



ISSN: 2230-9926

Available online at <http://www.journalijdr.com>

IJDR

International Journal of Development Research

Vol. 12, Issue, 11, pp. 60379-60383, November, 2022

<https://doi.org/10.37118/ijdr.25696.11.2022>



RESEARCH ARTICLE

OPEN ACCESS

COREN-RJ'S ETHICAL-DISCIPLINARY COMPLAINTS DURING THE COVID-19 PANDEMIC

*Rafael Rodrigues Polakiewicz, Cláudia Mara de Melo Tavares, Rejane Eleutério Ferreira and Luciano Barbosa da Silva

Fluminense Federal University, Niterói, Rio de Janeiro, Brazil

ARTICLE INFO

Article History:

Received 17th August, 2022

Received in revised form

20th September, 2022

Accepted 29th October, 2022

Published online 30th November, 2022

Key Words:

Codes of Ethics; Ethics Committees; Ethics; Ethics, Nursing; Nursing Process.

*Corresponding author:

Rafael Rodrigues Polakiewicz

ABSTRACT

The aim was to analyze the factual elements present in the ethical-disciplinary complaints in Coren-RJ, from January 2019 to December 2021. Quantitative-qualitative study of exploratory-descriptive and documentary design that explores the complaints of ethical-disciplinary violations of the nursing professionals received by the Regional Nursing Council of Rio de Janeiro, from January 2019 to December 2021. The 461 ethical-disciplinary complaints were analyzed, which reveal that nurses and nursing technicians were the professionals most reported for ethical violations and are those that most promote complaints, together, corresponding to 48.3%, being close to half of all complaints made in the period. And they are reported in 93% of cases. It is necessary for the movement of disciplinary issues to reach the Regional Nursing Councils, and can be an instrument for the creation of educational, preventive, inspection and observation measures for the most common infractions for specific interventions.

Copyright © 2022, Rafael Rodrigues Polakiewicz et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Rafael Rodrigues Polakiewicz, Cláudia Mara de Melo Tavares, Rejane Eleutério Ferreira and Luciano Barbosa da Silva. "Coren-rj's ethical-disciplinary complaints during the covid-19 pandemic". *International Journal of Development Research*, 12, (11), 60379-60383.

INTRODUCTION

In different areas of professional activity, we have the application of ethics as a guideline for professional conduct. But we cannot talk about ethics only from a professional point of view, even though it is so essential for work practices (Figueiredo, 2008). Ethics can be built on the historical-social experience of morality, relating to the behaviors accepted within a social group (Stone, 2005; Cotrim, 1998). The ethical codes will propose limits and possibilities of conduct, respecting the individual and the collectivity and actions recognized as beneficial, without alienation, without the denial of the other, which would be to disregard it, just like the denial of ethics (Lima, 2022; Cremonse, 2019). The Federal Nursing Council (Cofen) and the Regional Nursing Councils (Corens) were constituted by the Law No. 5.905/1973, with the mission of disciplining, regulating and inspecting the nursing practice (Brasil, 1973). For this proposition, it was necessary to build the Regulation of Professional Practice, initially built in Law No. 7.498, of June 25, 1986, and later reinforced by several legislations that allowed the construction of care praxis (Brasil, 2022). Today, Resolution No. 564/2017 deals with the Code of Ethics for Nursing Professionals – CEPE (Conselho Regional de Enfermagem, 2017).

The CEPE brings rights, duties, prohibitions and penalties, historically constructed, in order to protect the human person. Being an ethical and disciplinary infraction the omission or collusion, which implies disobedience and/or non-compliance with its provisions (Fernandes, 2022). Ethical infraction is conduct that does not preserve the provisions present in the code of ethics, with regard to duties and obligations, and must be observed by nursing professionals: nurse, nursing technician, nursing assistant and midwife practice (Dantas, 2020). The practice of nursing has been a reason for a request for investigation in the nursing councils, regarding the exercise of conduct. Most ethical-disciplinary problems are the result of a guilty act that causes risk or damage to the user's health, being considered iatrogenic or error¹¹. There should be concern about the theme at a time when nursing is reinforced as essential for humanity. The pandemic caused by the SARS-CoV-2 virus has brought a collapse in health care around the world (Organização Pan-Americana de Saúde, 2021). The aspects of transmissibility and complication, mainly respiratory, of the disease, led thousands of people to illness and death (Ceukelaire, 2022). Abruptly, the service was congested by the large number of visits, causing a collapse in the health system (Alharbi, 202). Nursing professionals supported the assistance to COVID-19 victims, but

faced with overwork, lack of resources to provide care, fear of illness and separation from the family, they developed various illnesses, in addition to being more vulnerable to error (Silva, 2021). Nursing professionals formed the front line of care, being subject to different vulnerabilities, but the demands for effective care made errors, objects of complaint and investigation by Organs responsible bodies (Matta, 2021). The State of Rio de Janeiro was one of the places most affected by the pandemic, responsible for tragic indicators of morbidity and mortality related to complications from SARS-CoV-2 infection. The scenario was often chaotic. The State Public Ministry analyzed, in 2021, 550,000 attendances and evidenced: lack of beds, lack of equipment such as respirators, problems with vacancy regulation, structure, indispensable medicines and low technical capacity of professionals (Schneider, 2012). Assuming that the pandemic brought adversity to the work of nursing professionals and a chaotic health scenario in Brazil, making mistakes or iatrogenic events more common¹⁷. And, that even before the pandemic, there was a growing note on ethical problems in the professional conduct of the classes that provide the nursing service (Organização, 2021; Ceukelaire, 2022). It was established as a research question: What are the factual elements contained in the ethical-disciplinary complaints made at Coren-RJ, from January 2019 to December 2021?. The objective was to analyze the factual elements present in the ethical-disciplinary complaints in Coren-RJ, from January 2019 to December 2021.

METHODOLOGY

The study project was submitted for evaluation by the Research Ethics Committee of the Faculty of Medicine of the Universidade Federal Fluminense (CEP/FMUFF), being approved under (CAAEE): 47183621.0.0000.5243. This is a quantitative-qualitative study with an exploratory-descriptive and documentary design, which is based on the Doctoral thesis of the Health Care Sciences Program at Universidade Federal Fluminense. It explores data from the Regional Nursing Council of Rio de Janeiro – COREN/RJ, the autarchy responsible for receiving reports of ethical-disciplinary infractions from nursing professionals. The ethical complaints studied respected the time frame from January 2019 to December 2021, considering complaints received in progress, completed and/or filed. Ethical-disciplinary complaints were analyzed individually and stored in Microsoft Excel® software, using a data collection script built under the guidance of the COREN-RJ ethics committee, responsible for receiving complaints and progress of processes and data stratification. After collecting the data, the whistleblowers, the denounced, the status of the complaint or the outcome of the complaint were identified and the themes of the complaints were identified. The large volume of complaints with the most varied intentions was grouped into thematic categories created to facilitate qualitative content analysis, with the contribution of theoretical constructions and scientific assumptions.

RESULTS

461 ethical-disciplinary complaints were analyzed between January 2019 and December 2021. It is worth considering that the condition of the data collection period was a time of difficult access to institutions, causing possible interference in the production of complaints, especially in 2020, beginning of the pandemic. The Regional Nursing Council of Rio de Janeiro promoted easy access to information and spaces for complaints, including using the digital medium. But for several moments of the pandemic, public access was restricted, as well as the monitoring of family members to their loved ones, which can directly infer the number of complaints. We can see in Table 1 the sample of complaints directed to nursing professionals per year. In 2019, 158 complaints, representing 34.3% of all complaints, were made to nursing professionals. In this period, there was no pandemic caused by the SARS-CoV-2 virus. The number of complaints was higher than in 2020, which had 132 complaints representing 28.6% of all complaints studied in this study. In March 2020, the pandemic began, which caused thousands of deaths in

Brazil, leaving thousands more without their families, others without quality health care, in a collapse of Brazil's health system, especially in large centers, such as took place in the state of Rio de Janeiro. In 2021, there was an increase in the number of complaints, totaling 171 complaints in the year, the largest sample since the beginning of the study, representing 37.1% of all complaints. The total number of complaints and their specific individualized sample can be seen in Table 2, which presents nurses, nursing technicians, nursing assistants and nursing staff and the Nursing Council as the target of the complaints.

Table 1. Year of occurrence of the ethical-disciplinary complaints of Coren-RJ (N=461), Rio de Janeiro, Rio de Janeiro, Brazil, 2019-2021

| Year of occurrence of the complaint | Total | Sample |
|-------------------------------------|------------|---------------|
| 2019 - January to December | 158 | 34,3% |
| 2020 - January to December | 132 | 28,6% |
| 2021 - January to December | 171 | 37,1% |
| Total | 461 | 100,0% |

Table 2. Reported for ethical-disciplinary misconduct at Coren-RJ (N=461), Rio de Janeiro, Rio de Janeiro, Brazil, 2019-2021

| Reported Count (Registration) | Total | Sample |
|-------------------------------|------------|---------------|
| Coren/RJ | 1 | 0,2% |
| Nursing team | 16 | 3,4% |
| Nursing assistant | 16 | 3,4% |
| Nursing technician | 157 | 34% |
| Nurse | 271 | 59% |
| Total | 461 | 100,0% |

Complaints to nurses total 59%; followed by complaints to nursing technicians 34%; complaints directed to nursing assistants added up to 3.4%; a nursing team composed of nurses, technicians and assistants, account for 3.4% of the occurrences; and, finally, a complaint to the server representing Coren-RJ with 0.2%. Undoubtedly, there is little diversity by nature of the denounced, since the qualified staff is formed by those professionals enrolled in the Nursing Council. Whistleblowers, who are those who understand professional misconduct or unethical behavior, can be found in Table 3.

Nurses were the professionals who most reported ethical-disciplinary infractions, totaling 25.1% of all complaints. Next, nursing technicians made 23.2% of the complaints; followed by complaints against the act of professionals who promote the inspection of Coren-RJ, 18.9%, it is worth noting that only one complaint was observed that directs a proposition to the institution and not to the professional representing the institution; anonymous denouncements were 12.5% of the occurrences; family members 7.4%; patients 5.4%; nursing assistant 1.5%; legal entity 1.4%; lawyer, management and students were 0.7% in each of these groups; physician 0.5%, and with 0.2%, 10 different individuals complete the composition of whistleblowers involved in the care process. The data reveal that nurses and nursing technicians were the professionals most denounced for ethical infractions and are the ones who most promote complaints, together corresponding to 48.3%, a state close to half of all complaints made in the period. And they are reported in 93% of cases. It is also worth mentioning the presence of complaints to the agents that promote the conduct inspection act of Coren-RJ, held accountable as to the form of the inspection action, in character of misconduct of the act. Patients and their families together promote 12.8% of complaints. Another 12.5% are anonymous people who, in the assessment of the reason for the complaint and cause, manifest a direct connection with patients,

undergoing treatment or being part of the team of professionals belonging to nursing, in a degree of subordination with the accused. The status of each complaint in the evaluation of the Regional Nursing Council can be followed in Table 4.

Table 3. Whistleblowers of ethical-disciplinary infractions of Coren-RJ (N=461), Rio de Janeiro, Rio de Janeiro, Brazil, 2019-2021

| Whistleblower Count (Category/Interest) | Total | Sample |
|---|------------|---------------|
| Manager | 1 | 0,2% |
| Educational institution | 1 | 0,2% |
| Stretcher bearer | 1 | 0,2% |
| Administrative assistant | 1 | 0,2% |
| Driver | 1 | 0,2% |
| Dial report | 1 | 0,2% |
| Service coordinator | 1 | 0,2% |
| Shepherd | 1 | 0,2% |
| Ex-Officer Coren/RJ | 1 | 0,2% |
| Cop | 1 | 0,2% |
| Physician | 2 | 0,5% |
| Student | 3 | 0,7% |
| Direction | 3 | 0,7% |
| Attorney | 3 | 0,7% |
| Legal person | 6 | 1,4% |
| Nursing assistant | 7 | 1,5% |
| Patient | 25 | 5,4% |
| Familiar | 34 | 7,4% |
| Anonymous | 58 | 12,5% |
| Coren/RJ | 87 | 18,9% |
| Nursing technician | 107 | 23,2% |
| Nurse | 116 | 25,1% |
| Total | 461 | 100,0% |

Table 4. Status of ethical-disciplinary complaints at Coren-RJ (N=461), Rio de Janeiro, Rio de Janeiro, Brazil, 2019-2021

| Status of complaints | Total | Sample |
|----------------------|------------|---------------|
| Canceled | 1 | 0,2% |
| Appeal to Cofen | 3 | 0,6% |
| Not appreciated | 98 | 21,5% |
| No recourse | 359 | 77,8% |
| Total | 461 | 100,0% |

Complaints that were judged to be discarded for lack of reasoning, or judged not to be appealed, are responsible for 77.8% of all complaints. Until the final date of study collection, April 2022, 21.5% of the complaints were not analyzed. Only 0.6% were complaints that produced appeals to a higher court, Cofen. Only 0.2% of the studies were canceled at the request of the whistleblower throughout the process. It should be noted that many complaints were not considered given the large volume of cases in the period and adverse situations related to the pandemic that made the administrative process difficult. In addition, these complaints are ongoing and may, at any time, change your situation. Complaints were discarded for not being of ethical appreciation and others had no grounds for representation. One of the most relevant presentations of this study is the themes of complaints. The themes of the complaints that we can understand as the complaint were diverse and complex. To facilitate the compression and discussion, they were divided into five categories for analysis of their contents.

The categories constituted were: Professional relations; Crimes and Misconduct; Iatrogenics; Mistreatment, aggression and violence; and related to vaccination in the fight against COVID-19. This last category was separated since the research period was from January 2019 to December 2021, considering the beginning of the pandemic in March 2020. We know that the State of Rio de Janeiro suffered from the pandemic and that social isolation, imposed at the time, provoked measures such as lockdown, and these facts may interfere with the number of complaints in the period. The categories and the total occurrence and sample percentage can be verified in Table 5, below:

Table 5. Categories of ethical-disciplinary complaints from Coren-RJ (N=461), Rio de Janeiro, Rio de Janeiro, Brazil, 2019-2021

| Complaint categories | Total | Sample |
|---------------------------------------|------------|-------------|
| COVID-19 vaccine | 11 | 2% |
| Mistreatment, aggression and violence | 40 | 9% |
| Iatrogenesis | 62 | 13% |
| Crimes and Misconduct | 166 | 36% |
| Professional relations | 182 | 39% |
| Total | 461 | 100% |

Professional relations: This was the category that presented the most frequent sample. It was constituted because it deals with complaints that make up complaints related to: moral harassment, Horizontal moral harassment, Descent vertical moral harassment, slander, defamation, insult, embarrassment, humiliation, threats, coercion, harassment, insubordination and lack of hierarchical respect and desidiousness, disrespect, stalking, unjustified dismissal, slander and defamation on social media, abuse of power, improper removal and exposure to public humiliation. All relationships involved harassment or situations that totally distance professionals from the objective proposed by the Code of Ethics in Nursing, which moves towards respect for the human person in all its dimensions. The main inference is the accusation of unethical conduct between higher and technical professionals.

Crimes and professional misconduct: This category has the second largest sample with 166 occurrences, 36% of the total number of complaints. In the grounds of this category, there are complaints, such as: lack of professional secrecy, abandonment of duty, professional misconduct, administrative impropriety, removal of a corpse without a death certificate, illegal exercise of the profession, professional irregularity, failure to comply with the notification of Coren-RJ, theft, theft, loss of materials or medicines, racism and other forms of prejudice, documental and ideological falsehood, breach of patient confidentiality, intellectual appropriation, fake news on social networks, failure to provide assistance, bodily injury, bodily injury followed by death. Violence and illicit appropriation in the form of robbery, theft and loss appear more frequently.

Iatrogenesis: This category has nursing actions that generated recklessness, negligence and malpractice, in addition to medication errors. It represented 13% of the total, drawing attention to cases of negligence during the period studied. Such iatrogenies were common in the years 2020 and 2021 and were related to vulnerable care, such as: newborns, children, the elderly and those affected by the SARS-CoV-2 virus. Medication errors were observed in relation to the same care proposition, mainly in relation to March 2020, intensifying from December 2020 to April 2021. Medication errors were more caused by nursing technicians. As for the whistleblowers in this category, family members and anonymous people were the ones who most frequently proposed them. The act of imprudence was denounced by professionals of higher hierarchical level, family members, legal entities and by inspection act. Malpractices were reported by nursing professionals mostly in the observation of malpractice by another professional.

Mistreatment, aggression and violence: This category presented 40 complaints, representing 9% of the total number of cases. However, cases considered serious or very serious, by the code of nursing ethics, were the most used in this category, given the complexity of the complaints. The cases presented include abuse of the vulnerable, with the elderly and children being the biggest victims and caused by nursing technicians. Aggression of all types was evidenced, both physical and verbal, against patients, nursing technicians and assistants. Aggressions directed at patients were more provoked by nursing technicians and aggressions directed at nursing technicians, provoked by supervising nurses and service coordinators. Seventeen of the 40 cases were cases of aggression, that is, 42.5% of the cases. Ill-treatment appears next with serious outcomes linked to late identification of bodily harm and death. Finally, the sexual violence that appears with seriousness, always being directed to the female sex, provoked according to the complainant by nurses or nursing technicians, with the victims being nursing workers, nursing technicians and nurses.

COVID-19 vaccine: As for this category, the professionals working in the vaccine rooms were denounced for violating a preventive health measure, for administering vaccines without immunobiologicals or for losing medicines and vaccines to combat COVID-19. The actions were provoked by anonymous movements and the action of Coren-RJ in the inspection of inappropriate or/and even criminal conduct. Some of the actions proposed complaints to nursing technicians and nurses responsible for the service.

DISCUSSION

Those denounced in Coren-RJ naturally follow a similar pattern of the theoretical assumption, where higher-level professionals are denounced first, generally responsible for management, education, coordination of teams, thus having higher hierarchical positions. Factual elements of ethical processes, which took place in other states, present different views on ethical disciplinary infractions, their complaints and the course of the processes, according to the region. Such propositions contribute to the discussion of this research. Among the theoretical assumptions of the studied context, we highlight the analysis of ethical nursing processes that became final in the State of Rio de Janeiro, between the years 1999 to 2017. In this study, 236 processes were analyzed in 18 years, highlighting- and the involvement of nurses in ethical processes, who are responsible for the nursing team and for ensuring an environment favorable to the reduction of iatrogenic care. The profile of the whistleblowers was head nurses or supervisors. A study carried out in the State of Alagoas shows that nurses were the most reported, in 49.21% (Silva, 2019). The data from this research developed in Coren-RJ present similar data, in which nurses were the most reported 59%, but there is a significant increase in complaints to nursing technicians, who together with the assistants were reported in 37.4% of the occurrences. In a study by the Regional Nursing Council of Mato Grosso, the data show the opposite path. Most professionals involved in the ethics process were nursing assistants, followed by nursing technicians and, to a lesser extent, nurses (Urias, 2021). Regarding professional relationships, the Regional Nursing Councils, understanding the need to create beneficial devices for the parties, develop the conciliation process at their headquarters. The movement is influenced by conciliation, already present in judicialization processes. This perspective of growth of the Ethical Conciliation Hearings goes hand in hand with a policy of approximation of the councils with the professionals, present in Coren-RJ and evidenced in a study in Coren-SP (Mendonça, 2017). The conditions present in the category of professional relationships bring problems born in the nature of relationships, but that approach the category of mistreatment, aggression and violence, since they are violent conduct, to those of the nature of relationships. Interprofessional relationships, in the form of moral harassment and conflicting relationships, are important issues that promote complaints and ethical-disciplinary processes (Urias, 2021).

In the category of crimes and misconduct, crimes of all kinds are presented in different criminal types. The data converge with a study carried out at the Regional Nursing Council of the State of Ceará, which present illegal and irregular practice of the profession, theft, robbery and failure to provide assistance²². The complaints presented in Coren-RJ, which is the subject of this study, also presented bodily harm, bodily harm followed by death, embezzlement and document falsification. The bibliography still reveals proximity to these data, and follows a relationship with this study, with regard to document falsification, illegal exercise, misrepresentation, theft, robbery and vilification of corpses. Being issues more carried out by technicians and nursing assistants (Schneider, 2012). Studies from the State of Santa Catarina present relevant data on the Iatrogenics category (Silva, 2018). Although iatrogenics appear in several studies as the main source of. In this study, we cannot affirm such a proposition, as they lag behind the issues of professional relationships and violence and misconduct. Violation of the principles of beneficence and non-maleficence is directly linked to negligence, malpractice and/or recklessness, leading to questions about training, continuing education and inspection measures (Ues, 2022). The data reveal that neglect was the most common iatrogenic. In other studies with larger samples, negligence and medication error appear more frequently (Galletta, 2021). The bibliography reveals that there is a significant association with work stress since the beginning of the pandemic, causing different impacts on the production of nursing work, generating several psychic vulnerabilities (Pereira, 2019; Santos, 2018). The complaints made by workers in the field of nursing are related to the precariousness of work, but it can reveal the fear of losing a job and fighting for their rights²⁸. Overwork, stress, fear of illness and death, present during the COVID-19 pandemic, may have interfered with the complaints, which were closer to the categories of professional relationships, iatrogenic and mistreatment, aggression and violence. We cannot say that the categories of crimes and ethical misconduct, or the conduct of professionals in the face of the violation of a preventive health measure in relation to the vaccine against COVID-19 can approach error, the unintentional, as it moves away from respect for life, the valorization of dignity and human rights, in all their dimensions, in addition to constituting crimes dealt with in the criminal court. Mistakes are conduct not overlooked by the agent, they happen due to several issues that are beyond the will. Willful productions, which materialize in crimes, are manifestations of will and are misconduct that need to be addressed at the educational, legal and representative nursing institutions, in inspection acts, ombudsman spaces and service evaluation. Class councils, by promoting inspection, can improve the problems present in this study. Being important initiatives in the sense of standardizing the supervision of professional practice²⁸.

CONCLUSION

The study presented an evident number of ethical-disciplinary complaints. The highest number of complaints in 2021 is evident, considering that in 2020, there were administrative and social impediments in Brazil, specifically in the State of Rio de Janeiro, which suffered from the COVID-19 pandemic. It was clear that the complaints directed to nurses, in contrast to the literature, point to a greater number, in other states, of nursing technicians and nursing assistants. Evidence indicates that the complainants were nurses, nursing technicians, patients and their families, as a result. The complaints were received for evaluation by Coren-RJ and, when understood as true infractions of the provisions present in the Nursing Code of Ethics, they are accepted, promoting the beginning of the ethical nursing process. The categorization of occurrences facilitated the analysis and can be seen in other studies of the same nature. Complaints included in professional relationships were the ones that had the highest occurrence and occurred among nursing professionals. Crimes and misconduct appear as a worrying category, bringing occurrences of serious risk to the health of service users and crimes with aggravating situations. Iatrogenics was the third category in terms of number of occurrences, in contrast to studies carried out in some states that bring recklessness, negligence, malpractice and medication error as the highest occurrences.

The category of maltreatment, aggression and violence presented occurrences against vulnerable and nursing professionals. Sexual violence points out as serious evidenced violence. The conducts related to the COVID-19 vaccine category presented crimes related to the loss of vaccines and violation of preventive health measure. It is necessary that more studies covering complaints be carried out, considering that the movement of disciplinary issues reaches the Regional Nursing Councils, which can be an instrument for the creation of educational, preventive, inspection and observation measures for the most common infractions for specific interventions. It is estimated that academia, public and private educational institutions invest in the ethical education of nursing professionals in the knowledge of ethical issues and that more conciliatory devices are created, as well as spaces in the workplace to understand the problems.

REFERENCES

- Figueiredo AM. Ética: origens e distinção da moral. *Saúde, Ética & Justiça*. 2008;13(1):1-9
- Stone IF. O julgamento de Sócrates. Henriques Britto. São Paulo: Companhia das Letras; 2005. p.128.
- Cotrim G. Fundamentos da filosofia: história e grandes temas. São Paulo: Saraiva; 1998. p. 243-303.
- Lima AFS, et al. Dilemas éticos durante a pandemia de COVID-19. *Rev Bioética*. 2022;30(1):19-26. DOI: 10.1590/1983-80422022301502EN
- Cremonse D. Ética e moral na Contemporaneidade. *Rev Latino-Am Rel Intern*. 2019;1(1).
- Brasil. Lei n.º 5.905, de 12 de julho de 1973. Dispõe sobre a criação do Cofen e Coren e dá outras providências [Internet]. *Diário Oficial da União*, 13 jul. 1973 [cited 2022 Sep 13]. Available from: http://www.planalto.gov.br/ccivil_03/leis/l5905.htm
- Brasil. Lei n.º 7.498, de 25 de junho de 1986. Regulamentação do Exercício da Enfermagem [Internet]. *Diário Oficial da União*; 26 jun 1986 [cited 2022 Sep 13]. Available from: http://www.planalto.gov.br/ccivil_03/leis/l7498.htm
- Conselho Regional de Enfermagem. Resolução Cofenn.º 564, de 06 de novembro de 2017. Dispõe sobre a aprovação do novo código de ética dos profissionais de enfermagem [Internet]. *Diário Oficial da União* 6 nov 2017 [cited 2022 Sep 13]. Available from: http://www.cofen.gov.br/resolucao-cofen-no-5642017_59145.html#:~:text=1%20Aprovar%20o%20novo%20Código,cofen.gov.br
- Fernandes AKFS, Vasconcelos DMB, Santos EES, Rodrigues APRA, Souza WL, Miranda LN. Caracterização dos processos éticos de enfermagem no estado de Alagoas. *Cogitare Enferm*. 2022; 27. DOI:10.5380/ce.v27i0.81476
- Dantas CC, Freitas GFFC. Análise dos processos éticos de enfermagem transitados em julgado do Estado do Rio de Janeiro. *Braz. J. of Develop*. 2020;6(11):84453-84468. DOI:10.34117/bjdv6n11-019
- World Health Organization. Who Coronavirus (Covid-19) [Internet]. Geneva: WHO; 2020 [cited 2022 Sep 13]. Available from: <https://covid19.who.int>
- Organização Pan-Americana de Saúde. Folha informativa – COVID-19 (doença causada pelo novo coronavírus) [Internet]. Brasília (DF): OPAS; 2021 [cited 2022 Sep 13]. Available from: <https://www.paho.org/pt/covid19>
13. Ceukelaire W, Bodini C. We Need Strong Public Health Care to Contain the Global Corona Pandemic. *Int J Health Serv* [Internet]. 2020 [cited 2022 Sep 13];20731420916725. Available from: <https://journals.sagepub.com/doi/10.1177/0020731420916725>
- Alharbi J, Jackson D, Usher, K. The potential for COVID-19 to contribute to compassion fatigue in critical care nurses. *J Clin Nurs*. 2020;29(15-16):2762-2764. DOI: 10.1111/jocn.15314
- Silva TCL, Fernandes AKMP, O CB, Xavier SSM, Macedo EAB. O impacto da pandemia no papel da enfermagem: uma revisão narrativa da literature. *Enfermería Global* [Internet]. 2021 [cited 2022 Sep 13]; 63:516-529. Available from: https://scielo.isciii.es/pdf/eg/v20n63/en_1695-6141-eg-20-63-502.pdf
- Matta GC, Rego S, Souto EP, Segata J. Os impactos sociais da COVID-19 no Brasil: populações vulnerabilizadas e respostas à pandemia. Rio de Janeiro: Observatório COVID-19; Editora FIOCRUZ, 2021. 221 p.
- Schneider DG, Ramos FRS. Processos éticos de enfermagem no Estado de Santa Catarina: caracterização de elementos fáticos. *Rev. Latino-Am. Enfermagem*. 2012;20(4):[09 telas]. <https://doi.org/10.1590/S0104-11692012000400015>
- Fernandes AKJS, Vasconcelos DMB, Santos EES, Rodrigues APRA, Souza WL, Miranda LN. Caracterização dos processos éticos de enfermagem no estado de Alagoas. *Cogitare Enferm*. 2022;27:e81476. <http://dx.doi.org/10.5380/ce.v27i0.81476>
- Silva ALNV, Candino MCFS, Duarte SJH, Santos RM. Complaints filed against nursing professionals. *Nursing Ethics*. 2016;23:889-901. DOI: 10.1177/0969733015587777
- Urias V, Barros VG, Santos MJ. Ethical Conciliation Hearings held by the Regional Nursing Council of São Paulo. *RevBras Enferm*. 2021;74(3):e20201213. <https://doi.org/10.1590/0034-7167-2020-121321>
- Mendonça FAC, Menezes MV, Amorim SC, Morais FDM, Feitosa EMN, Lacerda CMM. Processo ético de enfermagem no estado do Ceará: reflexão para a prática profissional. *Enferm Foco*. 2017;8:77-81. DOI: 10.21675/2357-707X.2017.v8.n2.735
- Mattozinhos FCB, Freitas GF. Tipos penais no exercício profissional de enfermagem: abordagem quantitativa. *Acta Paul Enferm*. 2021;34. DOI: 10.37689/acta-ape/2021AO00221
- Schneider DG, Ramos FRS. Processos éticos de enfermagem no Estado de Santa Catarina: caracterização de elementos fáticos. *Rev Latino-Am Enferm* [Internet]. 2012 [cited 2022 Sep 13];20(4):[09 telas]. Available from: <https://www.revistas.usp.br/rlae/article/view/48607/52614>
- Silva ALNV, Candido MCFS, Duarte SJH, Sampaio ATL, Santos RM. Relação entre tempo de exercício profissional e ocorrências éticas em enfermagem. *Revenferm UERJ*, Rio de Janeiro, 2018;26:e23058. <http://dx.doi.org/10.12957/reuerj.2018.23058>
- Ues LV, Pereira LH, Bastos RMAFP, Ribeiro LCM, Silva GO, Campos KO, Barreto IS. 2022. Ethics in nursing: categorization of legal processes. *Rev Bras Enferm.*, 75(3):e20210099. <https://doi.org/10.1590/0034-7167-2021-0099>
- Galletta M, Piras I, Finco G, Meloni F, D'Aloja E, Contu P, Campagna M, Portoghese I. 2021. Worries, Preparedness, and Perceived Impact of Covid-19 Pandemic on Nurses' Mental Health. *Front Public Health*, 9(26):566700. DOI:10.3389/fpubh.2021.566700
- Pereira LH, Rodrigues ACC, Cavalcante RGF, Santos PT, Ribeiro LCM. 2022. Fiscalização do exercício profissional na área da saúde. *Enferm Foco* [Internet]. 2019 [cited Sep 13];10(6):28-35. Available from: <http://revista.cofen.gov.br/index.php/enfermagem/article/view/2253>
- Santos TA, Oliveira AS, Santos HS, Melo CMM, Costa HOG. 2018. Denúncias das trabalhadoras da enfermagem aos sindicatos: o desafio da resistência e da ação. *Rev baiana enferm*. 32:e20453. <https://doi.org/10.18471/rbe.v32i0.20453>