Nursing Administration in a Hospital Situation

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NURSING administration is the same in principle as any other type of administration. Nursing administration is concerned with the total needs of the patients; that is, Comprehensive Nursing", which implies that the nurse at the level of the patient must know the needs of the patient, how to analyse these needs, and who should be called to get these needs met, if the patient is given comprehensive or good nursing care. It is the nurse who most often must call the doctor to meet a need that comes within the scope of medical decision. After the decision is made by the doctor, it is the nurse who must carry out or implement this decision. Therefore, one can say the medical service is just as good as the nursing service and no better.

The nurse administrator should be responsible to the hospital administrator for the total nursing service and also responsible for the administration of the school of nursing if there is one. There should be definite stated objectives for the service and the school; these must be in accord. It is difficult to separate completely the educational programme from the service programme because of the nature of nursing functions.

The nurse administrator must know to whom she is responsible, for whom she is responsible and for what she is responsible. To whom and for whom should show in any organisational chart which gives lines of communication or authority. For example, let us look at such a chart. In South East Asia most of the hospitals are under government; therefore we shall use this pattern as our sample. Other than for the nursing division we shall give only the top administration, but we give the nursing in detail:

There are many titles for the positions contained in this chart; Matron for Director of Nursing, Deputy Matron for Assistant Director in Service, Principal Tutor for Assistant in Education, Ward Sister for Head Nurse, and numerous titles for auxiliary personnel which we have not attempted to name in this chart. In Western countries, housekeeping is not considered a function of the nursing division, but in this part of the world, if the environment of the patient is to be conducive to good patient care, it will be undoubtedly best accomplished if the nursing administrator assumes this responsibility until such time as an executive housekeeper can be made available.

It is the hospital administrator's responsibility to delegate functions to the director of nursing. Once this is done, she should be given authority commensurate with the responsibilities delegated if she is to get the job done. She must, in turn, delegate to those under her supervision, as shown in the organisational chart. Delegation is a state of mind. It cannot be handled automatically. It requires considerable self-discipline for an executive to pass along and maintain the freedom of action needed in delegating. It takes planning. One should:

1. Pinpoint the functions to be delegated;
2. Define clearly the goal and scope of the delegation;
3. Go slowly;
4. Consider the effect on all others within the organisation;
5. Provide for including in the planning the persons to whom responsibility is delegated.

A skillful delegator can delegate without losing control of the situation by establishing a definite pattern of reporting. She needs to make herself available for consultation. Just as a wise motorist periodically reviews his driving, so does an administrator profitably review her delegating processes. This is one job that cannot be delegated; it is the task of deciding what can be delegated.

All heads of divisions within the hospital make up the hospital administrative team. The administrator is the team leader; the director of nursing is a member of this team. Therefore she must have a clear understanding of working within a team.

"To be a part of a team means that one must be extremely well prepared in her own field; she must see herself in relation to the contribution of others. She must sense constantly the changing needs of patients whom she and her group are serving; she must accept the corresponding changes in her contribution and the contribution of others to meet the needs; she must have the courage to say what she can do and why she can do it better than another; she must have the grace to give up what she likes to do if another can do it better. It means further that she must learn to do things which do not come easy if they can best be done by her for the good of all. It means the will to pull with others and the integrity to withdraw from those parts of an undertaking which are not hers. It means the enduring belief that together we can do things which none of us individually could do alone, and that the "togetherness" makes possible a concept of the job which is greater than the sum
of the individual parts."

The director of nursing should strive to teach her staff the art of decision-making through group processes. The more she can bring people into the planning the more apt they are to cooperate in implementation of a decision. We get the best action when the decision or objective to be accomplished has been stated by those persons concerned with the action required.

The director of nursing can be the "right arm" of the hospital administrator if inter-personal relationships are good. The best director of nursing will strive to get the hospital administrator to think her ideas are his own. She is really the co-ordinator of all services within the hospital directly related to the care of the patient. She is responsible for the largest group of personnel, the ONLY group concerned with the patient 24 hours out of EVERY day.

The director of nursing needs skills in:
1. Planning
2. Initiating
3. Delegating
4. Decision-making
5. Communicating
6. Evaluating

She should be given the responsibility for planning, implementing and evaluating the nursing services of the hospital. Nursing is important in that it is responsible for implementing the doctor's decisions as well as having specific functions in its own discipline. Therefore, the director of nursing, as a member of the planning committee of the hospital, is concerned with the total administration of the hospital. She should be an authority on how many and what type of

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