



# Working Conditions Of The Nursing Professional, Its Influence On The Quality Of Care In Times Of Covid-19 In A Hospital In Ecuador

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## Abstract:

Nursing professionals constitute the most important workforce in the health system as care managers, since the beginning of the COVID-19 pandemic they have worked in the first line of care demonstrating quality of care, vocation, commitment and courage to exercise their profession despite the risks, discrimination, deterioration of their physical, mental and emotional health to which they have been exposed.

**Objective:** to identify the working conditions of professional nurses, their influence on the quality of care in times of COVID-19.

**Methodology** Type of study: descriptive, correlational-transversal; population 40 nursing professionals and 40 patients from Hospital León Becerra Camacho, II level of care with referral for COVID-19 patients; Two instruments were applied: Survey "Nursing professional working conditions" with a reliability of Cronbach's Alpha 0.878; the survey "Quality of care" with a reliability of 0.867.

**Results:** 82.5% of nursing professionals have regular working conditions, 17.5% have good working conditions; in quality of care 85% of patients receive very good quality of care, 15% good quality of care; For the correlation of the variables, the Chi Square test was used, obtaining a p-value = 0.677, which indicates that the working conditions of nursing professionals are independent of the quality of care. **Conclusion:** There is no relationship between the working conditions nursing professional and the quality of care in times of COVID-19.

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**Keywords:** quality, working conditions, coronavirus, care managers, patients.

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## INTRODUCTION

The World Health Organization refers that nursing professionals constitute the most important workforce in the health system worldwide, in Ecuador in 2020 there is 21,211 nurses, the ratio of nursing graduates is 25 per 10,000 inhabitants, age ranges from <35 years 42%, 35-54 years 49%, > 55 years 9%, females predominate in nursing 84%, males 16%. (WHO, 2020), Nursing professionals are in charge of providing direct care to users and meeting the basic needs of people who need it in the physical, emotional, psychological and spiritual spheres in their different stages of life; the functions of the nursing staff are focused on

achieving health promotion, prevention, recovery and rehabilitation of diseases at the individual, family and community level (De Arco, & Suarez, 2018; Olalla et al., 2020).

The appearance of the pandemic caused by COVID-19 has threatened the lives and health of millions of people, especially vulnerable groups (elderly adults, people with disabilities, pregnant women, children under 5 years of age, people with chronic degenerative), in Ecuador 18,631 people have died from the cause of the virus according to the report issued by the Ministry of Public Health (MSP, 2021). The health crisis has highlighted the work of health

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professionals as key elements to contain COVID-19. The report issued by the International Council of Nurses states that 2,262 nurses have died from COVID-19 in 59 countries, the region of the Americas registers more than 60% of deaths, the report also states that nursing professionals in times of pandemic have presented physical and mental health problems such as depression, stress, anxiety, occupational exhaustion, insomnia, fear of contagion and have even been subjected to discrimination or prejudice, for this reason the CIE makes an urgent call to the authorities to guarantee physical health and mental health in order to build resilience, support health workers and design policies that address the global nursing shortage (**Consejo Internacional de Enfermería, 2021**)

The working conditions of nursing professionals are a topic addressed by the International Labor Organization (ILO) since 1973, it was in 2007 where they created the dictation of recommendation 157 and the elaboration of agreement 149 allowing to establish labor standards decent, raise the professional profile and provide incentives for them to continue performing their roles as managers of care. The ILO defines working conditions as a group of characteristics of a material, physical, economic, social, political and psychological nature, where the activities and work relationships are carried out (**International Labor Organization, 2007**)

The study carried out by **Luengo, & Sanhueza, (2016)** on this subject before the pandemic mentions that the working conditions of the nursing professional are adverse, evidenced by work overload, poor supplies or poor quality of these, unsatisfactory salaries, number of insufficient professionals in relation to the demand of patients, little clarity in the functions, lack of security, recognition, opportunity for promotion, training, knowledge updating, lack of benefits and rewards, these working conditions can have a negative impact in the care provided to users and in the quality of personal and family life of professionals. In relation to the quality of care, the critical aspects manifested are the lack of time to communicate and educate patients, improvise and interrupt care due to lack of supplies and materials, patient dissatisfaction causing poor

quality of care. Regarding the physical and mental health of nursing professionals, this study reports that they have presented depression, stress, anxiety, discouragement, irritability, job dissatisfaction, and body aches. For this reason, the authors conclude that it is a priority to intervene in strategies to improve working conditions in order to strengthen professional development and contribute to increasing the quality of care. In the study by **Fuentes, (2020)**, it is evident that the conditions of the nursing staff during the pandemic in Spain were adverse: due to the fact that they did not have sufficient isolation materials and methods, reporting daily the lack of these resources, even improvising them with masks homemade, protective gowns made with garbage bags putting their health and that of the people around them at risk, little training on care for COVID-19 patients due to incomplete, erroneous protocols or with little scientific evidence to provide timely care.

For nursing, COVID-19 has been both an exposure and a threat, an opportunity to be professionals in the front line of care since they have demonstrated their commitment, vocation, capacity and responsibility in exercising their profession as care managers; The COVID-19 pandemic has highlighted the instability of health systems and the precarious working conditions of health professionals, exposing them to risks of contamination, resulting in illness, intense emotional suffering and even death; For this reason, it is important that the authorities of the institutions that provide health services recognize and actively work in the search for guarantees to improve working conditions. In Ecuador, no previous studies are reported in relation to this topic in times of pandemic, it is decided to carry out this research with the objective of identifying the working conditions of the nursing professional and its influence on the quality of care in times of COVID-19 in Leon Becerra Camacho General Hospital.

## **MATERIALS AND METHODS**

Type of study: descriptive, correlational-cross-sectional.

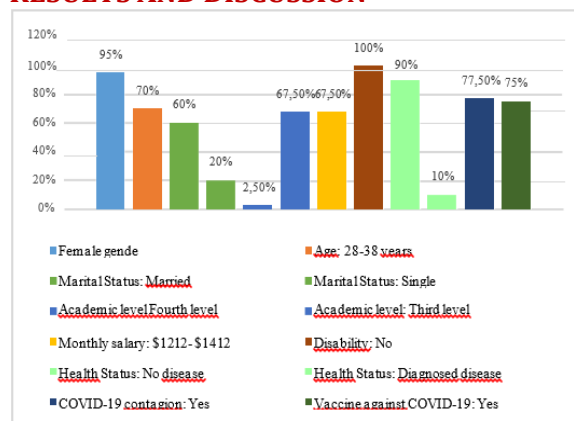
The study population consisted of 40 nursing professionals who represent the total number of nurses at the León Becerra Camacho hospital (Milagro, Ecuador) distributed in the areas:



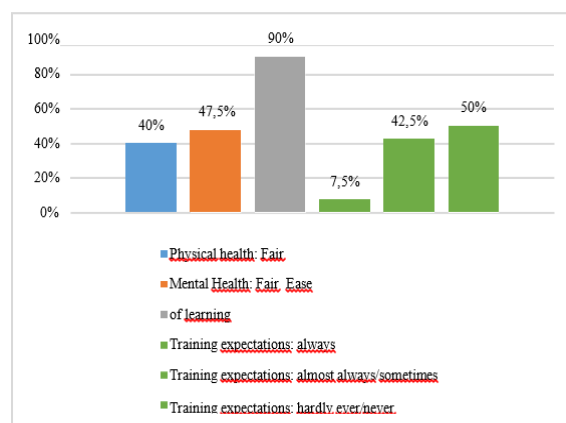
Surgical center, delivery room, emergency, men's hospitalization, women's hospitalization, COVID-19 room. 2, maternity hospitalization, surgical hospitalization, neonatal ward, pediatric hospitalization. To collect the information, a survey was applied to the nursing professionals distributed in the 10 aforementioned services. As an inclusion criterion to participate in the research, it was required that they have a third and fourth level degree, a degree in nursing, be a 10th and 11th grade nurse according to the classification established by the Ministry of Labor, have accepted and signed the informed consent. The survey called "Nursing professional working conditions" was structured with 40 questions focused on 4 criteria: sociodemographic conditions, individual conditions, intra-labor conditions (environmental conditions, mental load, safety, organization) and extra-labor conditions; with a good reliability of Cronbach's Alpha of 0.878.

To measure quality of care, the selection of patients was carried out by simple random sampling, leaving the sample consisting of 40 patients; As an inclusion criterion, it was required that they be hospitalized and that they have received care from the nursing professionals surveyed, be oriented in time, space and person, in the case of the neonatal and pediatric ward, the legal guardians signed the informed consent. The survey called "Quality of care" was structured with 20 questions focused on 3 criteria: sociodemographic conditions, technical-scientific quality and human-interpersonal quality, with a good reliability of Cronbach's Alpha of 0.867. Microsoft Excel and SPSS IBM-23 programs were used for data tabulation. For the correlation of the variables: working conditions of the nursing professional and quality of care, the qualification of the two instruments was carried out using the scales: Very good, good, regular, bad and very bad, the Chi Square association test was used. as a decision rule:  $H_0: p\text{-value} > \alpha (0.05)$ ; we accept the null hypothesis,  $H_1: p\text{-value} \leq \alpha(0.05)$ ; we reject the null hypothesis; 5% error was accepted ( $p < 0.05$ ).

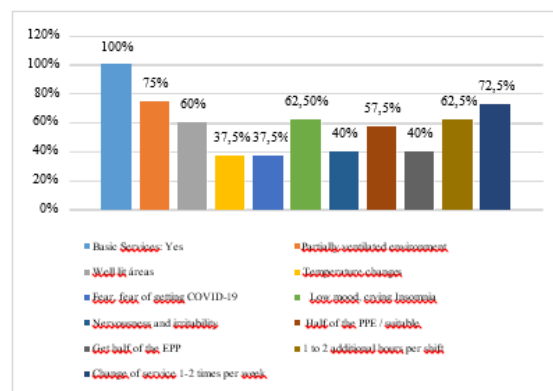
## RESULTS AND DISCUSSION



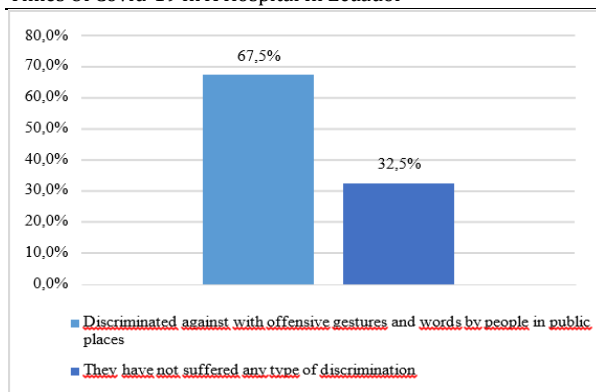
**Figure 1.** Sociodemographic conditions  
**Source:** Survey of Working Conditions of Nursing Professionals.



**Figure 2.** Individual Conditions.  
**Source:** Survey of Working Conditions of Nursing Professionals.



**Figure 3.** Intra-labor conditions.  
**Source:** Survey of Working Conditions of Nursing Professionals.



**Figure 4.** Non-work conditions.

**Source:** Survey of Working Conditions of Nursing Professionals.

**Sociodemographic conditions (Figure 1).** It is evident that the predominant gender was female with 95%; These data are related to a study carried out at the Andrade Marín Hospital in Ecuador, where it was shown that women were the most numerous, 95,8% (Velasco et al., 2016), Historically, the nursing profession belongs to women and is associated with the act of caring in various societies and cultures over time. Nursing as an eminently female profession has been marked by two predominant ideologies: a religious conception of care and a sexist discourse on social role of women (García., 2004), In the same way, the population presented a predominance of the age range of 28-38 years with 70%, these results are related to a study carried out in Asunción where it is evident that the age of the nursing professionals ranges between 30-49 years considering them as mature adults.

Vera, & Samudio, (2013), consider that for the particular case it could be inferred that the nursing professionals are young adults because they have an early labor insertion either in public or private institutions. Regarding their marital status, 60% of professionals are married and 20% single; these data are similar to a study carried out in Argentina where they indicate that the marital status of health personnel is 62.79% married. Berón, & Palma, (2011) report that married nurses bring family conflicts and a sense of absence due to work overload, causing job dissatisfaction. Regarding the academic level acquired by the respondents, only 32.5% have fourth level and 100% have third level, these results are related to a study carried out in the Metropolitan District of Quito where it was determined that 100% of the study population have third level studies, while

17.9% fourth level (Campoverde, & Maya, 2015). For the particular case, it could be inferred that to work in public or private institutions as graduates in nursing, one must have a third-level degree, in Ecuador in 2018 there was no master's degree of a disciplinary nature for nursing professionals (Calderón et al., 2018).

The monthly salary of the respondents ranges between \$1.212-\$1.412, 67,5% of the professionals perform rotating shifts with a working day of 160 hours per month, these results are related to the study carried out at the Carlos Andrade Marín Hospital where it refers that 64,5 % of nursing professionals have a nominal salary in the range of \$1.001 - \$1.499 dollars per month, the rest of the professionals have incomes in the range of \$1.500 - \$1.999 dollars per month, the predominant schedule is rotating 87,6% (Velasco et al., 2016); The salary of nursing professionals is in accordance with the salary scale established by the Ministry of Labor as servers 5 and 6, while the working hours they comply with are in accordance with the provisions of the LOSEP in art. 25. (Asamblea Constituyente, 2010).

Regarding health conditions, it is important to highlight that 100% of professionals do not suffer from any disability, 90% do not present any disease, however, 10% have a diagnosed disease, in a study carried out in São Paulo, Brazil, it was shown that 61 .2% of nursing professionals have an injury or illness with a medical diagnosis, (Bordignon, & Monteiro, 2018) They refer that health problems occur as a consequence of being older and working longer in institutions. Regarding the infection by COVID-19, 77.5% of professionals have been infected and 75% have already received the coronavirus vaccine; these results are related to the study "Occupational health in the face of the COVID-19 pandemic in Ecuador". Peraza, (2020) reports that 1,667 health professionals have been infected, of which 374 are nurses, which has further complicated care for patients who arrive in an emergency at public institutions, it can be inferred that hundreds of doctors, nurses, obstetricians and auxiliary personnel who work in the health system have been infected with COVID-19, this situation is fundamentally due to improvisation by administrations and the lack of personal protective equipment for those who are on the front line of care.

**Individual conditions (Figure 2).** In relation to individual conditions, the data show that 40% of nursing professionals perceive their physical health as regular, that is, they present a state of health in which one of the three spheres of well-being is altered: physical, mental or social; 47.5% perceive their mental health as regular, that is, their emotional state is affected and they find it difficult to adapt to the environment that surrounds them during the pandemic; The results obtained are related to an investigation carried out in Colombia before the pandemic, where it is established that physical and psychological wear and tear is caused by the work overload of nursing professionals in highly complex areas, influencing their physical and mental health, affecting their health directly their quality of life. (Melgarejo & Romero, 2010).

Regarding the facility to learn new things in times of pandemic, 90% of nursing professionals have some facility to learn new things; in a study carried out in a high complexity clinic in Valledupar, Colombia, it was shown that 100% of the nurses consider that they have the facility to learn new things. (Orcasita, & Ovalle, 2019); It can be said that nursing professionals, being young adults, have the ability to learn new things because they have the commitment to take on new challenges in terms of leadership and scientific research. Regarding the expectations of training, 7.5% of the nursing professionals report that the work meets the expectations that were raised in their training, 42.5% almost always and sometimes the work meets these expectations and 50% refer that almost never and never does the job meet the expectations that were raised in their training, the results obtained have dissimilarity with a study carried out in Colombia where it is evident that when faced with the satisfaction of job expectations, 100% of the nursing professionals feel satisfied (Orcasita, & Ovalle, 2019), therefore, universities must guarantee the training of graduates in nursing sciences, humanists, ethical with skills to provide comprehensive care to the individual, family and community.

**Intra-labor conditions (Figure 3).** In relation to the environmental conditions, the data show that 52.5% of the areas have all the basic services (water, electricity, internet, fixed telephone), 45% also have basic services although not regularly, 72.5% of the areas have

a partially ventilated environment through the use of air conditioning, 60% of the areas have lighting, 37.5% of the nursing professionals have experienced slight changes in temperature in the area; the data obtained is related to an investigation carried out in Colombia. 94% of the nurses work in spaces where there is adequate ventilation; 100% expressed that there is good lighting within their work space, 96% that their work environment is not subject to sudden changes in temperature, which makes it a comfortable work space. (Orcasita, & Ovalle, 2019). For the particular case, environmental conditions in hospitals should not constitute a source of risk, discomfort or annoyance for health professionals.

In relation to mental load conditions, the data show that 37.5% of the nursing professionals presented fear, fear of catching COVID-19 or infecting their family, without reaching anguish; 62.5% have presented low mood, crying without affecting daily activities of life; 40% presented insomnia, nervousness and irritability during the 9 months of the pandemic, the results are related to the study called "Risks and damage to the mental health of health personnel due to the care of patients with COVID-19" where it was shown that the 50.4% of the nursing professionals had symptoms of depression, 44.6% anxiety, 34% insomnia and 71.5% presented anguish (Torre et al., 2020); therefore the mental load is one of the most important repercussions that has affected professionals in this pandemic, this may be the product of observing the suffering of patients and having to perform procedures that involve painful experiences.

In security conditions, the data indicates that 57.5% of the areas have half of the personal protection equipment and are moderately adequate; 40% of the professionals have had to obtain half of the personal protective equipment on their own, the results obtained in the research are similar to a study carried out in Spain where it was shown that 94.4% of the nurses consider that the PPE provided is insufficient and inadequate for the care of patients with COVID-19, while 78.6% have had to obtain the PPE outside the workplace (Fuentes, 2020); Therefore, the safety conditions regarding PPE are similar between Spain and Ecuador since no health system was prepared to face the pandemic, which has



produced numerous infections in health personnel worldwide.

Regarding the organizational conditions, the data show that 62.5% of nursing professionals, due to working conditions, dedicate 1 to 2 additional hours of the legally established time per shift, 72.5% report that during the work shift service has been changed 1-2 times a week due to the absence of staff during the pandemic, the results obtained are similar to the study "Working conditions of nursing staff in a high-complexity clinic in Valledupar" it was shown that 70% of those surveyed have an overload of shifts, for some between weeks and others every fortnight (Orcasita, & Ovalle, 2019). From the results, it is observed that nursing professionals have work overload, work overtime without any remuneration, becoming risk factors for the appearance of occupational diseases that can influence the deterioration of the health of health personnel.

**Non-working conditions (Figure 4).** The data reflect that 67.5% of nursing professionals have been discriminated against with offensive gestures and words by people in public places, only 32.5% have not suffered any type of discrimination, these research results are similar to In a study carried out in Bolivia, 77.2% of nursing professionals answered affirmatively that they had suffered some type of aggression in healthcare centers, going to work/on the way to work, verbal aggression was presented, followed by discrimination, physical violence and threats of death, 8.3% of said aggressions required the accompaniment of the police, but only in 42% of the cases was there a respective complaint (Valdés et al., 2020). In this context, in the two investigations, nursing professionals have been victims of discrimination by citizens for caring for COVID-19 patients, for this reason the need is perceived throughout the world to continue reinforcing the dissemination tasks to prevent and eradicate the cases of discrimination, stigmatization and/or violence towards health personnel.

**Hypothesis testing:** Regarding the results obtained through the qualification of the instruments, it is evident that 82.5% of the nursing professionals present regular working conditions, only 17.5% have good working conditions in the four dimensions, the data obtained is similar to the study "Working

conditions of nursing professionals and their relationship with the quality of care at the Carlos Andrade Marín Hospital" where it is evident that 46.8% of nursing professionals have regular working conditions, 28.2% good and 19.4% very good working conditions (Velasco et al., 2016); The two studies show that nursing professionals have precarious working conditions, the same ones that have worsened with the COVID-19 pandemic. Regarding the results obtained from the qualification of the quality of care instrument, it is evident that 85% of the patients receive very good quality of care from the nursing professional, while 15% receive good quality based on technical-scientific quality. and human-interpersonal, the results obtained are similar to a study conducted in Ecuador where 50% of users rate the quality of care received by the nursing staff as very good, 35.5% as excellent, 12% regular and 2% as deficient, the investigated users attribute the cause of the delay in nursing care to excessive work and poor organization (Velasco et al., 2016).

**Chi-Square calculation.** The results of the calculation of the Chi-Square statistical test show a p-value = 0.677 and when determining that the same value is greater than 0.05 (significance level); the null hypothesis is accepted with a confidence level of 95%, that is, the observed frequencies are equal to the expected frequencies (H0: The working conditions of the nursing professional do not influence the quality of care in times of COVID-19) ; therefore, we have sufficient statistical evidence to affirm that working conditions are independent of the quality of care; the results obtained have dissimilarity with the research "Working conditions and their relationship with the quality of care and health of the nursing professional" where it refers that the nursing professional presents adverse working conditions that can influence the quality of care that it provides to the users (Luengo, & Sanhueza, 2016). For the particular case, it could be inferred that nursing professionals, despite the adverse conditions they present in their daily lives in times of pandemic, have provided a good quality of care to patients, demonstrating their knowledge, abilities, skills, commitment and vocation as managers. of care since the start of the pandemic.

## CONCLUSIONS

The sociodemographic conditions are favorable, since they are young adults, they do not have any disease or disability, the salary is in accordance with the salary scale, the working hours are adequate, and they have been vaccinated against COVID-19. The tendency to be an eminently feminine profession prevails; however, a stagnation is reflected in the formation of the fourth level. The individual conditions show that at least one of the spheres of physical and mental health has been altered during the pandemic, the work does not meet the expectations set during its training; as young adults they have some facility to acquire new knowledge.

The hospital environment has all the basic services: water, electricity, internet and landline telephone. The pandemic shows a negative psychological impact on mental health, triggering psychological symptoms: fear, fear, low mood, insomnia, nervousness and irritability while security conditions are limited due to the fact that the areas have half of the PPE, constituting a risk factor for becoming infected with the SARS-CoV-2 virus; even the staff have had to obtain part of the PPE on their own, a reality that has not changed since the start of the pandemic. The organization conditions are quite limited, due to the demand of patients and the need for personnel in the areas, they have been obliged to stay additional hours without extra remuneration, change services due to the absence of personnel, in addition, non-working conditions have been affected, because they have been victims of discrimination by citizens in public places. The working conditions in the sociodemographic, individual, intra- and extra-employment conditions of the majority of the nursing professionals who work at the León Becerra Camacho Hospital are regular; It is important to emphasize that despite this situation, nursing professionals have provided very good quality care to patients during the pandemic, demonstrating their vocation, courage, and commitment in exercising their profession; therefore, working conditions are statistically independent of the quality of care in times of COVID-19.

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