

Reflection

Nursing supervision: team management tool for qualification and care

Supervisão de enfermagem: instrumento gerencial de qualificação da equipe e do cuidado

Supervisión de enfermería: instrumento gerencial de cualificación del equipo y del cuidado

Márcia Aparecida Giacomini^I, Lucieli Dias Pedreschi Chaves^{II},
Camila Galiano^{II}, Larissa Roberta Alves^{III}, Vivian Aline Mininel^{IV},
Sílvia Helena Henriques^{II}

^I Centro Universitário Municipal de Franca – Uni-FACEF, Franca, Sao Paulo, Brazil

^{II} Escola de Enfermagem de Ribeirão Preto- USP, Ribeirão Preto, Sao Paulo, Brazil

^{III} Hospital Estadual de Ribeirão Preto, Ribeirão Preto, Sao Paulo Brazil

^{IV} Universidade Federal de São Carlos – UFSCar, São Carlos, Sao Paulo, Brazil

Abstract

Objective: to reflect on nursing supervision as a management tool for staff qualification and care.

Method: reflective study, based on scientific publications and academic-professional experience.

Results: to develop nursing supervision beyond the control of production and reproduction of authoritarian relationships, nurses need to promote articulation between team members and adopt strategies of co-responsibility for nursing care, through approaches that promote qualification and safety care in a flexible, educational, shared perspective, with a view to advancing the use of this management instrument in new dimensions, such as clinical and collaborative supervision. **Conclusion:** understanding the structures and processes related to the performance of supervision can favor the implementation of strategies to support nurses in their functions, which makes it possible to reduce the distance between theory and professional practice, overcoming daily adversities in order to qualify the team and the care.

Descriptors: Nursing Supervision; Integrity in Health; Nursing team; Nursing; Organization and Administration

Resumo

Objetivo: refletir sobre a supervisão de enfermagem como instrumento gerencial para qualificação da equipe e do cuidado. **Método:** estudo reflexivo, fundamentado em publicações científicas e vivência acadêmico-profissional. **Resultados:** para desenvolver a supervisão de enfermagem para além do controle de produção e reprodução de relações autoritárias, o enfermeiro precisa promover articulação entre os membros da equipe e adotar estratégias de

corresponsabilização pelo cuidado de enfermagem, por meio de abordagens que promovam qualificação e segurança do cuidado, em uma perspectiva flexível, educativa, compartilhada, com vistas a avançar na utilização desse instrumento de gestão em novas dimensões, como a supervisão clínica e colaborativa. **Conclusão:** compreender as estruturas e os processos relacionados ao desempenho da supervisão pode favorecer a implementação de estratégias para apoiar os enfermeiros em suas funções, o que possibilita diminuir a distância entre teoria e prática profissional, superando adversidades do cotidiano de modo a qualificar a equipe e o cuidado.

Descritores: Supervisão de Enfermagem; Integralidade em Saúde; Equipe de Enfermagem; Enfermagem; Organização e Administração

Resumen

Objetivo: reflexionar sobre la supervisión de enfermería como instrumento gerencial con el fin de cualificar al equipo y al cuidado. **Método:** se trata de un estudio reflexivo, basado en publicaciones científicas y en vivencia académico-profesional. **Resultados:** para desarrollar la supervisión de enfermería más allá del control de producción y reproducción de relaciones autoritarias, el enfermero necesita promover la articulación entre los miembros del equipo y adoptar estrategias de corresponsabilización en el cuidado de enfermería mediante enfoques que susciten cualificación y seguridad desde una perspectiva flexible, educativa, compartida, con miras al avance de la utilización del instrumento de gestión en nuevas dimensiones, como la supervisión clínica y colaborativa. **Conclusión:** comprender las estructuras y los procesos relacionados con el desempeño de la supervisión puede favorecer la implementación de estrategias que apoyen a los enfermeros en sus funciones, disminuyendo la distancia entre la teoría y la práctica profesional y superando las adversidades de lo cotidiano con el intuito de cualificar al equipo y al cuidado.

Descriptor: Supervisión de Enfermería; Integralidad en Salud; Equipo de Enfermería; Enfermería; Organización y Administración

Introduction

In different circumstances and configurations, the role of supervising the nursing team is traditionally and legally attributed to the nurse. However, the exercise of supervision is not limited to the internality of nursing. The current management model, the structural and organizational conditions of the health services, as well as the capacity for dialogue and articulation with other professionals, also influence this activity.¹

Discipline and the valorization of hierarchy, outstanding characteristics of the training and professional performance of nurses, can still be perceived today.¹ In different scenarios, it is possible to identify the practice of supervision with a focus on monitoring and correcting from the blaming of members of the team who may have made a mistake, with an emphasis on punishment, which contributed to a hostile and unresolving organizational climate when compared to the practice of support and

collaboration, through flexible approaches, which favor work environments with better care results.²⁻³

Supervision, emphasizing only production control, is a reductionist approach to the potential that this instrument has to qualify care actions, favor comprehensive care and articulate with continuing and permanent education.¹ It is a powerful managerial instrument to rethink the practice, mobilizing the team in favor of qualified, safe, critical, creative work, in addition to normative approaches.⁴ It is noticed that a possible change in the control approach is slowly emerging, with emphasis on the idea of participation and interaction of agents of the work process,² which encourages reflective professional exercise, co-responsibility and understanding of why nursing care is promoted.⁵ However, despite advances, there is a mismatch between the progress of theoretical assumptions and the context of practice of nursing supervision.

Thus, it is relevant to explore the possibilities of supervision both in research from different perspectives and through reflections on the application of new knowledge that allow articulating theoretical aspects to the current context of nursing work. These aspects should be analyzed not as something prescriptive, but built on the dynamics of services and teams, beyond production, with the appreciation of the context of practice for the qualification of the team and care.

Therefore, it was decided to organize the content of this study into sections (Approaches to nursing supervision, Challenges and potentialities of nursing supervision and Considerations for reflection), from the academic and professional experience of the authors, based on national and international scientific research on the subject. Thus, considerations were made about the current context, whose objective is to reflect on nursing supervision as a management tool for the qualification of the team and care.

Nursing supervision approaches

When reflecting on nursing supervision in the dimensions of control, teaching and political articulation, it is clear that the decision on how to conduct these actions depends on the ethical-political positions of nurses.^{1,6} Internationally, other conceptions emerge with interfaces to an educational approach, such as clinical supervision, an

instrument to support nurses in training, such as consulting and guidance, focusing on the development of clinical practice, through reflection and professional support, whose objective is to qualify care, promote resilience and reduce the stress from work.⁷

Collaborative supervision is another approach that is rising, valuing the sharing of knowledge, experiences and objectives, through the confrontation of ideas and joint analysis, based on interaction and mediation between supervisor and the supervised person. From this perspective, a horizontal and democratic posture is assumed, valuing bidirectional feedback, reflection and peer learning, whose goal is professional autonomy in the construction of work practices.⁸

Adopting different approaches to supervision requires the use of strategies focused on the development of competences and adequate support for the supervised person,³ whether in relation to nursing students or other members of the nursing team. Actions based on reflexive processes are highlighted, as well as those directed towards action and demonstration, including the observation and analysis of cases that occurred in the unit.⁹

New postures and attitudes adopted by nurses are recognized as essential components for the exercise of supervision, as they can be fruitful, since respectful relationships and promoters of adequate feedback not only favor the strengthening of the bond, but also contribute to job satisfaction and the reduction in staff turnover.^{2,10-11}

Thus, creating and systematizing sharing strategies among nurses at different stages of their professional life and with different times of work in the service can be a way of favoring the exchange between generations, contributing to the reception of newcomers, encouraging and recognizing the experience of the most experienced. This strategy makes it possible to share successful experiences, offer peer support and collaboration, reduce stress and improve performance. This type of monitoring, in a coordinated and continuous way, could resemble the clinical supervision practiced in the process of training nurses in European and North American countries.

From another aspect, if the relational and educational spheres of nursing supervision are considered, the establishment of a systematic strategy can advance to the use of professional mentoring, the preparation of leadership succession, among others.¹ Mentoring is understood as a form of guidance and support for nurses, whether

during training or when professionally inserted in the health team, since, when supporting and guiding a newly admitted or less experienced nurse, there is the counterpart of mutual and meaningful learning,¹² in order to share experience, knowledge and professional skills.

Challenges and potentialities of nursing supervision

The fact that nursing supervision is normally associated with a negative connotation, linked to the exercise of power and punishment, needs to be faced and overcome, both by the nurse and by the team, because this issue interferes unfavorably in interpersonal relationships and in the work environment.¹¹ However, this process of overcoming and building a new meaning is dynamic, with advances and setbacks that materialize collectively in the institutional context and according to the conditions of each team.

The desirable effort to re-signify nursing supervision requires considering the work of nurses in a perspective that articulates the managerial and care dimensions, under an approach of comprehensive care.^{1,13} In this case, the centrality lies in the user, with strengthened interpersonal relationships and with the possibility of team development through educational actions in the work context,⁶ in addition to the emphasis being also anchored in instruments such as communication, leadership and decision making.

Despite the complexity and multiplicity of aspects presented, nursing supervision can be understood as an instrument capable of facilitating coping with this situation, since accompanying the production of care can favor education, qualify the team¹³ and encourage collaborative work. In other words, it offers an opportunity to reflect on the meaning of the work.

For supervision to be, in fact, developed in order to qualify nursing care, it is necessary to overcome the multiple activities that dilute the nurse's work, overcome resistance to changes, both by the nurse and by the team, and demystify the negative connotation of supervision, the exercise of hierarchical positions and their social representation.^{1,13} Furthermore, it is necessary to face the peculiar adversities of interpersonal relationships, which permeate the entire nursing practice, not only in

search of humanized, ethical ways and collaborative for the exercise of daily practice, as well as to avoid and/or minimize the adoption of defensive and evasive mechanisms in the face of challenging situations in the daily work.¹³

Added to the challenges presented is the macro-context of increasing precariousness of working conditions to which the category has been exposed, which implies an increase and intensification of the workload, illness of workers, greater risks to user safety, high staff turnover, demotivation, deterioration of bonds, among others.¹⁴ Thus, nurses are faced with the challenge of understanding structures and processes related to the performance of nursing supervision as a possibility to implement strategies that support them in the exercise of their function, to create mechanisms of support and collaboration within the nursing team and strengthen the collective defenses of the class.¹

It is also necessary to consider the challenges to develop nursing supervision, in order to qualify care and equip nurses to advance in the use of coherent approaches to the comprehensive care model.¹³ These approaches must meet the needs of users, the team and health institutions, as well as the nurses' own expectations in relation to what they consider a qualified professional performance. Thus, professional and institutional efforts are needed to enable systematic and planned practice, focusing on comprehensiveness and care management,^{1,6} with the purpose of overcoming difficulties, positively reinforcing successful experiences and valuing the benefits of good practices.

It is worth reflecting on how health institutions support and offer the conditions to advance in this supervision model, how much the nurse wants a new arrangement of knowledge that allows qualified care and the development of team autonomy, as well as the availability of the assistant and nursing technicians also qualify and take responsibility for the care results. That is, it is necessary to recognize that in order to overcome challenges regarding nursing supervision, there are intentions, power struggles and worldviews to be explained (and unveiled) in everyday practice.

As strategies for overcoming, they can still be considered fewer tangible aspects, but capable of having a positive impact, such as the adoption of strategies that make it possible to rethink the meanings of work and diversify actions to approach the team in

different situations. These strategies can occur during team meetings or in rounds throughout the workday, in a horizontal and collectively constructed way.¹⁵

Investment in relational, educational approaches that make communicative interaction easier, focused on ethical-humanistic values, can favor this path. It is considered essential to create spaces and opportunities to develop welcoming, empathic listening to team members, actions aimed at interaction between professionals and focusing on supervision as a possibility to qualify the team. In addition, it is important to invest in actions that value the role of each professional and collaborative work, through activities carried out in the working environment, for continuous development, using active and dynamic learning methods, involving members of the team, with the objective of qualifying their own work.¹⁻²

Therefore, the health institution also needs to understand the importance of the role of supervision and value it, providing opportunities for educational actions in the work environment, in order to favor its implementation. Providing a welcoming and empathetic environment strengthens the relationship between team members, allowing them to feel part of the context in which they are inserted, motivating them to develop healthy work.^{10,13}

It is important to consider that both users and team members are unique and subjective beings, so the ethical, humanized, singularized and qualified listening approach is applicable to everyone. It is not possible to believe that the team treated with neglect and harshness will approach the user in a unique, welcoming and humanized way. This is the essence of the educational role of supervision, through daily approaches of ethical coexistence, of qualified, responsible, respectful care, in dealing with the team, to provide opportunities for the benefits of this practice to be extended to the user.

Furthermore, it is necessary to fulfill the responsibilities inherent to the position held and the function performed, in an ethical approach, of co-responsibility, with clarity of roles and objectives. Respectful interactions, which promote the development of autonomy and safe practices, should be encouraged, as well as approaches that are not oppressive or harassing, but educational in the sense of building knowledge and participation.^{13,16}

It is emphasized that nursing supervision has the potential to conduct care work, due to its integrative and intermediary role, capable of favoring communicative, educational and shared responsibility processes. It is also a valuable instrument for the development of qualified practices, attitudes and behaviors, constituting a possibility/strategy to direct the work in a resolute, humanized and ethical way.¹⁰⁻¹¹

It is considered essential that nurses understand that the educational process in loco, the construction of collaborative partnerships, the analysis of the work process, participation and debate with the team are more productive actions than the exaggerated value of hierarchy, control, impersonal relationship and order. Carrying out the supervision of care and work with an educational, collaborative approach allows nurses to contribute to their own development and that of the team, having a positive impact on care.¹⁷

The exercise of supervision can be made easier through interprofessional collaboration, with a view to overcoming the installments, fragmented work, and favoring comprehensive care.¹ This, in fact, requires joint and integrated action by the team, since collaboration has contiguity with mutual help and the establishment of articulated relationships to achieve the purpose of the work.¹⁰ For the supervision process to be effective, it is desirable that the main actors (supervisor and supervised) establish a learning atmosphere that favors well-being, creativity, self-esteem and motivation, which presupposes sharing of knowledge, power and decision-making.²⁻³

This educational and collaborative approach can encourage more experienced professionals in their careers, both in terms of retraining and of contributing to newly admitted professionals in the nursing team. Sharing ideas, experiences and improved problem-solving skills is also a benefit attributed to the educational nature of supervision.

In the Brazilian scenario, nursing supervision is still marked by a strong connotation of control, although the educational dimension has long emerged as a possibility to subsidize/instrumentalize permanent education actions. In European and North American countries, there is the implementation of nursing supervision approaches that emphasize the educational, clinical and collaborative dimensions, which can provide knowledge and subsidies for changes in the national scenario.^{1,3,8-9}

Considerations for reflection

Understanding the structures and processes related to the performance of supervision can favor the implementation of strategies to support nurses in their roles, which makes it possible to reduce the distance between theory and professional practice. However, this demands reflections from nurses and health service managers regarding the articulation of supervision with the work of the nursing team, as well as care management.

Thus, it is necessary that each health service, in the context in which it is inserted, diagnose the factors that limit or favor the development of nursing supervision. These needs can be either of formal and/or informal structure of organizations or motivated by objective and/or subjective factors of interpersonal relationships.

It is envisaged the possibility of advancing towards clinical supervision with nurses, in addition to academic training, in a collaborative way, whose educational approach allows them to reflect on their praxis, developing new skills and resilience in the face of the challenge of managing not only the service, the health institution, but mainly care. It is necessary to study, reflect, articulate with the experience, create possibilities and, by doing this, transform professional practice.

Therefore, it is necessary to expand knowledge through the development of studies and make use of scientific evidence, awareness and qualification of nurses, so that they can appropriate supervision as an instrument capable of improving the quality of care provided by the entire healthcare team. nursing and teamwork itself. This demands the incorporation of an educational and collaborative approach, essential to overcome the challenges that emerge in the daily work.

When understanding the contextual and relational meanings inherent to the exercise of nursing supervision, it appears that it is not possible to propose a single and generalizable model for its exercise. However, the above considerations are understood as powerful to enable, collectively and dynamically, in the particularity of different contexts, a process of building protocols and/or institutional guidelines for the development of nursing supervision.

This reflection can contribute to the use of this management tool by nurses in different scenarios, based on the perception of their own practice, in line with the understanding of structures and processes related to the performance of supervision, by enabling the professional and the institution to visualize points that can be improved, revised or even issues that need investment in research.

It is understood as a limitation of this study its opinionated character, although based on the literature. However, it is believed that it can offer relevant reflections by favoring academic and professional analyzes of health services about the use of supervision in an educational, collaborative and co-responsibility perspective.

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Author contributions

1 – Márcia Aparecida Giacomini

Corresponding Author

Nurse. Doctor - Email: marcia.giacomini77@gmail.com

Design, research development, manuscript writing and final version approval

2 – Lucieli Dias Pedreschi Chaves

Nurse. Lecturer - Email: dpchaves@eerp.usp.br

Design, research development, manuscript writing and final version approval

3 – Camila Galiano

Nurse. Master's student - Email: camilagaliano@gmail.com

Revision

4 – Larissa Roberta Alves

Nurse. Master - Email: laari.lra@gmail.com

Research development

5 – Vivian Aline Mininel

Nurse. Doctor - Email: vivian.aline@gmail.com

Review and approval of the final version

6 – Silvia Helena Henriques

Nurse. Doctor - Email: shcamelo@eerp.usp.br
Review and approval of the final version

Scientific Editor: Tania Solange Bosi de Souza Magnago

Associate Editor: Rosangela Marion da Silva

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