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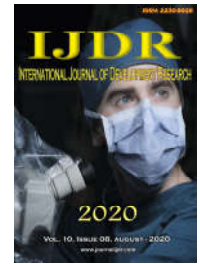
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RESEARCH ARTICLE

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ASSIGNMENTS OF NURSES IN THE HOSPITAL ACCREDITATION PROCESS

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ABSTRACT

Introduction: The effective performance of nurses in care and administrative actions subsidizes the Hospital Accreditation process, which is a certification for health institutions through compliance with established goals and rules. Thus, the objective was to identify the administrative and care attributions of nurses in the Hospital Accreditation process. **Materials and Methods:** descriptive study with qualitative approach, conducted in August and September of 2018 with 14 nurses. A semi-structured script was used to collect the data and the Technique of Discourse Analysis of the Subject was used for data analysis. **Results:** Grouped into two categories - Competencies of nurses in the hospital accreditation process and contributions of hospital accreditation for nurse professional development. **Discussion:** The results of this study indicate administrative, operational, structural and managerial organizational changes that occurred with the obtaining of the accredited seal. Accreditation provided broad and positive changes for nurses. **Conclusions:** From the application of the hospital accreditation process, nurses began to develop specific competencies and skills to work in an accredited hospital and thus contribute to a humanized care focused on quality and promotion of patient safety.

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INTRODUCTION

With the persevering competitiveness of hospital institutions in remaining in the market and the requirements established by customers, Hospital Accreditation (HA) in Brazil appears with a proposal for changes in the models of care and management, improving care resources, allowing humanized care, with user satisfaction and reduction of financial expenses. However, in order to maintain the quality of care and administrative actions in the hospital service, periodic training with health professionals is necessary¹. The Hospital Accreditation models adopted in Brazil are: the National Accreditation Organization

(ONA), The International Joint Commission (JCI); Canadian accreditation, the National Integratend accreditation for helatheare (NIAHO). Other names used in several hospitals with quality certification are ISO 9,001, 14,000, 31,000 certification, consisting of standards related to the quality management model. Even with so many models to improve the quality of service delivery in the hospital environment, there are still few hospitals involved in quality certification². The most adopted certification in Brazil is classified into three levels: accredited, fully accredited and accredited with excellence. The National Accreditation Organization created in 1999, is responsible for the certification of the quality process by evaluating the quality of services provided in the hospital

institution. institutions classified as accredited; meet formal, technical requirements, present adequate physical and logistical structure for operation, identify specific risks and manage them with a focus on safety. Institutions as a seal of full accreditation; present principles of standardization of processes, in order to organize for quality, presents training programs and continuing education. And institutions with accredited seal with excellence; has a quality system with global results aligned with the best practices of the area of operation in national and international terms³. The achievement of the quality of the service offered involves many actors and within the hospital the manager is responsible for motivating all professionals who perform any activities on site, especially health professionals who are in direct contact with patients. The mobilization of all is fundamental for the purpose of improvement to continue with a focus on the quality and safety of the patient in the hospital accreditation process⁴. With the quality certification process, health services are able to identify the inadequacies of the environment and the services offered by health professionals, favoring the quality and safety of patient care, establishing effective communication and greater interaction between the multidisciplinary team with the use of standardized techniques used in care⁵.

The role of nurses in this process provides actions related to care and administrative issues that subsidize efficiency and effectiveness in the management processes that are necessary in the quality of care, in the management of processes and goals to launch and maintain certification, it also acts in continuing education, which is a fundamental tool for professional training, items necessary in the care process and operational models for the provision of care⁶. The intense participation of nurses in organizational decisions and the interaction between sectors involved in hospital accreditation favor the provision of quality care contributing to comprehensive care. Nurses should seek qualification and professional training, especially in the managerial aspects that are allocated in hospital accreditation⁷. The nurse's management activities include nursing team dimensioning, motivational leadership, planning, training and training of personnel, management of material resources, coordination of care processes, performance of complex procedures and evaluation of the results of nursing actions. Management activities direct care activities to ensure the quality of the service provided to the patient and the optimization of the institution's functioning in a systemic way⁸. Considering the importance of the theme, the study aimed to identify the administrative and care attributions of nurses in the hospital accreditation process in a high complexity hospital in Teresina-PI.

METHOD

This is a descriptive qualitative study conducted in a high complexity hospital in the municipality of Teresina-PI that received the level 1 quality seal in 2013. Fourteen nurses participated in the study. The theoretical saturation of the data occurred in the 14th interview, when the capture of information from the studied group was interrupted, because it was understood that they were sufficient to understand the study objective. We included only nurses who act as coordinators of the hospital clinics, the care providers, the nursing manager and nurses who work specifically in quality control, and excluded, nurses who were on vacation or on leave during the

research. Data collection occurred in August and September of 2018, after the authorization of the Research Ethics Committee (CEP) of the Piauiense Association to Combat Cancer with opinion N0 2,848. 972. To capture the data, a semi-structured script containing questions was used to characterize the subject and to answer the objectives of the study. The interviews were conducted in the hospital premises, in a private room. The participants' statements were recorded using an MP4® device to ensure the authenticity of the statements. As a form of security for the interviewees, the ethics that govern the research on secrecy and anonymity, the initials 9 ENF was used in the upper box, followed by the numbering from 01 to 14, which was determined from the order of the interviews, so that all the subjects of the research could make sure that their identities would remain anonymous. For the analysis of the participants' discourses, the "Content Analysis" technique was used, which according to Bardin⁹, is a set of techniques for analyzing communications. Then, the data followed the following steps: Pre-analysis, floating reading, from which it was possible to analyze and know the text letting it be invaded by impressions and orientations, in order to identify the discursive categories; Exploration of the material, with exhaustive readings of the contents for organization and systematization of discourses, allowing grouping into categories; Analysis of the contents of the subjects' statements, gathered by categories, a stage in which units of meanings were identified; Treatment of the results, with the analyzed discourses were interpreted in a critical and reflexive way, allowing the description of the results and meanings that consolidated the theme.

RESULTS AND DISCUSSION

Fourteen nurses participated in the study, of which 78.6% were of sex. 42.9% of the sample completed nursing degrees more than 7 years ago. Of the nurses interviewed, in addition to graduation, 92.9% had lato sensu post-graduation, of which 28.5% were directed to hospital management and accreditation and 85.7% of the nurses participated in some training course directed to the hospital accreditation process. Regarding working time, 28.5% of the interviewees have been working at the hospital for more than five years. As for the type of activity developed, 57.1% performed assistance activities. The statements gave rise to the categories as follows, according to the method of analysis adopted.

Category 01. Competencies of nurses in the hospital accreditation process: In this category, the research subjects discuss the competencies of nurses in the hospital accreditation process based on the specific attributions of nurses to participate in the organization and planning of work, lead the nursing team, manage the material resources, take care so that the requirements of health protocols are met, establish good communication, provide holistic care and train workers through continuing education. It was found that the participants' conceptions about the competencies of nurses in the hospital accreditation process are not only limited in care activities, but are directly linked to the management of the health service and this practice has evolved to meet market requirements.

"In fact, as a nurse and nursing has a great contribution in the hospital accreditation process because virtually all processes we are involved in so basically everything"

nursing in management, care, protocols in everything nursing is involved." Nurse 06.

"[...] we work directly and connected even with the accreditation process, first that the nurse has that overview, we need to understand a little of all the areas" Nurse 8.

"[...] our competence to play a role along with accreditation, is precisely to try to manage these trainings, to standardize these trainings, internal of all areas of the are milestones, be it assistance, seje he of the behavioral area, seje he administrative, so, even because the accreditation itself requires [...]" Nurse 12.

In health institutions, the presence of nurses in different organizational sectors assumes a degree of paramount importance and the statements of nurses 9 and 11 corroborate the relevance of the work organization activity for the management of the care and administrative process.

"[...] we need to organize the processes in general, do process mapping, organize the risks related to patient safety ... We need to do risk mapping, then draw the risk map of each sector, taking into account the risks, we do control of documents, the POPS policies, the internal regimes the people who do, monitoring of every review, we do the risk management part, which is to work the main risks" Nurse 09.

"[...] question of the conference of the material, of validity, of availability so basically the nurse has the issue of the organization ne of monitoring the equipment, checking materials the issue of organizing scales to see the issue of the presence of employees so every bureaucratic part of organization is the involvement of the nurse is exclusive to him whether or not we have to take care of all this." Nurse 11.

"We evaluate indicators of results, competence, quality in care, we think that's it, plan the dimensioning part, all part of care, look at the patient with a safety plan, with care protocols, with routine developments, doing the organizational part of the process" Nurse 02.

Nurses recognize quality indicators as a fundamental tool for the improvement of all activities performed, which aims to identify failures, locations and services that need to be improved. Thus, based on the results obtained from the analysis of the indicators, managers intensify periodic training to achieve improvement.

In this context, it is necessary that nurses have extensive knowledge, and know how to perform administrative and care functions effectively. Training and scientific technical updates should be constant and permanent education should be practiced in every hospital environment and with all employees.

"[...] increasingly ensuring qualified care [...] permanent education is a motivational line is to always seek to identifying what are the failures in the processes [...] and he is acting in care, in leadership if he acts as a leading role [...] nurse has a key role in developing the hospital accreditation process because hospital accreditation is: continuous improvement [...] then the nurse has this role

of : develop a critical look, maintain a transparent communication, motivational role for teams [...] people have this role here also understand the importance of costs where we can minimize costs then nursing as a hospital accreditation" Nurse 05.

"both employee training, outsourced training, training are mandatory let's say so, and there is a standard, today with permanent education we try to work, this issue of standardizing, managing, and having control of all internal training in the sectors" Nurse 13.

The reports of nurses 05 and 13 demonstrate the importance of continuing continuing permanent education among sectors through periodic training. Continuing education among all hospital employees contributes to the understanding of how the accreditation process in which the hospital was submitted works as well as improving the activity of each sector. It is perceived with the statements of the participants that nurses assume relevant roles during the hospital accreditation process mainly due to the tasks of managing, organizing, training, leading and providing care. It is verified in this first category that the actions performed by nurses in the accredited hospital contributed to what was found in the literature. They develop management actions, continuing education, leadership, indicators, protocols, patient safety and organization. Among the competencies listed by the interviewees, it was observed that nurses should master knowledge on the subject for good professional development and for the effectiveness of the service provided with quality.

Category 2 - Contributions of hospital accreditation to the professional development of nurses: Category 2 shows how is the valorization of nurses working in an accredited institution, and what can occur after the implementation of accreditation. The concern, the requirement with patient safety, continuing education as a tool for continuous training of professionals, the improvement in communication between patients and among professionals are highlights listed in this category. When asked about the contributions of hospital accreditation to the professional development of nurses, most participants mentioned professional growth as one of the benefits. The labor market values the curriculum of professionals working in institutions that adhere to the accreditation process.

"Everything! [...] Professional maturity, organization [...] so so is another reality, nursing, our area only won, only won in everything, all aspects, today you managed to see a nursing, with professionalism" Nurse 01.

"[...] so I think professional growth the understanding of the functioning of many things I think this the benefit of accreditation and beyond the patient ne who receives everything we are trying to qualify for him points out what will receive good or bad" Nurse 04.

"[...] mainly in the knowledge is clear [...] then it is a whole load of knowledge that adds in our Curriculum and that if you are to participate in a selection process if you are gives a lecture if you have there saying that you worked in an accredited institution you have an extra starlet" Nurse 05.

"[...] a nurse who works in an accredited hospital and very good for the curriculum [...] ends that it is a very good process for the patient and for us" Nurse 06.

"[...] so for the professional to work in an accredited institution is sure that his career, if he goes to look for another job also with certainty it is more prominent [...] then the hospitals that are already accredited have an additional step, so not only the financial issue, not necessarily, many public hospitals that also adhere to this process, then surely has a whole different aspect in their performance and only who wins is the patient, why another question that accreditation does is to mess with indicators too much [...] So it's an improvement on all sides." Nurse 08.

"[...] so even before we work with accreditation, worked in an organized way and accreditation gave us a very big improvement, we see this today not by the issue of the seal, for being an accredited hospital, it is for the same professional growth issue, we could see improvements so much is, in patient safety [...]" Nurse 10.

Effective multidisciplinary communication between patients is the key point for the good performance of activities, and good productivity, contributes to decision making, minimizes errors, as stated in the reports:

"[...] Improved the communication of both the team and nurse of technician, technician and patient improved a lot and not lost the information along the shift passage". Nurse 07.

It is observed that hospital accreditation allowed nurses to improve this view of the whole, especially in patient care and work organization so that the service provided achieves efficiency, not limiting individualism.

"[...] so accreditation, it serves for this, to have standard, organization, and without losing care in the patient, without losing the individual look Are patient, are these things the standard, the organization, but the patient's safety, however, the care centered there, how is this care centered? always seek so, see the patient as unique, he has often has specific needs, for one will often have more important care, for another not so much [...]" Nurse 08.

"[...] the accreditation itself helped in the improvement of the board itself, at all levels, with the accreditation began to charge more this issue of strategic planning, which is the board's job that is to define strategic objectives, to know where one wants to reach and define the mission and values of the hospital and sectors in general, brings a greater credibility and greatly improves the processes, sometimes there were things that you didn't do [...]" Nurse 09.

"[...] so even before we work with accreditation, worked in an organized way and accreditation gave us a very big improvement, we see this today not by the issue of the seal, for being an accredited hospital, it is for the same professional growth issue, we could see improvements so much is, in patient safety [...]" Nurse 12.

"[...] So, I think so they brought much more advantage understood, because the nurse began to be more judicious, have a more holistic view, more differentiated, the nurse ended up that, approach, that bring in their service, another, add another type of service that before not performing here, understood! From this more thoughtful look at the issue of patient care, from his entry into the hospital to his departure, that before we did not have this vision so much and today this vision is already more..." Nurse 13.

"It starts with qualifying, it's a more qualified care because that way we have a bigger dimension of the assistance, it's... after accreditation we beyond the issue of training we saw beyond what we already worked the one saw that it was not only what we did goes beyond that the issue for example the identification of the medication, the administration of the medication we know that we have the six certain more we also have to get to these six certain we start by double checking something that beats a lot, there goes from the assistance of care risks, safety especially patient safety not to mention also that being in an accredited institution whether or not professionally you are better seen in the others." - Nurse 14

It is verified that the benefits of accreditation for the professional growth of nurses are numerous as the implementation of technical standards in care and administrative processes to maximize the quality of nurses' work, improvement of continuing education, effective communication between the multidisciplinary team, recognition of professionals and humanization of care.

DISCUSSION

Nurses have increasingly taken up a place in the administrative group of health institutions due to the skills developed in leadership and management at the strategic, intermediate or operational and decision-making levels, and human, material and physical resources, resulting in excellent care¹⁰. Among the fundamental actions performed by nurses in hospital accreditation are: collaborating in operational, strategic and decision-making processes, that is, managing, because the accreditation process is a model of hospital management with a view to the result of quality in the administration and care of patient care¹¹. Nurses need an interpersonal and multidisciplinary relationship in the work environment and leadership through management and care actions drives for quality care and establishes safety for users and professionals¹². The literature shows that leadership is an attribute that all nurses should have in the execution of their profession among their vast responsibility, but not all nurses assume the character of leader and hospital accreditation encourages nurses to assume this leadership¹³. The performance of administrative activities by the trained professional, added to the mastery of care activities, confirms among the competencies attributed to nurses the performance in the organizational and material management sectors, optimizing resources in order to meet the needs of both patients and professionals¹⁴. To estimate that nursing care and activities are being performed with quality, there are general indicators of the institution that define data to quantify in an orderly manner and specific indicators of nursing, related to direct care to patients and quality. There is no standardization in the indicators used among institutions¹⁵. In 2013, the

Ministry of Health instituted ordinances with protocols that list patient safety actions in health service environments. Examples include protocols for the prevention of falls, safe surgery, safety in prescription and administration of medications, identification of patients, practice of hand hygiene and pressure ulcer prevention protocols¹⁶. In order to achieve the goals related to patient safety established by the World Health Organization, nurses seek to carry out their activities, especially care, to develop safer practices based on this protocol, with attention to the risks inherent to each procedure performed and focus on providing quality care¹⁷. Continuing education is important in this process, being continuously performed in accredited hospitals and arise to collaborate with development and share knowledge among professionals from some situation, providing favorable transformations for improvement in the services of health professionals and predominantly performed by nurses¹². In the context of health organizations, communication between professionals and patients is also a very important element to be considered. It is through communication that nurses lead their team, obtain information about patients, exchange ideas among professionals contributing to improve the performance of teamwork and consequently improve patient care¹⁸.

It is perceived that the nurses recognized the benefits of being in an accredited institution. The highlight was: the increase in patient and professional safety, through quality care and expanded training through continuing education, strengthening the work of the teams¹⁹. In fact, the accreditation process generates an awareness in professionals about the need for quality management, resulting in qualified care and to remain in this care, using the continuing education program for a constant update, providing that the institution is recognized by the professional community, suppliers and especially by users²⁰. Updating the concepts of quality, management and administration contribute to institutions being increasingly attentive to market demands, meeting the needs of service users, increasing resources and minimizing costs. Hospital certification is a tool that allows identifying this effective quality of health institutions and assessing their resolution²¹. The accreditation resulted in broad and positive changes for nurses, from the application of the hospital accreditation process, nurses began to develop specific skills and skills to work in an accredited hospital and thus contribute to a humanized care focused on quality and promotion of patient safety. Hospital accreditation and nurse participation in this process are not a well-known topic among professionals and not very thorough in undergraduate

Conclusion

The activities of leadership, management, organization of services, efficient and systematized care delivery of the performance in continuing education, are the main competencies inserted in the administrative attributions and care of nurses and begin to have greater visibility with the hospital accreditation process. The results of this study indicate administrative, operational, structural and managerial organizational changes that occurred with the obtaining of the accredited seal by the researched hospital.

REFERENCES

BARDIN, L. Análise de Conteúdo. 1aed. Edição 70, Brasil, 2016. 219p.

- ADORNO, AM. N. G. et al. Gestão Hospitalar como Ferramenta do cuidado. Rev enferm UFPE, v. 11, n. 8, p. 3143-3150, 2017
- BOGO, P.C. et al. O enfermeiro no gerenciamento de materiais em hospitais de ensino. Rev. Esc. Enfermagem USP. São Paulo. v.4, n.49, p.632-639, mar., 2015.
- BRASIL. Ministério da Saúde. Portaria no 1.377, de 09 de julho de 2013. Aprova os Protocolos de Segurança do Paciente. Diário Oficial da União, Brasília, DF, 2013.
- COROPES, V. B. A. S. A educação permanente da enfermagem no processo de acreditação hospitalar. 2015 110f. Dissertação (Pós-graduação em Ciências do Cuidado em Saúde) - Escola de Enfermagem Aurora de Afonso Costa, Universidade Federal Fluminense, Niterói, 2015.
- DOMINGUES, A. L. et al. Avaliação da contribuição da acreditação hospitalar no processo de educação permanente em saúde. Rev. Enferm UFPE on line. Recife, v. 11, n. 05, p 2177-2184, mai., 2017.
- DOMINGUES, A. L.; MARTINEZ, M. R. Educação permanente e acreditação hospitalar: Um estudo de caso na visão da equipe de enfermagem. Rev. Enferm UFPE on line. Recife, v. 11, n. 05, p 2208-2216, mai., 2017.
- FERREIRA, F. F.; CUNHA, N. B. Acreditação hospitalar: melhorias da qualidade. Revista UNINGÁ, Maringá, n.40, p. 165-174, 2014.
- MANZO, B. F. et al. A enfermagem no processo de acreditação hospitalar e implicações no cotidiano de trabalho. Rev. Latino- AM Enfermagem, v.20, n. 1, p.1- 8, jan/fev., 2012.
- MAZIEIRO, V. G.; SPIRI, W. C. Significado do processo de acreditação hospitalar para enfermeiros de um hospital público estadual. Revista Eletrônica de enfermagem, v.15, n.1, p.121-129, 2013.
- MENDES, G. H. S.; MIRANDOLA, T. B. S. Acreditação hospitalar como estratégia de melhoria: Impactos em seis hospitais acreditados. Gest. Prod. São Carlos, v.22, n. 3, p. 636-648, 2015.
- NOGUEIRA, J.W.S.; RODRIGUES M.C.S. Comunicação efetiva no trabalho em equipe em saúde: Desafio para a segurança do paciente. Cogitare Enferm. v. 20 n.3 p.636-640, jul/set., 2015.
- OLIVEIRA, J. L. C. et al. Management changes resulting from Hospital Accreditation. Rev. Latino-Am. Enfermagem, v. 25, n. 28, p. 1- 8, dez/nov., 2017b.
- OLIVEIRA, J. L. C. et al. Nursing performance in the accreditation process: perceptions of the multiprofessional hospital team. Rev. baiana Enferm. Bahia, v. 31, n. 2, p. 1-10, mar/abr., 2017a.
- OLIVEIRA, J. L. C.; MATSUDA, L. M. Descredenciamento da certificação pela acreditação hospitalar: percepções de profissionais. Texto Contexto Enferm, v. 25, n.1, p. 2-8, dez/set., 2016.
- ONA. Organização nacional de acreditação. Manual das organizações prestadoras de serviços de saúde. 6. ed. Brasília: ONA, 2014.
- RIBEIRO, G. R.; CARDOSO, S. O. S. A excelência na qualidade hospitalar: Um enfoque na acreditação ONA. Processando o saber. Praia Grande, SP, n. 9, p. 77- 95, 2017.
- ROQUETE, F. F.; SANTOS, G. M. M. Q.; VIANA, S. M. N. Benefícios e desafios da acreditação hospitalar no Brasil: uma revisão integrativa de literatura. Simpósio de excelência em gestão e tecnologia, n.12, p.1-15, 2015.

- ROSSANEIS, M. A. et al. Indicadores de qualidade utilizados nos sérvios de enfermagem de hospitais de ensino. Rev. Eletro. Enf, Goiás, v.16, n.4, p.769-776, 2014.
- SCHIESARI, L. M. C. Avaliação externa de organizações hospitalares no Brasil: podemos fazer diferente? *Ciência & Saúde Coletiva*, v. 19, n. 10, p. 4229-4234, ago/out., 2013.
- SILVA, V.L.S. et al. Praticas de Liderança em enfermagem hospitalar: uma self de enfermeiros gestores. *Rev. Esc. Enferm. USP*, v.207, n.51. p.1-8, 2016.
- SIMAN, A. G.; BRITO, M. J. M.; CARRASCO, M. E. L. Participation of the nurse manager in the process of hospital accreditation. *Rev Gaúcha Enferm*, v.35, n.2, p. 93-99, jun., 2014.
- SIMAN, A. G.; BRITO, M. J. Mudanças na pratica de enfermagem para melhorar a segurança do paciente. *Rev. Gaúcha Enferm. Minas Gerais*. n.37, esp 68271, p.1-9, fev/mar., 2016.
- VASCONCELOS R.M.A.et al. A comunicação entre líderes e liderados no con texto da enfermagem. *Rev enferm UEPE on line*. v.11, p 4767 – 4766, 2017.
- ZOBOLI, E. L. C. P.; SCHVEITZER, M. C. Nursing values as social practice: a qualitative meta-synthesis. *Rev. Latino-Am. Enfermagem*, São Paulo, v. 21, n. 3, p. 695-703, jun., 2013.
