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RESEARCH ARTICLE

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MANAGERIAL COMPETENCIES OF NURSES IN THE HOSPITAL ENVIRONMENT: INTEGRATIVE REVIEW

Saemmy Grasiely Estrela de Albuquerque¹, Sérgio Ribeiro dos Santos¹, José Wilker de Lucena Macêdo² and Mayara Evangelista de Andrade¹

¹Postgraduate Program in Nursing, Federal University of Paraíba

²Postgraduate Program in Administration, Federal University of Paraíba

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*Corresponding author:

Rhuan Filipe Montenegro dos Reis

ABSTRACT

To analyze the evidence about the managerial competencies of nurses in the hospital organization. An integrative literature review study conducted in the Databases Medical Literature Analysis and Retrieval System Online, Latin American and Caribbean Literature in Health Sciences, SciVerse Scopus, Web of Science, Current Nursing and Allied Health Literature and Nursing Databases, which after submitted to inclusion and exclusion criteria resulted in a sample of 20 articles. From the synthesis of evidence it was possible to identify three thematic categories 'Perceptions about the management process', 'Strategies for the development of competencies' and 'Instruments for assessing managerial competencies'. It is concluded that the managerial competencies of nurses should be developed through a continuous process. It was also evidenced the need for studies that construct and validate an instrument for measuring competencies at the national level, offering subsidies for the mobilization of new professional competencies in the nurse's management practice.

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INTRODUCTION

The work process of nurses involves the care and managerial dimensions, which must be complementary and interdependent, where care constitutes the core of professional practice. The hospital environment is an important scenario for nursing management that is based on an area of human sciences, the Administration, based on the principles of the scientific and classical school of this area to manage health services (Almeida *et al.*, 2011; Santos *et al.*, 2013). Thus, the management work developed by the nurse requires the use of competencies for the planning, evaluation and supervision of nursing care (Felli, Peduzzi, 2016; Lorenzetti *et al.*, 2014). Over the years the term competence has undergone changes following the economic and labor market transformations. Some American authors associate competence with human abilities in fulfilling certain tasks, saying, it is the individual who has the knowledge, skills and attitudes to effectively achieve the objectives of the work (Fleury, Fleury, 2001; Correa, 2015). However, French authors point out that competence is not only realized through knowledge and skills, but requires mobilization of specific resources for action and applicability in

practical situations of their work processes (Le Boterf, 2003; Zarifian, 2001). In the hospital nursing environment, nurses are increasingly required to compete for the realization of managerial practice (Leal *et al.*, 2018a; Manenti *et al.*, 2012). Based on this context, it is observed the fundamental role that training institutions have in the construction of future professionals, defining positively or negatively the solidification of managerial knowledge essential for the professional performance of nurses. Thus, academic education must make efforts to integrate theory with practice, providing concrete experiences related to management and care (Soares *et al.*, 2016; Leal *et al.*, 2018b; Siqueira *et al.*, 2019). Given the complexity inherent to the comprehensive care provided in hospital environments, the demand for qualified professionals to work in these services is increasing. Therefore, it is necessary to implement strategies aimed at the development and aggregation of new professional competencies, with which nurses know how to act, mobilize and transfer knowledge to solve practical situations according to the requirements of the action scenario (Leal *et al.*, 2018a; Manenti *et al.*, 2012). In view of the above, it is indispensable to expand discussions about the development of competencies and assertive use in search of a professional performance permeated by effectiveness and safety, and

consequently a quality nursing care, since there are still gaps about the practical experience and theoretical foundation that underlies them (Almeida *et al.*, 2011; Leal *et al.*, 2018a; Manenti *et al.*, 2012). Based on these considerations, the present study may provide reflection on the need to adopt new strategies to improve the competencies profile of those who assume nursing management positions, offering subsidies for the construction of a management model focused on the development of professional skills, discussing the importance of breaking with technical standards in order to raise the quality and productivity of care and management work processes. Thus, the aim of this study was to analyze the evidence about the managerial competencies of nurses in the hospital organization.

METHODS

This is an integrative review that followed the following stages: formulation of the research question, search in the literature of primary studies, data extraction, evaluation of studies, interpretation of results, presentation of the review (Mendes *et al.*, 2008). The PICO strategy (acronym for patient, intervention, context) was adopted to construct the research question: "What scientific evidence is available in the literature on the managerial competencies of nurses in the hospital organization?". And we used descriptors in Portuguese indexed in the Descriptors in Health Science (DeCS) and in English indexed in the MeSH Database (MeSH), shown in Figure 1 (Karino, Felli, 2012). The search took place in December 2020 in six informational resources: Medical Literature Analysis and Retrieval System Online (MEDLINE), Latin American and Caribbean Literature in Health Sciences (LILACS), SciVerse Scopus (SCOPUS), Web of Science (WOS), Current Nursing and Allied Health Literature (CINAHL) and Nursing Databases (BDENF), employing advanced search strategies, adapting them according to the particularities of each data base, through different combinations and with the help of Boolean operators "AND" and "OR".

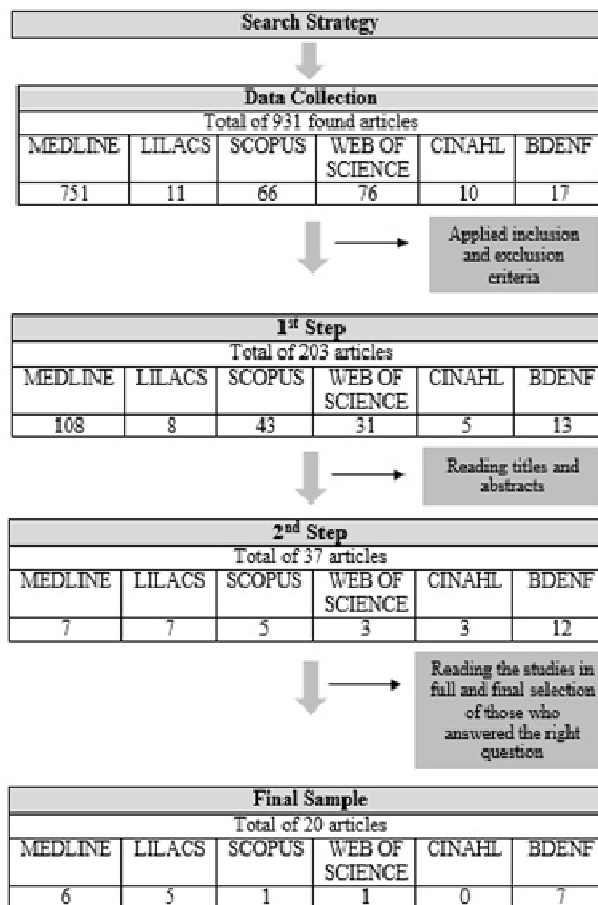


Figure 2. Flowchart of the selection steps of articles included in the final corpus of the review. João Pessoa, PB, Brazil, 2021

The results were presented in categories based on the convergent themes of the studies that comprised the sample of this review. The evaluation of the level of evidence of the studies was performed from the research design according to the following criteria: I- for systematic reviews and meta-analysis of randomized clinical trials; II- for randomized clinical trials; III- for non-randomized controlled assay; IV- for case-control or cohort studies; V- for systematic reviews of qualitative or descriptive studies; VI- for qualitative or descriptive studies; VII- for the opinion of authorities and/or reports of expert committees (Melnik, Fineoutoverholt, 2019).

RESULTS

The corpus of analysis was composed of 20 articles, published between 2008 and 2019, with a peak in 2010, with 4 studies. In relation to the language 11 were published in Portuguese, 8 in English and 1 in Spanish. The journals with the highest number of articles selected were Journal of Nursing Management, Brazilian Journal of Nursing and UFPE Online Nursing Journal, each with three articles in the period. Regarding the concept of competencies, most studies (15) used the concept of competence as a set of knowledge, skills and attitudes and the other studies did not describe this concept. Finally, in relation to the classification by level of evidence with regard to the research design, all studies in the sample fell within level VI. Chart 1 presents a synthesis of the main characteristics of the selected articles, which were discussed in detail in three thematic categories.

Category 1 - Perceptions about the management process: The analysis of the articles showed that the researchers emphasized the management process as a complex phenomenon that permeates the individual and professional characteristics of the nurse, as well as aspects inherent to the academic education and institutional philosophy of the hospital health service from its structure to the management of people and their interpersonal relationships.

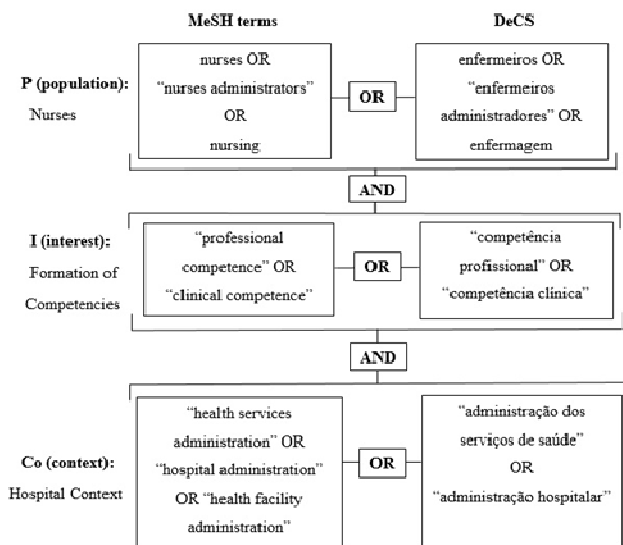


Figure 1. Search strategy used in the integrative review. João Pessoa, PB, Brazil, 2021

The eligibility criteria were the original research articles, without time frame, focusing on the answer of the guide question. Duplicate publications, theoretical articles, literature reviews, dissertations, theses, letters and editorials were excluded. From the applied filters, complete articles published in the languages of Portuguese, English and Spanish were recalled. Figure 2 shows the details of the research steps in the databases. The selected studies were independently evaluated by two reviewers. For the analysis and interpretation of the data, we used an instrument elaborated by the authors with the following information: title, database, journal, language, year of publication, country of origin, methodological design, levels of evidence, main results and recommendations of the authors.

1 – Characterization of the studies included for the analysis. João Pessoa, PB, Brazil, 2021.

Database	Authors and Year	Country	Study Design	Main managerial competencies
BDENF	Branquinho et al., 2010	Brazil	Qualitative descriptive-exploratory	Leadership, Communication, Teamwork, Continuing Education.
BDENF	Brusamolin et al., 2010	Brazil	Qualitative descriptive	Health care, Decision making, Communication, Leadership, Time management.
BDENF	Camelo et al., 2016	Brazil	Qualitative descriptive	Leadership, Motivation, Teamwork, Conflict Management, Negotiation, Articulation of institutional policy, Resoluteness, Interpersonal relationships, Creativity.
BDENF	Dias et al., 2017	Brazil	Qualitative descriptive	Decision making, Teamwork, Leadership.
BDENF	Furukawa et al., 2011	Brazil	Qualitative descriptive	Resource management, Communication, Teamwork, Process Management, Decision Making, Customer Focus, Continuing Education, Entrepreneurship Leadership, Negotiation, Strategic Vision.
BDENF	Muller et al., 2017	Brazil	Qualitative descriptive	Leadership, Communication, Continuing Education, Teamwork.
BDENF	Santos et al., 2012	Brazil	Qualitative descriptive	Communication, Interpersonal Relationship, Leadership.
LILACS	Gomez et al., 2010	Brazil	Case study	Communication, Conflict Management, Negotiation, Leadership.
LILACS	Almeida et al., 2011	Brazil	Qualitative descriptive	Decision making, Time management, Leadership, Autonomy, Conflict Management, Negotiation, Planning.
LILACS	Leal et al., 2018	Brazil	Qualitative exploratory	Leadership, Decision Making, Communication, People Management, Resource Management, Interpersonal Relationships, Teamwork.
LILACS	Leal et al., 2019	Brazil	Documentary	Leadership, Communication.
LILACS	Manenti et al., 2012	Brazil	Action research	Ethical-politics, Communication, Citizenship.
MEDLINE	Soares et al., 2016	Brazil	Qualitative exploratory	Supervision, Leadership, Decision making, Planning and Organization, Permanent Education.
MEDLINE	Graham et al., 2008	England	Mixed exploratory-descriptive	Leadership, Teamwork.
MEDLINE	Onishi et al., 2008	Japan	Qualitative descriptive	Continuing education, Career development, Human resource management.
MEDLINE	Pillay, 2010	South Africa	Quantitative cross-sectional	Self-management, Planning, Interpersonal relationships, Control.
MEDLINE	Howard et al., 2018	Australia	Quantitative methodological	Decision making, Resource management, Interpersonal relationships, Communication, Leadership, Conflict management.
MEDLINE	Hinala et al., 2018	Finland	Qualitative descriptive	Leadership
WEB OF SCIENCE	Siqueira et al., 2019	Brazil	Case study	Leadership, Interpersonal relationships, Systemic view.
SCOPUS	Moghaddam et al., 2019	Iran	Mixed descriptive-analytical	Planning, Organization, Leadership, Control.

This category shows that the profile of nurses to perform the function of health management needs to consider a rigorous selection process that covers curriculum analysis, knowledge tests, professional references, personal skills in order to adapt the professional profile to the needs of the organization (Branquinho *et al.*, 2010; Camelo *et al.*, 2016). In this sense, the nurse's profile should include articulation of administrative and care knowledge, involving: understanding of oneself and others, monitoring of individual and collective performance, multiprofessional management, effective communication, planning and organization, setting goals and objectives to achieve productivity at work (Manenti *et al.*, 2012). The nurse managers take over an articulating and guiding role in front of their team, and should continually motivate them in the search for knowledge and provision of quality care. The high turnover in management positions has been related to inadequate the required profile, lack of experience and inability to resolve conflicts and decision-making, making short- and long-term planning difficult, hindering the continuity of actions (Camelo *et al.*, 2016; Dias *et al.*, 2017). It is emphasized that the type of management adopted by the nurse manager conducts the management process and affects the care provided, the work processes can be facilitated through shared management with the team, which prioritizes collective doing with co-responsibilities in providing qualified nursing care (Camelo *et al.*, 2016; Muller *et al.*, 2017). The main competencies highlighted in the studies for the management of nurses in the hospital scope were: leadership, which concerns the ability to influence people to achieve or overcome the institution's objectives (Branquinho *et al.*, 2010; Brusamolin *et al.*, 2010; Dias *et al.*, 2017; Furuwaka *et al.*, 2011; Muller *et al.*, 2017; Almeida *et al.*, 2011; Gomez *et al.*, 2010;

Leal *et al.*, 2018a, Leal *et al.*, 2019; Manenti *et al.*, 2012; Soares *et al.*, 2016; Graham *et al.*, 2008; Howard *et al.*, 2018; Siqueira *et al.*, 2019; Moghaddam *et al.*, 2019); decision-making, linked to the ability to apply the decision-making process to choose an alternative for resolving work situations (Almeida *et al.*, 2011; Leal *et al.*, 2018a; Leal *et al.*, 2019; Soares *et al.*, 2016; Howard *et al.*, 2018; Brusamolin *et al.*, 2010; Dias *et al.*, 2017; Furuwaka *et al.*, 2011); communication, related to the sharing of information through interpersonal interaction (Branquinho *et al.*, 2010; Brusamolin *et al.*, 2010; Furuwaka *et al.*, 2011; Muller *et al.*, 2017; Santos *et al.*, 2012; Gómez *et al.*, 2010; Leal *et al.*, 2018a; Leal *et al.*, 2019; Manenti *et al.*, 2012; Howard *et al.*, 2018); teamwork, linked to group interaction to articulate actions and achieve common objectives (Muller *et al.*, 2017; Leal *et al.*, 2018a; Leal *et al.*, 2019; Branquinho *et al.*, 2010); planning and organization, which concerns the ability to schedule activities at the strategic, tactical and operational level, guiding the work processes for continuity of actions (Almeida *et al.*, 2011; Soares *et al.*, 2016; Pillay, 2010; Moghaddam *et al.*, 2019). Study evaluated which clinical and managerial competencies should be developed by nurses, through a documental analysis of the programs of the disciplines of Administration in Hospital Nursing of a Public Higher Education Institution and a Hospital Educational Institution, both from the interior of São Paulo, noting that there are managerial competencies required by the Hospital Institution, which are not contemplated in the programs of the undergraduate disciplines, as well as there are competencies not contemplated in the hospital institution notices, but which are implicitly required in professional practice (Leal *et al.*, 2019).

In South Africa, a comparative study was conducted on the competencies of nurses in management positions in the public and private sector, through a self-administered questionnaire with 420 nurse managers in both scenarios. Fifty-one important managerial competencies for nursing management were identified and it was found that public sector managers considered themselves relatively less competent compared to private sector managers, where the greatest competencies gaps pointed out were in the ethical-legal sphere (Pillay, 2010). Thus, it is observed that competencies are not only in the level of knowledge and skills, but it requires mobilization of resources for action, that is, from practical situations conditions are created for its applicability meeting the demands of the organization. Therefore, the identification of competencies is based on four pillars: knowing how to be, knowing how to do, knowing how to know and knowing how to live together (Manenti *et al.*, 2012). Sometimes, there are flaws in the teaching process throughout the undergraduate nursing program, not broadly embodying managerial competencies, which leads to a dissociation between theory and practice, which may cause insecurity in graduates, who will assume positions of work and leadership positions in the future. Due to this situation, the development and improvement of these competencies often occur in the practical context, concomitantly with the practice of the profession (Leal *et al.*, 2018b; Siqueira *et al.*, 2019; Leal *et al.*, 2019). Therefore, professional performance is supposed to be connected to academic training, so it is up to the Higher Education Institutions to prepare the future nurse, offering support for the development of care and managerial competencies in the theoretical-practical sphere, as well as reflexive critical thinking about their future position, as organizer of the nursing team's work process (Soares *et al.*, 2016; Leal *et al.*, 2018b; Leal *et al.*, 2019). The organizational structure also influences the work process of nurses, interfering in different ways in decision making. Therefore, institutional support becomes fundamental in the continuous development of health professionals, because while they acquire or improve their managerial competencies, the possibilities for achieving excellent health care are increased (Brusamolin *et al.*, 2010; Camelo *et al.*, 2016; Dias *et al.*, 2017), consequently resulting in organizational and professional growth, while integrating updates on managerial knowledge for the development of new competencies (Almeida *et al.*, 2011; Leal *et al.*, 2018b; Siqueira *et al.*, 2019; Furukawa, Cunha, 2011; Leal *et al.*, 2019). Therefore, the purpose of the management process is linked to the conduct of work and achievement of goals, through a good functioning of the units and provision of quality care. For this, the dissemination of institutional philosophy, promotion of continuing education and professional qualification are fundamental to ensure positive results in the demands of professional praxis, building and reconstructing knowledge through continuous learning (Manenti *et al.*, 2012; Soares *et al.*, 2016).

Category 2 - Strategies for the development of competencies:

Articles that have applied competencies development strategies such as leadership and communication are addressed in this category, highlighting the positive implications that the implementation of these strategies brought to improve the work processes of professionals working in the management field. Regarding communication competence, the study points out that there is a fragmentation of work processes, resulting in difficulties in involving the team and resisting change. It suggests that workshops and training about verbal and written communication be held in order to reduce noise in communication to stimulate the involvement of professionals with the service, thus optimizing the actions and conducts of those involved, while clarity of its role in the institution is clarified (Santos *et al.*, 2012). The promotion of knowledge about the elements that constitute the process of managerial communication should not have the standard content, but rather build a singular understanding that involves complex relationships and that develop singularly in the context of each health team (Santos *et al.*, 2012). In a hospital in the south of England through a Professional Development Program, the leadership characteristics of a nursing team in management positions were improved. The program provided moments of reflection

regarding leadership styles and teamwork, in which the most cited styles were transactional and transformational leadership.

Thus, we sought unification in a mutual purpose of professional growth, through the integration of vision and objectives, within a constantly changing health system (Graham, Jack, 2008). The implementation of a strategic approach is fundamental for corporate development, through the use of instruments, positive implications for nursing management can be generated, since the nursing team will play its role based on well-established purposes, direction and objectives (Graham, Jack, 2008). Similarly, as part of the management and leadership process, nursing managers and physicians working at a University Hospital in Northern Ostrobothnia, Finland, were interviewed, who applied the Lean Management method to their work processes. Lean leadership concerns a set of values and operations that enable them to face the challenges of managing, promoting effective communication in the workplace and supporting the demands of those led. And consequently, it benefits the provision of care to users, through the optimization of resources and development of health units (Hinala *et al.*, 2018). Positive results were found in the context of the study, demonstrating that the application of the Lean method systematically assists in the management process of managers working in specialized health services. Thus, it stands out as a model to be implemented in other scenarios with a view to helping managers in the administration of health services, to deal with the pressures and implications related to leadership at work (Hinala *et al.*, 2018). A study conducted in Japan promoted discussions through focus groups with nine nurses in management positions, as a product of the analysis of the sharing of experiences, one can extract the importance of having opportunities for the career development of specialist nurses, through a continuous learning environment of a prolonged character, which provides support to individual and organizational needs (Onishi *et al.*, 2008). The authors also highlighted that the demand for specialized nurses is increasing in the country, in view of the changes that occur in the emergence of new diseases and technological evolution. Therefore, it is essential to invest in aspects of professional experience and strategic development of these human resources, through planning and implementation of continuing education actions, also valuing the importance of contact between generalist nurses and specialized nurses (Onishi *et al.*, 2008).

Category 3 - Instruments for assessing managerial competencies:

Finally, in this category, two studies were detailed that presented types of instruments that were constructed for mapping and evaluating the competencies of professionals working in managerial positions, conducted in Australia and Iran. The validation of a managerial competencies assessment tool called The MCAP Tool was carried out in two hospitals and five community services in Australia, with a sample of 117 senior and medium managers. The tool includes six essential competencies with 79 associated behavioral items, demonstrated validity and reliability, increasing the potential to assist in the measurement of managerial competencies (Howard *et al.*, 2018). The six management competencies identified in health service managers were: evidence-based decision-making, resource management and management, knowledge of the health environment and organization, interpersonal relationship and communication, leading people and organization, managing changes (Howard *et al.*, 2018). We used a seven-point Likert scale to organize the 79 behavioral items collected by the experts and aligned on the scale as follows: 12 items related to evidence, 17 items related to operations, 11 items related to knowledge, 17 related to communications, 13 items related to leadership and 9 items related to changes (Howard *et al.*, 2018). Another study conducted in Iran validated a tool to assess the managerial competencies of hospital department head nurses. Through literature review, Delphi technique and expert panel, a competence model was developed. The validity and reliability of the instrument were verified, which is considered an important step towards improving professional performance (Moghaddam *et al.*, 2019). In all, 27 useful managerial competencies were related to nurses in leadership positions, which were categorized into four main dimensions: planning, organization, leadership and control. In the

final stage, the instrument was elaborated on a 5-point Likert scale, with 78 questions (Moghaddam *et al.*, 2019).

DISCUSSION

The analysis of the results led to the understanding of different perceptions about the management process in nursing and the main managerial competencies required in this context, as well as listed strategies for the development of nursing competencies in management positions and described the application of two instruments for mapping and evaluation of these competencies, both results resulted in benefits for the professional practice of nurses in managerial positions in the context hospital. It is emphasized that of the articles that compose the sample none discussed their results from the perspective of the competencies in action, demonstrating that it is an approach little used in the nursing field, which succinctly the need for further studies for the application of these concepts in the nursing hospital practice. Thus, as evidenced by the results of the studies, the literature highlights the importance of institutions establishing the profile of competencies expected for nursing management positions, providing tools for those who work in training programs to prepare training focused on the individual and collective development of nurses and their team, with the application of instruments that support the administration of the work process and, consequently, improvements in care (Soares *et al.*, 2016). It is known that the work fragmented and divided into tasks, based on the traditional Taylorist and Fordist model, is still characteristic of the organization of the work of the nursing team in the hospital environment. This crystallization in the profession has hindered the subjectivity of professionals to position themselves in a more participatory way in the management of care, evidencing the need for the implementation of new forms of organization that allows the articulation of professionals with a focus on valuing their knowledge and doing (Lorenzetti *et al.*, 2014). Thus, the importance of the tacit knowledge of nurses is highlighted, that is, the one he acquired throughout his life through experience, because from it are generated new opportunities for learning and constant acquisition of new competencies for managerial development, which permeates the technical, ethical-political, communicative and citizenship dimensions (Manenti *et al.*, 2012). Corroborating the findings about academic education, a study conducted with nurses pointed out the limitation in the preparation for decision-making and coping with the hospital reality in some specific points, thus leading them to seek specialization courses that fill the gaps in the undergraduate program (Püschel *et al.*, 2017). Another study also evaluated the profile of nursing graduates from a public college and demonstrated that the competencies developed throughout the undergraduate course converged with those described in the Diretrizes Curriculares Nacionais with a training focused on the integral care of the SUS (Barbosa *et al.*, 2019). About the nursing of the future, the Department of Higher Education Nursing Initiative has built the Nurse of the future nursing core competencies guidelines, a strategic framework that defines ten fundamental competencies for the role of nurses in contemporary times and in the future: patient-centered care; professionalism; leadership; systems-based practice; computer and technology skills; communication; collaborative teamwork; security; improving quality and evidence-based practice (Massachusetts *et al.*, 2016; Arcêncio *et al.*, 2018). Finally, the results highlighted the main competencies that permeate the nurse's managerial practice. In this context, the relevance of rethinking pedagogical curricula and Brazilian nursing practice is ratified, based on guidelines such as those mentioned above, which has positively influenced the training of nurses in the United States of America (Massachusetts *et al.*, 2016; Arcêncio *et al.*, 2018). The challenge of mapping to develop competencies is evidenced, that is, to methodologically apply evaluative instruments and tools aimed at career planning, and is fundamental in the hospital environment, creating conditions that continuously allow the growth and improvement of nurses and their strategies for application in professional practice (Manenti *et al.*, 2012; Leal *et al.*, 2018b). An organizational strategy widely used to develop nursing competencies is continuing education, and it is

essential to promote motivation to constantly seek training and knowledge updates, not only to meet the demands of the profession, but to promote the break with the traditional vertical models of work organization, towards a shared management that involves the collective (Lorenzetti *et al.*, 2014; Leal *et al.*, 2019). As a limitation of this review, it is noteworthy that the production of this knowledge cannot be generalized, due to the analysis of varied hospital contexts, not only in the public and private spheres, but also at the national and international level.

CONCLUSION

Based on the findings, there is an increasing production of knowledge about the theme of managerial competencies, most of the studies addressed the issue of competencies training through qualitative approaches. The synthesis of knowledge led to the identification of a knowledge gap related to the absence of a nationally validated instrument to measure nursing competencies in management positions in the hospital environment. The performance of studies on this theme may bring subsidies for hospital institutions to define the profile of competencies required for the performance of nurse managers and, consequently, acquire theoretical basis for promoting strategies aimed at the development of competencies in action.

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