

IMPLEMENTATION OF THE ELDERLY PERSON'S HEALTH BOOKLET IN A FAMILY HEALTH STRATEGY (ESF) IN EAST MINAS

Elizabete Maria de Assis Godinho

Specialist professor and master's student in public health on the Undergraduate Nursing Course at Universidade Valem do Rio Doce - UNIVALE

Ana Paula Almeida Neder Issa

Specialist care nurse at the Municipal Hospital of Governador Valadares

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INTRODUCTION

The health of elderly people is strictly related to their global functionality, defined as the ability to manage one's life or take care of oneself through activities of daily living, thus providing them with autonomy and independence (MORAES; MARINO; SANTOS, 2010).

Promoting Healthy Aging will require a much better understanding of common trajectories of intrinsic capacity and functional capacity, their determinants, and the effectiveness of interventions to modify them. (WORLD HEALTH ORGANIZATION, 2015. p. 24).

The Elderly Person's Health Handbook was created in 2006 by the Ministry of Health (MS), but was launched at the National Congress of Municipal Health Secretaries (CONASEMS) in June 2014, after public consultation for 30 days and finalized on 4 March 2014. It is an instrument proposed to assist in the good management of the health of elderly people, through the identification of their vulnerabilities, and must be used by both health teams and elderly people, their families and caregivers (BRAZIL, 2018).

The activity aimed to implement the use of the Health Handbook for the Elderly of the MS in Family Health Strategies (ESF) in a city in the East of Minas Gerais. The proposal is justified by this instrument enabling the identification of the functional vulnerabilities that this population is subject to and the qualification of their assistance in primary health care (PHC) in a city in the East of Minas Gerais, through adequate and pertinent health care planning. to the diagnosis found.

It is expected, at the end of the activity, that elderly people enrolled in the ESF where the use of the Elderly Person's Health Handbook was implemented will be assisted by a

multidisciplinary health team in a qualified and safe manner, thus promoting healthy aging for this population.

THEORETICAL FOUNDATION

According to Freitas and Py (2016), elderly people aim to have quality of life in old age, which is related to the personal satisfaction of their needs regarding place, time, state of mind or mood and maintenance of their functionality related to basic, instrumental and advanced activities of daily living.

The quality of health and well-being of elderly people are, to a large extent, the result of the experiences and lifestyles they have had throughout their lives (examples: the number of people involved in the social circle and the quality of relationships; the quality of food; the abusive use of alcohol and other drugs; the practice of physical activity; and working, social and economic conditions). Such experiences and lifestyle habits (called "social determinants of health") may or may not be under the person's control (BRAZIL, 2023. p. 24).

This population is vulnerable to acquiring geriatric syndromes or geriatric giants, called the 7 "Is" of geriatrics, which are the main disabilities responsible for the loss of autonomy and independence. Those related to autonomy are cognition and mood disorders such as cognitive disability; and those related to independence are mobility and communication, and the elderly person may present postural instability, immobility, sphincter incontinence, and communicative incapacity, in addition to the predisposition to present iatrogenesis and family insufficiency (MORAES; MARINO; SANTOS, 2010).

Ahmed et al. (2007) apud Freitas and Py (2016) point out that in the 21st century the identification, evaluation and treatment of frail elderly people will constitute the center of care in geriatrics and gerontology with special emphasis on preventing loss of independence

and other adverse events health conditions to which they are most susceptible. This condition is present in those who are long-lived, especially those aged 85 years or over, making them the group that most needs care from healthcare professionals.

The capacity of the health system to effectively care for these people and also prevent frailty is directly related to the training of qualified professionals in adequate numbers and the existence of sufficient resources, recognizing that the care provided to this group requires special skills, in addition to longer intervention time (FREITAS; PY, 2016, p. 2039).

The Comprehensive Geriatric Assessment (AGA) or multidimensional assessment of the elderly (AMI) is an important tool used to identify the vulnerabilities of elderly people. It enables multidimensional diagnosis by the interdisciplinary health team, allowing the identification of deficiencies, disabilities and vulnerabilities, in addition to "providing planning for your care and assistance in the medium and long term, both from a clinical, psychosocial and functional point of view" (FREITAS; PY, 2016, p. 290). It is worth mentioning that this instrument is included in the Elderly Person's Health Handbook together with the functional clinical vulnerability index 20 (BRAZIL, 2018).

The State Policy for the Elderly and the State Council for the Defense of the Rights of the Elderly Person aim to ensure the social rights of this population, creating conditions to promote their autonomy, integration and effective participation in society and considers a person over sixty years of age to be elderly. (BRAZIL, 1998). Health care for elderly people must promote the maintenance of their functional capacity and autonomy, contributing to active and healthy aging (BRAZIL, 2018).

The Elderly Health Handbook is part of a set of initiatives that aim to qualify the care

offered to this population in the Unified Health System (SUS). It is an instrument proposed to assist in the good management of the health of elderly people, being manipulated both by health teams through AGA and functional clinical assessment, and by elderly people, their families and caregivers. It allows the recording and monitoring, for a period of five years, of information about personal, social and family data, your health conditions and your lifestyle habits, identifying your vulnerabilities, in addition to offering guidance for your self-care (BRAZIL, 2018).

RESEARCH METHOD

It was a proposal for curricular extension through the Geriatric Nursing discipline taught in the 8th period of the nursing course at Universidade Vale do Rio Doce (UNIVALE), in the semester of 2022 1. After explaining how the AGA is carried out and demonstration by the academics of the group 1 (G1) in the classroom, the Elderly Person's Health Handbook (BRAZIL, 2018) was presented by the subject teacher, as well as its management, correct completion and the importance for the continuity of care and assistance to the person's health elderly woman in PHC.

To enable the use of the theory studied in practice, the G1 students implemented the use of the booklet during the Supervised Curricular Internship I in Public Health in the Family Health Strategy in a city in the East of Minas Gerais, integrating this implementation with the activities proposed by the health unit. health with campaigns for women's health, in March 2022. A welcome morning was held, with rapid tests to detect Hepatitis B, Hepatitis C, Syphilis and Acquired Immunodeficiency Syndrome (AIDS), in addition to filling out of the books for 05 women over 60 years old in the ESF involved.

For assistance with the G2 group, the

elderly people arrived with their notebooks to record the blood pressure values measured. Those who did not have the booklet, but were interested in having it, were assisted by the G2 academics who carried out the AGA and filled out the elderly person's health booklet with the necessary data, continuing the work of the G1 group. G2 encouraged the unit's professionals, especially the local Nurse, to continue filling out and distributing the notebooks to the elderly enrolled in the ESF.

RESULTS

After the event held at the ESF involved, on the morning of March 2022 by the G1 group, the booklet began to be delivered to all elderly people who attended the unit, being filled out during pre-consultations and in hyperday groups with the support of the physiotherapist and educator physics of the Family Health Support Center (NASF).

With the G2 group, an average of 10 to 15 elderly people were served and, to continue using the booklet, another 5 new ones were filled out. According to the academics, it was a peaceful and satisfying job to carry out.

The AGA activities carried out at least once a year and the delivery of the completed elderly person's health booklet were continued actions by the ESF health team involved with the assistance of the NASF health team and the unit's nurse, which made the diagnosis possible. of the vulnerabilities of this population and the planning of strategies for care and qualified assistance to this population.

DISCUSSION

In agreement with Freitas and Py (2016), Moraes, Marino and Santos (2010), it was noticed, during the activity, that there is a need for training of health professionals from the ESF involved and from other PHC units in a city in the East of Minas regarding the

implementation of the AGA and use of the Elderly Person's Health Record, in addition to strategies to promote healthy aging in this population.

The Health Handbook for the Elderly was structured by the Ministry of Health to be a strategic instrument for longitudinal monitoring of the health conditions of the elderly population in health services (BRAZIL, 2018), but during the practices of mandatory supervised curricular internship II in public health in UNIVALE nursing course, it was identified that it was not used due to lack of knowledge of the importance and management of elderly people's health by the health team.

Often the care provided to elderly people in health services is fragmented, discontinuous, unqualified, thus not meeting their real needs, especially those with multiple chronic or complex conditions, enabling the worsening of their health condition (``SOCIEDADE BENEFICENTE ISRAELITA BRASILEIRA ALBERT EINSTEIN``, 2019), this situation was perceived by nursing students and internship supervisor professor at the ESF before the implementation of the use of the Elderly Person's Health Handbook and the applicability of the AGA.

Comprehensive public health action related to aging is an urgent need and something can be done in all scenarios, no matter the level of socioeconomic development (ORGANIZAÇÃO MUNDIAL DA SAÚDE, 2015. p.25)

FINAL CONSIDERATIONS OR CONCLUSIONS

The AGA and the functional clinical classification carried out by the multidisciplinary health team of the ESF and NASF, contained in the Elderly Person's Health Handbook, is essential for the health management of this population, providing

them with qualified, safe care and healthy aging.

There is a perceived need for investment by public management and by PHC health professionals themselves, in continued and permanent training on comprehensive care for elderly people and on the use of existing instruments to identify the vulnerabilities and weaknesses to which they are subject.

The use of the Elderly Health Handbook often does not occur due to a lack of knowledge among PHC health professionals on how to use it and the instruments it contains to diagnose vulnerabilities and weaknesses in elderly people.

With the training carried out by the academics of the 8th period of Nursing at UNIVALE, in March 2022, regarding the AGA and use of the Health Handbook for the Elderly, it provided its continued use in the population enrolled by the ESF health professionals in a city in the Leste de Minas and it is expected that they will be multipliers for the other ESF in the municipality.

It is believed that the project can be carried out in other ESF in a city in the East of Minas, providing early identification of the vulnerabilities of elderly people, resulting in prevention strategies and promotion of the maintenance of functional capacity and autonomy of elderly people, thus contributing, for active and healthy aging of this population in the municipality involved.

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