MENTAL HEALTH CARE IN EMERGENCY MEDICAL SERVICES: AN INTEGRATIVE REVIEW

ASSISTÊNCIA À SAÚDE MENTAL NOS SERVIÇOS MÉDICOS DE EMERGÊNCIA: REVISÃO INTEGRATIVA

ASISTENCIA A LA SALUD MENTAL EN LOS SERVICIOS MÉDICOS DE EMERGENCIA: REVISIÓN INTEGRATIVA

Anna Carla Bento Sabeh[1]
Anneliese Domingues Wysocki[2]
Claudinei José Gomes Campos[3]
Mariana Alvina dos Santos[4]
Helca Franciolli Teixeira Reis[5]
Teresa Cristina da Silva Kurimoto[6]
Edirlei Machado Dos-Santos[7]

Objective: to know the characteristics of mental health care provided by nursing professionals in emergency medical services. Method: integrative literature review in the databases Latin American and Caribbean Health Sciences Literature (LILACS), Publisher Medline (PUBMED), SciVerse Scopus (SCOPUS) and Cumulative Index to Nursing and Allied Health Literature (CINAHL), from March to June 2023, using previously defined inclusion and exclusion criteria. Results: the final sample included 59 articles, which were grouped into the following thematic categories: conceptions in mental health, communication, interventions, network care, competence in mental health care and barriers during care. Conclusion: care is done incipient and permeated by difficult elements. The findings of this study serve to review and rethink mental health care practices and policies and promote strategies for improving work processes.

Descriptors: Mental Health. Psychiatric Nursing. Emergency Medical Services. Mental Health Care. Emergencies.

Objetivo: conhecer as características da assistência à saúde mental dispensada por profissionais de enfermagem nos serviços médicos de emergência. Método: revisão integrativa de literatura nas bases de dados Literatura

Corresponding author: Anna Carla Bento Sabeh, anna_sabeh@hotmail.com

[1] Universidade Federal de Mato Grosso do Sul, Três Lagoas, MS, Brazil. http://orcid.org/0000-0002-5312-4512.
[2] Universidade Federal de São Paulo, São Paulo, SP, Brazil. http://orcid.org/0000-0002-8381-9999.
[3] Universidade Estadual de Campinas, Campinas, SP, Brazil. http://orcid.org/0000-0001-9587-6694.
[4] Universidade Federal de Mato Grosso do Sul, Três Lagoas, MS, Brazil. http://orcid.org/0000-0002-7940-6673.
[5] Universidade Federal da Bahia, Vitória da Conquista, BA, Brazil. http://orcid.org/0000-0002-9120-6527.
[6] Universidade Federal de Minas Gerais, Belo Horizonte, MG, Brazil. http://orcid.org/0000-0002-4577-8532.
[7] Universidade Federal de Mato Grosso do Sul, Três Lagoas, MS, Brazil. http://orcid.org/0000-0002-1221-0377.

Latino-Americano e do Caribe em Ciências da Saúde (LILACS), Publisher Medline (PUBMED), SciVerse Scopus (SCOPUS) e Cumulative Index to Nursing and Allied Health Literature (CINAHL), no período de março a junho de 2023, utilizando-se critérios de inclusão e exclusão previamente definidos. Resultados: obteve-se uma amostra final de 59 artigos os quais foram agrupados nas seguintes categorias temáticas: concepções em saúde mental, comunicação, intervenções, atendimento em rede, competência em cuidado em saúde mental e barreiras durante os atendimentos. Conclusão: o cuidado é feito de forma incipiente e permeado por elementos dificultadores. Os achados do presente estudo servem para rever e repensar práticas e políticas de cuidado em saúde mental e promover estratégias de aperfeiçoamento dos processos de trabalho.

Descritores: Saúde Mental. Enfermagem Psiquiátrica. Serviços Médicos de Emergência. Assistência à Saúde Mental. Emergências.

Objetivo: conocer las características de la asistencia a la salud mental dispensada por profesionales de enfermería en los servicios médicos de emergencia. Método: revisión integrativa de literatura en las bases de datos Literatura Latinoamericana y del Caribe en Ciencias de la Salud (LILACS), Publisher Medline (PUBMED), SciVerse Scopus (SCOPUS) y Cumulative Index to Nursing and Allied Health Literature (CINAHL), en el período de marzo a junio de 2023, utilizando criterios de inclusión y exclusión previamente definidos. Resultados: se obtuvo una muestra final de 59 artículos los cuales fueron agrupados en las siguientes categorías temáticas: concepciones en salud mental, comunicación, intervenciones, atención en red, competencia en atención en salud mental y barreras durante los atendimientos. Conclusión: el cuidado es hecho de forma incipiente y permeado por elementos difíciles. Los hallazgos del presente estudio sirven para revisar y repensar prácticas y políticas de cuidado en salud mental y promover estrategias de perfeccionamiento de los procesos de trabajo.

Descriptores: Salud Mental. Enfermería Psiquiátrica. Servicios Médicos de Emergencia. Asistencia a la Salud Mental. Emergencias.

Introduction

The Brazilian Psychiatric Reform (BPR) is a complex political and social process, composed of actors, institutions and forces of different origins, which focuses on diverse territories, proposing a set of transformations of practices, knowledge, cultural and social values[1]. It is supported by several legislations, highlighting, in this work, Ordinance n. 3.088 of December 23, 2011[2], which established the Psychosocial Care Network (PCNs).

The fact is that, with the implementation of the PCNs, there was a diversification of the points of attention and possibilities of arrangements for mental health interventions[3] and, thus, emergency medical services also begin to absorb this demand, playing a decisive role in all stages of treatment.

The Resolution of the Federal Nursing Council n. 678/2021 establishes guidelines for the performance of the nursing team in Mental Health and Psychiatry, emphasizing the need for a qualified nursing team, with members to meet the demand for care, giving nurses nursing care

of greater technical complexity and requiring adequate scientific knowledge and ability to make immediate decisions[4].

Considering the above, there is an urgent need to take ownership of how this mental health care has been given in this context and, thus, this article aims to know the characteristics of mental health care provided by nursing professionals in emergency medical services.

Method

This is an integrative literature review, thus consisting in the construction of a broad analysis of the literature, enabling discussions about methods and research results, as well as reflections on future studies[5]. It aims to synthesize results obtained in studies on a theme or issue in a systematic, orderly and comprehensive manner[6].

The phases covered in this study were sequentially: creation of the guiding question, search or sampling in the literature, data

Anna Carla Bento Sabeb, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis, Teresa Cristina da Silva Kurimoto, Edirlei Machado Dos-Santos

collection, critical analysis of the included studies, discussion of the results and presentation of the integrative review[7].

Data collection was carried out from March to June 2023, in the following databases: Latin American and Caribbean Health Sciences Literature (LILACS), Publisher Medline (PUBMED), SciVerse Scopus (SCOPUS) and Cumulative Index to Nursing and Allied Health Literature (CINAHL).

The English descriptors selected were: "mental health", "mental health assistance", "mental illness", "mental disorder", "psychiatric illness", "psychiatric nursing", "nursing", "emergencies", "emergency", "emergency medical services". The descriptors in Portuguese were: "*saúde mental*", "*assistência à saúde mental*", "*enfermagem*", "*enfermagem psiquiátrica*", "e *serviços médicos de emergência*" and "*emergência*" – all from the Health Science Descriptors/Medical Subject Headings (DeCS/MeSH) and combined using the Boolean operators "AND" and "OR".

The search returned 3808 studies that were submitted to screening by applying the previously defined inclusion and exclusion criteria. The inclusion criteria established were complete articles containing abstract and text on the theme of the guiding question, published in the last eleven years (2011 to 2022) in all languages. The exclusion criteria were based on the design

(literature review studies, secondary studies, experience reports, guidelines, letter-response, manuals and editorials) and the duplication of studies in the same database or in more than one database.

Therefore, at the end of this stage, a sample of 1441 studies was obtained, of which 455 (31.6%) were found in PUBMED, 438 (30.4%) in SCOPUS, 530 (36.8%) in CINAHL and 18 (1.2%) in LILACS. Next, the titles and abstracts were read and analyzed, excluding those in duplicity and that did not deal with the subject in the research context, resulting in 142 studies, being 58 (40.8%) from MEDLINE/ PUBMED, 47 (33.1%) from SCOPUS, 31 (21.8%) from CINAHL and 6 (4.2%) from LILACS. Finally, the complete texts were read and studies that did not answer the guiding question were excluded, obtaining the final sample of 59 studies, of which 17 (28.8%) were from MEDLINE/PUBMED, 22 (37.3%) from SCOPUS, 16 (27.1%) from CINAHL and 4 (6.8%) from LILACS. The process was guided by the proposal Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA).

Results

Below, the chart containing the studies selected for the final sample, with title, year, jornal, database, country and approach

Chart 1 – Characteristics of the selected studies, 2023.

(continued)

Nº	Title	Year/Journal	Database	Country	Approach
1	Mobile Emergency Medical Services In The Psychological Crisis And The Psychosocial Paradigm[9]	2015 *Texto & Contexto Enfermagem*	LILACS	Brazil	Qualitative
2	Barriers in the care of emergencies and psychiatric emergencies in the urgent mobile care services[10]	2018 *Enfermagem Em Foco*	LILACS	Brazil	Qualitative
3	Where the reform has not yet arrived: echoes of psychiatric emergency care[11]	2015 Physis	LILACS	Brazil	Qualitative
4	Knowledge and practices in urgent and emergency psychiatric care[12]	2017 *Revista de Enfermagem UERJ*	LILACS	Brazil	Qualitative

Chart 1 – Characteristics of the selected studies, 2023.

(continued)

Nº	Title	Year/Journal	Database	Country	Approach
5	Examining health care workers' knowledge of mental disorders and their attitudes towards patients[13]	2020 Orvosi Hetilap	MEDLINE/ PUBMED	Hungary	Quantitative
6	Perceptions of nurses working with psychiatric consumers regarding the elimination of seclusion and restraint in psychiatric inpatient settings and emergency departments: An Australian survey[14]	2019 International Journal of Mental Health Nursing	MEDLINE/ PUBMED	Australia	Qualitative
7	Care for people with psychiatric comorbidity in a general emergency unit: vision of the nurses[15]	2019 *Revista Gaúcha de Enfermagem*	MEDLINE/ PUBMED	Brazil	Qualitative
8	Understanding nurses perspectives of acuity in the process of emergency mental health triage: a qualitative study[16]	2020 Contemporary Nurse	MEDLINE/ PUBMED	Australia	Qualitative
9	Barriers to providing optimal management of psychiatric patients in the emergency department (psychiatric patient management)[17]	2019 Australasian Emergency Care	MEDLINE/ PUBMED	Australia	Mixed
10	Optimal management of mental health patients in Australian emergency departments: barriers and solutions[18]	2011 Emergency Medicine Australasia	MEDLINE/ PUBMED	Australia	Qualitative
11	The Experience of Emergency Nurses Caring for Patients with Mental Illness: A Qualitative Study[19]	2020 International Journal of Environmental Research and Public Health	MEDLINE/ PUBMED	China	Qualitative
12	Evaluating psychiatric nursing competencies applied to emergency settings: A pilot role delineation study[20]	2016 International Emergency Nursing	MEDLINE/ PUBMED	United States of America	Quantitative
13	ED Triage Decision-Making With Mental Health Presentations: A "Think Aloud" Study[21]	2015 Journal of Emergency Nursing	MEDLINE/ PUBMED	Canada	Qualitative

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis,Teresa Cristina da Silva Kurimoto,Edirlei Machado Dos-Santos

Chart 1 – Characteristics of the selected studies, 2023.

(continued)

Nº	Title	Year/Journal	Database	Country	Approach
14	A nursing team's approach to users of a mental health emergency room[22]	2011 *Revista da Escola de Enfermagem da USP*	MEDLINE/ PUBMED	Brazil	Qualitative
15	Perspectives of emergency department staff on the triage of mental health-related presentations: Implications for education, policy and practice[23]	2012 Emergency Medicine Australasia	MEDLINE/ PUBMED	Australia	Qualitative
16	Experiences of Dutch ambulance nurses in emergency care for patients with acute manic and/or psychotic symptoms: A qualitative study[24]	2020 Perspectives in Psychiatric Care	MEDLINE/ PUBMED	Netherlands	Qualitative
17	'When you're it': a qualitative study exploring the rural nurse experience of managing acute mental health presentations[25]	2018 Rural and Remote Health	MEDLINE/ PUBMED	Australia	Qualitative
18	Caring for the mental illness patient in emergency departments--an exploration of the issues from a healthcare provider perspective[26]	2014 Journal of Clinical Nursing	MEDLINE/ PUBMED	Australia	Mixed
19	Hospital staff nurse perceptions of competency to care for patients with psychiatric or behavioral health concerns[27]	2013 Journal for Nurses in Professional Development	MEDLINE/ PUBMED	United States of America	Quantitative
20	Knowledge of Emergency Department Triage nurses in management of patients with mental health needs: comparisons with the Triage Model of Lazio (TLM)[28]	2015 *La Clinica Terapeutica*	MEDLINE/ PUBMED	Italy	Quantitative
21	Improving care planning and coordination for service users with medical co-morbidity transitioning between tertiary medical and primary care services[29]	2017 Journal of Psychiatric and Mental Health Nursing	MEDLINE/ PUBMED	Australia	Qualitative
22	Perceptions of knowledge, attitude and skills about non-suicidal self-injury: A survey of emergency and mental health nurses[30]	2020 International Journal of Mental Health Nursing	SCOPUS	Australia	Quantitative

Chart 1 – Characteristics of the selected studies, 2023.

Nº	Title	Year/Journal	Database	Country	Approach
23	Gaps in Suicide Assessment and Management Among Accident and Emergency Nurses in Kenyatta National Hospital: a Qualitative Study[31]	2019 Global Social Welfare	SCOPUS	Kenya	Qualitative
24	Correlation between suicide literacy and stigmatizing attitude of nurses toward patients with suicide attempts[32]	2019 *Revista Latinoamericana de Hipertension*	SCOPUS	Iran	Mixed
25	Visits to an emergency department by children and adolescents with substance-related disorders and the perceptions of nursing professionals[33]	2018 Children and Youth Services Review	SCOPUS	Brazil	Mixed
26	Emergency and mental health nurses' perceptions and attitudes towards alcoholics[34]	2018 International Journal of Environmental Research and Public Health	SCOPUS	Spain	Quantitative
27	Emergency Department Staff Beliefs About Self-Harm: A Thematic Framework Analysis[35]	2018 Community Mental Health Journal	SCOPUS		Qualitative
28	Nursing care to people admitted in emergency for attempted suicide[36]	2018 *Revista Brasileira de Enfermagem*	SCOPUS	Brazil	Qualitative
29	Attitudes towards suicidal behavior and associated factors among nursing professionals: A quantitative study[37]	2017 Journal of Psychiatric and Mental Health Nursing	SCOPUS	Brazil	Quantitative
30	Patient aggression and the wellbeing of nurses: A cross-sectional survey study in psychiatric and non-psychiatric settings[38]	2017 International Journal of Environmental Research and Public Health	SCOPUS	Finland	Quantitative
31	Antecedents and precipitants of patient-related violence in the emergency department: Results from the Australian VENT Study (Violence in Emergency Nursing and Triage)[39]	2017 Australasian Emergency Nursing Journal	SCOPUS	Australia	Quantitative

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis,Teresa Cristina da Silva Kurimoto,Edirlei Machado Dos-Santos

Chart 1 – Characteristics of the selected studies, 2023.

(continued)

Nº	Title	Year/Journal	Database	Country	Approach
32	Emergency Department Registered Nurses' conceptualization of recovery for people experiencing mental illness[40]	2017 Australasian Emergency Nursing Journal	SCOPUS	Australia	Qualitative
33	User violence towards nursing professionals in mental health services and emergency units[41]	2017 European Journal of Psychology Applied to Legal Context	SCOPUS	Spain	Quantitative
34	Patients' experiences of psychiatric care in emergency departments: A secondary analysis[42]	2016 International Emergency Nursing	SCOPUS	United States of America	Qualitative
35	Australian nurses' perceptions of the use of manual restraint in the Emergency Department: A qualitative perspective[43]	2016 Journal of Clinical Nursing	SCOPUS	Australia	Qualitative
36	Implications of the emergency department triage environment on triage practice for clients with a mental illness at triage in an Australian context[44]	2014 Australasian Emergency Nursing Journal	SCOPUS	Australia	Qualitative
37	Knowledge and confidence of Australian emergency department clinicians in managing patients with mental health-related presentations: Findings from a national qualitative study[45]	2013 International Journal of Emergency Medicine	SCOPUS	Australia	Qualitative
38	Attitudes of nursing professionals towards suicidal behavior: Influence of emotional intelligence[46]	2012 *Revista Latino-Americana de Enfermagem*	SCOPUS	Spain	Quantitative
39	Could an advance practice nurse improve detection of alcohol misuse in the emergency department?[47]	2012 International Journal of Mental Health Nursing	SCOPUS	New Zealand	Quantitative
40	Mental health-related learning needs of clinicians working in Australian emergency departments: A national survey of self-reported confidence and knowledge[48]	2011 Emergency Medicine Australasia	SCOPUS	Australia	Mixed

Chart 1 – Characteristics of the selected studies, 2023.

(continued)

Nº	Title	Year/Journal	Database	Country	Approach
41	What are the experiences of Emergency Department nurses in caring for clients with a mental illness in the Emergency Department?[49]	2011 Australasian Emergency Nursing Journal	SCOPUS	Australia	Qualitative
42	Emergency nurses' perceptions of the health care system and how it impacts provision of care to people who self-harm[50]	2022 Collegian	SCOPUS	Australia	Mixed
43	Perception and performance of the nursing team in caring for patients with suicide behavior[51]	2022 Acta Scientiarum	SCOPUS	Brazil	Qualitative
44	Attitudes and knowledge of nursing technicians about care to patients with mental disorders[52]	2016 *Revista Eletrônica de Enfermagem*	CINAHL	Brazil	Quantitative
45	Communication between nursing team and patients with mental disorder in an emergency service[53]	2013 *Ciência, Cuidado e Saúde*	CINAHL	Brazil	Qualitative
46	Competency requirements for the assessment of patients with mental illness in somatic emergency care: A modified Delphi study from the nurses' perspective[54]	2020 Nordic Journal of Nursing Research	CINAHL	Sweden	Qualitative
47	Conceptions of mobile emergency service health professionals concerning psychiatric emergency[55]	2012 *Revista da Rede de Enfermagem do Nordeste*	CINAHL	Brazil	Qualitative
48	Emergency department staff attitudes toward people who self-harm[56]	2013 Advanced Emergency Nursing Journal	CINAHL	United Kingdom	Qualitative
49	Emergency room psychiatric services: a qualitative study of nurses' experiences[57]	2013 Issues in Mental Health Nursing	CINAHL	United States of America	Qualitative
50	Impact of stigma of madness on the attention of nursing to psychiatric patient in emergency situation[58]	2013 *Ciência, Cuidado e Saúde*	CINAHL	Brazil	Qualitative
51	Intervention in situations of psychic crisis: challenges and suggestions of a prehospital care staff[59]	2014 *Revista Brasileira de Enfermagem*	CINAHL	Brazil	Qualitative

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis, Teresa Cristina da Silva Kurimoto, Edirlei Machado Dos-Santos

Chart 1 – Characteristics of the selected studies, 2023.

(conclusion)

Nº	Title	Year/Journal	Database	Country	Approach
52	Investigating the predictive validity of an emergency department mental health triage tool[60]	2014 Nursing & Health Sciences	CINAHL	Australia	Mixed
53	Mobile service attendance of urgency to psychiatric urgencies and emergencies[61]	2014 *Revista de Enfermagem UFPE*	CINAHL	Brazil	Quantitative
54	Perception, knowledge and attitudes of emergency and mental health nurses regarding alcoholism and other drug dependencies[62]	2014 *Metas de Enfermería*	CINAHL	Spain	Quantitative
55	Registered nurses' experiences of assessing patients with mental illness in emergency care: A qualitative descriptive study[63]	2020 Nordic Journal of Nursing Research	CINAHL	Sweden	Qualitative
56	Safety, risk, and aggression: Health professionals' experiences of caring for people affected by methamphetamine when presenting for emergency care[64]	2017 International Journal of Mental Health Nursing	CINAHL	Australia	Qualitative
57	Suicide in older people, attitudes and knowledge of emergency nurses: A multi-center study[65]	2019 International Emergency Nursing	CINAHL	Australia	Mixed
58	The Relationship Between Evidence-Based Practices and Emergency Department Managers' Perceptions on Quality of Care for Self-Harm Patients[66]	2020 Journal of the American Psychiatric Nurses Association	CINAHL	United States of America	Quantitative
59	Nursing Staff's Experiences of Caring for People with Mental Ill-Health in General Emergency Departments: A Qualitative Descriptive Study[67]	2022 Issues in Mental Health Nursing	CINAHL	Sweden	Qualitative

Source: Created by the authors.

The predominant publication years were 2020 and 2017, both with 8 studies (13.6% each), followed by the years 2019, 2018, 2014 and 2013 with 6 studies each (10.2% per year), the years 2016, 2015, 2012 and 2011 with 4 studies each (6.8% per year) and, finally, the year 2022 with 2 studies (3.4%). There were no selected studies for the year 2021.

The 59 selected articles were published in 41 different journals, being the International Journal

of Mental Health Nursing and the Australasian Emergency Nursing Journal with most of the selected articles, both with 4 studies (9.7% each).

Regarding the country of origin of the publications, 21 (35.6%) were performed in Australia, 16 (27.1%) in Brazil, 5 (8.5%) in the United States of America, 4 (6.8%) in Spain, 3 (5.1%) in Sweden and 1 (1.7%) in the other countries (Hungary, China, Canada, the Netherlands, Italy, Kenya, Iran, Finland, New Zealand and the United Kingdom). Regarding the methodological approach, 35 (59.3%) are qualitative studies, 16 (27.1%) are quantitative and 8 (13.5%) are mixed.

Discussion

To favor the discussion of the results, the characteristics found in the studies were grouped into the following thematic categories: conceptions in mental health, communication, interventions, network care, competence in mental health care and barriers during care.

Conceptions in mental health

Stigmatizing and pathologizing conceptions about the person with mental disorder are widely reported in the studies[9,13,19,23,29,51,55,58], as well as negative attitudes[17,37] and avoidance of psychiatric patients[17,33].

The experiences in the evaluations of patients with mental illness were considered complex, professionals experience insufficiency when evaluating these patients[25,63], assume that more could be done and wish to pass the responsibility to another person[63].

Negative feelings were predominant, such as impotence[57], frustration[25,49,56], dissatisfaction[34,62], discomfort[24-25,34,52], fear[22,24,55,64], intimidation[25], hopelessness[49], insecurity[22,52], sadness[52], distrust, guilt and anger[22]. Positive feelings reported, in tiny proportion, were: compassion[22,33,52], empathy[62] and acceptance[52].

A study[35] suggests that negative beliefs and attitudes tend to become positive with the experience acquired over time and with professional qualification, a fact that is also found in other studies[37,46], where more negative feelings were found in professionals with lower qualification and less work experience.

Regarding psychiatric urgency, this is understood as a situation of risk to patient and third party safety, manifested through aggressiveness, agitation, loss of control and severe depression of the patient[22,55], preventing social interaction[9]. In some studies, the term "draw attention" was attributed to the attitude of the patient in psychic distress[35,56-57].

Concerning the role of general urgency and emergency services in psychiatric emergency care, nursing professionals from SAMU and other mobile services believe that such care should not be done by them[11,24], as well as professionals from fixed care services[18,24], with some arguing that the psychiatric hospital is the best direction for this type of demand[11-12].

Some studies[33,35,57] question the responsibility of the emergency departments in assisting people with mental disorders justifying that these services should be restricted to the treatment of the physical aspects of patients and that the evaluation of mental health should be done by professionals specialized. This corroborates what is concluded in another study[36], which finds that there is a predominance of the hegemonic biomedical model in institutions focused on the provision of care aimed at the biological stabilization of the patient, and a study[9] that confirms the predominance of conceptions linked to the positivism of psychiatry.

The conception of recovery that nursing professionals have about the patient with mental disorder is also controversial, with reports that contribute and support a person in their recovery[40], but cannot visualize the final results of their work in this context as they would in a non-psychiatric patient[57].

Communication

Communication was characterized as a challenge in the care of patients in a psychiatric emergency. Although professionals recognize the

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis,Teresa Cristina da Silva Kurimoto,Edirlei Machado Dos-Santos

importance of communication and listening for successful care, the lack of skills in therapeutic communication is widely reported[19,24,42,53;56-57,62-63].

Factors related to the patient, such as lack of direct communication by the patient and level of anguish, are also reported as hindering communication, resulting in a higher level of uncertainty about the presentations and associated risks[21]. In the meantime, non-verbal communication also appears as an extremely important and used additional resource[25,53].

Communication between the team can also be a problem in this context. A study[29] suggests poor communication about users with mental disorders among professionals, especially when a service user was frequent in emergency departments or when the team's efforts seemed to make little difference in the constant flow of patients in general who needed help. Difficulties were also reported in obtaining information about patients with mental disorders in emergency services due to lack of update of clinical evaluation and unavailability of patient history[26].

Thus, a study[42] is reiterated, which states that, although nurse-patient communication is basic for all areas of practice, it can be of low priority in the urgent and chaotic context of the emergency service.

Interventions

With regard to interventions in psychic crisis, these are guided by controlling and repressive actions, reproducing the inheritance of the psychiatric hospital[9]. The use of containment, both physical, mechanical and chemical, is strongly reported, often justified by the concern with the safety of the team[9,14,22,24,26,31,33,43,61,64].

The activation of the Military Police and security guards in these services is also frequent, sometimes with even more repressive and violent actions[11-12,22,24,61,64]. The male presence among team members is also appreciated[25], suggesting the perpetuation of the model based on physical strength.

A study with a SAMU unit[11] found a direct defense of the asylum model of containment, transportation and hospitalization as an intervention strategy in psychiatric urgencies, prevailing the traditional clinical model, through which objectivity, control of time and practice of standardized actions are the foundations of the care provided. Another study with a service of the same nature[55] evidenced how prejudice against the mental patient also has implications in the interventions demonstrated by mockery on psychiatric occurrences during communication between the ambulance teams and the radio operator, in addition to the lack of interest observed in sending an ambulance to a psychiatric occurrence.

Such a serious situation as the one reported above was found in another study[58], whose scenario was an emergency service of a general hospital, which pointed to a "abandonment" of the psychiatric patient by the emergency nurses where the care preference was for the non-psychiatric patients, in the same clinical conditions. In the view of some professionals, in the care of a non-psychiatric emergency, the focus is on the rapid assessment of the patient's condition, followed immediately by appropriate interventions, whereas, in a psychiatric care, the focus is on communication and time, which does not fit into their normal way of working[24].

Other interventions reported by nursing professionals, in addition to physical restrictions as already mentioned, are to assist the doctor during the evaluation, collect data and administer psychotropic medication[33]. Health education actions during most interventions are not used[62].

Network care

Professionals are dissatisfied with the lack of an efficient and effective Care Network to meet the health needs of people in psychiatric emergency situations[10]. Lack of integration between services and difficulty in directing patients after the completion of the visits are reported[10,12,59,63].

The Emergency Service was conceived as a portal for the mental health system and as a reference point for other specialized health areas[40]. As for the SAMU, there is a conception that this service does not cover the articulation with other services of the mental health care network[11].

Little knowledge of the professionals in relation to the organization of PCNs was noticeable, as well as the obstacles faced by the disarticulation between health services, making the care fragmented and poorly resolved[12]. Professionals reported the perception that services seem more fragmented than before, which hindered communication and continuity of care[29].

They also mentioned the lack of access to support services, such as social workers and patient information in private health units[17], as well as the lack of psychiatry services on site or the uncertainty about the availability of psychiatry as a support service[21].

Nurses indicated the need for closer collaboration with the community mental health team[25]. They also indicated that there was insufficient collaboration between the emergency service team and the mental health team, which included a referral service with low performance and delays in the approval of risk management plans[26].

Another finding was the feeling that the general health and mental health "system" was insufficiently meeting the needs of patients in psychic distress[35].

Competence in mental health care

The lack of specific knowledge and skills, experience and training in this area is present in most studies that make up this category[13,15-18,22,24-25,27,31,33,35-37,40,45,47-48,50,56-57,59,61-63,65,67]. Some professionals reported that their difficulty goes beyond the limits of lack of training, relating it to their lack of personal preparation due mainly to previous negative experiences with these people[15].

Regarding in-service training, they reported that there is no focus on psychiatric emergencies during permanent education activities[11]. There is also a lack of specific protocols for psychiatric urgency and emergency care[12,31,55,59,62].

However, there are studies with positive results related to the competence of professionals. Emergency nurses often perform psychiatric skills and the existing skills seem to be applicable[20]. Screening nurses are able to accurately identify the signs and associated risks of acute mental illness[60]. Professionals assessed the quality of their mental health care at satisfactory levels[66].

Studies on the competence of emergency nurses in the care of patients in psychological distress[28,30,32,35] demonstrated satisfactory levels of knowledge, which promoted the increase of positive attitudes, empathy and improvement in the quality of care provided. In another study[54], theoretical and practical knowledge, communication skills and an attitude of respect towards the patient were identified as essential competence requirements to evaluate patients with mental illness.

Nurses recognize knowledge and experience in the care of people with mental illness as critical factors that influence the quality of care[23]. Mental health is considered a field of specialty that requires a different set of skills than those used for other emergency presentations[25]. Professionals believe that negative perceptions about patients with mental disorders can be altered through training[19,26].

Professionals mentioned that, despite the difficulties, they seek to achieve the best possible care, aimed at an embracement with risk classification and case management, uniting and integrating health equipment and expanding and qualifying humanized and integral access to patients in psychiatric urgency/emergency situations[36].

Barriers during care

In most studies in this category, problems related to physical structure are reported, which do not provide security to the team

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis,Teresa Cristina da Silva Kurimoto,Edirlei Machado Dos-Santos

or confidentiality and confidentiality to the patient[15-19, 23,26,29,33,36,44,49,57].

The limited time factor is the second most present difficulty, related to the dynamics of emergency services that hinders the availability of professionals for this type of care[17-18,23,25-26,49,56,62,63]. This factor is intrinsically related to others cited, such as insufficient human resources[25-26,33,57] and overcrowding of the emergency service[15,17-18,25,36].

Difficulties related to violence, both physical and verbal, were also widely reported[19,23,38-39,41,55,63-64]. Other elements mentioned were lack of material resources[15,22,62], problems related to management[10,12,57] and patients' families[12,29].

Conclusion

This study allowed the analysis of the national and international scientific production about the characteristics of mental health care provided by nursing professionals in general urgency and emergency services, establishing scientific evidence on how this type of service is provided, the existing gaps, and also some successful experiences.

There was a predominance of negative characteristics in all thematic categories analyzed in the various scenarios studied. Concerning professional conceptions, there was a predominance of stigmatizing and pathologizing conceptions, as well as negative feelings related to mental misconceptions about the psychiatric urgency and emergencies and about the insertion of emergency services in this context.

Regarding communication, the lack of skills in this regard was also highlighted, as well as failures in communication between the team itself and in the health service about the care of the psychiatric patient in the emergency service.

Most of the interventions were described by controlling and repressive actions, with the indiscriminate use of chemical, physical and mechanical restraints, sometimes, with the addition of even more repressive and violent actions by public or private security agents.

As for the network care, the disarticulation between services, a fragmented and poorly problem-solving care was highlighted. The lack of knowledge and specific skills in mental health and the lack of training in this sense were also preponderant, but, in this category, potentialities were also detected.

The barriers identified permeate all care, and are related to structural factors and human/ material resources, overcrowding and low availability of time and also with relationship problems with the user, their family and also with management.

Therefore, this study allowed access to a territory rich in knowledge about how mental health care is given in emergency services, including expanding the view of all the processes involved and allowing the realization that there is still a long way to go towards the accomplishment of the rights and guidelines recommended in mental health legislation. These findings provide valuable support and contributions both for reflection on the quality of mental health teaching offered in nursing technical and graduate courses, as well as for improvement and provision of permanent health education in this theme. Moreover, it slows reviews and rethinking mental health care practices and policies and promoting strategies for improving work processes.

Collaborations:

1 – conception and planning of the project: Anna Carla Bento Sabeh, Anneliese Domingues Wysocki and Edirlei Machado dos Santos.

2 – analysis and interpretation of data: Anna Carla Bento Sabeh;

3 – writing and/or critical review: Anna Carla Bento Sabeh, Anneliese Domingues Wysocki and Edirlei Machado dos Santos;

4 – approval of the final version: Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos, Helca Franciolli Teixeira Reis, Teresa Cristina da Silva Kurimoto and Edirlei Machado dos Santos.

Competing interests

Acknowledgements

References

1. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Coordenação Geral de Saúde Mental. Reforma psiquiátrica e política de saúde mental no Brasil [Internet]. Brasília; 2005 [cited 2021 Mar 18]. Available from: https://bvsms.saude.gov.br/bvs/publicacoes/Relatorio15_anos_Caracas.pdf

2. Brasil. Ministério da Saúde. Portaria nº 3088, de 23 de dezembro de 2011. Institui a Rede de Atenção Psicossocial para pessoas com sofrimento ou transtorno mental e com necessidades decorrentes do uso de crack, álcool e outras drogas, no âmbito do Sistema Único de Saúde (SUS). Diário Oficial da União [Internet]. Brasilia; 2011 [cited 2021 Mar 19]. Available from: http://bvsms.saude.gov.br/bvs/saudelegis/gm/2011/prt3088_23_12_2011_rep.html

3. Cruz KDF, Guerrero AVP, Scafuto J, Vieira N. Atenção à crise em saúde mental: um desafio para a reforma psiquiátrica brasileira. Rev. Nufen [Internet]. 2019 [cited 2021 Mar 20]; 11(2): 117-32. DOI: http://dx.doi.org/10.26823/RevistadoNUFEN.vol11.n02ensaio51

4. Conselho Federal de Enfermagem. Resolução COFEN nº 678/2021. Aprova a atuação da Equipe de Enfermagem em Saúde Mental e em Enfermagem Psiquiátrica. Diário Oficial da União [Internet]. Brasilia; 2021 [cited 2021 Sept 19]. Available from: http://www.cofen.gov.br/resolucao-cofen-no-678-2021_90358.html

5. Mendes KDS, Silveira RCCP, Galvão CM. Revisão integrativa: Método de pesquisa para a incorporação de evidências na saúde e na enfermagem. Texto contexto – enferm [Internet]. 2008 [cited 2021 Apr 18]; 17(4): 758-64. DOI: https://doi.org/10.1590/S0104-07072008000400018

6. Ercole FF, Melo LS, Alcoforado CL. Revisão integrativa *versus* revisão sistemática [editorial]. REME rev. min. Enferm [Internet]. 2014 [cited 2021 Apr 18]; 18(1):9-12. DOI: http://www.dx.doi.org/10.5935/1415-2762.20140001

7. Souza MT, Silva MD, Carvalho R. Integrative review: what is it? How to do it?. Einsten [Internet]. 2010 [cited 2021 Apr 18]; 8(1): 102-6. DOI: https://doi.org/10.1590/S1679-45082010RW1134

8. Santos CMC, Pimenta CAM, Nobre MRC. The PICO strategy for the research question construction and evidence search. Rev. Latino-Am. Enfermagem [Internet]. 2007 [cited 2021 Apr 19]; 15(3): 508-11. DOI: https://doi.org/10.1590/S0104-11692007000300023

9. Almeida AB, Nascimento ERP, Rodrigues J, Zeferino MT, Souza AI, Hermida PMV. Mobile Emergency Medical Services In The Psychological Crisis And The Psychosocial Paradigm. Texto contexto – enferm. [Internet]. 2015 [cited 2021 Apr 25]; 24(4): 1035-43. DOI: http://dx.doi.org/10.1590/0104-0707201500003580014

10. Oliveira LC, Silva RAR, Carvalho FPB, Soares FRR, Sousa KMN, Solano LC. Dificuldades no atendimento às urgências e emergências psiquiátricas no serviço de atendimento móvel de urgência. Enferm. foco [Internet]. 2018 [cited 2021 Apr 28]; 4(9): 18-22. Available from: http://revista.cofen.gov.br/index.php/enfermagem/article/view/1317/471

11. Brito AAC, Bonfada D, Guimarães J. Onde a reforma ainda não chegou: ecos da assistência às urgências psiquiátricas. Physis [Internet]. 2015 [cited 2021 Apr 28]; 25(4): 1293-1312. DOI: http://dx.doi.org/10.1590/s0103-73312015000400013

12. Oliveira LC, Silva RAR. Knowledge and practices in urgent and emergency psychiatric care. Rev enferm UERJ [Internet]. 2017 [cited 2021 Apr 30]; 25: 1-6. DOI: http://dx.doi.org/10.12957/reuerj.2017.10726.

13. Ács A, Mészáros J, Balogh Z. Egészségügyi szakdolgozók mentális zavarokkal kapcsolatos ismereteinek és a betegekkel szembeni attitűdjének vizsgálata. Orv. hetil. [Internet]. 2020 [cited 2021 Apr 30]; 161(2): 56-66. DOI: http://dx.doi.org/10.1556/650.2020.31577

14. Gerace A, Muir-Cochrane E. Perceptions of nurses working with psychiatric consumers regarding the elimination of seclusion and restraint in psychiatric inpatient settings and emergency departments:

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos, Helca Franciolli Teixeira Reis,Teresa Cristina da Silva Kurimoto,Edirlei Machado Dos-Santos

an australian survey. Int. J. Ment. Health Nurs. [Internet]. 2019 [cited 2021 May 01]; 28(1): 209-25. DOI: http://dx.doi.org/10.1111/inm.12522

15. Pereira LP, Duarte MLC, Eslabão AD. Care for people with psychiatric comorbidity in a general emergency unit: vision of the nurses. Rev. gaúch. enferm [Internet]. 2019 [cited 2021 May 01]; 40: 1-8. DOI: http://dx.doi.org/10.1590/1983-1447.2019.20180076

16. Broadbent M, Moxham L, Dwyer T. Understanding nurses perspectives of acuity in the process of emergency mental health triage: a qualitative study. Contemp. nurse [Internet]. 2020 [cited 2021 May 01]; 56(3): 280-95. DOI: http://dx.doi.org/10.1080/10376178.2020.1841014

17. Dombagolla MHK, Kant JÁ, Lai FWY, Hendarto A, Taylor DMD. Barriers to providing optimal management of psychiatric patients in the emergency department (psychiatric patient management). Australas. Emerg. Care [Internet]. 2019 [cited 2021 May 03]; 22(1): 8-12. DOI: http://dx.doi.org/10.1016/j.auec.2019.01.001

18. Weiland TJ, MacKinlay C, Hill N, Gerdtz MF, AJelinek G. Optimal management of mental health patients in Australian emergency departments: barriers and solutions. Emerg Med Australas. [Internet]. 2011 [cited 2021 May 05]; 23(6): 677-88. DOI: http://dx.doi.org/10.1111/j.1742-6723.2011.01467.x

19. Chou HJ, Tseng KY. The experience of emergency nurses caring for patients with mental illness: a qualitative study. Int J Environ Res Public Health [Internet]. 2020 [cited 2021 May 08]; 17(22): 8540. DOI: http://dx.doi.org/10.3390/ijerph17228540

20. Mello JJ, Bell JF, Siegel EO, Ward DH. Evaluating psychiatric nursing competencies applied to emergency settings: a pilot role delineation study. Int Emerg Nurs. [Internet]. 2016 [cited 2021 May 08]; 25: 37-42. DOI: http://dx.doi.org/10.1016/j.ienj.2015.07.005

21. Clarke DE, Boyce-Gaudreau K, Sanderson A, Baker JÁ. ED Triage Decision-Making With Mental Health Presentations: a "think aloud" study. J Emerg Nurs. [Internet]. 2015 [cited 2021 May 08]; 41(6): 496-502. DOI: http://dx.doi.org/10.1016/j.jen.2015.04.016

22. Kondo EH, Vilella JC, Borba LO, Paes MR, Maftum MA. A nursing team's approach to users of a mental health emergency room. Rev Esc Enferm USP [Internet]. 2011 [cited 2021 May 09]; 45(2): 501-7. DOI: http://dx.doi.org/10.1590/s0080-62342011000200028

23. Gerdtz MF, Weiland TJ, AJelinek G, MacKinlay C, Hill N. Perspectives of emergency department staff on the triage of mental health-related presentations: implications for education, policy and practice. Emerg Med Australas. [Internet]. 2012 [cited 2021 May 10]; 24(5): 492-500. DOI: http://dx.doi.org/10.1111/j.1742-6723.2012.01592.x

24. Daggenvoorde TH, Klaren JM, Gijsman HJ, Vermeulen H, Goossens PJJ. Experiences of Dutch ambulance nurses in emergency care for patients with acute manic and/or psychotic symptoms: a qualitative study. Perspect Psychiatr Care [Internet]. 2020 [cited 2021 May 10]; 57(3): 1305-12. DOI: http://dx.doi.org/10.1111/ppc.12691.

25. Beks H, Healey C, Schlicht K. 'When you're it': a qualitative study exploring the rural nurse experience of managing acute mental health presentations. Rural Remote Health [Internet]. 2018 [cited 2021 May 11]; 18(3): 4616. DOI: http://dx.doi.org/10.22605/rrh4616

26. Innes K, Morphet J, O'Brien AP, Munro I. Caring for the mental illness patient in emergency departments - an exploration of the issues from a healthcare provider perspective. J Clin Nurs. [Internet]. 2013 [cited 2021 May 11]; 23(13-14): 2003-11. DOI: http://dx.doi.org/10.1111/jocn.12437

27. Rutledge DN, Wickman ME, Cacciata M, Winokur EJ, Loucks J, Drake D. Hospital staff nurse perceptions of competency to care for patients with psychiatric or behavioral health concerns. J Nurses Prof Dev. [Internet]. 2013 [cited 2021 May 13]; 29(5): 255-62. DOI: http://dx.doi.org/10.1097/01.nnd.0000433150.18384.1c

28. Mannocci A, Meggiolaro A, Feller E. Knowledge of emergency department triage nurses in management of patients with mental health needs: comparisons with the triage model of Lazio (TLM). Clin Ter [Internet]. 2015 [cited 2021 May 15]; 166(3): 121-30. DOI: http://dx.doi.org/10.7417/CT.2015.1842

29. Cranwell K, Polacsek M, McCann TV. Improving care planning and coordination for service users with medical co-morbidity transitioning between tertiary medical and primary care services. J Psychiatr Ment Health Nurs. [Internet]. 2017 [cited 2021 May. 15]; 24(6): 337-47. DOI: http://dx.doi.org/10.1111/jpm.12322

30. Ngune I, Hasking P, McGough S, Wynaden D, Janerka C, Rees C. Perceptions of knowledge, attitude and skills about non-suicidal self-injury: a survey of emergency and mental health nurses. Int J Ment Health

Nurs. [Internet]. 2020 [cited 2021 May 17]; 30(3): 1-8. DOI: http://dx.doi.org/10.1111/inm.12825

31. Maina R, Bukusi D, Njuguna SK, Kumar M. Gaps in suicide assessment and management among accident and emergency nurses in Kenyatta National Hospital: a qualitative study. Glob Soc Wel [Internet]. 2018 [cited 2021 May 17]; 6(2): 87-96. DOI: http://dx.doi.org/10.1007/s40609-018-0127-7

32. Gholamrezaei A, Rezapour-Nasrabad R, Ghalenoei M, Nasiri M. Correlation between suicide literacy and stigmatizing attitude of nurses toward patients with suicide attempts. Rev. Latinoam. de Hipertens. [Internet]. 2021 [cited 2021 May 18]; 14(3): 351-55. Available from: http://www.revhipertension.com/rlh_3_2019/18correlationbetweensuicideliteracy.pdf

33. Macedo MM, Souza J, Almeida LY, Vedana KGG, Santos MA, Miasso AI. Visits to an emergency department by children and adolescents with substance-related disorders and the perceptions of nursing professionals. Child Youth Serv Rev [Internet]. 2018 [cited 2021 May 20]; 93: 492-500. DOI: http://dx.doi.org/10.1016/j.childyouth.2018.08.018

34. Molina-Mula J, González-Trujillo A, Simonet-Bennassar M. Emergency and mental health nurses' perceptions and attitudes towards alcoholics. Int. J. Environ. Res. Public Health [Internet]. 2018 [cited 2021 May 20]; 15(8): 1-10. DOI: http://dx.doi.org/10.3390/ijerph15081733

35. Koning KL, Mcnaught A, Tuffin K. Emergency Department staff beliefs about self-harm: a thematic framework analysis. Community Ment Health J [Internet]. 2017 [cited 2021 May 20]; 54(6): 814-22. DOI: http://dx.doi.org/10.1007/s10597-017-0178-8

36. Fontão MC, Rodrigues J, Lino MM, Lino MM, Kempfer SS. Nursing care to people admitted in emergency for attempted suicide. Rev. Bras. Enferm. [Internet]. 2018 [cited 2021 May 22]; 71(5): 2199-205. DOI: http://dx.doi.org/10.1590/0034-7167-2017-0219

37. Vedana KG, Giacchero MDF, Zanetti ACG, Miasso AI, Borges TL, Santos MA. Attitudes towards suicidal behaviour and associated factors among nursing professionals: a quantitative study. J Psychiatr Ment Health Nurs [Internet]. 2017 [cited 2021 May 25]; 24(9-10): 651-59. DOI: http://dx.doi.org/10.1111/jpm.12413

38. Pekurinen V, Willman L, Virtanen M, Kivimäki M, Vahtera J, Välimäki M. Patient Aggression and the Wellbeing of Nurses: a cross-sectional survey study in psychiatric and non-psychiatric settings. Int. J. Environ. Res. Public Health [Internet]. 2017 [cited 2021 May 28]; 14(10): 1-14. DOI: http://dx.doi.org/10.3390/ijerph14101245

39. Pich JV, Kable A, Hazelton M. Antecedents and precipitants of patient-related violence in the emergency department: results from the australian vent study (violence in emergency nursing and triage). Australas Emerg Nurs J [Internet]. 2017 [cited 2021 May 28]; 20(3): 107-13. DOI: http://dx.doi.org/10.1016/j.aenj.2017.05.005

40. Marynowski-Traczyk D, Moxham L, Broadbent M. Emergency Department Registered Nurses' conceptualisation of recovery for people experiencing mental illness. Australas Emerg Nurs J. [Internet]. 2017 [cited 2021 May 29]; 20(2):75-81. DOI: 10.1016/j.aenj.2017.04.002

41. Llor-Esteban B, Muñoz MS, Ruiz-Hernández JA, Jiménez-Barbero JA. User violence towards nursing professionals in mental health services and emergency units. Eur J Psychol Appl to Leg Context. [Internet]. 2017 [cited 2021 May 29]; 9(1): 33-40. DOI: https://doi.org/10.1016/j.ejpal.2016.06.002

42. Harris B; Beurmann R; Fagien S; Shattell MM. Patients' experiences of psychiatric care in emergency departments: a secondary analysis. Int Emerg Nurs. [Internet]. 2016 [cited 2021 May 29]; 26: 14-19. DOI: http://dx.doi.org/10.1016/j.ienj.2015.09.004

43. Chapman R, Ogle KR, Martin C, Rahman A, McKenna B, Barnfield J. Australian nurses' perceptions of the use of manual restraint in the Emergency Department: a qualitative perspective. J Clin Nurs. [Internet]. 2016 [cited 2021 May 30]; 25(9-10): 1273-81. DOI: http://dx.doi.org/10.1111/jocn.13159

44. Broadbent M, Moxham L, Dwyer T. Implications of the emergency department triage environment on triage practice for clients with a mental illness at triage in an australian context. Australas Emerg Nurs J. [Internet]. 2014 [cited 2021 Jun 01]; 17(1): 23-9. DOI: http://dx.doi.org/10.1016/j.aenj.2013.11.002

45. AJelinek G, Weiland TJ, MacKinlay C, Gerdtz M, Hill N. Knowledge and confidence of Australian emergency department clinicians in managing patients with mental health-related presentations: findings from a national qualitative study. Int J Emerg Med. [Internet]. 2013 [cited 2021 Jun 01]; 6(1): 1-7. DOI: http://dx.doi.org/10.1186/1865-1380-6-2

Anna Carla Bento Sabeh, Anneliese Domingues Wysocki, Claudinei José Gomes Campos, Mariana Alvina dos Santos,
Helca Franciolli Teixeira Reis, Teresa Cristina da Silva Kurimoto, Edirlei Machado Dos-Santos

46. Carmona-Navarro MC, Pichardo-Martínez MC. Attitudes of nursing professionals towards suicidal behavior: influence of emotional intelligence. Rev. Latino-Am. [Internet]. 2012 [cited 2021 Jun 03]; 20(6): 1161-8. DOI: http://dx.doi.org/10.1590/s0104-11692012000600019

47. O'brien A, Leonard L, Deering D. Could an advance practice nurse improve detection of alcohol misuse in the emergency department? Int J Ment Health Nurs. [Internet]. 2012 [cited 2021 Jun 03]; 21(4): 340-8. DOI: http://dx.doi.org/10.1111/j.1447-0349.2011.00797.x

48. Sivakumar S, Weiland TJ, Gerdtz MF, Knott J, AJelinek G. Mental health-related learning needs of clinicians working in Australian emergency departments: a national survey of self-reported confidence and knowledge. Emerg Med Australas. [Internet]. 2011 [cited 2021 Jun 03]; 23(6): 697-711. DOI: http://dx.doi.org/10.1111/j.1742-6723.2011.01472.x

49. Marynowski-Traczyk D, Broadbent M. What are the experiences of Emergency Department nurses in caring for clients with a mental illness in the Emergency Department? Australas Emerg Nurs J. [Internet]. 2011 [cited 2021 Jun 04]; 14,(3): 172-9. DOI: http://dx.doi.org/10.1016/j.aenj.2011.05.003

50. McGough S, Wynaden D, Ngune I, Janerka C, Hasking P, Rees C. Emergency nurses' perceptions of the health care system and how it impacts provision of care to people who self-harm. Collegian. [Internet]. 2022 [cited 2023 ago. 15]; 29(1): 38-43. DOI: http://dx.doi.org/10.1016/j.colegn.2021.04.004.

51. Silva IGP, Lino IGT, Paiano M, Marcon SS, Marquete VF, Batista VC, Prado E. Perception and performance of the nursing team in caring for patients with suicide behavior. Acta Sci. Health Sci. [Internet]. 2022 [cited 2023 ago. 16]; 44: e58112. DOI: http://dx.doi.org/10.4025/actascihealthsci.v44i1.58112

52. Melo ZM, Pegoraro NPJ, Santos MA, Pillon SC. Attitudes and knowledge of nursing technicians about care to patients with mental disorders. Rev. eletrônica enferm. [Internet]. 2016 [cited 2021 Jun 04]; 18: 1-11. DOI: http://dx.doi.org/10.5216/ree.v18.37746

53. Paes MR, Maftum MA. Communication between nursing team and patients with mental disorder in an emergency service. Ciênc. cuid. saúde [Internet]. 2013 [cited 2021 Jun 06]; 12(1): 55-62. DOI: https://dx.doi.org/10.4025/cienccuidsaude.v12i1.15830

54. Andersson H, Carlsson J, Karlsson L, Holmberg M. Competency requirements for the assessment of patients with mental illness in somatic emergency care: a modified Delphi study from the nurse's perspective. Nord. J. Nurs. Res. [Internet]. 2020 [cited 2021 Jun 07]; 40(3): 162-70. DOI: http://dx.doi.org/10.1177/2057158520946212

55. Bonfada D, Guimarães J, Brito AAC. Concepções de profissionais de saúde do serviço de atendimento móvel quanto à urgência psiquiátrica. Rev. RENE [Internet]. 2012 [cited 2021 Jun 07]; 2(13): 309-20. Available from: http://periodicos.ufc.br/rene/article/download/3918/3111/

56. Artis L, Smith JR. Emergency department staff attitudes toward people who self-harm. Adv. Emerg. Nurs. J. [Internet]. 2013 [cited 2021 Jun 10]; 35(3): 259-69. DOI: http://dx.doi.org/10.1097/tme.0b013e31829d202b

57. Plant LD, White JH. Emergency room psychiatric services: a qualitative study of nurse's experiences. Issues Ment Health Nurs. [Internet]. 2013 [cited 2021 Jun 10]; 34(4): 240-8. DOI: http://dx.doi.org/10.3109/01612840.2012.718045

58. Elias ADS, Tavares CMM, Cortez EA. Impact of stigma of madness on the attention of nursing to psychiatric patient in emergency. Ciênc. cuid. saúde [Internet]. 2013 [cited 2021 Jun 12]; 4(12): 776-83, 05 dez. 2013. DOI: 10.4025/cienccuidsaude.v12i4.22553

59. Almeida AB, Nascimento ERP, Rodrigues J, Schweitzer G. Intervenção nas situações de crise psíquica: dificuldades e sugestões de uma equipe de atenção pré-hospitalar. Rev Bras Enferm. [Internet]. 2014 [cited 2021 Jun 12]; 67(5): 708-14. DOI: http://dx.doi.org/10.1590/0034-7167.2014670506

60. Sands N, Elsom S, Berk M, Hosking J, Prematunga R, Gerdtz M. Investigating the predictive validity of an emergency department mental health triage tool. Nurs. health sci. [Internet]. 2013 [cited 2021 Jun 15]; 16(1): 11-8. DOI: http://dx.doi.org/10.1111/nhs.12095

61. Santos ACT, Nascimento YCML, Lucena TS, Rodrigues PMS, Brêda MZ, Santos GF. Mobile service attendance of urgency to psychiatric urgencies and emergencies. J Nurs UFPE [Internet]. 2014 [cited 2021 Jun 18]; 6(8): 1586-96. DOI: 10.5205/reuol.5876-50610-1-SM.0806201418

62. Alabarce JAL, Sánchez DH, Mula JM, Medina JMF, Fernández AIC, Álvarez ES, et al. Perception, knowledge and attitudes of emergency and mental

health nurses regarding alcoholism and other drug dependencies. Metas enferm. [Internet]. 2014 [cited 2021 Jun 18]; 17(2): 22-31, mar. 2014. Available from: https://www.enfermeria21.com/revistas/metas/article/80555/perception-knowledge-and-attitudes-of-emergency-and-mental-health-nurses-regarding-alcoholism-and-other-drug-dependencies/

63. Holmberg M, Hammarbäck S, Andersson H. Registered nurses' experiences of assessing patients with mental illness in emergency care: a qualitative descriptive study. Nord. J. Nurs. Res [Internet]. 2020 [cited 2022 Jun 20]; 40(3): 151-61. DOI: http://dx.doi.org/10.1177/2057158520941753

64. Usher K, Jackson D, Woods C, Sayers J, Kornhaber R, Cleary M. Safety, risk, and aggression: health professionals: experiences of caring for people affected by methamphetamine when presenting for emergency care. Int. J. Ment. Health Nurs. [Internet]. 2017 [cited 2022 Jun 20]; 26(5): 437-44. DOI: http://dx.doi.org/10.1111/inm.12345

65. 65.Fry M, Abrahamse K, Kay S, Elliott RM. Suicide in older people, attitudes and knowledge of emergency nurses: a multi-centre study. Int Emerg Nurs. [Internet]. 2019 [cited 2022 Jun 20]; 43: 113-18. DOI: http://dx.doi.org/10.1016/j.ienj.2019.01.003

66. 66.Diana AH, Olfson M, Cullen SW, Marcus SC. The relationship between evidence-based practices and emergency department managers' perceptions on quality of care for self-harm patients. J Am Psychiatr Nurses Assoc. [Internet]. 2019 [cited 2022 Jun 20]; 26(3): 288-92. DOI: http://dx.doi.org/10.1177/1078390319889673

67. 67 Derblom K, Molin J, Gabrielsson S, Lindgren B. Nursing Staff's Experiences of Caring for People with Mental Ill-Health in General Emergency Departments: a qualitative descriptive study. I Int J Ment Health Nurs. [Internet]. 2022 [cited 2023 ago. 18]; 43(12): 1145-1154. DOI: http://dx.doi.org/10.1080/01612840.2022.2138653.