



# Optimizing Nurse Manager Span of Control: It's More Than Numbers

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## Project Description

Nurse Manager span of control varies widely and the absence of guidelines creates challenges in managing complex work environments. Span of control is not only the number of staff that report to one manager, but also includes additional elements of bed number, unit operation hours, throughput complexity, primary service numbers, staff skill mix, and educational levels. This presentation describes one organization's work toward understanding and managing the factors associated with Nurse Manager span of control.

## Objectives

1. Summarize key points in understanding factors associated with nurse manager span of control.
2. Identify best practices and strategies that promote a feasible and realistic nurse manager span of control.
3. List metrics that can be used to measure the impact of nurse manager span of control within organizations.

## Timeline of Activities

### CNO & Nursing Directors

- Established Executive Vision
- Developed Guiding Principles
- Applied ANA Scope and Standards for Nursing Administration

### Searched Evidence and Best Practices

- Defined Elements in Span of Control
- Designed Internal Assessment Tool: Span of Control Matrix

### Outcomes Evaluation and Ongoing Monitoring

- Implemented Additional Internal Assessments and an External Assessment Tool
- Implemented Targeted Strategies
- Created FY '13 Budget Resources

## Span of Control Evaluation Form: Categories, Elements, and Time Assessment

Nurse Manager Name				
CATEGORY	ELEMENTS	TIME	TOTAL MINUTES (auto calculates)	TOTAL HOURS (auto calculates)
Quality of Care			0	0.00
Performance Review and Appraisal			0	0.00
Hiring			0	0.00
Professional Knowledge			0	0.00
Professional Environment			0	0.00
Collaboration			0	0.00
Resource Utilization			0	0.00
Fiduciary Responsibilities			0	0.00
<b>Total Time</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

## Examples of Work Categories/Elements

**Quality of Care:** Care delivery for unit; Monitoring of nurse sensitive indicators; Customer services; Regulatory items.

**Performance Review:** Professional performance reviews; Evaluation of patient care and safety.

**Hiring:** Interviewing; Orientation; Competency reviews.

**Professional Knowledge:** Nurse manager's demonstration of current knowledge, EBP, and technical competence; Staff empowerment and shared decision making.

**Professional Environment:** Goal setting; Strategic planning; Coaching and mentoring; Conflict negotiation; Shared governance.

**Collaboration:** Networking; Team building; Work with interdisciplinary teams.

**Resource Use:** Evaluation and administration of the means for care delivery, including staffing, scheduling, payroll, recruitment; and implementing mission, vision, and values.

**Fiduciary Responsibilities:** Budgeting; Measurement of patient needs, outcomes; Benchmarking.

## Evaluation of Nurse Manager / Clinical Head Nurse Meeting Time Commitments

- Completed The Ottawa Hospital Clinical Management Span of Control Decision Making Indicators Tool;
- Used Internal Tools to assess span of control elements and capture time commitments of Nurse Managers (NM) and Clinical Head Nurses (CHN):
  - Defined 8 span of control categories
  - Obtained input on committee and task force meeting time
- Evaluated CHN administrative role.

Nurse Manager Name									
	Standing Meeting Name	Standing Meeting Time	Committee / Taskforce	Committee / Task Force Date & Time	Who Asked You to Participate	Time Commitment	Time Commitment Outside of Committee	Total Minutes (auto calculates)	Total Hours (auto calculates)
Organizational Committees/Meetings								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
Nursing Committees/Meetings								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
Unit based Committees/Meetings								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
								0	0.00
<b>Total Time</b>						<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00</b>

## Lessons Learned

Consideration and adherence to Guiding Principles resulted in better understanding about Span of Control issues:

- Geography and physical space influences decision making related to NM Span of Control;
- Quantitative and qualitative data are essential to decision making and sorting through complexity of work assignments;
- Comprehensive understanding of business components and using correct terminology is fundamental;
- NM must have partnerships with all colleagues in order to complement the organizational systems and processes;
- NM must be leaders in a job that is manageable, is compatible with professional and personal goals, and provides a support system that promotes growth.

## Results and Discussion

Systematic use of valid and reliable tools to assess NM span of control provided evidence for budget requests. The documentation also identified areas of concern and promoted transparency in information that is shared among leadership.

- Reviewed the CHN clinical to administrative ratio of 80/20, considering the unique characteristics of each nursing unit;
- Added CHNs to specific areas: Heart and Vascular Progressive Care and Intermediate Care and ICU; Pediatrics, Peds ICU and Peds IMC; Float Pool and Vascular Access Team;
- Created a manager position for Endoscopy;
- Added assistant NM for Emergency Department

Outcomes of this evaluation demonstrated statistically significant decreases in the ratio of NMs and CHNs to FTEs as well as statistically significant decreases in the ratio of NMs and CHNs to actual number of employees. The process has also contributed to the understanding that qualitative data combined with quantitative data are powerful elements in advocating for a prudent span of control that promotes patient care quality and safety.

Unit	Pre-Implementation		Post-Implementation	
	Leadership to FTE Ratio	Leadership to Employees Ratio	Leadership to FTE Ratio	Leadership to Employees
Heart & Vascular Progressive Care	34.23	41.71	29.34	35.71
Endoscopy	50.43	54.29	29.42	31.67
Pediatrics	57.78	65.63	51.36	58.33
PICU/PIMCU	58.36	70.63	51.88	62.78
HVCU/HVICU	60.54	68.57	52.97	60.00
MICU/MIMCU	56.14	76.25	34.55	46.92
Emergency Department	63.51	72.22	40.83	46.43
IV Therapy/Float Pool/PRN	66.17	193.33	56.71	165.71

## References

- Dawson, C., Aebbersold, M., Mamolen, N. et al. (2005). The Michigan leadership model: Developing a management infrastructure. *Journal of Nursing Administration*, 35(7/8), 342-349.
- Fenush, J., Reck, D., & Schirm, V., & Smith, S. (2010, October). *Nurse Manager "Span of Control" Is it Out of Control*. Virtual Poster Presentation. ANCC National Magnet Conference, Phoenix, AZ.
- Meyer, R. M. (2008). Span of management: Concept analysis. *Journal of Nursing Management*, 63(1), 104-112.
- Morash, R., Brintnell, J., & Rodger, G. L. (2005). A span of control tool for clinical managers. *Nursing Leadership*, 18(3), 83-93. Available at <http://bmjlibrary.info/16372789.pdf>