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NURSING ASSISTANCE TO VICTIMS OF TRANSIT ACCIDENTS IN A PUBLIC HOSPITAL OF THE BICO DO PAPAGAIO – TO

¹Rayllany Matos Soares, ²Dennis Gonçalves Novais, ²Lílian Natália Ferreira de Lima, ²Priscila Gonçalves Jacinto Figueredo, ²Adriano Figueredo Neves, ²Hanari Santos de Almeida Tavares, ²Arla Raquel Saraiva Zanin Bruno, ²Catilena Silva Pereira and ²Maria Adenilda da Silva

¹Academic Nursing degree at the State University of Tocantins
²Department of Nursing, State University of Tocantins - UNITINS

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ABSTRACT

The nursing professionals of the emergency room are fundamental elements in the work process of this sector, not only when they perform emergency care, but because their activities directly influence the reduction of secondary damage to Patients in emergency situations. In view of the above, the study aimed to analyze the quality of care provided by the nursing team to victims of traffic accidents. This is a qualitative-quantitative, exploratory study, using field research, based on the application of a semi-structured questionnaire. Data were collected in the month of April, 2016. The study sample consisted predominantly of the female gender, by nursing technicians, and the age group from 26 to 30 years, with 11 years or more of training, who have been working between 1 and 2 years. Most interviewees do not have specialization and complementary training in urgency and another negative aspect refers to the lack of protocols and a red room to meet situations with imminent life risk. The time of attendance to the accident victim is del 1 minutes and the team interacts with each other and another problematic refers to the inadequate physical structure and lack of equipment and materials. It is concluded that for the good care of the service and for a qualified and humanized care, it is essential that the professionals who work in the hospital in study require the municipal manager better working conditions, in order not to compromise the Quality of service.

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INTRODUCTION

It is known that the emergency room is a major part of a hospital, where it needs assistance focused on urgency and emergency due to the diversity of injured victims, the work routine of this sector is usually intense, which causes overload, stress and fatigue for the nursing team. The great demand of patients attended and the dynamics of the routine of an emergency unit (PS) make the nursing team of this unit need to be efficient and fast, since they serve clients in emergencies. The nursing professionals of the emergency room are fundamental elements in the work process of this sector, not only when they perform emergency care, but because their activities directly influence the reduction of secondary damage to Patients in emergency situations.

*Corresponding author: Rayllany Matos Soares,
Academic Nursing degree at the State University of Tocantins

The real function of the emergency room of a hospital, as its name says, is to attend patients who are in a state of urgency or emergency. They are people who are at imminent risk of life, such as accidents, suspected infuses, strokes, appendicitis, pneumonia, fractures, among other complications. This information is the correct path to good care, since every 10 people seeking the service, on average, six are not cases of urgency (SANTOS, 2007). Oliveira (2005) cites that emergency care in the hospital units plays an important role in the recovery and maintenance of the individual's health. Recovering health and maintaining it is established with a quality health care and multidisciplinary team focused on the individual as a whole in its integrality, paying attention to aspects that involve effective, efficient, fast and well-known actions Clinical and scientific. According to Brandão et al., (2008) The real purpose of a hospital emergency room, as its name says, is to provide medical care to patients who are in a

state of urgency or emergency, that is, people who are at imminent risk of life, such as Accidents, strokes, appendicitis, pneumonia, fractures, among other complications. According to the Ministry of Health, the main difference between urgency and emergency is the imminent risk of death. The urgency has no imminent risk of death and the emergency has imminent risk of death. Patient care should be performed quickly and with quality. The agility and quality of the procedures performed by the multidisciplinary team can mean the life of the patient. This is why it is important that the work team involved has good synchrony in patient care. The cost of patient care should be as low as possible. To do so, it is necessary to eliminate the wastes that occur in the processes involving patient care (BRASIL, 2012). Another item that hinders the work of the team in the emergency room is the exaggerated number of companions, which causes the feeling of overcrowding and increases the risk of contamination. The emergency room is also not the right place to request exams, revenue exchanges, health ATMs and other non-emergency procedures. The users' conscious use contributes to the better functioning of the emergency room, decreasing the waiting time and improving the flow of medical-hospital care (SANTOS, 2007). According to the Brazilian Ministry of Health, the number of nurses prepared and trained to work in the emergency department is restricted. In view of the above, and due to the scarcity of studies on nursing in emergencies in the national literature, determining the need for investigations, this article aims to present the activities of the emergency nurse of a private hospital and to make considerations about leadership as a strategy to improve the management of nursing care provided to the patient, with the purpose of offering subsidies that enable this professional reflections and discussions about his work Daily life (BRASIL, 2012). This research is justified by the need to demonstrate the role of the nursing team with the victims of traffic accidents, besides the characterization of professionals who work directly in the care of this clientele. The study proposes to observe the structure and organization of the hospital environment in a clear and objective way. In view of the above, the following guiding question was instigated in the present study: How does nursing care be given to victims of traffic accidents in the emergency room of a public hospital in a municipality in the region of the parrot beak-TO?

For the development of this study, it was defined as the general objective: to analyze the quality of care provided by the nursing team to victims of traffic accidents. And as specific objectives: to identify the profile of the nursing team working in the emergency room, to verify how the nursing team's embracement is given to victims of traffic accidents and to analyze the difficulties encountered in Emergency care by the nursing team in assisting the injured.

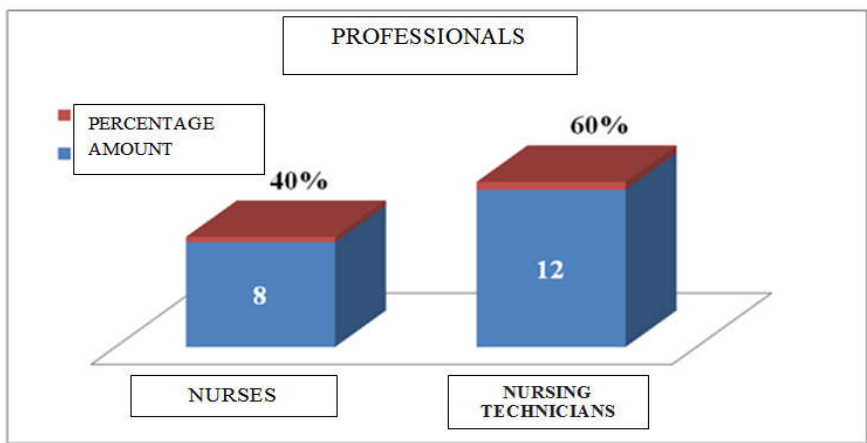
MATERIALS AND METHODS

The present study used a qualitative and quantitative approach, with exploratory character, using field research as a method of application of the research. According to Gil (2008), the field study aims to seek or investigate and deepen a specific reality. It is basically achieved through direct observation of the activities of the group studied and interviews with informants to capture the explanations and interpretations of the occur in that reality. The research was carried out in a public hospital of a municipality in the region of the parrot beak in the north of Tocantins, which according to data from the National Registry

of Health Establishment (CNES) the hospital is a public organ of municipal power, has a basic module of Ambulatory activity for basic care and media complexity, also hospital of media complexity still provides hospitalization, diagnostic and therapeutic support service – SADT and emergency room. It has basic modulo in the communication and informatics infrastructure and the attendance is of spontaneous and referenced demand. The team consists of general practitioner, gynecologist and obstetrician, orthopedist, physiotherapist, pharmaceutical speech therapist, social worker, psychologist, psychiatrist, laboratory assistant, nurse, nursing technician and nursing assistant, Radiology Technician. The hospital studied has a nursing team active in the emergency room with a contingent of 9 nurses, 28 nursing technicians and no nursing assistants. However, only 8 nurses and 12 nursing technicians participated in the research, since some were on vacation, medical leave or maternity, or refused to participate in the aforementioned study. The inclusion criteria were: Nursing professionals, men and women, of any race, color and belief, without racial discrimination, that were present in the days of data collection, which were not in the enjoyment of any license, which To participate in the study and to sign the free informed consent term. A structured questionnaire with closed questions was used, with questions related to the socio-demographic profile of these professionals, as well as questions related to the objectives that contemplate the guiding aspects of the research. Data collection was carried out in April 2016. To perform data collection, it was initially sent to the letter of authorization for the coordination of the nursing course at Unitins, in order to make it aware about the accomplishment of the study. The data was tabulated through a Microsoft Office Excel 2010® Program database. Where they were described by tables and graphs, they were massified in percentage numbers and the objective questions were analyzed in an exploratory and qualitative way through the thematic analysis of the results of the study.

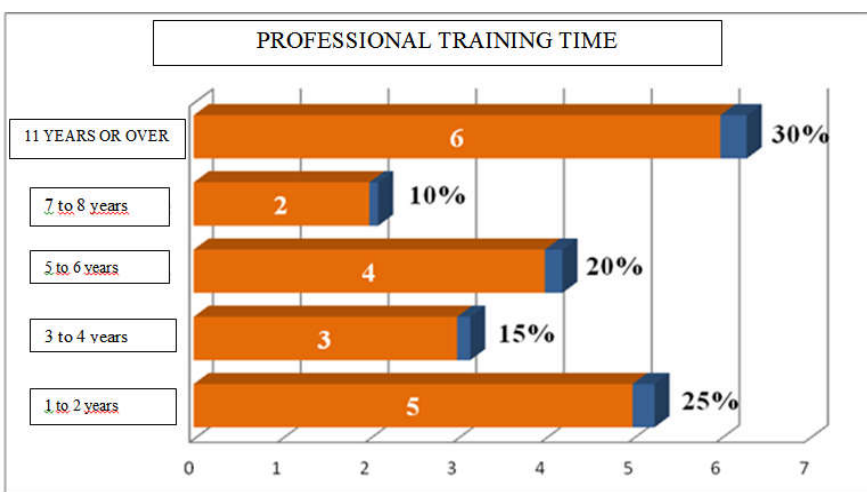
RESULTS AND DISCUSSION

In this study we interviewed 20 nursing professionals who work in the emergency room of a public hospital in a municipality in the region of the parrot beak-TO. Data collection was carried out between March and April 2016, and the results were described in graphs and tables, in relation to the following variables: Gender, age group, professional training, time of professional practice, time of attendance of victims. It was observed that the highest percentage of professionals working in the emergency unit studied were nursing technicians. This finding reminds us of the reality that in the realization of nursing care there is a need for a higher percentage of professionals in the technical team, being the nurse responsible for the management of this care. Results similar to the study regarding the Professional category were also verified by Santos (2007), where they found that 75.6% of the interviewees' relationship were nursing technicians. Collaborating with these findings, Lima (2008), when evaluating the nursing team and the detection of worsening indicators in emergency care patients, observed that 64.70% of the study participants were nursing technicians. Wehbe (2008) found in his studies that it is of paramount importance that the emergency care team be composed of nurse, nursing technician and physician, in order to carefully analyze the patients during screening and to serve him according to the degree of Risk, seriousness of the problem and the possible consequences for this health.



Source: Search data (2016).

Graph 1. Absolute and percentage representation of data according to the training of professionals from a public hospital in the region of the parrot beak – to, May 2016



Source: Search data (2016).

Graph 2. Absolute and percentage representation of the data according to training time of the professionals of a public hospital in the region of the parrot beak-to, may 2016

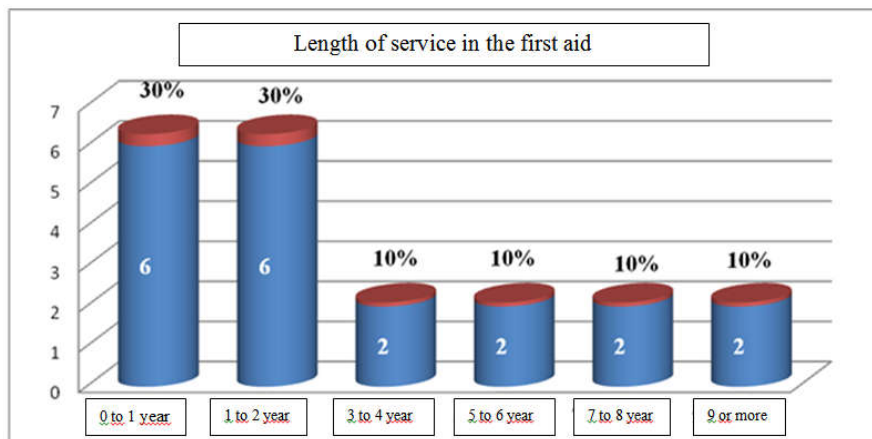
For this reason, the need for urgency and emergency services to present an adequate number of professionals is highlighted, in order to provide quality care and seek to meet the needs of patients assisted in a ready Help. In a study conducted by Calil and Paranhos (2007), they observed the need for a higher quantitative number of nursing technicians and auxiliaries compared to nurses during in-hospital care, as this is indispensable for ensuring sufficient and competent human resources for the achievement, maintenance of quality of care and development of daily activities, in view of the different functions performed by each category of nursing. The figure shows the distribution of the study participants regarding the time of professional training, where 30% have been working in the area for 11 years or more, 25% between 1 for 2 years, 20% from 5 for 6 years, 15% from 3 to 4 years and 10% from 7 to 8 years. As for the time of professional training, it was found that the majority of respondents have been practicing the profession for a long time, that is, between 11 years or more. It is worth mentioning that to exercise the profession it is necessary that the professional has a level of competence, skill and knowledge, which allow him to perform his attributions with excellence and humanity, because nursing always seeks to treat its clients in a way that covers all its aspects, aiming at a complete, individualized and quality care. Contrary to the results of the study, Silva (2012) In his study observed that 38% of the nursing professionals had 4 years of training.

On the other hand, reinforcing the study's findings regarding the time of training, Silva and Menezes (2005) found that 31.8% of the professionals surveyed reported having 6 years of graduation. Table 1 concerns the distribution of study participants regarding specialization or continuing education in urgency and emergency. When questioning the study participants about having specialization or continuing education in urgency and emergency, it was found that 70% reported not having any of the 2:30% said they had. In view of the results, this 30% was questioned about the time they performed the aforementioned courses, obtaining the following results: 10% said they had done between 7 8 years ago, 5% for less than 1 year, 5% between 1 2 years ago, 5% from 5 for 6 years and 5% between 9 years or more. The results of table 1 are considered negative, since most participants reported not having any training on urgency and emergency. Counterpoint of the findings of the study, Guido (2005) in research about the experiences of the nurse in the service of mobile emergency care verified the accomplishment of postgraduate studies, that ten nurses were trained to work in the area, because three of these Reported Have Master's and seven reported latensu specialization in urgency, emergency and intensive care; And only three had no post-graduation. As for the time of service in the emergency room, it is visualizing through Figure 3 that 30% of respondents reported that they have been working for less than 1 year, with the same percentage (30%) For those

Table 1. Absolute and percentage representation of the data according to continuous training in urgency and emergency of the professionals of a public hospital in the region of the parrot beak-to, may 2016

VARIABLES		AMOUNT	%
Do you have specialization or ongoing training in urgency and emergency?	YES	6	30%
	NO	14	70%
	Total	20	100%
If your answer was affirmative, how long ago?	0to 1year	1	17%
	1to 2 years	1	17%
	5to 6 years	1	17%
	7to 8 years	2	32%
	9toyears	1	17%
	Total	6	100%

Source: Search data (2016).



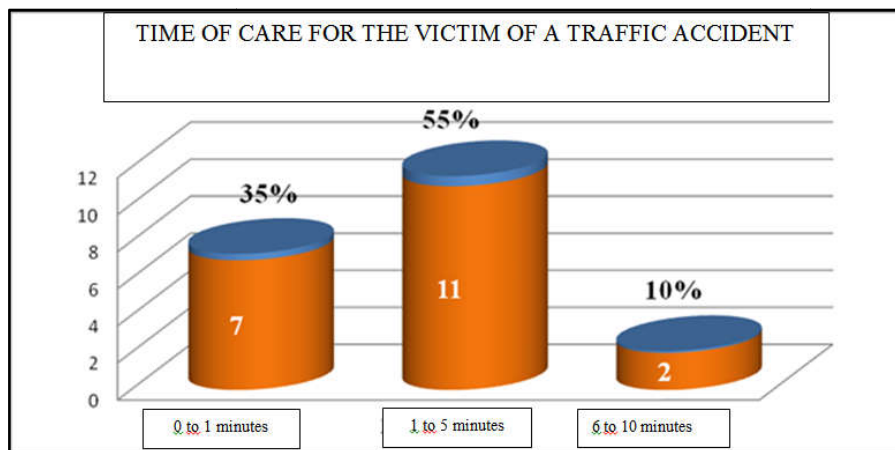
Source: Search data (2016).

Graph 3. Absolute and percentage representation of data according to time of service in the emergency room of nursing professionals of a public hospital in the region of the parrot beak – to, May 2016

Table 2. Absolute and percentage representation of data according to the use of a reception protocol with risk classification of a public hospital in the region of the parrot beak – to, May 2016

VARIABLES		AMOUNT	%
Is it followed in the institution, some type of protocol referring to the reception with risk classification to patients who are victims of traffic accidents?	YES	2	10%
	NO	18	90%
	Total	20	100%

Source: Search data (2016).



Source: Search data (2016).

Graph 4. Absolute representation and percentage of data according to time of attendance to the victim of traffic accident in a public hospital of the region of the parrot beak – to, May 2016

who reported is working from 1 2 years ago, 10% between 3 4 years ago, 10% between 5 years ago, 10% from 7 to 9 years and 10% between 9 years or more. About the time of service in the emergency room where the research was conducted, that most of the participants are working between 1 for 2 years, thus demonstrating little time of experience when compared to

the others. Contrary to the results of the study, Garlet (2009) found a higher percentage (34.1%) Among professionals who worked for 2 5 years ago, while in Guido's research (2005), 55.3% of respondents were working for more than 10 years, pointingThat much of the nursing team in the emergency room studied had experience in the area. Thus, table 2 concerns

nursing care in emergency and emergency, but specifically on the existence of a protocol in the emergency room to assist patients who are victims of traffic accidents. Regarding the existence of protocols to meet the victims of traffic accidents, it was evidenced from the data in table 2 that 90% of the respondents reported not existing and 10% said they existed. Such findings may be considered negative in the accomplishment of the study, because the existence of protocols is important for the professional's performance and mainly due to legal support. In this context, Romani et., AL (2015) points out that the role of the nurse in the emergency Care Medical service is related to direct care to victims in a severe state at risk of death, where this professional performs with the physician, maneuvers of Advanced support and basic life support. Graph 6 shows the distribution of the study participants in relation to the time of attendance to the victim of traffic accident, thus, 55% of the respondents reported from 1 to 5 minutes, 35% to 1 minute and 10% between 6 and 10 minutes.

team that presents technical knowledge and emotional stability. Corroborating the findings of the study Brandão (2008) evidenced in his research the integration between the team, where they present the same objective, which is to save the life of the victim patient. The team acting in an integrated way, allows the victim of traffic accidents an appropriate, immediate and competent care. Regarding the difficulties encountered to develop assistance to traffic victims, it is observed in chart 1 that: 16 of the participants reported inadequate physical structure; 17 reported the lack of equipment, 4 pointed out the insufficient number of professionals and 4 the great demand of victims. Pertinent to this, Valentim and Santos (2009), in a study conducted in an emergency unit, also found difficulties experienced by the professionals, among them: inadequate physical structure, high temperatures in the workplace as a factor That interferes with the quality of the environment, which, in addition to causing discomfort to patients and professionals, compromises the care provided.

Table 3. Absolute and percentage representation of the data according to the existence of organization and integration of the team in emergency situations in a public hospital in the region of the parrot beak-to, may 2016

VARIABLES		AMOUNT	%
During the attendance of a traffic accident victim, is there in your conception organization and integration of the team that provides nursing care to the victim?	YES	13	65%
	NO	7	35%
	Total	20	100%
If your answer was negative, why?	There is no coordination of the actions	3	43%
	The team has no specific training for the development of actions	1	14%
	There is no physical structure and materials necessary for conducting the conduct in an organized way	3	43%
	Total	7	100%

Source: Search data (2016).

Table 4. Absolute and percentage representation of data according to difficulties encountered in assisting victims of traffic accidents in a public hospital in the region of the parrot beak-to, may 2016

Difficulties Encountered In The Development Of Assistance To Victims Of Traffic Accidents	
VARIABLES	AMOUNT
INADEQUATE PHYSICAL STRUCTURE	16
LACK OF EQUIPMENT AND MATERIALS	17
INSUFFICIENT NUMBER OF PROFESSIONALS	4
GREAT DEMAND FOR VICTIMS	4

Source: Search data (2016).

The results of Graph 4 indicate agility in care, because most interviewees reported that the victim takes 1 to 5 minutes to be attended, and this is a positive and crucial finding to restore the patient's health conditions. No articles were found that talk about the time of attendance to victims of Accident, however, Lopes (2011) mentioned in his study that, due to the large number of patients attended in the emergency room, the embracement and humanization are compromised, although these are classified according to the priorities. Table 3 concerns the distribution of the study participants regarding the existence of integration between the team in attendance to the traffic accident victim. Table 3 shows the highest percentage (65%) Of respondents who reported integrating the team in providing care to the accident victim and 35% responded negatively. Therefore, the 35% who said they were not questioned about the reason for the lack of interaction, obtaining the following results: 43% of the interviewees reported that there was no coordination between the actions; 43% reported the lack of physical structure and materials necessary for conducting the conduct in an organized manner and 14% reported that the team does not have training for the development of actions. According to Santos (2007), pre-hospital care should consist of an agile

As for quality care, Andrade and Caetano (2009), they verified in their studies through the narratives of users and relatives of patients attended in an emergency room, which they accommodated in inadequate litter and chair scattered throughout the Corridor due to the insufficient number of beds in the hospital where they applied the research and in the Care network, reported having been well attended by the nursing professional who operates in the emergency department of the HUOP. They also found unanimity in the reports about the professionals being very attentive, taking good care of the patients and not missing anything.

Dante of this points out that the behaviors of the caregiver should be permeated by the qualities that consist of giving and paying attention, in human warmth, affection, love and dedication. Batista and Bianchi, (2006) affirm that the satisfactions of the patient are demonstrated by means of facial expressions, i.e. verbal and non-verbal responses to the care offered and attention dispensed to the victim, evidencing feelings through gestures and looks. Thus, we emphasize the need for the professional to be attentive to non-verbal signs, and try to understand them, because these signs complement what is shown verbally.

Conclusion

The study sample consisted predominantly of the female gender, by nursing technicians, and the age group from 26 to 30 years. It was also found that most participants have 11 years or more of training, who have been working between 1 and 2 years. As for specialization or continuing education, it was possible to observe a higher percentage among the participants who did not have either of the two, being a negative result, because it demonstrates that these professionals were not trained to act in emergencies and emergency, which may compromise the quality of care provided. Moreover, another negative aspect refers to the lack of protocols reported by most of the respondents and the lack of a red room to meet the situations with imminent life risk. On the other hand, when investigating the time of attendance the accident victim was verified that it is performed within 1 to 5 minutes, being a positive and extremely important finding for the restoration of the patient's health conditions and greater probability of Live. The interaction between the team was also mentioned by most of the respondents, which is fundamental for the good service of the services and for a qualified and humanized care. Regarding the difficulties faced by the professionals of the emergency room in the study, it was found that a higher percentage of respondents reported inadequate physical structure and lack of equipment and materials, conditions that may compromise the Quality of service. In view of the results, it is considered essential that all health professionals and in a special way, those of nursing, who work in the urgency and emergency services continue to improve their knowledge, in order to provide a service with Agility, competence and quality, with a view to welcoming and humanization as essential tools for patient recovery and rehabilitation.

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