IMMUNIZATION IN TIMES OF PANDEMIC: NURSING TEAM PERFORMANCE

IMUNIZAÇÃO EM TEMPOS DE PANDEMIA: ATUAÇÃO DA EQUIPE DE ENFERMAGEM

INMUNIZACIÓN EN TIEMPOS DE PANDEMIA: DESEMPEÑO DEL EQUIPO DE ENFERMERÍA

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ABSTRACT

The present work aims to report the experience of the nursing team regarding immunization in times of pandemic. This is an experience report, with a qualitative approach, carried out between March 2021 and March 2022 in the municipality of Iguatu- Ce, based on the researcher's experience as a resident nurse in the Family Health and Community. Initially, the target audience for vaccination was adults over 18 years of age, with vaccination being expanded to teenagers from the second half of 2021. Vaccination occurred in a centralized and decentralized manner, in health units, as a priority initially and at decreasing ages. It was possible to participate in assistance and organizational activities in different sectors and households. The difficulty of access for those who did not have technological means and the enrichment of experiences of the resident professional stands out.

Keywords: Nursing; Vaccination; Family Health Strategy.

RESUMO

O presente trabalho tem como objetivo relatar a vivência da equipe de enfermagem frente a imunização em tempos de pandemia. Trata-se de um relato de experiência, com abordagem qualitativa, realizado entre o período de março de 2021 a março de 2022 no município de Iguatu- Ce, a partir da experiência da pesquisadora enquanto enfermeira residente do programa em Saúde da Família e Comunidade. Inicialmente o público-alvo da vacinação foram os adultos a partir dos 18 anos de idade, sendo ampliado a partir do segundo semestre de 2021 a vacinação para os adolescentes. A vacinação ocorria de forma centralizada e descentralizada, nas unidades de saúde, de forma prioritária inicialmente e em idade decrescente. Foi possível participar de atividades assistenciais e organizativas nos diversos setores e domicílios. Destaca-se a dificuldade ao acesso para os que não tinham meios tecnológicos e o enriquecimento de experiências da profissional residente.

Descritores: Enfermagem; Vacinação; Estratégia de Saúde da Família.

RESUMEN

Objetivo: El presente trabajo tiene como objetivo relatar la experiencia del equipo de enfermería respecto a la inmunización en tiempos de pandemia. Método: Se trata de un relato de experiencia, con enfoque cualitativo, realizado entre marzo de 2021 y marzo de 2022 en el municipio de Iguatu-Ce, a partir de la experiencia de la investigadora como enfermera residente en el Servicio de Salud Familiar y Comunitaria. Inicialmente el público objetivo de la vacunación fueron los adultos mayores de 18 años, ampliándose la vacunación a adolescentes a partir del segundo semestre de 2021. Resultados: La vacunación se produjo de manera centralizada y descentralizada, en unidades de salud, como prioridad inicialmente y en forma decreciente. siglos. Se pudo participar en actividades asistenciales y organizativas en diferentes sectores y hogares. Consideraciones finales: Destaca la dificultad de acceso para quienes no contaban con medios tecnológicos y el enriquecimiento de experiencias del profesional residente.

Descriptores: Enfermería; Vacunación; Estrategia de Salud de la Familia.

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INTRODUCTION

Recognized nationally and internationally, the National Immunization Program (PNI), created on September 18, 1973, is a policy that has been outlining strategies for the promotion, protection and recovery of health through immunization for 47 years, with the goal of reducing morbidity and mortality through vaccine-preventable diseases.¹

Through the Unified Health System (SUS), we have a wide availability of immunobiologicals in health units, allowing us easy access to this means of prevention. Without distinction of age, color or social class, everyone has the right to access, which is a fundamental means of promoting quality of life.¹

In this scenario, in the face of the Covid-19 pandemic, major global challenges are perceived not only in the area of health, but in politics, economics and education. Considered an infectious disease, Covid-19 belongs to the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) family, causing pneumonia at the beginning.²

Currently, as we face the pandemic, immunization against Covid-19 is emerging. This protection tool presents itself as something effective and safe, rekindling hope even for those who disbelieved in this strategy.³

Given this, Primary Health Care (PHC) is necessary for maintaining, protecting and recovering health during the pandemic. PHC, considered a gateway, coordinator and organizer of care, is a set of individual and collective actions that aim to promote, protect and recover health through integrated care practices, together with a multidisciplinary team.⁴

It is noteworthy that, within a multidisciplinary team, the nurse, nursing technician and/or nursing assistant are protagonists who contribute significantly to the quality of life of the population in general, this being an essential workforce for the continuity of a safe and effective care.⁴

In this sense, it is necessary to bring this discussion, linking immunization to the nursing team, as this is essential for executing, combating and controlling diseases. This experience is justified through the experience lived during the residency, acting directly as a front line and realizing how fundamental and necessary nursing is, as this is the only category capable of acting directly in vaccination campaigns, thus serving as a means of valuing the professional category.

Through this work, it will be possible to further highlight the need to support vaccination practices, since, when the individual decides to take any immunobiological, protection goes beyond the individual, becoming a collective good. In this way, the objective is to report the experience of the nursing team regarding immunization in times of pandemic.

METHODS

This is an experience report, with a qualitative approach. An experience report is understood as work that expresses an experience that in some way contributes to the researcher's area of training. This experience must be inserted within a practice, without the obligation to have positive results, but it must be important in some way, bringing new perspectives on the topic, challenges, facilities and reflections. It must also contain a good foundation, making the connection between theory and practice.⁵

This experience was carried out between March 2021 and March 2022 in the municipality of Iguatu, located in the central-south region of the state of Ceará, based on the experience of the resident nurse of the family and community health program during the first period of residence, showing how participation in the immunization process took place within the municipality. To meet the population's demand, centralized points were set up at the headquarters, these being the main locations for welcoming the community. The locations were the Humberto Teixeira Multi-institutional Campus and the Iguatu Regional Hospital, and the service was later centralized at the Iguatu Medical Specialties Center, deactivating the other points.

The strategy adopted to categorize and organize the population to receive vaccination was through registration and scheduling in an application called Digital Health. Initially, the target audience for vaccination was adults aged 18 and over, with vaccination being expanded to teenagers aged 12 and over from the second half of 2021.

The data collected during the experience period were organized through a field diary, containing information about the processes involving immunization, both with regard to registration, scheduling, the active search process by Community Health Agents (CHA) and the vaccination process.

Regarding the ethical aspects of the work, it was understood that there was no need to submit the experiences covered to the Research Ethics Committee, despite adopting legal ethical aspects throughout the experience and writing of the work, since it only deals with reports from the author himself, not exposing third parties in the reports of the work in question.

In order to organize and better describe the data obtained, two categories of analysis emerged from the results, which were grouped by similarity of content, which emerged from the experiences.

RESULTS

Three analytical categories were constructed to reflect the experience of the nursing team in a Covid-19 pandemic scenario in a municipality in the Brazilian Northeast, these being: **Category 1** (Nursing's role and protagonism in confronting Covid-19), **Category 2** (Scheduling and registration process for vaccination) and **Category 3** (Difficulties and realities experienced in the Covid-19 vaccination process).

CATEGORY 1: ROLE AND ROLE OF NURSING IN COMBATING COVID-19

The experience gained through the immunization process began with entry into the multidisciplinary family and community health residency, when, through this, it was possible to participate directly and actively in municipal and national vaccination campaigns against the virus. COVID-19, in order to enhance vaccination coverage for the population of the municipality in question. The residency, characterized as a practice that integrates teaching and service, enabled immersion in the area of collective health with a focus on vaccination.

When it comes to vaccination within the basic units, where I work as a resident, there are three Family Health Strategies (ESF), which carried out specific vaccination actions against Covid-19 on a specific day of the week. The unit operated during regular

hours and by prior appointment, serving the public of the entire municipality, not restricted to its target population.

In addition to working within the physical space of the unit, people who were bedridden or had restricted mobility needed access to the vaccine. In this way, the ACS routinely carried out important mapping and tracking work for this public so that, subsequently, the nursing team went to the home to provide care and the nursing assessment.

The first doses of the vaccines were planned for priority groups who worked on the front line fighting the disease or groups who had some physiological fragility and were at greater risk of contracting Covid-19. Only after the priority groups were finalized did vaccination of the general population begin in descending order of age.

Due to the municipality having a significant number of residents, they were sometimes relocated from their original units to others where there was a need for professionals to offer technical and scientific support.

CATEGORY 2: SCHEDULING AND REGISTRATION PROCESS FOR VACCINATION

Immunizing the population is already something that exists as a health promotion program, being part of the work routine of health professionals who work in primary care. However, there are specific immunizers for specific groups. Regarding the vaccine to prevent Covid, this came as something new, which required a reorganization of teams.

The strategy adopted to categorize and order people was through registration and scheduling in an application called Digital Health. For each age covered, scheduling was opened on a given day, time and location and only then could users try to schedule their vaccine electronically, but this was not always possible promptly, due to the large number of people trying to schedule and the small quantity of available vaccines, making it necessary to wait for another day to try.

It is worth highlighting the difficulty faced by people who did not have direct access to technology, whether due to lack of internet access or not having an electronic device or not knowing how to proceed. They ended up being harmed due to this form of registration. Faced with this difficulty, the municipality opened a support point next to the School of Public Health to help register anyone looking for this service, with the residents themselves being assigned to this action.

During the transition, as a professional residing in centralized spaces, the work went beyond the care practice with the application. In them, it was possible to contribute to the organizational and bureaucratic part, as documentation was received from users and their presence was confirmed through their signature. Afterwards, users went to receive the vaccine card and only then went to the application.

CATEGORY 3: DIFFICULTIES AND REALITIES EXPERIENCED IN THE COVID-19 VACCINATION PROCESS

Among the difficulties and realities experienced, it was noticed that even in an attempt to speed up the process and do it in the most organized way possible, it did not always happen that way. People were anxious because it was something little known,

generating crowds at vaccination centers, resulting in turmoil within the establishments due to the scheduled time not being followed.

Furthermore, at times, there was resistance from the population in adhering to vaccination, as some people were not confident in the effectiveness and veracity of the immunobiological and wanted to choose from those available. In these cases, it was necessary to show the name, batch and expiration date, the product inside the syringe and, after application, the empty syringe, so that trust could be established.

DISCUSSION

Since the existence of the PNI, Brazil has gained visibility among countries in the world due to its creation, performance and dedication to the program. Available free of charge to the entire Brazilian population, this is an important point for the success of campaigns, gaining ground among the population ⁶.

The Family Health Strategy plays a very important role in the face of the pandemic, from identifying suspected and confirmed cases, minimizing the transmission of the virus, as well as taking care of the vaccination process. Nursing, as part of the team, assumes the role of taking care of the entire process from transportation, receipt, storage and administration of immunization agents ⁷.

This task requires all care and responsibility. Given the importance and complexity of administering an immunobiological, care for the environment is necessary, in addition to the fact that the appropriate temperature interferes with effectiveness, the correct routes of administration are crucial, storage and transportation of the same, when not carried out in the best way, they also interfere with the action within the organism ⁸.

To this end, each nursing professional, from the technician to the nurse, who is responsible for the team, who assumes the role within the vaccination room needs theoretical knowledge and technical capacity, understanding each particularity of the process so that, in the end, it is possible to achieve success during administration, as well as vaccination coverage, regardless of the age of each individual ⁹.

Faced with the need faced more than ever within the current pandemic scenario, nursing bravely took on the arduous task of combating and preventing the infection caused by SARS-Cov-2 throughout the world, highlighting the strategy of mass vaccination of the entire population. It is through the vaccination rooms, within the UBS, that users are allowed to have quality access, through all logistics related to immunizations throughout the territory ^{9.}

From then on, everyone, in all sectors, in a general context, faced challenges to combat the virus, to work and live in the face of the chaotic scenario that was beginning. For health professionals, there was great change and adaptation during the most critical period of the pandemic. Many had to be confined to their jobs, others isolated themselves within their own homes so as not to put their families at risk. There was a lack of Personal Protective Equipment (PPE) and supplies. In some sectors, teleconsultation was adopted, limiting care to users ¹⁰.

In this coping proposal, vaccination was and has been understood throughout the world as an important strategy in promoting health and confronting Covid-19, as it has

become the biggest public health emergency that the international community has faced in recent decades 11.

A descriptive observational study, carried out in the municipality of Russas, in Ceará, aimed to present measures to combat Covid-19, which were implemented in individual, community and environmental public health. The main measures were: systematic cleaning of environments and surfaces, installation of community sinks in health services, tents and organization of queues at bank branches, acquisition of smartphones for health units, acquisition of rapid tests, installation of 24-hour field hospital hours, among others ¹².

Finally, as pointed out in the results regarding the population's misinformation and non-adherence to vaccination, a study by Pedreira et al. ¹³ points out the population's lack of knowledge regarding the performance and operationalization of the Unified Health System (SUS) in actions to combat the Covid-19 pandemic, which made vaccination coverage and community protection difficult.

CONCLUSION

In view of the above, it is clear how much nursing as a team contributes to the promotion, prevention and recovery of the population's health, with the valorization of the category being of paramount importance through salary improvements, decent working conditions, possibilities for improvement and more scientific knowledge.

The relevance of residency within services stands out, contributing directly to actions developed individually or collectively in a qualified manner, with educational, bureaucratic and assistance actions.

It can be seen that the digital medium was something that proved to be positive for a part of the public who had access to the internet and knowledge about how to use it, streamlining and organizing the process. However, it was not beneficial for people who were not favored by technology.

The limitation found in the development of the experience was the resistance of some people in adhering to vaccination, as it was a new immunobiological in the country. However, even with this limitation, it was possible to develop strategies for mass vaccination of the population, as this had not happened in recent times. In this way, teams are currently more prepared to develop collective actions, in the case of more numerous and unconventional actions.

Therefore, among the potential provided by the experience, the development of professional skills regarding the immunizations offered is described, as there were vaccines from different brands, which are administered in different quantities, with dilution or not, requiring knowledge about this. There was also the creation of bonds with the community, as there was greater contact both within the units and at home.

To this end, the experience acquired during this period, as a resident professional, enabled professional maturity in the face of working in different scenarios in the area, in addition to showing the importance of teamwork and the need to invest in science and knowledge. In this way, the nursing team continues to be a fundamental part in providing care to the population, in order to promote health, quality of life and solve problems that affect the population in general.

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