EXPERIENCE REPORT

APPLICATION OF QUALITY MENAGEMENT TOOLS IN PRIMARY HEALTH CARE: EXPERIENTE REPORT

Kalliny Mirella Gonçalves Barbosa - kamirely64@gmail.com
Brigida Guimarães Miranda Granja - brigidagranja83@gmail.com
Jessica Rodrigues Da Mota Souza Freitas - jessicarmsouza.1@gmail.com
Lays Soares Prado Nascimento - pradolays97@gmail.com
Mariana Ferreira Amorim - amorimmarianaf@gmail.com
Thíria Lauren Silva Barros - thiria10@gmail.com

Abstract: Nursing plays an essential role in Primary Health Care, acting beyond assistance, as it significantly contributes to the management and resolution of issues within the health unit. Hence, the objective of this paper is to report on the experience of nursing students in the use of quality management tools during the Supervised Curricular Internship. This is a descriptive and qualitative study, in the form of an experience report, developed from the application of quality management tools in Primary Health Care, from February to May 2024, in a family health unit located in the municipality of Petrolina, Pernambuco. It is noteworthy that the students analyzed the results of the "Previne Brasil" Program indicators of the family health team and used management tools to solve them. Data collection took place through the Basic Health Information System, and these data were then compared with the parameters set by the Ministry of Health, aiming to identify team challenges and create improvement strategies. From this, low adherence to cytopathology was identified as a more urgent problem, with resolution strategies being developed from quality management tools. Thus, this study highlights the importance of nursing, quality management tools, and the integration between education, services, and the community in problem solving, as well as reflecting on the learning process of the students involved.

Key words: Total Quality Management. Management Indicators. Primary Health Care. Nursing.

INTRODUCTION

Nursing is fundamental in Primary Health Care (PHC) as it operates from health promotion to monitoring illnesses, ensuring universal and equitable access to health. Its importance intensifies in the PHC context due to the establishment of a close relationship with the population and its contribution to improving health indicators (Backes, 2012).

In this perspective, as a proposal to ensure funding for activities carried out in PHC, the "Previne Brasil" Program was established in 2019 to encourage the organization of health actions, accountability of managers, and recognition of the performance of teams. The program is characterized by four pillars: weighted

capitation, performance-based payment, financial incentives based on population criteria, and incentives for strategic actions (Brasil, 2022; Brasil, 2019).

Through weighted capitation, the program encourages the registration of the population with the aim of funding health teams based on the number of registered people, taking demographic profiles into account. Performance-based payments will evaluate and compensate based on the achievement of targets, that is, according to performance indicators, namely: vaccination coverage, prenatal consultations, cytopathology collection, and monitoring of chronic diseases (diabetes and hypertension). Additionally, the program also includes incentives for strategic actions, which serve as additional funding to encourage specific strategies (Brasil, 2022; Brasil, 2019).

From this perspective, the effectiveness of nursing in PHC is closely related to the application of appropriate management tools and models. The pursuit of excellence in care requires the implementation of strategies that optimize processes, solve problems in a structured manner, and promote the continuous improvement of service quality. In this sense, models like the GUT Matrix, Ishikawa Diagram, 5W2H, and PDCA Cycle are valuable tools for prioritizing problems, identifying bottlenecks that hinder workflow and service quality, and also root cause analysis and structured action plans with objectives, deadlines, responsible parties, and necessary resources to promote continuous improvement.

In light of this assumption, extramural training and close contact with the fields of application of these tools play a fundamental role in consolidating knowledge and building new nursing practices. In this framework, the Supervised Curricular Internship (SCI) contributes to understanding the investigation of health-related issues in the population and the effectiveness of nursing interventions, supporting professional practice and providing scientific foundations for clinical decisions and care actions.

Furthermore, the SCI allows students in the training process to recognize the health needs of the population and the factors that influence the effectiveness of nursing interventions. It also promotes innovation through the development of new technologies, practices, and care models that contribute to improving the population's quality of life (Justino et al., 2024).

Therefore, this study aimed to report on the experience of nursing students in the application of quality management tools during the SCI in a Family Health Unit (FHU), with the justification being the applicability of management tools in evaluating health indicators established in the “Previne Brasil” Program to plan strategies for achieving goals.

METHODOLOGY

This is a descriptive study, in the form of an experience report, based on the experience of nursing students in the use of quality management tools in a FHU in the municipality of Petrolina (PE). It is noteworthy that contact with the mentioned FHU occurred during the students' SCI activities from February to May 2024. The course "Quality Management in Health Services" proposed the activity to enable the practical application of theoretical knowledge accessed during the training process.

The setting of the experience was a FHU with a Family Health Team (FHT) consisting of a nurse, a doctor, a dentist, three nursing technicians, and four Community Health Agents (CHA). Additionally, according to data from the Health Information System for Primary Care (“SISAB”), the health unit had 3,644 registered individuals under the third quarter of 2023's competency. The PHC has 4 coverage areas, all covered by the CHA.

It is noteworthy that the experience of this activity took place during the SCI what is advocated by the National Curriculum Guidelines and, regarding the organization of this component at Uninassau Petrolina, the SCI occurs in the final semesters of the course, distributed between PHC and hospital care, totaling 800 mandatory hours.

Data collection for analysis and application of the tools was done through SISAB. By accessing the results of the “Previne Brasil” indicators of the FHU, a thorough analysis of the presented values was conducted, comparing them with the parameters established by the Ministry of Health (MH), in order to identify the main challenges of the family health team and outline health care strategies to improve performance. It is important to say that the tools were applied to the indicators that stood out for not having met the MH parameters, as per the discipline professor's guidance.

Furthermore, considering the relevance of applying new approaches in health to achieve goals and improve indicators, the students presented to the FHT about the identified issues and the applicability of quality management tools to enhance team performance and, consequently, the population's access to health. The said meeting with the FHT took place in May 2024, upon prior scheduling and invitation to all FHT members, with only the nurse and the involved students present.

It is important to mention that this study addresses the experience of nursing students in using quality management tools in health with public data related to the FHU indicators, thus disregarding the need for submission to the Human Research Ethics Committee.

RESULTS AND DISCUSSION

The GUT Matrix stands out as a tool that prioritizes problems through three established criteria, namely: assessed severity (G), urgency of resolution (U), and tendency to worsen over time (T) (Inácio et al., 2023). In this sense, each evaluated criterion is divided into a scale of 1 to 5 points, where the highest score indicates the need for more agile resolution. Finally, the GUT criteria are multiplied and the issue with the highest value emerges as the priority (Bezerra et al., 2020). Thus, the students applied the GUT Matrix to analyze four identified issues in the FHU. The issue with the highest score was the low adherence to cytopathology collection, which scored 125 points, while the indicators related to vaccination coverage, prenatal consultations, and dental follow-up of pregnant women scored 64, 48, and 36 points, respectively.

Based on the observed indicators in the health unit in question, quality management tools were used to identify the main obstacles and propose improvement strategies. From this perspective, according to the GUT Matrix, it was observed that the issue with the highest score was the indicator related to cytopathology collection, which requires greater urgency compared to the other identified issues. Therefore, this indicator requires an in-depth analysis on how to solve it, using the other available management tools.

After this step, the Ishikawa diagram was applied, a tool characterized by its analysis form that allows the identification of possible causes leading to a particular result, thus contributing as a guiding structure for facilitating problem resolution (Carvalho; Gomes; Göttems, 2023). For the indicator "proportion of women with cytopathology collection in PHC," identified in the analyzed FHU as performing below the parameter set by the MH, the first perceived factors contributing to this outcome include the insufficiency and/or inadequacy of material resources, dilapidated infrastructure, and outdated Standard Operating Procedures (SOP). Furthermore, the shortage of professionals, lack of qualifications, and communication difficulties - both interprofessional and with the population - also impact the low result of this health indicator.

Based on this information, the group turned to the 5W2H (What, Why, Where, When, Who, How, How much) for constructing the action plan, considering the importance of this tool in building actions aimed at overcoming the problem's causes while guiding improvements in health indicators and the quality of health care (Espírito Santo; Zocratto, 2020). According to Barros (2021), this tool consists of guiding questions in its original language, English, which will aid in constructing the action plan to be used in solving the previously identified problem, following the management tools utilized.

With this tool, it was possible to outline strategies to improve women's health care, which reflects on the quality of the indicator. Thus, strategies such as active search, health education, and campaigns were established in the action plan.

The actions will be led by the CHA and the nurse to prevent and screen for cervical cancer through cytopathological collection. It is important to highlight that the awareness and initiative for the execution of the action plan described earlier were originated by the students, who dedicated themselves to studying and suggesting these strategies to improve the health of women in the community. Additionally, the interventions will take place monthly, including health education activities in the waiting room.

With this tool, it was possible to outline strategies to improve women's health care, which reflects on the quality of the indicator. Thus, strategies such as active search, health education, and campaigns were established in the action plan. The actions will be led by the CHA and the nurse to prevent and screen for cervical cancer through cytopathological collection. It is important to highlight that the awareness and initiative for the execution of the action plan described earlier were originated by the students, who dedicated themselves to studying and suggesting these strategies to improve the health of women in the community. Additionally, the interventions will take place monthly, including health education activities in the waiting room.

In addition to these tools, the group also used the PDCA cycle, as its stages allow for the systematic solution of the identified problem. The PDCA cycle comprises four phases: plan, do, check, and act. In the planning phase, the objectives and processes necessary to achieve results according to the defined goals are determined. In the execution phase, the plan is put into practice, while in the checking phase, the achieved results are evaluated regarding the planned objectives. Finally, the action phase involves implementing improvements based on the needs identified through monitoring and evaluation. This cycle allows for continuous adjustments and improvements, being widely applicable in the health sector to improve processes, ensure service quality, and optimize patient care (Flain et al., 2024).

Thus, the group structured the plan with interventions that emerged from the low adherence to the cytopathology exam and set the goal of reaching 40% of the target population, as established by the MH. Important to say that this phase converges with the motivations outlined in the Ishikawa diagram, facilitating the construction and application of the PDCA. Regarding the execution phase, the planned interventions include active search, health education promotion, dissemination of informational materials about the importance of the preventive exam (including how it is performed, when it should be performed, and the diseases it can detect), organization of monthly campaigns for the cytopathology exam, and mobilization of the CHA to disseminate information to the community, as established in the 5W2H.

Active search has been fundamental in improving health and the quality of care, being essential for implementing preventive actions and early detection of diseases like cervical cancer. By identifying people exposed to risk factors, health professionals can initiate preventive measures. This method facilitates quick intervention, prevents diseases and complications, and improves and ensures continuity of care (Silva et al., 2024). In cytopathological evaluation, PHC is

essential for the prevention of cervical cancer through screening and active search for cases. PHC is generally the first contact of the population with the health system and plays a crucial role in implementing preventive actions that encourage healthy habits and early identification of people with initial symptoms of diseases (Oliveira et al., 2024; Morais et al., 2020).

Thus, the group structured the plan with interventions that emerged from the low adherence to the cytopathology exam and set the goal of reaching 40% of the target population, as established by the MH. Important to say that this phase converges with the motivations outlined in the Ishikawa diagram, facilitating the construction and application of the PDCA. Regarding the execution phase, the planned interventions include active search, health education promotion, dissemination of informational materials about the importance of the preventive exam (including how it is performed, when it should be performed, and the diseases it can detect), organization of monthly campaigns for the cytopathology exam, and mobilization of the CHA to disseminate information to the community, as established in the 5W2H.

Regarding the verification stage, monthly evaluation of the obtained results was advised to monitor the implemented actions, comparing data before and after the intervention. Additionally, this strategy allows for the identification of potential deviations from the planned actions and their causes, as well as provides an analysis of the contribution of the changes made to improve adherence. According to Sellera et al. (2019), monitoring and evaluation play a reflective role within strategic planning. Continuous evaluation of the obtained data will facilitate decision-making and, consequently, contribute to the applicability of necessary activities.

Finally, in the action stage, the team will be encouraged to follow the structured interventions based on understanding the causes affecting the mentioned indicator's decline. From this point, the cycle highlights the need to analyze the results for decision-making and the next steps. If the implemented actions have been effective, successful practices should be consolidated and expanded. If adjustments are needed, corrections should be made in the planning and execution of activities, aiming at the continuous improvement of the demand organization process.

It is important to mention that, to share the outlined action plan and the management tools used with the team, the students visited the FHU, which was previously scheduled, and the invitation was extended to all FHT professionals. During the meeting, an introduction about the topic was given, presenting the importance of management and the use of tools as guiding instruments for decision-making. Additionally, the identified problem was discussed, pointing out the possible causes and suggesting an action plan for the FHT to implement and evaluate the results. The nurse at the unit showed great interest in the proposal at all times and was willing to put into practice the activities described in the action plan.

It is important to mention that, to share the outlined action plan and the

management tools used with the team, the students visited the FHU, which was previously scheduled, and the invitation was extended to all FHT professionals. During the meeting, an introduction about the topic was given, presenting the importance of management and the use of tools as guiding instruments for decision-making. Additionally, the identified problem was discussed, pointing out the possible causes and suggesting an action plan for the FHT to implement and evaluate the results. The nurse at the unit showed great interest in the proposal at all times and was willing to put into practice the activities described in the action plan.

During the opportunity, the “Previne Brasil” program was discussed as a PHC funding model which, although it aims to strengthen the principles of the SUS, in practice, its implementation has caused restrictions in the services offered in PHC. This is because professionals focus more on achieving quantitative targets to ensure financial transfers, and productivity is recognized as the ultimate goal of the FHT activities, situations also pointed out by Rodrigues and Eberhardt (2024) as they reflect that this model results in inequalities in access to SUS services.

It should be noted that although the data used by the group to apply quality management tools and structure improvement strategies for the indicators are based on the results of “Previne Brasil” (3rd quarter of 2023), it is known that the federal government, through ordinance no. 3493/2024 of the MS, is implementing a funding model with a significant increase in financial incentives based on new transfer criteria (Brazil, 2024).

FINAL CONSIDERATIONS

This work was extremely important to demonstrate the role of nursing, the applicability of quality management tools in health, and the integration of educational institutions, services, and communities for problem resolution, considering that the problem identification resulted from the SCI activities, where it was possible to develop practical skills and consolidate theoretical knowledge. Furthermore, this activity allowed the students to contribute to the improvement of the highest priority indicator, reflecting the relevance of the SCI, in line with other curricular components, in preparing professionals to take on responsibilities as managers capable of leading teams, planning, and implementing evidence-based health actions.

From this, the students had the opportunity to develop analytical and practical skills essential for academic training, in addition to enhancing the competencies acquired in the "quality management in health services" course. Thus, professional performance during the internship period in PHC was extremely important for accessing data, using quality management tools, and interpreting the real needs of the population.

Hence, the actions proposed in this study have a significant impact on improving health care. Through these tools, it was possible to identify problems, analyze them, develop/construct an action plan, and present it to the FHT for implementation, resulting in more targeted interventions. For the population served in the FHU environment, the proposals brought in this study will result in higher quality and efficiency in care, thus increasing the demand for cytopathology collection and screening for cervical cancer, in addition to improving the indicator anticipated by the “Previne Brasil” program.

REFERENCES

BACKES, D. S. et al. O papel profissional do enfermeiro no Sistema Único de Saúde: da saúde comunitária à estratégia de saúde da família. Ciência & Saúde Coletiva, v. 17, p. 223-230, 2012.

BARROS, D. S. L. Gestão da qualidade em hospitais na pandemia do novo coronavírus. Revista Gestão & Saúde, v. 12, n. 02, 2021.

BEZERRA, I. N. M. et al. A utilização da aprendizagem baseada em problema (abp) na formação em saúde:um relato de experiência. Revista Ciência Plural, [S. l.], v. 6, n. 1, p. 102–118, 2020.

BRASIL. Portaria nº 2.979, de 12 de novembro de 2019. Institui o Programa Previne Brasil. Diário Oficial da União, Brasília, DF, 17 nov. 2019.

BRASIL. Portaria GM/MS Nº 102, de 20 de janeiro de 2022. Altera a Portaria GM/MS nº 3.222, de 10 de dezembro de 2019, que dispõe sobre os indicadores do pagamento por desempenho, no âmbito do Programa Previne Brasil. Diário Oficial da União, Brasília, DF, 20 jan. 2022.

BRASIL. Portaria GM/MS nº 3.493, de 10 de abril de 2024. Altera a Portaria de Consolidação GM/MS nº 6, de 28 de setembro de 2017, para instituir nova metodologia de cofinanciamento federal do Piso de Atenção Primária à Saúde no âmbito do Sistema Único de Saúde (SUS). Diário Oficial da União, Brasília, DF, 10 abr. 2024.

CARVALHO, V. M. P.; GOMES, S. S.; GÖTTEMS, L. B. D. Incidentes com medicamentos e de comunicação na Atenção Primária à Saúde: Análise de Causa Raiz. Comunicação em Ciências da Saúde, v. 34, n. 03, 2023.

COSTA, K. G. M.; BARBOZA, D. V.; MEIRIÑO, M. J. Inovações administrativas na atenção primária à saúde no Brasil na década de 2010-2020: uma revisão integrativa. Revista Univap, [S. l.], v. 29, n. 62, 2023.

ESPÍRITO SANTO, J. A.; ZOCRATTO, K. B. F. Ferramentas da qualidade nos processos gerenciais de serviços de saúde. Rev Remecs, v. 5, n. 9, 2020.

FLAIN, N. B. P. et al. Aplicação do ciclo PDCA no controle de qualidade higiênico-sanitária de um serviço de alimentação em uma instituição assistencial para crianças e adolescentes. DEMETRA: Alimentação, Nutrição & Saúde, v. 19, p. e79190, 2024. DOI: 10.12957/demetra.2024.79190.

INÁCIO, L. C. R. et al. Ferramentas básicas da qualidade: folha de verificação, estratificação, fluxograma, diagrama de Ishikawa, diagrama de Pareto, matriz GUT e 5W2H. Revista de Gestão e Secretariado, [S. l.], v. 14, n. 10, 2023.

JUSTINO, T. M V. et al., Estágio Curricular Supervisionado: relato da experiência discente em uma Unidade Básica de Saúde. Saúde em Redes, v. 10, n. 1, 2024.

MORAIS, I. C. O. et al.A percepção do usuário em relação à qualidade do atendimento na atenção primária à saúde. Revista Eletrônica Acervo Saúde, n. 50, p. e3465, 26 jun. 2020.

OLIVEIRA, L. G. F. et al. Acesso de primeiro contato na atenção primária à saúde: um atributo fundamental. Revista Enfermagem Atual In Derme, v. 98, n. 2,

p. e024286, 2024. DOI: 10.31011/reaid-2024-v.98-n.2-art.1939.

RODRIGUES, E. C.; EBERHARDT, L. D. Programa Previne Brasil: análise do processo de implementação em um município da região Sul. Saúde em Debate, v. 48, p. e8385, 2024.

SELLERA, P. E. G. et al. A implantação do sistema de monitoramento e avaliação da secretaria estadual de saúde do Distrito Federal (SES/DF). Ciência & Saúde Coletiva, Rio de Janeiro, v. 24, n. 6, p. 2085-2094, 2019.
SILVA, I. N. et al. Assistência de enfermagem à saúde da mulher na Atenção Primária à Saúde. Enferm Foco, v. 15, Supl 1, 2024.