61 - QUALITY HEALTH SERVICES DEPENDS ON QUALITY MANAGEMENT: A SYSTEMATIC REVIEW

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INTRODUCTION

SUS is constitutionally defined as a public, national and universal coverage, since health is a right of every citizen, based on organizational guidelines of power decentralization, comprehensiveness of care and community participation. As this process guided by the basic operational norms (NOB) of the SUS, established by ministerial decrees. The municipal, state and federal are responsible for the management and financing of SUS (FIGUEREDO, TONINI, 2007).

Currently you can prove that the main problems faced in health organizations have been among other things, due to the funding system, some items such as misallocation of resources, inefficiency of management, rising costs and unequal conditions of access users within the system. The improvement of health of social groups or a population can contribute to economic growth in several ways, such as reducing production losses caused by worker illness; allow the use of human resources that were not fully or partially accessible of illness, increasing the number of children enrolled in schools, making them more apt to study and free resources that once not invested in health care organizations (LIMA, 1998 apud FADEL; REGIS FILHO, 2009).

For Munro (1994), the provision of services by the public still maintains focus on the very existence of the service, leaving their quality relegated to the sidelines. This can be evidenced from its own financial value assigned to some services, which is shown in practice the accountability required by the constitution, however, does not visualize a search on proving the quality of services offered to the population.

The public sector organizations are major providers of goods and services to the community, this in turn is dependent on the quality, speed and location of these services, the main feature of a direct relationship of responsibility to society, needing continually redefine its mission which must be based on the principles of the Unified Health System (ESTEFANO, 1996).

The quality of health care organizations can be interpreted and represented as the expression of certain subjective formations: a constant concern in creating and maintaining proposals from all who are engaged in health organizations, administrators and staff, understanding the structure and the process of interventions, and concern about the results to meet the emerging needs and demands of the users explicit. Finally, the quality management of health organizations have as one of the main outcomes with improved efficiency and improved effectiveness in the use of resources allocated to the health sector (LIMA, 1998).

On the other hand, Vieira and colleagues (2000), yet there is a well established body of knowledge about the techniques of quality management can be applied to sector-specific public health. There is need for empirical research, especially about the changing nature of the principles of quality so they can be successfully applied to public health as well as to identify strategies that contribute to the improvement of the quality concept in public organizations.

Given these considerations, the study aims to analyze the screen in the current trends of publications and studies conducted on quality management in health.

METHODS

This is a descriptive investigation of the type systematic review, because it is characterized by a search with systematic procedures for description and explanation of phenomena, followed by the scientific method that consists in defining a problem, make observations and interpret them based on the relationships found, stating, if possible, on existing theories (RICHADSON, 1999, p. 70).

The study will be conducted through a literature on the subject, Health Management, Public Health Administration and Health Services Administration, in electronic databases LILACS (Latin American and Caribbean Health Sciences), MEDLINE (base Data from international literature in medical and biomedical). Was used as descriptors "Health Management", "Public Health Administration", “Health Services Administration” from which they were found, respectively, 6,329, 15,274 and 32,513. These terms are indexed in the Health Sciences Descriptors (DeCS) and allowed the use of common terminology for research in three languages, we held a court history including studies published in the last five years, so in the period 2005 to 2010. They were established as inclusion criteria: having been published within the period specified; work in its entirety to read and article.

Of the total, 54,095 were excluded productions, previously identified from the descriptors set, were not related to the theme of this study; articles whose full text was not accessible, book chapters, dissertations and theses and articles published outside the period established for collecting In addition, the articles that appeared in more than one database, were considered only once. After applying the criteria for inclusion and exclusion, struck up a corpus of 21 studies.

In the end, there was an interpretative reading of the results and presented in tables and considering the descriptors set out themes that highlight the most widely used methodological approaches found in the research, but also their distribution according to the year of publication and databases in which these studies were found.

The discussion of the results was based according to the definitions found and currently used on the terms: "Health Management", "Public Health Administration”, "Health Services Administration ".

RESULTS AND DISCUSSION

As a result of literature search, we found 6329 publications on the descriptor Health Management, 346 in electronic databases LILACS, while in 5983 MEDILENE. In relation to the descriptor Public Health Administration amounted to a population of 15,274, and 1137 in electronic databases LILACS and 12,143 in MEDILENE. Since the descriptor of Health Services Administration totaled 32,513 with all the database MEDILENE. After an initial analysis of these studies, 21 publications were used, which means only about 0.04% of this total. These data demonstrate the principle that the quantity of items found is substantially higher than the number of items used. There was, moreover, that the database that has a large collection in respect of descriptors is based on data MEDILENE were not found in such publications as descriptor of Health Services Administration in

databases as LILACS, and thus to a deficit with the other descriptors. We stress that the electronic database MEDILENE is responsible for most of the records of scientific health literature produced in Latin America and the Caribbean, and publications since 1966.

Table 1 - Distribution of publications on Health Management, Public Health Administration and Health Services Administration in databases LILACS and MEDLINE, according to the title, author and keywords, 2005-2010.

Quant.	Article Title	Author of Article	Key-words
01	Managerial performance in public health: a case study in Mato Grosso do Sul, Brazil	BARBIERI, A. R; HORTALE, V. A.	Public Administration, Health System; Management
02	Decision making and management practices: steering the board of health of the state of Bahia, Brazil	COELHO, T. C. B.; PAIM, J. S.	Global management system; Organizational
03	Information on health policy decision	COHN, A.; ESTPHAL, M. F.; ELIAS, P. E.	System policy; Access to information; health policy
04	Evaluation of effectiveness of sanitation interventions: analysis of management	ESCODA, M. S. O.	Management in Public Health, Sanitation, Transversality
05	Management of regional health systems: a case study in Rio Grande do Sul, Brazil.	LIMA, J. C.; RIVERA, F. J. U.	Public Administration, Health Care, Health
06	The use of cost information in the management of public health: a preliminary study in municipal health departments in the state of Santa Catarina	ALMEIDA, A. G.; BORDA, J. A.; FLORES, L. C. S.	Cost Accounting; Health System; New Public Administration
07	Knowledge and use of information system on public health budget (SIOPS) by municipal managers, Pernambuco, Brazil.	SILVA, Keila Silene de Brito, et al.	Health Evaluation; Information System, Health management.
08	Challenges to coordination of health care: integration strategies on levels of care in large urban centers	ALMEIDA, Patty Fidelis de et al.	Health care providers, systems integration; Health
09	Challenges of planning in public policies: different views and practices	OLIVEIRA, José Antonio Puppim.	Planning, public policies, implementation
10	Information system supporting the management of health work	BENITO, G. A. V.; LICHESKI, A. P.	Information Systems, Health Management, Nursing informatics
11	Management of work processes and humanization in health care: reflections from the ergology	HENNINGTON, E. A.	Humanization of Assistance; ManpowerHealth, Labor
12	Management of health services: skills developed and difficulties encountered in primary care	FERNANDES, L. C. L. et al.	Management, Family Health, Municipal Health System
13	Skills for managing Basic Health Units: manager's perception	ANDRÉ, A. M.; CIAMPONE, M. H. T.	Health Services Administration, Management, Professional competence
14	Management model health organizations	BURMESTER, H.; PEREIRA, J.C.R; SCARPI, M. J.	Health institutions, organizational models, organizational innovation
15	Institutional configuration and management of the Unified Health System:problems and challenges	PAIM, J. S.; TEIXEIRA, C. F.	SUS institutions, management of health policy; Management alternatives
16	Models of management and the SUS	IBAÑEZ, N.; NETO, G. V.	State Reform, Public Health Foundation; Hospital management reform.
17	Evaluation of management capacity social organization: a proposal developing methodological	GUIMARÃES, M. C. L. et al.	Capacity management; Social Organization
18	Governance and regulation in health: Challenges for management in the metropolitan area Sao Paulo, Brazil	IBANHES, L. C., et al.	National health system, health systems, health management
19	decentralized health systems: study compared to five cases in Bahia, Brazil	SILVA, L. M. V., et al.	Health system; Health management Decentralization
20	Matrix support and reference team: a method for work management interdisciplinary health	CAMPOS, G. W. S.; DOMITTI, A. C.	Health management, Methodology, epistemology
21	Collective work: a challenge for management	SCHERER, M. D. A. et al.	Work, organization and administration, Health Services

Based on electronic databases, considering the period from 2005 to 2010 as a result we obtained 21 journals and that most of them were published in 2005 (28.57%), followed by 2006 and 2007 (19.04%).

In the presence of 14 journals in LILACS and 7 in MEDLINE as in shown in Table 1.

Table 1 - Distribution of publications found in the databases LILACS and MEDLINE, according to the descriptors, Health Management, Public Health Administration and Health Services Administration, 2005-2010.

	LILACS		MEDLINE		TOTAL	
	N	%	N	%	N	%
Year						
2005	2	14.28	4	57.14	6	28.57
2006	2	14.28	2	28.57	4	19.04
2007	4	28.57	-	-	4	19.04
2008	2	14.28	-	-	2	9.52
2009	3	21.42	-	-	3	14.28
2010	1	7.14	1	14.28	2	9.52
Total	14	100	7	100	21	100

It is observed with these rates, a declining trend in publications in recent years, though, there is an increase in 2009 and should be considered likely, the survey period of these studies (October 2010), some serials in 2010, had not yet entered into service, which is what happens a lot in Brazil.

Although the topic in health administration and management are being discussed today because of their relevance to the health sector at various levels of government, such discussion has been growing over the last decade, from the results it is clear that there are still few publications about the theme.

According to Barreto, et al, (2010) it is noteworthy that, throughout history and the introduction of SUS as a model of health professionals in the health area has been increasing in the actions of public health and administration of health services . We always have that mention of his duties as a management of care, with activities centered on the focus of the administration, theoretically-oriented subjects offered in undergraduate courses as Applied to Health Administration strongly supported the classical concepts of management.

Regarding the type of approach, one can see in Table 2 the results for different descriptors in LILACS and MEDILENE.

Table 2 - Distribution of publications on Health Management, Public Health Administration and Health Services Administration in databases LILACS and MEDLINE, according to the definition of the type of study, 2005-2010.

	LILACS		MEDLINE		TOTAL	
	N	%	N	%	N	%
Method						
Quantitative	1	7.14	-	-	1	4.76
Qualitative	8	57.14	5	71.42	13	61.90
Not specified	5	35.71	2	28.57	7	33.33
Total	14	100	7	100	21	100

Table 2 shows that 61,9% of study type defined in studies about Health Management, Public Health Administration and Health Services Administration are followed by qualitative and 33.33% categorized as other.

Minayo (2008) it is an approach that identifies the object characteristics, establishing concepts and categories, use these techniques and carry out analysis and context-specific. This type of study refers to the historical consciousness of the subject creates an identity between subject and object of research, both human beings with social and cultural differences, identified as researched and researcher, who develop an interaction.

Table 3 highlights the regions where it was developed, showing that those who had more prominence.

Table 3 - Distribution of publications on Health Management, Public Health Administration and Health Services Administration in databases LILACS and MEDLINE, according to the regions where the studies were developed, period 2005-2010.

	LILACS		MEDLINE		TOTAL	
	N	%	N	%	N	%
Region						
Central west	-	-	-	-	-	-
Northeast	5	35.71	1	14.28	6	28.57
South	4	28.57	4	57.14	8	38.09
Southeast	5	35.71	2	28.57	7	33.33
North	-	-	-	-	-	-
Total	14	100	7	100	21	100

Table 3 highlights the content of studies published by regions. In this context the regions that stand out in high yields with recurrent theme is that the south (38,09%), followed by the Southeast (33,33%), Northeast (28,57%), with no indication of publication in the North and Central west.

Disease prevalence in the South is justified because she was to accommodate the largest institutions of higher education in the country, and there are greater incentives with regard to the funding of studies as well as the discussion in several other areas of knowledge, and the area of parents the one that discusses the subject of study in screen.

CONCLUSIONS

We believe that the keywords searched in electronic databases, although a considerable number of journals, few were relevant to the subject in focus, because of the relevance that is problematic when it comes to issues related to the descriptors studied, namely Health Management, Public Health Administration and Health Services Administration before the results it is necessary to further discussion in view of its importance for health services in their different spheres of government.

Well, it is known that the effectiveness in providing services to users depend only on the amount of provider units, but are the result of good management and administrative services or by taking a greater dimension in public health depends not only sources for allocation resources, but social actors with technical skills able to manage it.

For the political role of the manager the SUS should be guided by the concept of health as a right and public interest, as engrossed knowledge and practices will need to implement policies in health, carried out in accordance with the principles of public health and public administration.

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QUALITY HEALTH SERVICES DEPENDS ON QUALITY MANAGEMENT: A SYSTEMATIC REVIEW

ABSTRACT

Currently you can prove that the main problems faced in health organizations have been due to the funding system, some items such as misallocation of resources, inefficiency of management, rising costs and unequal conditions of access for users within the system. The study aims to analyze the screen in the current trends of publications and studies conducted on quality management in health. This is a study of its kind conducted by the systematic review literature on the theme of Health Management, Public Health Administration and Management of Health Services in the databases LILACS and MEDLINE. After applying the inclusion and exclusion criteria, we obtained a sample of 21 studies, 14 in LILACS and MEDLINE in July. Most studies were published in 2005 (28.57%) followed in 2006 and 2007 (19.4%). Among the publications found were 61.90% of the qualitative approach. Regarding the regions where the same were carried out to the southern region with 38.09% of the total followed by the southeast region with 33.33% of the sample. Thus it is concluded that rates of studies on the theme discussed is still new, so either impede research and readings about the topic.

KEY-WORDS: Management. Health services. Quality.

SERVICES DE SANTÉ QUALITÉ DÉPEND GESTION DE LA QUALITÉ: UN EXAMEN SYSTEMATIQUE

RESUMÉ

Actuellement, vous pouvez prouver que les principaux problèmes rencontrés dans les organisations de santé ont été dus au système de financement, certains éléments tels que la mauvaise allocation des ressources, l'inefficacité de la gestion, la hausse des coûts et des conditions inégales de l'accès des utilisateurs au sein de la système. L'étude vise à analyser l'écran dans les tendances actuelles des publications et des études menées sur la gestion de la qualité en matière de santé. Il s'agit d'une étude du genre menée par la revue de la littérature systématique sur le thème de la gestion de la santé, de la santé publique Administration et gestion des services de santé dans les bases de données LILACS et MEDLINE. Après avoir appliqué les critères d'inclusion et d'exclusion, nous avons obtenu un échantillon de 21 études, 14 dans LILACS et MEDLINE en Juillet. La plupart des études ont été publiées en 2005 (28,57%), suivi en 2006 et 2007 (19,4%). Parmi les publications trouvées ont été 61,90% de l'approche qualitative. En ce qui concerne les régions où les mêmes ont été effectuées dans la région du sud avec 38,09% du total, suivie par la région sud-est avec 33,33% de l'échantillon. Ainsi, il est conclu que les taux d'études sur le thème abordé est encore nouveau, donc soit entraver la recherche et des lectures sur le sujet.

MOTS-CLÉS: Gestion. Services de santé. Qualité.

SERVICIOS DE CALIDAD DE LA SALUD DEPENDE DE GESTIÓN DE LA CALIDAD: UNA REVISIÓN SISTEMÁTICA

RESUMEN

Actualmente se puede demostrar que los principales problemas en las organizaciones de salud han sido debido al sistema de financiación, algunos elementos, tales como una mala asignación de los recursos, la ineficiencia de la gestión, aumento de los costos y las condiciones desiguales de acceso para los usuarios dentro de la del sistema. El estudio tiene como objetivo analizar la pantalla en las tendencias actuales de las publicaciones y estudios realizados sobre la gestión de la calidad en salud. Se trata de un estudio de su tipo llevada a cabo por la literatura revisión sistemática sobre el tema de Gestión de la Salud, Administración en Salud Pública y Gestión de Servicios de Salud en la bases de datos LILACS y MEDLINE. Después de aplicar los criterios de inclusión y exclusión, se obtuvo una muestra de 21 estudios, 14 en LILACS y MEDLINE en julio. La mayoría de estudios fueron publicados en 2005 (28,57%), seguido en 2006 y 2007 (19,4%). Entre las publicaciones que se encuentran fueron 61,90% en el enfoque cualitativo. En cuanto a las regiones donde la misma se llevaron a cabo en la región sur con 38.09% del total seguido por la región sureste con 33.33% de la muestra. Por lo tanto, se concluye que las tasas de los estudios sobre el tema se discute todavía nuevo, por lo tanto impiden la investigación y las lecturas sobre el tema.

PALABRAS-CLAVE: Gestión. Servicios de salud. De calidad.

A QUALIDADE DOS SERVIÇOS DE SAÚDE DEPENDE DE QUALIDADE DA GESTÃO: UMA REVISÃO SISTEMÁTICA

RESUMO

Atualmente pode-se comprovar que os principais problemas enfrentados nas organizações de saúde têm sido, devido ao financiamento do sistema, alguns itens como a má alocação dos recursos, a ineficiência dos gestores, os custos crescentes e a desigualdade nas condições de acesso dos usuários dentro do sistema. O estudo em tela objetiva analisar as tendências atuais das publicações e estudos desenvolvidos acerca de qualidade da gestão em saúde. Trata-se de um estudo do tipo revisão sistemática realizado através de levantamento bibliográfico acerca da temática Gestão em Saúde, Administração em Saúde Pública e Administração dos Serviços de Saúde nas bases de dados LILACS e MEDLINE. Após aplicar-se os critérios de inclusão e exclusão, obteve-se uma amostra de 21 estudos, sendo 14 na LILACS e 7 na MEDLINE. A maior parte dos estudos foram publicados no ano de 2005(28,57%) seguido de 2006 e 2007(19,04%). Dentre as publicações encontradas 61,90% era de abordagem qualitativa. No que tange as regiões onde os mesmo foram desenvolvidos destaca-se a região sul com 38,09% do total seguido da região sudeste com 33,33% da amostra. Assim conclui-se que os índices de estudos sobre a temática abordada ainda é incipiente, fazendo com quer dificulte pesquisas e leituras sobre o tema abordado.

PALAVRAS- CHAVES: Gestão. Serviços de saúde. Qualidade.