

CHALLENGES TO DEVELOP COMPETENCIES IN THE HOSPITAL FRAMEWORK

DESAFIOS PARA DESENVOLVER COMPETÊNCIAS NO ÂMBITO HOSPITALAR

RETOS PARA DESARROLLAR COMPETENCIAS EN EL ÁMBITO HOSPITALARIO

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ABSTRACT

The objective was to identify the challenges faced by nurses for the development of competencies in the hospital work process. This is an exploratory, qualitative study in which 40 nursing graduates from a public higher education institution of a municipality in the countryside of São Paulo participated. Inductive thematic analysis was used, and data were collected through semistructured interviews (guided by a script) from September to December 2016. We identified five categories of challenges that limit the development of competencies by hospital nurses, namely: conflicting interpersonal relationships; young professional age – little professional experience; insufficient human and material resources; limited technical ability; and rigid management model. This study should allow education centers and hospital managers to reflect on their role in the elaboration of strategies that contribute to lessen the challenges faced by nurses and enable the development of professional skills in their work.

Keywords: Nurses; Professional Competence; Hospitals.

RESUMO

Objetivou-se identificar os desafios encontrados pelo enfermeiro para o desenvolvimento de competências no processo de trabalho hospitalar. Trata-se de um estudo exploratório, qualitativo, no qual participaram 40 egressos de Enfermagem de uma instituição de ensino superior pública, de um município do interior paulista. Foi utilizada análise temática indutiva, sendo dados coletados por meio de entrevistas semiestruturadas (guiadas por um roteiro) de setembro a dezembro de 2016. Identificaram-se cinco categorias de desafios que limitam o desenvolvimento de competências do enfermeiro hospitalar, tais como: relacionamento interpessoal conflituoso; idade profissional jovem – restrita experiência profissional; recursos humanos e materiais insuficientes; habilidade técnica limitada; e modelo de gestão rígido. Este estudo deve propiciar que centros formadores e gestores hospitalares reflitam sobre o seu papel na elaboração de estratégias que contribuam para amenizar os desafios enfrentados pelos enfermeiros e possibilitem o desenvolvimento de competências profissionais em seu trabalho.

Palavras-chave: Enfermeiras e Enfermeiros; Competência Profissional; Hospitais.

RESUMEN

El presente estudio tuvo como objetivo identificar los retos enfrentados por los enfermeros para desarrollar competencias en el proceso de trabajo hospitalario. Se trata de un estudio exploratorio cualitativo en el que participaron 40 egresados de enfermería de una institución de enseñanza superior pública del interior del estado de San Pablo. Para los datos, recogidos por medio de entrevistas semiestructuradas (guiadas por un itinerario) de septiembre a diciembre de 2016, se utilizó el análisis temático inductivo. Se identificaron cinco categorías de retos que limitan el desarrollo de competencias del enfermero hospitalario, tales como: relación interpersonal conflictiva; edad profesional joven: experiencia profesional restringida; recursos humanos y materiales insuficientes; habilidad técnica limitada y modelo de gestión rígido. Este estudio debe contribuir a que centros formadores y gestores hospitalarios reflexionen sobre su rol en la elaboración de estrategias con miras a amenizar los retos enfrentados por los enfermeros y permitir el desarrollo de competencias profesionales en su trabajo.

Palabras clave: Enfermeros; Competencia Profesional; Hospitales.

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INTRODUCTION

The transition of the population profile and reform in the provision of health care services have increased the requirements for improvement in occupational performance, requiring that workers develop professional competencies, especially in the nursing area.^{1,2} In this respect, competencies can be defined as human skills to fulfill a specific task. They have become a baseline that allows companies to focus on the core aspects of their business and to have human capital with the knowledge, skills and attitudes to face the challenges of a globalized world.³

Hospitals, which are highly complex institutions with multiple technologies that demand constant attention and effective work performance from professionals, requires that managers rethink the selection of workers in order to give priority to those with a profile of competencies to act generating quality care.

In this sense, researchers have identified the essential competencies expected from new nurses during their experience in hospital practice, such as: effective communication and documentation capacity; teamwork and multidisciplinary work; knowledge of the main medical/pathological manifestations of the patient; cultural competence; ability to deal with and lead people; supervision; dynamic patient monitoring; among others.⁴

It is known, however, that for newly graduated nurses or even those who are more experienced, specific and essential competencies for their work process can be a great challenge. Thus, challenges can be understood as a stimulation to overcome a stressful situations or events, including the possibility of transforming this situation into growth, development or achievement. As they enter the world of work, newly graduated nurses have to face exhausting situations arising from the lack of convergence between what they learned in the undergraduate course and what they find in practice in health institutions.⁵

In this sense, the insecurity and fear of nursing graduates before innumerable difficulties is a challenge that starts with the admission process and continues throughout their adaptation to the health service as they develop and improve their practices and mature as individuals and professionals.⁶ In relation to this, recent graduates have pointed challenges in the hospital context, with emphasis to the factors professional age, leadership, interpersonal relationships, and insufficient technical ability as the main obstacles for the development of their work activities.⁷

It is known that the hospital work environment, particularly in Nursing, has unique characteristics shaped by its own institutional interests. It is thus necessary that the professionals inserted therein develop their skills in service, in order to produce quality care. Barriers that impede the development of competencies are common in health services. Therefore, it is necessary that the interpersonal relations of workers be strengthened in order to form a working group that be more than a mere grouping of people.⁸

In this sense, it was observed that nurses, especially graduates, face several situations that limit the development of skills in their work process. Thus, this study presents the following question: What are the challenges faced by nurses to build competencies in the daily routine of hospital work?

Regarding the relevance of this theme, the realization of this study may allow training centers and hospital managers to reflect on their role in the elaboration of strategies that contribute to the development of professional competencies of nursing graduates, so that they may work effectively in the labor market and meet the health demands of the population.

The aim of the study was to identify the challenges faced by nurses for the development of competencies in the hospital work process.

METHODOLOGY

This is an exploratory study using a qualitative approach of the data. The study scenario consisted of graduates of a higher education institution (HEI) from a municipality in the countryside of São Paulo. The HEI is a Public University of Nursing that offers two "Bachelor" and "Bachelor and Licenciante" degree and certifies about 130 graduates every year.

The graduates of the last two years of these courses were included, totaling approximately 260 professionals. Among them, those who worked in the hospital area and who had already passed the previous professional experience (three months) were selected, making up a total of 100 professionals. It is believed that after graduates complete this minimum period of work, they may already have experienced and used various professional skills. Graduates who did not attend the abovementioned courses and those who never worked in the hospital area or related sectors, as well as those who were not in the labor market at the time of collection were excluded from the survey.

The final sample consisted of 40 nurses and was defined by data saturation.⁹ Data collection was performed from September to December 2016 through semi-structured interviews. The contact with the participants was made by electronic means in the case of some professionals whose could not be found in person.

Interview with the graduates in a face-to-face meeting was initially preferred, depending on their availability, and this was possible with 11 graduates. After this stage, as data saturation was not obtained, the researcher continued the interviews with the available graduates through *online means*, making contact through the *Internet*, via *skype*. Twenty-nine graduates were contacted this way. It is worth mentioning that the choice for *skype* was due to the fact that most of the graduates return to their home cities or seek jobs in larger cities, making face-to-face contact more difficult. Furthermore, *skype* provides a real-time contact.

The interview script was composed of two parts: the first addressed socio-professional identification data of the graduates, including age; sex; original city; year of graduation; current professional activity and in which area; and type of professional training (graduation, specialization, master degree, doctorate degree). The second part had questions related to the challenges encountered for the construction of professional competencies in daily work.

Inductive content analysis was used to interpret the data from this study. To do so, we chose thematic analysis, following the steps: transcription and reading of the data; coding of interesting characteristics of the data in a systematic way throughout the data set; search for topics by means of grouping codes; review of topics in which it is verified whether they respond to the codified excerpts; ongoing analysis to improve the specificities of each theme; finally, final analysis of the selected excerpts related to the guiding questions of the research and the literature, producing an academic report of the analysis.¹⁰

This study was approved by the Research Ethics Committee (REC) of the University of São Paulo at Ribeirão Preto College of Nursing (EERP-USP), according to official letter N. 241/2016, CAAE 57129716.0.0000.5393.

RESULTS

CHARACTERIZATION OF PARTICIPANTS

The final sample consisted of 40 Nursing graduates. The data showed a predominantly female population, with 33 (82.5%) female and seven (17.5%) male professionals. The majority of participants (31 - 77.5%) came from different cities in the local of the institution. As for sector in the hospital environment in which the participants worked, there were public and private hospitals and complex care centers such as: Intensive Care Center (ICC)/Trauma Room/Emergency Care Unit; Oncology; Pediatrics, among others.

Regarding professional training, the data revealed that 36 (90%) of the participants had attended postgraduate courses, among them: 13 (32.5%) had graduated at the postgraduate level *latu sensu*; 22 (55%) were attending a multiprofessional residency program; and one (2.5%) was attending a graduate course to obtain a master's degree (postgraduation *Stricto sensu*), at the moment of collection.

The analysis of the data collected in the interviews made it possible to detect the challenges present in the daily work of nursing graduates that hinder the construction of skills in their work process, and they were distributed in five categories as described below.

CONFLICTING INTERPERSONAL RELATIONSHIPS

Interpersonal relationships, precisely aspects such as difficult management of the work team, professional ties, little

practical experience and internal conflicts were highlighted as great challenges for graduates to develop competencies in their work processes:

The biggest challenge to acquire skills is the part of interpersonal relationships, because one of these days, a technician and I had an argument right by the bed because of establishment of priorities, where one blames the other and no one wants to assume the mistake or situation... and nobody gives explanations to the nurse... so I learned a lot from this situation, because in the beginning the team does not let you develop the competencies you need (N2).

My biggest fear when I get into a new unit is to gain the team because you stay all day in the hospital, if you do not have a good bond, how will you develop your work? And I tell everyone, the doctor, the cleaning staff, and not just the nursing staff... that interacting well with those people is my main challenge, and also to show that I am a competent person so that people trust my work (N35).

I work in a place that does not help much, for example, there are employees who have been for a long time there, and for you to start developing a relationship, if you act as a leader, it is very difficult, and even more if you are a young woman, recently graduated, this goes with a long time and you have to prove to the team that you have knowledge [...] then if you do not prove your knowledge nobody respects you (N11).

YOUNG PROFESSIONAL AGE: LITTLE PROFESSIONAL EXPERIENCE

Aspects related to the young age of the professional were points also seen by the graduates as something that hinders the gain of competencies in their work. This issue is linked to the fact that recent graduates have limited work experience, and they are judged for not having the ability to carry out their work in an effective manner:

The challenge lies in the fact of being new, young, newly graduated, because sometimes you are with an employee who has been working for 10 years and he will look at you and treat you like a stupid and inexperienced [...] and even a nurse who sometimes does not accept what you say because you are new there, people do not treat each other as equals, this is my main challenge (N12).

Other factors that keep me from being more competent is the fact that I am new, the patient feels like afraid

of me, they do not let you search for a vein, and does not want to help you [...] this is very annoying (N5).

INSUFFICIENT HUMAN RESOURCES AND MATERIALS

The lack of material resources and even human resources were considered important challenges for professionals to be more competent in their work:

Material is also very difficult, it prevents me from growing as a professional, from developing a more effective practice. But we nurses do not participate in the direct purchase of the materials; we only tell the boss what the patient needs and the purchasing sector makes the request annually, without paying attention to the quality of the material and real need (N10).

My workplace lacks material resources, and even professionals; then you have to work like this, you have to be creative and invent solutions. The lack of professionals generates a great work overload which prevents us nurses from being more competent in the service, we do not have time to assist the patients with quality; then these factors are great challenges to my work (N23).

LIMITED TECHNICAL SKILLS

Lack of technical skills or practical experience was also another challenge pointed out by the graduates in the development of their work:

I consider a great challenge the issue of technical skills and procedures, because you often leave the university without having practiced some new techniques and then you go to practice and you have to do it; and not only for newly graduates, because as the health areas are very large, even experient professionals do not know everything, so at one time you will have to do a new task or a new procedure, and this is a challenge in the work (N40).

RIGID MANAGEMENT MODEL

Rigid work management models and hierarchical and authoritarian attitudes were other points mentioned by the graduates as challenges for the development of skills in their work process:

The attitude of the hospital is very rigid, hierarchical and authoritarian, the leadership is not open, this limits me very much professionally, the lack autonomy because

you want to implement something new and no one accepts it because of lack of willingness to change (N19).

Whenever we nurses have new ideas for care or new plans, no one listens to you, they only listen to the doctors; sometimes we have ideas that are very productive, that would help the hospital at all levels in terms of costs and patient care, but the management does is not open to you; thus, it is a big challenge to have ideas and suggestions for improvement, but not being allowed to give an opinion (E30).

DISCUSSION

The analysis of the statements made it possible to verify a large number of female graduates, a historical characteristic of the profession. In the same way, it was verified that the participants had already begun their work practices in complex units of care such as ICC and Emergency Care Units, environments that require constant focus and attention besides specific knowledge to develop the work activities. These aspects make these professionals look for improvements and/or specializations as a way to advance their performance. This was confirmed in this research by the fact that a high number of professionals was enrolled in postgraduate programs, precisely 36 (90%) nurses, evidencing the concern to acquire new skills in order to fit in the effective work.

Regarding the perception of the graduates, challenges were established for the development of competencies in the work process, distributed here in five categories, namely: conflictive interpersonal relationships; young professional age: little professional experience; insufficient human and material resources; limited technical skills; and rigid management model.

Conflicting interpersonal relationships were considered the most frequent cause that hinder the gain of competencies in Nursing graduates, especially the difficult relationships with team members and conflict management. It has already been noticed by new graduates that interpersonal relationships in the hospital context pose a challenge.⁷ There is evidence that lack of interaction between teams and deficiencies in problem solving are factors that interfere in the development of competencies and in the planning of effective assistance, which ends up turning patient care deprived from formal and routine interaction, mechanizing care.¹¹

In this premise, the respect that a person receives from peers is related to being recognized by workers and patients in the plane of solidarity, having recognized the participation in the work, the singularities and individual capacities.¹² Thus, conflict arises when new professionals join the team, which is manifested in terms of individual differences such as lack of affinity, that is, recent work relationships with weak bond and con-

fidence associated with disrespect, lack of recognition of the value and potentiality of the other. This means that newly admitted nurses do not have their personal and professional capacities recognized by their peers, and this deprives them from the possibility of imputing social value to their own work.¹³

Thus, the use of strategies to maintain balanced and adequate interpersonal relationships such as using skills of professional conduct, respect, ethics, commitment and professional excellence is essential for coping with this challenge. It is also considered that the training centers should stimulate and prepare the students as early as possible to deal with conflicting situations, using simulated exercises and case studies in order to better prepare them for the effective labor market.¹⁴ Thus, interpersonal relationships in a work team can be stimulated still within the scope of academic training. Thus, bearing in mind that professional competencies involve knowledge, skills and attitudes to accomplish a certain task,³ the ability to relate with others will bring more capacity for hospital nurses to carry out their activities.

Another frequent factor mentioned among the barriers to gain competencies is beginning professional activities at a very young age. According to the statements of the graduates, they are discriminated because they are newcomers who have just entered the labor market and that, in most of the times, they are associated with bad or incompetent professional behaviors because they do not have enough experience. In this encounter, the results of a research showed certain resistance on the part of the health team related to professional age, that is, against young or newly graduated professionals who do not have knowledge to carry out their work. This calls for a reflexion on the importance of the adequacy of undergraduate courses so that when graduates enter the labor market, they may experience situations convergent with what they learned in the academic training, in order to be able to provide quality care.^{5,7}

Concerning this fact, professionals are entering the academic milieu at gradually earlier ages, a factor that requires that nurses prove, at all times, that they are competent to do their duties in service. In this sense, it is possible to see the importance that knowledge and previous know-how have for the performance of work activities. Moreover, the construction of links with the professionals over time results in a breakdown of this paradigm. Formal ties start to become evident, so that these barriers tend to disappear over time.

Besides these mentioned factors, insufficient human resources were other challenge for the development of competencies in the hospital setting. These data were not observed in similarity to our reference,⁷ but they are in agreement with other authors' reflections that show that one of the greatest difficulties encountered by the nursing team in hospital institutions is the shortage of professionals to provide care, causing work overload and problems in the care offered. The lack of

human resources affects work activities, leads to exhaustion, increased risk of incidents, hospitalization and most importantly makes it impossible for professionals to be competent in their service.^{15,16} It is therefore incumbent upon the institutions to incorporate the dimensioning of professionals in an adequate manner to guarantee an effective assistance.

Also, among the lack of resources that hinder the performance of nursing work in hospital sectors, the graduates pointed to the lack of materials and lack of openness for nurses to participate in purchasing decisions. The statements analyzed were considered factors that directly interfere in the extent to which the professional will be competent in the service.

It is known that physical structure, equipment and materials, if scarce or inadequate, interfere with the quality of care.¹⁶ The centralization in the decision-making process of the professional responsible for the purchase, who sometimes does not know the specifications of some materials and the correct quantity to be requested, is notable, and interferes in the choice of specific products for certain sectors. However, the participation of nurses has become remarkable and has improved the quality and quantity of the products.¹⁷ It is therefore essential that hospitals and teaching institutions promote conditions and openness for the participation of nurses in these processes, permeating the quality of the work offered.

Limited technical ability, or even lack of knowledge, was also another challenge cited by graduates to develop skills at work. These data have also been associated with researchers of this subject⁷ and other researchers who noted that little work experience was one of the most common challenges for newly graduated professionals in the hospital staff.¹⁸ Thus, it is the duty of training centers to provide learning environments with a larger reach such as internships to offer to students more opportunities to develop technical skills and enter the market with adequate preparation for patient care. It should be emphasized that the deficit of technical-scientific and theoretical-practical knowledge/clinical reasoning can cause failures that make it increasingly frequent the occurrence of iatrogenic complications and, leading the care provided to be no longer systematized and qualified.¹⁹

Finally, the rigid management model adopted by hospital institutions was pointed as a challenge for the development of competencies. The graduates mentioned the lack of autonomy, the hierarchical structure of work, and the lack of space to expose and discuss their ideas as obstacles to be more competent in their work. Although this challenge is not mentioned in the proposed theoretical framework,⁷ this issue has been investigated by other researchers in international scenarios, revealing that only 6% of the participating nurses had professional autonomy and also that the cause was mainly the restriction and the need to "depend on physicians to carry out nursing implementations", and this autonomy was still limited by a "high number of patients per nurse".²⁰

In this perspective, researchers report that it is possible to promote the students' autonomy during the academic training. To this end, the suggestion is to promote the creation of small study groups with tutoring, encouraging extraclass activities and participation in "health fairs". It is also necessary to demystify the belief that nurses do not make mistakes, leading the student to reflect on flaws in a procedural way and to work on the proposition of problem situations, stimulating the students to seek, on their own initiative, the contents pertinent to the solution of problems that must be addressed. The use of active and innovative teaching methodologies can be effective strategies to achieve better results in meaningful theoretical learning and thus contribute to prepare students, when it comes to practice, to deal with diverse situations.²¹

Still regarding the rigid work management model and its interference in work of nurses, evidence shows that flexible and participative models are ideal for improving work performance and quality patient care. Participatory management recommends the decentralization of decisions and the approximation of the components of the team responsible for work in health settings, ensuring the professionals their participation and discussion in the decision making process. Thus, health organizations come to understand the importance of participatory management as a training and qualification strategy of workers, because in this model, the management promotes the creative and innovative potential of its human capital, which is appropriate to establish new knowledge.²²

It is also emphasized that nurses play a fundamental role in the administration, that is, in management of personnel, because they coordinate their team, as well as in the management of care, and that their assistance practices do not constitute isolated, but rather connected actions. In this way, we perceive the need to value the creation of open spaces for collective decisions, sharing with the team the responsibilities in the work in order to reach organizational objectives.²³ To do this, it is necessary to allow the team members to give opinions and to carry out integration movements capable of developing actions to increase the potential of the group, overcoming conflicts and maintaining group learning in a continuous way to favor the building of a participatory environment.²⁴

In this way, it is known that the job market for new nurses can represent stress and uncertainties. Some of the elements act as facilitators in the transition from academic to professional life, such as the academic training based on good theoretical teachings, the experience of extracurricular internships and support from the other more experienced members of the work team. Such a scenario makes the restructuring of higher education necessary in order to stimulate and offer to students experiences closer to the real practices of the daily life of nurses. Also, continuing education provided by training institutions and employ-

ment agencies can be an alternative to minimize the difficulties of the new professionals to improve the quality of nursing care.²⁵

In this sense, the work environment of the hospital institutions places nurses in the face of the challenge of performing complex functions and activities, aiming at a qualified and holistic nursing care for patients. And for this to be possible, these professionals need to improve their specific skills, considering the scenario of complexity.

This research has as limitation having been carried out with graduates of the last two years of a single HEI. Thus, for future research it is recommended to extend the study to other educational institutions, with a view to comparing and/or generalizing the data, in order to contribute to identify challenges for the development of skills in the hospital environment.

FINAL CONSIDERATIONS

In a pendulum of comings and goings, the results allowed to identify challenges in the hospital institutions that interfere in the development of professional competencies. Such challenges are related to interpersonal relationships, professional age and practical experience, the availability of human and material resources, technical ability and type of management performed.

The complexity of hospital organizations requires professionals, in addition to theoretical and practical knowledge, an expanded view of the patient, and physical and emotional efforts to perform quality work. Nurses, who were the subject of the present study, need to be constantly updated and develop competencies that will help them in the dynamics of their work process in their teams and with other workers, facing possible challenges that may arise in the routine of service.

By staying updated and improved, professionals acquire more experiences for their work practices, which can minimize the challenges that may be present in the case of young workers. The practice will also contribute to implement procedural skills, a compromising and challenging factor in some spaces in the hospital context, considering that hospitals are places with innovative technologies and where complex procedures occur.

In the exercise of management actions of care and of the unit, nurses may face several conflicting situations that must be identified, evaluated and administered so as to avoid that they interfere in the service provided. In this context, nurses have been the professional who play the role of mediators of conflictive situations that arise in the work team and, to this end, they must find the most adequate solution to each problem, maintaining a balanced interpersonal relationship because the persistence of conflicts or lack of solutions can cause damage to the organization as well as to the workers themselves.

Little human and material resources in the unit should also be a concern of nurses and institutional managers. The qual-

ity of patient care is intrinsically related to human capital and the working conditions to which these workers are subjected. In this context, the management of people should have the goal of guaranteeing the quantity and quality of professionals to perform care activities, ensuring the continuity of care. This will also enable the participation of nurses in the purchase and administration of materials, which can help in reducing costs and maintaining service effectiveness. Thus, a flexible, participatory management model can contribute to the adequacy of these factors and the development of professionals according to the needs of the institution.

Therefore, in this scenario where there are flaws and challenges inherent in the training of professionals, it becomes evident the need for managers and professionals to reflect on the training of nurses and to jointly invest in strategies for the development of skills in these workers. It is known that there are still several issues to be faced in the educational field, but it is up to the training centers to reflect on the challenges that come up, implementing differentiated teaching strategies for future professionals.

It is believed that this study is of great relevance and contribute to the reflection of nurses, managers and training centers, so that they can recognize the challenges present in the work process of hospital nurses, in order to implement strategies or programs in to lessen these difficulties. This will make it possible to have competent professionals in their service, collaborating for the excellence of the quality of care provided.

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