THE WORK ENVIRONMENT OF NURSES WHO PERFORM CARE ACTIVITIES IN A UNIVERSITY HOSPITAL

Flávia Boaretto¹, Maria do Carmo Fernandez Lourenço Haddad², Mariana Angela Rossaneis³, Raquel Gvozd⁴, Paloma de Souza Cavalcante Pissinati⁵

ABSTRACT: The present study aimed to assess the work environment favorable to the professional practice of nurses in a public university hospital. Cross-sectional quantitative study with 60 care nurses using the Nursing Work Index – Revised questionnaire. The data were collected from November 2014 to January 2015. Also, 45 (75%) of the nurses who participated in the study satisfied with their work. All the 12 sectors of the institution favored the nursing practice in the following aspects: management support, autonomy and control of work processes, particular in Bone Marrow Transplant units and in the Infectious and Communicable Diseases unit, which, unlike the others, were specialized and had lower employee turnover. According to most respondents, the physician-nurse relationship was poor, unsatisfactory, and obtained low scores. It is concluded that knowledge of the characteristics that favor the exercise of professional nursing activities may broaden the discussion of strategies aimed to improve the nursing work.

DESCRIPTORS: Health institutions environment; University hospitals; Nursing; Professional practice; Work environment.

CONTEXTO DE AMBIENTE DE TRABALHO ENTRE ENFERMEIRAS ASSISTENCIAIS EM HOSPITAL UNIVERSITÁRIO

RESUMO: Objetivou-se analisar o ambiente de trabalho favorável à prática profissional de enfermeiros em hospital universitário público. Estudo transversal e quantitativo, realizado com 60 enfermeiros assistenciais, com o questionário *Nursing Work Index – Revised.* Os dados foram coletados entre novembro 2014 e janeiro de 2015. Dentre os pesquisados, 45 (75%) enfermeiros consideravam-se satisfeitos com seu trabalho. Todos os 12 setores da instituição apresentaram características favoráveis à prática do enfermeiro nos aspectos de suporte dos gestores, autonomia e controle dos processos de trabalho, sobretudo nas unidades de Transplante de Medula Óssea e a Unidade de Doenças Infectocontagiosas, que se diferenciavam por serem especializadas e com menor de rotatividade de funcionários. A relação médico-enfermeiro foi destacada como um dos pontos críticos, obtendo escores mais insatisfatórios. Conclui-se que a análise de características que favorecem a prática profissional do enfermeiro pode ampliar a discussão de estratégias que contribuam para o trabalho em Enfermagem em serviços de saúde.

DESCRITORES: Ambiente de instituições de saúde; Hospitais universitários; Enfermagem; Prática profissional; Ambiente de trabalho.

CONTEXTO DE AMBIENTE LABORAL ENTRE ENFERMERAS ASISTENCIALES EN HOSPITAL UNIVERSITARIO

RESUMEN: Estudio cuyo objetivo fue analizar el ambiente de trabajo favorable a la práctica profesional de enfermeros en hospital universitario público. Trasversal y cuantitativo, el estudio fue realizado con 60 enfermeros asistenciales, por medio de cuestionario Nursing Work Index – Revised. Los datos fueron obtenidos entre noviembre de 2014 y enero de 2015. Entre los investigados, 45 (75%) enfermeros se dicieron satisfechos con su trabajo. Todos los 12 sectores de la institución presentaron características favorables a la práctica del enfermero en los aspectos de soporte de los gestores, autonomía y control de los procesos de trabajo, sobretodo en las unidades de Trasplante de Médula Osea y la Unidad de Enfermedades Infectocontagiosas, las cuales son distintas por su especialización y su menor rotación de funcionarios. La relación médico-enfermero se destacó como uno de los puntos críticos, con resultados más insatisfactorios. Se concluye que el análisis de características que favorecen la práctica profesional del enfermero puede ampliar la discusión de estrategias que contribuyan para el trabajo en Enfermería en servicios de salud.

DESCRIPTORES: Ambiente de instituciones de salud; Hospitales universitarios; Enfermería; Práctica profesional; Ambiente de trabajo.

Corresponding author:

Flávia Boaretto Universidade Estadual de Londrina

R. Elizabeth Kenny, 55 - 86039-460 - Londrina, PR, Brasil

E-mail: flaboaretto@gmail.com

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¹Nurse. Specialist in Nursing Services Management. Londrina, PR, Brazil.

²Nurse. PhD in Nursing. Docente de Enfermagem da Universidade Estadual de Londrina. Londrina, PR, Brazil.

³Nurse. PhD in Nursing. Municipality of Rolândia. Rolândia, PR, Brazil.

⁴Nurse. PhD student in Nursing. Professor of Nursing of Universidade Estadual de Londrina. Londrina, PR, Brazil.

⁵Nurse. PhD student in Nursing. Prefeitura Municipal de Rolândia. Rolândia, PR, Brazil.

INTRODUCTION

The hospital setting is a complex professional practice environment. Nurses are aware of the high levels of care required to meet the different demands, because patient assistance involves concern with each patient's individual characteristics (1).

In order to master their professional skills and deliver high-quality care, nurses must perform their actions according to certain processes and values, and have control over the space where care is delivered (2). Thus, the work environment has significant impact on the activities coordinated by these professionals.

The search for better care quality and patient safety, as well as the implementation of measures aimed to ensure better work conditions for health professional have become the focus of nursing services managers. Most public health institutions lack human resources, particularly in nursing, resulting in overload of work. Thus, national and international studies were conducted to address the nurse's work environment and its impact on the activities carried out by these professionals ⁽³⁾.

A work environment favorable for the exercise of professional nursing activities has three main characteristics: autonomy, control over the environment and good relationship between nurses and physicians ⁽⁴⁾. Therefore, it is necessary to assess the quality of these pillars that support the activities of healthcare teams ⁽⁵⁾.

The study showed that some environmental factors may affect nursing care because there is a relationship between workplace, professional actions and the possible consequences of the care delivered to the patients⁽⁶⁾.

Professional development, good interpersonal relationships, high-quality management and appropriate remuneration are characteristics that may reduce Burnout levels. Burnout is an occupational disorder caused by overload and poor work conditions, which associated to other factors, contribute to depersonalization, reduced personal accomplishment and emotional exhaustion among workers (5,7).

An institution that favors the exercise of professional practice will have lower rates of absenteeism and turnover among workers, and contribute to the reduction of mortality rates increase in the level of satisfaction of patients with the care delivered (5,7).

Nurses play a key role on the quality of the care provided to patients. Thus, promoting the autonomy of these professionals contributes to an environment that favors the exercise of professional activities. Besides, the relationships with the medical team, as well as with other professionals of the multidisciplinary care team should be based on mutual respect for the different professionals' knowledge and skills and on appropriate communication between the members of the health teams to ensure effective care ⁽⁴⁾.

In this regard, some tools were developed, with emphasis to the Brazilian version that was validated and adapted from the Nursing Work Index Revised (NWI-R), which measures the presence of characteristics favorable to the exercise of professional nursing activities in their work environment⁽⁴⁾. The NWI-R is widely used to assess whether the work environments are suitable to nursing professional activities, and is recommended by several North American organizations that promote high-quality care ⁽⁸⁾.

Analysis of the work environment allows the development of possible ways to promote greater professional satisfaction, which benefits nurses, patients and the institution. Improvements in the workplace contribute to the safety of patients and health professionals. The most useful tool developed for this assessment is the NWI-R because of its criteria.

Thus, the present study aimed to assess the work environment for the professional exercise of nurses in a public university hospital.

METHOD

Cross-sectional descriptive study, with quantitative approach conducted in a public university hospital in the northern region of the state of Paraná, a regional reference center of Brazil's Unified Health System (SUS).

Data were collected between November 2014 and January 2015. At that time, the institution where the study took place had 117 nurses who have been rendering direct patient care in first aid units, male and female medical-surgical units, infectious and communicable disease units, maternity, adult, child and neonatal care unit, surgical center, burn t center, pediatric intensive care unit and bone marrow transplant unit for more than one year in the institution. Nurses who were on vacation or special leaves and who were not providing direct care to patients were excluded from the study. So, 73 professionals were eligible, and 60 of them agreed to participate in the study and completed the questionnaire (a percentage of 82.19% of the eligible population).

The nurses who agreed to participate in the study, by signing the free informed consent form, completed two instruments: the first was a sociodemographic and occupational questionnaire composed of variables related to gender, age range, marital status, length of professional experience, length of time working in the institution, level of professional education, type of employment contract in the institution, number of patients under the nurse's care, field/sector of activity and work shift.

The second tool called "Nursing Work Index – Revised" (NWI-R) is a 57-item questionnaire that measures the presence of characteristics that favor the exercise of professional nursing activities. For this purpose, of the 57 items, 15 were conceptually distributed across three subscales: autonomy, control and relationship between nurses and physicians; of these 15 items, ten were grouped to originate the fourth subscale, which assesses organizational support (2,4,9).

The subscales "autonomy", composed of five items, and "control", composed of seven items, represent nurses' independence to make decisions to solve problems; the subscale "relationships between nurses and physicians", has three items and involves effective health communication, with mutual respect, in order to achieve one goal: the care delivered to the patient; and the "organizational support", composed of ten items derived from the previous subscales, concerns a situation where the nurse obtains institutional support to develop professional practice ⁽⁹⁾.

The scale is based on a Likert-type scale that ranges from one to four points. Participants are asked to respond whether or not they agree with the assertion "this factor is present in my daily work", by indicating one of the following options: totally agree (one point); partially agree (two points); partially disagree (three points); and totally disagree (four points). The lower the score, the greater the presence of attributes that favor the exercise of professional nursing activities (2,9).

Statistical data analysis was performed with a statistical analysis software, with calculation of descriptive statistics for obtaining mean, standard deviation, relative and absolute frequencies.

The project was approved in October 2014 by the Research Ethics Committee with Humans, according to opinion no 821.558.

RESULTS

Of the 60 respondents, 47 (78.3%) were female individuals, with an average age of 45.2 years and median of 43 years. Regarding marital status, 34 (56.7%) participants had a stable marital relationship, 13 (21,7%) were single, eight (13.3%) were divorced, three (5%) were separated, one (1.7%) was a widower and one (1.7%) reported not fitting in any of the described relationships.

It was found that the participants had in average 18.9 years of experience in the nursing profession (at least one year and a half and a maximum of 34 years. The average length of time working in the institution was 14 years, with a median of 12.9 years (ranging from one to 43.1 years).

Regarding professional education, 41 (68.3%) respondents had specialization in their areas, 15 (25%)

had master degrees and two (3.3%) were doctors. Only one nurse (1.7%) reported having graduation degree and one (1.7%) did not answer this question.

Regarding the type of contract, 41 nurses (68.3%) had passed public examinations and 19 (31.7%) were hired through a simplified selection process, that is, they had a contract of employment for a specified period of time, staying in the institution for a maximum period of two years. Most of them, 44 nurses (73.3%) reported not having other employment contract, and of the 16 (26.7%) who had another employment contract, ten (62.5%) were hired by selection process.

Regarding the number of patients under one nurse's care during the work shift, each professional cared in average for 23 patients, with a median of 17 patients.

Regarding the sectors where the nurses worked, 12 (20%) participants performed their activities in the adult intensive care unit, ten (16.7%) in first-aid unit, seven (11.7%) in the burn center, five (8.3%) in the surgical center, four (6.7%) in the female medical-surgical unit, four (6.7%) in the maternity ward, three (5%) in the infectious and communicable diseases unit, three (5%) in the neonatal intensive care unit, three (5%) in the pediatric unit, three (5%) in the bone marrow transplant unit and two (3.3%) in the pediatric intensive care unit (PICU).

Also, in all the investigated sectors, the percentage of participants was representative of the population of nurses, with samples above 60%, according to Table 1.

Regarding the work shift, 22 (36.7%) participants worked in the night shift, 17 (28.3%) worked in the morning shift, 14 (23.3%) in the afternoon and seven (11.7%) reporting performing their duties in other shifts.

Also, 45 (75%) nurses were satisfied with their work, nine (15%) were very satisfied, three (5%) were dissatisfied and three (5%) were very dissatisfied. As for the quality of the care delivered, it was assessed by 14 (23.3%) participants as very good, 14 (23.3%) as good, one individual (1.7%) considered it poor and none of them rated it as very poor.

The characteristics of the work environment favorable to professional practice were classified into four subscales, with emphasis to autonomy, with a general mean of 2.02 points; followed by organizational support with 2.17 points; relationship between nurse and physician, 2.23 points, and control over the work environment with a mean of 2.29 points, according to Tables 2 and 3.

Table 1 – Representativeness of the sample of nurses of a public university hospital, according to the workplace. Londrina, PR, Brazil, 2015

Sector	Population of nurses	Sample of nurses who participated in the study	
		n	%
First Aid Unit	12	10	83.3
Female Care Unit	6	4	66.7
Male Care Unit	5	4	80
Infectious and Communicable Diseases Unit	4	3	<i>7</i> 5
Maternity	5	4	80
Adult Intensive Care Unit (Adult ICU)	12	12	100
Surgical Center	6	5	83.3
Burn Center	8	7	87.5
Pediatric Unit	5	3	60
Neonatal Intensive Care Unit (Neonatal ICU)	4	3	75
Pediatric Intensive Care Unit (Pediatric ICU)	3	2	66.7
Bone Marrow Transplant	3	3	100
Total	73	60	82.2

The units that most favored the autonomy of nurses were as follows: bone marrow transplant unit, infectious and communicable diseases unit, pediatric unit, adult intensive care unit and burn center.

Regarding the relationship between physicians and nurses, the sectors that obtained the highest scores were the infectious and communicable diseases (1.77 points) and adult intensive care (1.88 points) units; the least favorable score occurred in the male medical-surgical unit (3.08 points).

Regarding control over the work environment, the sectors given the highest scores were the units of bone marrow transplant (1.14 points), infectious and communicable diseases (1.90 points) and burn center (1.91 points). Regarding the subscale called "organizational support", which involves the support provided by the institution to nurses in care delivery, the sectors of bone marrow transplant (1.10 points), infectious and communicable diseases (1.76 points) and burn center (1.92 points) also showed the best rates, according to the assessment of the nurses.

The results of the subscales according to assessment by gender showed that men considered the work environment more favorable to professional practice than women, with emphasis to autonomy, which obtained the highest mean for male respondents (1.86 points, as shown in Table 4).

Men also showed higher professional satisfaction compared to women: 12 men (92.3%) were satisfied or very satisfied compared to 42 women (89.4%).

Table 2 – Characteristics of the work environment favorable to the professional practice of nurses at a public university hospital regarding autonomy and the relationship physician/nurse, according to the work sector. Londrina, PR, Brazil, 2015

Score	Sector	Minimum	Maximum	Mean	Standard deviation
NWI-R Autonomy	General	1	3.80	2.02	0.60
	First Aid	1.40	2.80	2.04	0.46
	Female Unit	2	3.20	2.45	0.57
	Male Unit	1.40	3.40	2.45	0.82
	Infectious and Communicable Diseases	1.20	2.20	1.53	0.57
	Maternity	1.40	3	2.15	0.66
	Adult ICU	1	3.80	1.91	0.74
	Surgical Center	1.60	3	2.28	0.60
	Burn Center	1.40	2.40	1.91	0.32
	Pediatric Unit	1.60	2.20	1.80	0.34
	Neonatal ICU	1.80	2.60	2.26	0.41
	Pediatric ICU	2.20	2.60	2.40	0.28
	Bone Marrow Transplant	1	1.40	1.20	0.20
NWI-R	General	1	3.67	2.23	0.69
Relationship between Nurses	First Aid	1.67	3.33	2.26	0.51
and Physicians	Female Unit	2	3.67	2.66	0.81
and mystelans	Male Unit	2.67	3.67	3.08	0.50
	Infectious and Communicable Diseases	1	2.33	1.77	0.69
	Maternity	1.67	3.67	2.58	0.91
	Adult ICU	1	3.67	1.88	0.72
	Surgical Center	2	3	2.46	0.44
	Burn Center	1.33	2.67	2.23	0.49
	Pediatric Unit	2	2.67	2.33	0.33
	Neonatal ICU	1.67	2,33	2	0.33
	Pediatric ICU	2.67	3	2.83	0.23
	Bone Marrow Transplant	1	1.33	1.11	0.19

Table 3 - Characteristics of the work environment favorable to the professional practice of nurses at a public university hospital regarding control over the environment and organizational support, according to the work sector. Londrina, PR, Brazil, 2015

Score	Sector	Minimum	Maximum	Mean	Standard Deviation
NWI-R Control over the environment	General	1	3.57	2.29	0.63
	First Aid	1.71	3.14	2.44	0.43
	Female Unit	1.71	3.43	2.57	0.73
	Male Unit	2.14	3.57	2.67	0.62
	Infectious and Communicable Diseases	1.57	2.14	1.90	0.29
	Maternity	1.71	3.43	2.57	0.84
	Adult ICU	1.14	3.14	2.05	0.58
	Surgical Center	1.57	3.29	2.71	0.66
	Burn Center	1.43	2.14	1.91	0.25
	Pediatric Unit	2.29	2.71	2.50	0.30
	Neonatal ICU	2.14	3.29	2.66	0.57
	Pediatric ICU	2.71	3	2.85	0.20
	Bone Marrow Transplant	1	1.29	1.14	0.14
NWI-R	General	1	3.40	2.17	0.54
Organizational	First Aid	1.80	2.90	2.25	0.51
Support	Female Unit	1.80	3.30	2.47	0.66
	Male Unit	2.10	3.40	2.60	0.55
	Infectious and Communicable Diseases	1.30	2.20	1.76	0.45
	Maternity	1.80	3.10	2.42	0.53
	Adult ICU	1.10	3.40	2.01	0.63
	Surgical Center	1.90	3	2.56	0.42
	Burn Center	1.50	2.20	1.92	0.22
	Pediatric Unit	2	2.40	2.13	0.23
	Neonatal ICU	2.30	2.50	2.43	0.11
	Pediatric ICU	2.60	2.70	2.65	0.70
	Bone Marrow Transplant	1	1.20	1.10	0.10

Table 4 – Characteristics of the workplace that favor the professional practice of nurses in a public university hospital, according to the gender of the participants. Londrina, PR, Brasil, 2015

Score	Gender	Minimum	Maximum	Mean	Standard deviation
Autonomy	Female	1	3.80	2.07	0.62
	Male	1	2.60	1.86	0.50
Control over the work environment	Female	1	3.57	2.33	0.65
	Male	1.29	3.14	2.13	0.53
Relationship between Physicians and Nurses	Female	1	3.67	2.28	0.72
	Male	1	3.33	2.05	0.57
Organizational Support	Female	1	3.40	2.22	0.57
	Male	1.10	2.60	2	0.42

DISCUSSION

The prevalence of the female gender in the study population is consistent with the findings of a study on the nursing profile in Brazil conducted by the *Conselho Federal de Enfermagem* – COFEN (Federal Nursing Council) and *Fundação Oswaldo Cruz* - Fiocruz (Oswaldo Cruz foundation), in 2010 and disclosed in May 2015, which showed that women accounted for 87.24% of the 1,449.583 nursing professionals, corresponding to 64.7% of the health labor (10).

Most participants (57.6%) were in a stable relationship, which can be positive for these workers, since the emotional support of the marital relationship helps them cope with professional problems, and is associated with less psychological disorders, such as the Burnout syndrome in nurses (11).

The findings of this study revealed that many workers pursued postgraduate studies in nursing after being hired by the institution, which can be associated to their desire to advance in their careers and increase their pay, even though it is difficult to reconcile studies with a full-time job⁽¹²⁾. Besides, *lato* ou *stricto sensu* specialization may provide the nurses with more tools to develop nursing care and managerial skills, and hence make them more able to respond to the challenges of the workplace.

In the present study, most respondents were satisfied or very satisfied with their work, indicating that the nurses had a positive view of their skills in the work environment, or else, the work environment favored their professional practice. Similarly, another study with nurses revealed that they were more satisfied with aspects inherent to their work, such as recognition and responsibility, than to those related to wages, quality of supervision, relationship with the work team and work conditions themselves (13). Satisfied professionals tend to maintain a good relationship with the institution and be more proactive, and patients will benefit most from these attitudes.

This high rate of professional satisfaction expressed by 15% of the participants can also be explained by the presence of favorable characteristics related to the organizational support provided by the hospital. A study carried out in Spain, in 2013, with 111 nurses revealed that the presence of organizational support contributed to a more positive view of the work environment by professional, and emphasized the role of management in the development of a workplace that favors the professional practice of nurses⁽¹⁴⁾, since by recognizing the importance of nursing skills and providing greater support to these workers, they contribute to autonomy in the decision making process: nurses feel more responsible for their tasks and satisfied with the results achieved.

Regarding professional autonomy, most sectors assessed in this study did not show favorable characteristics, particularly the male, female and pediatric ICU units. Also, the exercise of autonomy helps enhancing the profile of the nursing professional. However, this is not an easy task, because it requires the development of decision-making ability, of the ability of relating with others and respecting the actions of the other members of the multidisciplinary team (14-15), which is difficult to implement due to the high complexity of the care provided and the high number of patients in the services.

The unfavorable results regarding the relationship between physicians and nurses shown in nine of the 12 sectors assessed, particularly in the male unit, reinforce the assumption that these sectors are interdependent in hospital organizations, with close ties, tending to cause conflicts among the multidisciplinary teams. Conflicting relationships are an obstacle to the improvement of the care delivered ⁽¹⁶⁾. Good relationships in the hospital setting favor the quality of the care provided to the clients, influence the nursing practice, which is affected by both the physical space and the internal work environment ⁽¹³⁾.

Regarding control over the work environment, the sectors best rated by nurses were the units of bone marrow transplant, infectious and communicable diseases and the burn center. These results can be related to the smaller size of these units, which have a well-structured multidisciplinary team that delivers care to a specific population of nurses, and with lower staff turnover. By ensuring greater control over the work environment and organizational support to nurses, the institution gives them autonomy to perform their activities and manage the unit according to well-defined criteria (17).

It should be stressed that an environment that favors nursing professional practice can be modified and improved through management actions. A study conducted in 2006, in New Jersey, in the United

States, with 863 nurses, showed that a workplace that favors the nursing professional practice increased the quality of care and contributed to reducing mortality rates and adverse events for patients (18).

In the present study, male nurses considered the work environment more favorable to professional practice and were satisfied regarding their autonomy. This result suggests that hospital managers should implement their actions of improvement of the work environment (18) according to the sociodemographic and occupational characteristics of the workers, since these may influence the perception of the positive and negative aspects of their work environment.

When institutions are concerned with a more favorable professional workplace, they may provide a better work environment for their employees. This strategy will contribute to reduce spending related to absenteeism and turnover, and to lower the levels of emotional exhaustion, ensuring greater professional satisfaction. Valid and reliable measures should be taken by the management to ensure the effectiveness of this process.

Dissatisfaction with work conditions result in increased layoffs. Therefore, organizational support becomes a key managerial strategy of valuing and recognition of workers, contributing to increased satisfaction and employee retention.

CONCLUSION

All the units of the institution favored the nursing professional practice. Management support, autonomy and control of work processes were positively assessed by nurses. However, the aspect physician-nurse relationship remains a challenge to be overcome to improve the communication between the multidisciplinary team and patient safety. It was also observed that men reported more characteristics that favored the professional practice compared to women, as well as greater professional satisfaction.

The findings of this study can be useful for studies in similar institutions and contribute to the assessment of work environment, structure and process in the different sectors of a hospital, as well as to broaden the discussion on factors considered favorable to professional practice. It is expected that institutions develop strategies aimed to the adoption of good practices in nursing improving the quality of care delivered to patients.

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