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PHYSIOTHERAPISTS' PERCEPTIONS ABOUT THE INTERPROFESSIONAL INTERACTION WITH PHYSICIANS IN THE FIELD OF WOMEN'S HEALTH

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Background: The presence of a physiotherapist in multidisciplinary groups responsible for the treatment of female pelvic floor muscle disorders is recommended by international clinical guidelines. However, the perception of physiotherapists regarding this interprofessional interaction has not yet been reported. Knowing the benefits of the interdisciplinary approach for patients, it is necessary to investigate the self-reported perception of professionals in relation to this collaboration.

Objectives: To analyze the perception of physiotherapists who work in the area of Women's Health about the interdisciplinary interaction with physicians.

Methods: This is a Cross-sectional study. This study included Brazilian physiotherapists who work in the area of Physical Therapy in Women's Health, in the legal exercise of their profession. Data collection was carried out online using a semi-structured questionnaire with objective questions, inserted in Google Forms, which evaluated the interprofessional relationship between physicians and physiotherapists. Data were analyzed according to frequency and percentage.

Results: A total of 104 physiotherapists were included, 89 (85.5%) of whom reported experience in working in collaboration with physicians and 96 (93%) received patients through medical referral. Most professionals evaluated the interdisciplinary relationship between physicians and physiotherapists as regular, 42 (40.4%) participants considered the interaction positive, to add benefits to the patient. Most physiotherapists consider that the relationship between physicians and physiotherapists is adequate, however, they believe that it could improve, especially if this closeness between professionals were highlighted in the recommendations of clinical guidelines on the interdisciplinary patients' management (n=67; 64.4 %). In addition, 21 (20.2%) participants stated that both professionals (i.e., physicians and physiotherapists) are important in-patient care and that they have an excellent relationship with medical professionals. However, 16 (15.4%) professionals stated that they do not work together with medical professionals but would like the opportunity to work in partnership. Most participants considered the quality of medical training as good (38.5%), followed by regular (36.5%), poor (16.3%) and excellent (5.7%).

Conclusions: Physiotherapists evaluated the relationship with physicians from the Women's Health area as positive, however, they believed that this interaction might be improved based on the approach of interdisciplinary patient' management, that could be emphasized in the recommendations of clinical guidelines. In addition, professionals showed an interest in interacting with medical professionals.

Implications: According to the physiotherapists, the interaction between physiotherapists and physicians in the area of Women's Health is considered positive for the patient, however, professionals believed that some limitations can be clarified from the

strengthening of this relationship and from recommendations of guidelines on the interdisciplinary interaction.

Keywords: Patient care, Interdisciplinary Practice, Women's Health

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DETERMINANTS OF ACCESS TO REHABILITATION PROFESSIONALS BY POST-STROKE INDIVIDUALS IN THE FIRST SIX MONTHS AFTER HOSPITAL DISCHARGE

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Background: Currently, the best strategy to deal with disabilities after stroke is rehabilitation. National and international clinical guidelines recommend that all post-stroke individuals have access to rehabilitation professionals within 72 hours after hospital discharge. In addition, access should be continued until the individual's functional goals are achieved. However, the determinants of access to rehabilitation professionals by post-stroke individuals in middle-income countries, where the burden of this disease is high, are little known.

Objectives: To identify the determinants of access to rehabilitation professionals by post-stroke individuals one, three and six months after hospital discharge in Brazil and to compare the access obtained in each period with that referred by the multidisciplinary team at the time of hospital discharge.

Methods: A longitudinal, prospective, and exploratory study, carried out in Belo Horizonte, Minas Gerais, Brazil. Individuals after primary stroke, without previous disabilities were included. During hospital discharge, the number of rehabilitation professionals referred by the multidisciplinary team was recorded. One, three and six months after hospital discharge, individuals were contacted by telephone to identify the rehabilitation professionals accessed. Possible determinants of access were classified according to Andersen's behavioral model for using health services and included: a) predisposing factors: age, sex, education, and belief that it could improve with treatment; b) need factors: stroke severity and level of disability; c) facilitating factors: socioeconomic status, disposable income for health care and quality of care provided by rehabilitation professionals. Multiple linear regression model and Wilcoxon test were used ($\alpha=5\%$).

Results: 201 individuals were included. Higher level of disability and stroke severity explained 31%, 34% and 39% of access to rehabilitation professionals one, three and six months after hospital discharge ($p<0.01$) respectively. Three months after discharge, having less education added 4% of explanation to the variation in access ($p<0.01$). In all evaluated periods, the number of professionals accessed was significantly lower than recommended at discharge ($p<0.01$).

Conclusion: In general, individuals with a more severe stroke and a higher level of disability were those who had greater access to rehabilitation professionals one, three and six months after hospital discharge. In addition, the comprehensiveness care for post-stroke

individuals were compromised was compromised in all periods evaluated, indicating that current legislation in Brazil on post-stroke individuals care was partially complied.

Implications: Access to rehabilitation professionals has been directed equitably and in insufficient quantity to post-stroke individuals. Therefore, health management services must direct human and financial resources to expand immediate and comprehensive access to rehabilitation professionals for all post-stroke individuals after hospital discharge. These resources can improve the resolution of the transfer from hospital care to community care, as recommended.

Keywords: Stroke, Stroke rehabilitation, Access to rehabilitation

Conflict of interest: The authors declare no conflict of interest.

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HOW DO THE PHYSIOTHERAPISTS AT A SPECIALIZED REHABILITATION CENTER PERCEIVE THE CARE NETWORK AND THE FAMILY?

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Background: The Specialized Rehabilitation Centers (CER) are the points in the network responsible for promoting attention and care for People with Disabilities (PwD), but their work goes beyond this task, being an important place for approaching families of PwD and a privileged locus for articulating the care network. Health care networks (RAS), more specifically, Care Networks for PwD, are one of the ways to promote comprehensive, longitudinal, and continuous care for PwD. In this way, professionals working in the CER, including physiotherapists, must be familiar with the management of articulation with networks. The physiotherapist is an agent within this web of care and the way he perceives the families of PwD and their interactions with the network can be fundamental for the establishment of practices that are expected in terms of the performance of professionals in the CER.

Objective: To find out, through the set of individual experiences of physiotherapists, the senses and meanings attributed to the physiotherapist's relationships with the care network and with families.

Methods: It is a qualitative, descriptive, and exploratory study, theoretically and methodologically supported by the content analysis proposed by Bardin. For this research, participant observation and interviews were adopted as techniques, guided by a previously defined script. The locating context of the research was a CER in the state of Paraíba - PB, where 13 physiotherapists from a Rehabilitation sector were interviewed.

Results: The study reveals that there is still a gap between the care currently provided by CER physiotherapists and the biopsychosocial approach. Physical therapists face difficulties in understanding and performing articulations with the network and centralize this role in the social worker. Regarding the family, they recognize the central role of the mother in care but have difficulty perceiving the burden

on her and the need for a better division of care between family members, finally highlighting a utilitarian relationship with the family, required to support therapies, but away from discussions about the care provided to PwD.

Conclusion: Family and Care Network are two fundamental elements for the work in the CER, but they are still opaque in the view of physiotherapists. Because the family is seen, sometimes, only in the figure of the mother and the hammock is an entity still little known by physiotherapists.

Implications: The results of this work can be used in the permanent health education process at the CER to reflect on changes in the work process of physiotherapists with regard to families and to instigate the process of bringing the CER professionals closer to the whole of network, since many of these services already exist in the logic of an independent rehabilitation service, formally disconnected from other services.

Keywords: Physiotherapy, Disabled People, Integrality in Health

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PHYSIOTHERAPISTS AT THE SPECIALIZED REHABILITATION CENTER: LOOKING AT THEMSELVES AND OTHER PROFESSIONALS WHEN OFFERING CARE

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Background: The physiotherapist's care practices for People with Disabilities (PwD), over time, have been undergoing transformations in the search for the provision of comprehensive care centered on the ideas of the biopsychosocial approach, being produced not only by the normative prescriptive act, but also from establishing a connection between the broader context of the internal and external network of services aimed at PwD and, in the interaction with professionals and with the community to which the service is offered. The Specialized Rehabilitation Centers (CER) are points of the care network and propose to offer comprehensive care services to (PwD). Integral care takes place from the attribution of health care considering the human being in its entirety and, as a result, the services also need to see and formulate their provision of care in an expanded and comprehensive way.

Objective: To know, through the set of individual experiences of physiotherapists, the meanings attributed to the physiotherapist's relationships with his own work, with other colleagues and with the institution.

Methods: This is a qualitative, descriptive, and exploratory study, theoretically and methodologically supported by the content analysis proposed by Bardin and the phenomenological theory of Alfred Schutz and Munhall. For this research, participant observation and interviews were adopted as fieldwork techniques, guided by a previously defined script. The locator context of the research was a CER in the state of Paraíba - PB. Thirteen physiotherapists from a Rehabilitation sector were interviewed.