ROLE OF THE REGISTERED NURSE IN CLINICAL MANAGEMENT POSITIONS

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Introduction

The health care system operates within a larger society that is experiencing tremendous change such as increasing consumerism, the explosion of new technologies, and quantum leaps in the amount of information available and ease of access to that information. These trends impact on health service delivery, increasing its complexity such that today’s healthcare managers face many issues and pressures. Examples include: increasing consumer expectations, shortages of healthcare professionals, political pressures, pressures relating to accountability and balancing costs, limits on access to care, and meeting quality of care expectations (McKinnon et al, 2003). The drivers of many healthcare costs such as new technology, drugs, collective agreements, and utilization practices are often out of the control of the individual manager. The result is pressure on managers to optimize service levels without access to increasing revenues. Additional pressure is felt with the restructuring of health boards, often resulting in a decrease in management positions and an increase in spans of control and responsibilities for those that remain in the system.

In the last ten years, while health care has become increasingly complex, 5,500 Canadian nursing management positions have been lost (Canadian Nursing Advisory Committee, 2002). This province also experienced a significant reduction in nursing management positions related to health system reforms, with the loss of 175 nursing management positions during this time, a loss that has only partially been restored (Department of Health and Community Services, 2003). Many nurse managers and direct caregivers have voiced concerns with increased workloads, large spans of control, and a loss of accessibility and visibility of managers in the clinical setting.

Health system reforms and board restructuring have led to changes in the roles and responsibilities for nurses in clinical management positions. Nurse managers report spending excessive amounts of time dealing with staffing issues such as absenteeism and scheduling (Department of Health and Community Services, 2003). These issues, coupled with increasing expectations about improving services while reducing costs, have created pressures that affect the daily activities of nurses in management positions, particularly in the amount of time that they can devote to the leadership aspect of their role. Thus, the public, health service organizations, and nurses feel the critical loss of nursing leadership at a time when it is sorely needed (Canadian Nurses Association, 2005).

ARNNL’s vision of Healthy People in Newfoundland and Labrador includes excellence in nursing, public protection, quality health care, and healthy public policy. Part of ARNNL’s interpretation of excellence in nursing is that there are knowledgeable, visionary nursing leaders and that there are adequate numbers of nurses in management roles. Several hundred ARNNL members practice in formal management positions, with titles such as Vice-President, Director, Manager, and Supervisor. Although there are variations among these roles, there are many common elements when it comes to the challenges and expectations faced by registered nurses who assume roles in the management of clinical services.

This document will outline the roles and competencies expected of registered nurses in management positions, focusing primarily on clinical management levels (frontline and middle), although there is relevance to senior and executive management positions. The document can serve as a guide to nurse managers in assessing learning needs and goals, as a guideline to nurses and employers in the development of position descriptions, and as an educational tool for anyone seeking to understand the role of registered nurses in clinical management positions.
Roles and Responsibilities

The roles and responsibilities of registered nurses in management positions will vary with the size of the organization and the management position held (frontline, middle, senior, or executive). It is widely recognized that leadership and management activities are not synonymous. ARNNL believes that both are important in today’s complex health system environment. To be effective, a registered nurse in a clinical management position must be both a competent manager and a skilled leader. Visionary leadership is only one of the roles expected of a registered nurse in a clinical management position. Other roles include: advocate, administrator, communicator, change agent, planner, educator, researcher, and member of a profession.

Clinical Manager as Leader

In 2001, the Canadian Nurses Association (CNA) consulted the registered nursing community regarding the attributes of a healthy workplace. Nursing leadership was second only to control over workload in the essential elements required for healthy workplaces and achieving quality care. CNA developed a position statement Nursing Leadership, outlining the significant role of nursing leadership in the development of quality practice environments where nurses have the tools and supports to provide quality nursing care (Canadian Nurses Association, 2002). This document identified the following elements of an environment that supports nursing leadership:

- Middle managers who are regulated nursing personnel;
- Nurses involved in decision-making at the board and executive levels;
- Nurses involved in organizational strategic planning activities;
- Nurses responsible and accountable for nursing care standards;
- Nurses collaborating with other health care professionals in determining standards of client care;
- Nurses participate in organization-wide decisions to assess and select supplies, equipment and information systems and technology;
- Nurses have a strong voice in determining resource utilization;
- Nurses are involved in quality improvement activities that are integral to the organization’s functioning;
- Nurses with clinical practice expertise in leadership positions;
- A work design for nursing that allows time for reflection and decision-making about one’s own practice;
- Organizational decisions analysed with respect to their effect on client outcomes and nursing work life;
- Additional management education that is accessible to nurse leaders and potential leaders.

ARNNL believes that nurses in all domains of practice and all levels have a role to play in leadership; however, nurses who are in formal leadership positions such as clinical management positions play a pivotal role in exercising leadership. They are expected to be visionary—inspiring others to realize a shared vision, empowering and enabling others to get things done, demonstrating flexibility and risk-taking, and fostering leadership in others.

Clinical Manager as Advocate

Nurses in clinical management positions must advocate for quality care for clients and their families, and a work environment that supports nurses in providing quality care. Registered nurses bring a holistic knowledge of clients, nursing, and health care to their management roles. They are knowledgeable about nursing practice with values and ethics grounded in nursing, and have an understanding of nursing within the broader healthcare system. This knowledge is transferred through involvement in organizational committees, preparation of documents, and other avenues to inform and influence.

The clinical manager’s role as advocate is particularly important in promoting patient safety. The causes of adverse events are varied and often not directly related to the competence of an individual provider. Frequently, adverse events are related to breakdowns in communications or system-process issues. The need to decreasing adverse events increases the significance of nursing leadership and management in the clinical setting. Nurse managers can provide expertise, monitoring, and guidance on standards of practice as well as facilitating measures to reduce the contributing factors that are system related.
Nurses in clinical management positions are instrumental in creating a culture conducive to quality care, often assuming the role of facilitator and mentor. They facilitate successful collaborative relationships with other health care professionals and articulate the factors that need to be considered in resource allocation to provide cost-effective quality care and improved client outcomes. They are pivotal in facilitating the identification of the impacts of financial decisions on client services, outcomes, and staff.

**Clinical Manager as Administrator**
Nurses in clinical management positions have many administrative functions and accountabilities related to organization-wide operations (Urden and Rogers, 2000). These functions and accountabilities include:

- ensuring that the clinical area is staffed with the appropriate mix and numbers, including access to support services, to meet client needs;
- reviewing and providing approval of payroll;
- participating in writing, reviewing, and revising policies and procedures and ensuring consistent application;
- monitoring and managing budgets, including analyzing variances and taking appropriate action when needed;
- acquiring equipment and resources needed for client services;
- conducting human resource functions, such as interviewing, hiring, and implementing disciplinary actions when required;
- providing performance evaluations and performance improvement plans for staff;
- participating in organization/system/community committees sharing expertise related to nursing practice and service outcomes.

**Clinical Manager as Communicator**
Nurses in clinical management positions play a critical role in organizational communications, both oral and written. They provide ongoing communication to the clinical team on management issues and goals and bring feedback from the frontline to senior levels of management. In a recent study in Western Canada, effective communication was ranked as the top competency required of frontline nurse managers (Care and Udod, 2003). Clinical managers also frequently communicate with clients and their families, dealing with emotional situations when clients, families, and/or staff have concerns. Thus, the importance of effective communication for those in the clinical management role cannot be overstated.

**Clinical Manager as Change Agent**
Nurses in clinical management positions, especially those in frontline or middle management positions, play a pivotal role in identifying changes needed and in making change happen. They know the culture of the organization and how change affects the professionals’ daily work life. Change is often difficult, especially if there is not full consensus about the benefit of the change being implemented. Clinical managers are challenged to find an appropriate course in implementing change that requires navigating the constraints arising from issues from the top and issues from the frontline (Health Organization Change Group, 2004).

**Clinical Manager as Planner**
Nurses in clinical management positions are involved in the development of short and long-term goals and objectives related to the strategic and operational plans of various levels of the organization. This involves monitoring and evaluating the attainment of goals and objectives. Clinical managers are able to bring forward recommendations that reflect client, staff, and employer considerations, providing input into the operational and capital plans of the organization.
Clinical Manager as Educator
Nurses in clinical management positions facilitate the orientation of staff, students, and volunteers and assist staff to access ongoing education. They are involved in setting standards and creating and supporting an education plan to meet the knowledge and skill needs of staff, ensuring compliance with education requirements for various required competencies. They share their expertise with other nurses, often acting as a role model, coach, and mentor. They are instrumental in creating environments and cultures that facilitate lifelong learning, aimed at promoting continuous improvement in the practice setting and providing resources to assist meeting the educational needs of clients related to their care and condition.

Clinical Manager as Researcher
Nurses in clinical management positions create environments that stimulate an interest in research, creating opportunities and an expectation for data collection, staff participation in research, support for changes based on evidence, and integration of research findings into operational and strategic planning. This includes promoting an evidence-based approach to care and identification of best practices for implementation.

Clinical Manager as a Member of a Profession
Nurses who work in clinical management positions advance the standards, values, and objectives of the nursing profession within the management context. They help create an environment whereby staff can maintain standards of practice in keeping with provincial and national nursing association standards, positions, and guidelines.

Clinical managers contribute to the advancement and development of the role of the nurse and articulate the role within the discipline and to other disciplines. They must ensure that they keep abreast of developments in the profession, playing a key role in transferring that knowledge to the clinical setting and advocating for quality care.

Core Knowledge/Competencies

Competency is defined as the specific knowledge, skills, judgment, and personal attributes required for a nurse to practice safely and ethically in a designated role and setting (Canadian Nurses Association, 2000). The level and breadth of the competency of an individual nurse in the clinical management role is contingent upon formal and informal education and experiential learning, including, but not limited to, the following areas (Uden and Rogers, 2003, and Canadian College of Health Senior Executives, 2002):

- Leadership
- Communication Skills (oral and written)
- Team Building Skills
- Commitment to Lifelong Learning
- Knowledge of Adult Learning Principles
- Consumer and Staff Responsiveness
- Public Relations Skills
- Political and Health Environment Awareness
- Conceptual Skills (analysis and synthesis, problem-solving, and systems thinking)
- Results Management (planning, implementation, monitoring, and evaluation)
- Resource Management/Budgeting
- Adherence to Standards (professional, ethical, legal, and accreditation)
- Knowledge of Clinical Work Area
- Conflict Resolution Skills
- Knowledge of Group Dynamics and Behavior
- Understanding of Other Nursing and Leadership Roles
- Stress Management Skills
- Time Management Skills
- Change Management Skills
- Commitment to Advocacy
Preparation for Practice

The roles described in this document are within the context of all nursing clinical management positions. They are a reflection of the needs in today’s health environment and are vital to moving the health system into the future. The extent to which individual nurses in management positions fulfill the various roles will depend on their experience and educational preparation. Continuing education is critical to obtaining and maintaining the knowledge and skills needed to continuously improve the quality of nursing management in the health care setting.

ARNNL believes that while graduate education in nursing and/or health administration is the preferred means of acquiring the competencies necessary for clinical management positions, some nurses may acquire the competencies through a combination of experience and through non-nursing educational programs and graduate education in other fields relevant to their area of practice.

Conclusion

ARNNL acknowledges the tremendous value of registered nurses working in clinical management positions. Research has clearly linked effective nursing leadership to improved nursing recruitment and retention and improved quality of care. This link has been especially noted in the Magnet Hospital Program that has widespread recognition throughout North America and the United Kingdom. In Canada, this research has contributed to the promotion of the Quality Professional Practice Environment initiative.

ARNNL believes it is incumbent upon employers to ensure that they have a sufficient number of registered nurses to provide the required level of leadership at the clinical management level. It is incumbent upon these nurses to ensure that they are fulfilling their roles and responsibilities to the best of their abilities. Together these factors will make a difference to the efficiency and effectiveness of the organization, to the quality of the work environment for staff, and to the quality of client service now and in the future.
References


