The role of the manager nurses in pediatrics: integrative literature review

ABSTRACT | Objective: This study is an integrative review that aims to identify what the scientific literature has addressed about the role of the pediatric nursing manager. Method: The material used was collected in the PubMed, Scielo and Lilacs databases, with the help of descriptors consulted in DeCS. The inclusion criterion was the year of publication of the articles and the exclusion criterion was the absence of keywords in the title and abstract. Results: 2,917 articles were found, of which 17 met the eligibility criteria and were included in this review. Conclusion: The literature addressed three main spheres that cover the role of the manager as an educator who promotes and supports continuing education; in sizing teams and in promoting a good work environment and in managing quality care and patient safety.

Keywords: Role; Administration; Nursing; Pediatric.

INTRODUCTION
Among the various professions working in the health area, nursing stands out for being dynamic, incorporating therapeutic approaches with the use of instruments, and is essentially carried out through the intervention of the worker. This profession is strongly characterized by teamwork and assumes, in modernity, a role focused on care, centered on the rationalization of actions and on the division of labor. Thus, it is an area of health which requires efficient management, which promotes the internal organization of teams and the structuring of professional relationships. 1

Management is an attribution of nurses that directly impacts the promotion of quality of care and better conditions in the environment in which they perform their role. The professional who works as a manager is responsible for providing adequate working conditions, ensuring that the relationship of the nursing team, among themselves and with their patients, does not interfere with the quality of care provided. 2 However, nurse managers often face dilemmas related to the lack or inadequacy of space for care, lack of protocols, conflict with co-workers, among other factors that can affect their performance and, consequently, the quality of patient care. 3
In this linearity, this study aims to identify the role of the pediatric nursing manager and discuss this information in the form of an integrative review, in order to support improvements in the work environment and in the relationship of nursing teams. It is expected that knowledge about the role of the manager will help professionals in solving the dilemmas they face in their daily lives, enhancing efficiency in child care and in supporting their families.

METHODS

This study is an integrative literature review, a methodology that aims to group and integrate themes related to a particular subject. The integrative review provides the synthesis of information and the incorporation of significant results from articles in practice, being widely used in the health area. 4

For the collection of material in the scientific literature, three databases with great expressiveness and reliability within the health context were used: PubMed, Scielo and Lilacs. The descriptors for the research were consulted with the help of the Health Sciences Descriptors (DeCS) and the Medical Subject Headings (MeSH).

To build the search strategy, the keywords “papel”, “gestão”, “enfermagem” and “pediátrica” were inserted in the DeCs, resulting in the descriptors “Role”, “Administration”, “Nursing” and “Pediatric”. Subsequently, the descriptors were inserted into MeSH, in order to find all their indexed synonyms, which allowed the development of the following search strategy: (“Pediatric Nursing”) AND (“Organization and Administration”).

The inclusion criterion used was the year of publication, only articles published in the last 5 years were selected and the exclusion criterion was the absence of keywords in the title and abstract.

To select the literature that fit the theme and purpose of this review, the titles and abstracts of scientific articles in Portuguese, English and Spanish, published in the last 5 years, were read, searching for the following keywords: papel, gestão, enfermagem and pediátrica.

After selecting the articles, a deeper reading was carried out, in order to identify what the studies addressed about the role of the pediatric nursing manager. Data were analyzed and treated with the aid of Office Package tools (Word and Excel).

RESULTS

A total of 2,917 articles were found, 17 of which met the inclusion and exclusion criteria and were included in this review (Figure 1 and Table 1).

DISCUSSION

From the reading of the selected articles, it is understood that the main themes addressed in the literature about the role of the pediatric nursing manager can be divided into three spheres, namely: the role of the manager as an educator who promotes and supports continuing education, the role of the manager in sizing teams and promoting a good working environment and the role of the manager in managing quality care and patient safety.
<table>
<thead>
<tr>
<th>Data base</th>
<th>Study Title</th>
<th>Type of Study</th>
<th>Study participants</th>
<th>Author and Year of publication</th>
</tr>
</thead>
<tbody>
<tr>
<td>PubMed</td>
<td>The role of pediatric nurses in healthcare transition planning: a national survey of findings and practical implications</td>
<td>Quantitative descriptive study</td>
<td>1,814 nurses</td>
<td>Disabato et al., 2019</td>
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<td>PubMed</td>
<td>Concepts of professional development of nurses in the pediatric team.</td>
<td>Correlational study</td>
<td>74 pediatric nurses</td>
<td>Horn et al., 2019</td>
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<td>PubMed</td>
<td>Production of subjectivity and autonomy of nursing professionals in Pediatrics.</td>
<td>Exploratory and descriptive, with a qualitative approach</td>
<td>44 nursing professionals and managers</td>
<td>Ribeiro et al., 2019</td>
</tr>
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<td>PubMed</td>
<td>Association of nurse workload with lack of nursing care in the neonatal intensive care unit</td>
<td>Prospective study</td>
<td>136 neonatal nurses</td>
<td>Tubbs-Cooley et al., 2019</td>
</tr>
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<td>PubMed</td>
<td>Palliative care in the neonatal unit: neonatal nursing team perceptions about facilitators and barriers in a regional tertiary nursery</td>
<td>Semi-structured interviews</td>
<td>8 neonatal nurses</td>
<td>Kilcullen &amp; Ireland, 2017</td>
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<td>PubMed</td>
<td>Nurse knowledge, work environment and turnover in highly specialized end-of-life pediatric care</td>
<td>Multivariate analysis</td>
<td>226 pediatric organizations</td>
<td>Lindley &amp; Cozad, 2017</td>
</tr>
<tr>
<td>PubMed</td>
<td>Quality patient care: challenges and opportunities</td>
<td>Literature review</td>
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<td>Corkin &amp; Kenny, 2017</td>
</tr>
<tr>
<td>PubMed</td>
<td>Organizational and Management Resources and quality of care in French pediatrics</td>
<td>Cross-cutting Research</td>
<td>510 nurses</td>
<td>Chevalier et al., 2017</td>
</tr>
<tr>
<td>PubMed</td>
<td>Improved quality of care and patient safety associated with better working environments in the NICU</td>
<td>Secondary Analysis</td>
<td>1,247 neonatal nurses</td>
<td>Lake et al., 2016</td>
</tr>
<tr>
<td>Scielo</td>
<td>Nurse as an integrator in the health management of children with chronic conditions</td>
<td>Analytical study with a qualitative approach</td>
<td>20 nursing professionals</td>
<td>Mororó et al., 2020</td>
</tr>
<tr>
<td>Scielo</td>
<td>Assessment of the patient safety climate in inpatient units: a cross-sectional study</td>
<td>Analytical cross-sectional study</td>
<td>50 nurses</td>
<td>Silva et al., 2019</td>
</tr>
<tr>
<td>Scielo</td>
<td>Assessment of the essential attributes of Primary Health Care for Children</td>
<td>Evaluative, Quantitative Study</td>
<td>548 nurses for children under 12 years old</td>
<td>Araújo et al., 2018</td>
</tr>
<tr>
<td>Scielo</td>
<td>Assessment of the essential attributes of Primary Health Care for Children</td>
<td>Quantitative, descriptive and cross-sectional study</td>
<td>165 nursing professionals</td>
<td>Fuentes &amp; Riveros, 2017</td>
</tr>
<tr>
<td>Scielo</td>
<td>The culture of patient safety from the perspective of the pediatric emergency nursing team</td>
<td>Descriptive, quantitative and cross-sectional study</td>
<td>75 nursing professionals</td>
<td>Macedo et al., 2016</td>
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Chart 1: Presentation of the characterization of the studies included in the integrative review by: Database, Title, Type of study, Study participants, Author and Year of publication.
The role of the manager as an educator who promotes and supports permanent education.

The nursing profession is facing challenges, especially in terms of increasing service demands at a time of reduced resources. The effectiveness of healthcare organizations often comes down to professional capabilities and how well teams respond to opportunities or crises. Newly qualified nurses must learn to develop organizational skills, communicate appropriately with multidisciplinary and interprofessional teams, and know how to manage risk. In this way, educators must inspire and motivate the development of effective leaders, helping professionals to develop essential skills needed to provide high-quality patient care in challenging circumstances. 5

To Corkin, Kenny6, there are several essential elements for providing safe patient care, including clinical governance, effective communication, teamwork, risk assessment, education and effective leadership. Each element can be difficult to understand, develop or act on, but it is essential that nurses use them as opportunities to improve their specialty or service and provide safe, high-quality care.

Disabato et al.,6 conducted a descriptive quantitative study using a survey questionnaire validated by experts in the field to investigate gaps in current knowledge specific to the roles and responsibilities of pediatric nursing professionals in Health Care Transition Planning (HCTP). The results revealed gaps regarding specialization in relation to the practice of HCTP and the need for more robust education and training.

Araújo et al.,7 carried out a study with the aim of identifying the presence and extent of essential attributes in children’s Primary Health Care (PHC) services, focusing on the assessment of structure and process. The findings show that the PHC essential score was below the cutoff value, indicating that the health services assessed do not provide the essential attributes in their full extent, which shows a weak orientation for PHC. For the authors, these results can serve as a warning to professionals who work with the child population and PHC managers, contributing to the qualification of these services.

In turn, in their research on the meaning of professional development for pediatric nurses, Horn et al.,8 found that continuing education in nursing was the highest-rated component among the nurses who participated in the study, while association with a professional organization was the lowest. The highest-ranked motivator was increasing the patient care knowledge base, while salary was the lowest. The highest barrier to seeking professional development opportunities was family commitments and the lowest was the desire to seek more knowledge, which reinforces the importance of promoting professional training in nursing.

Like Horn et al.,8 Kilcullen, Ireland9 they also explored nurses’ perceptions of facilitators and barriers to patient care. The authors reported that the lack of knowledge was one of the themes most mentioned by the study participants as a barrier to providing quality care, which corroborates the need to have a manager who promotes and supports the continuing education of pediatric nurses.

Macedo et al.10 they also saw the role of the manager as an educator in their study aimed at understanding the culture of patient safety in pediatric emergencies. The results found by the authors pointed out that discussion and learning environments involving managers and the nursing staff need to be structured in order to guarantee moments of reflection about patient safety, as well as the particularities involving the pediatric patient, which would help improve the patient safety culture in pediatric emergencies.

The manager’s role in sizing teams and promoting a good work environment.

Regarding the role of the manager in sizing teams, Ribeiro et al.,11 found in their study that the production of subjectivity and autonomy in nursing workers involves both the conditions of the work environment and the relationship with the team, the issue of hierarchy and the profile of the professional who works in the pediatric unit. According to the authors, hierarchical and subordinate relationships should be abolished, as they point to consequences in the planning and
exercise of nursing care, blocking the expression of knowledge and clinical judgment. On the other hand, the authors noted that valuing the role of each person within the health team makes nurses feel free to exercise their work process and express their uniqueness, the way of caring and the way of practicing nursing.

Lake et al. 12 investigated the associations between the working environment of the Neonatal Intensive Care Unit (ICU), quality of care, safety and patient outcomes. The authors concluded that better work environments were associated with greater chances of nurses reporting problems and seeking solutions, that is, improving the place where they perform their functions can be a promising strategy for achieving safer environments for newborns at risk.

Lindley, Cozad, 13 in turn, examined the relationship between nurses’ knowledge, the work environment and the turnover of nurses in perinatal palliative care organizations. The authors noted that the professional experience of advanced practice nurses was significantly related to turnover, suggesting that the presence of a specialist in the environment in which they work can create stability in the organization, in addition to providing knowledge and experience to other team members, decreasing the turnover of nurses.

In addition to the work environment, the results of the study by Tubbs-Cooley et al. 14 and Mororó et al. 15 showed that the size of the nursing team is also an important factor that determines its performance. Tubbs-Cooley et al. 14 found that the increase in the baby-nurse ratio during a shift was associated with an increase in the loss of nursing care, which demonstrates the importance of correctly sizing the teams to maintain high-quality care in the NICU. For Mororó et al., 15 although the importance of an interprofessional action for the development of comprehensive care management is recognized, the nurse is often faced with an overload of activities, corroborating the idea of the importance of the correct dimensioning of nursing teams, in order to avoid overloading professionals and consequently reduce the quality of care.

Chevalier et al. 16 and Silva et al. 17 studied the relationships between the organizational and managerial resources of nurses and their quality of patient care. Chevalier et al. 16 reported that the organizational support perceived by nurses was directly related to the perception of quality of care and job satisfaction. To Silva et al., 17 communication, access to technologies, referral and counter-referral systems and safe transport are essential to organize services and offer comprehensive care to the child, which reinforces the importance of promoting a quality work environment, thus increasing the satisfaction of the employees and, consequently, the quality of care.

The manager’s role in managing quality care and patient safety.

Silva et al. 18 evaluated nurses’ perception of patient safety and noted an unfavorable climate in their study, since working conditions and safety climate were the domains most poorly evaluated by nurses in their research. The study pointed out the gap between the care team and management, characterizing the vertical management model. According to the authors, a review of the management model is needed to improve the patient safety climate, highlighting the importance of good management to provide quality care.

Silva et al. 18 also observed the need to adopt measures so that nurses feel more confident in talking to the work team about problems identified during patient care, that they receive frequent feedback from the head about their professional performance, that they are more open to discuss about the occurrence of errors in the inpatient units, thus promoting greater safety for their patients.

In the study by Macedo et al., 10 which aimed to identify the patient safety culture in pediatric emergencies from the perspective of the nursing team, the authors also noted that there is a gap between the safety culture and pediatric emergencies. The results pointed to the need to strengthen and encourage the recording of errors and adverse events in the units, consequently replacing the traditional and punitive culture with a culture of safety, providing a work environment that values and encourages patient safety.

In turn, Zárate-Grajales et al., 19 carried out a study with the objective of determining the occurrence of Adverse Events (AE) in the areas of intensive care and knowing the intrinsic, extrinsic and system factors that are present in the appearance of these events, as well as the possibility of avoiding them. The authors observed that the population most vulnerable to these events are children and the elderly, that adverse events are directly related to nursing care and that, for the most part, they are preventable. The authors concluded that it is necessary to implement strategies for patient safety management to detect, record, prevent and minimize the frequency of these events, supporting the idea of the importance of having good care management.

The leadership style exercised by nurses is also related to managing quality care. Fuentes, Riveros 20 studied the leadership styles exercised by nursing assistants, professors and nursing supervisors and reported that nursing professionals
develop transformational and transactional styles to a lesser degree, whereas professors and supervisors exercise transactional leadership, highlighting the contingent reward for professors and individual consideration by supervisors. In addition, the study shows that transactional leadership is more present in women, as well as individualized consideration, which favors the development and strengthening of transformational leadership, essential for quality care management.

Finally, the study by Diogo et al. it was based on the idea that the health-disease processes experienced in childhood are inevitably characterized by fearful experiences and addressed patient safety in the emotional aspect. According to the authors, based on the principle that parents are the best caregivers, nurses should encourage their permanence with the child, strengthen the parental role during hospitalization and focus on the importance of affection and comfort as an emotional regulator. Thus, nurses must resort to humanization and non-traumatic care strategies, promoting a safe and affectionate environment, managing emotions and building a supportive relationship.

CONCLUSION

The literature presented relevant data and information directly and indirectly bringing the role of the pediatric nursing manager, addressing three main spheres that cover the role of the manager as an educator who promotes and supports continuing education, the manager’s role in the dimensioning of teams and in promoting a good working environment and the manager’s role in managing quality care and patient safety.

Another major contribution of this study is the reflection on the form of manager development in the three major areas described and in teaching to review learning strategies and provide a foundation for a possible construction of means to improve the quality of care provided.

However, the diversity of activities identified as the role of the manager and the complexity of the relationships between managers, nurses and patients highlight the need for further studies in this area in order to support improvements and transformations in the work environment and in the performance of members of the pediatric nursing teams.

References

9. Kilcullen M, Ireland S. Palliative care in the neonatal unit: neonatal nursing staff perceptions of facilitators and barriers in a regional tertiary nursery. BMC palliative care. 2017; 16(1); 32.