Primary care health actions to homeless people during covid-19: an experience report

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Objective:
Experience report by professionals from Basic Health Care Centers working with homeless people during COVID-19 pandemic.

Methods:
Descriptive and reflexive study by professionals and Nursing professors and academics.

Results and discussion:
Professionals experience challenges when facing the pandemic considering the life conditions and misinformation of homeless people about COVID-19. Brazil’s Unified Public Health System needs to take some measures to promote social distancing, access to toilets, mask and food distribution. Meetings with health teams and clinic on the street teams were held to organize care according to local reality, infrastructure, and users’ flow. In a similar vein, intra and intersectoral articulations for joint actions on the street were articulated to provide access to health care and social assistance, and to accommodate and care for those presenting respiratory symptoms till improvement of the condition. Reorganizing actions is a dynamic process because each epidemiological stage demands new strategies as the pandemic advances or recedes. Attendance at Basic Health Care Centers was defined as prioritized suspected COVID-19 cases and people with mental suffering or chronic disease. These people were identified to have face-to-face consultations or teleconsultations. In this sense, therapeutic interruption and worsening of conditions were avoided. Some management challenges are listed: information dynamics, the need to publicize, to qualify professionals and to articulate the network; care with the health team, keep away professionals from the group of risk and COVID-19 confirmed cases; training demands, input assurance, and agenda; electronic means to share information and to keep collegiate management.

Conclusions:
To face COVID-19 and to work with homeless people it becomes fundamental to share challenges and caring strategies to minimize impacts. Health professionals perform to sensitize users according to their life experiences and singularities.

Key messages:
- The caring process is built through dialog and reflection.
- It is of utmost importance to make the population aware of the COVID-19 prevention.