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Expectations of the nursing staff in relationship to leadership

Expectativas da equipe de enfermagem em relação à liderança

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Keywords

Leadership; Nursing, team; Nursing service, hospital; Nursing administration research; Nursing staff

Descritores

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Abstract

Objectives: To identify the expectations of the nursing staff in relation to the leadership of a future manager. **Methods:** This was an exploratory, descriptive research study, conducted in a university hospital. Data were collected by means of semi-structured interviews with 62 professionals in the field of nursing. The transcribed interviews were analyzed according to the reference of content analysis.

Results: Four categories of expectations emerged from the analysis: the behavior of the future manager, working with the nursing staff, working with other teams, and the work environment. The results showed that the nursing staff is concerned with the abilities and characteristics of the future manager facing the assignments in health services.

Conclusion: The nursing staff expected that the future nursing managers would have the abilities for leading a team and providing a favorable work environment.

Resumo

Objetivos: Identificar as expectativas da equipe de enfermagem em relação à liderança do futuro chefe.

Métodos: Trata-se de pesquisa exploratória, descritiva, realizada em hospital universitário. Os dados foram coletados por meio de entrevistas semiestruturadas com 62 profissionais da área de enfermagem. Os depoimentos transcritos foram analisados de acordo com o referencial da análise de conteúdo.

Resultados: Da análise emergiram quatro categorias de expectativas: comportamento do futuro chefe, trabalho com a equipe de enfermagem, trabalho com outras equipes e ambiente de trabalho. Os resultados evidenciaram que a equipe de enfermagem preocupa-se com as habilidades e características do futuro chefe frente às atribuições nos serviços de saúde.

Conclusão: As equipes de enfermagem esperam que os futuros chefes de enfermagem tenham habilidades para liderar uma equipe e proporcionar um ambiente favorável ao trabalho.

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Introduction

The work scene has passed through major transformations due to the advances of robotics and information technology, including in health services, which have undergone profound changes especially with regard to the quality of diagnostic and therapeutic methods. However, the dynamics of manager-subordinate, leader-staff relationships and the process of group work remain topical issues, constituting the focus of studies that address subjects such as: conflict, productivity, group dynamics, and leadership, among others.

Nursing consists of a numerous group of professionals whose actions are developed within a collective environment, being performed by work teams who need to harmonically string together their efforts throughout 24 hours a day and seven days a week, ensuring continuity of nursing care for inpatients in hospitals. These characteristics are determinants for the existence of models of work organization grounded in leadership and professional group activities.

In the traditional organization of working groups, the figure of the person who directs, coordinates, supervises, controls, teaches and monitors those who make up the team emerges. Within the environment of nursing, the Law of Professional Exercise determines that this activity is undertaken, privately, by the nurse.⁽¹⁾ In this way, the nurse who is responsible for the important role of manager of the nursing staff, in the everyday situations on the unit, is an essential professional member of the group, in the search for attending to the needs of the service.⁽²⁾

There are countless adversities that this activity imposes during the course of work in the role, and in the leadership of the team, whether in the successes, or even in the difficulties encountered during this process. This provides nurses new opportunities for seeking clinical competency and responsibility, expanding the way for career advancement. From this perspective, the role of manager brings responsibility to the nurses, but also enables their recognition.

Thus, the development of the ability to lead becomes fundamental for the nurse, in order to im-

prove his professional performance. The leadership role requires a broad and systematic vision of situations; the nurse should prepare, innovate and search for new ways to exercise leadership, since the mode in which that professional leads the staff directly influences a system of care, compromised or uncompromised by the needs of the people.⁽³⁾

Nursing care is developed by the staff, so it is expected that nurses realize the importance of the process of leadership as one of continuous and dynamic learning, and one that has the capacity for guiding people to be enthusiastic about the work, in order to achieve common goals.⁽⁴⁾ In this way, the nurse leader may be the motivator of strategies that involve the entire team for the performance of nursing actions. The literature about leadership indicates, over the years, that the nurse who occupies this position must display certain characteristics, such as: having skill in interpersonal relationships, possessing the ability to make decisions, flexibility, creativity and innovation, as well as supporting and facilitating the development of work processes.⁽⁵⁾

Besides these attributes, it was emphasized that the leader must sufficiently understand the peculiar situations she will face, to correctly choose the most appropriate strategies in each context.⁽⁶⁾ In the daily challenge of exercising leadership, the frank, open, direct and transparent communication of the nurse manager emerged as indispensable to the conduct of teamwork, enabling the identification of this need, whether in formal or informal moments of the work, to reduce gaps in the process. Leadership, when grounded in knowledge and in technical, administrative and relational abilities strengthens the team competencies and creates security in the performance of activities.^(7,8)

The study presented in this article analyzed the expectations in relation to the future leadership of the manager, from the perspective of the subordinate and in a context where this subordinate participates in a consultative process for the selection of the managers. The study was conducted in the environment of a public university hospital that, for many years, has adopted a participatory process of choice for the nurse managers.

This process is conducted every four years. The occupants of the leadership positions of the service and unit are chosen by a consultative process, in which a slate of three names is used for subsequent appointment by a formal act of the president. It is noteworthy that nursing is the only area in the structure of the hospital that conducts the process in this way. The other areas of the institution follow the traditional model of the decision being made by the chief executive.

The focus of the study was on the process of selecting unit managers, this article is aimed at discussing the specific objective of identifying the expectations of the nursing staff in relation to the leadership of the future manager.

Methods

This was an exploratory study with a qualitative approach, conducted at *Hospital de Clínicas de Porto Alegre*, a member of the network of hospitals of the Ministry of Education. At the time of data collection, this hospital had 749 beds and 4,416 employees; 1,841 were in nursing, with 441 of these being professional nurses. Sixty-two nursing staff participated in the research, including nurses, nursing auxiliaries and technicians, representing the 34 sectors that had nurse managers in the hospital. The sampling used was a probabilistic, simple random sample, through a lottery among the active nursing staff, ensuring the representativeness of a technical or auxiliary nurse, and one professional nurse for every sector of the institution. The inclusion criterion adopted was that the staff selected had voted in the last consultative process of choosing the unit managers. Due to the recurrence of words and, consequently, the themes addressed, data collection terminated with the 62nd interview.

For data collection, the semi-structured interviews conducted were recorded, in which the participants expressed their opinion about the issues included in the proposed script. Data were collected between June and September of 2009.

After the literal transcription of the information, we proceeded to read and analyze the testimonies in

search of units of meaning, conforming to thematic category analysis.⁽⁹⁾ This process resulted in categories that enabled the discovery of the expectations about the relationship of the future manager and her performance as a leader of the team. To ensure the anonymity of the information in the presentation of results, the subjects' statements were coded into numbers, in the order in which participants were interviewed.

The development of the study followed national and international standards of ethics in research involving human beings.

Results

The study participants included 30 nurses (48.4%) and 32 nursing auxiliaries or technicians (51.6%). The majority of participants were women (83.9%), with 45 participants between 31 and 50 years of age (72.5%). In relation to the working time, only nine respondents (14.5%) had less than six years of work experience; the other 53 subjects (85.5%) had worked more than six years and had participated in, at a minimum, two processes of selecting the managers at the institution.

Expectations in relationship to leadership of the future manager

Content analysis of the interviews allowed the identification of the presence of four thematic axes that gave rise to the categories of expectations: *behavior of the future manager*, *working with the nursing staff*, *working with other teams*, and *the work environment*.

The category, *behavior of the manager*, approached aspects related to the perception of the team regarding the way to be a nurse. It was composed of words that expressed the importance for the manager to remain impartial and just when dealing with issues that interfered with the dynamics of the group, and to seek self-development for this, thus contributing to new knowledge for the team.

"[...] that she is serious, competent, transparent, peaceful. That she has the maturity to be

able to talk about the good and bad things. “(E36) “Impartiality, justice and recognition of the employees that actually work.” (E41)

“That she continues always this way [...] she protects everyone, she tries to be just with everyone, she shares the overtime, she divides the open times.” (E44)

The second category, *working with the nursing staff*, brought together the testimonies mentioning that the future manager should be someone who allowed frank and open communication, that had the ability to recognize and attend to the needs of the team by giving support whenever necessary, and seeking harmony in the workplace, working in favor of unity and integration of the group.

“[...] That the manager always maintains an open channel with the group, that she understands and really stimulates, she also seeks this understanding.” (E01)

“I hope it is a manager determined to learn a great deal, to build together with the group, who may have a power of problem solving with our demands of the nursing staff [...], participatory, who wants to listen a lot, that has feedback with the employee.” (E09)

“[...] is to have a participative management, where everyone can truly exercise his role in context. You have a relationship, a harmonious working environment.” (E13)

“Appreciation of the professionals on the unit. An issue of being able to work with people, of knowing how to coordinate.” (E14)

Expectations of *working with other teams* was an emerging category, which inserted aspects related to decision-making ability and the recognition of the manager as the representative of the group by the other professional categories.

“[...] strong person, important in the decisions, especially when it involves other managers, primarily of the medical staff.” (E34)

“We always expect the best [...] the manager is the representation of all, both nurses and the nursing technicians, which is ... that she defends us in any circumstance, I think that ... working well, with

the manager, with the nurses, with the technicians, with the medical staff.” (E51)

And in the fourth category, expectations of the performance of the manager in relation to *the work environment*, groups of interview excerpts related to the sector, what this hospital referred to as the “unit”, where the team works, such as: improvements to be implemented in the unit; the possibility of changes; the need to make things work; the implementation of proposals for the campaign; and zeal for quality nursing care for the patients.

“[...] to be able to maintain a great quality of work, of nursing care.” (E13)

“So, we have a good expectation because she volunteered to change the things that she thought were not right.” (E25)

“That she fulfills what she exposed as the items that she chose as her mandate.” (E26)

“[...] that she wants to improve the work process that happens here today, in order to deliver a higher quality of work [...] a person engaged with these issues, motivated to make those improvements.” (E53)

Discussion

The discussion about the expectations in relation to the future manager revealed genuine considerations of the context where the process is deployed. However, the exploratory and descriptive design should be considered as a limitation of this study that, while allowing a deeper understanding of the phenomenon, it did not allow for making comparisons and generalizations. On the other hand, although the study was conducted in a single university hospital, the discussion can contribute to the understanding of similar situations experienced in other services inserted in academic settings.

The testimonies of the nursing staff expressed, in practice, the concern for electing a unit manager who could attend to the needs of the staff and the work sector. In addition, we identified aspects relating to the perception of staff regarding the way to be a nurse and the peculiar characteristics that she must possess in order to contribute new knowledge to the staff.

The predominance of women in the positions researched arose from the socio-historical aspects of the profession. In this sense, the presence of women was underscored as a positive factor, since women were considered to be holistic, they engaged in participative leadership practices and tended to encourage staff more than male leaders.⁽¹⁰⁾ In dealing with the professional experience in this hospital, the majority of respondents had worked there for several years, and it was understood that they had previous experiences, drawn from other selection processes of choosing of the manager.

When they mentioned the expectations regarding the behavior of the manager, the interviewees reported that nurse managers needed to share knowledge to guide and equip her team in the clinical area. This fact points to the importance of knowledge supporting professional practices; so, the search for quality patient care is integral to improving the work team.⁽¹¹⁾ To invest in qualification of the group, in order to obtain results that will meet the needs of the health services users, is a constant need.⁽¹²⁾

Respondents shared that they expected that the nurse managers would be able to mediate the issues involving the work group, acting in a competent way, developing skills to know what to do, and being just in their decision making. In this perspective, managers needed to be flexible and able to adapt their actions according to the peculiarities of each context, acting in a coherent way with the situation experienced and characteristics of members of the team.⁽¹³⁾ The professional nurse needed to share certain skills to work in management of the service, bearing in mind that the manager is considered to be a reference for staff members, for the other professionals from other areas, as well as for the users.⁽¹⁴⁾

The results showed that the research subjects expected that the manager could integrate the nursing staff when performing activities, promoting a healthy environment for work, with the establishment of bonds of trust and reduction of conflicts. Thus, it was important that the nurse, in a conflictual situation, demonstrated consistent conduct, was proactive, flexible and adopted

strategies to manage such events.⁽¹⁵⁾ These recommendations come to mean that “[...] the interpersonal dimension and human competence of the nurse leader is a motivating factor and support for teamwork.”⁽⁸⁾

The respondents, in general, expected that the performance of the manager would occur in a joint manner with the team, that is, in the development of the activities, in the construction of routines, or even in the resolution of impasses together with the group. These ideas suggested a model of participative management, that is, the organization of work must be done so that all nursing professionals are involved in the majority of decision-making, in the same way and at the same time.⁽¹⁶⁾ It is worth mentioning that the promotion of good nursing care is favored when the members of this team feel satisfied in their work environment, providing opportunities for their behaviors of caring for the patients, expressing the full use of their skills and potentials.⁽¹⁷⁾

The category attending to *working with other teams* refers to the way in which the nursing team hopes that the manager is perceived by other multidisciplinary teams. In this category, the statements highlighted the relationship with the medical staff, a relationship somewhat dichotomous and, sometimes, conflictual, but understood as something that is still being constructed and in the process of evolution to strengthen the bond of the actions of the two professions. In the interface of work with different professionals, communication between teams arises as an element that favors the approximation of the various fields of knowledge in the professional relationship, enabling the exchange of knowledge and understanding of each professional about her role in the care of the client.⁽¹⁸⁾

The work of professionals integrated in the three areas considered essential pillars of the institution (administration, nursing and medicine) represented the equilibrium point of the health services and contributed to the quality of care.⁽¹⁹⁾ The nursing team expects that the manager attends to the aspects of *the work environment*, which constitutes the fourth category of the study. The expectations centered on the possibility of changes and improvements in the working sector, whether in relation to the structure, human resources,

or even with regard to the quality of services provided to customers. In this respect, the statements revealed a concern in providing a quality service to users. Therefore, the nurse, to manage the activities of her work team, must be attentive to issues focused on the priorities of service and develop strategies that may help in decision-making, thus enabling improvements in services of health.

The human relationship is an essential tool for nursing, and, it is made viable by means of adequate communication, in order that the nurse can manage the actions and needs of the nursing staff. Studies highlight that the communication skill is a prominent factor in a leader.^(5,20) The articulation among leadership and communication permits the nurse to work actively on the problems and to promote changes within the work sector as desired. Therefore, the greater utilization of relationship-oriented leadership, defined as giving *feedback*, and the support of necessary changes in the structure of the service facilitating the realization of the work by other people involved in the process, by providing staff satisfaction and, quality of care.⁽²¹⁾ Determination and quality of health care have been recognized as a result of the actions of the teams who develop them.⁽²²⁾ Thus, the nurse, to manage human resources, needs to be attentive to strategies to be used with the team to facilitate the achievement of the objectives of the services.

Conclusion

The expectations identified were: the nurse manager should be able to work with the nursing staff, being sensitive to the needs of the group, establishing open channels of communication and developing participatory processes of management, anchored in the realization of the problems encountered in the service and the needs elaborated by the team. The attitude of impartiality and justice, as well as the ability to make decisions contribute to the work environment and to the team.

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Collaborations

Moura GMSS, Inchauspe JAF, Dall'Agnol CM, Magalhães AMM and Hoffmeister LV were responsible for developing the theoretical framework and critically contributed to the intellectual development of the article. Hoffmeister LV performed the step of collecting and organizing information. Moura GMSS and Inchauspe JAF were responsible for preparing and forwarding the manuscript. Moura GMSS oversaw the development of the article.

References

1. Kletemberg DF, Siqueira MT, Mantovani MF, Padilha MI, Amante LN, Anders JC. [The nursing process and the law of professional exercise]. *Rev Bras Enferm*. 2010;63(1):26-32. Portuguese.
2. Mattosinho MM, Coelho MS, Meirelles BH, Souza SS, Argenta CE. [The world of work: some aspects experienced by professional nurses recently graduated]. *Acta Paul Enferm*. 2010;23(4):466-71. Portuguese.
3. Kian KO, Matsuda LM, Waidmann MA. [Understanding the daily work of the nurse-leader]. *Rev Rene*. 2011;12(4):724-31. Portuguese.
4. Vilela PF, Souza AC. [Leadership: a challenge for recently graduated nurses]. *Rev Enferm UERJ*. 2010;18(4):591-7. Portuguese.
5. Cardoso ML, Ramos LH, D'Innocenzo M. Coaching: a reference model for the practice of nurse-leaders in the hospital context. *Rev Esc Enferm USP*. 2011;45(3):730-7.
6. Bernardes A, Cummings G, Évora YD, Gabriel CS. Framing the difficulties resulting from implementing a Participatory Management Model in a public hospital. *Rev Latinoam Enferm*. 2012;20(6):1142-51.
7. Balsanelli AP, Cunha IC. [Leadership in the nursing context]. *Rev Esc Enferm USP*. 2006;40(1):117-22. Portuguese.
8. Moura GM, Magalhaes AM, Dall'agnol CM, Juchem BC, Marona DS. Leadership in nursing: analysis of the process of choosing the heads. *Rev Latinoam Enferm*. 2010;18(6):1099-106.
9. Bardin L. *Análise de conteúdo*. São Paulo: Edições 70; 2011.
10. Chen HC, Baron M. Psychometric properties of the Chinese leadership practices inventory. *Int J Nurs Educ Scholarsh* [Internet]. 2007[cited 2012 Feb 18];4(1). Available from: <http://people.usd.edu/~mbaron/edad810/Psychometrics%20of%20LPI.pdf>.
11. Velloso IS, Ceci C, Alves M. [Reflections about power relations in nursing practice]. *Rev Gaúcha Enferm*. 2010;31(2):388-91. Portuguese.
12. Lopes JL, Cardoso ML, Alves VL, D'Innocenzo M. Outpatient satisfaction with nursing care. *Acta Paul Enferm*. 2009;22(2):136-41.
13. Amestoy SC, Cestari ME, Thofehn MB, Milbrath VM. Personal

- characteristics that influence the development of a nurse leader. *Acta Paul Enferm.* 2009;22(5):673-8.
14. Amestoy SC, Trindade LL, Waterkemper R, Heidman IT, Boehs AE, Backes VM. [Dialogical leadership in hospitals institutions]. *Rev Bras Enferm.* 2010;63(5):844-7. Portuguese.
 15. Spagnol CA, Santiago GR, Campos BM, Badaró MT, Vieira JS, Silveira AP. Conflict situations experienced at hospital: the view of nursing technicians and auxiliaries. *Rev Esc Enferm USP.* 2010;44(3):792-9.
 16. Almeida ML, Segui ML, Maftum MA, Labronici LM, Peres AM. [Management tools used by nurses in decision-making within the hospital context]. *Texto & Contexto Enferm.* 2011;20(Spec no):131-7. Portuguese.
 17. Regis LF, Porto IS. Basic human needs of nursing professional: situations of (dis)satisfaction at work. *Rev Esc Enferm USP.* 2011;45(2):332-8.
 18. Oliveira AM, Lemes AM, Machado CR, Loyola e Silva F, Miranda FS. [Professional relationship between nurses and doctors at the hospital of medical school: the view of doctors]. *Rev Bras Saúde Mater Infant.* 2010;10 Suppl 2:S433-9. Portuguese.
 19. Ruthes RM, Feldman LB, Cunha IC. [Focus on the customer: an essential tool in management competence in nursing]. *Rev Bras Enferm.* 2010;63(2):317-21. Portuguese.
 20. Silva RC, Ferreira MA. Technology in an intensive care unit: delineation of a figure- type of the nurse. *Acta Paul Enferm.* 2011;24(5):617-23.
 21. Lanzoni GM, Meirelles BH. Leadership of the nurse: an integrative literature review. *Rev Latinoam Enferm.* 2011;19(3):651-8.
 22. Magalhaes AM, Riboldi CO, Dall'Agnol CM. [Planning human resources in nursing: challenge for the leadership]. *Rev Bras Enferm.* 2009;62(4):608-12. Portuguese.