

Educational Added Value in the Performance of Specialist Nursing Professionals From the Perspective of Stakeholders in Lima, Perú

Rocío Suárez Rodríguez
Universidad Peruana Unión

Irene Mercedes Zapata Silva
Universidad Peruana Unión

Mónica Elisa Meneses-La-Riva
Universidad Peruana Unión

María Teresa Cabanillas-Chávez
Universidad Peruana Unión

The objective is to reveal the added educational value for the performance of specialist nursing professionals by areas. Qualitative descriptive exploratory approach and phenomenological-hermeneutic approach. Ten nurse leaders and 10 relatives of patients cared for by specialist nurses participated. The results obtained show that 3 categories and 24 subcategories arose in total from the point of view of the leading nurses and the relatives of the patients attended. Performance attributes of nurse specialists and subcategories of nurse leaders: Precision, competence, respect and teamwork. Family member subcategories: Continuous evaluation of problems and risks, opportunity in interventions and control of devices, health education and emotional support. Substantive elements present in the performance of nursing professional specialists and subcategories of nursing leaders: scientific knowledge, leadership, empathy, responsibility and care planning. Family Member Subcategories: Dedication, Empathy, Responsibility, Inspiring Trust, and Emotional Support. Revealing the educational added value.

Keywords: nursing, educational, specialty, performance, added value, interest group

INTRODUCTION

The influence of major transformations in the world is described by Amed-Salazar et al. (2019) through behaviors that represent challenges in the field of work, life in society, and access to various services and opportunities. Increasingly, there is a growing demand for innovation and engagement in response to global geopolitical, social, economic, and cultural phenomena, the impact of which is felt in the health and well-being of the population. In this context, the willingness of people to demand the delivery of timely, efficient, safe, and cost-effective services is becoming increasingly tangible.

Thus, in Institutions Providing Health Services (IPRESS), the demand for services is shaping up to be more empowering for users, an element with which providers are familiar; it is not just a matter of improving processes, but of imbuing them with a true human sense. The goal is only one: to offer excellent quality services (Gutiérrez-Agudelo et al., 2021). In this sense, it is a great challenge for those who work in the health services to identify the way in which the rights and aspirations of citizens are being fulfilled in terms of accessibility, service coverage, and quality, a questioning that concerns management staff, investors, patients, relatives, and other members of local governments, community leaders, and members of interest groups (Maguregui et al., 2019).

Nursing specialization plays an important role in health care processes as it is aimed at achieving greater efficiency and timeliness as well as improving people's quality of life. The purpose of specialization is to develop and strengthen skills and competencies based on scientific evidence in order to discover and implement new tactics and appropriate technology in nursing services at different levels of care, and to reduce risks and possible complications in patients. In the same way, it aims to strengthen the capacity for research along the lines of management, teaching, and care, and shares the lines of the interdisciplinary team. To this end, members of the organizations representing the profession in Perú have promoted concrete decisions since the enactment of the Peruvian Nurses' Labor Law, which opened up a new path for further training and specialization (CEP, 2012).

It is important to mention that during the academic development, some discrepancies were noted between the demand and supply of specialist nurses with regard to the performance of graduates; not only in the performance profile, but also in the availability of the necessary specialties. Some employers, heads, and supervisors of care services have stated that they had many specialists in intensive care but not in pediatric care, hemodialysis, and cardiovascular conditions. Other health team members and peers identified that the performance of specialists is far from homogeneous across facilities in different specialties (Zegarra et al., 2021).

However, it is comforting to find that while some health professionals point out the presence of gaps in performance, some directors of health care centers in MINSA and EsSalud have shown their satisfaction with these changes. Phrases such as "You can see the difference" indicate confidence that patients will recover sooner and it will be possible to prevent and control complications. They also allude that the performance profile of the specialist nurse comprises efficiency and scientific solvency, ensuring comprehensive and personalized care (Ayala & Pariseau, 2021). Little is known about how other interest groups in the public and private sectors value the performance of the specialist nurse; therefore, the concern experienced throughout the professional trajectory in teaching is also included.

The interest is to investigate the professional performance of specialized nurses and, at the same time, identify the existence or not of discrepancies with respect to their work. This has led to the search for an answer to the question about the perceived added value of specialist nurses by two interest groups in the EsSalud level II and III facilities.

METHODOLOGY

Research Design

This is a qualitative study with an exploratory descriptive approach. A hermeneutic phenomenological approach is also applied as the lived experiences of patients' relatives are also explored (Albarracín, 2012).

Data Collection

The study population consisted of 10 nursing leaders and 10 family members. Sampling was non-probabilistic by convenience and saturation of categories. The inclusion criterion considered for nurse leaders was to hold a managerial and/or supervisory administrative position. Relatives were considered to be related or to be responsible for assisting the patient at the request of the family in specialized areas.

Data Analysis

After entering the field, data were obtained through semi-structured Zoom interviews lasting 40 minutes. With participants' consent, the interviews were recorded as Perú was experiencing an acute outbreak of COVID-19.

Data analysis was carried out as soon as the interviews were concluded. After transcription of the testimonies, a thematic analysis was carried out first followed by an analysis using a phenomenological approach (Flick, 2018; Albarracín, 2012). Subsequently, content analysis was carried out based on the reading of the stories. The aim was to discover in greater depth the semantic structures and in relationships between the emerging sub-categories from the perspective of two social actors: nursing leaders and the patients' relatives. Ethical considerations were taken into account and information on the risks and benefits was provided; the right to confidentiality was protected by assigning a pseudonym to each transcribed testimony; and the confidentiality of places, informants, results, and adherence to the principles of truthfulness were also preserved. The analysis and disclosure of categories strictly adhered to the content of the testimonies while trying to maintain them in the emic language used by participants. The research was approved by the Ethics Committee of the Universidad Peruana Unión.

RESULTS

After reflective reading of the testimonies and the conclusion of data reduction, and according to the hierarchy of objectives, 3 categories and 24 sub-categories in total emerged as objectified below.

TABLE 1
THE PERFORMANCE ATTRIBUTES OF SPECIALIST NURSING PROFESSIONALS

Sub-categories: Leaders' perceptions	Sub-categories: Perception of family members
Accuracy	Ongoing assessment of problems and risks
Adequacy	Timeliness of intervention and monitoring of care devices
Respect	Health education
Teamwork	Emotional support

The first category emerging in the stakeholder testimonies describes attributes as perceived by the nursing leaders and the patients' relatives. Espinosa Aguilar and Concepción (2019) argue that the performance of the specialist nursing professional is based on broad and deep knowledge that together with the development of reflective thinking has enabled the achievement of skills and attitude to offer quality qualified care. These activities are manifested in behavior characterized by precision, suitability, and respect, demonstrating the ability to work in a team. In this sense, the performance of specialist nurses is seen by nursing leaders as the application of knowledge acquired during the specialist studies, making viable the capacity to respond to complex activities that demand responsibility. This is evidenced in the following testimony:

(...) "They acquire knowledge that is transformed into highly competent actions... to provide effective and efficient care ... with a humanizing approach." Jazmín

Belonging to the professional team on the part of the nursing leaders facilitates the identification of the profile of cognitive competencies, skills, and abilities together with manifestations of affection in the interrelationship with the patient:

(...) "Specialist nurses can address issues of care from an integral approach with scientific, critical and argumentative rigor ... with a high ethical, rigorous, dedicated, committed, loving and responsible sense." Girasol

Morín (2009) maintains the validity of these discourses, stating that human reality is complex: the values and competences to care for others are indispensable. Specialist nurses also gain strength and advocate for the achievement of care aimed at the totality of people (Boff, 2012; Watson, 1997).

(...) "The activities of the specialist nurse are much more complex: they provide holistic, individualized care, they are skilled in the execution of specialized procedures, in the integral monitoring of the patient during medical procedures, circulation in surgical interventions, drug management." Flor de Amancaes

From the point of view of the relatives who participate hand-in-hand in different care situations, it can be understood that in this category, they evidenced behaviors related to the permanent assessment of the patient's state of health and the observation of changes and alarm signs, which meant achieving adequate risk control. They mention that they are surprised by the fine control of the devices used in the treatment, the recording of dates and times, and the coordinated work with doctors and other professionals and technicians as evidenced in the following testimony:

(...) "They are attentive; they contribute to decision-making within the health team. My experience was when my patient needed a transfer to a more complex hospital ... and thanks to the management of the specialist nurse, this action could be carried out." Fam1

Relatives perceive not only care but also the ability to solve problems that concern the patient and, therefore, the family as well. Time is relevant and the specialist nurse knows the resources and how to make the best use of them (García et al., 2018).

The convergence of impressions expressed in the experiences of family members projects the variety and simultaneous and continuous development of nursing activities that are integral in the assessment of the patient, and with an emphasis on the timely solution of problems (Amed et al., 2019).

(...) "The activities that the specialist nurses carried out was [sic] the assessment of the patient; they identified the problems that existed and acted quickly and efficiently to prevent complications ... They also constantly monitored the patient, checked the invasive devices, handling of the port catheter, peripheral lines, the integrity of these, change dates. I have seen that they are also very careful in the administration of medicines; they educated, provided counselling and were cordial with me and with my patient." Fam5

Similarly, the relatives of patients cared for by specialist nurses highlighted the commitment of the professionals to offer them emotional support, especially at difficult times. This is expressed as follows:

(...) "I observed that in addition to being quite punctual in the administration of medicines, always attentive to the call of the monitor, to the ventilator alarms, I always felt quite comforted by a good group of nurses who provided me with emotional support; above all, they allowed me to be close to my mother and that for me has been very valuable." Fam 4

TABLE 2
THE SUBSTANTIVE ELEMENTS PRESENT IN SPECIALIST NURSE PERFORMANCE

Sub-categories: Leaders' perceptions	Sub-categories: Perception of family members
Scientific knowledge	Dedication
Leadership	Empathy
Empathy	Responsibility
Accountability	Inspire confidence
Care planning	Emotional support

In the analysis of the second category, the expressed perceptions of stakeholders, nursing leaders, and patients' relatives reinforce the presence of some values, and highlight the role of leadership and the importance of scientific knowledge in planned care. After two decades of developing initiatives in professional training, it is possible to act by revaluing the loving power of care in the hands of the specialist nurse (Hidalgo & Altamira (2020).

They testify to this as follows:

(...) "... the performance of the specialist nurse is the implementation of care plans aimed at complex interventions, the commitment and leadership with which they assume these responsibilities is [sic] noticeable." Rosa amarilla

They perceive leadership in concrete actions that benefit the patient; dedication, understood as a commitment, makes this experience transparent (Boff, 2012):

(...) "The specialist nurse...goes beyond basic care...strives for holistic patient care, understands the implications of a surgical intervention on the patient's life, generates an environment of trust, safety, manages risks; minimizing the costs of care." Lirio

The search for security is significant during the recovery process as it focuses on meeting needs that engage the totality of human life; this is when the values of empathy and responsibility emerge (Mayeroff, 1971; Bermejo, 2018).

(...) "The performance of the specialist nurses is very meticulous, it is the fulfilment of a series of integrated processes, well-defined care protocols ... they start from the delivery of the shift, details of the patient, how they arrived at the service, how they were, what happened during the shift, the tests they performed, etc.; that is, they know what to answer. They even interpret the results of the clinical examination; for me, that is fabulous ... they also draw up guidelines and protocols." Girasol

The performance of the specialist nurse is described in a meaningful and forceful way. Their differentiated behaviors are shown in the meticulousness, permanent monitoring, and immediate coordination to update diagnostic conditions that will serve as a basis for the definitive treatment of the patient in a critical situation. The responsible attitude and empathy generate confidence in their work and person from the perspective of their nursing leader peers. Similarly, relatives of patients cared for by specialist nurses converge in the values indicated, appreciating the dedication shown by the care professionals (Silva-Treviño et al., 2021). They clearly express this as follows:

(...) "I saw that the specialist nurses did a good job, my mother was not the only patient, the ward was full, they were there, monitoring and attending to my mother, without

neglecting her other patients; the care was timely and comprehensive, it was not only the physical part, they talked to her and told her “mommy, calm down,” “don’t be anxious,” “calm down, you are in the hospital and we will take care of you,” and I saw my mother’s eyes calmer.” Fam 1

Having people close by who are knowledgeable about care and what responses to treatment can be expected makes it possible to develop the confidence to open the door to interventions. Some are intended to prevent any added injury or infections while others enable timely diagnosis and effective treatment (Boff, 2012). This is expressed as follows:

(...) “one, as a patient, feels vulnerable; if you know that you will be attended to by specialist nurses, you feel safer. I felt calm and more confident.” Fam 6

Among the constituent elements of the professional performance of the specialist nurse, nothing is evident in a perfect order or present in all people—only the tendency is given. The more complex the patient’s health situation and surrounding environment the greater the demands for preparation in specialized care and for soft skills in the interdisciplinary relationship (Morin, 2009). In Perú and several countries around the world, the paradigm of humane care is taking root in depth, thus making it possible to give greater life to the paradigm of being visible by overcoming adversity and participating in a positive and reliable way in a society of great uncertainty and complexity (Zárate-Grajales et al., 2020).

**TABLE 3
THE ADDED VALUE MANIFESTED IN THE WORK OF SPECIALIST NURSES**

Sub-categories: Leaders’ perceptions	Sub-categories: Perception of family members
Effectiveness	Accompaniment
Efficiency	Knowledge
Humanism	Understanding and help

According to the nursing leaders, this category expresses the issues of greatest relevance. It attributes the achievement of greater efficiency in problem solving to the different situations present in patient care. The leaders possess knowledge and experience in care and administration, and can therefore quickly appreciate the dynamics of certain procedures and their results in the performance of the specialist nurse (Ayala & Pariseau, 2021).

A second component of the added value identified by nurse leaders is efficiency, which emerges in the performance that leads to time reduction, time control, enabling the integration of instrumental care with sensitive care, and always accompanying those who experience human suffering while growing in safety and creative capacity to care (Amed et al., 2019).

A third component of added value recognized by the nursing leaders, consists of humanism as expressed in supportive behavior, personalization of care, positive consideration through which prejudices fall, respect for the socio-cultural condition of patients and relatives, and achieving greater sustainability in the service provided despite the existence of other limitations (Duque et al., 2021). While relatives perceive this as an added value, the affectionate and delicate accompaniment, in this sense, both patients and family members should perceive satisfaction with the care provided by the specialist nurse. This added value is intended to provide comprehensive care with affectionate and delicate accompaniment, capable of overcoming the work overload that the nurse is responsible for. . In addition, to show his empathic attitude and concern to provide quality and highly specialized services aimed at the patient and the family.

García (2018) asserts that added value is going beyond the client’s expectations, tastes and preferences: it is doing what no one else has done. The added value in specialized nursing care is equivalent to labor

productivity, where the attributes that the patient and family perceive are made visible. The added value identified by the nurse leaders who participated in this study is shown in the following testimony:

(...) "We need the specialist nurse so that she can recognize possible complications in a timely manner ... and if we talk about timeliness, this allows us to have positive results without sequelae or death." Gardenia

It is pleasing to perceive the value placed on care and on nurses joining the specialized services. The mention of not leaving them alone but rather making them participants in induction and indirect mentoring processes, expresses the mention of not leaving them alone but making them participants in induction processes and indirect tutoring expresses the way to ensure the teaching-learning process in order to strengthen their skills, abilities and attitudes, which gives it added value in terms of competencies and the delivery of added value in terms of (1) reducing the probability of complications and (2) increasing the quality of the service and, thus, increasing user satisfaction (Vizcaíno et al., 2019).

Concern for safety is a characteristic that is highly valued by professionals and families. For the former, it is a goal and an obligation; for the family, it is a desire and can become an enforceable right:

(...) "I consider that the care they gave to my mother was very good and of high quality. I feel satisfied with their work, the dedication they showed every day. The sadness they saw in the nurses' faces when my mother was declining, made me notice the great interest they had in her. They had not lost the essence of nursing and the humane treatment that a patient should always have." Fam 4

Two of the significant elements often evident in the participants were accompaniment and empathy. The empathy, communication and support offered by the specialist nurse recognize that it is important to develop high skills to provide highly complex care. (Muñiz-Granoble et al., 2019).

DISCUSSION

In light of these results, it is evident that the performance of specialist nursing professionals converges in the recognition of the favorable role developed in the care practice, a space where they demonstrate high competence, high-quality knowledge transfer, an attitude of openness to constant improvement, a proactive attitude in human interaction, and an effective capacity in the solution of complex health problems.

With regard to the first emerging category, among the various attributes of specialized professional performance, the first convergences between the participating social actors are evident: behind the perception of the relatives regarding the care and zeal in monitoring the treatment support devices by the specialist nurse, there is recognition of the competence and scientific preparation plus the attitude of respect acknowledged by the leaders. In the analysis of similarities, the results coincide with the studies of Vizcaíno et al. (2019), who highlight how timeliness, thoroughness, responsibility, and competence generate high patient satisfaction in emergency departments.

In addition to the tangible scientific rigor in the care and precision of their actions, relatives agree on the identification of timely risk control in care interventions, which together are transformed into safety, one of the primordial elements in any quality model. In this way, it is also similar to the results of Amed et al. (2019) when they point out that the professionals carry out quality care in their processes. On the nurses' side, a daily focus of their efforts is to achieve safe care; to this end, working together cooperatively and with excellent communication ensures the successful component in the interdisciplinary team.

The solid training process carried out by the nurse part of a postgraduate degree (*Latum senso*) requires the professional to conduct themselves in their activities in an autonomous and interdisciplinary manner, to perform teamwork, develop evidence-based leadership, use critical thinking, and expand their capacity to make decisions in complex situations. As Aiken (2019) proclaims, there is a strong relationship between the availability of qualified personnel and visible results in the patient and family.

The results described about interacting with respect broaden the framework of values that guides the choice to have prepared and invested in becoming highly qualified human potential, to make the best use of technology (Bermejo, 2018), and to actively listen to the voice of the patient. The favorable perception of specialist nurses who provide emotional support to the patient and family coincides with the results of Galvis-López et al. (2018) who point out how the knowledge of nursing professionals intervenes in the intelligent and sensitive use of advanced technologies: less pain, minimum exposure time, and methods of proven efficacy in the care environment.

From a technical–scientific point of view, similarities can be seen between the impressions of nursing leaders and relatives. The education provided to family members allows them to become allies in the care process: the more they know the better they will be able to participate in actions that promote their safety and sense of shared care responsibility. Likewise, Gutiérrez-Agudelo et al. (2021) indicates that care with high skills is essential to avoid nosocomial infections and reduce the economic impact that this causes.

While health education is a permanent necessity, education in emotional support has alternating moments of varying intensity (Mayeroff, 1971). However, the perception that the specialist nurse performs this action is an indication of the strength of the interpersonal quality in the care process. In this sense, the present study is similar to the results obtained by Hernández-Cruz et al. (2017) who, when analyzing the factors that influence lost care, refer to the lack of intuition on the part of the staff to become aware of this emotional need, which is so frequent in the person in need of care.

Divergences were found between the study conducted and the results obtained by Duque et al. (2021) who state that without empathy, the basic attitude to care for human beings is lacking; i.e., compassion, understanding, and effective help are not possible. Duque and his collaborators found that few nurses show empathy spontaneously and that many nursing professionals only interact for reasons of treatment, to gather information, or to give warnings, and appear to interact out of obligation and in an almost rigid manner. Such behavior does not have a favorable impact on the patient's needs. It should be noted that the presence of care in the patient and the family must have a high sense of responsibility and empathy, which led them to experience peace and trust.

In relation to the second category, inherent to the substantive elements present in the performance of the specialist nursing professional, the testimonies expressed by the nursing leaders and the relatives exhibit great perceived convergences. Similarly, the nursing service leaders and family members recognize the presence of empathy and responsibility among the substantive elements of specialist care. These convergences are similar to the observations of Inga-Berrospi and Arosquipa Rodríguez (2019) who point to the existence of advances in the development of human resources in health and the positive impact this represents for the services.

They also converge with the results of Zárate Grajales et al. (2020) who, with a large team, reveal the voice of countless protagonists of complex and risky care experiences in the context of the COVID-19 pandemic. There are many people who at a certain stage of their lives require specialized care where speed, ongoing monitoring, emotional support, and the confidence that they are in safe hands and that the team is doing its best to find a solution are of high value.

The perceived divergences are in themselves different categories, revealing the development of a more technical perspective in the nursing leader's lived experience and in the achievement of advanced competencies. They identify as substantive elements of the knowledge that underpins the actions and methods of care because the individuality of the patient corresponds to the planning of care (International Council of Nursing, 2021). Similarly, the need for knowledge is supported by the proposal of Escobar-Castellanos and Sanhueza Alvarado (2018) when they describe Carper's patterns of knowledge and its modes of expression in nursing; i.e., the philosophical, ethical, practical, and aesthetic knowledge of care allows the specialist nurse to offer a safe, continuous, and humane service.

To lead is to lead to transcendent change in health, in quality of life, to grow together with others, and to grow in care (Boff, 2012). The direction that leads to quality of care is similar to that described by Febré et al. (2018) in specifying the high degree of participation and commitment required of nursing professionals to manage, implement, and then measure the quality achieved. By highlighting the application of scientific knowledge, leadership, and innovation it is certain to verify coincidences with the results of

Escobar-Castellanos and Cid-Henríquez (2018) who argue that care as the essence of the nursing profession does not lie in the procedural aspect but involves scientific knowledge, responsibility, values, and decision in the action of caring.

The third category, which shows the added value of the performance of the specialist nursing professional, allows us to interpret that the perception of the nursing leaders responds to the experiences lived during the management processes in which they have constructed meanings in the constant and surprising world of relationships with peers in other positions, and also with specialist collaborators; hence, they express their feelings from a phenomenological perspective (Albarracín, 2012).

This perception, circumscribed to three components of management that the professionals can carry out in their daily work—efficacy, efficiency, and humanism—can also be interpreted from the same description. In the present study, there are coincidences with the results of Febré et al. (2018), Chunga et al. (2019), and Zegarra et al. (2021) who describe the elements of the conception and practice of care in first- and second-level health services, highlighting the necessary competencies as well as specifying the situation of nursing in Perú and, with it, the expected achievements of the specialist nurse.

They also contribute to effectiveness and efficiency, the attributes pointed out by Pérez (2020) for whom empathy and compassion are elementary factors for effective and therapeutic communication, emphasizing that they represent the main source of satisfaction for patients and, in the same way, have an impact on improving the productivity of health institutions. The knowledge recognized by relatives in specialist nurses include the rapid prioritization of needs, problems, and interventions, the holistic assessment of the dimensions of human care, and the availability of methods and instruments that make the solution feasible with the best investment of time while avoiding errors and loss of materials. These findings coincide with the results of Gutiérrez-Agudelo et al. (2021) who examine the economic impact of actions to provide quality services.

Similar existing studies are mostly from the business field and from a positivist economic perspective. Participants in those studies do not give details of each attribute, which is why they are reported in emic language or the language of the informants in order to preserve the fidelity to the object of study. The added value of specialist nurse performance is made explicit through the characteristics that define an ideal profile for timely, safe, and humane care in complex situations.

During the accompaniment of a hospitalized person, added value is expressed in terms of solicitous and diligent attention to detail, which will always be very personal, e.g., the protection of privacy; protection from possible injuries or difficult situations in terms of information management; comfort; and preparation for diagnostic tests and/or treatments. The added value comes in packages full of knowledge, tenderness, respect, and the desire to allow the person or community to grow in care and to be able to be co-responsible for their health. The methodology followed departs by its nature from quantifying the attributes of added value. However, it is possible to describe and relate them from the perspective of the leaders of the profession and the family, the therapeutic pillar of care.

CONCLUSION

The added educational value in the performance of specialized nurses, according to the nursing leaders, emerges in behaviors of efficacy, efficiency, and humanism as characterized by high responsibility and empathetic attitude. Patients' relatives, apart from feeling understood and safe, perceive care processes full of affectionate and delicate accompaniment, and in actions of emotional support in difficult moments. They consider that the specialist nurses "Love what they do and those for whom they do it." There is added value that expresses in a modest way all the possible good to be done with the conviction that caring continues to be the preferred and incomparable way of "being and being in the world."

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