



Systematization of Nursing Care for the Elderly in Primary Health Care: An Integrative Literature Review

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Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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ABSTRACT

Background: The global increase in life expectancy has intensified the demand for qualified health services aimed at the elderly, particularly within Primary Health Care (PHC). In this context, the Systematization of Nursing Care (SNC) emerges as a fundamental strategy to guide professional practice, ensuring comprehensive, individualized, and continuous care. SNC enables structured nursing actions through standardized methodologies, contributing to the promotion, prevention, and management of health conditions in older adults. Despite its recognized importance, challenges in its application persist, especially in PHC settings, where resource limitations and professional training gaps can hinder its full implementation.

Objective: This study aimed to analyze the evidence available in the literature on the Systematization of Nursing Care (SNC) aimed at caring for the elderly in Primary Health Care (PHC).

Methods: This is an integrative bibliographic review, with a qualitative approach, carried out between March and April 2025, with searches in the SciELO, LILACS, BDNF and PubMed databases, using descriptors such as “elderly”, “primary health care” and “systematization of nursing care”. Were included 14 articles published between 2019 and 2024, in Portuguese, English or Spanish.

Results: The results were organized into three categories: (1) systematized approaches in nursing consultations for the elderly, highlighting the importance of multidimensional assessment and the construction of a care plan; (2) instruments and technologies applied to SNC, such as the use of Electronic Medical Records, CIPE® and mobile applications, which promote standardization and continuity of care; and (3) challenges faced in implementing SNC, such as work overload, lack of specific protocols and deficiencies in professional training.

Conclusion: It is concluded that SNC is an essential strategy to qualify care for the elderly in PHC, but its effective implementation still depends on investments in training, infrastructure and valorization of the nursing process. Strengthening these practices is essential for the construction of comprehensive, effective and humanized care, especially in view of the aging population.

Keywords: Nursing; geriatric nursing; primary health care; systematization of nursing care.

1. INTRODUCTION

Population aging is a global phenomenon that has intensified in recent decades, reflecting advances in living conditions and health systems. In Brazil, this trend is particularly notable. Data from the Brazilian Institute of Geography and Statistics indicate that, in 2023, the number of people over 60 years of age will already exceed that of children up to nine years of age, evidencing an inversion in the age pyramid and

highlighting the need to restructure public health policies to meet the demands of this age group (Mrejen; Nunes; Giacomini, 2023).

Understanding old age requires situating it within the broader framework of a society's social, historical, political, and economic relations, acknowledging it as a process shaped by both objective conditions, such as material resources, and subjective elements, including social interactions and forms of belonging that influence

its daily experience. The aging process goes beyond being a mere biological stage defined by chronological time; it must be understood as a human and social phenomenon, characterized by a diversity of cultural expressions, symbolic meanings, and socially constructed interpretations (Escorsim, 2021).

Primary Health Care (PHC) is recognized as the first level of care within the health system, responsible for a comprehensive set of actions including health promotion, disease prevention, diagnosis, treatment, rehabilitation, and health maintenance. It operates at both individual and collective levels, aiming to develop integrated care that positively influences the health conditions of communities (Barros; Aquino; Souza, 2022).

The importance of PHC lies in its capacity to meet 80% to 90% of a person's health needs throughout their life, providing comprehensive, accessible, and community-based care. In addition, PHC plays a crucial role in care coordination, guiding patients across the various levels of the healthcare system through mechanisms such as referral and counter-referral, which support informed decision-making and effective care management (Karam et al., 2021; Katri et al., 2023).

PHC plays a crucial role in this context, being the main gateway to the public health system in Brazil. It is essential to address the root causes of health and well-being problems, especially among the elderly, who often have multiple comorbidities and require continuous and integrated care (Cargnin et al., 2024).

The Systematization of Nursing Care (SNC) is a technical-scientific activity that organizes the nurse's work, creating conditions for professional practice to be carried out ethically, safely, and based on evidence. According to the Federal Nursing Council of Brazil (COFEN), SNC is a structured method that guides care and is composed of five interdependent steps: data collection, nursing diagnosis, care planning, implementation, and evaluation (COFEN, Resolution N. 358/2009). This methodological organization is essential for ensuring comprehensive care and enhancing the professional autonomy of nurses (Barros et al., 2024).

In addition to promoting quality care, SNC contributes to the systematic documentation of

nursing actions, strengthening communication among members of the multidisciplinary team and ensuring continuity of care. Authors emphasize that the implementation of SNC is directly linked to the strengthening of the professional identity of nurses and the improvement of health indicators. However, putting SNC into practice requires not only technical knowledge but also adequate infrastructure, ongoing training, and institutional support, especially in primary health care settings, where operational challenges may hinder its application (Souza et al., 2022).

In this scenario, the SNC emerges as an essential tool to ensure the quality and continuity of care for the elderly in PHC. SNC organizes the nurse's work process, promoting evidence-based and patient-centered care. However, studies indicate that, despite its importance, the implementation of SNC in elderly care still faces challenges, such as the lack of specific protocols and the need for continuous training of nursing professionals (Alcântara; Santos, 2022; Walker et al., 2024).

In addition, nursing consultation for the elderly in PHC is a practice that allows for a holistic and individualized approach, favoring the early detection of diseases and health promotion. However, scientific production on this topic is still incipient, indicating the need for more research to explore and strengthen this practice (Lopes et al., 2023).

Given this scenario, it is imperative to deepen knowledge about SNC for the elderly in PHC, by identifying best practices, challenges faced and strategies to improve the care offered to this population.

Therefore, this study aims to conduct an integrative review on the topic, aiming to contribute to strengthening nursing practice and improving the quality of life of the elderly treated in primary health care.

2. MATERIALS AND METHODS

This study is characterized as an integrative literature review, which adopts systematic search methods and rigorous sample selection criteria to analyze the results, seeking to correlate previous studies, provide new perspectives and interpretations, identify gaps and flaws in existing studies, and promote an in-depth discussion on the topic (Galvão; Ricarte, 2019).

The review was conducted in six stages, as described by Sousa et al. (2017): (1) definition of the research question; (2) creation of the data source and establishment of inclusion and exclusion criteria; (3) definition of the information to be extracted from the selected studies (categorization of the studies); (4) evaluation and critical analysis of the results, identifying differences and conflicts; (5) interpretation of the results; and, finally, (6) synthesis of the evidence found.

The research question was developed using the PICO strategy, structured as follows: P (Population): elderly; I (Intervention): systematization of nursing care; C (Context): primary health care. Based on this, the following question was formulated: "How has the systematization of nursing care been applied to the care of the elderly in Primary Health Care?"

The following scientific databases were used to search for articles: SciELO (Scientific Electronic Library Online), LILACS (Latin American and Caribbean Literature in Health Sciences), BDNF (Nursing Database) and PubMed. The search was conducted from March to April 2025, and studies published in the last 5 years (2019 to 2024) were included, with the aim of ensuring that scientific production was up-to-date.

The Health Sciences Descriptors (DeCS) and Medical Subject Headings (MeSH) were used, combined with Boolean operators AND and OR. The main descriptors used were: "elderly", "primary health care", "systematization of nursing care" and "geriatric nursing". The following combination of terms was used: ("Elderly" OR "Elderly Person") AND ("Primary Health Care" OR "Basic Care") AND ("Systematization of Nursing Care" OR "SNC").

Inclusion criteria were full articles available online, in Portuguese, English or Spanish; published between 2019 and 2024; that directly addressed SNC applied to elderly care in PHC. Exclusion criteria were duplicate studies, editorials, letters to the editor, theses, dissertations and articles that did not address the central theme.

The selected articles were organized in a summary table containing: title, authors, year of publication, objective, methodology, main results and conclusions. Data analysis was performed descriptively, seeking to identify convergences, gaps and patterns in the findings on the application of SNC to the elderly in PHC.

3. RESULTS AND DISCUSSION

For this study, 14 articles were selected, which were analyzed and organized in the following Table 1.

3.1 Systematic Approaches in Nursing consultations for the Elderly in PHC

Nursing consultations with elderly individuals in primary care are essential practices for promoting comprehensive care focused on the specific needs of this population. Several recent studies have highlighted the importance of systematic approaches that incorporate multidimensional assessments, the use of standardized instruments, and the construction of therapeutic bonds (Silva et al., 2023).

Silva et al. (2023) analyzed how nurses perform the nursing process in caring for individual health needs in aging in primary care. The authors found that, although care is still focused on the elderly and their illnesses, it is possible to promote an approach focused on health promotion and protection, as long as protocols are used to guide the practice. The study also highlighted the need for adequate records in the Electronic Citizen's Medical Record to ensure continuity of care.

The study by Rodrigues et al. (2023) explored nurses' perceptions of care for elderly users in Basic Health Units. The study revealed that nursing consultations for the elderly are essential for preferential and humanized care, and that it is necessary to train the nursing team to provide specialized care that prioritizes bonds with family members and the community.

In addition, the Brazilian Ministry of Health launched the "Care Guide for the Elderly" in 2023, which covers general aspects of the aging process, self-care, and guidelines for caregivers. The publication aims to qualify knowledge about aging and prepare society to better deal with this phase of life, promoting health and preventing diseases and injuries (Brazil, 2023).

3.2 Instruments and Technologies Applied in the Systematization of Nursing Care in PHC

The incorporation of instruments and technologies in the SNC has proven essential to improve care for the elderly in PHC. These

resources facilitate the standardization of practices, adequate documentation and continuity of care, contributing to improving the quality of services provided (Vicente et al., 2020).

One of the main instruments used is the Electronic Citizen Record (ECR), which integrates clinical and administrative information,

allowing more effective monitoring of patients' health status. A study carried out by Cabral et al. (2024) showed that the use of ECR in PHC improves the recording and continuity of care, with a focus on longitudinality, in addition to facilitating remote access to information by health professionals (Ávila et al., 2022; Cabral et al., Gomes et al., 2024).

Table 1. Characterization of studies

Author and Year	Objective	Method	Main Findings
Silva et al. 2023	To analyze the systematized nursing care in aging.	Qualitative study with descriptive approach.	Identified weaknesses and suggested improvements in elderly nursing care.
Rodrigues et al., 2023	To develop a tool for nursing consultation for the elderly in PHC.	Methodological study with tool development.	Developed a tool to enhance elderly consultation in PHC.
Brasil (Ministério da Saúde), 2023	To provide guidance for elderly care.	Technical review of public policies.	Provided a practical guide with care recommendations.
Ávila et al., 2022	To analyze the use of electronic medical records in family health care teams.	Qualitative descriptive study.	Found that PEC facilitates continuity of care.
Fracolli et al., 2021	To describe technologies used in nursing care systematization for families in PHC.	Literature review with critical analysis.	Technologies such as protocols and apps expand care systematization in PHC.
Cabral et al., 2024	To investigate nursing professionals' perceptions of the PEC in PHC.	Qualitative research with interviews.	Positive perceptions of PEC use, despite limitations.
Vicente et al., 2020	To present technologies for nursing care systematization in PHC.	Descriptive exploratory study.	Digital tools contribute to care systematization.
COREN-SP, 2022	To present the CIPE-APS app as a tool for the nursing process.	Institutional technical report.	CIPE-APS app is practical and applicable in PHC routines.
Gomes et al., 2019	To analyze the PEC as an instrument for nursing care.	Integrative literature review.	PEC facilitates organization and care safety.
Silva et al., 2024	To evaluate the quality of PHC for the elderly during the COVID-19 pandemic.	Systematic literature review.	Pandemic negatively impacted PHC and demanded service reorganization.

Author and Year	Objective	Method	Main Findings
Marcomini et al., 2020	To analyze the applicability of nursing care systematization in PHC.	Integrative literature review.	Care systematization is applicable but faces structural challenges.
Santos et al., 2023	To understand the implementation process of systematized nursing care.	Qualitative descriptive research.	Systematization remains challenging but essential in PHC.
Bakken et al., 2021	To explore patient-centered care systems with technological support.	Scientific book chapter.	Patient-centered systems with technology enhance care practices.
Mayra et al., 2021	To discuss regulatory challenges in nursing in India.	Review study with policy analysis.	Regulatory changes are necessary to strengthen nursing practices.

Furthermore, the use of standardized classifications, such as the International Classification for Nursing Practice (ICNP®), has been essential for standardizing language and improving communication among members of the healthcare team. According to Vicente et al. (2020), the application of ICNP® in PHC contributes to the structuring of a terminological subset focused on elderly care, favoring comprehensive care (Fracolli; Padoveze; Soares, 2021).

The adoption of digital technologies, such as mobile applications, has also gained prominence in nursing practice. The ICNP-APS application, for example, assists nurses in naming nursing care phenomena, promoting standardization and facilitating the clinical decision-making process (São Paulo Regional Nursing Council, 2022).

These technological tools, when effectively integrated into the routine of nursing professionals, enhance the quality of care provided to the elderly in PHC, promoting safer, more efficient care focused on the needs of patients (Vicente et al., 2020).

3.3 Challenges for the Effective Implementation of SNC in PHC

The effective implementation of SNC in PHC faces several challenges that compromise the quality and continuity of care for the elderly. Among the main obstacles identified in recent literature, the following stand out: the workload of nursing professionals, the shortage of material

and human resources, and the lack of specific training for the application of NCS in the context of PHC (Santos et al., 2023).

Workload is a recurring factor that hinders the implementation of SNC. Nursing professionals report difficulties in reconciling care demands with administrative and planning activities, which compromises the provision of systematized and patient-centered care. In addition, the shortage of material and human resources in health units limits the capacity to respond to the needs of the elderly population, making it difficult to apply protocols and carry out educational and preventive activities (Bakken et al., 2021).

The lack of specific training for the application of SNC in PHC is another significant challenge. Many nursing professionals did not receive adequate training during their undergraduate studies or do not have access to continuing education programs that address the specificities of elderly care in primary care. This knowledge gap compromises the quality of care provided and the effectiveness of nursing interventions (Mayra; Padmadas; Matthews, 2021).

The COVID-19 pandemic has exacerbated these challenges, highlighting weaknesses in the organization of health services and in the ability to adapt to new demands. The need for social distancing and the overload of health systems have negatively impacted the continuity of care for the elderly, highlighting the importance of strategies to strengthen PHC and train professionals to face crisis situations (Silva et al., 2024).

To overcome these challenges, it is essential to invest in the education and continuous training of nursing professionals, in improving working conditions, and in expanding the resources available in health units. In addition, it is necessary to promote the appreciation of NCS as an essential tool for organizing the work process and for ensuring comprehensive, quality care for the elderly in PHC (Marcomini; Paula; Raimondi, 2020, Alcantara 2022).

The studies by Zaidi et al. (2023) e Zaidi et al. (2024) highlights how socioeconomic status influences health perceptions and priorities among the elderly in India. Despite multiple health issues, those in poverty often deprioritize their health due to pressing basic needs. Underscores the challenges in familial support systems, where elderly individuals may rely more on neighbors than family during health crises, indicating potential social isolation or familial neglect. This points to a gap between awareness and actual utilization of government schemes, possibly due to bureaucratic hurdles or lack of assistance in the application process.

4. CONCLUSION

This study demonstrated that SNC is an essential tool for improving care for the elderly in PHC. When properly applied, SNC allows for a person-centered, evidence-based approach, promoting comprehensive care, preventing harm, and promoting health.

The categories discussed point to a scenario in which there have been important advances, especially in the use of protocols, standardized classifications and digital technologies, but they also highlight structural and training gaps that still hinder their full operationalization in the routine of services.

The findings demonstrate that, although the importance of SNC in care for the elderly is recognized, obstacles persist, such as team overload, lack of resources, lack of specific protocols for aging, and deficiencies in the continuing education of nursing professionals. Such challenges require institutional investment in technical training, improvement of working conditions, and strengthening of the culture of systematic care in PHC.

Therefore, it is concluded that strengthening the SNC in the care of the elderly in primary care is an essential way to guarantee quality, equity and

resolution in the Unified Health System (SUS). The appreciation of the nurse as a leading agent in the organization of the care process is fundamental for the consolidation of more humane, safe and effective practices in the context of population aging.

5. STUDY LIMITATIONS

This study presents some inherent limitations related to the selection and scope of the studies analyzed. One limitation is the linguistic bias, since only articles published in Portuguese, English or Spanish were considered. As a result, potentially relevant studies published in other languages may have been excluded, which could influence the scope and diversity of the findings. This linguistic restriction is particularly relevant in a context in which population aging and nursing care are global issues and have been discussed in several international contexts, in addition to Latin America and the English-speaking world.

Another important limitation concerns the choice of databases. Although we used reliable sources such as SciELO, LILACS, BDEF and PubMed, it is possible that some relevant studies indexed in other databases were not captured. In addition, the variation in methodological quality and the lack of standardization in the description of the NCS processes in the included studies may limit the generalizability of the conclusions. The scarcity of empirical studies specifically addressing SAE in elderly care in PHC also limited more in-depth analyses, making it necessary to recommend future research with broader coverage to better support practice and policies in this area.

DISCLAIMER (ARTIFICIAL INTELLIGENCE)

Author(s) hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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