima

Educational Institution: Federal University of Pernambuco

Luciana de Barros Correia Fontes

Educational Institution: Federal University of Pernambuco

ABSTRACT

The objective of this experience report is to draw a comparison between the adjustments made in the Welcoming, in a Family Health Unit or FHU in the city of Recife, Pernambuco, from March 2020 to March 2023. The initial phase of this study comprised a descriptive and qualitative approach to the experiences, particularly directed to the welcoming of users. This one was from 37 professionals from the FHU of Vila União, in the city of Recife, State of Pernambuco. The professionals belonged to four Family Health teams. Considering the data obtained in the first half of 2021, the dynamics of welcoming were directed to screening, with little participation of the Oral Health team and problems related to dissatisfaction with the solution established for their problem. It was observed the need for adjustments in welcoming, with a view to a better level of satisfaction for both users and the care team. After an interval of two years or 24 months, it was found that there were few changes. The established organization remains with the Community Health Agent or CHA, triaging and referring users, with the Oral Health team being away from the reception and taking turns with another team. In this context, the current direction seems to reflect a recovery in the demand for care, not necessarily the quality of care. What has been found to be a problem is in a larger dimension, but is not discussed, at least until the month of March 2023.

Keywords: Welcoming, Primary Health Care, COVID-19.

1 INTRODUCTION

On May 22, 2023, Ordinance No. 635/2023 was published¹, published by the Minister of Health of Brazil, which institutes, defined and created federal financial incentives for the implementation, costing and performance for the modalities of Multiprofessional Teams in Primary Health Care (PHC). From this Ordinance, the previously NASF (Extended Center for Family Health and Primary Care),

which had recently undergone changes that signaled its extinction, observed in the Prevent Brazil Program (Ordinance No. 2,979, of 11/12/2019)².

A Ordinance no. 635/2023 has defined eMulti as:

"Teams composed of health professionals from different areas of knowledge, who act in a complementary and integrated way to the other teams of Primary Health Care or PHC, with co-responsible action for the population and the territory, in intersectoral articulation and with the Health Care Network or RAS" (BRASIL, 2023, p. 11).

With this perspective, it should facilitate the population's access to comprehensive health care, expand the scope of health practices in the PHC scope, contribute to improve the resolvability of PHC, understanding the scope of its modalities.

However, improvement in the quantity of the care team does not directly ensure the best reception of users and their satisfaction. There is certainly a facilitation for this. Taking into consideration the concept of welcoming, which is conceptualized as qualified listening, in practice it is directed to the actions of care to emergencies or intercurrents; attention focused on the complaint conduct. It is known that it can happen in different spaces, including home visits, with a view to facilitating bonds.^{3,4,5}

During the experiences in the different epidemiological moments of COVID-19, a disease caused by SARS-CoV-2, there was a new look and dimensioning of the importance of PHC and, in this context, a re-signification of the process of "welcoming". Refuge, protection, comfort, support, hospitality, accommodation. All of these represent synonyms of welcoming. However, the humanization of this process became associated with the definition and classification of priorities (according to the severity and complaints of users and reports of symptoms, among others) and referrals. There was a reinforcement of questions about personal hygiene and environments, distancing and the correct use of Personal Protective Equipment (PPE).⁶

There was a significant reduction in face-to-face care and absences not only of users, but also of the teams of professionals linked to diverse communities, usually in a situation of great vulnerability and that required a differentiated look, an inclusive care, in the best way that the implemented strategies managed, in the face of the "unknown".

If there were weaknesses in the care provided by the PHC, they were now amplified, in a perspective of great fear and panic, not only by the users, but also by the entire support and service delivery team. The present report considered the experiences in the Multiprofessional Residency in Family Health of UFPE, since the beginning of the COVID-19 pandemic, in March 2020 and accompanying the welcoming process until the month of March 2023. The survey of the problem of welcoming health care for the population evaluated, from the point of view of the care team, comparing the data obtained in March 2021 to those obtained in March 2023.

2 METHODOLOGY

In a first phase of research approved by the Research Ethics Committee of the Federal University of Pernambuco, under CAAE number 51664421.4.0000.5208, a qualitative and exploratory approach was adopted, considering as the object of study the welcoming, from the perspective of 37 professionals members of four teams of the USF Vila União, Sanitary District IV of the city of Recife, Pernambuco and by electronic form.⁷

The data collection of this second stage sought to highlight whether the weaknesses raised regarding welcoming were addressed during the last two years.

3 COMMENTED RESULTS

From the returns obtained, few changes were observed in the reception, with the greatest openness to care in PHC, from the year 2021 to March 2023, in the FHU of Vila União. Welcoming is increasingly directed to Community Health Agents (CHA), who perform risk screening and referral of users, and the oral health team is divided into two moments for care, due to the reduced space for activities and increasingly distant from this process of welcoming.

The structure that was found was maintained, from the reception of users to the search for the solution of the demands presented, with the greater focus of streamlining the number of visits, in an attempt to compensate for the time in which care was reduced.

The many dimensions that are involved in the health and quality of life of the individual, of communities with particular characteristics, are reinforced. COVID-19 does not represent the only or main challenge, but it has impacted not only immunity, but everyone's mental health.

As welcoming is part of the "gateway" to this assistance, may we find a balance and a possibility of better understanding the other, with empathy for the needs and characteristics they have, in addition to the moment they experience.

REFERENCES

Brasil. Ministério da saúde. Gabinete do ministro. Portaria nº 635, de 22 de maio de 2023. Institui, define e cria incentivo financeiro federal de implantação, custeio e desempenho para as modalidades de equipes multiprofissionais na atenção primária à saúde. Disponível em: <https://www.lex.com.br/portaria-ms-no-635-de-22-de-maio-de-2023/>. Acesso 23 maio 2023.

Brasil. Ministério da saúde. Gabinete do ministro. Portaria nº2.979, de 12 de novembro de 2019. Institui o programa previne brasil, que estabelece novo modelo de financiamento de custeio da atenção primária à saúde, no âmbito do sistema único de saúde, por meio da alteração da portaria de consolidação nº 6/gm/ms, de 28 de setembro de 2017. Disponível em: https://bvsms.saude.gov.br/bvs/saudelegis/gm/2019/prt2979_13_11_2019.html. Acesso em: 20 maio 2023.

Ribeiro apm, frisanco fm, barbieri mrb, lima vb de, jacob lms, maciel júnior m. A importância da implantação do acolhimento na atenção primária à saúde: revisão integrativa. *Research, society and development*, 11(11): e148111133325, 2022. Disponível em: <http://dx.doi.org/10.33448/rsd-v11i11.33325> 1. Acesso: 20 maio 2023.

Breehmer lcf, verdi m. Acolhimento na atenção básica: reflexões éticas sobre a atenção à saúde dos usuários. *Ciencia & saúde coletiva*. 2010; 15(3): 3569-3578.

Coutinho lrp, barbieri ar, santos mlm. Acolhimento na atenção primária à saúde: revisão integrativa. *Saúde em debate*. 2015; 39 (105): 514-524.

Belfort ikp, costa vc, monteiro scms. Acolhimento na estratégia saúde da família durante a pandemia da covid-19. *Aps em revista*. 2021; 3 (1): 3-8.

Galindo emv. A prática do acolhimento na estratégia de saúde da família. 2019. 288f. Dissertação (mestrado profissional em saúde pública). Instituto aggeu magalhães, fundação osvaldo cruz.