

An analysis of the demand for emergency care from the viewpoint of users

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Began this investigation during the reception experienced in an emergency care (PA) basic unit of district health, health center's medical school, Ribeirão Preto-USP, where we could see that the same users looking at higher frequency service, without the character of urgency or emergency, resulting in a greater demand service that supports and without the effective outcomes of primary health. We think that in the basic health unit, the users did not find the resolution of the problem, did not link with the team, did not have access to the service or the care was not fully, between other possibilities. From these assumptions, we assume that accessibility to health services may be one of the causes triggering to the justification for seeking emergency care and even if the emergency service, the service meets the users considered non-urgent, resulting in increased demand for emergency care. This can cause difficulties for the team that cannot provide a friendly service through orientations about the existence of other services available in the basic attention to health monitoring. We aim with this study to analyze to demand for emergency care at the west of the district health the municipality of Ribeirao Preto, the viewpoint of users. It is a quantitative and qualitative approach about the users who sought emergency care. We collect data from 330 medical records of emergency care, in order to characterize users assisted in the emergency care, about whether a man or woman, will age, the neighborhood of provenance, the justification for seeking, will conduct and referrals. We semi structured interview with 23 users of emergency care addressing questions related to accessibility access to care and health services, and aspects of the care, the resolution of health needs of the reason for seeking emergency care and comprehensive health care to health. As results, found that the delay for serving and scheduling of consultations in the primary care are a major reason for seeking emergency care to; easier access to technology and medication in the emergency room also justified the preference for this service. Opening hours coinciding with the day's work also brought difficulties of users to schedule or seek care in the primary. Obtaining medical care can still have a strong influence on satisfaction that the user is a health service. Conclude that there have been several reasons for the demand for emergency care and understand that, if these users were welcomed and had access to basic care unit, (USF) health and, consequently, the demand for emergency care would tend to decrease with greater peace and meet urgencies and emergencies.

Biography

lone Carvalho Pinto completed her graduation in Nursing from the University of São Paulo at Ribeirão Preto College of Nursing, Brazil (USP), Specialization in Management of Nursing Services at the University of Brasilia, Specialization in Information and Health Informatics at the Oswaldo Cruz Foundation, Master in Nursing from the USP, PhD in Nursing from the USP and Post doctoral at the Universidad Autonoma de Madrid with CNPq scholarship, the Senior Internship Universidad Autonoma de Madrid. Currently Associate Professor III from the Department of Maternal-Child and Public Health of USP and develops international exchange with the Universidad Autonoma de Madrid - Spain, Professor of the postgraduate program in Public Health Nursing of USP. In the period 2001-2011 was Director of Nursing Health Center, Faculty of Medicine of Ribeirão Preto, University of Sao Paulo and coordinated the development of two projects in this service: Evaluation of Health Services and the Evaluation of Labour of Nursing, participating in Group Manager of the district. She was also assessor of the National Assessment of Higher Education National Institute of Studies and Research of the Brazilian Ministry of Education. She has experience in Nursing area, with emphasis in Public Health Nursing and online Research: Practices, Knowledge and Health Policy.

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