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Summary of theses  
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## **Implantation degree of Street Office teams that assist people with Tuberculosis: an evaluative study**

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### **ABSTRACT**

**Objective:** To evaluate the implantation degree of Street Office teams that assist people with Tuberculosis. **Method:** This is an evaluative study in health of normative type, with both quantitative and qualitative approaches, with emphasis on the implantation degree of activities and actions proposed by the Primary Health Attention program to the Street Office team in the city of Natal/RN. The population to be studied will include 23 professionals who make part of Street Office teams. Data will be collected using two questionnaires aimed at characterizing those professionals and understanding their perception, besides analyzing the structure/process dimension. Data analysis and organization will use SPSS and Iramuteq software. **Expected outcomes:** To produce information that may collaborate for decision-making and for producing new knowledge that can be applied for leading to improvements in the assistance provided to persons with Tuberculosis who live out on the streets.

**Descriptors:** Health Evaluation; Homeless Persons; Tuberculosis (TB).

## **THEME CONTEXTUALIZATION AND RESEARCH PROBLEM**

The prevalence of Tuberculosis among people who live out on the streets (SD) is 67 times higher than the population in general, with high rates of treatment incidence and abandonment. In order to answer to the health needs of this population, the Ministry of Health (MH) created the Street Office teams (*eCnaR*), multi-professional groups whose main activities include the assistance to mental health, lungs pathologies (often TB) and sexually transmissible infections<sup>(1)</sup>.

It is still possible to observe difficulties posed by SD concerning preventive actions and activities, adherence to TB treatment and access to health services<sup>(2)</sup>. One can also notice that studies on the clinical control of TB by Street Office teams are still scarce.

From this perspective, the evaluation in health is an important tool aimed at modifying and influencing decision-making, an important strategy meant to analyze difficulties and to open opportunities for actions to be carried out by those involved.

The present study is justified by the need to evaluate the performance of Street Office teams concerning the assistance to SD, and to identify fragilities that impede the diagnosis or the TB early and proper treatment.

## **EVALUATIVE QUESTION**

How are the Street Office teams organized and how are the actions and/or activities carried out in the assistance provided to SD affected by TB?

## **OBJECTIVE**

To evaluate the implantation degree of Street Office teams that assist people with Tuberculosis.

## **METHOD**

This is an evaluative study in health of normative type, with both quantitative and qualitative approaches, based on the theoretical-methodological system of references of Evaluation in Health from Avenis Donabedian's perspective. The structure and process dimensions will be analyzed, with emphasis on the implantation degree of activities and actions proposed to the Street Office team by the Primary Health Attention program.

The research will be carried out in the city of Natal/RN. The population to be studied will include all 23 professionals who take part, either directly or indirectly, in the three Street Office teams. Participants of the sample will be chosen according to convenience criteria. Professionals taking part in a Street Office team will be included, and those who during the collection period are out of duty or not accessible will be excluded.

Data will be collected in person by the researchers at a Basic Health Unit (UBS) that operates with the support of Street Office teams, with previous call, in

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a private setting considered to be favorable for the data collection. Two questionnaires produced by the researchers will be applied, including 29 objective and 15 subjective questions, divided into three groups: professional characterization, structure and process dimension (availability of both human resources and materials), and the perception of the professional as to the assistance provided to SD with TB. One questionnaire will be applied to all five health managers (the APS coordinator, the Street Office teams (eCnaR) coordinator, the municipal TB coordinator and the coordinators of East and South sanitary districts); another questionnaire will be applied to all 18 professionals of the Street Office teams (nurse, nursery technician, social assistant and psychologist).

The quantitative data collected will compose a database to be analyzed using the SPSS software, version 20.0. Descriptive statistics will be used to analyze the sample profile.

The implantation degree will be analyzed using the system of references proposed by Ferreira e Silva (2014). In order to calculate the final score (FS), which allows for the evaluation of the implantation degree, the score obtained (SO) for each item of the structure and process dimension will be divided by the maximum score (MS) that can be achieved for that item. The result of that division times 100 represents the final score (FS), according to the following formula:  $FS = SO/MS$ . Four stratifications will be

considered: not implanted (up to 25%), incipient (26% to 50%), partially implanted (51% to 75%) or fully implanted (76% to 100%)<sup>(3)</sup>.

Qualitative data will be saved, transcribed and organized using Iramuteq software. Next, they will be submitted to content analysis according to category and theme, which includes previous analysis, material exploitation and results treatment, as proposed by Laurence Bardin. The discussion on data will be carried out following the reference system of evaluation in health.

The present study fulfills rules as stated in Resolution 466/2012 by the National Health Council, and was approved by the Ethics Committee of the Federal University of Rio Grande do Norte, under decision Nr. 4.065.175.

## **EXPECTED RESULTS**

The present research is expected to provide information that may collaborate for decision-making and to produce knowledge to be applied that lead to improvement for the assistance to people with TB who live out on the streets, as well as to improve the caring capacity of Street Office teams.

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