Mitigating Large Spans of Control for Nurse Managers in a Hospital Setting: A Bundled Approach

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Span of Control: Background

• SoC is more than the amount of direct reports. Although span of control is often defined as number of people directly supervised, the complexity of what a manager is responsible is more complex (Havaei et al., 2013).

• Given the demands for hospital nursing managers to lead their teams to provide the highest quality of care, its imperative that a steady state leadership be in place combined with appropriate span of control (SoC) to meet the needs of the departments and our patients.
• The purpose of this presentation is to describe how one hospital used the ANA standards of practice as a guide to approach mitigating the effect of large spans of control amongst nurse managers.

• Adapting The Ottawa Hospital (TOH) tool developed by Morash, Brintnell and Rodgers (2005), SoC assessment for the nurse managers (NM) at KSMC was completed in the fall of 2016 and then repeated in fall of 2017 after focused interventions.
• **ANA Standard 1- Assessment**
  
  - In Focus Group settings and 1:1’s, met with managers to **assess** their Span of Control (SoC).
  
  - Nursing Managers also **self assessed** current leadership competencies and skill level and met with Director to discuss results using AONE Nurse Manager Skills Inventory (AONE, 2017).

• **ANA Standard 2- Diagnosis**
  
  - Consultant reviewed with Director, analysis of SoC Assessment for arena and what the barriers were. Also discussed ways to mitigate larger SoC for arena and individual managers.
Span of Control: Methods

- **ANA Standard 3- Outcome Identification**
  - Managers should have reasonable number of direct reports, time to accomplish their work, knowledge of the HR and Financial responsibilities and work processes should be streamlined.

- **ANA Standard 4- Planning**
  - Working with Nursing Directors and CNE, identified top hospital wide interventions that could help mitigate large SoC’s.
• ANA Standard 5- Implementation

Over 12 months the following bundle of interventions were initiated for ALL nurse managers

• Finance 101/102/103 for Nurse Managers offered by Financial Analysts

• Employee Labor Relations classes for Nurse Managers offered by HR

• Meeting Management work to reduce meeting workload (Gave back 1hr/day on average with this work)

• Professional Development Course Work (Foundational Classes) to support transformational leadership behaviors

***Some additional arena specific interventions

• -1FTE to support M/S FP (Nurse Manager)

• -1FTE to support CC FP (Nurse Manager)
Span of Control: Results

(2016) 58% of the managers had a larger than recommended SoC (14/24)

(2017) 29% of the managers had a larger than recommended SoC (8/27)

• ANA Standard 6- Evaluation

   SPSS Paired Sample T Test

Paired Sample T Test comparing the mean SoC scores from 2016 (94.28, SD 10.38) and the 2017 scores (86.64, SD 8.01) was evaluated. The value for the 2-Tailed test was 0.014 which indicated that there was a **statistically significant change in scores from 2016 to 2017.** (p< .05 is considered significant)
What bundled interventions worked

- **Focused Leadership Development**
  - Finance
  - HR
  - Foundational Leadership Courses

- **Streamline Work Processes**
  - Meeting Management to give back time

What is next to address the remaining 29%

- **Focused Leadership Development**
  - HR training - Managing in a unionized environment
  - Exemplary Leadership/Peer Mentorship

- **Streamline Work Processes**
  - Regional Attendance Program
  - Work/Life Balance Built in
Questions?
References:


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<td>Ancillary Support Roles (what do they really do- MSD, Quality)</td>
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<td>CQI/QA streamline processes</td>
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