


## MANAGEMENT AND NURSING IN THE TRANSDISCIPLINARITY OF HUMAN CAPITAL ASSESSMENT

 <https://doi.org/10.56238/sevened2024.037-159>

**Danelia Gómez Torres and Alan Josué Pérez Reyes.**

### ABSTRACT

A model of evaluation of human capital is presented, through a tripartite system; that is, three members carry it out, becoming a broad vision that makes it possible to reduce biases in such management; its objective is to make known why this tripartite system is ideal for the evaluation of the performance of the human factor of nursing. The method developed was focus groups, with the group interview being the technique executed; In it, the participants presented their ideas, which were recorded, and later transcribed; Thus, the exhaustive and critical reading of data together with an interpretative framework of content, proceeded to carry out the analysis of these, an action that allowed to understand the perspective that the twenty-eight participants had. With the support of the chromatic technique, the information was brought together in order to integrate the categories. Regarding the scientific discussion, conceptualization was carried out, then the contrast of empirical data with Campbell's theoretical foundation, arriving at logical reasoning. The predominant result was: technical performance, technical skills, quality indicators, initiative, work effort, workload, respect for bosses and colleagues, absenteeism/work presence, leadership among team members, collaborative work, availability, individual contribution to the work team, care management. In conclusion, performance evaluation is a critical and reflective process that goes beyond all dimensions of the work of nursing professionals, it is evident that giving an important value in the evaluation to respect for bosses, patients and colleagues, directly influences work attitudes, user satisfaction and the progress of the health organization.

**Keywords:** Nursing. Management. Nursing Evaluation. Personal initiative.



## INTRODUCTION

The evaluation of human capital is described, from the perspective of performance evaluation, in which elements that answer the question are considered: Is the tripartite system ideal for evaluating the performance of the human factor of nursing?, Currently, the available evaluation methods leave aside the reaction and experience of those evaluated, however, it should not be limited to a simple superficial and unilateral opinion, without a broad vision that reduces the biases of the evaluation process.

This is due to the high degree of perception of injustice, due to the lack of motivation and dissatisfaction related to the prevailing evaluation system, mainly due to the poor precision of the assessment, qualification, the lack of initial definition of consistent objectives, which measure adequately, and allow feedback; in addition, it must be in accordance with the reality and characteristics of nursing.

Performance evaluation assumes the role of being a strategic instrument for the management of the human factor, for the provision of quality services; through the implementation of formal performance evaluation systems, organizations seek to obtain the potential utility of controlling and improving the performance of their employees, to have a measurement system capable of neutralizing subjectivity, provide measures to improve the performance standard of their subordinates, as well as make them understand that evaluation is an objective system, which allows them to know everything about their performance (Chiavenato, 2019), and thus differentiate between performance and merit. In this sense, the **objective** is to make known if the tripartite system is the ideal one for the evaluation of the performance of the human factor in nursing.

## PATH TRAVELED

The research was carried out under a qualitative approach, since this methodology answers questions about why people "do what they do" and seeks to understand the meaning of the experience or explore a phenomenon from the point of view of the other. The theory that supports the study is the performance evaluation theory developed by Campbell, as a theoretical reference, which is based on basic substantive factors of individual performance in a job role (Campbell, 2015).

The research was carried out in two stages, the first to diagnose the phenomenon to be studied (performance evaluation), the second in order to develop a tripartite performance evaluation instrument.

The focus group method was used; the technique instrumented was the group interview; therefore, groups of nurses were brought together to work with the concepts:



evaluation of the effort/initiative of the nursing staff, professional practice, as well as evaluation of technical performance.

Four planned sessions were held, lasting one to two hours. The first meeting was to inform the management authorities, so that they could designate participants who met the inclusion criteria. The sessions were held with the attendance of six to eight people in each of them. To establish a comfortable environment where the focus groups were developed, a place with adequate structure, ease of access for the participants, which would offer a welcoming, comfortable environment, with privacy, good lighting and adequate temperature was sought. Each session began with a brief presentation of the research project, the objectives and the reason why they had been convened were clearly announced, in addition. They were given, in writing, an informed consent; Later they were assigned a letter and a number to maintain anonymity.

During the development of the focus group methodology, the participants presented their ideas, which were recorded by means of a recording, and then transcribed rigorously; then an exhaustive and critical reading of these data was carried out. With the support of the chromatic technique, the relevant information was brought together, in order to form the categories and subcategories, thus, the object of study was achieved. The analysis of the data was carried out through an interpretative framework of content, to respond to the guiding questions and in turn, to the objectives set, as well as to understand the perspective that the different social actors had on the evaluation of performance. The scientific discussion was developed with conceptualization, then the empirical data was contrasted with Campbell's theoretical foundation, to arrive at a logical reasoning, and finally, the presentation of results.

The findings are the product of the experience of personnel who have participated for more than five years, at least, in evaluations, considering supervisors, heads of service and operational personnel, where these three actors must participate in the work performance evaluation system, integrating parameters such as:

## **TECHNICAL PERFORMANCE**

All models recognize that virtually jobs or job roles have technical performance requirements; these can vary depending on the substantive area and the level of complexity or difficulty within the area. The work roles will be variable according to the measure of efficiency and their levels of effectiveness, to facilitate teamwork, by getting each of the collaborators to perform their roles or performance techniques. According to Belbin's theory (Catalá, 2022), when completing or interpreting work roles, the ability to fulfill central



interpersonal tasks is required, capable of providing the necessary care to patients, clients, or community members, thus assuming the commitment to quality in service due to the growing demand of clients (Herrera, Cantero & Leyva, 2021).

## TECHNICAL SKILLS

The technical skills of nursing professionals are based on the rigor, scientific knowledge, and creativity that are required when performing the practice to provide care in the use of equipment during the execution of interventions (Moreno, Martínez, & Serna, 2022). They describe skills as those that seek to carry out the practice of their values in the areas of action that are carried out, such as patient care (Chaca & Contreras, 2021). To achieve a safe performance of technical skills, both theoretical knowledge and the ability to adopt critical thinking for each specific situation are required, in this sense:

The technique is not according to the profile they have. In this area we see the profile of our personnel, whether or not they have the code with which they are being paid, if they have those skills, then we evaluate them at that level (S-1). Review the procedures in this technical aspect: if you are really using the correct hand washing, if you are using the correct notes for your patient, the venoclysis technique, the bladder catheter technique (J-6).

Derived from the above, it can be reflected that, as pointed out by Rodríguez (2021), working in a team is to add skills and abilities of the different members of the team, which will have the consequence of enhancing the results of performance evaluations such as the efficiency and effectiveness of a company. Regarding nursing teamwork within a hospital, the same purpose or objective is sought: to preserve the well-being of patients, developing a more complex care environment that, interrelated, will allow progress towards the achievement of functional results (Paravic, Lagos, 2021). Today, increasingly technical and complex health care places great demands on nursing professionals to meet the demands of the health organization, therefore, technical skills have considerable value to be included in performance evaluation.

## QUALITY INDICATORS

Quality indicators are a tool for improving the quality of nursing, used to monitor and compare patient outcomes, as well as satisfaction in services. For the foregoing, it is stated that:

One way to evaluate this technical competence is with [quality] indicators (J-5). Considering in this aspect, the indicators that we are carrying, I think it is a good way to evaluate this technical aspect (J-6). I would take in this aspect the indicators, from how the nurse presents herself to the patient, how she addresses him, how she carries out that treatment (J-6).



It is evident that quality indicators are recognized as an indispensable tool as they are a set of principles, procedures, and evaluation scales used to quantify the level of quality of nursing interventions, and thus evaluate the results of nurses in clinical practice (Afaneh, Abu-Moghli, & Mihdawi, 2024).

At the international level, the use of quality indicators to estimate performance has become standard practice in order to improve results and competitiveness; becoming a gateway to the dynamics of improvement cycles and an unavoidable component of quality design or planning, so it is necessary to include in the performance evaluation system.

### INITIATIVE/EFFORT

Initiative and effort are actions that are easy to observe, it is anticipating events in the development of ideas that act in favor of carrying out activities within teamwork, and thus provide a wide quality of service (Adecco, 2020). Among these, we find:

### PERSONAL INITIATIVE

It is a developed set of cognitive and behavioral skills that facilitate self-improvement (Vuyk, Codas, 2022). It has been considered as a behavioral syndrome directed towards self-initiated, proactive, persistent work, capable of modifying the environment and reorganization. In competitive terms, limiting oneself to doing only what is asked does not allow efficient performance, consequently, individuals must display a wider range of behaviors. This manifests itself in:

If I have initiative, I say - it's okay - the patient comes infiltrated, - I know you have more activities, I channel it here (J-1).  
A colleague tells me -boss, I prepare the patient-, then there is availability, we make a team, another example -I help my colleague who is going to come in later- (J-6).  
A colleague says to another – I'm going to talk to dietology to request a diet – so it's something non-specific, that's an initiative that nurses have to solve (J-6).

These expressions reflect that personal initiative is a predisposing factor to participation in the improvement in the organization, compliance, by showing that individuals must be aware of and accept the order to make an effort (Low, Ramos, & Hernández, 2020). Currently, nursing managers require active participants in the work, instead of passive people who only perform what is stipulated in their job description, and/or explicit to improve the dynamics of work performance, for that reason, it is essential to consider personal work initiative as part of the performance evaluation.



## WORK EFFORT

Work effort, also known as job performance, will not be contemplated only with the quality of the service provided by the employee, it also includes their competencies as a service provider and interpersonal skills, these will be directly involved in the behavior and the way in which the work is carried out (Medina, 2022). Work effort is a measurable behavior that is affected by motivation. Therefore, motivating employees to increase their work effort to achieve organizational goals is an important issue for managers. For this reason, it was considered relevant to determine how work effort in nursing is evaluated, since:

There are colleagues who do not limit themselves to their work (S-6).  
Do not limit yourself to saying "ah no, I am hired as a technician and I do not do this" (J-6).  
Functions that do not correspond to their academic degree, functional code, physical possibilities (E-6).

The congruence with Zaragoza, Silva, Pineda, and Salazar (2023) is reflected, who define job performance as the set of actions and behaviors observed in the individual who occupies a job in an organization, in relation to the content of their position, attributions, tasks, and activities to be developed. In addition, if they have the freedom to do so, people can carry out their own job redesign—that is, change the behavioral content of their job roles—to better use their knowledge and skills, increasing the effort they are willing to make; The more intense people's efforts, the better they will perform. This element is a good predictor of work performance, so it is extremely important to take it into account in the evaluation of the performance of the human factor of nursing.

## WORKLOAD

It is a factor that contributes to the appearance of negative outcomes, especially in seriously ill patients, and the daily increase in the number of patients assisted by these professionals is considered a nursing care workload (Olivera, Januário, Toledo, et al., 2020). The nursing workload is related to currently controversial issues that impact health care in the world: safety and quality of patient care, job satisfaction and nurses' health. The high level of workload experiences decreased levels of performance quality. Therefore, it is considered essential:

We have such an organized team, they work so well, without us telling them, if they don't see personnel, one says "I'll keep two patients" and another says "I'll take the vital signs", they organize quickly (S-6).  
Well, if I have already finished my activities and I see that the boss has pending activities, then help her (J-1).



So I would evaluate the effort of the nursing staff according to the workload they have, because sometimes there are few nurses with many patients (J-5).

A moderate workload greatly improves performance, significantly affected by extreme levels of workload, whether it is very low or very high. Very high workload levels are likely to produce feelings of helplessness and burnout, which could cause employees to abandon their efforts. On the other hand, nurse managers must carefully manage the distribution of the workload to ensure efficient staff performance, as it can compromise the quality of care offered to the patient; it is important to establish a minimum demand on the workload to guarantee quality care and assistance (Olivera, Januário, Toledo, et al., 2020). In addition, it is necessary to consider the workload of nurses to ensure optimal performance.

## RESPECT FOR BOSSES

In any area of work, respect for hierarchies is paramount. The boss-subordinate relationship is hierarchical within an organization; otherwise, it directly affects employee morale, productivity, job satisfaction, and ultimately, organizational success (Nouel, 2023). In the same sense, respect can be manifested in a scale of values that one possesses oneself: from the show of affection towards others, the body movements shown when communicating with others, the attitude towards conflict situations, as well as the excitement. This aspect is raised as follows:

Respect for lines of authority, I think it is the maxim of discipline to respect that line of authority, to respect the boss, to respect colleagues, to respect our supervisors (J-6).

There are people who can be very excellent in the operational, but they have a very bad attitude of addressing both the supervisors, their equal rank, sometimes with the user (S-3).

Respect for both the staff, our superiors, the staff in charge, the patients and their families (E-6).

When a person has respect for his manager, the productive potential of the company improves; good employee relationship management is critical to organizational success (Nkeobuna, 2020). Leaders should adopt "respect" as a guiding principle for treating their subordinates fairly. Consequently, employees' respect for managers can be strengthened when leaders are sensitive to the needs of their followers and strive to help them by acting with revelatory sympathy and kindness. The quality of the respectful relationship that the nursing professional has with his or her manager influences the nurse's work attitudes and performance.





## RESPECT FOR COLLEAGUES

When people get sick, they enter a state of fragility, vulnerability and dependence that can negatively affect them, therefore, the nursing professional must preserve their dignity through respect and adequate care, since the former is defined as the honor of nurses in terms of rights, privacy and human dignity on the part of health professionals, patients and other colleagues. For Rudoph, Katz, Ruppel et al., (2021) respect is essentially a moral attitude that, when translated into action, manifests itself as the demonstration of admiration, consideration, esteem and/or kindness, as well as consideration for the other. All definitions of respect imply that one person recognizes the value of another; that is, that it gives dignity to the human being; This refers to:

As a supervisor, he tries not to make a bad comment to the classmate, so that he does not get offended or will take it badly, thinking of telling him "try to address you with respect", the classmates say "he is not very treatable" (S-6).

In this sense, the absence of respect in employment is an important issue that can have a negative impact on both the work environment and the productivity of the organization (Brown, 2020). Likewise, disruptive behaviors in the workplace create unhealthy work environments, the absence of respect such as direct verbal or physical harassment behaviors, open exclusion of the worker, dissemination of rumors and/or withholding of information, could affect work performance, and often result in poor results in the organization in general and in particular health.

## ABSENTEEISM/FACE-TO-FACE WORK

Face-to-face absenteeism refers to the loss of time in activities that are not productive at work while in good health. The reasons may be: having a low workload or minimal supervision by managers (Sesma, Smith, 2020). Likewise, presence and permanence in the work area are directly related to the feeling of lack of competence, effort or knowledge; lack of expectations, work horizons and generalized dissatisfaction. This aspect is interpreted as follows:

It is believed that discipline is to be there in the service, but they do not do the functions, we see them a lot in the services that are 15 minutes with the patient and 4 hours in other activities, they do not really perform the functions that they have to do to the patients (S-1).

Consequently, hospitals, as an important service sector, encounter this behavior that causes loss and waste of personnel, which leads to a lower quality of services provided to users. This phenomenon seems to be costly for organizations, but also in the nursing field,





where it has a negative impact on patient health and safety (Abdelmoteleb, 2020). Nursing work refers to continuous and quality care, so being absent or wasting time in other non-work activities decreases the quality of care, as well as work performance. Herein lies the importance of estimating the permanence in the service within the performance evaluation.

### PEER/TEAM MEMBER LEADERSHIP

The content of this factor parallels the actions that comprise supervisory leadership. The defining characteristic is that these actions are in the context of the interrelationships between peers or team members and the relationships between them can be at any organizational level (Campbell, 2021). In view of this, it is proposed to evaluate the performance in nursing work teams as follows:

In nursing it has always stood out for working as a team, these personnel cannot work individually. That is, in whatever service you say, you have to work as a team, from the boss to the operational nurse, the floor is divided and they work in teams (J-2).

In fact, nursing work is teamwork, -we are in an area and to provide quality care-, I have seen it, when the patient requires something, if the colleague is busy, I have an attitude of service, I provide what she requires (J-1).

These opinions reflect that teamwork skills are essential for successful collaboration between individuals or groups and involve the ability to communicate effectively, cooperate with others, and manage conflicts (Navarro, 2023). It should be noted that nursing supervisors have understood that, in order to advance in human talent management strategies in the hospital institution, it is necessary to integrate the staff into work teams that promote a balance between the capacities and behavior of nurses, in which each of its members assumes the responsibility of performing their role and actively participating with the others. imbued with a sense of solidarity and support that contributes to the achievement of objectives (Gómez, Gómez, 2020). Due to the nature of nursing work, several tasks must be handled at the same time, so teamwork is key to accomplishing them. In addition, a team culture must be created that achieves mutual cooperation, hence the importance of including this category in the evaluation of work performance.

### COLLABORATIVE WORK

Nursing teamwork leads to better patient care, reducing sentinel events, fostering stronger teamwork among nursing staff is essential to promote effective multidisciplinary work (Baek, Han, Cho, 2023).

Collaborative work is considered when. the members are focused on the same goal; that is, they do not work alone and must recognize that one needs the other, as shown:



The activities that have to be done as a team, such as counting service material during the delivery and reception of patients in the shift link (S-4).  
Teamwork is reflected when service is delivered on time (S-5).

There is agreement that teamwork is considered a key factor for patient safety and it is recognized that good teamwork is one of the assumptions of a healthy nursing work environment (Bragadóttir, Kalisch, & Flygenring, 2023). Collaborative work, as an articulated process designed together to achieve the objectives of the organization, will facilitate work and performance, while promoting the integration of agents, knowledge and actions, as observed in several actions:

From the initiative that the staff may have, both for care and for collaboration with their colleagues (J-6).  
When there are, or are not enough, personnel, one says "I am left with two patients" and another says "I take vital signs", they organize quickly (S-6).  
There is something that the head of service evaluates for us, among those is teamwork (E-5).

The foregoing refers to the fact that one of the best examples of teamwork is the daily work of hospitals, since a large number of the activities carried out in a hospital organization are the result of teamwork, where coordination and cooperation allow the achievement of objectives, guaranteeing warm care, safe and efficient (Rodríguez, Secín, & Ramírez, 2021). Therefore, nurse managers must capitalize on core attitudes to develop and maintain effective team performance. In addition, it is necessary to provide organizational support that can improve the possibilities of collaborative work and the decision-making capacity of nurses. This will maximize the efficiency of the professional practice of nursing work.

## AVAILABILITY

Availability for work is defined by the sum of two factors that must come together simultaneously in a person: that they want to work; and that it can do so (Gómez, López, 2021). This condition is decisive for the development and proper functioning of teamwork, as indicated:

If there is an event, we all enter at the same time, even if it does not correspond to me, however, I have the availability, that is what I would evaluate (J-6).  
I evaluated in relation to availability. I have staff who come in at 7 am, a patient is going to have surgery at 8 am, then a colleague tells me "boss, I'll prepare it". So, there is availability, we make a team, I help my partner who is going to come in later (J-6).

This coincides with the argument of Rodríguez, Secín, and Ramírez (2021), who point out that, when teammates are perceived to be constantly available to collaborate,



teams may be able to more effectively use their skills and knowledge, use task-appropriate performance strategies, and be prepared to implement organizational changes. The availability of team members and other aspects of the team structure improve performance, impact other team and organizational outcomes; hence the importance of considering it in the performance evaluation.

### INDIVIDUAL CONTRIBUTION TO THE WORK TEAM

To improve teamwork skills, it is necessary to create a culture that achieves mutual cooperation, as it allows institutional objectives to be achieved more efficiently, and even to achieve objectives that would otherwise be impossible to achieve (Peiró, 2024). Individual contribution to teamwork refers to the degree of positive participation of the nursing professional in the analysis, activities, and problem solving to achieve the objectives and goals of the health organization in a timely manner. Cooperativism has made it possible to unify individual efforts, which leads to identifying opportunities and achieving more satisfactory and productive work, since teams are made up of people with different knowledge, skills and attributes, who contribute particular characteristics to the team's performance, as marked:

How do I evaluate? When the critical patient arrives at the shock room, there is no need to give them the indication to integrate, immediately the team is integrated, and each one knows its role, those who remain remain with the patients (J-5). In the service, a colleague who is a nurse in intensive care, his category is not that of a specialist, it is that of a general nurse; however, if we have problems in inhalation therapy, we ask for support. He with all the availability, performs not with the category, but with the knowledge he has. I think that is also worth a lot, that attitude and that performance have to be evaluated (J-6). So, there are people with many skills, they share it by carrying out a program of in-service teaching, the willingness of the compañeras to say that I consider that we have failures. I give the subject that is required, they share their knowledge, I consider that this is teamwork (J-6).

This shows that, in the teams of a hospital, most of the members value contributing so that everyone is a benefactor and beneficiary, as well as making skills, gifts and talents come together, establishing a more enjoyable work, by getting them to be members of the work team (Rodríguez, Secín and Ramírez, 2021). In work teams, the competencies of their members determine the level of performance.

In this sense, the team will be defined by the synergies that are achieved between the nursing professionals, the defined specialization in the tasks, the trust that is obtained between them and the skills as a team to meet the objectives they have in mind. Consequently, contributing to teamwork related to performance evaluation is essential to recognize the individual contribution of each professional.



## CARE MANAGEMENT

Nursing care management is understood as the professional practice of nurses, supported by their discipline and the science of care, through planning, organization and control actions, as a heuristic process, aimed at mobilizing human elements and resources of the environment aimed at maintaining and favoring the care of the person, who, in interaction with his or her environment, lives health experiences (Tumbaco-Quimis, Tumbaco-Quimiz, 2021), and thus receive timely, safe, and comprehensive care, in order to guarantee their continuity. A scenario in which care management becomes a rigorous task that requires analysis, deduction, discernment and knowledge; that is, the application of *nursing judgment*, based on the being, knowledge and doing of nursing as a profession and discipline (Ceballos, 2015), therefore, care management acquires transcendence within nursing practice, since:

From the moment the patient is admitted, the nurse begins to manage. When a patient has interconsultation, application of medications, then the management for care begins, with their treatment started, with laboratory studies and X-ray rays. From there, I would evaluate nursing management for patient care (J-2). I evaluated from the moment I arrived, prioritizing is what I have to do. Once I have reviewed my patient, then I make the clinical records, that is the management of my operative partner. The priority is patient care, there is the management of operational personnel (J-6).

The above makes clear the congruence that enterprising nurses in care management are an adequate professional model for the contemporary labor scenario (Ferreira, 2016), since these professionals, by showing themselves in accordance with organizational goals and objectives, seek the continuous improvement of practices and processes, the optimization of time and resources, favoring organizational development.

Similarly, Hernando (2015) points out that effectively managing institutional resources, coordinating and wisely articulating the work of the team, in addition to acting as an intermediary in actions that ensure better care for users and their families, are important requirements for the work of nursing professionals in the current market, in addition to enhancing the practice of care management.

The final result, with respect to care management, is the application of the nursing process, the current form of management. In relation to the subject, for nursing, evaluation turns out to be an important strategic factor for organizational performance, since it impacts the quality of user care, so it is essential to assess it in a formal system of job performance evaluation; These implicit aspects must be integrated into the evaluation of professional performance.



## CONCLUSION

Important achievements were generated for nursing management, specifically in the control element of the administrative process, since every health organization needs improved systems of evaluation measures, where the experiences, perspectives, and experiences of the collaborators in the evaluation process are not left aside or ignored. This will make it possible to transform traditional administration into humanistic management that will be able to ensure the quality of nursing care and enhance human talent to achieve the organization's objectives.



## REFERENCES

1. Abdelmoteleb, S. (2020). Work values and employee effort: A needs-supplies fit perspective. *Journal of Work and Organizational Psychology*, 36(1).
2. Adecco, F. (2020). La iniciativa, competencia clave para el trabajo. El Blog de empleo de Fundación Adecco.
3. Afaneh, T., Abu-Mogli, F., & Mihdawi, M. (2024). Identifying nursing-sensitive indicators for hospitals: A modified Delphi approach. Vol. 16(5).
4. Andrés, Á. (2020). Desempeño laboral. Recursos humanos de Bizneo HR: práctico y actual.
5. Baek, H., Han, K., & Cho, H. (2023). El trabajo en equipo de enfermería es esencial para promover la atención centrada en el paciente: Un estudio transversal.
6. Bragadóttir, H., Kalisch, B., Flygenring, B., & Trygðadóttir, G. (2023). The relationship of nursing teamwork and job satisfaction in hospitals. *Sage Journals*, 9(20).
7. Brown, J., & Smith, L. (2020). The impact of workplace disrespect on employee wellbeing and performance. *Journal of Organizational Psychology*, 45(2).
8. Campbell, D. (2021). Informe neuro escritural: Estilos de liderazgo, 53-55. Available at: <https://saltorbital.cl/informe-neuro-escritural/>. Accessed on: January 12, 2025.
9. Campbell, J. P. (2015). The modeling and assessment of work performance. *The Annual Review of Organizational Psychology and Organizational Behavior*, 2.
10. Catalá, M. (2022). Teoría de Belbin: Roles en los equipos de trabajo.
11. Ceballos, P. (2015). La gestión del cuidado: Una función social y legal de la enfermería chilena. *Revista Enfermería Actual en Costa Rica*, 29, 1-12. Available at: <https://www.scielo.sa.cr/pdf/enfermeria/n29/1409-4568-enfermeria-29-00108.pdf>. Accessed on: January 12, 2025. DOI: <http://dx.doi.org/10.15517/revenf.v0i29.19733>.
12. Chaca, A., & Contreras, L. (2021). Habilidades blandas y desempeño laboral de los trabajadores administrativos en el trabajo remoto: Escuela de Posgrado Huancayo (Tese de Mestrado). Universidade Continental.
13. Chiavenato, I. (2019). Administração de recursos humanos: O capital humano das organizações.
14. Ferreira, L. (2018). Avaliação de desempenho – Papel do enfermeiro gestor. *Journal of Aging & Innovation*, 7(3), 40-49. Available at: <http://www.journalofagingandinnovation.org/wp-content/uploads/5JAIV7E3.pdf>. Accessed on: January 12, 2025.
15. Gómez, D., & Gómez, K. S. (2020). Del conocimiento a la práctica: Integración de equipos de trabajo por supervisora de enfermería. *Revista Enfermería Actual de Costa Rica*, 1.



16. Gómez, M., & López, A. (2021). La disponibilidad para el trabajo del estudiantado de máster: Una comparación desde la variable género. *Revista Educar*, 25(3).
17. Hernando, A. (2015). La gestión del cuidado. *Revista Enfermería C y L*, 7(2), 61-68. Available at: <http://www.revistaenfermeriacyl.com/index.php/revistaenfermeriacyl/article/view/162>. Accessed on: January 12, 2025.
18. Herrera, Y., Cantero, H., & Leyva, E. (2021). Gestión del servicio al cliente para lograr ventajas competitivas en empresas comercializadoras. *Revista Ciencias Holguín*, 27(3).
19. Low, T., Ramos, J., & Hernández, A. (2020). The changing role of personal resources in perceived employability of young people in different labor conditions. *Revista Psicología del Trabajo y de las Organizaciones*, 36(2).
20. Medina, E. (2022). Competencias interpersonales, efectos en autoeficacia y competencias para el desempeño en el trabajo: Perspectivas del pregrado. *Acta Universitaria Multidisciplinary Scientific Journal*, 32(3).
21. Moreno, J., Martínez, K., Serna, D., & Gaitán, O. (2022). Competencias y habilidades de la y el profesional de enfermería, para aplicar el proceso enfermero durante el cuidado: Revisión sistemática. *Revista Horizonte de Enfermería*, 33(1).
22. Navarro, X. (2023). Habilidades de trabajo en equipo. Deusto Formación.
23. Nkeobuna, J. (2020). Managing employee relations and its effect on organizational success. *International Journal of Social Sciences Perspectives*, 6(1).
24. Nouel, J. (2023). Jefe-subordinado: La clave para una relación sana y de confianza.
25. Oliveira, P., Januário, C., Toledo, L., Brinati, L., Araujo, T., & Tavares, G. (2020). Carga de trabajo de enfermería requerida por los pacientes durante la hospitalización en una UCI: Estudio de cohorte. *Revista Enfermería Global*, 19(59).
26. Paravic, K., & Lagos, M. (2021). Trabajo en equipo y calidad de atención en salud. *Ciencia y Enfermería*, 25(2).
27. Peiró, R. (2024). Trabajo en equipo: Qué es, importancia y cómo lograrlo con éxito.
28. Rodríguez, F., Secín, R., & Ramírez, J. (2021). El trabajo en equipo como parte de un sistema de salud. *Acta Médica Grupo Ángeles*, 19(4).
29. Rudoph, C., Katz, I., Ruppel, R., & Zacher, H. (2021). A systematic and critical review of research on respect in leadership. *Elsevier*, 32.
30. Sesma, P. (2020). Una revisión sobre el presentismo laboral. *Faculdade de Ciências Jurídicas (Tese de Mestrado)*. UPNA.
31. Tumbaco-Quimis, K. L., Tumbaco-Quimiz, Y. M., Jaime-Pincay, N. M., & Jaime-Villafuerte, M. Y. (2021). Gestión del cuidado de enfermería basada en la evidencia. *Revista CIENCIAMATRIA*, VII, 341-352. DOI: <10.35381/cm.v7i12.432>.





32. Vuyk, M., & Cudas, G. (2022). Escala de iniciativa de crecimiento personal II: Validación de la traducción al español en Paraguay. *Ciencias Psicológicas*, 16(1).
33. Zaragoza, W., Silva, G., Pineda, J., & Salazar, L. (2023). Desempeño laboral: Revisión literaria. *Commercium Plus*, 5(5).