2017 Nursing Special Report: The Pivotal Role of Nurse Managers

By Diana Mahoney

Nurse managers exert a powerful influence on key nurse and patient outcomes, both directly and through the professional practice environment they create in their units, according to new research reported in the 2017 Press Ganey Nursing Special Report.

The report, *The Influence of Nurse Manager Leadership on Patient and Nurse Outcomes and the Mediating Effects of the Nurse Work Environment*, presents the results of cross-domain and multilevel mediation analyses of unit-level data from 661 hospitals that participated in the NDNQI® RN Survey in 2016, representing nearly 8,000 units and more than 170,000 nurse responses. It also includes the findings of a qualitative study of high-performing nurse managers from health systems across the country to gain insight into the best practices they rely on to build and sustain high-quality practice environments.

Building off of the growing body of literature demonstrating positive relationships between optimal nurse work environments and patient and nurse outcomes,1, 2 Press Ganey researchers sought to understand the degree to which bedside nurses’ perceptions of their nurse managers’ abilities influenced their perception of the practice environment, and whether specific aspects of the practice environment mediated nurse managers’ influence on patient and nurse outcomes.

The nurse manager ability metric used for the study was derived from the Nursing Work Index Practice Environment Scale (NWI-PES) and the Job Enjoyment and Job Satisfaction Scale-Revised (JSSR) of the NDNQI RN Survey, both of which have scales taken from the same parent instrument. The analyses focused on seven unit types—critical care, adult step-down, adult medical-surgical combined, adult rehabilitation, emergency department, ambulatory and perioperative—and on the following eight work environment mediators that have been linked to nurse manager performance and patient outcomes:

- Autonomy
- Professional development
- Nurse-nurse interactions
- Nurse-physician relationships
- Participation in quality improvement activities
- Safe handling and mobility practices
- Appropriate staffing levels
- Unsafe practices

AT A GLANCE

- The 2017 Press Ganey Nursing Special Report, *The Influence of Nurse Manager Leadership on Patient and Nurse Outcomes and the Mediating Effects of the Nurse Work Environment*, presents new data showing that nurse managers’ influence over specific aspects of the professional practice environment is a powerful driver of nurse and patient outcomes.

- The findings indicate that autonomy and professional development are the work environment mediators that exert the most influence on nurse outcomes, including Through the Eyes of the Workforce, job satisfaction and intent to stay, while autonomy, appropriate staffing and teamwork exert the most influence on patient outcomes.

- The report also presents the findings of a qualitative study of high-performing nurse managers, which indicate that Foundations of Quality Care is the top priority for a large percentage of these leaders.

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“We already knew, through the literature and our own research, that there is a relationship between these mediators and nurse and patient outcomes. What we were trying to understand was which of the mediators are most dependent on nurse manager ability, and the most important levers nurse managers can pull to help shape a positive work environment,” according to Press Ganey Chief Nursing Officer Christina Dempsey.

The analyses identified statistically significant relationships between nurse manager ratings and nearly all of the work environment mediators across all of the unit types. The only setting in which not all of the relationships achieved statistical significance was adult rehabilitation, where involvement in quality improvement activities and perceived unsafe staffing practices was not significantly influenced by effective nurse management.

The researchers also looked at the direct effect of nurse management on nurse and patient outcomes. The analyses showed that nurse managers have a strong influence on Through the Eyes of the Workforce measures (the degree to which nurses feel their work has meaning, they are valued and adequately recognized, and they are treated with dignity and respect), job enjoyment and intent to stay across the unit types, with only a few exceptions: Intent to stay in adult rehabilitation or ambulatory care units and job enjoyment in the ED were not significantly influenced by perceived nurse manager ability.

Some patient outcomes were also influenced directly by nurse manager ability. Specifically, statistically significant relationships emerged between nurse managers and RN-reported missed care in step-down and medical-surgical units, falls in ambulatory care units and pressure injuries in rehabilitation units. Further, at the hospital, significant relationships emerged between nurse manager ability and three of the four patient experience domains included in the analysis: the Nurse domain (friendliness/courtesy of nurses, promptness in responding to the call button, nurses’ attitude toward requests, attention paid to special or personal needs, how well nurses kept patients informed, perception of nurse skill); the Issues domain (staff concern for patient’s privacy, how well pain was controlled, staff addressed patient’s emotional needs, response to concerns/complaints during inpatient stay, inclusion of patient in treatment decisions); and the Overall Rating domain.

The results of mediational analyses designed to test the degree to which nurse managers indirectly affect outcomes through their influence on the nurse work environment show that all of the work environment mediators are substantial and meaningful levers for nurse managers to improve performance for at least one outcome.

Ranked by effect size, the strongest drivers of performance on the nurse outcomes (Through the Eyes of the Workforce, job enjoyment and intent to stay) were autonomy, professional development and appropriate staffing. Appropriate staffing and autonomy, along with the quality of nurse-nurse interaction and the perceived safety of staffing practices, were also primary drivers of nurse-rated quality of care and their perceptions of missed care.

The mediational analyses using patient experience data indicate that nurse managers also influence the quality of the nurse work environment at the hospital level, although the effect is smaller than that observed at the unit level. Perceptions of nurse-nurse interactions and professional relationships are performance drivers for the Nurse and Issues domains of the patient experience survey, and nurse perception of staffing is a primary mediator for patients’ overall rating of their care experience.

“This is really invaluable information that can truly support nurse managers in creating and sustaining an improved work environment for their direct care nurses,” Press Ganey Chief Strategy Officer Nell Buhlman said in a presentation of the research findings at the 2017 Press Ganey National Client Conference. “It provides unprecedented insight into nurse managers’ ability to impact nurse and patient outcomes by understanding and pulling the levers that are most powerful within the types of units they are managing.”

**Priorities of High-Performing Nurse Managers**

In a qualitative assessment of nurse manager priorities, Press Ganey researchers surveyed 195 nurse managers from 2016 NDNQI RN Survey–participating units with top-decile mean ratings for nurse manager support.

The participating nurse managers were given a list of management priorities and were asked to rank-order them to reflect their own practice. Foundations of Quality Care emerged as the top priority for 40% of the nurse managers.

“This is an important finding. It suggests that nurse managers understand the importance of creating a work environment that provides the foundational structure and processes that prepare nurses at the bedside to directly influence care quality and the patient experience,” Mary Jo Assi, associate chief nursing officer for Press Ganey, said in a presentation of the qualitative data during the conference. “In addition, by focusing on these essential elements, nurse managers create an environment in which autonomy and professional development, both of which are key to nurse satisfaction, can thrive.”
Personal interviews with a subset of 12 of the nurse managers who participated in the survey identified major themes that emerged around best practices and pearls for clinical practice, including the following:

- Maintaining an unwavering focus on high-quality, safe care
- Nurturing a culture of mutual respect
- Prioritizing manager visibility and relationships
- Implementing interdepartmental rounds and team building
- Adopting huddles to improve communication and teamwork
- Leveraging data and evidence to support decisions
- Focusing on safe and appropriate staffing
- Bundling bedside reporting with other initiatives

At the organizational level, “the development and support of nurse managers should be a top priority,” Assi stressed, noting that these leaders are pivotal to linking the organization’s vision and strategic plan with clinical practice at the unit level. Moreover, she added, the critical importance of nurse managers’ ability to develop robust practice environments will grow as health care systems strive to consistently and continuously achieve measurable improvement in the safety, quality and experience of care they deliver.

For more details on the research findings, download the full report [here](#).