

Job satisfaction of nursing staff: integrative review

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Job satisfaction consists of a feeling of wellbeing, resulting from the interaction of several occupational aspects, and may influence the worker's relationship with the organization, clients and family. Hence, it becomes important for the quality of nursing care to reflect on this topic in depth. Therefore, this study aimed to examine the scientific evidence related to job satisfaction in Brazilian nursing. An integrative literature review was carried out in the databases LILACS, MEDLINE, BDNF and Cochrane Library, totaling 17 publications, categorized in: Job Satisfaction, Job Dissatisfaction and Associated Factors. It was concluded that job satisfaction is determined by a complex network of factors and may vary depending on the group studied. Additional research, particularly of evidence level III in different nursing fields, covering all of Brazil, is necessary to support the implementation of occupational improvements.

Descriptors: Nursing; Evidence-Based Nursing; Job Satisfaction.

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Satisfação no trabalho da equipe de enfermagem: revisão integrativa

A satisfação no trabalho consiste em sentimento de bem-estar, resultante da interação de vários aspectos ocupacionais, podendo influenciar a relação do trabalhador com a organização, clientes e família. Torna-se importante, para a qualidade da assistência de enfermagem, reflexão aprofundada sobre esse tema, e, por isso, objetivou-se neste estudo analisar as evidências científicas referentes à satisfação no trabalho da equipe de enfermagem brasileira. Trata-se de revisão integrativa da literatura nas bases de dados LILACS, MEDLINE, BDNF e Biblioteca Cochrane, totalizando 17 publicações categorizadas em: satisfação no trabalho, insatisfação no trabalho e fatores associados. Conclui-se que a satisfação no trabalho é determinada por rede complexa de fatores, podendo variar conforme o grupo estudado. Pesquisas adicionais, especialmente com níveis de evidências III, em diferentes campos de atuação da enfermagem, abrangendo todo Brasil, são necessárias para subsidiar a implantação de melhorias ocupacionais.

Descritores: Enfermagem; Enfermagem Baseada em Evidências; Satisfação no Emprego.

Satisfacción en el trabajo del equipo de enfermería: revisión integradora

La satisfacción en el trabajo consiste en un sentimiento de bienestar resultante de la interacción de varios aspectos ocupacionales, pudiendo influenciar la relación del trabajador con la organización, clientes y familia. Es importante para la calidad de la asistencia de enfermería realizar una reflexión profunda sobre este tema, por eso se objetivó en este estudio analizar las evidencias científicas referentes a la satisfacción en el trabajo del equipo de enfermería brasileño. Se trató de una revisión integradora de la literatura en las bases de datos LILACS, MEDLINE, BDNF y Biblioteca Cochrane, totalizando 17 publicaciones categorizadas en: Satisfacción en el Trabajo, Insatisfacción en el Trabajo y Factores Asociados. Se concluyó que la satisfacción en el trabajo es determinada por una red compleja de factores, pudiendo variar conforme el grupo estudiado. Investigaciones adicionales, especialmente con niveles de evidencias III, en diferentes campos de actuación de la enfermería, abarcando todo el Brasil, son necesarias para subsidiar la implantación de mejorías ocupacionales.

Descriptorios: Enfermería; Enfermería Basada en la Evidencia; Satisfacción en el Trabajo.

Introduction

Job satisfaction is a complex and subjective phenomenon, whose definition varies according to the adopted theoretical framework. Different authors conceptualize it as a pleasant emotional state, resulting from multiple aspects of work. It can be influenced by individuals' worldviews, aspirations, sadness and joy, thus affecting their attitude towards themselves, family and organization⁽¹⁻⁴⁾.

Job satisfaction most commonly influences productivity, performance, absenteeism, turnover, organizational citizenship, health and wellbeing, satisfaction with life and client satisfaction. Therefore, it has turned into a source of organizational concerns, also in health, which presents, on the one hand, satisfaction with the relief of other people's suffering and, on the other, dissatisfaction with the work overload

and its precarious conditions, leading to physical and mental exhaustion, low self-esteem and loss of interest in clients' comfort, triggering behaviors that range from attentiveness to joy, speed and efficiency to irritability, disinterest, bad mood and indelicacy⁽⁵⁾.

In that context, research on job satisfaction of nursing staff can contribute to identify problems in health services, plan possible solutions and consequent improvements in the work environment and in the quality of care delivery. Thus, this study aimed to analyze available scientific evidence on job satisfaction in Brazilian nursing; to describe the identification data of the publications under analysis, affiliation and type of journal; to assess the methodological characteristics of the analyzed studies, classifying them according to evidence level⁽⁶⁾ and to describe job satisfaction of nursing staff in Brazil, according to the investigated publications.

Methodological procedure

To accomplish this study, the integrative literature review was chosen, based on the work of Ganong⁽⁷⁾, Broome⁽⁸⁾ and Whittemore and Knalf⁽⁹⁾. This specific review method permits the inclusion of different research designs (experimental, quasi-experimental and non-experimental), covers theoretical and empirical literature⁽⁹⁾ and comprises six phases: identification of the problem or inquiry, establishment of article inclusion/exclusion criteria (sample selection), definition of information to be withdrawn from the selected papers, information analysis, result interpretation and presentation of the review.

To guide this integrative review, the following question was formulated: what scientific evidence exists on job satisfaction of nursing staff in Brazil between 2000 and 2009? The article search covered the databases: Latin American and Caribbean Health Sciences Literature (LILACS); Medical Literature Analysis and Retrieval System (MEDLINE), Nursing Database (BDENF) and the Cochrane Library, using the following health science descriptors: satisfação no emprego, enfermeiros, enfermeiras, auxiliares de enfermagem, pessoal de

saúde, equipe de enfermagem, recursos humanos de enfermagem. O levantamento das publicações nas bases de dados ocorreu, concomitantemente, entre os meses de outubro e dezembro de 2009. No portal da Biblioteca Cochrane foram localizadas 45 revisões sistemáticas, porém nenhuma preencheu os critérios de inclusão preestabelecidos.

The following inclusion criteria were established for this integrative review: papers whose full version was available on-line and addressed job satisfaction in the work of Brazilian nurses, nursing technicians and/or auxiliaries; papers published in Portuguese, Spanish and English, between January 2000 and December 2009, regarding job satisfaction of nursing staff in Brazil.

Data analysis and synthesis took place after translation and exhaustive reading of the papers. The extracted data were transcribed to the instrument proposed and validated by Ursi⁽¹⁰⁾, which permitted detailing each study. Papers were organized in Microsoft Excel 2007 worksheets in increasing numerical order, according to the publication year and research title.

Results were presented descriptively in three phases. The first involved the description of the publications' identification data (authors, year), the State and institution the authors were affiliated with and the scientific journal type chosen to disseminate the results. In the second, the studies' methodological characteristics were assessed and classified according to the research design and evidence level, proposed by Stetler et al.⁽⁶⁾. And, in the third phase, job satisfaction of nursing staff in Brazil was described. Therefore, results were grouped in three categories: satisfaction at work, dissatisfaction at work and associated factors.

Results

The sample for this integrative review comprised 17 papers (Table 1), 04 (23.5%) of which were only found in LILACS, 04 (23.5%) only in MEDLINE, 02 (11.8%) in LILACS and MEDLINE, 06 (35.3%) in LILACS and BDENF and 01 (5.9%) in all three databases. All papers found in BDENF were also found in LILACS.

Study No	Database	Title	Authors	Authors' Professional Education	Year
1	LILACS BDENF	Percepção das enfermeiras sobre a unidade de emergência.	Andrade, Caetano, Soares.	Nursing	2000
2	LILACS	O método funcional na prática da enfermagem abordado pela dinâmica de grupo: relato de uma experiência.	Spagnol, Fernandes, Flório, Barreto, Sant'Ana, Carvalho.	Nursing	2001
3	LILACS BDENF	Gestão da equipe de enfermagem de uma UTI: a satisfação profissional em foco.	Matsuda, Évora.	Nursing	2003
4	LILACS BDENF	Satisfação de uma equipe de enfermagem quanto à profissão e do emprego num hospital do sul do estado do Rio Grande do Sul.	Cecagno, Cecagno, Siqueira.	Nursing	2003
5	LILACS BDENF	Satisfação profissional em uma UTI adulto: subsídios para a gestão da equipe de enfermagem.	Matsuda, Évora.	Nursing	2003
6	MED-LINE	Occupational stress and constructive thinking: health and job satisfaction.	Stacciarini, Tróccoli.	Nursing/Psychology	2004
7	MED-LINE	Nursing the dying: essential elements in the care of terminally ill patients.	Araújo, Silva, Francisco.	Nursing	2004
8	LILACS BDENF	Fatores de motivação e insatisfação no trabalho do enfermeiro.	Batista, Vieira, Cardoso, Carvalho.	Nursing	2005
9	MED-LINE	Trabalhar com pacientes alcoolistas: satisfação de enfermeiros de hospital geral.	Vargas, Labate.	Nursing	2005
10	LILACS MED-LINE BDENF	Qualidade de vida no trabalho de profissionais de enfermagem, atuantes em unidades do bloco cirúrgico, sob a ótica da satisfação.	Schmidt, Dantas.	Nursing	2006
11	LILACS MED-LINE	A equipe de enfermagem e Maslow: (in)satisfações no trabalho.	Vitória Regis, Porto.	Nursing	2006
12	LILACS	Satisfação profissional do enfermeiro em uma unidade de emergência de hospital geral.	Carvalho, Lopes.	Nursing	2006
13	MED-LINE	O enfermeiro psiquiátrico numa instituição estatal: estudo exploratório descritivo	Saidel, Toledo, Amaral, Duran.	Nursing	2007
14	LILACS BDENF	Interesse e satisfação profissional de quem atua em equipes do programa saúde da família no noroeste paulista.	Fadel, Carvalho, Arcieri, Saliba, Garbin.	Dentistry	2008
15	LILACS	O trabalho em saúde mental: um estudo de satisfação e impacto.	Reboucas, Abelha, Legay, Lovisi.	Psychology (lead author), Medicine	2008
16	LILACS MED-LINE	Public psychiatric services: job satisfaction evaluation.	Ishara, Bandeira, Zuardi.	Medicine, Psychology, Biological Sciences, and Medicine	2008
17	LILACS	Qualidade de vida no trabalho: avaliação da produção científica na enfermagem brasileira.	Schmidt, Dantas, Marziale.	Nursing	2008

Figure 1 – Distribution of publication on job satisfaction of nursing staff in Brazil, according to databases, titles, authors, authors' professional education and year of publication, Goiânia (2010)

Research development predominantly occurred in the Southeast, with 07 (46.5%) studies in São Paulo state and 01 (6.7%) in Rio de Janeiro, followed by the South, with 03 (20%) studies in Paraná and 01 (6.7%) in Rio Grande do Sul, and the Central-West and Northeast with 01 (6.7%) study each, carried out in the Federal District and Sergipe. Regarding affiliation, 03 studies were carried out at Mental Health Services, 02 at Emergency Units of General Hospitals, 02 at Intensive Care Units of University Hospitals and 02 at General hospitals. Studies were also accomplished at: Surgical Center and Material and Sterilization Central, Hematology Unit, Primary Family Health Unit, Universities and Health Centers.

As for publication, 15 papers (88.2%) were located in Brazilian and 02 (11.8%) in foreign journals. Regarding the type of journal, 14 studies were published in general

nursing, 02 in general health and 01 in medicine (psychiatry). Portuguese language predominated in 14 publications and English in 03.

Concerning the research design, 06 (35.2%) descriptive, 04 (23.5%) correlational, 03 qualitative studies (17.7%), 01 (5.9%) study with a sole pre and post-test group, 01 (5.9%) experience report, 01 (5.9%) literature review, 01 (5.9%) expert opinion. Thirteen (76.4%) publications presented evidence level IV, 02 (11.8%) level VI and 01 (5.9%) level III, indicating that the evidence level of publications inserted in this integrative review is weak. It should be explained that, although the authors themselves defined one of the studies under analysis (study 14) as qualitative-quantitative, the qualitative design stood out, which is why the study was classified in that group.

Literature reviews, except for meta-analyses of multiple controlled studies, are not inserted in the ranking of evidence levels⁽⁶⁾. Therefore, the literature review included in this study was not classified.

As for the instruments used to measure job satisfaction, 07 studies applied instruments the authors themselves developed, including open and closed questions, 03 applied the Index of Job Satisfaction (IJS) questionnaire, 02 applied the Team Satisfaction Assessment Scale in Mental Health Services (SATIS-BR) and 01 applied the Job Satisfaction Measurement Questionnaire (JSMQ). Two studies assessed the nursing team's job satisfaction from different foci: the first through nurses' attitudes towards alcohol and alcoholism, using The Seaman Mannello Nurse's attitudes toward alcohol and alcoholism Scale, and the second through the stress variable, using the Nursing Stress Inventory, Constructive Thinking Inventory, Occupational Stress Indicator.

Regarding the professional category analyzed, 08 (53.3%) studies only involved nurses, 03 (20%) nurses and auxiliaries, 02 (13.3%) mental health service professionals, 01 (6.7%) nurses, nursing technicians and auxiliaries and 01 (6.7%) nursing auxiliaries, dental auxiliaries, dental surgeons, nurses and physicians.

To enhance the understanding of nursing teams' job satisfaction in Brazil, the results of the papers included in this integrative review were joined in three theme categories, which were: job satisfaction (04 papers), job dissatisfaction (05 papers) and associated factors (08 papers). These categories will be discussed individually further ahead.

Job satisfaction

Four out of 17 studies under assessment reported that the nursing team was satisfied at work but, although team members referred satisfaction, they mentioned a range of difficulties. In studies 01 and 14, the following were appointed: lack of integration among team members, work overload, low wages and professional devaluation⁽¹¹⁻¹²⁾.

Also in study 01, other factors were mentioned: lack of and/or insufficient material and equipment, standards and routines beyond service reality, lack of incentive, lack of interaction with other units, little stimulus for work, lack of communication with the population regarding knowledge and actual needs to use emergency care. And, with respect to group work difficulties, the nurses referred to professional commitment, negligence, services' accommodation and disorganization, work

agility and knowledge⁽¹¹⁾. In the same study, however, it was reported that these limitations exerted little influence on satisfaction levels, as these professionals liked what they did and found that enough to feel satisfied. The same result was found in studies 07 and 14⁽¹¹⁻¹²⁾.

In study 14, the following were appointed as satisfaction factors: inclusion in an innovative proposal, contact with different realities, exchange of affection, kindness, feeling of confidence and gratitude by users⁽¹²⁾. In study 07, nurses who attended terminal patients reported their job satisfaction through adequate care, hope, spiritual faith, acceptance of the reality of imminent death⁽¹³⁾. In studies 04 and 14, distinguished job satisfaction levels were found between nurses and nursing auxiliaries and technicians, to the extent that, in the same study, the nurses mentioned dissatisfaction and the auxiliaries satisfaction (study 14)^(12,14).

It should be explained that the four studies shared methodological flaws, which were: they did not specify the sample inclusion and exclusion criteria, nor how it was calculated and selected; the studies superficially described data treatment and used instruments without validation reports. Regarding recommendations to improve job satisfaction, the studies suggested investment in professional training and satisfaction monitoring, with a view to workers' wellbeing⁽¹¹⁻¹⁴⁾.

Job dissatisfaction

Studies 03, 05, 09, 10 and 13 evidenced that, in Brazil, the nursing team was dissatisfied at work. Study 03 investigated the nursing team's job satisfaction through the Index of Job Satisfaction (IJS) questionnaire, in three phases: pre-intervention, intervention and post-intervention. Remuneration was appointed as the item the nurses were most satisfied with, demonstrating that, despite complaints on low wages, this component is not the main cause of dissatisfaction, as opposed to work requisitest and professional status, which received the lowest scores, including among nursing auxiliaries. It is highlighted that satisfaction with organizational standards increased in the post-intervention phase through the elaboration of the Nursing Manual⁽¹⁵⁾. After careful analysis, it was observed that study 05, from the same author as study 03, reports on the latter's pre-intervention phase⁽¹⁶⁾.

Study 10 assessed nursing professionals' quality of life at work (QLW) from a job satisfaction perspective, also using the Index of Job Satisfaction (IJS) questionnaire. As opposed to study 3, the IJS components that were considered the sources of greater satisfaction in study

10 were professional status, autonomy and interaction, while the components with the lowest satisfaction levels were work requisites, organizational standards and remuneration⁽¹⁷⁾.

Study 09 looked at general hospital nurses' attitudes in terms of personal and professional satisfaction in work with alcoholic patients. Subscale II of The Seaman Mannello Nurse's attitudes toward alcohol and alcoholism Scale was used. The mean score found was 17.03, which is considered low, indicating feelings of dissatisfaction and nurses' discomfort in working with alcoholics⁽¹⁸⁾.

Study 13 assessed job satisfaction of psychiatric nurses, and found that 72% were satisfied, but mentioned other employment intentions, evidencing dissatisfaction with institutional policies. The longer the time of work, the greater the job dissatisfaction among these nurses⁽¹⁹⁾.

Regarding the identified methodological flaws, in study 13, lack of clarity was observed with regard to the theoretical-methodological framework adopted for data analysis and, in studies 03, 05, 09 and 10, absence of sample inclusion and exclusion criteria description.

As for recommendations, the studies indicated the establishment, dissemination and compliance with institutional laws and standards, with outstanding flexibility in the management system, and further research on nursing job satisfaction with a view to improving services and professional quality, elaboration of other studies on nursing workers' quality of life, using different assessment foci and the new psychiatric nursing paradigm, based on creative actions and scientifically founded interventions⁽¹⁵⁻¹⁹⁾.

Associated factors

This category includes the papers that assessed the association between job satisfaction and sociodemographic variables or described their influence on practice and research. Thus, in study 11, the interaction between Maslow's Theory of Human Needs and nursing practice characteristics is investigated, as well as its importance for professional development⁽²⁰⁾.

Independently from but in addition to study 11, study 08 used Maslow's Theory in concrete and particular Nursing team situations, supporting a deeper understanding of what moves team members in different hospital contexts. The results demonstrated that nursing does not prioritize needs for survival as, although dissatisfied with remuneration, nurses' food, housing and clothing needs are attended to. On the other hand, inadequate work conditions most affect the

need for safety, consequently affecting the need for self-accomplishment, due to the lack of solution for clients' problems and their own care quality requirements⁽²¹⁾.

In study 06, job satisfaction showed a normal distribution. The analysis of CTI (Constructive Thinking Inventory) dimensions appointed that (physical and psychological) health and job satisfaction differ among nurse managers and other nurses, as the former depend more on emotional and the latter on behavioral coping⁽²²⁾.

In study 12, satisfaction at work was assessed through the Job Satisfaction Measurement Questionnaire (JSMQ), involving nurses from a hospital emergency unit. The mean scores for general satisfaction (4.7), company location (4.3), physical and psychological exhaustion (5.1) indicated satisfaction with those characteristics. On the other hand, function status (3.9), compensatory benefits (3.5), professional development (3.3) and acknowledgement (2.4) indicated professional dissatisfaction⁽²³⁾.

As for the factors associated with job satisfaction, studies 15 and 16 found significant differences in satisfaction scores according to the education level, so that, the higher the education level, the lower the satisfaction level⁽²⁴⁻²⁵⁾. In study 16, no differences in job satisfaction were observed in terms of gender and marital status⁽²⁵⁾. In study 06, however, men showed significantly higher job satisfaction levels, less psychological health problems and significantly lower physical health problem rates⁽²²⁾. As for marital status, study 12 observed that professionals living together (married and with a fixed partner) are less satisfaction with their function status than professionals without a partner⁽²³⁾. Service time in study 16 showed to enhance job satisfaction, as opposed to study 12, in which longer service time corresponded to lower professional satisfaction^(23,25).

In study 02, it was observed that teamwork leads to satisfaction, as it involves experience exchange, participatory planning and shared decisions. This differs from the functional method, which arouses workers' dissatisfaction with impersonal relations, task fragmentation and decision centralization⁽²⁶⁾.

In study 17, the results indicated that the term QWL was closely related with job satisfaction, that the most used instrument was the IJS and that subjects were predominantly nurses⁽²⁷⁾.

The papers presented in this category also demonstrated methodological gaps, which were: did not outline inclusion/exclusion criteria (studies 06, 08, 12, 15, 16) and sample calculations (06, 08, 15, 16). Study

08 did not discuss the psychometric validation of the data collection instrument. In study 02, the terminology used was insufficiently clear, as no concepts were presented for the terms job satisfaction and personal satisfaction at work. Study 11 gave no practical examples to explain the integration of the Theory of Basic Human Needs in daily nursing work.

As for recommendations, the studies suggested establishing systematic service assessment mechanisms, with a view to redirecting care and improving job satisfaction, new administrative approaches for nurses, involving greater flexibility, idea sharing, joint decision making and more humanized worker valuation, adoption of a coping style, conquering acknowledgement based on competency, politization, organization of the category and accomplishment of high-quality work^(21-22,24-26).

Discussion

Job satisfaction refers to workers' subjective assessment of the extent to which job aspects can be harmful or beneficial to their wellbeing. This assessment is dynamic, that is, the state of satisfaction or dissatisfaction can change according to the general work conditions offered.

Multiple factors influence the triggering of job satisfaction. In line with the present research results, it was found that greater job satisfaction of the nursing team involves being able to help people as, when delivering care, workers feel useful and stimulated by what they accomplish⁽⁵⁾. Other factors can also arouse job satisfaction, such as: personal accomplishment, recognition, work itself and responsibility⁽²⁾.

In the studies under analysis, different factors of job dissatisfaction were appointed. It is known that job satisfaction can enhance the feeling of emotional exhaustion⁽²⁸⁾ and, when this happens, workers perceive their activities as tiresome, unpleasant, repetitive and more burdensome, causing frustration and discouragement⁽²⁹⁾. The effects of dissatisfaction also affect organizations, through high rates of turnover, absenteeism and interference in productivity, leading to a loss of good employees and additional expenses due to new selections and recruitment⁽³⁰⁾.

In line with the findings of this integrative review, lack of work systemization, lack of social acknowledgement, little valuation of the profession, wages and work conditions were also appointed as dissatisfaction factors in other studies^(2,5,31-35). This shows that nursing professionals need to be valued and acknowledged for their work.

In addition, other studies appoint institutional policies as a source of dissatisfaction and even revolt, that is: vertical management of nursing coordination, system of benefits, technical and personal supervision, conflicting relations at different hierarchical levels, problems in functions performance and lack of opportunity to act in areas professionals most identify themselves with can trigger job dissatisfaction^(2,28,31,34).

Service time served as a stimulus as well as an inhibitor of job satisfaction. Similarly, other studies have evidenced this negative association between service time and job satisfaction^(19,36).

These characteristics can cause distancing of clients and difficulties in interpersonal relations, with attitudes opposed to changes and non-performance of work, due to lack of understanding of its meaning^(5,28). It is highlighted that, despite all of these negative results regarding work aspects, job commitment still exists among health professionals, including nursing, even among the most dissatisfied ones⁽³⁷⁾.

In this integrative review, 13 papers were found with evidence level IV, 02 with evidence level VI, 01 with evidence level III and 01 literature review. Only studies presenting evidence levels I and II (meta-analysis and randomized controlled clinical trial) offer recommendations for conducts that should always be used⁽⁶⁾. Job satisfaction, however, is a qualitative variable that involves phenomena that are hard to control, as these are individual characteristics, such as feelings and personality.

Thus, further evidence level-III studies are suggested, developed in different nursing activity areas, as the only study found in this review reported on a sector with peculiar characteristics (ICU). It should also be highlighted that, due to Brazil's cultural and socioeconomic heterogeneity, studies in all Brazilian regions are needed to obtain the national perception on the theme. In addition, using uniform methods is fundamental to facilitate the analysis and comparison of results.

Final considerations

In total, 17 studies were analyzed, 13 of which presented evidence level IV, 02 level VI and 01 level III, predominantly accomplished at Mental Health Services, Emergency Units, Intensive Care Units and General Hospitals. Regarding publication, 15 papers were located in Brazilian and 02 in foreign journals, evidencing the need for research with stronger evidence levels, uniform methods and broader dissemination means.

In this integrative review, the following job satisfaction factors were described: liking what you do, insertion in an innovative proposal, acknowledgement for work performed, quality of care delivery, spiritual support and relationship at work. On the opposite, the following job dissatisfaction factors were mentioned: lack of integration among team members, work overload, low wages, professional devaluation, lack of and/or insufficient material and equipment, standards and routines beyond service reality, lack of incentives, lack of interaction with other units, little stimulus for work, lack of communication with the population regarding knowledge and true needs to use the emergency care service, lack of professional commitment among colleagues, service disorganization.

As for associated factors, job satisfaction differences were mentioned in terms of gender, marital status, education and service time, although inconclusively, as instruments, samples and data treatment were very diversified among the studies.

In view of the studies analyzed in this integrative review and in addition to previous recommendations, the following are suggested: people-oriented management; nursing team valuation through dialogue, acknowledgement, respect, incentive, stimulus; continuous education programs focusing on personal and professional development; effective internal communication system; career, function and wage plans; inclusion of nursing workers in the decision-making process; enhancing improvements in work conditions, forums on job satisfaction (congresses, meetings), elaboration of studies with strong evidence levels to support proposals for changes and nursing actions, facilitating mechanisms that permit workers' involvement in professional training courses.

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