

# THE TRAINING OF COMPETENCES FOR MANAGEMENT IN NURSING\*

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**ABSTRACT:** The objective of this exploratory-descriptive study was to identify the knowledge, skills and attitudes learned by 22 graduates from an undergraduate course in the issue of Management in Nursing. The data collection period was February – April 2010; for data analysis it used the technique of the Discourse of the Collective Subject, which is based on Social Representation Theory. Results: Discourses of the Collective Subject appeared referent to the use of managerial instruments in managerial actions: knowledge regarding management of human, material, physical, environmental and nursing care related resources; managerial skills such as communication, continuous education, and decision-making; problem resolution and leadership; and attitude based on knowledge and influenced by the institutional role of nursing. The teaching of management at the undergraduate level stands out through the support which this provides for the development of knowledge, skills and attitudes which form a base for managerial practice in nursing.

**DESCRIPTORS:** Education in Nursing; Student nurses; Management.

## FORMAÇÃO DE COMPETÊNCIAS PARA O GERENCIAMENTO EM ENFERMAGEM

**RESUMO:** O objetivo deste estudo exploratório-descritivo foi identificar os conhecimentos, habilidades e atitudes apreendidas por 22 egressos de um curso de graduação na temática de Gerenciamento em Enfermagem. O período de coleta de dados foi de fevereiro a abril de 2010; utilizou-se, para a análise dos dados, a técnica do Discurso do Sujeito Coletivo que tem como pressuposto a Teoria da Representação Social. Como resultados surgiram Discursos do Sujeito Coletivo referentes à utilização de instrumentos gerenciais nas ações gerenciais: conhecimentos sobre gerenciamento dos recursos humanos, materiais, físicos e ambientais e do cuidado de enfermagem; habilidades gerenciais como comunicação, educação permanente, tomada de decisão; resolução de problemas e liderança; atitude embasada pelo conhecimento e influenciada pelo papel institucional da Enfermagem. O ensino do gerenciamento na graduação destaca-se pela sustentação que este propicia para o desenvolvimento de conhecimentos, habilidades e atitudes que embasam a prática gerencial em enfermagem.

**DESCRIPTORES:** Educação em enfermagem; Estudantes de enfermagem; Gerência.

## FORMACIÓN DE COMPETENCIAS PARA LA ADMINISTRACIÓN EN ENFERMERÍA

**RESUMEN:** El objetivo de este estudio exploratorio descriptivo fue identificar los conocimientos, habilidades y actitudes de 22 egresos de un curso de graduación en la temática de Administración en Enfermería. Los datos fueron obtenidos de febrero a abril de 2010; fue utilizada, para el análisis de los datos, la técnica del Discurso del Sujeto Colectivo que tiene como presupuesto la teoría de la Representación Social. Como resultados surgieron Discursos del Sujeto Colectivo referentes a la utilización de instrumentos administrativos en las acciones gerenciales: conocimientos acerca de la administración de los recursos humanos, materiales, físicos y ambientales y del cuidado de enfermería; habilidades administrativas como comunicación, educación permanente, tomada de decisión; resolución de problemas y liderazgo; actitud basada por el conocimiento e influenciada por el papel institucional de la enfermería. La enseñanza de la administración en la graduación se destaca por la sustentación que esta propicia para el desarrollo de conocimientos, habilidades y actitudes que fundamentan la práctica de gerencia en enfermería.

**DESCRIPTORES:** Educación en enfermería; Estudiantes de enfermería; Gerencia.

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## INTRODUCTION

The work of the nurse, as a social practice articulated with other practices and an instrument of the process of working in health, has as a subdivision the dimensions of caring/assisting, administering/managing, researching and teaching<sup>(1)</sup>. Due to the versatility of the professional work, in conjunction with globalization and the technological changes which provoke flexibility in the work processes, new professional profiles are demanded, to accompany the logic of this contemporary market; as a result, nurses and other health professionals have come to need the development of new competences<sup>(2)</sup>.

There are various definitions for the word competence, but this article uses as a reference the concept which proposes the definition centered on the change of social behavior of people in relation to the work and its organization. For the author, competence is taking the initiative and accepting responsibility for the worker in professional scenarios. To take the initiative is to begin something, an action which transforms what exists and inserts something new<sup>(3)</sup>.

In this respect, the Brazilian educational policies present – in the text of the National Curricular Guidelines (NCG) for Undergraduate Courses in Nursing – the description of the training of the nurse directed towards meeting the social needs of health, with the objective of promoting the development of knowledge, skills and attitudes required for competent professional functioning and which support the actions in the different professional ambits. The NCG consider that it falls to the nurse to coordinate the process of caring in Nursing, in the contexts and demands of health<sup>(4)</sup>.

In the NCG, of the seven general competences required of health professionals, including the nurse, six are related to managerial work: decision-making, communication, leadership, teamwork, administration and management, and continuous education<sup>(1)</sup>. In the administration/managerial dimension, management in Nursing stands out, which is a complex activity, given that it demands of the professionals cognitive, technical and attitudinal competences<sup>(5)</sup>.

In the current panorama of nurse training, regarding its teaching-learning process, the training of competent professionals, committed to society

and its health problems, constitutes a challenge. The articulation of theory and practice can allow the future worker a critical view of the context, considering the complexity of the individual and the context in which this lives and works<sup>(6)</sup>.

Management in Nursing, in Brazil, is legitimized by the Law of Professional Nursing Exercise (Law N. 7.498/1986), which defines the management of the body of Nursing, and the organization and the management of the Nursing Service and Nursing unit as specific actions for the nurses. As one of the dimensions of the nurse's work process, management requires the mobilization of competences for the exercising of managerial actions directed towards the quality of the care provided, and with a connection between management of the higher hierarchical level and the workers at the lower levels<sup>(7)</sup>.

This study addresses the training of competences for management in Nursing, a relevant issue given the importance of their work in healthcare, as it suggests changes as a way of allowing the development of managerial competences in the different scenarios in the nurse's world of work. In the light of the above, this study aims to identify what the knowledges, skills and attitudes are which are learned by the graduates from an undergraduate nursing course, in relation to the issue of Management in Nursing.

## METHOD

This descriptive-exploratory study with a qualitative approach was undertaken in the State University of West Paraná (Unioeste, in Portuguese), at the Foz do Iguaçu Campus, in the region of the Triple Frontier between Brazil, Paraguay and Argentina. For its study population, it had the 59 graduates of the groups of 2007 - 2009 of the Nursing Course run at the campus in question.

The sample is made up of 22 graduates of both sexes who met the following inclusion criteria: to have worked professionally in some area of Nursing for a length of time equal to or greater than six months. For the calculation of the sample, maximum proportion was used, with a level of confidence of 95% and a level of error of 5%.

Data collection occurred in February – April 2010, following validation of the data collection

instrument through a pre-test. The data were collected through semi-structured interviews, and recorded for deepening of the questions related to the participants' managerial training, following

approval by the Ethics Committee (Record N. 0054.0.091.000-09). The guiding questions used for the interviews are shown below in conjunction with their respective themes (Table 1):

Table 1- Description of the guiding questions and their respective themes. Foz do Iguaçu, PR, Brazil, 2010.

Guiding Question	Theme
In which situations does the graduate use the knowledges which she acquired in the management courses in her undergraduate course in nursing?	Managerial knowledges required
For the graduate to use these knowledges, which managerial skills are required?	Managerial skills required
Which attitudes related to management are performed in the graduate's professional practice?	Managerial attitudes required

For analysis of the data, the study used the technique of Discourse of the Collective Subject (DCS)<sup>(8)</sup>. This technique consists in the use of the discursive strategy for making a given social representation clearer, as well as the set of representations which forms an imaginary data; it is based on Social Representation Theory and its sociological bases, with the aim of analyzing the verbal material collected which is extracted from the accounts<sup>(9)</sup>.

In the studies undertaken using this technique, the thinking is collected through interviews, such that it may be made clear<sup>(8)</sup>. The meaning of the collective opinions is a complex process which requires various operations at specific times, and which are undertaken using the verbal material which was collected in the study. A total of four operations are undertaken for the construction of the discourses<sup>(8-10)</sup>:

- Key Expressions: firstly, the Key-Expressions (K-E) are extracted from the accounts. These are selected pieces of the interview material which was transcribed, which best describes its contents, that is, its essence. The collective accounts, themselves, are formed by a set of K-Es with similar or complementary meanings.

These discourses are retyped in the first-person singular so as to evidence the collective thinking as a collective subject of discourse<sup>(10)</sup>. The individuals may share similar ideas, but, when there is an individual opinion, they transfer only a part of the content of the shared idea<sup>(10)</sup>.

- Central Ideas: the Central Ideas (CIs) are constructed below, which in the DCS are equivalent to the categories. The CIs are formulas

which summarize and describe the meaning present in the accounts of each one of the responses as well as in the sets of responses of different individuals, in which they present a similar meaning or meanings which complement them<sup>(8-10)</sup>.

- Anchor ideas (AIs): these are like the CIs, but they describe the values and the beliefs which can arise from the verbal material from the individual responses, or which were grouped as generic statements to frame specific situations<sup>(8-10)</sup>. According to the DCS methodology, the AIs must only be used when clear discursive marks of these generic statements are found in the verbal material<sup>(8)</sup>, which did not occur in the results of the present study.

- Discourse of the Collective Subject: this is the results of the gathering of the K-Es found in the accounts which have CIs and/or AIs with similar or complementary meanings. Each DCS is the result of the contribution of a certain number of interviews or accounts from the individuals<sup>(8-10)</sup>.

The DCS is a qualitative sum, with the aggregation of the elements which make it up – the K-E of similar responses; it is the product not of a specific quantity of equals, but similar items which individualize a specific meaning, a collective opinion which is different from another meaning, another collective opinion which will form another discourse. The collective person speaks as if it were an individual, a subject of discourse who transports the representation of various individuals, with a collective qualitative and quantitative opinion emerging<sup>(10)</sup>.

The authors define the DCS as a form which

is neither mathematical nor metalinguistic for representing and producing the thinking of a given collectivity. A collective subject, in the DCS, is an attempt to reconstitute a collective subject who, as a collective person, is, at the same time, speaking as if it were an individual, that is, as a subject of natural discourse, but conveying a representation with a broadened content<sup>(8)</sup>.

## RESULTS

The characterization of the subjects indicated that, of the 22 interviewees, 14 (63.6%) are female and eight (36.4%) male. The majority of the

graduates finished their course in 2008. Regarding their place of residence, 20 graduates (90%) are from the city of Foz do Iguaçu, in the State of Paraná, while one (5%) lives in Medianeira in Paraná, and one (5%) in Belém in the State of Pará.

In the analysis of the accounts, the K-Es, the CIs and the summary discourse were used as methodological figures of language for the construction of the DCS<sup>(9)</sup>, with the exception of the AI, which was not identified in the material from the interviews, and a clear discursive feature of generic statements which configure ideologies, values or beliefs. The themes and the CIs which emerge from the accounts are presented in Table 2.

Table 2 - Themes and central ideas. Foz do Iguaçu, PR, Brazil, 2010.

THEMES	IC
Managerial knowledges required for professional practice.	1: Use of the knowledges in varying situations 2: Use of the knowledges in situations of managing the team
Managerial skills required for professional practice.	3: Managerial skills such as: communication, continuous education, decision-making, and resolution of personal problems, self-knowledge and leadership
Managerial attitudes required in professional practice	4: Based on knowledge and influenced by the institutional role of Nursing 5: Management of time, leadership and human resources

Based on the analysis of CI 1, knowledges emerge of specific themes, such as: auditing, process mapping, the planning of meetings, reports, information systems, administrative theories and norms and routines. This demonstrates the use of managerial knowledges in the assistential actions, teaching and teamwork.

In the sequence of the analysis of this theme, CI 2 evidenced the graduates' perception that, in order to manage the Nursing team, knowledges are mobilized on recruitment, selection, and training and evaluation of performance, the dimensioning of personnel and distribution of activities, timetables, leadership, teamwork and interpersonal relationships.

Regarding the theme of Managerial skills required for professional practice, CI 3 indicated various skills which the nurse needs to have for managerial performance.

The reference regarding skill in personal marketing, related to the visibility of the nurse,

arose. The base for decision-making, according to the graduates, is technical competence; knowing how to do things allows the surveying of problems, the proposal of methodologies and evaluation of the results proposed.

The last theme investigated relates to the Managerial attitudes required in professional practice; in CI 4, the subjects grasped the attitudinal dimension as the most complex, and as a great challenge for the work of the nurse. The graduates' discourse for this CI indicated that in the teaching situations, the subject cannot develop the attitudes and - in the light of this - needs to base their professional practice on knowledges and skills. Another important factor in the subjects' discourse for this CI is the institutional role of Nursing, which exercises an influence on the nurse's activities.

In CI 5, time management appears as a means of fulfilling the tasks and coping with the activities

of planning, organization and management which the nurse undertakes. The graduates report their difficulty in taking responsibility for the direct care, and valorize the focus of a leadership directed at controlling the care provided by the team. In addition to this, CI 5 shows the nurses' attitude in the managing of human resources in Nursing. These have a focus on the development of skills related to managerial tasks, but lack reflection and planning, as the attitudes evidence an immediatist and task-based perspective in their practice.

## DISCUSSION

As evidenced in the results, the nurse mobilizes knowledges of specific management themes in her professional practice, which – due to these not having been addressed as central themes during her training – need to be deepened in specific situations, obliging the graduates to seek them. To bridge this gap, a policy of continuous institutional education could possibly favor the deepening of the issues in accordance with the demands posed by each environment.

In one study undertaken on the nurses' perception in relation to the course in Administration applied to Nursing in professional practice, these professionals recognize this dimension's importance and the need for adding depth in its teaching. They considered that the preparation and safety allow the development of a reflective attitude for facing work situations, and the placement undertaken in the course was perceived as idealized<sup>(11)</sup>.

In the mobilization of knowledges on people management, one study undertaken with nurses in the hospital unit reports that the administrative activities undertaken most were: handover, daily timetable and allocation of duties to staff, and management of tests. As care activities, they mentioned actions linked to the relationship with the multi-professional team and with the implementation of the Systematization of Nursing Care<sup>(12)</sup>. The participants in the above-mentioned study did not perceive a dichotomy between the managerial and care activities, but the care activities were reported as pleasurable, which may evidence the difficulties in the carrying out of managerial actions geared toward the nursing team.

Other knowledges indicated in CI 2 and

which serve as a base for people management are based in legislation referent to the management of human resources, such as labor laws, the Law of Professional Nursing Exercise, norms and routines in Nursing, and the dimensioning of staff, which make up a body of knowledges which supports the nurses' decision-making in relation to people management.

In the issues of care management, the discourse arose on the knowledges related to time management which allows the prioritizing and delegating of activities and the planning of care. This result is corroborated by a study undertaken with nurses in a hospital institution in which the lack of planning results in the inappropriate management of their work time and, as a result, they are not able to undertake all the activities required during their work shift. For the participants in the above-mentioned study, their work can cause repetitive work undertaken without reflection with consequent lack of optimization of the time available<sup>(13)</sup>.

In the sequence of the discussion, it is observed that in CI 3, the nurse uses the skill of communication with the service user and with the team so as to manage conflicts, and guide and influence the condition of the institutional link. In order to strengthen such skills, a differential is sought in the management of people, which can be facilitated through strategies for overcoming the traditional view of administration of human resources, which still perceives the people as resources which are similar to the other resources of the organization<sup>(14)</sup>.

For a new scenario in the management of people, it is necessary for there to be a change in the form of the management of the current organizations, such that these may become more participative, democratic, and accept perspectives of greater diversity. These changes may be well-seen and accepted, as growth, communication, paths for agreements, collaboration and co-responsibility are words which will help to attack problems rather than people<sup>(15)</sup>.

The issue of leadership is also mentioned as a managerial skill. This skill's relevancy was addressed in a study in which the authors perceive that these nurses see leadership as a process of interaction between groups of people with common objectives. For the nurses who participated in that study, the skill can be

developed, improved, and constructed during the training<sup>(16)</sup>.

In the professional practice of Nursing, the skill which emerges in CI 3, directed at the process of decision-making, has been based in the experience of the everyday routine, that is, in the empirical knowledge which can result in correct decisions or in errors. Authors from the area of administration suggest that, for quality decision-making, as well as being more assertive, the managers need a method to be followed<sup>(1)</sup>.

This being the case, the systematization of decision-making is proposed, based on a sequence which begins with the identification of the problem and the bringing together of data, followed by the identification of causes and consequences of the problem, and, based on this, proposes alternative solutions to be implemented. Following that, the results are evaluated and, should it be necessary, this sequence is begun again. When used by nurses, this systematization can trigger more assertive decisions in their professional practice<sup>(17)</sup>.

In the attitudinal field, in relation to CI 4, it may be perceived that the attitudes depend on the individual and interlink with the knowledges and skills, coming after them, based in other knowledges and skills. Regarding this, authors<sup>(18)</sup> indicate that teaching scientific, procedural and conceptual content is easier; the attitudinal concept is more complex and requires the lecturers to have consensus on what the attitudes to be developed are, and to have them as learning objectives on the undergraduate course, with the aim of building appropriate evaluative instruments.

To this end, the field of practice constitutes a unique and fertile time for working on attitudinal contents. The principal content worked upon during the undergraduate course, which contributes to the attitudinal field, is decision-making; this does not mean that other contents do not permeate the attitude. For the content to contribute in this construction of attitude, it is necessary for the methodologies to be active and to afford experiences of real or fictitious situations to strengthen them.

In order to corroborate this result, another study undertaken on the experience of student nurses in the courses of Administration of Nursing evidenced that the reception of the students in the practice field by the services' workers is important for the development of practical classes, which

facilitates the mobilization of knowledges learned in theory, their relationship with practice, and the development of analytical skills in the student<sup>(19)</sup>.

Continuing the analysis of this issue, in CI 5, other managerial attitudes in the nurses' professional practice bring their work under a productivist perspective. Time management is an important competence, but is still seen by the nurse as a component of this productivist logic, appearing only as a means of rationalizing the work, in search of better individual and collective performance<sup>(7)</sup>.

The nurse's professional practice has evidenced that the work tends to be satisfactory in the care and weak in the issues of nursing management, or the inverse. This shows that, even today, this professional still has difficulties in articulating management and care. The nurse who works in management considers this dimension to be a way of supporting the care; in contrast, the nurse who works directly in care is inclined to belittle it, labeling the managerial dimension as a bureaucratic job<sup>(17)</sup>.

It is worth considering that the technical procedure in the care, permeated by the planning of actions, can guarantee the patient the care which he needs. When the nurse plans, she determines the objectives to be achieved in the promotion of the care<sup>(17)</sup>. Even so, the nurses have great potential for articulating the health services, principally the Nursing services<sup>(20)</sup>. This professional has technical competence in the exercising of her profession, but is shown to be politically weak; this limits her professional autonomy and subordinates her to other professionals<sup>(21)</sup>.

In this situation it is important for the institution's Nursing management, as the leader of the Nursing team, to perceive these factors and other obstacles, so as to provide means of mitigating these and afford better working conditions, and, as a consequence, improve the professionals' performance, through efficacious and safe care for the patient and his family<sup>(22)</sup>.

It is worth emphasizing that, for the knowledges, skills and attitudes for management to be learnt during the undergraduate course, it has been evidenced with the student nurses that the various forms of the processes of teaching and learning need re-evaluation. This is mainly in relation to the dissociation of theory from practice, changes in the qualifying institutions and the health



institutions which constitute the fields of practice and in the relevance of considering the perception of the students, professors and professionals of the service involved in the training<sup>(19)</sup>.

As a limitation, it is pointed out that the study focusses on a context in which the students experienced a context of specific training, which limits the generalization of its results. Considering the dimension of the theme, the undertaking of studies which present innovations in the training for management in nursing is suggested.

## FINAL CONSIDERATIONS

The discourses emphasize the use of managerial instruments by the nurse for the managing of human, material, physical and environmental resources, as well as for the managing of the Nursing care, which is placed as a low priority.

The research indicated that the nurse is concerned with acquiring managerial skills, with a view to undertaking tasks, although as yet without reflection and planning. The managerial knowledges are used in various situations, with specific knowledges mobilized as they are required, mainly in relation to decision-making.

The critical situation is concentrated in the ambit of the attitudes and requires reflection so as to trigger urgently-necessary changes, such as those related to the leadership adopted by the nurses. It is hoped that this study may contribute to the profession's development, as it presents the graduates' general view regarding the competences of the nurse in the world of work, principally in the managerial dimension.

The courses attended on the undergraduate course support the development of managerial competences in professional practice and have an impact on the graduates' managerial work. However, another observation made in relation to the discourses is related to the knowledges, to the skills and to the attitudes for management in Nursing. The data indicate that the greatest difficulty is found in the attitudinal field of the managerial competences. This fact demonstrates that the construction of the managerial competences begins in the training, but that its development occurs in the professional practice, contradicting the discourse that they are developed in the training.

## REFERENCES

1. Peres AM, Ciampone MHT. Gerência e competências gerais do enfermeiro. *Texto Contexto Enferm.* [Internet] 2006;15(3) [acesso 09 ago 2012]. Disponível: <http://dx.doi.org/10.1590/S0104-07072006000300015>
2. Manenti A, Ciampone MHT, Vera Lucia Mira VL, Minami LF, Soares JMS. The construction process of managerial profile competencies for nurse coordinators in the hospital field. *Rev Esc Enferm. USP* [Internet]. 2012;46(3)p. 727-33.
3. Zarifian P. *Objetivo competência: por uma nova lógica.* São Paulo: Atlas; 2001.
4. Ministério da Educação (BR). Conselho Nacional de Educação. Câmara de Educação Superior. Resolução CNE/ CES n. 3, de 7 novembro de 2001. Institui as diretrizes curriculares nacionais do curso de graduação em Enfermagem. *Diário Oficial da República Federativa do Brasil.* Brasília (DF); 2001. Seção 1, p. 37.
5. Jorge MSB, Freitas CHA, Nóbrega MFB, Queiroz MVO. Gerenciamento em enfermagem: um olhar crítico sobre o conhecimento produzido em periódicos brasileiros (2000-2004). *Rev. bras. enferm.* Brasília. [Internet] 2007;60(1) [acesso 01 mai 2010]. Disponível: [http://www.scielo.br/scielo.php?script=sci\\_arttext&pid=S0034-71672007000100015](http://www.scielo.br/scielo.php?script=sci_arttext&pid=S0034-71672007000100015)
6. Tronchin DMR, Gonçalves VLM, Leite MMJ, Melleiro MM. Instrument of student assessment based on nursing managerial competences. *Acta paul. enferm.* [Internet] 2008; 21(2) [Acesso 02 jun 2010]. Disponível: <http://dx.doi.org/10.1590/S0034-71672007000100015>
7. Peres AM, Montezeli JH, Kalinowski CE, Cunha ICKO. Competências gerenciais do enfermeiro. In: *Programa de Atualização em Enfermagem (PROENF): Gestão/ Organizadora-geral: Vale EG (org.)* Porto Alegre: Artmed/ Panamericana; 2011.
8. Lefevre F, Lefevre AMC. Depoimentos e discursos: uma proposta de análise em pesquisa social. (Série Pesquisa, 12). Brasília: Liber Livro; 2005.
9. Lefevre F, Lefevre AMC. O discurso do sujeito coletivo: um novo enfoque em pesquisa qualitativa. *Caxias do Sul: Educ; 2003.* (Desdobramentos).
10. Lefevre F, Lefevre AMC. O sujeito coletivo que fala. *Rev. Interface.* [Internet] 2006;10(20) [acesso 03 mar 2010]. Disponível: <http://dx.doi.org/10.1590/S1414-32832006000200017>
11. Gaidzinski RR, Leite MMJ, Takahashi RT. O ensino da administração em enfermagem: percepção diante da vivência profissional. *Rev Esc Enferm USP.* [Internet] 1998;32(1) [acesso 09 abr 2009]. Disponível: <http://dx.doi.org/10.1590/S0080-62341998000100007>

12. Luvisotto MM, Vasconcelos AC, Sciarpa LC, Carvalho R. Atividades assistenciais e administrativas do enfermeiro na clínica médico-cirúrgica. *Rev. Einstein*. [Internet] 2010;8 (2 Pt 1) [acesso 17 ago 2011]. Disponível: [http://apps.einstein.br/revista/arquivos/PDF/1354-Einsteinv8n2\\_AO1354.pdf](http://apps.einstein.br/revista/arquivos/PDF/1354-Einsteinv8n2_AO1354.pdf)
13. Almeida ML, Hexsel SML, Maftum MA, Labronici LM, Peres AM. Instrumentos gerenciais utilizados na tomada de decisão do enfermeiro no contexto hospitalar. *Texto contexto - enferm*. [Internet]. 2011;20(esp.) [acesso 25 mar 2014]. Disponível: <http://dx.doi.org/10.1590/S0104-07072011000500017>
14. Alves VL. Competências essenciais à liderança na Enfermagem quanto ao enfoque de gestão de pessoas. In: Malagutti W, Caetano KC. *Gestão do Serviço de Enfermagem no mundo globalizado*. Rio de Janeiro: Editora Rubio; 2009.
15. Boccato SBG. Como gerenciar um grupo em conflito. In: Malagutti W, Caetano KC. *Gestão do Serviço de Enfermagem no mundo globalizado*. Rio de Janeiro: Editora Rubio; 2009.
16. Souza e Souza LP, Cordeiro ALC, Aguiar RN, Santana JMF, Dias OV, et al. A liderança na visão de enfermeiros líderes. *Enfermería Global*. [Internet] 2013;30 [acesso 09 set 2013]. Disponível: <http://revistas.um.es/eglobal/article/download/eglobal.12.2.154801/147301>
17. Hausmann M, Peduzzi M. Articulação entre as dimensões gerencial e assistencial do processo de trabalho do enfermeiro. *Texto Contexto Enferm*. [Internet] 2009;18(2) [acesso 03 set 2013]. Disponível: <http://www.scielo.br/pdf/tce/v18n2/08.pdf>
18. Nosow V, Puschel VAA. The teaching of attitudinal content in higher education of nursing. *Rev Esc Enferm USP*. [Internet] 2009;43(esp.2) [acesso 25 set 2010]. Disponível: <http://dx.doi.org/10.1590/S0080-62342009000600015>
19. Llapa-Rodríguez EO, Carvalho TS, Gois CFL, Guimarães AMDN. Vivências dos estudantes de pré-graduação com as matérias de administração de enfermagem. *Invest Educ Enferm*. [Internet] 2012;30(1):87-94. [acesso 07 out 2013]. Disponível: <http://aprendeenlinea.udea.edu.co/revistas/index.php/iee/article/view/9485/10520>
20. Berti HW, Braga EM, Godoy I, Spiri WC, Bocchi SCM. . Movement undertaken by newly graduated nurses towards the strengthening of their professional autonomy and towards patient autonomy. *Rev. Latino-Am. Enfermagem*. [Internet] 2008;16(2) [acesso 4 ago 2009]. Disponível: <http://dx.doi.org/10.1590/S0104-11692008000200003>
21. Lopes MMB, Carvalho JN, Backes MTS, Erdmann AL, Meirelles BHS. Políticas e tecnologias de gestão em serviços de saúde e de enfermagem. *Acta Paul. Enferm*. [Internet] 2009;22(6) [acesso 25 mai 2010]. Disponível: <http://dx.doi.org/10.1590/S0103-21002009000600015>
22. Aguiar DF, Conceição-Stipp MA, Leite JL, Mattos VZ, Andrade KBS. Gerenciamento de enfermagem: situações que facilitam ou dificultam o cuidado na unidade coronariana. *Aquichán* [Internet]. 2010;10(2) [acesso 19 jul 2013]. Disponível: <http://www.scielo.org.co/pdf/aqui/v10n2/v10n2a03.pdf>