

MANAGEMENT STRATEGIES FOR HOSPITAL ACCREDITATION

ESTRATÉGIA DO TRABALHO GERENCIAL PARA ALCANCE DA ACREDITAÇÃO HOSPITALAR

ESTRATEGIA DE TRABAJO DE GESTIÓN PARA ALCANZAR LA ACREDITACIÓN DEL HOSPITAL

Andréia Guerra Siman¹
Simone Grazielle Silva Cunha²
Erick Siman Martins³
Maria José Menezes Brito⁴

¹ RN. Doctoral student in Nursing at the Nursing School of the Federal University of Minas Gerais – UFMG. Belo Horizonte, MG – Brazil. Assistant professor at the Medicine and Nursing Department of the Federal University of Viçosa – UFV. Viçosa, MG – Brazil.

² RN. Master's student in Nursing at the Nursing School of the UFMG. Belo Horizonte, MG – Brazil.

³ Theologian. MBA in People Management. Undergraduate student in Social Sciences at the UFV. Viçosa, MG – Brazil.

⁴ RN. PhD in Nursing. Associate professor at the School of Nursing of the UFMG. Belo Horizonte, MG – Brazil.

Corresponding Author: Simone Grazielle Silva Cunha. E-mail: simonegscunha@gmail.com

Submitted on: 2014/10/16

Approved on: 2015/09/14

ABSTRACT

This study aims to analyze management strategies in order to be awarded a Certificate of Excellence. This is a qualitative case study carried out at a private hospital in Belo Horizonte accredited as Centre of Excellence by the National Accreditation Body. The study included 12 managers. Data was collected in 2011 through semi-structured interviews and analyzed using content analysis. The study results identified three thematic categories: a) people management as the main principle for Accreditation with Excellence certification; b) education and training; c) communication: promoting quality services. People management was the most important strategy identified since it promotes autonomy within the team; widespread commitment to proposed improvements; appreciation, recognition and reward; investment in the training of all professionals involved in the care process; clear communication in the workplace and feedback during the weekly meetings; and more staff participation in organizational decisions and results. For the institution to get the accreditation award the staff had to be aware of the principles and values of accreditation and of the importance of decentralization of information.

Keywords: Personnel Administration, Hospital; Management; Quality Management; Hospital Accreditation; Planning.

RESUMO

Objetivo: analisar as estratégias do trabalho gerencial com vistas ao alcance da acreditação com excelência. **Métodos:** trata-se de um estudo de caso com abordagem qualitativa, realizado em um hospital privado localizado em Belo Horizonte, MG, acreditado em nível de excelência pela Organização Nacional de Acreditação. Participaram do estudo 12 gerentes. A coleta foi realizada em 2011 por meio de entrevistas, com roteiro semiestruturado e analisadas por meio da análise de conteúdo. **Resultados:** três categorias temáticas foram construídas – a) gestão de pessoas, pilar da estratégia gerencial para obter a acreditação com excelência; b) formando e treinando pessoas; c) comunicação: favorecendo um serviço de qualidade. **Conclusão:** a maior estratégia do trabalho gerencial identificada foi a gestão de pessoas, trazendo benefícios como: mais autonomia no trabalho da equipe, envolvimento de todos no processo de melhorias propostas; valorização, reconhecimento e recompensa; investimento na capacitação de todos os envolvidos no cuidado; além de comunicação clara e processo de feedback, com reuniões semanais e mais participação da equipe nas decisões organizacionais e nos resultados. Para a instituição alcançar a acreditação hospitalar foi necessário que as pessoas conhecessem os princípios e valores da acreditação e descentralização das informações.

Palavras-chave: Administração de Recursos Humanos em Hospitais; Gerência; Gestão da Qualidade; Acreditação Hospitalar; Planejamento.

RESUMEN

El objetivo de este estudio fue analizar las estrategias del trabajo de gestión a fin de lograr la acreditación de excelencia. Se trata de un estudio de caso con enfoque cualitativo realizado en un hospital privado de Belo Horizonte, MG, acreditado en el nivel de excelencia por la Organización Nacional de Acreditación. Participaron 12 gerentes. La recogida de datos se realizó en 2011 a través de entrevistas con guión semiestructurado que se analizaron según su contenido. Se construyeron tres temas: a) gestión de personas, pilar de la estrategia de gestión para la acreditación con excelencia; b) formación y capacitación de las personas; c) comunicación: promoción del servicio de calidad. La principal estrategia identificada fue la gestión de las personas, que aporta beneficios como mayor autonomía en el trabajo en equipo, la participación de todos en los procesos de las mejoras propuestas; valorización, reconocimiento y recompensa; inversión en la capacitación de todos los involucrados en los cuidados; además de la comunicación clara y del proceso de retroalimentación con reuniones semanales y mayor participación del personal en las decisiones organizativas y en los resultados. Para que la institución logre la mencionada acreditación el personal debe conocer los principios y valores de la acreditación y la descentralización de la información.

Palabras clave: Administración de Personal en Hospitales; Gerencia; Gestión de la Calidad; Acreditación de Hospitales; Planificación.

INTRODUCTION

The demand for quality in service delivery, technological development and competition compelled health care organizations to improve policies and management practices, implementing actions in order to optimize employees' performance and ensure a high level of customer satisfaction. Organizational managers consider hospital accreditation to be a valuable strategy to achieve quality service. An accreditation process is a system of evaluation and certification that can be applied not only to hospitals but to any health service.¹ According to the World Health Organization (WHO) an accreditation process increases the quality of health systems.²

Accreditation has different meanings depending on the country's policies and it can be judged only in the context of specific health care systems.³

Accreditation processes in Brazil are based on American experiences. This is due to the fact that accreditation schemes originated in the United States of America in 1924 when the American College of Surgeons created the Hospital Standardization Program. Ernest Amory Codman, pioneer of hospital accreditation schemes, founded the Joint Commission International (JCI) in the mid-fifties. Its mission was to give support to international health organizations in order to improve quality and safety standards.^{4,5} In this sense, the World Health Organization (WHO) recommends the adoption of such programmes.^{4,5}

The present study object is the certification methodology of the National Accreditation Organization (ONA). The ONA was created in 1999 as a non-governmental organization that evaluates and certifies the quality of health services. It is a voluntary and periodic process for no inspection purposes based on values, such as constant improvement and continuous learning.¹

Hospital evaluations are carried out by institutions accredited by ONA via technical visits classified as: safety and structure (level 1 – accredited); organization of processes (level 2 – full accreditation); and results (level 3 – excellence).¹ Hospital accreditation effectively implemented can promote changes in values and behaviours that prioritize quality and humanistic care, patient safety, as well as organizational improvements, focussing on the achievement of excellence.⁶

In the nineties, discussions related to external evaluation, quality and improvements in health care gave prominence to accreditation schemes. Amongst accreditation positive outcomes are management improvements, staff training, standardization of processes, teamwork and external recognition.⁷

Furthermore, accreditation aims at achieving high health care standards. Hospital accreditation can influence services reliability amongst users, paying agencies and general public.⁸ External recognition is, moreover, the original reason to seek an evaluation method.⁷

The adoption of a quality management system that aims at this certification enables hospitals to control costs, reduce losses and reworking, improve staff and patient safety and demonstrate the effectiveness and efficiency of work process.⁶

Considering the above, the end of management improvements is quality of care and care management processes in order to achieve better results. Health management influences its organization as an intentional transforming action that produces an effect.⁹ This process should be carried out allowing flexibility to division of labour, knowledge sharing, interdisciplinarity, as well as interaction between social players.

People management focuses on aligning people to the organization's strategy, aiming at improving organizational performance and developing continuous improvement of patient care.¹⁰ In this context, workers are essential to the implementation and maintenance of a quality management system.¹⁰ The contribution of all participants is important to the consolidation of management processes, therefore, people management is at the heart of a strategy focused on quality.¹¹

Accreditation is an ongoing process of improvement that aims at care quality and safety. It assumes that hospital organizations aspire the excellence accreditation. This means that management strategies should emphasize the importance of human capital. The researchers decided, as a result, to carry out the study at a hospital awarded with a certificate of excellence (level three ONA). The institution selected is a benchmark in quality care and patient safety in the state of Minas Gerais.

A manager needs to master skills, such as knowledge of business strategies; quick adaptability to changes; how to trim down the time between conception and execution of an action; how to align the management of people with the organization's business strategies.¹²

Management actions go beyond the implementation of rules and routines, control, cost management and human resources; it encompasses also innovation and perseverance. Considering the importance of management processes and the need for health services to offer quality and safety, the researchers propose the following question: What management strategies are needed in order to get a certificate of excellence? How have managers achieved the certificate of excellence in other health care organizations?

Given the above considerations, this study analyses management strategy aimed at excellence accreditation using ONA methodology.

METHODOLOGY

This is a qualitative case study, a method that allows identifying, describing and analysing the context in which phenomena occur and the factors that interfere in the process.¹³

It was carried out at a large-sized private hospital, one of the first institutions accredited with an ONA level of excellence in Belo Horizonte. Having been successful at all stages of the accreditation process in 2004, it was then selected as research setting.

The research participants were line managers, i.e. those responsible for coordinating a sector within the hospital. Inclusion criterion was to have been in a management position since the beginning of the accreditation process. Those who were not working in the hospital at that moment were excluded.

Data was collected by appointment from April to June 2011 through on-site semi-structured interviews. A total of 12 people participated in the study: five nurses, two doctors, four managers and one accountant. Data collection was closed after data saturation, therefore there was no sample loss which occurs when data becomes repetitive and redundant and it generates no more information.¹⁴

The interview open ended questions dealt with aspects such as management activities, management actions in the accreditation process, the nurse's role in this process, facilitators and barriers, and strategies to achieve Accreditation with Excellence.

The interviews were recorded prior to participants' authorization and later they were fully transcribed. Afterwards, they were numbered sequentially using acronym GR.

Data analysis using Bardin's thematic content analysis enabled an in-depth analysis of the phenomenon. This methodology¹⁴ allowed the researchers to go past a merely descriptive analysis of the messages content. Data analysis comprised three chronological stages (pre-analysis; exploration of material; and treatment of results) performed according to the following logical sequence: organization of material; superficial reading; thorough reading and data coding and attribution of importance to words and their meanings; and data categorization which organized the messages into three thematic categories: people management – main management strategy for Accreditation with Excellence; education and training; communication: promotion of a quality service.

Participants were informed about the research methods, its ethical and legal aspects and all signed the term of free and informed consent. National Health Council Resolution 466/12 was followed and the research was approved by the Research Ethics Committee of the Hospital and of the Federal University of Minas Gerais (protocol No ETIC 0611.0.203.000-10).

RESULTS

The study included 12 managers: five nurses, four doctors, two executives and one accountant. Their age ranged between 29 and 58 years; average time of employment in the institution was 13 years; 100% of the professionals had some kind of specialization: MBA in Health Management, Hospital Administration, MBA in Executive Development, Human Resources

Management, Intensive Care, Obstetrics, Business Management, Finance Management, Logistics, Executive MBA, Audit and People Management.

The resulting thematic categories were:

PEOPLE MANAGEMENT: FOCUS OF MANAGEMENT STRATEGY TO ACHIEVE ACCREDITATION WITH EXCELLENCE

The respondents' answers revealed that the institution's accreditation with excellence was due to management strategies focused on people. The institution became accredited through the implementation of up-to-date management practices, such as including staff in the execution of improvements, allowing their participation in the process, acknowledging the contributions of all those involved through incentives and performance evaluation.

Managers focused on the insertion of employees in the accreditation process:

It is not an isolated work; it is integrated into the hospital as a whole, because the accreditation program involves the whole business (GR2).

Accreditation doesn't belong to the manager; it is everybody's: the staff, the hospital. Hence people participation. They have to understand what is happening, they have to participate, to be trained, to be involved in the process. It is essential! There's no way a hospital will become accredited only with the participation of senior managers. Everybody should get involved. People have to understand and participate. They have to be part of the process. It is fundamental! The recipe is to be part of the process. (GR3).

Participation of all professionals in the programme was essential to bring about improvements and results. The institution's high-performance depended on the commitment and collaboration of the players involved.

Above all, it means engaging, motivating people; to make them know that the accreditation process will be good to everyone. Once we achieve that goal, everybody wins; no matter how modest their task within the institution (GR7).

Another management strategy is the employees' recognition that results in their participation in the company profits, as reported in the following statement:

Here, the company gives an incentive according to the results. Every six months, they give us a share of the profits (GR6).

The managers participating in this study also joined in the job performance evaluation.

Personnel issues, hiring, employees' performance evaluation, progressions, training, lots of meetings (GR3).

The evaluation is carried out at all hierarchical levels, as shown below:

We have great care with feedbacks. I tend to be very transparent. Top management guidelines are passed on to my subordinates quickly and clearly [...] and I must also account for what I do. I am evaluated. And then there's the feedback that is for everyone, also for my subordinates. There I am able to see my level of acceptance, acceptance of my work (GR2).

EDUCATION AND TRAINING

In this category the researchers were able to identify an important aspect of management change that has an impact on care and improvements: the importance of professional updating and training, as reported by GR1, GR3 and GR6.

Well, the need to follow procedures really changed; we were not doing it. I can see this in staff training. They were done, but there was no following the rule of needs assessment first and formal evaluation later. We used to do the evaluation, but it was informal. That changed, I think the girls' attitude towards training has really changed. And I think that's good, because we have to be more effective, both in training and in monitoring the professional (GR1).

We offer training. Every month they receive new subjects, material, and a review; there is no need to look for courses elsewhere. I think that's cool (GR3).

We need to better ourselves. The sector needs to get organized, to get updated. Updates regarding accreditation, new textbooks, new rules that come along the way (GR 6).

Knowledge of the institution's principles and values was another important aspect:

We hold meetings to spread the mission. First we put the SOPs on paper, with the employees' participation; nowadays they also help us to review these protocols. Once a year we review and update those documents. (GR6).

The workers' active participation at all stages of the accreditation process allowed them a macro view of their sector and of the institution as a whole. One example is that they were not restricted to management actions but participated in the tracking, monitoring and analysis of indicators, as well as they got to know the results. This led to decentralization of information and decision-making processes; it reduced bureaucracy for the presentation of results and gave more autonomy to team and managers.

They are certainly involved, because we work with indicators and a visible management panel through which they can follow the sector's performance (GR6).

COMMUNICATION: PROMOTING SERVICE QUALITY

Improvements in the communication process gave the workers a better systemic view:

We show the results and analyse them. Based on this analysis we propose actions for continuous improvement, not just the manager. We have to tell the workers our current situation condition in the context of the whole company (GR5).

It means to bring the information so people feel participant of the work process. So we are concerned about how to foster this participation. We have evaluation meetings with our subordinates every Wednesday (GR12).

From the managers' narratives it emerged aspects regarding briefings:

The relationship with top management was always very open, trouble-free. There is a meeting every Tuesday, and this since the hospital was first created, and we have a role in this meeting. Our job is to convey the meeting conclusions to our employees. We call that briefing (GR9).

Finally, it is worth mentioning that the hospital top management proved to be effective and active, according to GR6 and GR7:

I think that people's participation was a facilitator, especially the hospital board of directors. The board bought the idea. That was crucial. The board was present at all times. They supported us; they gave us physical support with the improvements that needed to be made. They were always there: at meetings, audits; they were audited. So their example was contagious (GR6).

DISCUSSION

The study results demonstrate that people management was the managers' main strategy during the accreditation process. Management actions related to the theoretical principles of managing people in organizations, i.e. objectives and principles are not centred in senior managers, but scattered through all sectors. Employees feel motivated to work towards achieving the company's goal.¹⁵

People management is based on participation and characterized by practices such as recognition, encouragement, motivation and communication, all of which aim at improving integration between the organization players motivating them to perform the role well.¹⁶ The present study findings suggest that the research subjects understood this principle given that such practices were implemented in order to achieve Accreditation with Excellence.

Training must be a part of any initiative towards quality.⁷ However, the implementation of quality management system in hospitals generally does not consider the subjective dimension of workers' participation, professional collaboration and the compromise between workers' and managers' interests.¹⁰ Organizations should focus on workers' development and recognition.

In the present research setting, there was a link formed between institution and employees aimed at the accreditation with excellence. Their partnership was based on the management of the employees' contributions and the award of incentives for them to focus their performance on quality. These factors were indispensable for company development¹². Similar results were found in other studies.^{6,8}

Employee appreciation, recognition and a system of rewards were cited as management strategy, which is again related to people management. The results obtained are proportional to the ability at executing a task and the individual's personal achievement.¹⁷ In addition, the individual depends on the organization to achieve his personal goals and vice-versa: successful people give a boost to the organization participating actively in institutional activities, and are more creative as well, characteristics that support the organization growth.¹⁵

However, the unbridled pursuit of results, the constant demand for performance and practice improvements led many health professionals to exhaustion. This aspect highlights the weaknesses of people management practices in the context of hospital accreditation.^{7,10}

The institution studied here created a system for employee participation in the company's profits. Every six months they receive a bonus for achieving the goals, which is possibly a hospital policy to increase the employees' level of satisfaction: it helps to motivate and maintain them in the company. The professional's reward system includes incentives, awards, services and facilities they receive upon results obtained.¹⁸

Managers may find it difficult to keep a high level of motivation amongst team members. After external evaluation, professionals initially enthusiastic and convinced of the importance of improving care practices, can get discouraged and doubt the positive aspects of quality. The greatest difficulty is precisely to maintain high level of motivation after evaluation.⁷

In order to address this difficulty, people management main focus should not be on financial incentives, but on people development instead. Such attitudes meet ONA accreditation principles that are eminently educational.

Performance evaluation is another important aspect addressed in the study. It is the systematic analysis of the professionals' performance that should be carried out according to targets, results and employee's potential.¹⁸ Besides the subordinates, managers are also evaluated. According to the study participants, this instrument aimed at identifying problems and evaluating people's level of integration. The managers considered it an invaluable tool that allowed employees' and managers' feedback, an important aspect of quality policy.

Assessment strategies and incentives used concomitantly with human investment are essential within an organization. An education programme is fundamental to involve, effectively and permanently, people around a particular project.^{1,12} The study participants invested in further education programmes addressed to all staff. Such policy is consistent with ONA guidelines: to promote actions related to organization and coordination of activities related to human resource planning, working conditions, health and safety, and people development.¹

The managers organized systematic training events since improvement knowledge and skills should be the central concern of quality initiative.⁷

A study aiming at identifying nonconformities related to nursing work in 37 public hospitals, based on the analysis of evaluation reports from an ONA accredited institution, reported that some issues revolved around the definition of training programs were linked directly to people management and development policy.¹⁹

Hospital training programs should emphasize interpersonal, technical and interactive skills, so as to promote the interaction between professionals and patients.¹⁰ The higher the level of education, experience and training of the workers, the greater the company survival.²⁰ This will potentially contribute to ONA principles of management, systemic vision and standards to be met in full.¹

Therefore, the study findings demonstrate that managers used people management to achieve accreditation and, at the same time, national accreditation contributed to the improvement of people management. These findings are consistent with results of previous studies.^{12,21}

People management in the context of health facilities has unique and complex aspects. It involves assorted professional and personal categories¹⁰ and poses a challenge to managers.

In order to carry out improvements, the manager must take into consideration that the actions are initiated by the professionals because they are responsible for the processes' implementation⁴ and have a positive or negative effect on the activities they perform. The workers' performance should provide the company with the best return possible using their knowledge and skills.²⁰ In the institution studied, actions agreed upon in meetings, decentralized communication are management strategies aiming at that goal, for employees should believe themselves key figures for the development of actions to achieve quality.

Communication was also highlighted as a quality gap.²² Effective and efficient communication depends on people that are in synchrony with corporate goals, i.e. they must be convinced that a project is needed and valid, as well as assured of the definition of the actions, promoting its implementation and continued certification.^{6,23} The present study findings support this principles, especially with regard to senior management relationship with work teams, which refutes an open communication policy between line managers only.

Communication and education were categories identified in other studies that can gear management and care interventions towards achieving and strengthening results based on the National Accreditation Organization.²²

Public hospitals in the same region, however, offer a different reality altogether. A research carried out in eight public hospitals in Minas Gerais, in process of accreditation by the National Accreditation Organization, found a high percentage of nonconformities related to corporate communication methods, e.g. centralization of information necessary to ensure care quality and patient safety.²⁴ Such context is proof that it is not easy to determine to what extent certification contributes to an institution.⁷

Another important finding was that employees carried out results analysis through the monitoring of indicators, a must Level 3 ONA for accreditation with excellence. The objective is assessment expansion, analysis of results and impacts of interventions through indicators aligned with the planning and aiming at continuous improvement.¹

The implementation of handover meetings is another strategy to achieve level of excellence. These were held weekly between hospital direct and senior managers. Line managers, in turn, pass on what was discussed to team members. According to the managers, handover of information was crucial to gather the entire staff around the institution goals.

The participation of top management was a facilitator and a key aspect in the process of hospital accreditation according to the interviewees. Managers realized that top managers knew about quality and were clearly committed to the implementation of hospital accreditation and permanently involved in the quality process. In addition, they promoted the necessary changes to achieve results, proving their allegiance to the project

and created a favourable environment for the implementation, achievement and maintenance of the accreditation process.

A study carried out amongst nursing staff at another institution revealed a top-down approach was the main aspect of its accreditation process. The lack of communication between management and employees meant that the latter's ignorance about the new method generated resistance to it.²¹

Organizational communication can enhance the functionality of work processes, contributing to employees' participation in projects and their commitment to organizational goals. It is an indispensable tool to share ideas and values. It improves care quality and work process as a whole and it should be carried out by the board of directors and by all employees.²⁵

Data analysis revealed a context in which recommendations for national certification processes regarding people development were followed.¹

The researchers emphasize that management interventions was receptive to organizational changes, i.e. it consisted of several complementary intelligible processes essential for organizational attainment. Managers functioned as the link between the various social players involved in the process of achieving quality service.

The positive results of management interventions in the studied institution put in evidence Brazilian hospitals' shortcomings regarding accreditation. This is particularly noticeable amongst small hospitals that lack in management and resources.⁷ Hospital accreditation is a recent initiative and calls for further studies that could clarify its exact outcomes, especially for the patient.

CONCLUSIONS

People management in the research setting was the main strategy for achieving ONA accreditation with excellence. The experience broadened the participants' perspective on quality and safety through a further education programme. The participation of senior managers and all staff, policy of appreciation, recognition and reward, clear communication and feedback process through weekly meetings, and investment in employee training were the strategies identified to achieve high quality standards.

This study adds relevant information regarding strategies for the participation of different players within the organization in order to reach the accreditation with excellence certificate. Managers felt challenged and realized that management had become more complex so they sought to expand their interventions to get certified.

The researchers consider that the study objectives were achieved and the methodology selected was adequate. Based on the results, the authors suggest studies in hospital accreditation from the user's perspective. The present study contributes to support discussions focused on the scope of such challeng-

es, gathering relevant information about the management role in accreditation processes.

Regarding the limitations of the study, respondents were required to bring to mind interventions dating back to 2004, that is, prior to their participation in the research. Furthermore, the research was carried out at a hospital with an ONA Certification of Excellence and it may not reflect the reality of other institutions.

ACKNOWLEDGMENTS

This research was supported by the Brazilian National Council for Scientific and Technological Development (CNPq) and the Coordination for the Improvement of Higher Education Personnel (CAPES).

REFERENCES

1. Brasil. Organização Nacional de Acreditação. Manual Brasileiro de Acreditação: Organizações prestadoras de serviços de saúde. Brasília: ONA ISQua; 2014.
2. World Health Organization-WHO. The world health report 2000: health systems: improving performance. Geneve: WHO; 2000.
3. Fortes MT, Mattos RA, Baptista TWF. Acreditação ou acreditações? Um estudo comparativo entre a acreditação na França, no Reino Unido e na Catalunha. *Rev Assoc Med Bras.* 2011; 57(2):239-46.
4. Novaes HM. O processo de acreditação dos serviços de saúde. *Rev Adm Saúde.* 2007; 9(37): 133-40.
5. Joint Commission on Accreditation of Health care Organization. Characteristics of clinical indicators. *QRB Qual Rev Bul.* 1989; 15(11): 330-9.
6. Manzo BF, Ribeiro HCTC, Brito MJM, Alves M. As percepções dos profissionais de saúde sobre o processo de acreditação hospitalar. *Rev Enferm UERJ.* 2011; 19(4):571-6.
7. Schiesari LMC. Avaliação externa de organizações hospitalares no Brasil: podemos fazer diferente? *Ciênc Saúde Coletiva.* 2014; 19(10):4229-34.
8. Kobayashi RM, Silva ABV, Ayoub AC. Gerenciando dificuldades para acreditação hospitalar em hospital cardiovascular. *Rev Rene.* 2010; 11(4):19-28.
9. Santos SSBS, Silva LS, Carneiro EKN, Saback MAMC, Carvalho ESS. Processo de trabalho da equipe de enfermagem em unidades saúde da família em município baiano. *Rev Baiana Enferm.* 2013; 27(2):101-7.
10. Peixoto TC, Brito MJM, Santana LC. Gestão de pessoas em uma unidade pediátrica na perspectiva do diagnóstico ONA e de profissionais. *Rev Eletrônica Enferm.* 2012; 14(4):893-902. [Cited 2014 Sept. 20]. Available from: <http://www.fen.ufg.br/revista/v14/n4/v14n4a18.htm>
11. Viana MF, Sette RS, Rezende DC, Botelho D, Poles K. Processo de acreditação: uma análise de organizações hospitalares. *RAHIS.* 2011:35-45.
12. Chiavenato I. Gestão de pessoas: o novo papel dos recursos humanos nas organizações. 3ª ed. Rio de Janeiro: Elsevier; 2008.
13. Coimbra MNCT, Martins AMO. O estudo de caso como abordagem metodológica no ensino superior. *Nuances: estudos sobre educação.* 2013; 24(3):31-46. [Cited 2014 Sept. 20]. Available form: <http://dx.doi.org/10.14572/nuances.v24i3.2696>.
14. Bardin L. Análise de conteúdo. São Paulo: Edições 70; 2011.
15. Souza J, Ribeiro I. Políticas de gestão de pessoas em uma organização sem fins lucrativos do estado do Paraná- Brasil. *RECAT.* 2013; 1(1):29-37.
16. Fiuzza GD. Políticas de gestão de pessoas, valores pessoais e justiça organizacional. *Rev Adm Mackenzie.* 2010; 11(5):55-81.
17. Paschoal T, Torres CV, Porto JB. Felicidade no trabalho: relações com suporte organizacional e suporte social. *RAC.* 2010; 14(6):1054-72.
18. Dutra JS, Zuppani TS, Nascimento F. Avaliação de desempenho por competências no setor público paulista. *ReFAE.* 2014; 5(2):24-54.
19. Ribeiro HCTC, Campos LI, Manzo BF, Brito MJM, Alves M. Estudo das não conformidades no trabalho da enfermagem: evidências relevantes para melhoria da qualidade hospitalar. *Aquichan.* 2014; 14(4):582-93.
20. Mizumoto FM, Aartes R, Lazzarini SG, Hashimoto M, Bedê MA. A sobrevivência de empresas nascentes no estado de São Paulo: um estudo sobre capital humano, capital social e práticas gerenciais. *Rev Adm.* 2010; 45(4):343-55.
21. Manzo BF, Ribeiro HCTC, Brito MJM, Alves M. A enfermagem no processo de acreditação hospitalar: atuação e implicações no cotidiano de trabalho. *Rev Latino-Am Enferm.* 2012; 20(1):151-8.
22. Feldman LB, Cunha ICKO, D'Innocenzo M. Validação dos critérios de processo para avaliação do serviço de enfermagem hospitalar. *Rev Latino-Am Enferm.* 2013; 21(4). [Cited 2014 Sept. 20]. Available from: http://www.scielo.br/scielo.php?pid%3DS01041692013000400841%26script%3Dsci_arttext
23. Maziero VG, Spiri WC. Significado do processo de acreditação hospitalar para enfermeiros de um hospital público estadual. *Rev Eletrônica Enferm.* 2013; 15(1):1219. [Cited 2014 Sept. 20]. Available from: <http://dx.doi.org/10.5216/ree.v15i1.14757>
24. Martins Sobrinho F, Ribeiro HCTC, Alves M, Manzo BF, Nunes SMV. Rendimiento en el proceso de acreditación de hospitales públicos de Minas Gerais/Brasil: influencias para la calidad asistencial. *Enferm Glob.* 2015; 14(37):286-97.
25. Manzo BF, Brito MJM, Alves M. Influências da comunicação no processo de acreditação hospitalar. *Rev Bras Enferm.* 2013; 66(1):46-51.