ZAMBIA NURSE AND LIFESKILLS eLEARNING PROGRAMME

COURSE CODE: 031

COURSE TITLE: LEADERSHIP AND MANAGEMENT IN NURSING

Table of Contents

Abbreviations and Acronyms

- USAID :United States Agency for International Development
- HIV : Human Immunodeficiency Virus
- AIDS :Acquired Immuno Deficiency Syndrome
- TB   : Tuberculosis
- PMTCT :Prevention of Mother To Child Transmission
- DOD   : Department of Defence
- VMMC :   Voluntary Medical Male Circumcission
- ZDF :Zambia Defence Force
- NAC   ;National Aids Council
- NMCC : Natioal Malaria Control Centre
- SAG Sector Advisory Group
- SWAPPS :Sector Wide Approaches
- Faweza :Forum for African Women Educationalist of Zambia
- CBA Cost Benefit Analysis
- CEA: Cost Effective Analysis
- YWCA :Young Women Christian Association
- YMCA : Young Men Christian Association
- UNFPA : United Nations Populations Fund Agency
- UNICEF: United International Childrens Education Fund
- UNDP : United Nations Development Programme
- SIDA : Swedish International Development Co operation Agency
- MDGS Millenium Development Goals
- PDA : Personal Digital Assistant
- ICRC : International Committee of Red Cross

Course Overview

Welcome to the Leadership and Management Course! This is not a new course to you as we looked at Roles of a Nurse in Fundamentals of Nursing, this course will discuss into details about Leadership and Management in Nursing. As you may be aware, a Registered Nurse plays a key role in Leadership and Management. This is because soon after you graduate as a Registered Nurse, you may be offered the responsibility to be a Leader or a Manager in your various areas of operation. It is important that you are equipped with Leadership and Managerial skills so that you are able to plan, manage, advocate and mobilize resources for effective delivery of health care.

Course Objectives

At the end of this course you are expected to:

1. Define concepts in leadership and management
2. Demonstrate knowledge and skills in leadership and management
3. Mobilise resources and develop an effective plan for their utilization
4. Describe management functions
5. Apply management principles in managing health institutions
6. Manage change in any health care setting
7. Monitor and evaluate health programmes
8. Demonstrate knowledge and skills in entrepreneurship
9. Demonstrate knowledge and skills in health management information system

Course Content

The course has twelve (12) units as follows:

Unit 1: Concepts of leadership and management

In this unit we are going to define concepts used in leadership and management. We will also outline the principles of management as well as theories of management and leadership. The unit also include the discussion on organization types, purposes and on how to build organizational culture.

Unit 2: Management Functions

In this unit we are going to discuss the management functions which include planning, organizing, directing, coordinating, controlling and staffing.

Unit 3: Communication

In this unit we will define communication, explain the types of communication, process of communication, interpersonal relationship and team building.

Unit 4: Leadership

In this unit, we will define leadership, discuss the types of leadership, problem solving skills, decision making, documentation and report writing, responsibility and accountability. We are also going to discuss innovation and creativeness, assertiveness and positive attitude, motivation, delegation, supervision and management of ward affairs.

Unit 5: Policy Development and Analysis

This unit requires us to define terms used in policy development and analysis, have knowledge on the purpose and process of Policy Development. Finally you are expected to gain knowldge on policy analysis.

Unit 6: Resource Management

In this unit you will be required to gain knowledge on human, finanacial and material, and time management. You will also be expected to have knowledge and skill on health economics, hospital costing, performance management and discipline.

Unit 7: Change and leadership

Under this unit, we are going to define terms used in change and leadership. Discusss theories of change management and how to resolve conflicts.

Unit 8: Advocacy

In this unit we will define advocacy and gain knowledge and skills in counseling, collaboration and networking. Finally, you are going to acquire skills in lobbying and negotiating as well as social mobilization.

Unit 9: Quality Assurance

In this starts by , we will be expected to defining the terms used in quality assurancethen goes on to , know the difference between quality assurance and quality improvement, gain knowledge on dimensions, perspectives and cost of quality,. You are also required have knowledge on approaches to quality improvements and performance assessment.

Unit 10: Health Management Information Systems
This unit requires us to define terms used in health Management Information Systems, and to outline the principles. We will also discuss International Technology, types of health information, documentation and reporting. Consequently you will gain knowledge on the role of the nurse in information management.

Unit 11: Entrepreneurship in Nursing
In this unit, we will be required to define concepts used in entrepreneurship and outline the principles of entrepreneurship. You will also gain knowledge on partnerships, how to manage a private nursing practice and financial administration and management systems.

Unit 12: Introduction to Labour Laws in Zambia
In this unit, you will gain knowledge on Indistrial and Labour Relation Act cap 269 of 1997. You are also going to define and discuss the Trade Unions, the types of trade unions and their roles.

Assessments
- You are expected to write two tests, present one case, report on your field attachment and ward administration which will constitute 40% of your continous assessments.
- At the end of the course you will write theory examination which constitute 60% of your final examinations

Clinical Experience
At the end of your theory course, you will be expected to be attached Ward In-charges/Nursing Officers running departments in the hospitals or health centres for you to have some practical experience in Leadership and management

Duration of the Course

Leadership and Management will take you seventy (70) hours to finish.

Teaching and Learning Activities

You will be required to have basic computer skills and practice on data entry and analysis as well as on documentation.

Further Readings

Leadership and Management is one of the major courses in nursing and you are required to read widely following the curriculum. Below are some of the reference materials that may be useful in your studies:

Prescribed readings

1. Booyens,S.W (1998). *Dimension of Nursing Management*, Cape Town: Juta and company Limited.
2. Moloney,.M.M.(1979). *Leadership in Nursing: Theory strategies*, Action. St. Louis: Mosby.
3. Swanbury,R.C.(1996). *Introduction to Management and leadership for Nurses.*

Recommended readings

1. Basavanthapa, N. (2006). Nursing Administration, New Delhi, Pearson Education Limited
2. Beyers,M. (1979). Leadership in Nursing. Wakefield: Nursing Resources
3. Booyens,S.W. (1996). Introduction to Health Services Mnagement, Cape Town: Juta and company Limitted.
4. FAMS Modules
5. Maddux,R.B.(1997) Effective Performance Appraisal. London Kogan page Limitted.
6. Magee,M.D. (1999). Positive Leadership. New York: Spencer Books.
7. Maxwell, J.C. (1999). The 21 Indispesable Qualities of a Leader. Nashvile.;Thomas Nelson publishers.
8. Maxwell, J.C. (1993). Developing the Leader Within You.Nashville: Thomas Nelson publishers.
9. Naude, M and Mcyer, S.etal (1999). The Nursing Unit Manger, A Comprehensive Guide. London: Heineman.
10. Tappen, R.,(1995). Nursing Leadership and Mangement, Philadelphia, F.A Davies company.

UNIT ONE: CONCEPTS OF LEADERSHIP AND MANAGEMENT

1.1 Unit Introduction

Welcome to the first Unit in Leadership and Management! In this Unit, we are going to define Concepts in Leadership and Management. We will also describe Principles and Theories of Management and leadership. Furthermore we will discuss types of Organizations and how to build Organizational culture. Consequently you will discover that management is an essential activity to maintain a functioning organization as it uses organizational resources to accomplish goals and attain high performance. These resources include people (manpower), money and material.

1.2 Unit Objectives

At the end of this Unit, You should be able to
1. Define Leadership and Management
2. Define Concepts used in Leadership and Management
3. Outline principles of Management
4. Discuss theories of Management

5. Describe Organizations

1.3 Definition of Leadership and Management

Now that we have looked at the objectives, next we will define leadership and management and before that we ask you to do the following activity:

ACTIVITY

How would you define leadership and management? Write down your answers in your note book and compare them as you read on.

Leadership
Leadership is the art of influencing and directing people in such a way that will win their obedience, confidence, respect and loyal cooperation in achieving common objectives.
The essence of leadership is the ability to influence other people. In other words, leadership involves
influencing other people, usually in some type of group, to work toward the achievement ofthe group's goals. In addition, leaders help others develop "a sense of what is important
. . . a sense of direction and of purpose".Effective nurse leaders are those who inspire others to work together in pursuit of a shared goal. This goal may be providing excellent patient care, designing a cost-saving procedure,
or challenging the ethics of a new policy.

Management
Management is the process of planning, organizing, leading and controlling the work of organizational members and of using all available resources to reach stated organizational goals. (Stoner, 1987).
Management is a process by which managers create, direct, maintain operate purposive organization through systematic coordinated cooperative human efforts.
(Koontz 1968)

Henri Fayol defined management as planning, organizing, commanding, coordinating, and controlling the
work of a given set of employees (Wren, 1972). This definition has influenced thinkingin management, including nursing management, for years. When you look at these three definitions, they are similar though defined by defferent people.

1.4 Concepts
The following are the concepts of leadership and management
- Planning,Organizing, Directing, Controlling,Staffing

We will now look at them one by one

Planning : is a systematic approach to attaining explicit objectives for the future through efficient and appropriate use of resources available now and in the future (Booyens,1998). Planning is deciding in advance what to do, when to do it and how to do it.

Organization: it is a social unit of people that is structured and managed to meet a need or to pursue collective goals (Basavanthapa, 2009)

Directing: means giving instructions, guiding and counseling, motivating and leading the staff in an organization in doing work to achieve organizational goals (Basavanthapa,2009).

Controlling: this is determining what is being accomplished - that is, evaluating performance and, if necessary, applying corrective measures so that performance takes place according to plans".

Staffing: is the process of acquiring, developing, employing, appraising, remunerating and retaining people so that the right type of people are available in right positions and at the right time in the organization (Basavanthapa,2009).

We have looked at the concepts of leadership and management , we now are going to outline the principles of management

1.5 Principles of management
You have been working under different In-charges who apply different management styles in different departments in the Hospitals and Health Centers. Try to think of any In-charge whom you really admired during your Clinical practice and relate their Management styles to Management Principles we are going to discuss.

Most managers of organizations base their day to day running of the organizations using Henri Fayol's Principles of Management. Henry Fayol known as the Father of Management came up with 14 principles of Management.

Henry Fayol's Principles of Management

Henri Fayol laid down the 14 principles of Management(Cole, 2004). The following are the Principles of Management which ,most of the Managers apply in different Organizations; division of work, authority, discipline, unity of command, unity of direction, subordination of individual interests to the general interests, remuneration, centralization, scalar chain, order, equity, stability of tenure of personnel, initiative, espiri de corps. We will now discuss them one by one

1. Division Of Work: This means that work should be divided among individuals and groups to ensure that effort and attention are focused on special portions of the task. Fayol presented work specialization as the best way to use the human resources of the organization.

2. Authority: The concepts of Authority and responsibility are closely related. Authority was defined by Fayol as the right to give orders and the power to exact obedience. Responsibility involves being accountable, and is therefore naturally associated with authority. Whoever assumes authority also assumes responsibility.

3. Discipline: This refers to outward marks of respect in accordance with formal or informal agreements between organisation and its employees.   A successful organization requires equal input from all workers. Penalties should be applied fairly to encourage this common effort.

4. Unity Of Command: This means that all the employees should receive orders from only one manager.

5. Unity Of Direction: The entire organization should be moving towards a common objective in a common direction.

6. Subordination Of Individual Interests To The General Interests:
The interests of one person should not take priority over the interests of the organization as a whole. This is a difficult area of management.

7. Remuneration: This means that workers should receive a pay for the work done

8. Centralization: Fayol defined centralization as lowering the importance of the subordinate role. Decentralization is increasing the importance. The degree to which centralization or decentralization should be adopted depends on the specific organization in which the manager is working.

9. Scalar Chain: The Top Manager possesses the most authority; the first line supervisor the least. Lower level managers should always keep upper level managers informed of their work activities.

10. Order**: For the sake of efficiency and coordination, all materials and people related to a specific kind of work should be treated as equally as possible.**

11. Equity: All employees should be treated as equally as
possible.

12. Stability Of Tenure Of Personnel:

Retaining productive employees should always be a high priority of management. Recruitment and Selection Costs, as well as increased product-reject rates are usually associated with hiring new workers.

13. Initiative: Within the limits of authority and discipline, all levels of staff should be encouraged to show initiative.

14. Espiri de corps: Management should encourage harmony and general good feelings among employees

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ACTIVITY

Do the Principles of Management by Henry Fayol remind you of any of the principles of Management being applied by any of the Ward Managers you have worked under?

List down the principles they used?

We are through with the principles of management, let us look at the theories of management and leadership

1.6 Theories of anagement

Before going into details we will start by defining management theory

Definition of Management Theory

A Management Theory is a collection of ideas which set forth general rules on how to manage a business or organization

Management theory addresses how managers and supervisors relate to their organizations in the knowledge of its goals, the implementation of effective means to get the goals accomplished and how to motivate employees to perform to the highest standard (http://www.businessdictionary.com)

Having looked at the definition of a Management Theory, we are going to discuss Common Theories of Management applied by Managers.

There are many theories of Management but for this Unit we are going to look at five management theories that can be applied in order to achieve the goal of a certain business or organization.

These theories are as follows;

1. The Scientific Management theory
2. The Behavioral Theory
3. The Contingency Management Theory
4. The Quantitative Management Theory
5. The System Management Theory.

We are now going to explain the theories one by one

1. The Scientific Management theory (Classical Management Theory)

Frederick Taylor developed the "scientific management theory" which proposed careful specification and measurement of all organizational tasks. Tasks were standardized as much as possible. Workers were rewarded and punished according to the job performance to increase production or performance of an Organization. The classical management theory focuses on finding the one best way to perform and manage tasks.

In Nursing, an in-charge can do task allocation to Nurses on duty and follow up their task completion afterwards. Nurses who deliver required services to the patients can be rewarded in form of formal appraisals and awards. On the other hand, if a Nurse is not able to carry out the designated tasks, counseling can be done and Disciplinary measures instituted according to the Code of Conduct. Such a Management approach makes an Organization deliver quality services to its clients and the Organization earns a good name in a Market environment.

2The Behavioral Management Theory

The Manager who adopts the Behavioral Management theory believes that the workers conditions affect the quantity and quality of their works (Cole, 2004). Therefore, management must be concerned with the workers conditions in order to improve the quantity and quality of work output.

A nurse manager who applies Behavioral Management Theory takes into consideration workers' poor performance and tries to find out the possible causes so that work output is improved. On the other hand behavioral theories of leadership are based upon the belief that great leaders are made, not born. Rooted in behaviorism, this leadership theory focuses on the actions of leaders, not on mental qualities or internal states. According to this theory, people can *learn* to become leaders through teaching and observation.

3The Contingency Management Theory

Basically, contingency theory asserts that before Managers make a decision, they must take into account all aspects of the current situation and act on those aspects that are key to the situation at hand (Tappen,1995). In other words, the way a person manages changes depending on the circumstances.

In this case, a nurse manager who is a leader may need to employ different leadership styles depending on the prevailing situation, because there are no two situations which are exactly the same. Further, a leadership style that is effective in one situation may not be successful in another.

4The System Management Theory

The system management theory conceptualized that a system has interrelated parts (Cole, 2004). These parts work or operate as one or as a whole in order to achieve a specific goal. This theory signifies that the manager of an organization should be able to understand the various parts or systems that make up the entire operation.

In this case a Nurse Manager who applies the system management theory should be able to understand how different workers in different departments in the hospital contribute to the achievement of quality Health service delivery, because all departments contribute to the recovery of a patients (Team work is encouraged in all Health Care Organizations. For example; Laboratory, Pharmacy, Radiology departments, and Admission ward work towards achieving Patients' quick recovery).

6. The Quantitative Management Theory

The quantitative management theory uses quantitative tools to help plan and control nearly everything in an organization (Cole, 2004).

A Nurse Manager who adopts this Theory will try to quantify the Nursing Tasks in her Planning of task allocation and tries to control everything for the wellbeing of the patient.

We have looked at management theories lets now dicuss theories of ledership

Theories of leadership

There is a wide and ever growing variety of theories to explain the concept and practice of leadership. We will provide a brief overview of the more dominant or better known theories.

Trait Theory

This theory postulates that people are either born or not born with the qualities that predispose them to success in leadership roles. Thus certain inherited qualities, such as personality and cognitive ability, are what underlie effective leadership.

- There have been hundreds of studies to determine the most important leadership traits, and while there is always going to be some disagreement, intelligence, sociability, and drive *(aka determination) are consistently cited as key qualities.*

Skills Theory

This theory states that learned knowledge and acquired skills/abilities are significant factors in the practice of effective leadership. Skills theory by no means disavows the connection between inherited traits and the capacity to be an effective leader – it simply argues that learned skills, a developed style, and acquired knowledge, are the real keys to leadership performance. It is of course the belief that skills theory is a tool that warrants all the effort and resources devoted to leadership training and development

Situational Theory

This theory suggests that different situations require different styles of leadership. That is, to be effective in leadership requires the ability to adapt or adjust one's style to the circumstances of the situation. The primary factors that determine how to adapt are an assessment of the competence *and* commitment of a leader's followers. The assessment of these factors determines if a leader should use a more directive or supportive style.

Contingency Theory

This theory states that a leader's effectiveness is contingent on how well the leader's style matches a specific setting or situation. And how, you may ask, is this different from situational theory? In situational the focus is on *adapting* to the situation, whereas contingency states that effective leadership *depends on the degree of fit* between a leader's qualities and style and that of a specific situation or context.

Path-Goal Theory

This theory is about how leaders *motivate* followers to accomplish identified objectives. It postulates that effective leaders have the ability to improve the motivation of followers by *clarifying the paths* and *removing obstacles* to high performance and desired objectives. The underlying beliefs of path-goal theory (grounded in expectancy theory) are that people will be more focused and motivated if they believe they are *capable* of high performance, believe their *effort* will result in *desired outcomes*, and believe their work is *worthwhile*.

Transformational Theory

This theory states that leadership is the process by which a person *engages* with others and is able to *create a connection* that results in increased *motivation* and *morality* in both followers and leaders. It is often likened to the theory of *charismatic leadership* that espouses that leaders with certain qualities, such as *confidence, extroversion, and clearly stated values*, are best able to motivate followers. The key in transformational leadership is for the leader to be attentive to the *needs* and *motives* of followers in an attempt to help them reach their maximum *potential*. In addition, transformational leadership typically describes how leaders can initiate, develop, and implement important changes in an organization. This theory is often discussed in contrast with *transactional* leadership.

Transactional Theory

This is a theory that focuses on the *exchanges* that take place between leaders and followers. It is based on the notion that a leader's job is to create structures that make it abundantly clear what is expected of his/her followers and also the *consequences* (i.e. rewards and punishments) for meeting or not meeting these expectations. This theory is often likened to the concept and practice of *management* and continues to be an extremely common component of many leadership models and organizational structures.

Servant Leadership Theory

This conceptualization of leadership reflects a philosophy that leaders should be servants first. It suggests that leaders must place the needs of followers, customers, and the community ahead of their own interests in order to be effective. The idea of servant leadership has a significant amount of popularity within leadership circles – but it is difficult to describe it as a theory in as much as a set of beliefs and values that leaders are encouraged to embrace.

We have come to the end of our discussion on theories of management and leadership, now do the following self assessment exercise .

SELF ASSESSMENT

Cross match the following Terms in Column I with Their Meaning in Column II	
COLUMN I	COLUMN II
1……..Leadership	people can choose or learn to become

2……..Management 3………Attributes of a leader 4………Trait theories 5……..Transitional theory 6……...Great events theory 7………Unit of command 8……..Authority 9…….Equity 10……Unit of direction 11…….Espiri de corps 12……..Management theory	leaders The right to give orders and the power to exact obedience The top manager possess the most authority Individual influences a group to achieve a common goal Natural leaders To treat employees as equally as possible Know your organization Extraordinary leaders Management encourage harmony among employees The process of planning, organis ing, leading, and staffing Entire organization moving towards a common objective and direction Workers should receive orders from only one manager Ideas which set forth general rules on how to manage a business or organization
ANSWERS 1. D 2.J 3.G 4.A 5.E 6.H 7.I 8.B 9.F 10.K 11.I 12.M	

Having looked at the Theories which any Manager can adopt, it is important to understand that Management and leadership Theories will help a Manager, manage her Organization by applying the most appropriate Management and leadership Theory of her choice.

We have discussed management and leadership theories that a manager can apply in managing various areas of operation. Now we are going to discuss types of organization.

1.7 Organization We are going to define the word organisation

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The word Organization has been defined already in this same unit. Try to go back in Unit 1.2 and check the word Organization. What is an Organization?

Definition of an Organization

An Organization is a social unit of people that is structured and managed to meet a need or to pursue collective goals( ).

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- Committees/juries consist of groups of peers who decide collectively, sometimes by voting.

- Matrix organizations assign workers to two different hierarchies in an attempt to maximize the benefits

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- decentralized organizational forms.

- Ecologies address intense competition by holding employees accountable for smaller ventures that have to show their own profits.

Terms

- common law

Purpose Of An Organization

I hope in your answers you included some of the following purposes of the organisation

- *Helps to achieve organizational goal*
- An organization exists to achieve the overall objectives of a firm. Organizations focus attention of individual objectives towards overall objectives.
- **Optimum use of resources**
- To make optimum use of resources such as human resource, material, money, machine and methods, it is necessary to design an organization.
- **To perform managerial functions**anagement functions such as lanning, rganizing, taffing, irecting and ontrolling cannot be implemented without a proper organization.
- **Facilitates growth and diversification**
- A good organization structure is essential for expanding business activity. Organization structure determines the input resources needed for expansion of a business activity. Similarly organization is essential for product diversification such as establishing a new product.

18

We have looked at the purpose of the organization, we are now going to look at types of organisation

1.7.1Types of organization

Most human organizational structures fall into one of four types:

1. Pyramids/hierarchies,
2. Committees/juries,
3. Matrix organizations,
4. Ecologies.

We are now going to look at them one by one

Hierarchy/Pyramid Organization

The hierarchical organization is very effective in a relatively stable environment, where the efficient and predictable delivering of products is its main reason of existence. Following of rules and procedures is vital. This type of organization is often characterized by a machine bureaucracy with a role culture.
See the hierarchy/pyramid organizations. The Manager/Managing Director is usually at the top of the hierarchy as shown in figure 1.
Figure 1: Pyramid Organisation

Committee / Jury

A Committees/juries consist of a group of peers who decide collectively, such as by voting. The difference between a jury and a committee is that members of a committee usually perform further actions after the group reaches a decision, while members of a jury come to a decision and then their work is complete. In common law countries, an example is how legal juries render decisions. Juries (figure 2) are also used in athletic contests, book awards, and similar activities.

Figure 2:Jury

(Image adopted from http://www.bing.com)

Matrix

Matrix organizations assign two bosses to each worker, with each boss representing a different hierarchy. One hierarchy is "functional" and assures that experts in the organization are well-trained and assessed by bosses who are highly-qualified in the same areas of expertise. The other direction is "executive" and works to have the experts bring specific projects to completion. Projects can be organized based on products, regions, customer types, or other organizational needs. The matrix structure can combine the best parts of both separate structures. A matrix (figure 3) organization frequently uses teams of employees to accomplish work, in order to take advantage of the strengths and compensate for the weaknesses of both the functional and decentralized forms of organizational structure.

Figure 3:Matrix Organisation

Ecology

Ecology Organizations (Figure 4) face intense competition and are designed to hold all employees accountable for their areas of responsibility. Ineffective parts of the organization are allowed to starve and thriving parts are rewarded with more work Booyens, 1998). Everyone is paid for the actual work they perform, in effect running smaller ventures that have to show a profit and earn their own keep, or the employees

will be fired. Companies that use this organizational structure usually define roles and responsibilities rigidly.

Figure 4: Ecology type of an Organization
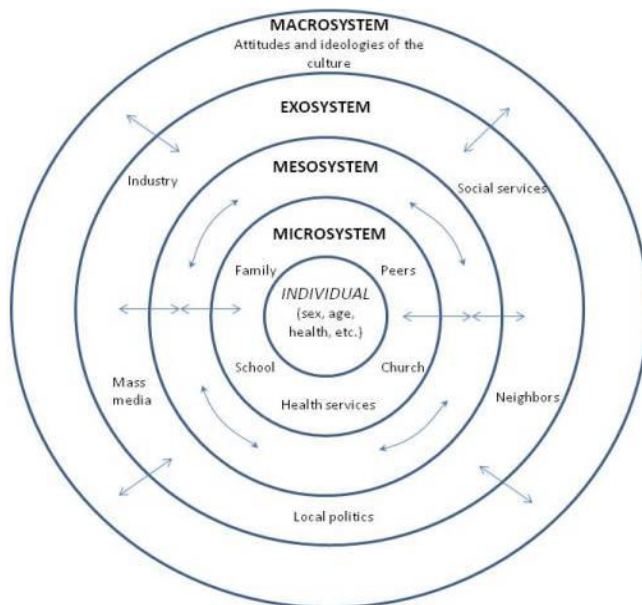
We have looked at the different types of Organizations. In summary, we can say that

- A pyramid/hierarchy has a leader who leads other members of the organization and this structure is often bureaucratic.

- Committees/juries consist of groups of peers who decide collectively, sometimes by voting.
- Matrix organizations assign workers to two different hierarchies in an attempt to maximize the benefits of both functional and decentralized organizational forms.
- Ecology Organizations address intense competition by holding employees accountable for smaller ventures that have to show their own profits.

Let us now look at organizational culture

What is Organization Culture?

Before we start discussing we are going to define organizanal culture

Organization Culture is the values and behaviors that contribute to the unique social and psychological environment of an organization. (http://www.businessdictionary.com/)

Organizational culture includes an organization's expectations, experiences, philosophy, and values that hold it together, and is expressed in its self-image, inner workings, interactions with the outside world, and future expectations.The culture of an organization can be defined as a set of values, norms and beliefs which are shared by members of the organization. Other words often used to describe the culture include the "atmosphere" norms,

Organizational Self-Assessment

Having looked at organization, its purpose and types of Organizations, we can look at Zam-beef as an example of self assessment organization.   Let us try to assess its Organizational culture.

1. What is the mission statement for Zam-beef? – Feeding the Nation.
2. Who is its customer? – Zambians and Outside market.
3. What does their customer value? – Quality Products, Efficiency in customer care.
4. What is their plan? – Provide Quality products, diversify to other products.
5. What are their results? – 100% demand on their food products.

We are now going to look at how you can build an organizational culture

1.7.2 Building an organization culture

When people reconnect with their own commitment to make a difference in the world and find that they play a meaningful role in building an organization and culture they want on shared vision and core values, they embrace and participate in the change they want to happen (Moloney, 1979). Their own language and behavior--word by word and deed by deed inevitably create a culture that truly and meaningfully enhances and

strengthens their capacity to actualize the mission of the organization. Organization culture contributes to organizational effectiveness and achievement. Organizational culture is possibly the most critical factor determining an organization's capacity, effectiveness, and longevity. It can also contribute significantly to the organization's brand image and brand promise, which can have both positive and negative implications. When culture is out of alignment with mission, core values, and operational strategy, it can become a significant liability for the organization. To keep organizational culture vital and relevant, people need a deep understanding of why the organization was created, what brought its members together in the first place, and why the group still exists today.

As earlier alluded to the culture of an organization can be defined as a set of values, norms and beliefs which are shared by members of the organization. Other words often used to describe the culture include the "atmosphere" norms, character or style of the organization and it is often reflected on the way that people in organization perform tasks, set objectives and administer resources to achieve them.

It affects the way that they make decisions, think, feel and act in response to opportunities and threats. An organization culture also influences the selection of people for particular jobs which in turn affects the way that tasks are carried out and decisions are made. Hence organizational culture is so fundamental that it affects behaviour unconsciously. That is the culture present in an organization will reflect the strength and style of the strategic leader

Characteristic of organizational Culture

- It is **learned** - it is not genetic or biological but it is learned.
- It is **shared** of it is not special to one individual.
- It is **time** - generational—culture builds up over time, it is cumulative in its development and is passed on from one generation to the other
- It is **symbolic** - it is based on the human capacity to symbolise. i.e. to create one thing to represent another.
- It is **patterned** – It is organized and intergrated, a change in one part bring changes to another part.
- It is **adaptive** – It is based on human capacity to Adapt/adjust as opposed to more genetically determed adaptive process.

- It is **innovative** and risk taking - it means that employee are encouraged to be creative and take notes.
- **Stability** – stability emphasizes the maintaining of the status …….rather than growth.
- People **orientation** – culture that take into account the effect of outcomes on people within the organization.
- Team **oriented** – This is a culture where work activities are organized around teams rather than individuals.

One important management task is that culture is created, maintained and changed to enhance organal effectiveness

We have a better understanding of organizational culture now we can look at how to build it, ew can build organizational culture by:

- Selection – selection of individual who have the knowledge. Skills, abilities to perform the job necessarily
- Top management – actions of top management has a major impact an organization culture that is what they say and how they behave.   How   refers, can create/maintain/change culture

-What they pay attention to: say and do the same thing.

-How they react to ethical incidents in organization.

-How they allocate resources.

Key Words In Culture Bulding

- ✓ **Job satisfaction**-Reflects the extent to which people find gratification in fulfillment in their work. It is the extent to which a person is gratified or fulfilled by this or her work

- ✓ **Organizational commitment**-Reflects an individuals identification with and attached for the organization and its goals wishes,
- ✓ **Job involvement**- Degree to which an employee identifies himself with his/her job and actively participates in it. They are proud about work, they care about what they do, rarely absent from work.

For you as a leader to build the culture of an organization, you need to carefully observe the following: How you allocate rewards as it can affect the culture of the organisation – do you just promote anyone or those people who put in extra effort,How you recruit/select/promote/ex –communicate and how you Socialisation new members– process of bring new members into their culture. Socialize …… through formal training or by observing the actions of higher level managers

1.8 Summary

We have defined leadership and management. We have also discussed concepts of leadership and management which include planning, organizing, directing, controlling and staffing.

We also looked at principles and theories of management. We finished by discussing organizations types, purpose and Culture.

SELF ASSESMENT

INSTRUCTIONS TO CANDIDATE: INCIRCLE THE MOST APPROPRIATE ANSWER
1. The Nurse In-charge stresses the need for all the employees to follow orders and instructions from her and not from anyone else. Which of the following principles does she refer to? a. Scalar chain b. Discipline **c**. Unity of command d. Order   2. The Sister In-charge influences the customary way of thinking and behaving that is shared by the members of the surgical department. Which of the following terms refer to this? a. Organizational chart b. Cultural network **c**. Organizational structure d. Organizational culture   3. One leadership theory states that "leaders are born and not made," which of the following theories does it refer to? a. Trait b. Charismatic **c.** Great Man d. Situational

ANSWERS:
 	
      1. C
      2. D
      3. **A**

1.9 References
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UNIT :MANAGEMENT FUNCTIONS

2.1   Unit Introduction

 Welcome to unit two. In unit one, you defined leadership and management and also described organizations.

In guiding and directing the efforts of others, the manager performs a number of functions. You will now have to discuss the management functions which include planning, organizing directing, controlling and staffing.

Management functions lead to the creation of a cohesive organization and whatever type of a manager we are talking about, he/she performs these functions in one way or another.

2.2 Unit Objectives

At the end of the Unit the student should be able to:

1. Discuss the management function of Planning

2. Discuss the management function of Organizing

3. Explain the management function of directing

4. Discuss the management function of coordinating

5. Discuss the management function of controlling

6. Explain the management function of staffing

The following are the management function: planning,organizing,directing, controlling and staffing. We are going to discuss them one by one2.3   Planning

We are now going to discuss management function of planning. But before we go into our details let us do the following activity:

Activity
What do you understand by the term planning?
Write down your answer in your note book and compare as you read the unit

Definition of planning

Planning is the process of setting goals, developing strategies, and outlining tasks and schedules to accomplish the goal.

Planning also involves devising a systematic process for attaining the goals of the organization. It prepares the organization for the future. Every organization must plan for change in order to reach its ultimate goal. Effective planning helps an organization adapt to change by identifying opportunities and avoiding problems. It sets the direction for the other functions of management and for teamwork. Planning improves decision-making.

From the above definitions, we can simply say that planning is determination of a course to achieve a desired result. It is a rational and systematic way of making decisions today that will affect the future of the organization. It is a kind of organized foresight which involves the predicting of the future as well as attempting to control the eventsPlanning includes deciding **WHAT** is to be done, **HOW** it is to be done, **WHEN** it is to be done, and by **WHOM** it is to be done.

Having defined planning, let's now look at the types of planning.
Types:
Strategic planning: is conducted by top management and is a process of determining overall objectives of an organization. It is a long range type of planning, e.g. for three years (Basavanthapa,2009). Strategic planning is the process of developing and analyzing the organization's mission, overall goals, general strategies, and allocating resources. A strategy is a course of action created to achieve a long-term goal.

Intermediate planning/Tactical planning: Tactical plans have shorter time frames and narrower scopes than strategic plans. Tactical planning provides the specific ideas for implementing the strategic plan. It is the process of making detailed decisions about what to do, who will do it, and **how to do it.** this type of planning covers a life time of six months to one year. . Usually done by middle management These also have a task of polishing up on top management's plans.

- **Operational planning:** this is planning done by lower level managers. These are short range plans covering a life span of one week to one year. These plans are more specific and determine how the specific job should be done in the best possible way(Basavanthapa, 2009). Supervisors implement **operational plans** that are short-term and deal with the day-to-day work of their team. Supervisors set standards, form schedules, secure resources, and report progress. They need very detailed reports about operations, personnel, materials, and equipment. The supervisor interprets higher management plans as they apply to his or her unit. Thus, operational plans support tactical plans/intermediate. They are the supervisor's tools for executing daily, weekly, and monthly activities. An example is a **budget**, which is a plan that shows how money will be spent over a certain period of time. Other examples include scheduling the work of employees (duty roster) and identifying needs for staff and resources to meet future changes. Resources include employees, information, capital, facilities, machinery, equipment, supplies, and finances.

we are now going to outline the importance of planning. Before we continue our discussion, let us do the following activity:

ACTIVITY
Mention the importance of planning?
Write down your answers in your note book and compare as you read

Importance of Planning
- reduces overlapping and wasteful activities
- Planning facilitates decision making.
- establishes standards for controlling
- It enables us to determine resources that we need
- It enables us to assess progress towards achieving the set objectives
- It prevents possibility of crisis management
- provides directions.

Now that we have discussed planning let's look at the second management function which is organizing

2.3   Organizing.
Learner let us do the following activity before we go into our discussion:

ACTIVITY
What do you understand by the term organizing?
Write down your answer in your note book and compare as you read the section

Definition of Organizing:
Organizing is the process of identifying and grouping of the works to be performed, defining and delegating responsibility and authority and establishing relationships for the purpose of enabling people to work most efficiently.The function of organizing involves the determination of activities that need to be done in order to reach the organization goals.

Organizing involves arranging the necessary resources to carry out the plan. It is the process of creating structure, establishing relationships, and allocating resources to accomplish the goals of the organization, or Organizing is establishing the internal organizational structure of the organization. The focus is on division, coordination, and control of tasks and the flow of information within the organization. It is in this function that managers distribute authority to job holders.

The function of organizing involves the determination of activities that need to be done in order to reach the organization goals.

Assigning these activities to the proper personnel and delegating the necessary authority to carry out these activities in a co-ordinated and cohesive manner.

Organizing requires a formal structure of authority and the direction and flow of such authority through which work sub-divisions are defined, arranged, co-ordinated, so that each part is related to other parts in a united and coherent manner so as to attain the prescribed objectives.

It follows therefore, that the functions of organizing is concerned with:-

(a) Identifying the tasks that must be performed and grouping them whenever necessary.

(b) Assigning these to the personnel while defining their authority and responsibility.

(c) Delegating authority to these employees.Establishing a relationship between authority and responsibility.

(e) Considering the social and economical consequences associated with various organizational firms

By combining people, work can be done and physical factors into the meaningful structures goals can be achieved more effectively. Management must organize

for effective work performance. Activities must be arranged in workable sequence eg organizing must include, making available the information, equipment, supplies and other resources that will be needed by the workers eg. When to open a nursing care plan. Effective organization requires that the Manager delegates responsibilities of various duties according to job description and capability of workers.

Now learner, do the following activity before we look at the importance of organizing.

Activity
 What is the importance of organizing?   Write down your answers in your note book and compare as you read this section

Importance of Organizing
- Organizing helps Organizations to reap the benefit of specialization.
- Organizing provides for Optimum utilization of resources.
- Organizing achieves co-ordination among different departments.
- Organizing creates scope for change.

We have discussed management function of organizing , now let's look at the third management function which is Directing.

2.4   Directing.
Again learner before we go into our discussion let us do the following activity:

ACTIVITY
What do you understand by the term directing?
Write down your answer in your note book and compare as you read the section

Definition of Directing:
Directing deals with the steps a manager takes to get subordinates and others to carry out plans
Directing means giving instructions, guiding and counseling, motivating and leading the staff in an organization in doing work to achieve Organizational goals (Basavanthapa,2009). Directing involves the guiding, leading, and overseeing of employees to achieve organizational goals. We can also say that directing is influencing people's behavior through motivation, communication, group dynamics, leadership and discipline. The purpose of directing is to channel the behavior of all personnel to accomplish the organization's mission and objectives while simultaneously helping them

accomplish their own career objectives The directing function is concerned with leadership, communication, motivation and supervision so that the employees perform their activities in the most efficient manner possible, in order to achieve the desired goals. It can also be looked at as initiating and directing the work to be done in an organization. Giving direction is one way of carrying out decisions that you made about delegation of duties and responsibilities to the various members of your staff. Information must be disseminated or given in such a way that every member/worker knows exactly how to do it. This intails specific directions eg assignment of patient care, it also includes helping the staff understand how they can contribute to the care of a patient as well as the level of competency expected in her job.

A professional nurse must know her/his staff well enough to assess them as individuals, what their skills are and what they need to learn, she must decide whether to use democratic or autocratic leadership as detected by the needs of the group in a particular situation.

The major aspect of managing involves observation of the activities following a given direction. Such observations include continuous scrutiny and evaluation of workers, their working conditions and the result of the work performed therefore, directing involves the following: Supervising, Communicating, Motivating, Counseling, Performance appraisal
and Disciplining for the purpose of gaining maximum contribution from the staff.

Behind directing is the idea of putting effective decisions, plans and programmes that, may have previously been worked out for achieving the goals of organizations.

Well learner, we are now going to discuss the importance of directing as a management function. Before we go into the details of our discussion, let us do the following activity:

ACTIVITY
Mention the importance of directing? Write down your answers in your note book and compare as you read

Importance of Directing
- Directing initiates actions to get the desired results in an organization.
- Directing attempts to get the maximum out of employees by identifying their capabilities.

- Directing is essential to keep the elements like Supervision, Motivation, Leadership and Communication effective.
- It ensures that every employee works for organizational goals.

Now that we have discussed the management function of directing , let's look at the fourth management function which is that of coordinating.

2.5   Coordinating

Well learner, here is another activity for you.

ACTIVITY

What do you understand by the term coordinating?
Good! Now that you have answered this question, compare your answer as you read

---

Definition of CoordinatingBefore we start discussing we will define coordination
Coordinating is the process of linking up different departments and human resource in order to achieve set objectives of an organization or Co-ordination is the orderly synchronization of efforts to provide the proper amount, timing, and directing execution resulting in harmonious and and unified actions to a stated objective (Basavanthapa,2009

It involves ensuring that the diverse but interrelated activities in the organization are directed towards the accomplishment of organizational goals.

If the activities of the members are not coordinated, people will be working at cross-purposes, and in some cases against each other. A Manager, in managing, must co-ordinate the work for which he/she is accountable by balancing timing and integrating it.

ACTIVITY

Mention the importance of coordinating?
Write down your answers in your note book and compare as you read this section

---

Importance of coordination

Creative force

Group efforts when coordinated create a result greater than the sum total of the individual and isolated.
- *Unity of direction*
- Co-ordination ensures unity if direction by way of securing spontaneous collaboration on the part of different departments.

High employee morale
- Co-ordination enhances the general level of employee morale and provides satisfactionn

Diverse and specialized activities
- Total activities of an organisation are divided into several units and subunits on the basis of either product specialisation.

To avoid personal rivalries and prejudice
- Human organisations give rise in course of time to the development of personality politics among members.

To avoid conflict of interests
- Subordination of individual interest to general interest often happen in organizations. There is need for coordination to avoid conflicts or overlapping in the work of employees or units or as organisation.

We have finished discussing coordination function and its importance; now let's look at the next management function which is that of controlling.

2.5 Controlling.
Here is an activity for you before we discuss the function of controlling.

<div style="border:1px solid black; padding:8px;">

ACTIVITY

What do you understand by the term controlling? Write down the answer in your note book

Good! Now that you have attempted this question, try to compare your answer as you read this section

</div>

Definition of Controlling
Controlling is determining what is being accomplished - that is, evaluating performance and, if necessary, applying corrective measures so that performance takes place according to plans"(Cole, 2004). Controlling is a four-step process of establishing performance standards based on the firm's objectives, measuring and reporting actual performance, comparing the two, and taking corrective or preventive action as necessary. Controlling involves verifying that actual performance matches the plan. If performance results do not match the plan, corrective action is taken

The manager must make certain that the whole thing occurs in compliance with the plans adopted, the directions issued and the principles established. This is the controlling function of management, and involves three essentials that is:

Establishing performance standards.

Evaluating current performance and comparing it against the established performance standards.

Taking corrective action to any performance that doesn't meet established standards.

In the lack of sound control, there is no assurance that the objectives which have been set will be realized. The management may go on committing faults without knowing them.

ACTIVITY

What is the importance of controlling?

Write down your answer in a notebook and compare it as you read

---

Importance of Controlling

Control system acts as an adjustment in organizational operations. It mainly checks whether plans are being observed and suitable progress towards the objectives is being made or not, and if necessary action to control the deviations.

Exercising some authority and forming superior-subordinate relationship throughout the organization can be established through controlling.

With the presence of authority or control the individuals will work properly and exhibit better performance to reach the targets set for them.

Control system ensures the organizational efficiency and effectiveness. When Proper system exists the organization effectively achieves its objectives.

Now that we have defined the management function of controlling, let's look at the last management function which is staffing.

2.6   Staffing

Here is an activity for you before we go into our discussion

ACTIVITY

What do you understand by the term staffing?

Good! Now that you have attempted this question, compare your answer as you read the section

---

Definitions

Staffing is the function by which managers build an organization through the recruitment, selection, and development of individuals as capable employees.

Staffing is that part of the process of management which is concerned with acquiring, developing, employing, appraising, remunerating and retaining people so that the right type of people are available in right positions and at the right time in the organization. In the simplest terms, staffing is 'putting people to jobs'

ACTIVITY
What is the importance of staffing?
Write down your answer in your note book and compare as you read the section

Importance of Staffing
- Filling the Organizational positions.
- Developing competencies to challenges.
- Retaining personnel i.e. professionalism.
- Optimum utilization of the human resources.

2.7 Summary
In this unit we discussed various functions of management. These are:
Planning deciding what is to be done)Planning is determination of a course to achieve a desired result. It is a rational and systematic way of making decisions today that will affect the future of the organization.   we also discussed the types of planning which are strategic or long term planning, immediateor tactical planning and lastly operational planning which involves short term planning, Other functions of management are organizing - Deciding how to do it)

, directing which involves giving instructions on what to do, coordinating which is the intergration of all activities well to avoid duplication of activities, controlling that ensuring the all the activities are on course and there is no diversion from the plans and staffing which ensures that there is manpower to carry out these managemen functions.
We also looked at the importance of these functions.
We have come to the end of unit two. Now let's see how much you can remember. Follow the instructions below and answer the questions.

Self ASSESSMENT
Match the following management functions in column I with their corresponding definitions in column II.

Column I	Column II
1. Directing	A. generating plans of action for immediate
2. Controlling	term, medium term and long term periods
3. Staffing	B. organizing the resources, human
4. Planning	resources in the best manner
5. Orgainising	C. positioning right people, right jobs at the

	right time D. communicate and coordinate with people to lead and enthuses them to work effectively together to achieve the plans of the organization E. evaluating the progress against the plans and making corrections either in plans or execution
Answers. *1.* *D* *2.* *E* *3.* *C* *4.* *A* *5.* *B*	

2.8 References

1. Basavanthapa, N. (2009). *Nursing Administration*, New Delhi, Pearson Education Limited

2.Tapen RM etal (2001) *Essentials of nursing leadership and management*, Philadelphia, F.A Davies company.

UNIT THREE: COMMUNICATION

3.1 Unit Introduction

Welcome to Unit 3 which is on Communication ! This is not a new Topic but having looked at Communication in Public Health Nursing, we are going to discuss Communication in detail. As you are already aware, a Nurse plays an important role in communication because she communicates with Health care team members as well as communicating to Patients. It is important that you are equipped with knowledge and skills applied in Communication so that you apply the skills used in Communication in your day to day life.

Communication is a common phenomenon in our day to day life. Communication keeps us in touch with our friends, relative's workmates. What is communication? Communication is the most important and more effective ingredient of Leadership and Management Circles. Interpersonal communication is the basis of all and involves some form of direction and feedback. Even in life, communication plays a very important role among friends within the family and in all social groups.

Communication is important to you because this topic provides you with Communication skills you will need to apply as you offer care for your clients, as you will be handling interpersonal relations and in team building through the Communication process.

In this Unit, we are going to look at the types of Communication, Communication Process, interpersonal relations and team building.

3.2 Unit Objectives.

At the end of the this Unit you should be able to

1. Define Communication.
2. Outline types of Communication.
3. Explain the communication process.
4. Explain interpersonal relations.
5. Explain team building.

Definition of Communication

Let us start start by defining communication. There are many definitions by defferent writers, we are going to look at two definitions

Communication is referred to as a two way process of exchanging or sharing ideas, feelings and information (Park, 2005).

Communication is the exchange of information between individuals through a common system of signs, symbols, or behavior. Is the process of sharing ideas thoughts and feelings with other people. These ideas, thoughts and feelings should be understood by the people we are talking with or else you are making no sense. Communication involves; Speaking,Listening and Observing

Communication is learned from other people (children from parents, adults learn to improve the ways by observing others)

It is a complicated mixture of visual, verbal and other sensory experience

Now that we have defined communication we are going to discuss the the types of communication. Before we proceed do the following activity

---

Activity

Mention the types of communication you know write them down in your note book

---

3.3 Types Of Communication

There are 2 main types

- i. Verbal   - is the use of word.
- ii. Non Verbal

I hope in your activity you included these types of communication.we are going to look at them one by one

Verbal Communication

It uses – spoken words or written work.

It is a code that conveys specific meaning as words are combined.
This type of communication known as face to face communication and is in form of direct talk and conversation or through the public address system or radio. It also includes telephone calls and talking on the intercom. This type of communication is a very effective way of changing attitudes, beliefs and feelings.

Advantages

- Direct, simple and time saving and least expensive
- Allows for feedback and spontaneous thinking
- It helps in avoiding delays, red tape and other formation
- It conveys personal warmth and friendliness
- It develops sense of belonging because of personalized contact.
- Any misunderstanding can be cleared immediately.

Disadvantages

- No formal record of the transaction
- Some distortion of information may occur especially if the verbal message is to be passed through a long chain of command
- Spontaneous response may not be carefully thought about
- Different meaning of the message might be conveyed by manner of speaking through the tone of the voice and facial expression
- The spirit of authority cannot be transmitted effectively in verbal communication.

Non Verbal Communication
It is a code that conveys specific meaning without use of word that is, gestures, symbols, behaviour etc. There is a saying which goes "ACTIONS SPEAKS LOUDER THAN WORDS." Body language and facial expressions are important components of action as a form of communication. These actions includes gestures. Cue is a phrase of action showing a signal for the next person to act.
Gesture – Is a movement, usually of hands to express a certain meaning. The most common non verbal signs which our patients can observe are crying, facial expressions, yawning, restlessness, etc. It is through body language that we express our attitudes towards an issue, a person or a person's behaviour. As a nurse you should be skilled in interpreting the body language of your clients. This will help you to understand their concerns and needs.

Observation and Reading – These include observing a certain act, reading notices and posters. The real meaning can easily be misinterpreted. Posters can also cater for people who cannot read.

Written Communication

It's putting in written and generally in form of instructions, letters, memorandums, formal reports, policy manuals rules and regulations, information bulletin etc. This channel of communication is most effective:-

- When communication is that of general formal information
- When you want to ensure that everyone concerned will get the same inform.

Advantages

- It serves as evidence of events and proceedings.
- Provides a permanent record for future references.
- Reduces the possibility of misunderstanding and interpretation
- It can serve time when many people are to be contacted at the same time.
- It is reliable for transmitting lengthy statistical data.
- It appears formal and authoritative for action.
- It can be checked for accuracy.

Disadvantages

- It can be very time consuming for lengthy reports.
- There is no immediate feedback opportunity to be sure that the receiver has understood the message.
- It leads to excessive formality in interpersonal relationships eg marriage.

The flow of information one way which is one way communication or the flow of information may be two which is known as two way communication so verbal or non verbal communication may be two way or one way communication. In case you do not understand thewhat one way or two way communication it is further explained below:
One – way communication (didactic method)- the flow of information is "one way" from the sender to the audience e.g. lecture method in classrooms. The drawbacks are
Knowledge is imposedLearning is authoritative
Little audience participation
No feedback
Does not influence human behaviour

Two way communication (Socratic Method) the Socratic Method is a two way method of communication in which both the communicator and participatants. The audience may raise questions and add their own information, ideas and opinions to the subject. The process of learning is active and democratic. It is more likely to influence behaviour than one way communication.

As much as communication may be one or two way, communication may also be formal or informal. We are also going to look at them one by one

Formal Communication

Formal communication follows lines of authority which may downward communication or upward communicatiom

Down ward: This is from the superior to subordinates or from top management to the workers through various hierachical communication centers. Down ward channel is used to give work instruction to employees and also other information necessary to exercise authority. Workers should not only be told what to do but also why they are doing it. The message must be filtered down through normal channels of communication hierarchy.

Upward: This moves in the opposite direction and provides a clean channel for sending information, opinion and attitude up through the organization sector. The information may consist of client, patient reports, production reports, reports of very ill patients, or admitted VIP's. Upward communication encourages employees to contribute ideas for improving efficiency in an organization.

Informal Communication (Grapevine)

This is the horizontal or lateral communication among equals. It is informal in nature and is necessary in promoting a supportive organization climate. It is built around social religion and social interaction among members of an organization eg supervisors at the same level but from different departments having lunch or coffee together can discuss and organize their activities in a such a manner that they complement each other and the process is beneficial to the organization. This type of communication is quick and accurate. Informal communication can also include messages which are discussed casually and are not recognised by management. This type of informal communication is know as the 'grapevine'. Information from the grapevine often contains half-truths and often emanates from staff at low-level or middle-levels in the organisation. It is common in organisations where a certain cadre of staff feels that their needs are not being addressed or where top management fails to clarify issues. The grapevine gives a warning of impending issues of concern and therefore should not be ignored. One

way to minimise the grapevine is to ensure that you provide current information and communicate effectively.

Having discussed the types of communication, we are going to look at the process of communication.
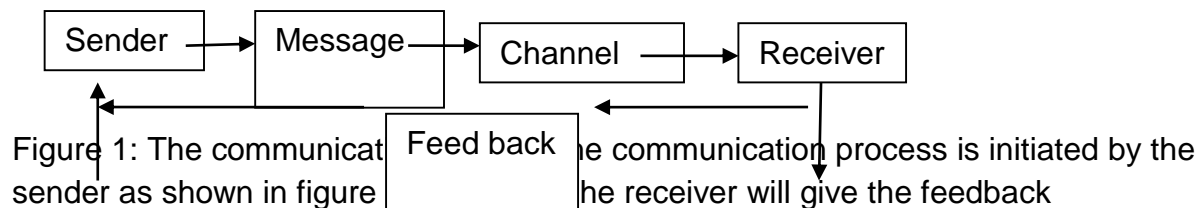
3.4 The Communication Process

What is a communication process?

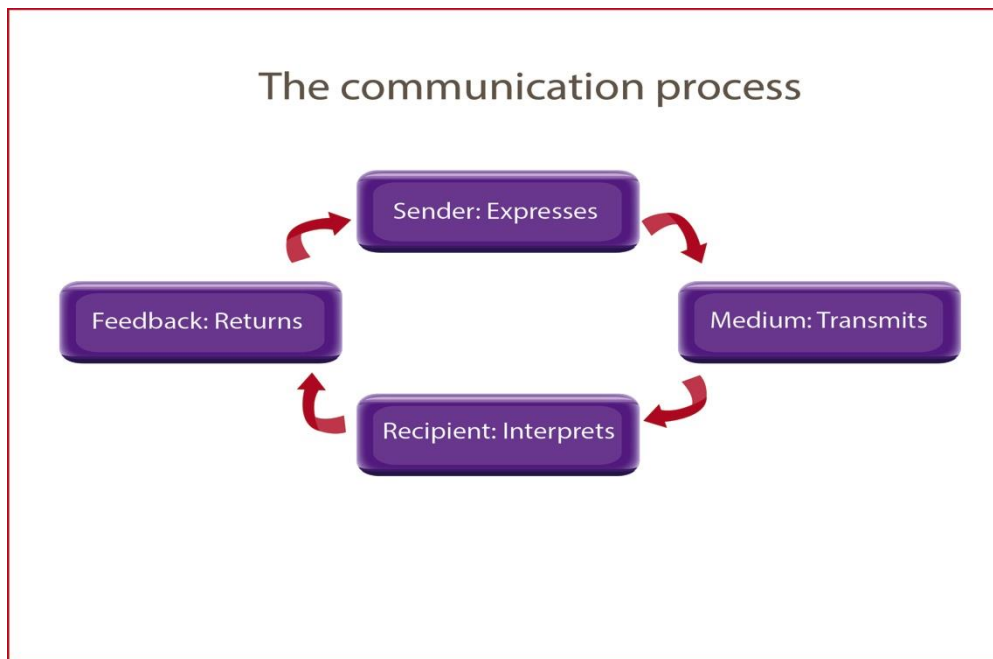This is simply the passing of information from sender to the receiver.

Communication   as the basis for human interaction is a complex process and has the following components:

- Sender (source)
- Receiver (audience
- Message (content)
- Channel (medium)
- Feedback (effect)

Figure: 5 Communication Process

```
┌─────────┐      ┌──────────┐      ┌──────────┐      ┌──────────┐
│ Sender  │ ───▶ │ Message  │ ───▶ │ Channel  │ ───▶ │ Receiver │
└─────────┘      └──────────┘      └──────────┘      └──────────┘
     ▲                  ┌──────────────┐                   │
     └──────────────────│  Feed back   │◀──────────────────┘
                        └──────────────┘
```

Figure 1: The communicat   Feed back   he communication process is initiated by the sender as shown in figure   he receiver will give the feedback

Figure 6: Communication Process

The communication process

Sender: Expresses

Medium: Transmits

Recipient: Interprets

Feedback: Returns

We are now going to look at the components/elements of communication in detail one by one

Sender

The sender (communicator) is the originator of the massage. To be effective communicator one must know :

- His/her objectives
- His audience ie its interests and needs
- His message
- Channels of communication
- His professional abilities and limitation

The impact of the message will depend on his own social status (authority, knowledge and prestige in the community.

Receiver

All communication must have an audience; this may be a single person or a group of people. Without the audience communication is nothing more than noise. There are two types of audience, the controlled and uncontrolled. A controlled audience is one which is gathered together by a common interest. It is a homogenous group. An uncontrolled or 'free' audience is one in which has gathered together from motives of curiosity. This type of audience poses a challenge to the ability of the educator. The more homogenous the audience is, the greater the chances of an effective communication.

Message

A message is the information (or technical knowhow) which the communicator transmits to his audience to receive, understand, accept and act upon. It may be in a form of words, pictures or signs. A good massege should be:

- Meaningful
- In line with the objectives
- Based on felt needs
- Clear and understandable
- Specific and accurate
- Timely and adequate
- Fitting the audience
- Interesting
- Culturally and socially appropriate.

Transmitting the right message to the right people at right time is a crucial factor for in successful communication.

Feed back

This is the response to a message made by the receiver and it is important in communication because it confirms receipt of the message and reveals that it was received and understood

Medium/Channel

Is the channel used through which the message flows

As we communicate to each other there may be barriers to communication, now we are going to look at these barriers to communication

Barriers To Effective Communication

A barrier is anything that hinders effective communicationThe most commonest barriers are:

- Distortion or omission of communication by sender
- Misunderstanding
- Information overload
- Individual bias and selectivity
- Status differences
- Fear
- Lack of trust
- Verbal difficulties leading to misunderstanding
- Inadequate machinery for communication.
- Lack of communication skills
- Type of tone used
- Listening to what you want to hear
- Different educational background
- Culture etc

Information must be interpreted and understood in the same manner as it was meant by the sender otherwise; it will not be achieve the desired results. This will lead to a

breakdown in communication. Some of the barriers to effective communication are as follows.

- *Noise* – This is an external factor which interferes with effective communication. The interference may be due to;

  - Noisy surroundings which may lead to destruction or blocking of a part of the message.
  - Poor radio wave transmission.
  - Static effects in telephone conversation.

  - *Poor Timing* – A message must be sent at an appropriate time to avoid problems.
  - A Message that requires action in the distant future may be forgotten by the time action is taken. A last minute communication with a deadline may put too much pressure on the receiver (and may result in resentment) The manager must know when to communicate.

- *Inappropriate Channel* – The manager must decide on the most effective channel of communication. It could be written, face to face conversation, telephone call or a combination of these modes. Face to face communication generally emphasizes the strength of the form because it's supported by non-verbal gestures, eye contact, facial expression and tone of the voice.

- *Inadequate Information* – The information must be meaningful to the receiver too little, too much and too ambiguous information should be avoided.

- *Organizational Structure* – The organizational structure should be such that the chain of command and channels of communications are established and responsibility and authority are clearly assigned.

Semantic Barriers – Occur due to difference in individual interpretation of words and symbols. The choice of a wrong word and meaning of the intended message.

We may have these barriers to communication, we need to find a way of overcoming these barriers. Now we are going to look at how to overcome barriers of communication

Overcoming the Barriers of Communication

Feedback – This helps to reduce misunderstanding. The receiver must be given an opportunity to ask questions for clarification in order for additional information to be transmitted.

In upward Communication – Provide opportunity for workers to give suggestions. Management should take the workers suggestions seriously, acknowledge and take action appropriately.

Listening – This is a very important part of communication. Good listening habits lead to better understanding and good relationship to each other.

Language – Language used in communication should be simple and factual. The tone of the voice, the expression and emotion should receive proper attention. Make sure that there are no outside interruption and interferences during the course of conversation.

Integrity – In an organization, the flow of information must not by pass certain levels of people. When certain levels are omitted it creates bickering, destruction, confusion and conflict.
We have finished our discussion in communication, we are now going to look at interpersonal relationships

3.5 Interpersonal relations
Before we start discussing interpersonal relationship, we define it
Definition
An interpersonal relationship is a strong, deep, or close association/acquaintance between two or more people that may range in duration from brief to enduring (Levinger, 1983).
It refers to the manner in which people respond and identify with each other in the situation of everyday living.
Or it is the dynamics of how people react and interact with each other.
The main purpose is to achieve a common goal with the people you are interacting with. The relationship may be formed for a dominate reason eg the nurse – patient relationship will continue as long as the patient is on the ward or in theatre. Thereafter it may break. This type of relationship is also referred to as *Therapeutic Relationship*Interpersonal relationships are formed in the context of social, cultural and other influences. The context can vary from family or kinship relations, friendship, marriage, relations with associates, work, clubs, neighborhoods, and places of worship. They may be regulated by law, custom, or mutual agreement, and are the basis of social groups and society as a whole.
We are now going to look at how you can develop interpersonal relationships
Developing Interpersonal Relationships
Interpersonal relationships are dynamic systems that change continuously during their existence. Like living organisms, relationships have a beginning, a lifespan, and an end.

They tend to grow and improve gradually, as people get to know each other and become closer emotionally, or they gradually deteriorate as people drift apart, move on with their lives and form new relationships with others.

Development of a relationship follows some of the following stages:

- *Acquaintance and Acquaintanceship* – Becoming acquainted depends on previous relationships, physical proximity, first impressions, and a variety of other factors. If two people begin to like each other, continued interactions may lead to the next stage, but acquaintance can continue indefinitely.
- *Buildup* – During this stage, people begin to trust and care about each other.
- *Continuation* – This stage follows a mutual commitment to quite a strong and close long-term friendships (Levinger,1983).

Now that we know how to develop interpersonal relationships, we are going to look at the types of relationships, before we proceed there an activity for you.

Activity:
Write the types of relationships you know in your note book and compare your answers below

---

Types Of Relationships

There are three types of relationships:

- ***Reciprocity:*** This is the ideal relationship. This type of relationship is characterized by loyalty, self-sacrifice, mutual affection, and generosity. This friendship is based on equality.
- ***Receptivity:*** In this type of relationship there is an imbalance in giving and receiving. One person is the primary giver and the other is the primary receiver. However, there is still much to gain out of this relationship so it is a positive one.
- A***ssociation***: This is a cordial relationship, but there is no depth.
- We are through with the types of relations, what then are the characteristic of interperponal relation which is the next sub topic we are goin g to discuss

Characteristics of Interpersonal relationship

Is an intellectual and emotional bond between the nurse manager and the nurse and is focused on the goals of the organisation. The following are the characteristics of interpersonal relationship

Respects the subordinates as an individual, including:

Maximizing the subordinate's abilities to participate in decision making and treatments.

Considering ethnic and cultural aspects

Considering family relationships and values.

Respect clients confidentiality

Focuses on client's well-being

Is based on mutual trust, respect and acceptance

 Now that we know what interpersonal relationships, we are going to discuss about team building

3.6 Team Building

A Manager spends a lot of time leading teams and dealing with people in groups. Getting people to work well together is as important as motivating individuals. a team is a group of people who work together to achieve a common goal. It can also be defined as a group of people with skills that compliment each other, and who work together to complete a task, job or project.

The features of a team are:

- Team members are inter-dependent in the performance of their tasks and responsibilities.
- Team members agree and must work together effectively to achieve their goal.
- Each team is held together by a common purpose and goal.

Now that we know what a team is, let us define team building.Team building therefore is a matter of establishing mutual confidence and trust among any group of people working for you as a manager. Your aim is to create a feeling of interdependence. A good team feels shared responsibility for getting results.

Team building is important realization of organization goals. To be an effective team builder the nurse manager should be a good collaborator who is effective in the establishment of network and relationship (Hackman, 2008).

Definition

Team building is a process that develops cooperation and teamwork within a group of people. For a team to be effective, its members must share a common goal, have respect for each other, and be motivated to use the strengths of each member to achieve their objective.

The benefits of team building are self-development, positive communication, leadership skills and the ability to work closely together as a team to solve problems (Hackman, 2008).

Types of Groups

There are two types of groups in any organization: formal and informal groups

- Formal group: these are set up by an organization to achieve a defined purpose which satisfies the organization's needs.

- Informal group: set up by members of an organization because they have some affinity for one another. This group exists to satisfy the needs of its members. Informal groups may benefit the organization but they may also work against it.

Advantages of Informal Groups

From a management's point of view, the advantages of well-established informal groups are that they provide important extra channels of communication, promote teamwork and satisfy social needs that the organization or team leader is unable to satisfy.

Disadvantages of Informal Groups

The disadvantages are that informal groups may cut across the normal organizational channels and can develop norms or behaviour patterns that are in conflict with the aims of the leaders.

What then are the characteristics of groups? Let us look at that next.

Characteristics of Established Groups

The main characteristics of a well-established group (formal or informal) are as follows:

- It is cohesive: the members of the group put up a united front to outsiders.
- The members are interdependent: they rely on each other for support in achieving both work and social goals.
- It establishes its own norms or standards of behaviour which may influence members of the group to act in ways that are not in line with their own needs, those of the organization or those of the group leader.
- Members of the group tend to share beliefs and values (own ideology) which may or may not be in accordance with those of the organization or their manager or leader.
- The whole is greater than the sum of the parts, i.e. well knit group may exert greater influence when working as a whole than the total influence of each of its members if they were working separately.

3Team Building Tips

To build an effective team requires the exercise of your leadership skills. The basis for any effective team building is that as a leader you must build confidence in your team by showing them that:

- You know where you want to go
- You know how they are going to get there
- You know what you expect each member to the team to achieve
- You know what you are doing.

With the above firm foundation, concentrate on doing the following:
- Encourage participation in agreeing on objectives and targets.
- Put related teams together so that group members know that they can make their jobs easier by cooperating with others.
- Relate jobs within groups so that team members identify with the team as a whole rather than with their own jobs.
- Ensure that communication flows freely within and between groups.
- Encourage informal meetings between groups to resolve problems.

Factors That Affect Team Performance

7.1   Co-operation and Conflict Resolution

Since teams are made up of a number of individuals, it is important that they all get on and work well with each other. In the work environment teams are usually made up of individuals who are brought together by virtue of their expertise, designation or work requirements rather than by choice. Therefore, they do not choose to belong to the same team but have to work together. They must be made to understand that while they can choose to work in one organization and not in another, they cannot choose who to work with within the organization. They therefore need to co-cooperate with one another and must be ready to help resolve conflicts when they arise.

- 7.2.   Clearly Defined Goals and Responsibilities

In order for a team to work well, it must have clearly defined goals and each team member should have clearly defined or jointly agreed responsibilities. Teams should be evaluated on a regular basis so that they know what is expected of them.

- 7.3.   Clear and Regular Feedback

There must be regular information of progress so that it can learn, correct or adjust its performance. Feedback on individual team members' performance keeps each member informed of how well she/he is contributing to the success or failure of the team. Feedback on the overall team performance keeps the team focused on its vision and goals as well as those of the entire organization. Feedback to the team should not be optional but a right.

- 7.4. Group Motivation

As with individuals, if teams are encouraged to work hard and rewarded for doing so, then this is likely to have a positive effect on performance. Teams should be recognized and rewarded as teams not on an individual basis as this encourages intra team competition. This type of competition breaks groups effort, disunites the team and hence negatively affects team performance.

- Communication

The greater the communication between team members and leaders, the greater and more effective is the performance of the team as well as Team members and leaders must be encouraged to share information that facilitates performance information that maintain good working relations. Infact, communication is the life blood of any team work – and it determines to a very large extent how the team performs.

Effective Teams

An effective team is cohesive, self-supporting and knows where it is going and has the following main features:

- The atmosphere tends to be informal and team members are comfortable and relaxed with each other.
- There is a lot of discussion in which initially everyone participates but it remains pertinent to the task of the team.
- The task or objective of the group is well understood and accepted by the members
- The members listen to each other. Every idea is given a hearing
- If there are disagreements, these are not suppressed or overridden by premature groups' action

- Most decisions are reached by a kind of consensus in which it is clear that every body is in general agreement and willing to go along
- Criticism is frequent, frank and relatively comfortable. There is little evidence of personal attack
- People are free to express their feelings as well as their ideas both on the problem and on the group's operation
- When an action is taken, clear assignments are made, accepted and done
- The leader of the group does not dominate it, but facilitates discussion, performance and equal participation.

8. The Nine Building Blocks Of Team Effectiveness

1. 8.1.   <u>Clear Objectives and Agreed Goals</u>

   All team members need to participate in setting the team objectives and must agree on the team goals. Team members also need to strictly adhere to the set objectives, goals and guidelines and avoid undertaking irrelevant tasks.

8.2.   <u>Openness and Transparency</u>

Members should be open about everything they do related to team activities and should avoid hidden motives or individual gain. Team members should be encouraged to be assertive, listen to and respect each other's views as well as give each feedback to ensure a high level of transparency and accountability.

8.3.   <u>Support and Trust</u>

Team members should support and trust each other in the performance of any team activities.

8.4.   <u>Co-operation and Conflict Resolution</u>

Each team member will be assigned specific roles and tasks. It is necessary for these tasks to be performed within the specified time and adhere to agreed standards for the achievement of the team goals.

Sometimes conflicts arise among team members which have to be resolved amicably. The members must co-operate in resolving conflicts to facilitate smooth performance.

8.5.   Systematic Decision Making Procedure

It is advisable to have a systematic decision-making procedure which comprises seven steps namely:

- Turning in.
- Clarifying objectives
- Identifying success criteria
- Collecting information
- Planning
- Getting things done
- Collecting feedback to improve.

8.6.   Appropriate Leadership Style

Teams function at different levels of maturity and the leaders must be able to assess the team in order to adopt an appropriate leadership style.

8.7.   Regular Performance Review

The team should monitor its performance through regular reviews. The review process needs to be done so openly that members can learn from past mistakes and improve team performance.

Teams must guard against barriers that will hinder effective regular review such as lack of trust, fear of hurting each other, lack of assertiveness and poor monitoring skills.

8.8.   Individual Development

Through team activities, individual team members ought to share and learn skills from one another. Some of the skills that could be developed include problem solving, creativity, self management, inter-personal, managerial, supervisory and team building skills.

8.9.   Sound Inter-Team Relationships

Each team in an organization needs to network and collaborate with other teams in order to achieve the ultimate goal of the organization. This requires teams to create and maintain good working relations.

9.   CONCLUSION

People who work in a team often meet to plan ahead and also to evaluate past performance. When teams do not evaluate their performance, they lose their vision and may not achieve the intended goal. Team working facilitates production of quality results through sharing of ideas, objective criticism, communication and problem solving.

Developing team working among employees takes time and the Manager/Leader needs to train the subordinates in team working skills. This calls for creating an enabling environment in which employees appreciate the importance of pooling skills and expertise to improve performance.

Qualities of a team builder

i. Self esteem - The nurse manager should recognize the contributions she has to make and also identify the contributions of others.
ii. Co-operation – The nurse manager must be willing to work with everyone.
iii. Trust worthiness - The nurse manager must be willing to interact with others in a warm and open manner.
 iv. Decision making – The nurse manager must have the ability to make decisions independently when appropriate (Booyens, 1998).

 Methods for team building
i. Get members to Know each other on personal levels.
ii. Develop group cohesion by asking members to express feelings and attitude about eachother.
iii. Establish rapport with each member.
iv. Clarify roles within the group.
V. Build a team identity by asking the group members to list the group's strengths and weaknesses.

vi. Get the group to set mutual goals.

vii. Plan frequent get –together, even in form of work related meetings.

3.7 Summary

In this unit we have defined communication, we have also discussed the the different types of communication and the process of communication We further went on to discuss the interpersonal relationships and team building. Which are important components of management.

Self Assessment

INSTRUCTIONS TO THE LEARNER. INDICATE TRUE OR FALSE TO THE STATEMENTS BELLOW:
1. Communication is referred to as a two way process of exchanging or sharing ideas, feelings and information 2. Decion making is one of the methods of team building 3. An interpersonal relationship is a strong, deep, or close association/acquaintance between two or more people that may range in duration from brief to enduring 4. Clarify roles within the group is one of the qualities of a leader 5. Reciprocity: This is the ideal relationship. This type of relationship is characterized by loyalty, self-sacrifice, mutual affection, and generosity. This friendship is based on equality. 6. Association.: In this type of relationship there is an imbalance in giving and receiving. One person is the primary giver and the other is the primary receiver. However, there is still much to gain out of this relationship so it is a positive one. 7. Receptive.: This is a cordial relationship, but there is no depth.
ANSWERS: 1.T   2.F   3.T   4.F   5.T   6.F   7.F

3.8 Reference

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UNIT 4: LEADERSHIP

4.1 Unit Introduction

Welcome to unit 4.   . In our last unit, we looked at communication and team building and saw that they are both very important elements of good leadership and management. In this unit you will learn about leadership.   Leadership is an integral part of management and plays a vital role in management operations. Indeed, dynamic and effective leadership is what makes between the success or failure of an organization.

 This unit has many parts and we encourage you to continue working hard like you have done in the previous units. You need to dedicate enough time to this unit so that you are able to meet all the objectives and also do the exercises.

4.2 Unit Objectives

By the end of this unit, you should be able to:

- Define leadership
- Describe the types of leadership
- Explain the problem solving process
- Explain the decision making process
- Demonstrate skills in documentation and reports writing.
- 9. Explain responsibility and accountability
- 10. Explain innovation and creativeness
- 11. Explain assertiveness and positive attitude

- 13. Explain motivation
- 14. Explain delegation
- 15. Explain supervision
- 16. Discuss the Management ward affairs

4.3 Definition of Leadership.

Here is an activity for you before we go into our discussion.

ACTIVITY
How would you define leadership in your own words?
Write down your answer in your note book and compare as you read the unit

Leadership:

"Is the art of influencing & inspiring subordinates to perform their duties willingly, competently & enthusiastically for achievement of group objectives."

"Is the ability to motivate followers to pursue the goals the leader wishes to achieve."

"is an interpersonal relationship in which the leader employs specific behavior and strategies to influence individuals and groups towards setting goals and attaining them in specific situations"(Sullivan and Decker, 1982).

Having defined leadership, let's now look at leadership styles. Here is another activity for you before we proceed into our discussion.

ACTIVITY
Mention the three types of leadership?
Write down your answers in your note book and compare as you read the unit

4.3 Leadership Styles

Dear learner, in this topic we are going to discuss different leadership styles. Before we go any further, let us do the following activity:

ACTIVITY
What type of leadership style can you observe in this picture below?

The following are the types of leadership: Autocratic or dictatorial leadership, Democratic or participative leadership, Laissez faire or free reign leadership and Charismatic leadership. We are going to look at them one by one

Autocratic Or Dictatorial Leadership.

This type of leadership is also referred to as *authoritarian* or *dominative* leadership. Autocratic leaders keep the decision making authority & control in their own hands and assume full responsibility for all actions. it is the commanding style - "Do as I say, because I am the boss."

These leadersMakes all decisions without seeking much input from individuals
Structure the entire work situation in their own way & expect the workers to follow their orders and tolerate no deviation from their orders.
The leader believe that his leadership is based upon the authority conferred upon him by some source such as;
Position
Knowledge
Strength / the power to punish or reward.

Democratic Or Participative Leadership

This is the type of leadership where the subordinates are consulted and their feedback is taken into the decision making process.

The leader's job is to moderate, even though he makes the final decision and he is solely responsible for the results.

The subordinates are encouraged to demonstrate initiative & creativity and take interest in setting plans and policies and have maximum participation in decision making

This ensures

Better management-employee relations

Higher morale

Greater job satisfaction.

Laissez faire or free reign leadership

Here leaders are loose and permissive and abstain from leading their staff. They foster freedom for everyone and want everyone to feel good. They are just figure heads and do not give any direction.

The leader lets subordinates plan and organize and develop their own techniques for accomplishing goals. The leader participates very little and instead of leading and directing, he just becomes one of the members.

This type of leadership is highly effective when subordinates are highly intelligent and are fully aware of their roles and responsibilities and have knowledge and the skills to accomplish tasks without direct supervision.

Charismatic leadership

A Charismatic leadership style is where the leader injects huge doses of enthusiasm into his or her team, and is very energetic in driving others forward.

However, a Charismatic leader tends to believe more in him or herself than their team. This creates the risk that a project or even an entire organization might collapse if the leader were to leave. In the eyes of their followers, success is tied up with the presence of the charismatic leader. As such, charismatic leadership carries great responsibility, and needs long term commitment from the leader.

SELF ASSESSMENT

March the characteristics in column 1 with the leardership style in column2.

COLUMN 1.   *COLUMN2.*

1. Leadership style where the subordinates are consulted and their feedback is taken into the decision making process.	a.Autocratic or dictatorial leadership.
2. Leaders keep the decision making	b.Democratic or participative leadership.

authority & control in their own hands and assume full responsibility for all action.	
3. Leaders are loose and permissive and abstain from leading their staff.	c.Llaissez faire or free reign leadership
ANSWERS 1.b 2.a 3.c	

Now do the following activity as well.

ACTIVITY

Having defined leadership, now try to define a leader?

Write down your answer in your note book and compare as you read this section

---

Definition of a Leader.
"Is anyone who is able to influence others to pursue certain goals."
If this is what a leaders is then, what are the types of leaders?, can you think about it for a minute and do the following activity.

ACTIVITY
List down in your note book any 3 types of leaders that you know.

Good attempt, I'm sure the following types of leaders will add on to what you know.

4.4 Types of Leaders

- *Charismatic Leader*Very few posses this type of leadership as it is in bornpersonal qualities of leadership cannot be acquired by training; these can only be modified by it.
- *Traditional Leader*
- This position is assured by birth e.g. kings.
- This is another category to which few people can aspire or acquire.
- There are few /no opportunities for traditional leadership at work.
- *Situational Leader*
- The leader's influence can only be effective by being in the right place at the right time.
- This kind of leadership is too temporal in nature to be of value in an organization.

- *Appointed Leader*
- The leader's influence arises directly out of his position e.g. managers – this is a formal appointment leadership.
- This position has influence with legitimate power in the hierarchy & it is a bureaucratic type of leadership.

- *Functional Leader*his position is influenced by expert knowledge (power).
- The leader secures his position by what he does rather than by what he is.
- A functional leader adapts his behavior to meet the competing needs of his situation.

Now let's look at qualities that a leader should have.

FIVE (5) Qualities Of A Good Leader
- *Inteligence*: not necessarily knowledge about detailed or highly specialized matters but good common sense.
- *Integrity*: the capacity to set standards of personal & official conduct which will command the respect of others.
- *Persuasiveness:* the capacity to win others to acceptance of the point of view embodied in decisions
- *Judgement*: the capacity to know the strengths & weaknesses of the people one works with and how to obtain their maximum usefulness to the organization.
- *Loyalty*: devotion to a cause and also to the persons with whom one works, & willingness to defend subordinates against external attack.We have looked at the qualities of a good leader which include intelligence, integrity, persuasiveness, judgment and loyalty.

4.5
We have defined leadership, described types of leadership styles Let us proceed into explaining problem solving in leadership. We will define it and also look at the process of problem solving.

4.4   Problem solving
Before we go into the details of our discussion, here is an activity for you

ACTIVITY
What is problem solving?
Write down your answer in your note book and compare as you read

Definition:
Problem-solving is a mental process that involves discovering, analyzing and solving problems.

Problem solving involves identifying the problem and making choices that help you to solve it.   Various problems are present in everyday situations. On any given day, you may encounter problems related to patients, co-workers, mechanical breakdown or even personal issues. The ultimate goal of problem-solving is to overcome obstacles

and find a solution that best resolves the issue.   Effective problem solving skills are therefore essential to the delivery of healthcare services.

Steps in Problem-Solving

Dear learner, in order to correctly solve a problem, it is important to follow a series of steps which include . This is referred to as the problem-solving cycle, which includes developing strategies and organizing knowledgWhile this cycle is portrayed sequentially, people rarely follow a rigid series of steps to find a solution. Instead, we often skip steps or even go back through steps multiple times until the desired solution is reached.

- *Identifying the Problem*: While it may seem like an obvious step, identifying the problem is not always as simple as it sounds. In some cases, people might mistakenly identify the wrong source of a problem, which will make attempts to solve it inefficient or even useless.

- *Defining the Problem*: After the problem has been identified, it is important to fully define the problem so that it can be solved.

- *Forming a Strategy*: The next step is to develop a strategy to solve the problem. The approach used will vary depending upon the situation and the individual's unique preferences.

- *Organizing Information*: Before coming up with a solution, we need to first organize the available information. What do we know about the problem? What do we *not* know? The more information that is available, the better prepared we will be to come up with an accurate solution.

- *Allocating Resources*: Of course, we don't always have unlimited money, time and other resources to solve a problem. Before you begin to solve a problem, you need to determine how high priority it is.
- If it is an important problem, it is probably worth allocating more resources to solving it. If, however, it is a fairly unimportant problem, then you do not want to spend too much of your available resources into coming up with a solution.

- *Monitoring Progress*: - Effective problem-solvers tend to monitor their progress as they work towards a solution. If they are not making good progress toward reaching their goal, they will re-evaluate their approach or look for new strategies.

- ***Evaluating the Results***: - After a solution has been reached, it is important to evaluate the results to determine if it is the best possible solution to the problem. This evaluation might be immediate, or it can be delayed.
- Having discussed problem solving, let's now consider decision making. We will define it and explain the decision making process.

4.5   Decision Making Process

We make decisions every day. We make decisions on what to wear, what to eat, etc. So what is decision making? Take 2 minutes to think about it and then complete the following activity.

ACTIVITY

Write down in your *the answer in your note book and compare as you read*

The term **decision** means to 'cut off in Latin'. This means that, out of all the available alternatives you choose one thing and then cut it off from the others. A decision is therefore a solution chosen from among alternatives.

From the definition of the term decision, it then follows that decision making is simply evaluating various alternatives and selecting the best one.   It is the cognitive process resulting in the selection of a course of action among several alternatives.

The Decision making process

Good decision-making is important at all levels of an organization. It begins with a recognition or awareness of problems and opportunities and concludes with an assessment of the results of actions taken to solve those problems.

1. Identifying and Diagnosing Problems

 The first step in the decision-making process is the clear identification of opportunities or the diagnosis of problems that require a decision. Discrepancies between actual and desired conditions alert a manager to a potential opportunity or problem.

2. Identifying Objectives

Objectives reflect the results the organization wants to attain. Objectives are often

referred to as targets or standards. Objectives can be expressed for long spans of time (years or decades) or for short spans of time (hours, days or months).
Long-range objectives usually direct much of the strategic decision making of the organization, while short-range objectives usually guide operational decision-making.

Regardless of the time frame, objectives will guide the ensuing decision-making process.

3. Generating Alternatives.

Once an opportunity has been identified or a problem diagnosed correctly, a manager develops various ways to achieve objectives and solve the problem.

This step requires creativity and imagination. In generating alternatives, the manager must keep in mind the goals and objectives that he or she is trying to achieve. Ideally several different alternatives will emerge. In this way, the manager increases the likelihood that many good alternative courses of action will be considered and evaluated.

4. Evaluating Alternatives

The fourth step in the process involves determining the value or adequacy of the alternatives generated. Which solution is the best? Fundamental to this step is the ability to assess the value or relative advantages and disadvantages of each alternative under consideration. The result should be a ranking of the alternatives.

5. The Act of Choice

Dear learner, Decision making is commonly associated with making the final choice. Although choosing an alternative would seem to be a straight forward proposition, simply consider all the alternatives and select the one that best solves the problem. Because the best decisions are often based on careful judgmentsmaking a good decision involves carefully examining all the facts, determining whether sufficient information is available, and finally selecting the best alternative.

6. Implementing

When decisions involve taking action or making changes, choosing ways to put these actions or changes into effect becomes an essential managerial task. The keys to effective implementation are:

* Sensitivity to those who will be affected by the decision and
* Proper planning consideration of the resources necessary to carry out the decision.

Those who will be affected by the decision must understand the choice and why it was made, that is, the decision must be accepted and supported by the people who are responsible for its implementation. These needs can be met by involving employees in the early stages of the decision process so that they will be motivated and committed to its successful implementation.

7. Monitoring and Evaluating

Dear learner, No decision-making process is complete until the impact of the decision has been evaluated. Managers must observe the impact of the decision as objectively as possible and take further corrective action if it becomes necessary.

Monitoring the decision is useful whether the feedback is positive or negative. Positive feedback indicates that the decision is working and that it should be continued and perhaps applied elsewhere in the organization.
Negative feedback indicates either that the implementation requires more time, resources, effort, or planning than originally thought or that the decision was a poor one and needs to be re-examined.

You have defined both problem solving and decision making. Think through for a while and consider the following activity.

ACTIVITY
Write down in your note book the difference between problem solving and decision making in your own understanding.

Thank you for your good work. Now read the difference stated below and compare it with what you wrote.

Difference between Problem solving and Decision Making

Hello learner, People tend to use 'problem solving' and 'decision making' interchangeably. Although they are somewhat related, these two phrases are not synonymous and are completely different.

Problem solving aims at finding a solution for something that needs to change.

Decision making on the other hand evaluates the alternative approaches for solving a problem in order to arrive at a solution. Decision making is part of problem solving, and occurs at every step of the problem-solving process.

We hope you now understand the difference between decision making and problem solving. In the next section we shall discuss documentation and report writing.
4.7   Documentation and Report writing

4.7.1 What is documentation

Documentation is any written or electronically generated information about a client that describes the care or service to the client.

A report is a document characterized by information or other content reflective of inquiry or investigation, which is tailored to the context of a given situation and audience.

Reason for Documentation

Why do we need to document? Think about it for a minute and then do the following activity.

Activity
Write down 2 reasons why nurses need to we document information about their clients

Well done! Am sure your reasons included the following reasons for documentation:

- *To facilitate communication:* through documentation, nurses communicate to other nurses and care providers about the status of clients, and nursing interventions that are carried out. Documentation of this information increases

the likelihood that the client will receive consistent and informed care or service.

- *To promote good Nursing care:* documentation encourages you as a nurse to assess client progress and determine which interventions are effective and ineffective. It also enables you to identify and document changes to the plan of care as needed.

- *To meet professional and legal standards: d*ocumentation is a valuable method for demonstrating that, within the nurse-client relationship, you have applied nursing knowledge, skills and judgment according to professional standards. The nurse's documentation may be used as evidence in legal proceedings through professional regulatory bodies. For example, in a court of law, the client's health record serves as the legal record of the care or service provided.

4.7.2 Report Writing

A **report** is a written account of something that has been observed, done, heard or investigated.

A **report** is a document characterized by information or other content reflective of inquiry or investigation, which is tailored to the context of a given situation and audience. It is an official document that gives an account of a particular matter after thorough investigation or observation by an appointed person or body.

Written reports are important because they provide records which serve as legal documents. One of the principles of report writing is accuracy and precision about what is being reported. Since time immemorial, report writing is an exercise that has been closely associated with the nursing profession. Written reports provide records which are necessary in nursing duties. The following are some of the written records found in our health facilities:

- Patients' treatment files
- Change of shift report
- Admission registers
- Budget files
- Stock cards for drugs

Let us now look at the steps in report writing.

Steps In Report Writing

There are four main steps used in report writing:

- Step one: Framing the issues and planning
- Step two: Information gathering (Researching the Project)
- Step three: Analysing the information
- Step four: Writing the Report.

Format Of Report Writing
- *Title of report*-Chosen by the reporter
- **Terms of reference**-As given by the person/group requesting the report
  Executive summary-A one or two page summary of key points in case of where the report is lengthy or complicated
- **Introduction**-Setting the scene, spelling out aims and explaining the methodology
- **Recommendations or proposal**
- **Name of author**-Often omitted in internal reports
- **Date of report**
- **Appendices**-Supplementary material to support main findings

Like we indicated earlier, this unit is long and you still have some more objectives to cover. Otherwise you are progressing on well. Keep it up with your good work.

Now let's look at responsibility and accountability.

4.9   Responsibility and Accountability
We have just looked at report writing, now we are going to discuss responsibility and accountability. But before we do that, here is an exercise for you.

ACTIVITY
What do you understand by the two terms?
Write down the answer in your note book and compare as you read

Accountability is not an abstract concept. It is actually extremely simple. Accountability means saying what you mean, meaning what you say, and doing what you say you're going to do.

In short, accountability is taking responsibility for your words and actions. Responsibility simply means being completely incharge of something. It can also be defined as assuming accountability for a task, decision or action. A person is said to be responsible for something when he or she accepts the consequences of something.

Let's now look at innovation and creativity.

ACTIVITY
How would you define these two terms in your own words? Write the answer in your note book and compare as you read

4.10 Innovation and Creativeness
Definitions
Hello learner! The following are the definitions of innovation and creativity:
Innovation is the process of translating an idea into a good or service that creates value or for which clients will pay.
Innovation involves deliberate application of information, imagination and initiative in deriving greater or different values from resources, and includes all processes by which new ideas are generated and converted into useful products.
 Innovation often results when ideas are applied by the health facility in order to further satisfy the needs and expectations of the clients *e.g. introducing 'moon lighting' to cushion staff shortage in improving patient care.*
Thus, a common sense definition of innovation is that it is a process of finding novel solutions to important problems.

Creativity is defined as the tendency to generate ideas, alternatives, or possibilities that may be useful in solving problems or communicating with others.

It is the act of turning new and imaginative ideas into reality. Creativity involves two processes: -   Thinking, then Producing.
If you have ideas, but don't act on them, you are imaginative but not creative.

In order to be creative, you be able to turn your ideas into reality, either by producing or creatingintangible items (such as ideas)or a physical object, such as a painting or a new invention.

Now, read through the two terms again and do the following activity.

ACTIVITY

Write down in your note book your understanding of the difference between creativity and innovation.

The Difference between Creativity and Innovation

Creativity refers to the ability to come up with new ideas, the ability to think widely, to have a free and open mind and to approach matters in a new way (act of conceiving). Whereas innovation is the ability to confine the creative ideas and make them turn into reality so as to achieve successful performance (implementation of an idea).

We going to look at assertiveness and positive attitude

4.11 Assertiveness and Positive Attitude

If you recall very well you looked at assertiveness and attitudes in professional practice. We are going to define the word assertive and we will also define assertiveness

Assertive

To assert is to state an opinion, claim a right, or establish authority. If you assert yourself, you behave in a way that expresses your confidence, importance or power and earns you respect from others.

Assertiveness is standing up for your right to be treated fairly. It is expressing your opinions, needs and feelings, without ignoring or hurting the opinions, needs and feelings of others.

We are now going to learn assertive behavior

Learning assertive Behavior

Dear learner, Assertive behavior is often thought of as a Win situation where both parties in the communication process benefit from increased effectiveness. It may not be that assertive behavior lets you 'get your own way' - often a workable compromise is the best solution which gains the acceptance of both parties. Assertive behavior means stating your own feelings whilst acknowledging the other person's point of view. It involves clear and steady communication, standing up for your rights and beliefs, whilst looking for ways to resolve possible problems.

 Include positive and negative information in a statement. i.e. "I like your plan but………………"

Start the statement with "i" and avoid generalizations. i.e. we believe…………………………

Express your own beliefs and rights i.e. "I believe that ………………"

Express your thoughts and feelings directly to reinforce your identity.

- The following are some of the examples on assertiveness:
- a)   Simple assertive, "I think……………"
- b)   Emphatic assertive, "I realize you are tired but……….."

- c) Confrontive assertive," you said you would bath Mr. C but you didn't………………"
- d) Soft assertive, "I agree with what most of you said but I also think………"

Barriers to assertive behaviour

Thee are factors that block persons and nurses from practicing assertive behaviour. As much as it is simple to know what one's rights, responsibilities and obligations are, and to stand for them, there are, however, many reasons why nurses find assertive behaviour difficult. Some of the reasons could be as follows:

- Lack of self-esteem, meaning, "how I feel about myself
- Inexperience
- Lack of confidence
- Negative belief : Some beliefs are against other people's rights
- Lack of knowledge as to how to behave, lower level of education not knowing their rights as education builds self-respect.
- Fear or anxiety over what might happen or how people may see them if they do behave assertively. The fear of being... Rejected, Criticized, Considered unfeminine/not masculine enough, considered motional, being seen as pushy, considered uptight/under pressure (stressed out), misunderstood etc.
- Wrong or negative perception - these are mistaken perception.
- Gender : Men easily assert themselves than women
- Cultural differences: Some cultures value assertive behavior while some emphasize non assertive behavior.
- The need to... Be nice, Avoid conflict, Be self-effacing, Be liked, Be feminine/masculine
- And the desire not to... be selfish, hurt others, seem vulnerable, show anger, show liking, have your own wants, make the first move, make a mistake, admit a mistake, take a risk, ask for what you want, put others under pressure.

Having looked at learning assertive behavior, we are going to discuss possitve attitude

Positive Attitude

 To start with, we will define attitudes

Definition of Attitudes

These are driving forces that determine how people behave or perform. It is a relatively enduring organization of beliefs around an object, subject or concept which predisposed one to respond in a preferential manner.

They are acquired characteristic of an individual and are not learnt from text books but acquired by social interaction- towards persons, things, situations and issues. Attitudes are not completely stable; they change over a period of time although they must be a degree of stability.

Your beliefs and rules about life and work determine how you interpret events and therefore your attitude. Decide to adopt "strong" beliefs that create a good attitude rather than beliefs that create a bad attitude e.g. reporting on time for work is a positive attitude to work

As a nurse manager there are many ways you can build a positive attitude in your subordinates.

ACTIVITY
ACTIVITY Now think about your attitude towards what you do. Evaluate your attitude here.

Let's now look at motivation.

4.12 Motivation
Here is another activity for you before we discuss motivation.

ACTIVITY
ACTIVITY *What is motivation?* Write your answer in your note book and compare as you read

Hello learner! Here are some of the definitions for motivation.
Motivation is defined as 'internal and external factors that stimulate desire and energy in people to be continually interested and committed to a job, role or subject, or to make an effort to attain a goal.'

It is the force that initiates, guides and maintains goal-oriented behaviors. It is what causes us to take action.

Motivation results from the interaction of both conscious and unconscious factors such as the Intensity of desire or need, Incentive or reward value of the goal, and Expectations of the individual.

Theories of Motivation

Dear learner, There are a number of theories of motivation by different proponents. Here we will consider five theories of motivation. These are not exhaustive. As you read through other materials you will discover many more.

Instinct Theory of Motivation

According to the instinct theory, people are motivated to behave in certain ways because they are evolutionarily programmed to do so. An example of this in the animal world is seasonal migration. These animals do not learn to do this; it is instead an inborn pattern of behavior.

Incentive Theory of Motivation

The incentive theory suggests that people are motivated to do things because of external rewards. For example, you might be motivated to go to work each day for the monetary reward of being paid.

Drive Theory of Motivation

According to the [drive theory](#) of motivation, people are motivated to take certain actions in order to reduce the internal tension that is caused by unmet needs.

For example, you might be motivated to drink a glass of water in order to reduce the internal state of thirst.

This theory is useful in explaining behaviors that have a strong biological component, such as hunger or thirst.

Arousal Theory of Motivation

The arousal theory of motivation suggests that people take certain actions to either decrease or increase levels of arousal.

When arousal levels get too low, for example, a person might watch and exciting movie or go for a jog. When arousal levels get too high, on the other hand, a person would probably look for ways to relax such as meditating or reading a book.

According to this theory, we are motivated to maintain an optimal level of arousal, although this level can vary based on the individual or the situation.

Humanistic Theory of Motivation

Humanistic theories of motivation are based on the idea that people also have strong cognitive reasons to perform various actions. This is famously illustrated in Abraham Maslow's hierarchy of needs, which presents different motivations at different levels. First, people are motivated to fulfill basic biological needs for food and shelter, as well as those of safety, love and esteem. Once the lower level needs have been met, the primary motivator becomes the need for self-actualization, or the desire to fulfill one's individual potential.

4.13 Delegation

We have just discussed Theories of motivation, and now we shall introduce you to delegation. Before we go into the details, here is an exercise for you.

ACTIVITY

What is delegation?

Good! Now that you have attempted this question, try to compare your answer as you read this section

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Definition

Delegation is the assignment to another person of formal authority and responsibility for carrying out specific activities (Stoner & Wankel,1987).

Delegation is the extent to which a manager delegates authority is influenced by organizational culture and specific situations involved and the relationships, personalities and capabilities of people in that organization.

Delegation has to take place either because of the need for specialist knowledge which the delegator does not possess or because of the amount of work he has to perform and which become physically impossible by virtue of its volume.

If you have to delegate successfully, the following steps would be useful to follow.

Steps Of Successful Delegation.

Define the task: Confirm in your own mind that the task is suitable to be delegated. Does it meet the criteria for delegating?

Select the individual or team: What are your reasons for delegating to this person or team? What are they going to get out of it? What are you going to get out of it?

Assess ability and training needs: Is the other person or team of people capable of doing the task? Do they understand what needs to be done? If not, you can't delegate.

Explain the reasons: You must explain why the job or responsibility is being delegated. why to that person or people? What is its importance and relevance?

State required results: What must be achieved? Clarify understanding by getting feedback from the other person. How will the task be measured? Make sure they know how you intend to decide that the job is being successfully done.

Consider resources required: Discuss and agree what is required to get the job done. Consider people, location, premises, equipment, money, materials, other related activities and services.

Agree deadlines: When must the job be finished? Or if an ongoing duty, when are the review dates? When are the reports due? And if the task is complex and has parts or stages, what are the priorities?

Support and communicate: Think about who else needs to know what's going on, and inform them.

Feedback on results: It is essential to let the person know how they are doing, and whether they have achieved their aims. If not, you must review with them why things did not go to plan, and deal with the problems. You must absorb the consequences of failure, and pass on the credit for success

The time that you were working on the wards you saw that some nurse mangers failed to delegate, we are going to look at some of the reasons

Reasons Why The Nurse Manager Fails To Delegate Tasks Include The Following: (Gillies 1994)

- Lack of confidence in the abilities of subordinates.
- Fear of losing control over highly valued activities.
- Fear of offending subordinate by increasing their workload.

Fear that delegating certain tasks would be seen by others as evidence of the manager's inability to fulfill her job expectations.

Advantages Of Delegation

It results in quick decisions.

Since the power to make decisions is delegated, decisions can be made right away at or near the center of operations as soon as deviation occurs or the situation demands.

Delegation gives executives more time for strategic planning and policymaking.

Since executives will not be involved in day – to – day decisions, it can concentrate its efforts on higher-level work and problems.

Delegation is a motivational factor.

Subordinates usually respond to delegated authority with favorable attitude. They become more responsible and more dedicated to their work and they feel proud of being given the authority. This in turn boosts their morale. On the other hand, if the lower level managers do not have the authority and the power to act and make decisions even when they are competent, this might give them a feeling of insecurity and incompetence.

Delegation can be a training ground for executive ability.

When subordinates are given control over the problems they face, they are able to analyze the situation and make decisions accordingly. This continuous involvement prepares them for problem – solving process when they reach a higher executive level. This process will also screen out those from the executive level who have proved to be less successful in handling problems at the lower level.

Disadvantages

1. If wrong decisions are made, the work may not be done or maybe done less well.
2. A leader who does not delegate properly may pass all the work on to the team members, leaving very little to do (over delegation).
3. A leader may delegate decisions to people with insufficient experience.

What can you delegate?

- Report writing, when the subordinate has the knowledge and understanding or can be easily briefed.
- Collecting information from the library, statistics or studying a particular situation.
- Representation at meetings. Pick a mature and capable individual. Spell out limitations to his/her participation where in doubt.
- Supervision of a small group/projects.

SELF ASSESSMENT

WRITE TRUE OR FALSE AGAINST EACH OF THE STATEMENTS GIVEN
1. Delegation is the assignment to another person of formal authority and responsibility for carrying out specific activities.
2. Motivation is the force that initiates, guides and maintains goal-oriented behaviors. It is what causes us to take action.
3. Reporting is the process of translating an idea into a good or service that creates value or for which clients will pay.
4. Innovation is a document characterized by information or other content reflective of inquiry or investigation, which is tailored to the context of a given situation and audience.

5. Leadership is the ability to motivate followers to pursue the goals the leader wishes to achieve."
6. Problem-solving can be regarded as the cognitive process resulting in the selection of a course of action among several alternatives.
7. Decision making is a mental process that involves discovering, analyzing and solving problems.
8. Autocratic leadership is also referred to as *authoritarian* or *dominative* leadership.
9. No decision-making process is complete until the impact of the decision has been evaluated.
10. The position of functional leader is too temporal in nature to be of value in an organization.

ANSWERS 1. T   2.T   3.F   4.F   5.T   6.T   7.T   8.T   9.T   10.F

4.14 Supervision

Hello learner, now that you have assessed yourself on how much you on the previous topic, let us now discuss supervision. Before we can do that, her eis an exercise for you.

ACTIVITY

What is supervision?

Write your answer in your note book and compare as you read

Supervision is overseeing of people, resources e.g. machinery, money, and manpower. Supervision is directing, leading and carries with it authority. It also means coordination and integration of all resources. A good supervisor must use the knowledge of Personnel Management, Sociology, Human relations, Psychology and communication

Definition

Supervision is an act of controlling and guiding staff in their work. It entails being in charge of some work and being done correctly. It leads to staff development and ensures that work is done effectively, efficiently and correctly.

Supervision is a critical aspect of a nursing. Nurses must be supervised to ensure that they practice within their legal, ethical and professional framework.

Now that we have defined supervision, we are going to discuss approaches to supervision. Before we go any further, let us do the following activity:

ACTIVITY

Identify the type of supervision approaches being used in figure 1 and figure 2.

Figure 2.......................................

Approaches to supervision

1. Human relations approach
The supervisor views the workers as individuals and aims at making friends and influencing others using a human approach to human problems.

2. Dictatorial or authoritarian approach
The supervisor makes decisions on behalf of the subordinates.He or she wields absolute power and expects complete obedience from the subordinates.

3. Bureaucratic approach under this type certain working rules and regulations are laid down by the supervisor and all the subordinates are required to follow these rules and regulations very strictly. A serious note of the violation of these rules and regulations is taken by the supervisor.

Having looked at the approaches to supervision, we are now going to look at the needs of the supervised, skills and traits of a good supervisor, responsibilities of a supervisor, why supervisors fail and factors that should be avoided by the supervisor.
Needs of the supervised

The people who are supervised have the following needs:

78

- Security – social and economic terms
- Acceptance
- Recognition
- Advancement
- Outlet for initiative
- Need for a worthwhile job.

Skills and traits of a good supervisor

These include:
- Should be intelligent and understanding
- Have knowledge about practical application of jobs.
- Should practice good employee relationship.
- Should understand the art of delegation.
- Have the ability to train a successor.
- Be able to assign work fairy.
- Maintain consistent standards of conduct, performance and quality.
- Should believe and practice safety.
- Be liberal and consistent in his interpretation of regulations and management policy.
- Be open minded – ready to accept suggestions
- Be able to use proper communication.
- Be able to criticise self as well as others.
- To give praise when due.
- To be able to plan and organise.
- Should know and have the desire to share knowledge.

Responsibilities of a supervisor
A good supervisor has responsibilities to the organisation and to the individual:

To the organisation: their responsibilities are:

- To plan and organise work in order to get maximum effort and not confusion
- To delegate responsibility and authority for work to be done but the supervisor still remains responsible for the outcome
- To ensure work is done right the first time
- To develop and maintain co-operation
- To develop and maintain morale.

To individual

Although individuals differ, it is important to note that all workers want and expect the following:

Material reward and proper working conditions.

Fulfilment – give each worker the type of work he/she finds fulfilling so that he/she receives recognition for it and sense of fulfilment at its accomplishment.

Social needs – workers need to enjoy working relationship with others since they spend half of their time at the working place. Workers need to protected from impositions.

Assistance – workers should fill and seek the help and assistance of their core workers.

Training and development of subordinates in order to sharpen their performance.

Balanced supervision – pay attention to each stage of the job assisgned.

Why Do Supervisors Fail?

- Individual shortcomings e.g. lack of initiative or emotional instability.
- Poor personal relationship with workers or with other managers.
- Lack of skills in planning and organizing work.
- Unwillingness to spend the necessary time and effort to improve.
- Inability to adjust to new and changing conditions.

Factors that should be avoided by a supervisor
- New broom tactics should be avoided because people normally resent.
- Work with others and to the best ability.
- To avoid over delegation.
- Careless remarks should be avoided.
- Avoid playing favourites so that you avoid breaking the morale of the work force.

4.15 Management of Ward affairs

Dear learner, It is the sole responsibility of a charge nurse to manage the affairs of the ward, in order to facilitate patients' affairs as well as coordinating the work force.

Some of the activities that you are expected to carry out are as follows:
- i. Holding ward meeting periodically or whenever necessary.
- ii. Participate in disciplining earring staff.
- iii. To program staff leave bookings so that the ward is covered with staff 24 hour a day and seven days a week.
- iv. Counseling of staff in any way possible and refer where possible.

We have come to the end of unit four. Let us now review what you have covered.

4.16 Unit Summary

In this unit, we started by defining leadership. We then looked at leadership styles and types of leaders. Then we looked at problem solving and decision making, we defined the two phrases and also discussed the process in each case.

We further looked documentation and report writing, after which we proceeded into an explanation responsibility and accountability, innovation and creativeness, then assertiveness and positive attitude.

Motivation followed the discussion of this unit. We defined "motivation" and looked at some motivation theories. The unit was concluded with an explanation of delegation and supervision together with managing ward affairs.

I'm sure you have learnt a lot in this unit and that you will be able to apply what you have learnt.
You will now go to the next unit which is unit 5. In unit 5 you will look at the "nurse and the law."
Now let's see how much you can remember. Follow the instruction below and answer the questions.
SELF ASSESSMENT

4.17 Unit References

UNIT FIVE: POLICY DEVELOPMENT AND ANALYSIS
5.1 Unit Introduction
Hello learner, you are making good progress. This is now unit five (5) where you will learn about policy development and analysis.

In unit four you had a chance to discuss leadership and the various processes that are involved in leadership.

In this unit we will look at the definition, purpose, the process of policy development and analysis of policies.

5.2 Unit Objectives
At the end of this unit you should be able to:
1. Define policy development and analysis
2. Explain the purpose of policy development and analysis
3. Explain the process of policy development
4. Explain policy implementation
5. Explain policy analysis.

5.3. Definition of Policy Development And Analysis.
A policy is a general plan of action used to guide the desired outcome. It is a guideline or rule used to make decisions.

Policy analysis involves the systematic comparison and analysis of a set of policy alternatives to determine which option is most likely to achieve a set of objectives.

the process of predicting the impacts of possible policies and evaluating past policies

Policy development

We have defined policy, and now let us look at the purpose of a policy.
5.4 The Purpose Of A Policy
The purpose of a policy (or health care procedure) is to provide standardization in daily operational activities.

Policies and procedures provide clarity when dealing with issues and activities that are critical to health and safety, legal liabilities and regulatory requirements that have serious consequences. Policy also:
- Improve the effectiveness of an organization i.e. stipulates what staff should do and not do, also
- prevents overlaps in decision making
- Reflect organizational values
- Redress situations of confusion or conflicts e.g. policies on leave specif the types and duration of leave, funeral grants specif who should be given and how much.

Policy is also used to communicate to employees the desired outcomes of the organization. They are usually broad, state what has to be achieved and why and answer major operational issues.

Policies again can help employees understand their roles and responsibilities within the organization.

In our definitions, we said policy development is a process meaning that it has steps that are followed. What are these steps?

5.5 Process of Policy Development

There are four typical and main steps in the policy process:

- Identifying a problem,
- Formulating a policy,
- Implementing the policy change, and
- Evaluating the result.

Each step is usually followed in the order listed to make sure that the process is done correctly.

In many cases, these "steps" are turned into a cycle, with each step being repeated as changes occur; when a policy is evaluated, for example, it may reveal new problems that need to be addressed.

Identifying the Problem

The first step in the policy process is to outline the problem. This involves not only recognizing that an issue exists, but also studying the problem and its causes in detail. This stage involves determining how aware the public is of the issue, deciding who will participate in fixing it, and considering what means are available to accomplish a solution.

Formulating a Policy to Resolve the Problem

After identifying and studying the problem, a new policy may be formulated or developed. This step is typically marked by discussion and debate to identify potential obstacles, to suggest alternative solutions, and to set clear goals and list the steps that need to be taken to achieve them.

 Once the policy is developed, the authorities must agree to it; a weaker policy may be more likely to pass, whereas a stronger one that deals with the problem more directly might not have enough support to gain approval.

Implementing the Policy

A new policy must be put into effect. This is the third step of the policy process, and one that can be difficult if the people who are tasked with carrying out the policy are not committed to complying with it.

During the policy formulation step, compromises may have been made to get the policy passed that those who are ultimately required to help carry it out do not agree with; as such, they are unlikely to enforce it effectively.

Clear communication and coordination, as well as sufficient funding, are also needed to make this step a success.

Evaluating the Effect of the Policy

The final stage in the policy process, known as evaluation, is typically ongoing. This step usually involves a study of how effective the new policy has been in addressing the original problem, which often leads to additional policy changes.

It also includes reviewing funds and resources available to ensure that the policy can be maintained. Historically, this step has not always been treated as very important, but policy makers are increasingly finding ways to make sure that the tools needed for evaluation are included in each step of the policy process.

Effective Hospital Policy.

- Is Reflective of the health goals of the nation at large
- Is written within the scope of the health facility e.g. Level 3 hospital.
- Is adopted through proper management procedures;
- Is respectful of legal and constitutional rights and requirements; and
- Is communicated to the persons it will affect e.g. Patients or health workers.

You have looked at the process of policy development. Think through for a while and consider the following activity.

ACTIVITY

Write down in your note book the methods of policy analysis that you know.

Thank you for your good work. Now read what is stated below and compare it with what you wrote.

We are now going to look at policy analysis

5.6 Methods of Policy Analysis

Policy analysis can explore one policy, compare two or more policies with each other, or model the future implications of a variety of different policy changes (Singer & Manton, 1993).

Policy analysis can examine one stage in policy development or can look across all stages of policy, from design to implementation and evaluation.

The following is a review of the most prominent methodologies used in policy analysis to describe, analyze, and compare policies.

Monitoring and evaluation

- It is the responsibility of all managers at any level to ensure that policies are implemented as stipulated. This is a managerial monitoring function.
- Above all, monitoring and evaluation is done through performance audits conducted by superiors at district, provincial and central levels.
- It is also done by periodic report submission

Needs Assessment.

First, to address problems sensibly a policy analyst identifies the nature, scope, and extent of the problems. He or she accomplishes an assessment of the extent of need in a variety of ways. He or she may document the nature of the problem through analysis of existing information.

The policy analyst can then use such information to describe the current state of need and to forecast likely needs.

Cost–Benefit Analysis

Cost–benefit analysis is an approach that attempts to relate the direct and indirect costs of policies to the direct and indirect benefits of those policies.

Cost–benefit analysis requires that both the costs and the benefits of policies be calculated in monetary form. This is frequently difficult to do, because policy analysts are often unable to give a precise dollar figure for saving a life for example.

Cost-Effectiveness Analysis

Cost-effectiveness analysis looks at the costs of different policies in achieving the desired policy results.

Unlike cost–benefit analysis, this methodology does not require the monetization of the benefits of each policy.

Although policy analysts may not know the dollar value of certain benefits, they can compare which policy costs less to achieve the same desired outcome, regardless of monetary value of the expected benefits.

Outcome Studies

One can assess the effectiveness of a policy without knowing the policy's cost or monetizing the benefits.

Outcome studies can document the comparative effectiveness of different policy alternatives. Using conventional quasi-experimental and experimental research designs, policy analysts are able to assess the extent to which some policy intervention has had the intended impact on the problem it was designed to address.

Case Studies

Case studies involve the systematic and detailed description and analysis of the formation, implementation, and evaluation of specific policies.

Examples include analysis of the impact of the Zambian health policy on access to health.

Meta-analysis

Meta-analysis can provide guidance to policymakers in the early phases of policy development by summarizing existing quantitative studies and can assist them after a series of policy outcome studies have been conducted.

SELF ASSESSMENT

INSTRUCTIONS: CHOOSE THE MOST APPROPRIATE ANSWER
1. The following are all methods of policy analysis except: a. Meta-analysis b. Cost-Effectiveness Analysis c. Needs Assessment d. Evaluating the Effect of the Policy
ANSWER   1.D

5.7 UNIT SUMMARY
We have come to the end of unit 5. In this unit we defined policy development and analysis. We further indicated the purpose after which we explained the process of policy development. We have concluded by explaining policy implementation and analysis.
Now, let us see how much you can remember about this unit. Follow the instructions below and answer the following questions.

References

(Singer & Manton, 1993).

UNIT SIX: HUMAN RESOURCE MANAGEMENT
6.1 Unit Introduction
Welcome to Resource Management! As you are already aware, being a Leader and a Manager, you are the overall supervisor for all departments. Therefore, it is important that you are equipped with Human Resource Management skills so that you support and contribute to effective management of Human resource at your place of work. In unit one , we discussed Organizations and importance of relations at places of work. It

is believed that organizations cannot build a good team of working professionals without good Human Resource Management. The key functions of the Human Resources Management (HRM) team include recruiting people, Staffing, Staff audit, and allocation of employees, orientation, providing Job description and promoting staff development.

6.2 Unit Objectives
At the end of this Unit, You should be able to
- 1. Define Resource Management
- 2. Explain concepts in Human Resource and Management
- 3 Discuss the financial and material resource management
- 3. Describe Time management
- 4. Discuss Health Economics
- 5. Discuss Hospital Costing
- 6. Discuss performance management
- 7. Discuss Discipline

We are now going to define some of the terminologies used in resource management.

6.1   Human Resource management
Before we proceed we are going to define resource managemen and human resource management
Resource Management is the process of using a company's resources in the most efficient way possible.
Human resource Management (HRM) can be defined as the effective use of human resources in an organization through the management of people-related activities. (/courses/human-resource-management)
Human resources management begins with planning for the present and future human resources needs. Staffing begins with recruitment and selection.
 The Purpose of Human Resource Management
The purpose of Human Resource Management (HRM) is to hire, train and develop staff and where necessary to discipline or dismiss them.
Through effective training and development, employees in Organization achieve promotion within the company and reach their full potential. This reduces the need for external recruitment and makes maximum use of existing talent. This is a cost-effective way for a business to manage its people.
We will start by looking at Human Resource Management in relation to recruitment, Staffing, Staff audit, allocation we are going to discuss them one by one
Staffing

Staffing is the selection and training of individuals for specific job functions, and charging them with the associated responsibilities. The manager's staffing duties also include judging employees' work and evaluating their performance, promoting them according to effort and ability, rewarding them, transferring them, and, if necessary, disciplining or even discharging them. Only if a manager performs all these duties can one say that the managerial staffing function has been truly fulfilled. Staffing is a difficult task, and the importance of human resources man

Staffing also involves making sure the department's subordinates are properly oriented, placed, trained, developed, compensated, and given benefits. Some of these activities are handled by the human resources manager, while others are handled directly by the employee's supervisor or manager.

Staff Audit

Staff audit is a form of a consulting service which enables the Employer to obtain a comprehensive insight into personnel affairs

http://meetingpoint.pl/en/employee_audit/index_62.html

Staff audit is conducted in order to

Facilitate the selection of appropriate staff members, to verify the employees' skills, efficiency and motivation

To ensure that the human resource policies observed in the company are consistent with the law and statutory regulations.

An employee audit is a valuable tool in

Company re-organization

Allocation or distribution of new work duties

Analysis of personnel affairs

Developing job profiles

Assessing employee competencies required for the given position

Recruitment

When you graduate, you will need to be recruited in any Organization you will apply for. What is recruitment?

Definition of recruitment

Recruitment is the process of finding and hiring the best-qualified candidate (from within or outside of an organization) for a job opening, in a timely and cost effective manner. The recruitment process includes analyzing the requirements of a job, attracting employees to that job, screening and selecting applicants, hiring, and integrating the new employee to the organization. We will continue with other concepts in the recruitment concepts which are Staffing, staff audit and orientation.

Recruitment is the process of locating qualified candidates, and selection is the process of choosing from the pool of applicants.

Staff Orientation
to establish successfulproductive working relationships. create a positive impression of department and the rganization. planning for new increase the chance for a successful start.

Job Description

Job description is a factual statement of duties and responsibilities of a specific job. It should be able to tell you what should be done, how it should be done and why. It should show the relationship of that job and other jobs in the organization.

Having looked at the concepts in the recruitment process, we are going to continue with Financial and resource management.

6.42Financial and Material resource management
Here we shall look at ordering of resources, resource mobilization, inventory, budgeting and costing.
Material Resource Management

Ordering Materials

Ordering of materials is done in so many sectors and departments in the Hospital. More importantly in the Operating Theatres because all requirements are supposed to be available before any Operation is done. Lack of Medical supplies should never delay or have an operation cancelled at all costs.

The Source Of Medical Supplies
a)   Ministry of Health-stored by Medical Stores Limited-
b)   Donors
c)   Local Purchase Order
The Institutions are supplied according to orders sent to Medical Stores, depending on the stock levels at MSL.

MOH   or   DONORS

HOSPITAL
or
LPO
↓
STORES
↓
CSSD/ PHARMACY
↓ ↓ ↓ ↘
THEATRES WARDS CLINICS CLIENTS
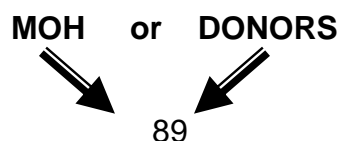
How To Order;
Ensure availability of supplies which should be ordered when necessary. If the previous order has not been supplied, inquiry should be made as to know why it has not been supplied.

Record Of Consumption;
Consumption of drugs and medical supplies is recorded in order to maintain accountability of items. As a department one is able to know how much supplies they use per week, month and annually for easy planning.

Supplies are issued according to demand bearing in mind that there is no wasting and cheating reconciling the patient's log book.

Issuing Of Supplies To Other Facilities And User Units:-
The Store will receive requisition from user units, approved by the departmental head. Approval of the requisition will be done by the person in charge of the stores

When supply is made an entry should be made on the stock control card. The receiving side should ensure they are the rightful ordered supplies, in good condition, right quantities and right cost. If not satisfied with the supplies make a follow up or reject the items if not in good condition and if they are wrong items.

Documents Used

- ***Ordering Books*** (requisition Books)It's a book used to order drugs, medical supplies instruments, equipment, etc. Supplied items are entered in both the requisition and patient's log books.
- ***Bin cards***; used to maintain accountability of supplies received and used in the department
- Patient's Log Book;
- Supplies are entered in order to reconcile as the items are used by the end user. The person reconciling should indicate the date, patients name, file number, amount used on each patient, losses if any, the balance, name and signature of the reconciling officer.
- ***Stock Control Book***;

- This book shows the monthly consumptions, losses etc of each item. It is also used for QUANTIFICATION of the monthly, quarterly, annual consumption and used for report writing. It is a summary of the Bin cards.
  The average monthly consumption helps you, the ward manager to look at trends in use of medical supplies or drugs, determines how much to order based on this trend. Every Theatre Nurse should understand the importance of collecting, recording, analyzing and reporting information for decision making at all levels.

Storage;

Observe the following:-

- Keep in a cool and dry, well lit and ventilated store rooms out of sun light.
- Secure from water penetration
- Store separately from other types of material Ensure proper security of material
- Clean and disinfect store room regularly.
- Store latex product (gloves, catheters, etc away from electric motors (chemical ozone) and fluorescent lights.
- Stock supplies should be off the floor, away from walls, use pallets to prevent pests, water, and for proper circulation of air and facilitates movement of stock, cleaning and inspecting of your stock.
- Ensure fire safety equipment is available accessible.
- Ensure that the Identification labels, expiry dates and manufacturing dates are visible.
- Store supplies in a manner accessible for counting and general management.
- Separate and dispose off damaged instruments, or expired drugs and medical supplies without delay.

Ordering Of Resources

Ordering of resources for various activities in the hospital requires that you follow procedures.

These procedures are necessary to check on the utilization and prevent misuse or theft cases.

Resources are kept in stores depending on the type of materials you are keeping e.g. food stuff like sugar, cooking oil, or drugs in the pharmacy.

Inventory Procedures And Documentation

Inventory procedures and documentation requires verification by Managers to confirm that Hospitals stock level need to be replenished Inventory Control system is the system that informs a Stock Keeper when to order or issue, and how to maintain an appropriate Stock Level of all products to avoid shortage and over stocking of supplies.

The process of inventory procedures and documentation requires the Managers knowledge on the following;

Taking Inventory (detailed list of goods or furniture) of the Organization. It is necessary that you as a Manager understand the Beginning balance which is quantity of usable stock on hand at the beginning of a given time period, which should be equal to ending balance of the previous period. The Ending balance is required at the end of a given period.

As a leader you should also consider Loss/adjustment of any item removed from inventory for any reason other than issued or dispensed, e.g., missing, damaged, theft, demonstration use. An arrangement on Physical count- a count of items by hand to verify quantities recorded on stock cards can also be conducted by heads of departments to get the actual stocks.

As a leader, you should be aware on Consumption- The quantity of items given to clients, this can only be found at health centres or aggregated health centre data at higher levels, take note on the amounts given from one facility to another

As a manager, you should also be aware on Attendance statistics: information about people who visit health facilities, their age, parity, etc. This information will help you to plan for their services in relation to Staff and required stocks. As a Manager, you should also ensure that other heads of departments follow the stocks by ensuring that the following are done;

Stock card records: These are records that list quantities received, quantities issued, dates of receipts/issues, losses/adjustments.

FEFO: First Expiry, First Out—not quite the same as FIFO (first in, first out) or FISH (first-in, still here!)

Quantitative: using numbers as compared to qualitatively—using feelings

Stock-out: having no supply of an item in stock

Re-supply site: any person/location that receives supplies from the district

Rational drug use: the appropriate prescribing of drugs by medical personnel and the appropriate use by the client

Average Monthly Consumption (AMC): the average quantity of stock consumed over a period of several months

Having looked at inventory and documentation, we are now going to look at budgeting and costing

Budget and Costing

Budgeting and costing is one of the sequential functions of management under planning.

Budgeting involves planning for the three "3Ms" + "T". These are Money, Manpower, Materials and Time.

Budgeting requires estimation of the amount of money, human resource, material resource and time that is required to carry out a particular task.

6.3 Time management

Welcome to time management. This topic is interesting because as a student, there is emphasis on time management. Is time management necessary when you start work? When we think of time management at a work place, we tend to think of personal time management, loosely defined as managing our time, to waste less time on doing the things we have to do so we have more time to do the things we want to do. Let us now define time management but before we start you can do the following activity

Activity
In your own words define time management write the answer in your note book and compare your answer as your read

Definition

Time management is the act or process of planning and exercising conscious control over the amount of **time** spent on specific activities, especially to increase effectiveness, efficiency or productivity.refers to the development of processes and tools that increase efficiency and productivity.

Personal time management skills include: goal setting; planning; prioritizing; decision-making; delegating; scheduling

If supervisors want more time, they have to "make" it themselves. The supervisor's own time is one of the resources for which he or she is responsible. Every supervisor has probably experienced days that were so full of pressures and demands that he or she began to feel as though all the matters that needed attention could never be resolved. A manager needs to assess how his or her time is being used to eliminate time wasters. He or she can figure out how time is spent by keeping a time-use chart or a time log. Midway through and at the end of the day, or every half-hour if the supervisor chooses, he or she should list, on a half-hour basis, all of his or her activities that occurred. This log should be kept during a typical work cycle for at least two weeks. At the end of the week, a review of this log will tell the supervisor

. The fact that only the supervisor can control time has been emphasized, and that it is his or her responsibility for what is done with this time. However, another interesting approach to managing time is suggested by Oncken and Wass (1974). They examine three kinds of managerial time:

1. Boss-imposed time is time used by an individual to accomplish those activities that the boss requires and the supervisor cannot disregard.

2. System-imposed time is time used by an individual to give support to peers and to cooperate with and coordinate activities of the organization.

 3. Self-imposed time is time used by an individual to accomplish the items the supervisor originates and agrees to do himself or herself.

Many techniques have been devised to help supervisors control their time schedules. The following are measures which can be employed in time management

- Use a desk calendar or computer scheduling system to schedule or make a to-do list of those items that need attention such as appointments, meetings, reports, and discussions. The supervisor should schedule these events far in advance, so they will automatically come up for attention when they are due. Electronic calendars and reminder lists on your computer or personal digital assistant (PDA) can help you organize your time as long as you do not become a slave to entering items on the lists rather than completing them.
- Another effective way of planning each week's work, as well as knowing what is being accomplished as the week progresses, is to keep a planning sheet. This sheet is prepared at the end of one week for the week to follow. It shows the days of the week divided into morning and afternoon columns and a list of all items to be accomplished. Then a time for accomplishment is assigned to each task by placing it in the morning or the afternoon blocks of the assigned day. As a task is accomplished, its box is circled. This approach can be accomplished using a PDA or your computer's software in lieu of paper. Those tasks that have been delayed during the day must be rescheduled

Regardless of whether this particular system or another is used, the supervisor must schedule the time each week and must have some method of reporting the tasks that are planned and those that have been accomplished . Remember, build into your schedule time for unplanned and urgent events; these consume time that you may have set aside to do something else. By incorporating time in your schedule for these unexpected events, your other projects do not fall behind.

6.4 Introduction to Health Economics
Let us now look at Health Economics. Is it necessary in Health delivery?
Definition
Health economics is a branch of economics concerned with issues related to efficiency, effectiveness, value and behavior in the production and consumption of health and health care.

- Economics is a social science that studies how individuals and organizations in society engage in the production, distribution and consumption of goods and services. The discipline of economics deals with use of scarce resources to satisfy human wants and needs, that is, how best to use the resources available.

Economics is concerned with *costs (resource use)*,benefits,choice and Efficiency Economics is about Limited resources and Unlimited "wants" . it also involves *Choosing* between which 'wants' we can 'afford' given our resource 'budget' so that we can attain maximum benefits using minimum resources only the can we say there is efficiency

6.5.1 Concepts

▸ **Efficiency**   =maximising benefit for resources used

- **Technical Efficiency**   =this is the effectiveness with which a given set of inputs is used to produce an output. A hospital is said to be technically efficient if it is able to provide high quality health care with a minimum quantity of inputs, such as labor, capital and technology.

  ▸

  ▸ **Allocative Efficiency**   =producing the types of goods and services that are desired by the consumer

  ▸ **Opportunity cost:** this refers to the value of the best alternative which you forgo when you make a choice between several alternatives

Before we look at cost benefit analysis and cost efficiency you can the following activity

Activity
What is the difference between a need and want? Write it down in your note book

Let us look at Cost the scope of Health Economics Cost benefit analysis and Cost effectiveness.

The scope of health economics is divided in to eight distinct topics as proposed by Alan Williams'. These are

What influences health? (other than health care)

What is health and what is its value

The demand for health care

The supply of health care

Micro-economic evaluation at treatment level

Market equilibrium

Evaluation of the whole system level

Cost benefit analysis

▸ Cost Benefit Analysis (CBA) is an economic evaluation technique that measures all the positive (beneficial) and negative (costly) consequences of an intervention or program in monetary terms. The valuation of all program outcomes in monetary units allows decision makers to directly compare the health outcomes of different types of health interventions. CBA can also be used to compare health-related interventions to those in other economic sectors. The conceptual and theoretical framework of CBA is derived from welfare economics. You may not understand what welfare economics mean, *Welfare economics* is the study of changes in the well-being, or welfare, of individuals and society as decisions are made regarding the production, distribution, and consumption of goods and services.

There are two prominent features differentiating CBA from other forms of economic evaluation: CBA adopts a broad societal perspective (thus it includes all costs and all benefits), and CBA measures the outcomes in monetary terms.

CBA is the appropriate form of economic evaluation to assess the economic efficiency (whether maximum amount of output [e.g., persons screened, cases prevented, or cases treated] is produced from the given level of inputs) of public health-care interventions when health outcomes are disparate.

Cost Identification Analysis

The first type of analysis we will consider is cost identification. Generally speaking, cost identification studies measure the total cost of a given medical condition or type of health behavior on the overall economy. The total cost imposed on society by a medical condition or a health behavior can be broken down into three major components:

1. Direct medical care costs- costs as the cost of all necessary medical tests and examinations, the cost of administering medical care, and the cost of any follow-up treatments

2. Direct nonmedical costs- the cost of transportation to and from the medical care provider, in addition to any other costs borne directly by the patient.

3. Indirect costs- consist primarily of the time costs associated with implementation of the treatment which include the opportunity cost of the patient's (or anyone else's) time that the program affects, especially because many health behaviors and medical conditions result in lost productivity due to injury, disability, or loss of life

Principles of cost analysis benefit

***Defining the* Problem:**the study problem must be identified at the outset of any analysis. A clearly stated problem defines the objective of the study. At this initial stage of the study we must consider: what questions need to be answered, and which aspects of the problem need to be explained.

‣ ***2. Identifying* Interventions:**the scope of the study and the variety of outcomes to be included are determined to a large extent by the nature of the programs under consideration. Often the study problem itself or the decisions made by policy makers specify the interventions to be analyzed.

Defining the Audience :Understanding what information the audience needs and how the study results will be used are the major factors that must be considered at this stage.

These questions will help to identify the audience: Who will be using the results of the analysis?

What information does the audience need?

How will the results be used?

4. Defining the **Perspective**: Usually cost benefit analyses are conducted from a *societal perspective*. Thus all benefits and costs are considered.

The results then indicate whether the benefits to the society as a whole outweigh the total costs of a proposed project.

5. Defining the Time Frame and Analytic Horizon :The *time frame* and the *analytic horizon* are largely determined by the treatments or interventions under consideration.

The *analytic horizon* is usually longer than the *time frame* because the majority of interventions or treatments produce multiple *health* and *nonhealth outcomes* for periods far exceeding the durations of the interventions or treatments.

6. Defining the Discount Rate :*Discounting* makes it possible to compare benefits and costs that occur at different times by adjusting their values according to the time preference corresponding to the chosen perspective.

Figure 7: Cost benefit analysis

Adopted from **http://www.mercatornet.com/demography/view/11993**
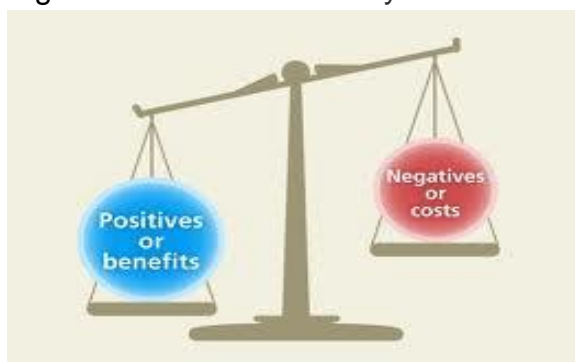
Cost effectiveness

Examples Cost Benefit Analysis

Should we hire additional Five Nurses or assign overtime? Is it a good idea to have Teas for Members of Staff or not provide any teas at all? Each of these questions can be answered by doing a proper cost benefit analysis.

As the Ward Manager, you are proposing the purchase of a $1 Million sluicing machine to increase bedpan, sputum mugs and urinal cleanliness. Before you can present the proposal to the Senior Medical Superintendent, you need know some facts to support your suggestion, so you decide to run the numbers and do a cost benefit analysis. This is important so that you request is not rejected.

6.5.3 Cost Effectiveness Analysis (CEA)

Resources to improve health are and always have been scarce. Resources should be allocated so as to maximise the health benefits they produce, measured by either the aggregate health status or disease burden of a population.

Cost effectiveness analysis is a form of economic analysis that compares the relative costs and outcomes (effects) or two or more courses of action. It helps the manager to prioritise different interventions to improve health.

Unlike cost benefit analysis, cost effectiveness considers the outputs produced by a project which are not measured in monetary terms. For example, analysing the cost of health care in terms of lives saved and illnesses prevented.
We hope you now understand the concept of cost effectiveness and how it differs from cost benefit analysis.

6.6 Introduction to Hospital costing

As a leader you will need to know Hospital costing in order to budget effectively and avoid wastage.
Importance of Hospital costing
To develop a clear and appropriate method for calculating the services cost
To estimate actual economic cost of services delivered by each department
  To create a basis for the pricing system of medical services delivered by the Hospital that can be used to establish fees for services and contracts.

We are now going to discuss performance management
6.6 Performance Management
Definition
Performance management is an ongoing, continuous process of communicating and clarifying job responsibilities, priorities and performance expectations in order to ensure mutual understanding between supervisor and employee (California University).
 Figure 8 illustrates the performance cycle.
The objectives of Performance Management are to:
Increase two-way communication between supervisors and employees
Clarify mission, goals, responsibilities, priorities and expectations
Identify and resolve performance problems
Recognize quality performance
Provide a basis for administrative decisions such as promotions, succession and strategic planning, and pay for performance.

Figure 8: PERFOMANCE CYCLE

Determine major job duties → Define performance standards for each duty → Document job performance → Evaluate job performance → Hold performance discussions → (back to Determine major job duties)

Supervisor's responsibilities

The supervisor's responsibilities in performance assessment are to:

Communicate and clarify major job duties, priorities and expectations.

Establish and communicate performance standards.

Monitor employees' performance through observation, discussion, etc.

Document good and unacceptable performance.

Provide continuous coaching and constructive feedback in a timely manner.

Hold performance discussions (at least annually).

Correct poor performance and reinforce good performance.

Help employees to develop skills and abilities for improved performance.

Provide necessary information, resources and opportunity to allow accomplishment of key results.

Performance appraisal

T he performance appraisal system is the ongoing process of gathering, analyzing, evaluating, and disseminating information about the performance of employees. These appraisals not only guide management in selecting certain individuals for promotion and salary increases but also are useful for coaching employees to improve their performance. Appraisals are an important part of long-range personnel planning and the supervisor's staffing function. In addition, well-identified and -described appraisal methods and procedures

Purposes of performance appraisal

Performance appraisals are central to organizational and management development.

- Purpose is to provide a measure of the employee's job performance that leads to counseling (motivation) and his or her further development (training).
- Because a performance appraisal is a formal system of measuring, evaluating, and influencing an employee's job-related activities, it identifies the types of training experiences that may enhance the employee's performance.
- Performance appraisal is a control system that serves as an audit of the effectiveness of on-the-job training programs, of supervisory coaching, and of each employee.

- Decisions regarding an employee's continued employment, promotion, demotion, transfer, salary increase, or possible termination are made on the basis of the performance appraisal. Performance appraisals are important to maximize employee motivation and productivity
  performance appraisals help management with the following:
  • make decisions about compensation and employees' developmental and training needs,
  • provide an inventory of employees suitable for promotions,
  • aid the supervisor by showing whether an employee is in the right job,
  • identify for the boss those employees who are moving ahead and those who are not progressing satisfactorily, and
  • show whether the supervisor is succeeding in the job as a coach and teacher.
  A skills inventory may also result from the development sect

Performance Appraisal Methods

Performance appraisals take many forms. The written essay, the simplest appraisal method, is a written narrative assessing an employee's strengths, weaknesses, past performance, and potential and provides recommendations for improvement. Other types of performance appraisal methods include comparative standards (e.g., simple ranking, paired comparison, forced distribution; see below) and absolute standards (e.g., critical incidents, BARS, 360-degree

Comparative standards, or multi-person comparison, is a relative assessment method that compares one employee's performance with that of one or more others. In group rank ordering the supervisor places employees into a particular classification such as top one-fifth and second one-fifth. If a supervisor has ten employees, only two could be in the top fifth, and two must be assigned to the bottom fifth. In individual ranking the supervisor lists employees from highest to lowest. The difference between the top two employees is assumed to be equivalent to the difference between the bottom two employees.

In paired comparison, the supervisor compares each employee with every other employee and rates each as either the superior or weaker of the pair. After all comparisons are made, each employee is assigned a summary or ranking based on the number of superior scores received

6.8
SELF ASSESSMENT
Match the statements in column 1 with the characteristics in column 2

Column 1	Column 2
1. The purpose is to hire, train and develop staff	a. Resource Management
	b. Human Resource
2.The process of finding and hiring the	c. Recruitment

best qualified candidate	d. Staff audit
3. A form of a consulting service which enables the Employer to obtain a comprehensive insight into personnel affairs	f. Discipline
	h. Time management
	i. Cost effectiveness
4. Training expected to produce a specific character or pattern of behavior, especially training that produces moral or mental improvement	j. Performance management
	. Material, Money, Man and Finances
5. Being economical in terms of tangible benefits produced by money spent	

ANSWERS

1.a

2.c

3.d

4.f

5.i

6.7 Discipline

Let us look at discipline. Do we need to discipline at places of work? What do you think? Is it in order to discipline adults?

Definition

Discipline is training expected to produce a specific character or pattern of behavior, especially training that produces moral or mental improvement.

Figure 9: DISCIPLINE AT WORK PLACES

How disciplinary procedures work

It is obvious that no employee may be disciplined for breaking a rule that he/she was not aware of in the first place, and therefore it is essential that the employer's Disciplinary Code and Procedure be communicated to all employees in writing, in a language that the employees can clearly understand.

This may mean printing your Disciplinary Code in perhaps 3 different languages. If an employee is illiterate, then the Disciplinary Rules must be translated to him in a language that he/she can clearly understand. The Standards of Conduct should contain rules that are, as far as possible, common to all employees. It is advisable to include a dress code as well, particularly for those employees who have dealings with members of the public or the employer's clients.

Your employer e. g in Health, the Ministry of Health should put its disciplinary procedure in writing, and make it easily available to all staff. It should say what performance and behaviour might lead to disciplinary action and what action your employer might take.

NB: The Ministry of Health in Zambia is using the Code of conduct for all Civil servants.

Disciplinary steps

Your employer's disciplinary procedure should include the following steps:

A letter setting out the issue or a charge letter.

A meeting to discuss the issue where An Offender is going to appear.

A disciplinary decision.

A chance given to the Offender to appeal this decision within a specific period of time.

Approaches to Difficulty staff

Difficult people present no problem if we pass them on the street, in the supermarket or in a building lobby. Nevertheless, when we have to work with them difficult people can become major irritants.

It seems that some people are just born to be difficult. We have all worked with them and most of us dislike them. Difficult people are easy to recognize--they show up late, leave early, don't turn their work in on time and have an excuse for every failing.

How to Handle Them:

1. Don't ignore the problem.
2. Intervene as soon as possible.
3. Research the problem personally
4. Help the problematic employee to get back on track.
5. If all else fails, termination may be necessary.

…………………………………………………………………………………………………

6.8 Summary

6.9 REFERENCES

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UNIT 7: CHANGE AND LEADERSHIP

7.1 Unit Introduction

Hello learner again, I like your progress. We have now moved into unit 7 where you will learn about change and leadership.

In unit six you learnt about resource management. You looked at human resource management, financial management and time management. You also discussed health economics, performance management and concluded the unit with learning on discipline.

In this unit, you will look at change and leadership. You will discuss the definitions of change and leadership, theories of change, management of change and conflict management. It is an interesting unit and you will definitely learn a lot.

7.2 Unit Objectives

At the end of this unit you should be able to:
- 1. Define key terms
- 2. Discuss theories of change
- 3. Discuss management of change
- Describe conflict management

7.3 Definition

Let us start with definition of the following terms to enhance your understanding of this unit.

Change means making something different from the way it was originally.

Change management is a term used to refer to the introduction of new processes in an organization, or the management of people who are experiencing change.

Organizational change is defined as "the movement of an organization away from its present state and toward some desired future state to increase its efficiency and effectiveness."

Change may be planned or unplanned. Unplanned changes bring about unpredictable outcomes, while planned change is a sequence of events implemented to achieve established goals.

In nursing a change agent is a person who brings about changes that impact nursing services. The change agent may be a nurse leader, staff nurse or someone who works with nurses.

Change theories are used to bring about planned change in nursing. Nurses and nurse leaders must have knowledge of change theories and select the right change theory as all the available change theories in nursing do not fit all nursing change situations. Let us look at the following theories.

7.4 Theories of Change

1. Lewin's Change Theory.

- Kurt Lewin's change theory is widely used in nursing and involves three stages: Unfreezing – creating the right environment
- Movement – supporting changes to desired state
- Refreezing - reinforcing to anchor changes

Lewin's theory depends on the presence of driving and resistant forces.

The driving forces are the change agents who push employees in the direction of change.

The resistant forces are employees or nurses who do not want the proposed change.

For this theory to be successful, the driving force must dominate the resistant force.

2. Rogers' Change Theory

Everette Rogers modified Lewin's change theory and created a five-stage theory of his own. The five stages are:

- awareness,
- interest,
- evaluation,
- implementation and
- adoption.

This theory is applied in long-term change projects. It becomes successful when nurses who ignored the proposed change earlier adopt it because of what they hear from nurses who adopted it initially.
STAGES of Rodgers theory

3. Spradley's Change Theory.

This is an eight-step process for planned change based on Lewin's theory of change. It makes provision for constant evaluation of the change process to ensure its success. The steps are: recognize the symptoms, diagnose the problem, analyze alternative solutions, select the change, plan the change, implement the change, evaluate the change and stabilize the change

We are now going to explain the steps one by one

i.   **Recognize the symptoms**. This is the first step in Spradley's change theory. In this case, the change agent; that is the person who brings about change, notices signs that a problem exists. The change agent could be a nurse leader, staff nurse, student nurse or other personnel.

ii.   **Diagnose the problem**. This is the second stage, where the change agent looks at all the existing issues and then comes up with a name that describes what the problem is exactly

iii. **Come up with solutions**. The third stage of this change theory is alternative solutions, where you meet with others to propose solutions for the identified problem. Each proposed solution should have resources and possible obstacles outlined for all to see.

iv   **Select a solution**. Pick one solution from all the proposed ones and make sure that it will be affordable as well as address the identified problem. Be aware of any obstacle to the solution and make plans to manage them.

v   **Plan the change**. Write a plan that includes detailed steps that will be taken to bring about change. The plan should include milestones, actions, a time line or timetable, needed resources, a budget and method of evaluation

vi   **Implement the change**. Put your plan into action. Visit the milestones you outlined to make sure the project is on budget and on time. Provide all necessary resources required for the plan to keep moving forward.

vii**. Evaluate the change**. Check to see if the expected outcome for the change project materialized. Analyze your environment for reduction or elimination of the problem diagnosed initially. Do this through a questionnaire, quiz or monitoring of the environment

viii**.**   **Stabilize the change**. If the outcome of the change project is reached, then you can make your change permanent

7.5 Management of Change
How would you manage change?
Change management is a systematic approach to dealing with change, both from the perspective of an organization and on the individual level.
Four steps exist in organizational change.
First, assess the need for change through recognizing that a problem exists and identifying the problem's source.
Secondly, decide on the change needed to be made by deciding what is the organization's ideal future state, as well as the obstacles that may occur during change.
Thirdly, apply the change and decide whether change will occur from the top down or bottom up, then introduce and manage change.
Lastly, evaluate the change by comparing the situation before and after the change or using benchmarking.

7.6 Conflict management
Let us define conflict management before looking at problem solving skills.
Conflict management is a systematic process to find a satisfying outcome between conflicted parties. When a person is opposed by another because his needs and goals are different, he faces conflict. Feelings of anger, frustration, hurt, anxiety or fear almost always accompany conflict.
Conflict management identifies and handles the conflict using effective communicating, problem-solving and understanding each person's interest to negotiate fairly.

Problem solving skills
Problem solving is the [process] of [working] through details of a [problem] to [reach] a [solution].

Nurse Managers need to have effective problem-solving skills to be able to decrease the cost of the health care and to increase the quality of care.

Spend time reading, gathering information and defining the problem.
Use a process, as well as a variety of tactics to tackle problems.
Monitor your problem-solving process and reflect upon its effectiveness.
Emphasize accuracy rather than speed.
Write down ideas while solving a problem.
Be organized and systematic.
Be flexible (keep options open, view a situation from different points of view).

SELF ASSEESSMENT

INSTRUCTIONS: INCIRCLE THE MOST APPROPRIATE ANSWER

1. Change is defined as:

a. Making something different from the way it was originally.

b. A term used to refer to the introduction of new processes in an organization

c. The management of people who are experiencing change.

2. The following are steps that exist in organizational change except.

a. First, assess the need for change through recognizing that a problem exists and identifying the problem's source.

b. Secondly, decide on the change needed to be made by deciding what is the organization's ideal future state, as well as the obstacles that may occur during change.

c. Thirdly, apply the change and decide whether change will occur from the top down or bottom up, then introduce and manage change.

d. Lastly, evaluate the change by comparing the situation with what is happening in other similar organizations.

ANSWERS: 1. A   2.D

7.7 Unit Summary

Well done. We have come to the end of unit7. In this unit, we looked at the theories of change which included Lewin's Change Theory, Rogers' Change Theory and Spradley's Change Theory.

We further discussed management of change before describing conflict management.
Just to see how much you have understood, let's conclude by doing the following exercise.

7.8 REFERENCES

www.//www.ehow/how5940859-applyspradley's change theory
www.//ehow.comabout_-554426change- theories-nursing.html

UNIT EIGHT: ADVOCACY

8.1 Unit introduction

Welcome to Unit 8   which talks about Advocacy! Advocacy is not a new topic because you have already covered it in Public Health Nursing. However, advocacy in Leadership and Management will be covered in detail. In this Unit, we are going to define Key terms, . We are also going to focus on Counseling, Collaboration and Networking skills, apply Lobbying and Negotiating skills, and discuss Social Mobilization.

In this Unit, you will need any Text book in Management and an English dictionary. The aim of this unit is to introduce you to the concept of Advocacy as applied in leadership and Management.

8.2 Unit Objectives

By the end of this unit you should be able to:

1. Define key terms in Advocacy
2. Describe Counseling
7. Demonstrate Skills in Collaboration and networking
8. Apply Lobbying and Negotiating skills.
9. Describe Social Mobilization

As you may be aware, some people are not clear about their rights as citizens, or they have difficulty in understanding these rights. Others may find it hard to speak up for themselves. Advocacy can enable people take more responsibility and influence the decisions which affect their lives.

8.1 Definition of terms

Here is an activity for you to do before we define advocasy.

ACTIVITY

Having looked at Advocacy in Public Health Nursing, What is Advocacy?

Write down the definition of advocacy and compare your answer as you read

---

Advocacy is speaking up for, or acting on behalf of, yourself or another person.
Advocacy is speaking up for, or acting on behalf of, yourself or another person (The free Dictionary, 2013).
The word "advocate" originally stems from the Greek word "advokar", meaning 'one who pleads on behalf of the other.
Having looked at the definition, we are going to proceed to the model of advocacy.
8.1.1
Model of advocacy
The Model of Advocacy which is used is by Fowler (1989) who described the four areas of Nurse Advocacy in relation to Patient care. These are;
- A Nurse is a Guardian of Patient's Rights

- A Nurse Preserves Patient Values
- A Nurse is a Champion of Social Justice in the provision of healthcare
- A Nurse is a Conservator of the patient's best interest

ACTIVITY

Now that we have looked at the model of advocacy, we are going to discuss the roles of a Nurse in advocacy.

Take a pen and write 2 roles of a Nurse in advocacy.

a)…………………………………………………………………………………………

b)…………………………………………………………………………………….......

Excellent! Let us compare with the roles of a Nurse in Advocacy

8.1.2

Role of a Nurse in Advocacy

A Registered Nurses (RN) has a complex role in advocating for patients. The definition of advocacy varies according to who is providing the definition and the health care setting in which she acts.

Advocacy ranges from speaking on behalf of patients in relation to nursing activities, such as hand washing and proper identification of a client before treatment is administered to arguing that an early discharge will harm the patient's recovery. If a nurse observes a practice or procedure she believes to be wrong, advocating for her patient demands that she speaks out even if that practice was carried out by her superior. This is not always easy and may have a cost on the Nurse.

Therefore the role of a nurse in advocacy include

Up hold the rights of persons without prejudice or discrimination

Acts always in the best interest of the patient

Act as an intermediary in patient care.

I hope that you have enjoyed this Topic. In this Topic, we have defined Advocacy, looked at the Model of Advocacy and explained the roles of a Nurse in Advocacy

8.1.3

SELF ASSESSMENT

INDICATE TRUE OR FALSE IN THE FOLLOWING STATEMENTS

The role of a nurse in advocacy include:

- o Up hold the rights of persons without prejudice or discrimination

---

o Acts always in the best interest of the nurse   o Act as an intermediary in patient care.
1.T   2.F 3.F

8.2 Counseling

You have been counseling patients during your clinical Practice. Was it an easy task? Here is an activity for you.

ACTIVITY What is Counseling? Take a pen and write your definition ……………………………………………………………………………………… ………………………………………………………………………………………

Well done! Let us compare with our definition below.

8.2.1Counseling is a confidential dialogue between a person and a care provider aimed at enabling the person to cope with stress and make personal decisions. (WHO, 1994)

Having looked at the definition, we are going to continue with the importance of counseling.

8.2.2 **Importance Of Counselling**

Counseling is designed to:

i.Provide support at all times of crisis.

ii. Encourage change when it is needed for prevention or control of a problem.

iii. Propose realistic action adapted to different clients and circumstances.

iv.Assist client to accept and act upon information on health well being and other issues.

Counseling encourages individuals to examine available alternatives and decide which choices are useful and appropriate.

Having discussed the importance of counselling ,let us now look at the interventions used in couselling

8.2.3 Interventions Used In Counselling

There are three interventions used in counseling, these are:

- I: Crisis counseling
- Ii . Problem solving counseling

- iii. Decision making counseling

Basic Principles

Some principles of counseling are appropriate to all counseling models, or to an integrated or eclectic approach, might include the following:

Uniqueness: View each client/Employee and a problem he/she presents as unique

Neutrality: Create a non-judgemental atmosphere in which the client/Employee is encouraged to express himself openly, frankly and freely.
Acceptance: Continually emphasize an attitude of high regard for the client/Employee as a person.

Flexibility: Always proceed as if client/Employee is right in what he says, how he tells the story, and ways in which he wants to solve the problem.

Inclusiveness: Avoid the temptations to focus upon a particular behaviour feelings or experience as if the resolution of a client's/Employee problem lies in each of these.

Autonomy: Demonstrate a belief in the client/Employee that he has the capacity and ability to take experience for choices. Decisions and actions.

Realism: Direct efforts toward helping the client identify and fulfill his goals and needs within the limitations of his capacity, potential and circumstances.

Empowerment: Structure each of the session in such a way that the client/Employee is enabled to develop and improve his life skills needed to cope with his problem situations.

Mutuality: Continually emphasize that counseling is a shared and sharing relationship achieved between counselor and client/Employee.

Qualities Of A Counselor

As a Leader or Manager, you will need qualities of being counselor and you should strive to have many of these qualities which include:

- Good listener

- Empathetic
- Good communication skills
- Knowledgeable
- Trusty worthy
- Approachable
- Patience
- Friendliness
- Understanding

Broad-cultured

- xi. Accommodating

Responsibilities Of A Counsellor

By nature of your profession, as a Counselor you have the responsibilities of

- i.Providing accurate information
- ii.   Listening objectively and sympathetically
- iii.   Supporting the client/Employees
- iv.   Caring for patient/Employees
- v.   Being trusty worthy
- vi.   Clarifying current problems of client/Employees
- vii.   Giving advice

Steps Of Counselling

i.Choose a suitable location and sitting arrangement that places all parties on an equal footing.

ii.   Be prepared mentally as well as the client.

iii.   Focus the session on the process not people.

iv.   Focus on the interest of the parties not their possessions.

v.   Always seek a win solution whenever possible.

Referral

As a leader and Counselor, you should recognize your limitations and willingness to refer to colleagues or specialized agency when there is need to do so.
Referral also implies that clients may be referred for expert attention.
The concept of referral reinforces the notion of networking.

SELF ASSESSMENT

INSTRUCTIONS: WRITE TRUE OR FALSE AGAINST EACH STATEMENT GIVEN
QUALITIES OF A COUNSELOR 1. Good listener 2. Trusty worthy 3. Providing accurate information 4. Listening objectively and sympathetically 5. Empathetic 6. Good communication skills 7. Supporting the client/Employee 8. Approachable 9. Patience 10. Friendliness
ANSWERS **1.T 2.T 3.F 4.F 5.T 6.T 7.F 8.T 9.T 10.T**

We have discussed Counseling. We have defined Counseling and emphasized the importance of a R egistered Nurse developing Counseling Skill because, you will be Counseling Clients/Employees during your career. We discussed five steps of counselling,qualities of a counselor such as being a good listener,trustworthy,empathetic etc.we also discussed the principles of counselling such as uniqueness,neutrality,acceptance,flexibility,autonomy etc Well done for acquiring these Counseling skills,this information will assist you to counsel your clients and surbodinates,colleagues at your place of work and the community at large. Now, we are going to focus on Corroboration and networking.

8.5 Collaboration and Networking

Collaboration and networking are important components of nursing and the health care delivery system. In this era of economic and financial crisis, collaboration and networking are tools for reducing costs, sharing ideas and resources, which are critical in the education of nurses and indeed in the care of our patients. Nurses should be able to explain the importance of collaboration and networking within the health care system among nursing teams and corperating partners in health care delivery.

We are now going to define collaboration and Networking

Definition of Collaboration:

Working with others towards solutions that satisfy the work of involved parties e.g. Ministry of health and World Health Organization.

Collaboration is independent entities working together in an effort of mutual interest

Definitionof Networking:

This is when two or more people or organizations work together to achieve a goal. They can be offering the same service or different services but meeting client needs.

Types of Collaboration and Net working
The MOH is responsible for the overall coordination and management of the health sector in Zambia. In order to facilitate efficient and effective coordination, the following sector coordination structures have been established at national, provincial, district and health centre levels .We will now discuss the sector coordination structures at different levels
LEVELS

National Level:	The MOH Headquarters in Lusaka is responsible for overall coordination and management of the health sector.
	The Ministry of Community Development Mother and Child health This Ministry is concerned with community activities and the health of the mother and child as the prime area of concern. It is responsible for running of clinics and health centres in the country.
Provincial Level:	Provincial Health Offices (PHOs) are responsible for coordinating health service delivery in their respective provinces.
District Level:	District Health Offices (DHOs) are responsible for coordinating health service delivery at district level.
Community Level:	At community level, Neighbourghood Health Committees (NHCs) have been established, to facilitate linkages between the communities and the health system.

National management units for specific health programmes have also been established, including: Reproductive Health Unit; Child Health Unit; National Malaria Control Centre (NMCC); National AIDS Council (NAC); and the National Tuberculosis and Leprosy Control Programme Management Unit. In addition to the formal sector organizational structure, MOH has also established the Sector Advisory Group (SAG), which is the forum for policy dialogue and coordination of health sector partners under the Sector-wide Approaches (SWAPs).

Provincial Health Office
These are regional Health offices which provide technical support to districts, general hospitals and training institutions. It is headed by the Provincial Medical Officer.
They house Provincial hospitals and General hospitals which are headed by Medical Superintendents. These are referral points for the district hospitals, providing specialized care including intensive care and life support and specialist consultations.

District
District Health Office
The District Health Office provides technical support to health centres. The District Medical Office is headed by the District Medical Officer.

Each district in the country has a district hospital which is the co-coordinating and referral centre for the health centres and health posts. They provide comprehensive medical and surgical services.

Churches Health Association of Zambia (CHAZ)
This is an interdenominational non-governmental organization in Zambia working to help assist church institution provide services to the Zambian communities. It was formed in 1970.

Composition
It is made up of the Council Board of Directors, Advisory Committees, Secretariat and its affiliates. These affiliates consist of hospitals, rural health centres and community based organizations.

Vision:
A Zambian society where all people are healthy and uphold Christian values.

Mission:
To provide technical, administrative and logical service for holistic quality health services that reflect Christian values so that people live healthy and productive lives.

Core values
All members and affiliates must bear Christian witness.
All members must have client centeredness
All members must have unity of service
All members must be committed to achievement of the purpose
All members must be committed to achieving the vision
Members must work with other stake holders for sustainability
All members must work towards excellence
Members must show openness and offer holistic service.

Services offered by CHAZ:
Curative services-early detection and treatment of disease
Offer preventive and health promotion services
Training of nurses
Community mobilization
Disaster response e.g. Provision of food where there is drought.

HIV/AIDS community programs like educating people on the dangers and prevention of HIV, offer of Home Based Care; resource mobilization.

How to become a member of CHAZ:
To become an affiliate, the health facility, community based organization under CHAZ organizations and institutions should belong to one of the following Christian mother bodies-
Evangelical Council of Zambia, Episcopal Conference, Christian Council of Zambia, Christian Mission in many lands, Seventh Day Adventist; and be recognized by the Ministry of Health.

Community

Community Based Organizations (CBOs)
These are community organisations that are working at community level. They assist the most vulnerable at community level. Below are some of the community based organizations

i.Community Based Distributors
These are community volunteers trained to provide condoms and oral contraceptives at community level. Currently some CBDs have been trained to provide Injectable Depo-Provera at community level as well.

ii.   Community Health Workers (CHWs)
 CHWs are men and women chosen by the community, and trained to deal with health problems of individuals and the community, and to work in close relationship with other health service providers (WHO, 1987).
A Community Health Worker is a volunteer, selected by the community and trained in certain aspects of health and served the same local community. The CHW is answerable to the community and is supported by the Neighborhood Health Committee (MOH 2005)

Functions of a CHW
Record keeping of the following:
  – Community registers for catchments area, reflecting population by sex and age group, birth and death.
  – Client register on common disease including outbreaks; promotive / preventive interventions; stocks and supplies; referrals and patients under home care.
- Provide promotive and preventive activities
- Community empowerment which include the following processes:
  – community mobilization for involvement in local health activities (such as disease outbreaks, national immunization days, child health week, world TB day, World health day, world Aids days and other commemorations.

116

- Problem identification that involves identifying disease out breaks e.g. measles, cholera, malaria, scabies and several others.
- Prioritization and deciding which problems are more important than others.
- Problem solving that involves finding mean of local solutions with community participation and appeal at higher level for assistance where it is necessary.
- Implementation that involves identification the roles of the community when implementing the necessary interventions.

- Monitoring and evaluations of programmes implementation in liaison with health facility staff.
- Provision of home management of illnesses and identica6tion of referral cases.
- Distribution of supplies such as condoms and contraceptives.
- Provide follow up care. Carry out home visit of patients with chronic conditions such as TB, HIV/Aids etc.
- Liaise with other community based agents.
- Link between the community and the health facility.

iii. Trained Traditional Birth Attendants (TTBA's)

In an effort to promote safe motherhood at community level and to broaden the range of safe motherhood providers, the Ministry of Health in 1972 introduced the training programme of Traditional Birth Attendants (TBAs). The training programme is a community-based service that is provided by trained community members. A substantial number of TBAs have since been trained mainly through community initiatives. However, for various reasons, only a fraction of trained TBAs are utilised due to inadequate supplies, inadequate motivation and poor community involvement in the selection process. Recent analyses have come to the conclusion that the impact of training TBAs on maternal mortality is low. An emphasis on large-scale TBA training efforts could also be counterproductive, by holding back the training of the necessary numbers of medium level provides, particularly midwives.These TTBAs help with conducting uncomplicated deliveries in the communities which are far from the health centre.

Non-Government Organizations (NGOs)

These are organizations that are not for profit and are run by different agencies and organizations e.g. Planned Parenthood Association of Zambia (PPAZ), Society for Women and AIDS in Zambia (SWAAZ)Society for family health,Forum for African Women Educationalist of Zambia(FAWEZA) ,YWCA and YMCA etc.These collaborate with the health sector by working with the community through identifying areas of need and facilitating programs,investigations to address the areas concerned.

International Agencies

1.World Health Organization (W.H.O.). It is under United Nations

Functions of W.H.O
To help control and eradicate diseases that pose potential dangers to all citizens of the world.
It helps solve problems of diseases spread between countries
It helps countries plan ways to control diseases
It studies diseases and how to prevent them.

2.   United Nations Children's Fund (UNICEF)
UNICEF was created by the Nations General on December 11, 1946, to provide emergency food and healthcare to children in countries that had been devastated by World War II. In 1953, UNICEF became a permanent part of the United Nations System and its name was shortened from the original United Nations International Children's Emergency Fund with its Headquarter in New York City.
Functions
Provides long-term humanitarian and developmental assistance to children and mothers in developing countries.
Immunization programmes.
It helps during emergencies such as wars, floods earthquakes etc.

3.United Nations Development Programme (UNDP)
The UNDP is the United Nations' global development network which advocates for change and connects countries to knowledge, experience and resources to help people build a better life. UNDP operates in 166 countries, working with nations on their own solutions to global and national development challenges.
UNDP is an executive board within the United Nations General Assembly. The UNDP Administrator is the third highest ranking official of the United Nations after the United Nations Secretary-General and Deputy Secretary-General.
Headquartered in New York City, the UNDP is funded entirely by voluntary contributions from member nations. The organization has country offices in 166 countries, where it works with local governments to meet development challenges and develop local capacity. Additionally, the UNDP works internationally to help countries achieve the Millennium Development Goals (MDGs).
UNDP provides expert advice, training, and grant support to developing countries, with increasing emphasis on assistance to the least developed countries.
4.Red Cross
The International Committee of the Red Cross (ICRC) is a private humanitarian institution founded in 1863 in Geneva, Switzerland, by Henry Dunant, headquartered in the Swiss city of Geneva

Characteristics
The original motto of the International Committee of the Red Cross was *Inter Arma Caritas* ("Amidst War, Charity").
ICRC has four official languages (Arabic, English, French and Spanish). The Official symbol of the ICRC is the Red Cross on white background.
Mission
The official mission statement says that: "The International Committee of the Red Cross (ICRC) is an impartial, neutral, and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of war and internal violence and to provide them with assistance." It also directs and coordinates international relief and works to promote and strengthen humanitarian law and universal humanitarian principles.
Functions
to monitor compliance of warring parties with the Geneva Conventions
help to organize nursing and care for those who are wounded on the battlefield
to supervise the treatment of prisoners of war and make confidential interventions with detaining authorities
to with the search for missing persons in an armed conflict (tracing service)
to organize protection and care for civil populations
to act as a neutral intermediary between warring parties
The ICRC drew up seven fundamental principles in 1965 that were adopted by the entire Red Cross Movement. They are;
Humanity
Impartiality
Neutrality
Independence
Voluntary Service
Unity
Universality

5.United Nations Population Fund (UNFPA)
UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity, Headquarters in New York City
The work of the UNFPA involves improving demographic statistics and assisting with population censuses and major national surveys; improving reproductive health, including national strategies, protocols, providing supplies and services, reproductive health, which expands out into areas such as prevention of sexually transmitted diseases, including HIV/AIDS; and addressing issues concerning the rights of particular population groups, principally women, adolescents and youth, and as relevant, also

national minorities, internal migrants, the elderly and the handicapped. It is known recently for its worldwide campaign against obstetric fistula and female genital cutting.

UNFPA works in partnership with governments, along with other United Nations agencies, communities, NGOs, foundations and the private sector to raise awareness and mobilize the support and resources needed to achieve its mission.
Mission
To promote the right of every woman, man and child to enjoy a life of "health and equal opportunity." UNFPA supports countries in using population data for policies and programs to "reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect."
Three core areas of focus
- i.Reproductive health
- ii.   Gender equality and
- iii.   Population and development strategies

6.United States Agency for International Development (USAID)

The United States of America has a long history of extending a helping hand to those people overseas struggling to make a better life, recover from a disaster or striving to live in a free and democratic country.
U.S. foreign assistance has always had the twofold purpose of furthering America's foreign policy interests in expanding democracy and free markets while improving the lives of the citizens of the developing world.
In 1961, the Foreign Assistance Act was signed into law and USAID was created by executive order.
Since that time, USAID has been the principal U.S. agency to extend assistance to countries recovering from disaster, trying to escape poverty, and engaging in democratic reforms.
USAID is an independent federal government agency that receives overall foreign policy guidance from the Secretary of State.
Headquarters is in Washington, D.C. with its field offices around the world.
It works in close partnership with private voluntary organizations, indigenous organizations, universities, American businesses, international agencies, other governments, and other U.S. government agencies.

7.Swedish International Development Cooperation Agency (SIDA)

This is a Governmental agency of the country of Sweden providing technical assistance and funding throughout the world. In Zambia, SIDA works and collaborates with the Government of the Republic of Zambia.
Goals

Economic growth. To help increase the production of goods and services.
Economic and social equality. To help reduce differences between rich and poor and ensure that everyone's basic needs are met.
Economic and political independence. To help to ensure that countries can make their own decisions on their economies and policies and create the conditions necessary for national self-determination.
Democratic development. To help to ensure that people are given greater opportunities to influence developments locally, regionally and nationally.
Environmental protection. To promote the sustainable use of natural resources and protection of the environment.
Gender equality. To promote equality between men and women.
Areas of Work
Economy
Infrastructure
Humanitarian assistance
Water
Urban development

8.The Clinton Health Foundation
This is a foundation established by former President of the United States- Bill Clinton.
Mission statement
To "strengthen the capacity of people throughout the world to meet the challenges of global interdependence."

Focus areas
The Foundation focuses on four critical areas:
Health security
economic empowerment
leadership development and citizen service and
Racial, ethnic and religious reconciliation.
The Foundation works principally through partnerships with like-minded individuals, organizations, corporations, and governments, often serving as an incubator for new policies and programs.
Offices are located in New York City, Boston and Little Rock, Arkansas.

9.Clinton Health Access Initiative (CHAI)
The Clinton Health Access Initiative (CHAI) is a global health organization committed to strengthening integrated health systems in the developing world and expanding access to care and treatment for HIV/AIDS, malaria and tuberculosis. As of January 1, 2010,

the Clinton HIV/AIDS Initiative, an initiative of the Clinton Foundation, became a separate non profit organization called the Clinton Health Access Initiative (CHAI). CHAI strives to make treatment for HIV/AIDS more affordable and to implement large-scale integrated care, treatment, and prevention programs. Since its inception, CHAI has helped bring AIDS care and treatment to over 750,000 people living with HIV/AIDS around the world. Its activities have included AIDS care and treatment in Africa. CHAI has expanded its partner countries and members of the Procurement Consortium to over 70 including 22 governments, who are now able to purchase AIDS medicines and diagnostic equipment at CHAI's reduced prices.

CHAI launched the Paediatric and Rural Initiatives in 2005 to focus on bringing AIDS care and treatment to those most often marginalized— children and those living in rural areas. CHAI also negotiated agreements that reduce the prices of second-line drugs and rapid diagnostic tests. In addition to drug access programs, CHAI also focuses on country operations, with programs that help governments with paediatric care and treatment, improving rural health care and human resources for health and the prevention of mother to child transmission (PMTCT).

JHPIEGO Jhpiego has been working in Zambia since 1999, implementing programs in HIV/AIDS, family planning, emergency obstetric and neonatal care, postabortion care, infection prevention and pre-service midwifery education, with funding from the U.S. Agency for International Development (USAID), U.S. Centers for Disease Control and Prevention (CDC), Health Resources and Services Administration, the U.S. Department of Defense (DOD) and others.

With support from CDC, Jhpiego is currently partnering with the Zambian Ministry of Health to support their rapidly growing national HIV/AIDS program, supporting interventions such as HIV counseling and testing, antiretroviral therapy, tuberculosis (TB) and HIV integration, electronic health records ("SmartCare"), prevention of mother-to-child transmission of HIV (PMTCT) and adult voluntary medical male circumcision (VMMC). With DOD support, Jhpiego collaborates with the Zambian Defense Force (ZDF) to strengthen antiretroviral therapy, HIV/TB, PMTCT and VMMC services in ZDF health facilities,

National management units for specific health programmes have also been established, including: Reproductive Health Unit; Child Health Unit; National Malaria Control Centre (NMCC); National AIDS Council (NAC); and the National Tuberculosis and Leprosy Control Programme Management Unit. In addition to the formal sector organizational structure, MOH has also established the Sector Advisory Group (SAG), which is the forum for policy dialogue and coordination of health sector partners under the Sector-wide Approaches (SWAPs).

We have discuesed awide range of areas the health sector collaborates with and how the net working is done.Now to assess your self do the exercises which follow below:

SELF ASSESSMENTON A PIECE OF PAPER,

WRITE TRUE OR FALSE IN THE FOLLOWING STATEMENTS

1.Community based organizations work at community level

2. Community based distributors are volunteers trained to assist women deliver in the community   -------------

3 . Community health workers are trained to deal with health problems of individuals in the community   --------

4. Trained birth attendants help with conducting deliveries in the community   -----------

5. Non Governmental Organisation are non profit organizations run by different Agencies: ------

The next session comprises of Multiple choice questions.

On Your piece of paper write the letter of the most appropriate response.

6.The following are Non Governmental organizations **EXCEPT:**

a)   Forum for African women Educationalist for Zambia (FAWEZA)

b) Planned Parent hood Association of Zambia (PPAZ)

c)Society for women and AIDSin Zambia(SWAAZ)

d)UnitedNations Populations Fund Agency (UNFPA)

7.The following are internatioanal organizations **EXCEPT**

a) World Health Organization (WHO)

b) United Nations International Children's fund (UNICEF)

c) John's Hopkins Programs in Gynaecology and OBSTETRICS (JHPIEGO)

d) Young Women Christian Association (YWCA)

KEY TO THE ASSESSMENT. Now you can compare your responses to the marking key below

   1. T 2.F 3.T 4.T 5.T   6.D 7D

     Very good

8.6 Lobbying and Negotiation skills

 Today we are going to discuss lobbying and negotiating skills,having discussed collaboration and net working ,you will utilize the skill you will learn to collaborate and net work with other stake holders

 Welcome to lobbying and negotiating skills. In our topic were going to focus on Importance of lobbying and Negotiation strategies and lobbying steps. Let us now look at the definition of Lobbying.

Lobbing is the process of influencing public and government policy at all levels. (http://legal-dictionary.thefreedictionary.com/Lobbying)

If you lobby some one such as a member of parliament.government or council,you try to persuade them that aparticular law should be changed or that particular thingshould be done

The Goal of Negotiation

The goal when negotiating in a meeting is not only to get what you want but to help the other side get something too. Win-win means both sides gain something, and it goes a long way toward building your reputation and helping you in your future." Having looked at the goal of negotiation we are now going to outline the negotiating skill that are required .These are

- Active Listening
- Addressing Misunderstandings
- Analytical
- Anticipating Negotiating Strategy of your Counterpart
- v.Asking Others to Propose Solutions
- Asking Probing Questions
- Assertiveness
- Avoiding Ultimatums and Provocative Language
- ix Brainstorming Options
- x. Building Rapport
- xi. Compromise
- xii. Creativity
- xiii. Decision Making
- xiv. Delineating the Benefits of Adopting a Position or Course of Action
- xv. Demonstrating Understanding of the other Party's Position
- xvi. Drawing Consensus

 Having outlined the negotiation skills we are going to continue with the importance of negotiation skills.

Negotiation skills are important due to the following reasons;
i. You can convince someone that a certain treatment is the best one
ii. You can convince someone to implement a new program or behavior treatment plan
iii.You can request a higher salary or better working conditions

Requirement Before And During A Negotiation Meeting
It is necessary that you should know what to prepare before and during the meeting for negotiation.

Before the meeting

Identify your goals on what do you want to get out of the meeting.Do your homework by finding out who will be at the meeting, know what positions they are likely to take so that

124

you come prepared.Have examples and options in mind and have necessary materials ready

During the meeting, interact with all members, but keep in mind who makes decisions. Present your position, summarize and state your position and understand the "other side". When in disagreement, ask for clarification, and identify the in-charge person. continue to identify agreeable points from both sides and compromise when possible. Be part of the team and Follow the guidelines for responsible conduct. Summarize, document conclusions, know when to talk and use best ethics

Tips on Negotiation

Dream big on your proposal, ask for more than you expect to get, Feel, Felt, Found formula. Use words to convey the concept: Example: "I understand how you *feel*, other people have *felt* the same way, but do you know what we have *found*?" (Bailey & Burch, 2010)

We have looked at negotiation skills. As a leader, it is important that you take up negotiation tasks so that you know and understand your partners in Health better. We will continue with lobbying.

Lobbying

Lobbying is a method by which you ethically work to influence the actions of others to have a positive outcome (Bailey & Burch, 2010)

Lobbying should be done *before* presenting a proposal. "Understanding whom you are talking to so you can deal with any concerns ahead of time is a good strategy for being an effective professional" (Bailey & Burch, 2010). There are steps to follow in lobbying. These are;

I.   Establish yourself as a reinforcer

ii. Establish a relationship and present yourself as non-threatening

iii. Ask questions to get information

iv.   Show appreciation and Form trust

v.   Assess the response, don't rush it, once people reject an idea, it is difficult to get them to reconsider.

We have discussed negotiation and lobbying. Let us assess our selveson how best we have understood the session by attempting this exercise

ASSESSMENT

ON A PIECE OF PAPER

WRITE TRUE OR FALSE AGAINST THE NUMBER OF THE QUESTION

1. The goal when negotiating in a meeting is only to get what you want T/F
2. lobbying is the same as negotiation   T / F
3. Lobbying is a method by which you ethically work to influence the actions of others to have a positive outcome T/F
4. Lobbying should be done after presenting a proposal   T/F

   THIS SECTION IS MULTIPLE CHOICE QUESTIONS .ON YOUR PIECE OF PAPER WRITE DOWN THE MOST APPROPRIATE RESPONSE

5.The following are steps to follow when lobbying EXCEPT

a) Establish yourself as a reinforcer
b) Establish a relationship and present yourself as non-threatening
c)   Ask questions to get information
d) Manipulate stake holders

6 . The following are the important reasons of Negotiation skills EXCEPT.

a). You can convince someone that a certain treatment is the best one
b). You can convince someone to implement a new program or behavior treatment plan
c) You can establish yourself as a reinforcer
d).You can request a higher salary or better working conditions

 That was a good exercise .Let us now check how we faired by comparing our responses to the key below

Answers to assessment on lobbying and negotiation
1,F .2.F   3.T   4.F 5.D 6.C

 We will now focus on social mobilization.

8.7 Social mobilization

Welcome to Social mobilization. You have already looked at social mobilization in Public Health Nursing. Before we go into the details of our discussion, do the following activity:

ACTIVITY

Get a pen and define social mobilization.

……………………………………………………………………………………………………
……………………………………………………………………………………………………

Good! Now compare with the definition we have.

Definition

Social mobilization is a process that engages and motivates a wide range of partners and allies at national and local levels to raise awareness of and demand for a particular development objective through face-to-face dialogue.

As a leader, you need to know the Partners in Health in order to achieve a desired goal when need arises. In Health, many activities require Social mobilization

. Therefore, it is important that as a Leader, you know the influential Partners in Health such as:

ations community health workers traditional birth attendants community based distributors ,Neighbourhood health commThe Village Headmen,Chiefs,Peers, and community based organizittees, traditional healers and other support groups)

If there is an outbreak of measles and the Community does not take their children for vaccination, as an in-charge of a Health Centre, you will need to mobilize the community and find out the reasons why. From their reasons, you draw up a plan on how you are going to educate the community through the Chiefs, Headman, peers, Neighborhood Health Committees. Such moves make your Health message reach the community and the community easily gets the information on the advantages and through their traditional leaders.   Thereafter, draw your plan with the partners so that you make the Health services available, accessible and affordable to the Community using cost effective measures.

8.8 Unit Summary

Dear learner, in this unit we defined some terms that are used in advocacy and discussed counseling where we looked at the steps that are involved in counseling as well as the principles. We also discussed collaboration and networking which is very important in health services provision. Lobbying and negotiating skills are the other skills that we looked at as well as social mobilization. This chapter will help you in your practical experience especially when you go out in the community and primary health care experience.

Self Assessment

1. As a leader, you need to know the Partners in Health in order to achieve a desired goal T/F
2. The Village Headmen,Chiefs,Peers, and community based organizations are examples of influential partnerssocial mobilization   T/F

Answers to the self assessment   1T   ,2T

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UNIT NINE: QUALITY ASSURANCE

9.1 Unit Introduction

In this unit we are going to discuss the Principles of Quality Assurance,describe Quality Assessment , Describe Quality Improvement
This unit covers the aspect of quality assurance involving quality and quality of healthcare and quality assurance,and quality improvement

Quality assurance is an organization's guarantee that the product or service it offers meets the accepted quality standards. It is achieved by identifying what "quality" means in context; specifying methods by which its presence can be ensured; and specifying ways in which it can be measured to ensure conformance.

9.2 Unit Objectives

At the end of this unit, you should be able to:

- 1. Define some terms used in quality assurance2. Discuss Principles of Quality Assurance 3.Differentiate between Quality Assurance and Quality Improvement
- 4 Outline the dimensions and perspectives and cost of quality
- 5.Discuss approaches to Quality improvements

- 6.Discuss Performance Assessment

9.3 Definition of Terms
We are now going to define some terms used in quality assurance
Quality is defined as the standard of something as measured against other things of a similar kind. The quality of something is how good or bad it is.

Quality of Health care refers to the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge (e-Source,2015).
Quality Assurance
1. It is all the process within the health system that leads to the institutionalisation of a culture of doing the right things right, all the time.
2. Quality assurance is anchored in the concept of being able to determine up front acceptable and affordable levels of performance and institutioning mechanisms to be able to tell when these levels are being achieved or not.

9.4 Differences between Quality Assurance and Quality Improvement
Quality Assurance
It is important to know how quality assurance came about. Therefore we are going to discuss the brief history of quality assurance
Brief history of Quality Assurance (QA)
The focus was to strengthen the delivery of Primary Health Care, to address needs as close to the client as possible and reduce the need for expensive hospital care. Refer to the Quality Assurance Cyle (figure 12).
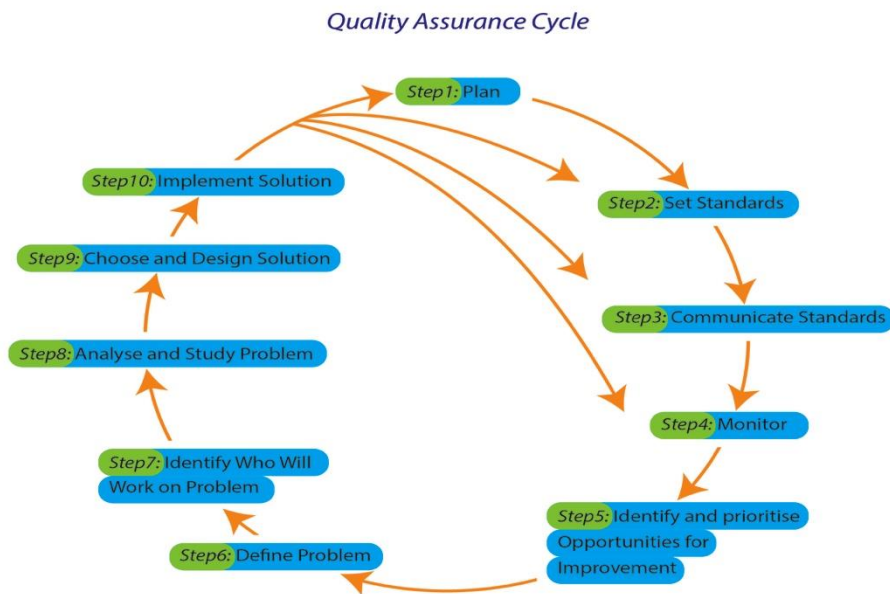The followingApproaches were used :
1. Quality Improvement (QI)
2. Performance Improvement (PI)
QI and PI are important approaches to improving quality of health care services and are virtually based on Problem Solving Cycle.

Dear learner,to understandstand quality assurance master the quality assurance cycle below as it summarises what is involved is attaining quality in an institution
Figure 12: Quality Assurance Cycle

Quality Assurance Cycle

- **Step1:** Plan
- **Step2:** Set Standards
- **Step3:** Communicate Standards
- **Step4:** Monitor
- **Step5:** Identify and prioritise Opportunities for Improvement
- **Step6:** Define Problem
- **Step7:** Identify Who Will Work on Problem
- **Step8:** Analyse and Study Problem
- **Step9:** Choose and Design Solution
- **Step10:** Implement Solution

Quality Improvement

Now that you have mastered the quality assurance cycle ,let us go through the principles of quality assurance .These will assist you in trying to attain quality in your health care delivery.

Principles of Quality Assurance

1. Client focus

QA stresses the fact that health services exists to meet the health needs of the clients who use them.

By focussing on serving the needs of clients, healthcare providers perform better and this means caring for the entire person rather than simply addressing the ailments.

2. Understanding work as processes and systems

QA recognises that unclear, redundant or incomplete systems or processes may cause problems in the delivery of quality health care.

Instead of blaming the people working in these systems for poor performance, QA involves them in the prevention, detection and resolution of problems within processes or systems in order to improve the quality of care.

3. Testing changes and emphasising the use of data

QA emphasises the need to improve processes by understanding how they function. This principle promotes decision making based on accurate and timely data rather than on assumption.

Understanding and using data also means understanding variation or differences in the output of the process or whether it indicates a real change (either as an indication of a problem or of an improvement).

4. Teamwork

QA focuses on participation and teamwork to solve problems and implement quality solutions, recognising that the impact of QA activities is most powerful when team members draw on the participation, experience and knowledge of major participants and stakeholders.

To understand quality assurance you need to know quality assessment and the types of assessments that should be done

Let us go through them now

Quality assessment

Assessment can take the form of a "snap shot" assessment or a detailed study.

Start by finding out if you have all the things you require to provide quality services. Consult the beneficiaries on whether they are happy with the way services are being provided e.g ask the clients about the health centre.

Take action to improve the problems that have been identified.

Measuring Quality

As a Leader, you will need to need to know the measurements used in quality. There are 3 types of measures used in quality work. According to Dute University (2005), These are

- Structure: Physical equipment and facilities
- Process: How the system works
- Outcome: The final product, results

Structure and process are easier to measure; but the outcome is more important.

We are now going state the types of assessment done in relation to quality assessment. These are as stated below

Types of assessment

- *Self-assessment* – done by yourself.
- *Peer assessment* – done by a colleague at the same level as you.
- *Quality survey* – using a questionnaire which defines quality.
- *Exit interview* – asking patients as they leave the health facility about the care that has been given.

Equipment checklist of normal requirement; taking an inventory.

- *Monitoring and evaluation*

   Now that we have gone through the types of assessments in quality assessment it is importance that we expand on monitoring and evaluation aspect.

Monitoring is the systematic collection, analysis and use of information from projects and programmes for three basic purposes:
- To learn from the experiences acquired (learning function);
- To account internally and externally for the resources used and the results obtained (monitoring function);
- To take decisions from the learning and monitoring function.

How is monitoring done?
This is done by doing the mentioned activities below
- Use of indicators
- Supervision
- Review of documents
- Requisites for effective monitoring system
- Have commitment and interest
- Know how to interpret data
- Know how to change the situation

Evaluation is assessing as systematically and objectively as possible an ongoing health care services or completed project, program. The objective is to be able to make statements about their relevance, effectiveness, efficiency, impact and sustainability. Based on this information, it can be determined whether any changes need to be made at a project, program or policy level, and if so, what they are. It find out what has gone well in the Health care services and whether there is room for improvement.   Evaluation thus has both a learning function - the lessons learned need to be incorporated into future proposals or policy - and a monitoring function - partners and members review the implementation of policy based on objectives and resources mobilized.

Monitoring and evaluation are complementary in services delivery. During an evaluation, as much use as possible is made of information from previous monitoring. In contrast to monitoring, where emphasis is on the process and results, evaluation is used to provide insight into the relationships between results (for example, the strengthened capacity of an organization), effects (for example, improved services / products) and impact (for example, improved service delivery to the target group).

Therefore, monitoring and Evaluation helps a manager to steer and adjust current program and projects; as well as learn more about what works and what doesn't.

Dear learner we have come this far in quality assurance it is important that you know how performance is measured because quality assurance assessment is activity based and you have to assess performance of the institution.

What do you think are the areas to be considered when measuring performance.

Brain storm on the areas to consider when measuring performance

Read through the following areas to consider when measuring performance

Measuring performance

- *Quality*
- The performance matches the specification
- Meeting customer expectations
- *Quantity*
- Rate
- Timeliness
- *Cost*
- Labour
- Material
- management

Let us now turn to quality improvement.

Quality Improvement.

Earlier we defined quality improvement as a continuous process of identifying areas of concern (indicators), collecting data on these indicators on an ongoing basis, analyzing and evaluating the data, and implementing needed changes

Figure 13 below illustrates quality improvement as a formal approach to the analysis of performance and systematic efforts to improve it.
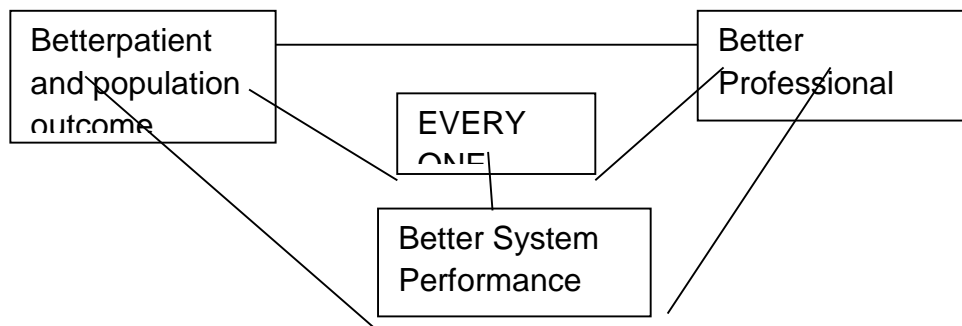
Betterpatient and population outcome

Better Professional

EVERY ONE

Better System Performance

Figure 2: Quality improvement

133

Our approach to health care improvement applies the main principles of uality Improvement rely on:

- Focusing on the client,
- Involving teams of health workers in testing changes to make health care better, and
- Making changes to processes and systems of care delivery to yield improvement.

In this section we are going to discuss approaches to quality improvement

- **Basically the there are two approaches** that are commonly used such as the 5sapproach to managing the work environment and the performance improvement approach (PIA)

Let us discuss these approaches one by one starting with performance improvement. We will start by defining performance improvement.

Performance Improvement

This is a systematic process that uses the following nine essential elements:

1 Technical competence: the knowledge and skills needed to provide quality and safe health care.
2 Technical performance: even if a health worker has the knowledge and skills she/he needs to apply these skills and to have the necessary inputs to provide the correct service.
3 Effectiveness: care provided must yield the intended results.
4 Efficiency: Providing services in time and with minimum wastage
5 Safety: both health care providers and clients need protection against harm in our institutions
6 Accessibility: clients have the right to health care and all barriers to health care should be eliminated
7 Continuity in care: clients should receive coordinated care
8 Interpersonal relationships: refers to a peaceful and friendly work environment.
9 Amenities: refers to accessories for giving comfort to staff and clients.

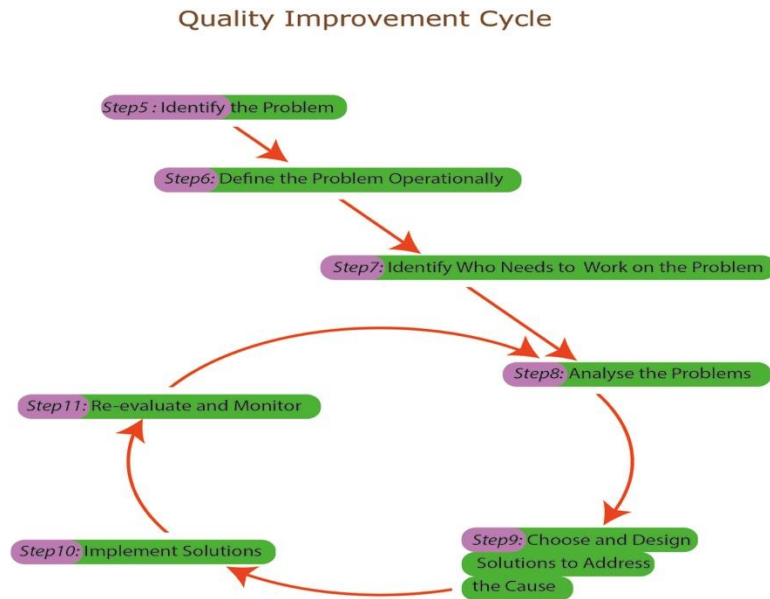The Quality Improvement Cycle is illustrated in Figure 12 below.

Quality Improvement Cycle

Figure 3: The quality improvement cycle

Having discussed quality improvement we are now going to discuss performance assessment try to reflect and see how you can connect the two in attaining quality in your delivery of careand how you can assist your ward manager improve

9.5 Dimensions Perspectives and cost of Quality

9.6 Approaches to Quality Improvement

9.7 Performance Assessment

We will start by defining the word performance and assessment

Performance ;Some one's performance is how successful they are or how well they do something

The performance of a taskis fact or action of doing it

Performance :is Something that is difficult or complicated to do.

Assessment: This is a consideration of some one or something and a judgement about them

To implement performance assessment in any given situation or environment knowledge about quality assessment and monitoring and evaluation have to be appreciated. Therefore we will discuss the two concepts one by one

9.5 PERFORMANCE AUDIT / PERFORMANCE ASSESSMENT

Lastly but not the least we are now going to discuss performance audit or in other words performance assessment.

Definition

Performance audits are independent reviews of government funded organizations (State Audit Institute, 2010).

They assess whether organizations are undertaking their functions efficiently, effectively and economically. These are often are referred to as the three E's.

- Effectiveness relates to the outcomes or results of a program or activity. A performance audit will compare the planned outcomes with actual outcomes. An example could be where disease rates have fallen as a result of healthcare.
- Efficiency generally refers to the best way of doing things, but with regard to acceptable quality. It is concerned with the relationship between goods and services produced (outputs) and the resources used to produce them (inputs). That is, getting the most from available resources. An example could be where waiting times for emergency care at hospitals have reduced over time.

Economy: This generally refers to the cheapest way of doing things, but with regard to acceptable quality. It is concerned with minimizing the cost of resources used (e.g. people, materials, equipment). An example could be where healthcare supplies or services are purchased at the best possible price.

When Performance audits are conducted, they may review one or all of the three E's. They can also review a government program, all or part of a government organization, or review an issue that affects the whole public sector. If necessary, performance audits make recommendations for improvements.

Performance audits are important because they seek to improve the accountability and performance of government organizations so that the community receives value for money from government services.

Performance audits have three key phases and these are: planning, fieldwork and reporting.

• Planning: During this phase the performance audit team develops the audit objectives, criteria and plans the audit fieldwork. Audit criteria are standards of performance against which an organization or program is assessed. Criteria may be based on best practice, international standards, government targets, procedures or guidelines.
• Fieldwork: During this phase the performance audit team will collect information relevant to each audit criterion. This generally involves interviewing people within the organization, undertaking surveys, and reviewing documents and data.
• Reporting: At the end of fieldwork we will meet with the organization's management team to discuss the audit's findings. Following this we will prepare a draft performance audit report which we will also discuss with management to check that facts presented

in the report are accurate and that any recommendations are practical and appropriate. A final report is then provided to the head of the organization and to the government.

9.7 Unit Summary

We have come to the end of unit nine where we have dicusseQuality assurance as being an organization's guarantee that the product or service it offers meets the accepted quality standards. It is achieved by identifying what "quality" means in context; specifying methods by which its presence can be ensured; and specifying ways in which it can be measured to ensure conformance.

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UNIT TEN: HEALTH MANAGEMENT INFORMATION SYSTEM (HMIS)

10.1 Unit Introduction

Welcome to unit ten which discusses Health management information systems(HMIS). In this unit we are going to start by defining the key terms in used in (HMIS), then we will state the the principles of HMIS. There after we are going to discuss knowledge and skill in documentation and reporting, Discuss the types of health information, then we shall end by discussing the role of a nurse in information management

ACTIVITY

BRAINSTORMING

WHAT IS HEALTH MANAGEMENT INFORMATION SYSTEM

HOW IS IT UTILISED IN THE HEALTH SYSTEM

To understand the session you will be guided by the following objectives

10.2 Unit Objectives

At the end of this unit, you should be able to:

1. Define key terms
2. State the Principles of HMIS
3. Describe Information Technology
4. Discuss the types of health information
5. Discuss Knowledge and skills in Documentation and Reporting
6. Discuss the role of a nurse in information management

10.3 Definition Of Key Terms

We are now going to define Health Management Information Systems. But before we do that here is an exercise for you.

ACTIVITY

Define Health Management Information Systems in your own words. Write the answer in your note book and then compare with our definition.

 INTRODUCTION

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HMIS - Health Management Information System HMIS stands for health management information system. HMIS is a very important unit in the health sector as it helps the health care providers in the management of their patients/clients in health institutions.. This system is used by health institutions to collect, process analyze and store data/information in a manner or format that makes it easy to access the data and information whenever it is required.Health Management Information Systems, or health

care IT as it is often called, refers to the management of information related to patient records, and other health care-related information.

. HMIS also provides information on the health status of a population which can be used to set policies to manage operations

DEFINITION OF TERMS

Data / Information

Data – Data is comprised of raw facts, figures, records which are not processed.

Information - Processed data giving a meaningful picture.

Information is data that is accurate and timely, specific and organized for a purpose, presented within a context that gives it meaning and relevance, and can lead to an increase in understanding and decrease uncertainty. Information is valuable because it can affect behavior, a decision, or an outcome. For example, if a Doctor is told his/her medical condition has deteriorated in the past week, he/she may use this information as a reason to order laboratory tests, investigate the problem in detail based on the prevailing symptoms and eventually adjust treatment the patient is on. A piece of information is considered valueless if, after receiving it, things remain unchanged. For this reason, information helps people to plan, inform, communicate with others and supports decision making.

Data Analysis

Data analysis is a process of inspecting, cleaning, transforming and modeling data with the goal of discovering useful information, suggesting conclusions and supporting decision making.

The following are some of the principles of HMIS;

Let us us now discuss the principles of HIMS

10.4 Principles of HIMS

Principle 1:

A health information system needs to have a logical and transparent structure.

- There exists an abundant literature on HISs. A large part of it is devoted to the description of particular experiences. Another part treats special features including non-technical obstacles like a bad adaptation to administrative structures, jealousy between institutions, and 'donor attractiveness'.

Principle 2:

 Attempt by all means to create an integrated HIS that serves all users*.*

We will see in the sequel what this may mean in concrete technical terms, and in particular why one does not need a separate CDD-book! It also means that managing health insurance should be included in the first application of an integrated HIS mentioned above, and not rest on a separate information system. This is already being done in some countries, though not quite consistently.

Principle 3:

In a given health institution, for each target population, that is for each type of unit, there shall be only one register.

There exists another stringent reason why one needs to abide by this principle. It is a more practical one, which has already led us to Principle 2 namely that several registers for the same target population put an unnecessary burden on the health worker.

For example, in order to satisfy the demands of different specialized health networks and vertical programs, a health worker is often obliged to record the data concerning a consultation into different books or computer files depending on the diagnosis; it may be in the 'general' register, or more specific ones, for example for malaria, tuberculosis, mother and child care.

Principle 4:

A HIS must be flexible *in order to adapt itself to changes of all kind such as evolving sociologic and economic conditions, changes of the epidemiological situation and the state of health of the population, scientific progress in public health and medicine, and changes in information technology.*

The basic structural elements of a HIS are the *variables* that appear in it, not the indicators to be calculated. The shape of the registers and the type of the reports depend on the variables, and therefore these cannot be altered without affecting the entire HIS, be it paper- or computer-based. Hence a good choice of the set of variables to be included in the system is one of the fundamental decisions to be taken right in the beginning. Indicators, on the contrary, can be calculated from a given and fixed set of variables in many ways dictated by needs that may change with time. They may even include certain indicators needed only once.

Principle 5:

Coordinate registers and reporting forms between them by their layout and by a clear designationof corresponding variables. Calculate indicators as much as possible as part of the daily work routine.

The CDD-information system mentioned in the Introduction was built around these ideas.

Principle 5 implies in particular that instructions for health workers on how to calculate and report a specific indicator should start by an explicit identification of the variables on whom it depends, mimicking thus what the software of a partially or entirely computerized HIS does. In a HIS which follows this principle, it is possible to calculate *all* required indicators that concern a given target population and a given period by running through the register only once, and not a new for every indicator as is usually being done. If tally sheets are being used, they must consistent,complete before starting a new one.

Principle 6:

A health institution sends a report on paper only to the higher-level institution that needs it most or most urgently. It is then up to the latter to distribute it horizontally to those who require it. A higher-level office never requires 'summary' reports from the lower level.

If a health facility is connected electronically to higher- or equal-level institutions by email or in a special network, sending several copies of a report in several directions is easier, but one should not use this fact as an excuse for multiplying reports indiscriminately: this would simply shift the burden from the sender to the receiver! Different periodicities of reports requested by different administrations are often cited as obstacles to the integration of their own HISs. For example, a department of a Ministry of Health may ask for quarterly reports and a particular vertical program may insist on monthly ones for the same indicators. This problem can practically always be solved by renewed planning in order to eliminate unnecessarily frequent reports, and in the worst case by suitable horizontal reporting

Klaus Krickeberg (2008) HEALTH INFORMATION MANAGEMENT JOURNAL Vol 36 No 3 2007 ISSN 1833-3583 (PRINT) ISSN 1833-3575 (ONLINE) Accesed on 11/10/13

10.5 Information Technology

This is the information technologywhich is applied to health care. It provides the umbrella framework to describe the comprehensive management of health information across computerized systems. Health Information Technology is defined as the application of information processing involving both computer hardware and software that deals with the storage, retrieval, sharing and use of health care information, data and knowledge for communication and decision making.

Types

1. Electronic Health Record (HER)

This is a digital version of a patient's paper chart. They are real- time, patient-centered records that make information available instantly and securely to authorized users e.g SMART CARE cards.

2. Clinical Point of Care Technology

This is when physicians deliver health care products and services to patients at the time of care using information technology.

e.g Computerised provider (physician) order entry (CPOE) which helps medical practitioners to input medical instructions and treatment plans for the patients at the point of care. They also help medical practitioners detect errors such wrong prescriptions or non-adherence to treatment regimes.

Systems

 In Zambia we have two types of Health information systems as forllows:

Health management information systems. This is the system used by the ministry of health to capture data or information on health in the first level hospital s (District Hospitals) and the health centres.

Hospital Management Information(Hospital MIS). This is a system which is used by the ministry of health to capture information on health from the second level ,third level and specialist Hospitals.

10.6 Types of Health Information Health information systems (HIS) are information management systems that capture and display data related to the delivery of health care services.

An HIS is not just a system of computers and software. It includes clinical guidelines, medical terminology dictionaries, and interfaces the various diagnostic devices and other clinical and business information databases, such as laboratory, pharmacy and diagnostic imaging. It is also used for public health and medical research purposes (http://www.ehow.com/list_6860442_types-health-information-systems.html#ixzz2hOjqGtG2)

10.6 Documentation and Reporting

You may recall now that we covered this part in unit four of this subject. The purpose of discussing it again is to just highlight some omitted elements which may focus on HMIS. A lot the other material are still bearing the same significance especially the definitions e.t.c.

Definition of Documentation:

Documentation is any written or electronically generated information about a client that describes the care or service to the client.

A report is a document characterized by information or other content reflective of inquiry or investigation, which is tailored to the context of a given situation and audience.

Reason for Documentation:

- i.To facilitate communication:
- Through documentation, nurses communicate to other nurses and care providers their assessments about the status of clients, and nursing interventions that are carried out. Documentation of this information increases the likelihood that the client will receive consistent and informed care or service.

ii.To promote good Nursing care

- Documentation encourages nurses to assess client progress and determine which interventions are effective and ineffective, and identify and document changes to the plan of care as needed.

iii. To meet professional and legal standards:
- Documentation is a valuable method for demonstrating that, within the nurse-client relationship, the nurse has applied nursing knowledge, skills and judgment according to professional standards. The nurse's documentation may be used as evidence in legal proceedings through professional regulatory bodies. E.g. in a court of law, the client's health record serves as the legal record of the care or service provided.

Reporting

Reports are accounts of events either written or verbal, heard or seen. Written reports are important because they provide records which serve as legal documents.
HMIS reports provide records which are necessary in the management of patients and in the aggregation of data.
 The following are some of the tools used in the HMIS reporting.
i. Out Patients' attendance tally sheets.
ii. In patient admission registers
iii. ART cohort summary forms
iv. Stock cards for drugs etc
v. Antenatal and postnatal activity sheet.
vi.   Analytical tools
•   Maps
•   Coverage graph
•   Disease trend graphs
The hospital or your health centre has a person trained in the Information Technology to collect all the facility data and aggregate it before sending it to the district and then to the Province and finally to the Ministry of Health Headquarters.

Now let's look at the roles of the nurse in information management.
10.7 Role Of a Nurse In Information Management
The nurse manager is concerned with every day planning and strategic planning. As a manager your decision making abilities are enhanced when you have the necessary information at your finger tips and when that information is accurate and up to date.
So as a manager you are expected to:

i. Keep or access information regarding patient administration e.g.

-Patient admission.

-Patients statistics on bed occupancy, midnight census against average number of patient days per ward or unit.

-Number of days each patient spent in the hospital.

- e.t.c.

ii. Aggregate information for reporting purposes.

iii. Collect information on stock levels which will assist in decision for replenishing.

iv. Confidentiality - safeguards information that is gathered within our places of work and or interactions with other people. The nurse manager should be able to keep the information in confidence.

This addresses the issue of how to keep information exchanged within our workplaces without letting it being disclosed to third parties. Confidentiality, for example, prevents nurses from disclosing information shared with them by a patient in the course of a nurse–patient relationship. Unauthorized or inadvertent disclosures of data gained as part of being a service provider are breaches of confidentiality.

v. Securing information

Securing information can be defined as "the procedural and technical measures required:

- To prevent unauthorized access, modification, use, and dissemination of data stored or processed in a computer system.
- To prevent any deliberate denial of service.
- To protect the system in its entirety from physical harm.

Security helps keep health records safe from unauthorized use. When someone hacks into a computer system, there is a breach of security (and also potentially, a breach of confidentiality). No security measure, however, can prevent invasion of privacy by those who have authority to access the record.

10.8 Unit Summary

Dear learner, we have during our discussion on Health Management Information Systems, we defined some topic related terms and outlined the principles of health Management Information Systems. We looked at Information technology and types of health information. Documentation and reporting is another area that we discussed, including the role of the nurse in information management.

ASSIGNMENT

In your areas of practice identify at a minmum of five tools ued in Health management information system

10.9 References

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UNIT ELEVEN: ENTEPRENEURSHIP IN NURSING.

11.1 Unit Introduction

Welcome to unit 11 which is about entrepreneurship in nursing. As you could be aware and also basing your knowledge of nursing practice course, nurses role are constantly evolving. This therefore, calls for a nurse to be innovative in health care (nursingworld.org/). Among other roles, nurses are now being encouraged to get involved in entrepreneurship.

The following objectives will assist you understand Entrepreneurship

11.2 Unit Objectives

1. Define entrepreneurship

2. Outline the concepts of entrepreneurship

3. Explain principles of entrepreneurship

4. Discuss the importance of partnerships

5. Describe the process of managing a private nursing practice

6. Describe Financial Administration Management Systems (FAMS)

11.3 Concepts

Well learner, before we look at the concepts used in entrepreneurship, let us do the following activity:

ACTIVITY

What is entrepreneurship in your understanding? Write down the answer in your note book and compare with our definitions as you read.

Entrepreneurship is more than simply "starting a business." It is a process through which individuals identify opportunities, allocate resources, and create value.

The key concepts in Entrepreneurship are Entrepreneurship, Entrepreneur, entrepreneurial and Management

We are now going to define them one by one

i.Entrepreneurship is a practice of starting a new organization particularly new business in response to identified opportunities. It is a process of discovering, evaluating and exploiting opportunities.

Entrepreneurship is the capacity and willingness to develop, organize and manage a business venture along with any of its risks in order to make a profit (http:www.businessdictionary.org)

Entrepreneurship is the state of being an entrepreneuror the activities associatedwith beingan entrepreneur.

ii. An **Entrepreneur** is a person who is willing and is able to convert a new idea or innovation into a successful innovation. It is someone who acts regardless of resources directly under his control in order to pursue an opportunity.

    A an entrepreneur is person who sets up business and business deals in business circles

iii .Entrepreneurial means having the qualities that succeed is an entrepreneur.

iv.Management is the control and organizing of a business or other organization.for example you can say a Zoo needed better management than more money.This simply the zoo had enough capital to run effectively butdidnot have good people to run the affairs

Management can be refered to people ewho control and organize a business sor other organization as the "management".You can for example say the management is doing its best to improve the situation" or we need to get more women into top management ,probably women have been seen to be better performers.

Management is the people control different parts of of their live si.e   her management of her professional life, Intelligent money management such as paying big bills monthly where possible.

.

Now that we defined the concepts,this will give us a better understanding of what follows as the conceots will used more frequently in the sessions to follow.

ACTIVITY:

REFLECT ON THE CONCEPTS ABOVE.TRY TO DEFINE THEM AND ELABORATE ON THEM ON YOUR OWN

The next session we are going to explain principles of entrepreneurship

What is entrepreneurship?

11.4 PRINCIPLES OF ENTREPRENEURSHIP.

Creativity is the spark that drives the development of new ways to do business. It is the push for innovation and improvement. It is continuous learning, questioning, and thinking outside of prescribed formulas.

Dedication is what motivates the entrepreneur to work hard, 12 hours a day or more, even seven days a week, especially in the beginning, to get the endeavor off the ground. Planning and ideas must be joined by hard work to succeed. Dedication makes it happen.

Determination is the extremely strong desire to achieve success. It includes persistence and the ability to bounce back after rough times. It persuades the entrepreneur to make the 10th phone call, after nine have yielded nothing. For the true entrepreneur, money is not the motivation. Success is the motivator; money is the reward.

Flexibility is the ability to move quickly in response to changing market needs. It is being true to a dream while also being mindful of market realities.

Leadership is the ability to create rules and to set goals. It is the capacity to follow through to see that rules are followed and goals are accomplished.

Passion is what gets entrepreneurs started and keeps them there. It gives entrepreneurs the ability to convince others to believe in their vision. It can't substitute for planning, but it will help them to stay focused and to get others to look at their plans.

Self-confidence comes from thorough planning, which reduces uncertainty and the level of risk. It also comes from expertise. Self-confidence gives the entrepreneur the ability to listen without being easily swayed or intimidated.

We have just finished discussing the principles of entrepreneurship. Now let's look at the next one which is talking about partnership.

SELF ASSESSMENT

INSTRUCTIONS: INDICATE TRUE (T) OR FALSE (F) IN THE STATEMENTS BELOW

1. **Creativity** is the push for innovation and improvement.

2. **Determination** is the extremely strong desire to achieve success.

3. An **Entrepreneurship** is a person who is willing and is able to convert a new idea or innovation into a successful innovation.

4 .Leadership is the ability to create rules and set goals

ANSWERS 1. T   2. T   3. F 4. T

11.5 Partnerships

We have just outlined the principles of entrepreneurship in nursing. Now we will introduce you to partnership in entrepreneurship. First we have to define what partnership means>

Partnership or a partnershipmis is a relationship in which two or more people, organizations or countries work together as partners.the partners in a firm or businessare the people who share the ownership of it

Partnership is a business with several individuals, each of whom owns part of the business. The relationship between the partners and the duties of partners are clarified in the partnership agreement.

In any partnership, each partner must "buy in" or invest in the partnership. Usually, each partner's share of the partnership profits and losses is based on his or her percentage share of ownership

The partner of a country or organization is another country or organizationwith which they work or do business for example America has been one of zambia'smajor trading partners

Partnership may be formed when two or more people are engaged in a business enterprise for profit (www.entrepreneur.com/). Partnership in a business enterprise is very important as it offers the multiple owners flexibility and relative simplicity of organization and operation. When you try to form, for instance a Nursing School, it is important to partner with the nursing professionals who have retired in service and those that are still engaged.

Types Of Partnerships

hree and limited liability partnershipsGeneral Partnership

 i.A general partnership is aty made up of   two or more people who come together to carry on a trade or business. Each partner contributes money, property, labor, or special skills and each **partner** shares in the profits and losses from the business. If one partner is sued, all partners are held liable. General partnerships are the least desirable for this reason.

ii.Limited Partnerships

A limited partnership includes both general partners and limited partners. A limited partner does not participate in the day-to-day management of the partnership and therefore has a limited liability. In many cases, the limited partners are merely investors who do not participate in the day to day running of the business other than to provide an investment and to receive a share of the profits.

 Limited Liability Partnerships

A limited liability partnership (LLP) is different from a limited partnership or a general partnership, but is closer to a limited liability company (LLC). In the LLP, all partners have limited liability. An LLP combines characteristics of partnerships and corporations. As in a corporation, all partners in an LLP have limited liability, from errors, omissions, negligence, incompetence, or malpractice committed by other partners or by employees. Of course, any partners involved in wrongful or negligent acts are still personally liable, but other partners are protected from liability for those acts.

Types of Partners

Just to confuse the issue, a partnership can have different types of partners - general partners and limited partners. There can be both types of partners in any type of partnership except for the general partnership, which has only general partners. Briefly, the two types of partners:

• General partners, who invest in the partnership, participate in the day-to-day operations, and are liable for debts and lawsuits of the partnership

• Limited partners, who invest in the partnership but who have no participation in day-to-day operations and who are not usually considered to have liability.

You can either form a limited partnership or limited liability partnership, which may even offer some degree of liability protection. Good partnerships are formed when the parties sign an agreement which will be binding to both.

Partnership with the Ministry of Health is also important. The Ministry of Health (MOH) is responsible for policy guidance and strategic planning. It aims at providing cost effective and quality health care as close to the family as possible.

It has the responsibility of resource mobilization for the health sector, through local and international co-operating partners. It also collaborates with other sectors to provide quality health services.

The Ministry of health partners with the following organizations:

- Zambia Prevention, Care and Treatment Partnership (ZPCT II)

i. Zambia Care and Treatment Partnership (ZCPT)

In collaboration with the Government of Zambia, the Ministry of Health and the Ministry of Community Development and Mother and Child Health, the Zambia Care and Treatment Partnership (ZPCT II) is being implemented in six provinces to strengthen the national health system by maximizing access, equity, quality and sustainability in the delivery of comprehensive HIV/AIDS services. The project implements strategies designed to initiate, scale up and strengthen a comprehensive package of HIV/AIDS services, including testing and counseling, prevention of mother-to-child transmission, clinical care, male circumcision and antiretroviral therapy, which are supported by strengthened laboratory and pharmaceutical systems. ZPCT II's comprehensive approach involves integrating services; engaging communities, partners and stakeholders; building public–private partnerships; and strengthening major system components affecting the delivery of all services

FHI 360 is the lead organization on the project, responsible for overall program implementation and management of ZPCT II's international and local partners and their technical areas. To achieve the ZPCT II program goals, FHI 360 partners with Management Sciences for Health, CARE International, Emerging Markets Group, Social Impact, the Salvation Army World Service Office, Churches Health Association of Zambia, Kara Counseling and Training Trust, Network of Zambian People Living with HIV/AIDS, Salvation Army/Zambia, University Teaching Hospital Surgical Department's Male Circumcision Unit and Comprehensive HIV/AIDS Management Program.

Other notable cooperating partners are

Cooperating Partners

World Health Organisation

Centers for Disease Control & Prevention

Global Fund

ChildFund

USAID

Swedish Int'l Cooperation Agency

Japanese Int'l Cooperation Agency

UN organizations like UNFPA,UNDP ETC

CIDA

11.6 Managing A Private Nursing Practice

Private nursing practice is a concept that embraces quite many non-governmental owned nursing institutions. Some of these are:

- Nursing Homes
- Hospices
- Nursing Colleges

Nursing Homes

A nursing home is the highest level of care for older adults outside a hospital. Nursing homes offers basic nursing care to the geriatrics.

As the population ages, more of us are faced with the prospect of moving either ourselves or an older family member into a nursing or convalescent home. It may be a decision that arrives suddenly following hospitalization, or gradually as needs become more difficult to meet in other types of housing

Hospices

Hospice care is a type and philosophy of care that focuses on palliative care to the terminally ill or to those patients in severe pain, and attending to their emotional and spiritual needs. The palliative care can either be offered in a hospital or in a home, and hospice centre.

The hospice philosophy accepts death as the final stage of life: it affirms life and neither hastens nor postpones death. Hospice care treats the person rather than the disease, working to manage symptoms so that a person's last days may be spent with dignity and quality, surrounded by their loved ones. It's also family-centered – it includes the patient and the family in making decisions. Hospice care can be provided by independent hospices, or through programs based in hospitals, nursing homes, or other health care systems.

In most cases, an interdisciplinary health care team manages hospice care. Doctors, nurses, social workers, counselors, home health aides, clergy, therapists, and trained volunteers care for the client and their families family. Together, they give you and your loved ones complete palliative (supportive) care aimed at relieving symptoms and giving social, emotional, and spiritual support.

The goal of the care is to help people who are dying have peace, comfort, and dignity. The caregivers try to control pain and other symptoms so a person can remain as alert and comfortable as possible (Lewis, 2007).

Private Nursing Colleges

Private nursing schools are training institutions that are registered with the General Nursing Council. They   train nurses that are recognized locally and internationally.
Some of the objectives being:

- To provide an alternate route for nursing education for those young men and women who want to become professional nurses but have not been given the opportunity to do so due to limited places in the national health institutions in Zambia and the region.
- To produce a professional nurses who will recognize and understand the fundamental health needs of the people and who will possess a body of scientific nursing knowledge, who are highly disciplined, keeping pace with General Scientific advancement and be able to apply this knowledge in meeting nursing needs of the people. (http://educationinzambia.com/)

Business plan
Definition
A business plan is a formal statement of a set of business goals, the reasons they are believed attainable, and the plan for reaching the same goals. This is a plan of what you want to sell, who you can sell and how much you expect from it in terms of money.
A business plan should be a written document with 20-25 pages, including financial statements. If any more details are required annex them.
Purpose of business plan
- It serves as a sales document to sell the potential of your firm.
- It serves a guide to assess performance of management.

Outline of a business plan
Executive summary
This is a section that summarizes the entire content of business plan. It should be comprehensive. This is the last section to be written though it appears first.
Company overview
This section explains the guiding force behind the business. It comprises the goals, objective and mission statement of your business. The mission statement should be less than 50 words and should answer the following questions:
- What am I selling?
- Why am I selling?
Goals
These are the things that the company wants to achieve and the objectives concerns how you plan to get there. They are step by step guidelines.
Business environment
For one to describe business environment, do a market search. Search for the information relating to your industry. You need to know the information about the industry and competition. Take an honest look at the field you are preparing to enter. Pay attention to the structure trends

and its barriers to your business. Becomes familiar with major competitors in the industry and decide how you will differentiate yourself from them. Get to know your potential outcomes and what makes them tick.The more you know about them, the more likely you will turn them into your buyers.

Company description

This is where you detail your business. Define the company items of what you will sell. Who you will serve. What resources you will use. What type of employees you are looking for. What type of distribution method you will utilize and many more. All these factors when fully described in detail combine to make up business. Give a statement on your company's unique position. This is statement which says how different you are from other companies.

Action plan

This is the last part of your business plan. It outlines the steps you need to take now in order to make your plan work. This also reflects the goals and objectives which were outlined in the company overview. A financial statement may need to be included, especially when you plan to get funds from outside. Make assumptions of your business revenue potential. The estimates must be based on realistic expectations and not fantasy dreams (http://www.businessplans.org).

Legal framework

For you to come up with private practice, various regulatory bodies are involved e.g GNC and International Council for Nurses. They regulate practice through registration. They issue you a licence, scrutinise your qualifications and issue you a certificate of practice. By so doing it means they have recognized your business and have given you the authority to carry on your business.

There are also acts of parliament that need to be put into consideration e.g Nurses and Midwives Act No. 31 of 1997. Have the document and read it.You should know the nurses and client's rights. You need to know the human's rights. You need to take into consideration the Public Health Act e.g number of toilets you need to have compared to bed capacity and availability of water as well. You need to register with Ministry of Commerce and Trade.

Take into consideration the stake holders e.g General public, Nursing profession, Government employees of your part time employees.

Procedures for registering a business in Zambia

Identify a company name

Register with Patents and Companies Registration Agency (PACRA)

Obtaining necessary secondary licenses from line ministries/organisations.

It's advisable to seek guidance from business support institutions like ZDA, Trade offices at the District levels or your business association.

Register with local authorities/councils/ for operating permits e.g. Trading License

 Register with the Zambia Revenue Authority (ZRA) and obtain a Tax Payers identification Number (TPIN)

What is regulated

The persons providing the service and this includes professions and non-professions, nurses and midwives, Doctors and other team members. E.g if you want to come up with a Nursing School, what will be regulated is Education Programmes. The health care facility or agents offering services to customers.

Purpose of regulatory bodies
- To protect the public
- To develop guidelines and standards used as tools to control and monitor compliance to regulatory elements.

Resource mobilization

Resource means assigning actual resources to the project. There are two different aspects to this:
- Deciding which resources to apply to which work items in the project plan.
- Actually getting resources to work for the project.

Resource planning and scheduling

The allocation of resources to the project plan is part of the overall process of planning, estimating and resourcing the project. Each time the plan is reviewed and revised, resourcing will be addressed. The following need to be considered (real world). Do you have people like that? If not would you be able to get them? When are they are available? When can you get them? What else will the project administrator and the project office manager be doing? Is there enough work altogether to justify two people or could one person handle two roles? Is it practical to use a resource part time on the project? Who is able to agree and authorise the use of resources? How do we get them to conquer particularly if it is a loss for their own area. Try to get people on full time as well as part time. You have to convince them and their managers that it really is The part time resources usually have enough work to keep them busy full time in their normal line department. essential to make them available even though it causes pain in their own department.

Practice management

The practice management plan is designed to describe just how the business functions on a continuing basis. This will highlight the logistics of the organization such as the various responsibilities of the management team, the tasks assigned to each division within the company, and capital and expense requirements related to the operations of the business.

Implementation

This is the part of the business plan where you will clarify objectives, assign tasks with deadlines, and chart your progress in reaching goals and milestones. It is the actual beginning of the business

Guidelines for successful business plan implementation

1. Objectives:

Your objectives should be crystal clear and specifically spelled out, since you will use them as a building block for the rest of the implementation plan. For example, let us assume your startup is a Nursing School. Your objective should be tough but reachable and could read something like this:

- Secure classroom and office space and be in operation in four months time.
- Recruit 50 students within first four months of operations.
- Recruit 2permanent teaching staff atleast 2months before starting time

2. Tasks:

This part details what must be accomplished to achieve your objectives. Include a task manager for each step, so that roles are clearly defined and there is accountability. As you enumerate tasks and assignments, these descriptions should be plainly and generally stated. Emphasize the expected results associated with these tasks. Continuing with the above example, the tasks section might read like this:

- Secure classroom and office space – Accommodation agentObtain licenses and permits – youSet up office phones and computers – Typist Begin recruiting students – Principal Tutor

Monitoring and Evaluation

You or a member of your management team needs to be in charge of monitoring each task's progress and the completion percentage of each objective. Develop a tool for tracking e.g a Gantt chart. When delays occur, try to get to the root of the problem.

- Did the person responsible fail do the task?
- Did he or she have too many responsibilities to handle?

SELF ASSESSMENT

INCIRCLE THE MOST APPROPRIATE ANSWER WRITE THE APPROPRIATE

RESPONSE ON A PIECE OF PAPER OR IN YOUR NOTE BOOK

1. Partnerships are usually formed by:

a) two people

b) one or two people

c) two or more people

2. All of the following are examples of private nursing practice EXCEPT:

a) schools

b) hospices

c)nursing homes

INDICATE TRUE (T) OR FALSE (F) AGAINST THE STATEMENTS BELLOW

3. The executive summary is a section that summarizes the entire content of business plan.

4. A tool developed for tracking the activities of an organization can be used for monitoring and evaluation.

5. Implementation and evaluation is a part of the business where one clarifies the objectives.

Registering a business with ZRA is one of the procedures of registering a business in Zambia.

11.7 Financial Administration Management Systems (FAMS)

We have just discussed how to manage a private nursing practice, Now let us do the following activity before we go into the details of our discussion on Financial Administration Management Systems.

ACTIVITY

What is Financial Administration Management Systems (FAMS) in your own understanding? Write down the answer in your note book and compare as you read

Well done! Now let us go into our discussion.

Definition of Financial Management

This is a system that oversees and governs the income, expenses and assets of a business with the objective of maximizing its profits and ensuring sustainability.

Financial management utilizes financial accounting and management accounting.

Financial Management Activities

Learner, the following are the Financial management activities: Financial Planning, Financial Control,Budgeting Planning, Forecasting, Financial Statement Analysis, Management of Fixed Assets, Management of Cash, Debtors, Stocks and other Current Assets, Management of Creditors, Overdrafts, Short-term Loans and other Current Liabilities, Management of Long-term Loans and Management of Stakeholders Interests.

Role of Managers in Financial Management

- The manager is an executive officer of the health board and has the final responsibility for the operational and organisational functions of all administrative units in their institutions.
- The manager is responsible for ensuring that budgets are regularly reviewed and revised in liaison with the Manager Planning/Hospital Administrator.
- The manager has overall responsibility for the financial performance of the health institution
- The manager is responsible for approving all payments, financial reports, books of accounts (such as cashbooks, bank reconciliations) and for ensuring that monthly checks of cash are carried out.
- The manager should liaise with the accounting unit in retrieving accounting information for preparation of the annual budget and budget revision
- The manager is responsible for the day to day financial and administrative operations of the institution
- The manager is the immediate supervisor of all administrative units and therefore needs to understand the roles and the responsibilities of the accounting unit.
- The manager must approve all imprests.

Accounts Documents

The documents that a manager should know and ask for in the accounts department include: Payment voucher, Cash book, Statement on reconciliation of the bank account, and Imprest/loan application form.

Payment Vouchers

Payment vouchers must be approved before the transaction is recorded in the cashbook. A payment voucher serves as a record of all transactions that an institution makes. It contains a debit and credit column.

Debits and Credits

Debit: A debit is money that is paid to your institution. It can be either in cash or cheque form. This amount is recorded on the left hand column of the cash or bank.

 Credit: A credit is money that is paid out by the institution. It can be either cash or cheque. This amount is recorded on the right hand column of the cash or bank.

Cash Book

The term cash in this context refers to all forms of money including cheques. All movements of money (transactions) should be recorded. The *principal book* where all transactions are recorded is the cashbook. Physical cash is kept in the safe and the banks but all our records are in the cashbook. It is imperative that periodically we reconcile our cashbook figures (balances) with those at the bank and in the safe.

The ultimate reason why we receive money is to procure and pay for goods and services that we use in our daily operations in the core business of delivering health care services.

Cash Reconciliation

 We need to harmonise the cashbook figures with those of the bank monthly. Errors by either party should not be allowed to stand uncorrected for more than one month at the most. As managers we should ensure that all non reconciling items are properly investigated. The ideal situation would be that bank statement balance equals cashbook balance

 Imprest

An Imprest is an advance given to an officer in his/her personal name for approved expenditure, the exact details of which are unknown at the time it is paid."

"Imprest is an advance made to an officer to enable them incur expenditure on themselves or effect payments on behalf of the organization. These payments cannot conveniently be made by the accounting unit there and then." The payment has to go through all accounting procedures first.

Imprest should be retired within 48 hours after its use or spent.

11.8 Unit Summary

Dear learner, we have defined an entrepreneur and entrepreneurship. The principles of entrepreneurship that we looked at include creativity, dedication, determination, flexibility, leadership, passion and self confidence. We said partnership is very important if one is to

engange in a business enterprise. In managing a private Nursing practice, we briefly looked at the Nursing homes, hospices, and Nursing colleges. We also discussed the business plan, legal framework, resource mobilisation, practice management, implementation, monitoring and evaluation of a business. Lastly, we discussed Financial Administration Management Systems (FAMS), where we looked at the role of the managers, accounts documents and procedures.
SELF ASSESSMENT
 DEAR LEARNER WE HAVE JUST FINISHED DISCUSSING ENTREPRENEURSHIP In your note book write down the letter of the most appropriate response

1. A managerial economics which uses quantitative methods in analysing the value of an organization is called

A, Entrepreneurship

b. Financial management

c. Costing

d. Monitoing

2. Money that is paid to your institution which can either be in cash or cheque form. .

a. credit

b. debit

c. imprest

d.loan

 3.Money that is paid out by the institution. It can be either cash or cheque..

a. credit

b. debit

c. imprest

d.loan

4.The following are accounts documents EXCEPT

a. Payment voucher,

b.Cash book,

c.Statement on reconciliation of the bank account,

d. Tally sheets

 Well done, now you can compare with the responses below in the key
KEY: 1. B   2.B   3.A   4.D

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UNIT TWELVE: INTRODUTION TO LABOUR LAWS IN ZAMBIA

12.1 Introduction to the Unit

This is our last unit in discuss labour Laws in Zambia. We will discuss the Industrial and Labour Relations Act and the Employment Act. We will also introduce you the Trade Unions and Conditions of Service for Public Service Workers.

12.2 Objectives Of The Unit

At the end the nit you should be able to:

1. Discuss the industrial and Labour relations Act Cap. 269of 1997 and the Employment Act Cap.268
2. Define trade union
3. Discuss the types of trade unions
4. Explain the roles of trade unions
5. Discuss the condition of service for public service workers

12.3 Industrial and Labour Relations Act Cap 269 of 1997

Dear leaner, we shall now introduce you to industrial and labour relations Act Cap 269 of 1997 of the laws of Zambia. Before we go into our details let us do the following exercise:

> **ACTIVITY**
> What is law in your own understanding? Write the answer in your note book.
> Now compare your answer with the definition in unit 2 of rofessional ractice.

Industrial relations are relationships that exist in a work place and how people relate to each other. Industrial relations can be defined as a set of phenomena operating both within and outside the work place, concerned with determining and regulating the employment relationship.

now let us discuss some of the major parts of the Industrial and Labour Relations Act Cap 269 of 1997 of the laws of Zambia.

Part II: Trade Unions

The act requires that any organisation that carries out activities of a trade union to be registered through the labour commissioner's office. This Act also gives some employees rights to:

- take part in the formation of a trade union
- a member of a trade union of their choice.
- btain leave of absence from work as they exercise their right to take part in trade union activities.

The Act also requires that every employee shall promote, maintain and cooperate with management of the undertaking in which he/she is employed in the interest of industrial peace, grater efficiency and productivity. The Act allows a registered trade union in accordance with its constitution to be affiliated to a federation or congress of trade union of its choice. It requires that, at the end of each financial year the executive officer of every trade union should submit to the labour commissioner a report concerning the financial affairs of the trade union during that financial year. An executive officer of a trade union who fails to comply with this requirement shall be guilty of an offence and upon conviction shall be liable to a fine and may be prohibited from holding office in a trade union for a period of not exceeding 5 years.

Part III: *Federations of Trade Unions*

The Act allow the trade union to affiliate to a federation of trade unions. However, each trade union is expected to maintain its separate status and has the right to organise itself as it considers fit in accordance with its constitution. A federation of trade unions has no jurisdiction over any trade union affiliated to it in any domestic management matters unless such matter has been referred to this federation by the trade union.The Act allow a trade union or federation of trade unions to receive outside national, technical or financial assistance but should inform the minister of such assistance within 30 days of such receipt.

Part IV: *Employers Organisations*

Every employers organisation is expected to apply to the commission for registration within 6 months from the date of its formation. An employers organisation may be in accordance with its constitution before affiliated to a federation of employers organisation of its choice.

Part VII: *Recognition Agreements*

A registered employer and a trade union to which its employees belong are required to enter into a recognition agreement not later than three (3) months from the date of registration. Similarly an employer organisation and a trade union to which this employee belongs shall enter into recognition agreement not later than three (3) months of the date. The recognition agreement will show that the employer or employers organisation has recognised the trade union as a representative of and bargaining agent for the eligible employee for the purposes of regulating relations between the employer or employers organisations and the trade union.

Part VIII: *Collective Agreement*

Within 3 months from the date of registration of the recognition agreement, the employer or employers' organisation and the trade union should enter into collective bargaining for the purpose of concluding and signing a collective agreement.

Part IX: *Settlement of Collective Disputes*

According to the Act, a collective dispute shall exist when there is dispute between an employer or an employer's organisation on the one hand and employees or an employees' organisation on the other hand relating to terms and conditions affecting the employment of the employees, where one party to the dispute has presented in writing to the other party all its claims and demands and the other party has within 14 days from the date of receipt of the claims or demands fails to answer or rejects the claims or demands. In this case the parties shall refer the dispute to the conciliator or a board of conciliation.Where a conciliator or a board of conciliation fails to settle the dispute, the parties to the dispute may conduct a ballot to settle the dispute by a strike or lock out or they may refer the dispute to the Industrial Relations Court.

Industrial Relations Court

The IR Court is established under the Industrial and Labour Relations Act.The jurisdiction of the court include:

1. The court has exclusive jurisdiction to hear and determine any industrial relations matters.

2. The court has jurisdiction to punish any person who disobeys or unlawfully refuses to carry out orders made against that person by the court

3. The court does not consider a complaint unless the complaint is presented to it within 30 days of the occurrence of the event which gave rise to the complaint, provided that the court has extended the 30 day period to 3 months after the date on which the complaint has exhausted the administrative channels available to that person.

4. The main objective/aim of the court is to provide justice between the parties (employer and employee).

5. A decision or judgement of the court on any matter referred to it is binding on the parties to the matter.

6. No person can take part in a lock-out or strike against any decision or judgement of the court. Any person who contravenes this subsection is liable upon conviction to a fine or to imprisonment or to both.

7. The court may grant remedy which it considers just and equitable such as:

Award a complainant damages or compensation for loss of employment.

Make an order for re-instatement, re-employment or re-engangement.

Deem the complainant as retired, retrenched or redundant.

Make any other order or award as the court may consider it fit in the circumstances of the case.

8. The court shall deliver judgement within 60 days after the hearing of the case.

9. Any person aggrieved by any award decision or judgement of the IR court may appeal to the supreme court.

Industrial impasses

An industrial impasse refers to a deadlock between parties at the place of work.This situation is also associated with industrial action. By industrial action we refer to any temporally suspension of normal working arrangements, which is initiated unilaterally by either employees or management with the objective of exerting pressure in the determination of the employment relationship, particularly within the collective bargaining process

Forms of industrial action

Two main forms, namely:

1. Unorganised individual action e.g absenteeism and labour turnover.

2. Organised collective action e.g. Withdrawal of cooperation, work- to- rule, overtime ban, go-slow, work-in or a sit-in and a strike.

12.4 Employment Act Cap 268

This Act stipulates the procedures involved in the employment processes. It is subdivide into several parts. However, for our discussion purposes we will concentrate on the following parts:

Part II: Appointment, Powers and Dutieof Officers

This part provides for the appointment of the Labour Commissioner and Labour Officers. This Act empoers Labour Officers to enter any workplace at any time for the purpose of inspection or enquiry. Any person who fails to comply with the requirements of the Labour Commissioner commits an offence.

Part III: Contracts of service generally

This part prohibits employment of persons under the age of fifteen (15) years. Failure to comply to this provision an employer is liable to an offence.It also looks at the contracts between the employer and the employee and the terms of conditions of service.

Part IV: Oral contact of service generally

The provisions of this part apply to oral contracts, which mainly involves a few hours to one day. It also requires any employer to keep record of employees employed under oral contract and the type of contract.

Part V: Written contracts of service

This happens when a contract is for a period exceeding six months or for a number of days exceeding six months or a contarct of foreign service. It requires that any employee to indicate consent to a contract by signing or affixing a thumb print.

Part VI: Housing and warefare

This part provides for good water supply at a workplace for employees. Employer to assist any employee when they are sick to receive medical treatment as well as paying employees their wages in a safe place.

Part VIII; Employment Agencies

This part requires that all Emplyment Agencies should be registered with the Labour Commissioner. Failure to comply to this provision by any Agency is an offence.

Part IX: Disputes and breaches of contracts

Whenever there is a dispute between the employee and the employer concerning the contract, the agreived shouls report to the Labour Officer who shall help in settling the matter. The Labour Officer may help settle the dispute either by collective agreement or refer the matter to courts of law.

Part X:Power of courts and offences

This part provides for the court to make judgements regarding the offence committed by the employer or the employee. The judgement and the court may institute could be in the form of payment of a sum due to one party by the other party, terminate contract, impose a penalty to the erring party or to assess the fair value of services rendered by an employees, award damages for wrong dismissal or order re-instatement.

12.5 Trade Unions

Definition

A Trade Union is any organisation whose membership consists of employees which seeks to organise and represent their interests both in the work place and society. It also seeks to regulate the employment relationship through the direct process of collective bargaining with management.

12.5 Types of Trade Unions

1. Occupational unions

These are unions of people belonging to a specific occupation, skill or craft, who might be spread across a range of industries e.g ZUNO, Union for medical doctors etc.

2. Industrial unions

These are unions of workers who belong to the same industry. E.g workers in the mining industry- MUZ.

3. Enterprise unions

These are unions that confine their recruitment to employees of a single organisation e.g. Ministry of Health Workers can form an enterprise. These unions can be seen as company unions or house unions.This means such unions are under the influence or control of management of that particular company.

4. General unions

These are unions formed without considering either occupational or industrial boundaries. Such unions develop due to amalgamations between unions which could have been established based on industrial or occupational lines e.g Zambia United Local Authorities Workers Union (ZULAWU).

5. Federations/Congresses

When different national unions decide to come together and form one umbrella body, it is called a federation or congress e.g The Zambia Congress of Trade Unions (ZCTU), Federation of Free Trade Unions in Zambia (FFTUZ).

Unions that form the congress/federation are independent of each other, meaning that each one of them has its own constitution and leaders of the national union do not relinquish their positions when they join the federation or congress. Federations or congress are formed so as to help unions work together to persue problems affecting them.

6. Confederation

This is a grouping of congresses or federations from different countries e.g Southern Africa Trade Unions Coordinating Conference (SATUCC), International Confederation of Free Trade Unions (ICFTUC), the European Trade Union Confederation (ETUC). Like congress or federations, a confederation is a loose organisation, it doe not infringe on union members. A confederation just offers support to individual unions e.g in terms of capacity building etc.

12.6 Roles of Trade Unions

1. They provide power to individuals.

Here the union protects and supports individuals by providing a collective strength, thereby acting as a counter-veiling force to employers as well as the pressure group within society.

2. Economic regulation

Unions tend to maximise the wages and employment of their member within the framework of the contract of employment. E.g union is able to check on employees contract of employment so that they negotiate on the terms and conditions of service.

3. Job regulation

Here unions establish joint-rule-making system which protect their members from arbitrary management actions as well as to allow employees to participate in decision making within the organisation.

4. Social change

Here unions express social cohesion, aspirations or political ideology of their members and seek to develop a society which reflects their views.

5. To provide services to members

E.g benefits, bonus or bereavement support.

6. Self- fulfilment

Unions provide a mechanism through which individuals may develop outside the confines of their jobs and participate in decision making process.

SELF ASSESSMENT
WRITE TRUE OR FALSE AGAINST EACH OF THE GIVEN STATEMENTS
1. Occupational unions are unions of people belonging to a specific occupation, skill or

craft, who might be spread across a range of industries

2. Industrial unions formed without considering either occupational or industrial boundaries.

3. Enterprise unions are unions that confine their recruitment to employees of a single organisation.

4. General unions are unions of workers who belong to the same industry. E.g workers in the mining industry- MUZ.

5. Federations/Congresses is when different national unions decide to come together and form one umbrella body,

ANSWERS
1.T 2. F 3.T 4. F 5. T

12.7 Conditions Of Service For Public Service Workers
Hello learner! We have just discussed the trade unions, let us now look at the conditions of service for public service workers.

12.8 Appointments
Appointments in the civil service are made by the Public Service Commission on behalf of the president through Public Service Management Division (PSMD). No person below the age of eighteen (18) years or above the age of forty-five (45) years shall be appointed on probation. On appointment, an applicant may be required to pass public service obligatory examinations or any other examination as may be deemed necessary.

Documents
Before appointment to Civil Service, the following documents are required:
- PSC form No 1
- Form of vital statistics
- A declaration of secrecy
- Acknowledgement of liability in respect of personal effects.
- Certified proof of qualifications
- Medical certificate
- Arrival advance form
- Certified copies of NRC

12.9 Settling in allowance
Settling in allowance is paid by the government to compensate an officer in part for the unavoidable incidental expenses he/she has to meet on initial appointment to the Public Service or when the officer is transferred from one district to another or from one rural

station to another rural station within the district. Settling in allowance is paid as a single rate or married rate. Settling in allowance is not paid when a transfer results from an officer's misconduct. Settling in allowance is only paid to an officer who is transferred at his/her own request if the Responsible Officer is satisfied that the transfer is in the interest of the public service.

Subsistence allowance

Subsistence allowance is paid to an officer travelling on duty away from the normal station of duty. Travelling on duty includes travelling:

On first appointment

On transfer from one station to another.

To attend court or the commission for investigations as a witness in a case connected with his/her duties.

To attend interviews with a Service Commission away from the normal station of duty.

If an officer becomes ill while travelling on duty and is admitted to hospital, he/she shall continue to be paid subsistence allowance for days spent in hospital.

When an officer is on transfer between stations, an officer may claim subsistence allowance at the appropriate rate for the last two (2) nights and the first two (2) nights spent at the old and new stations, respectively. Ie. Subsistence allowance is paid for four (4) nights.

An officer shall submit his or her claim for subsistence allowance to his or her supervising officer. The officer shall ensure that any receipts for bills paid are certified correct and that the journey was made in the public interest before approving the claim for payment. Responsible Officer approves the payment of their own claims and those of their Heads of Department.

Rural Hardship Allowance

An officer who is serving in an area declared to be a "Remote Area" shall be entitled to receive a hardship allowance at the rate as may be determined by Government from time to time.

Recruitment nd Retention

This allowance is be paid to Zambian nationals who posses approved academic and professional qualifications at the rates determined by Government from time to time.

Commuted Overtime Allowance

This is paid to nurses and paramedical officers, government drivers, secretaries and stenographers in Permanent Secretary and Minister's offices.

Seniority

In case of officers on different grades, seniority is determined by reference to the salary scales on which they are serving, and the officer with the highest maximum point shall be the most senior. In case of officers on the same grade, seniority is determined by

reference to their date of appointment or promotion to that grade, the officer with the earliest date of appointment or promotion is the most senior.

12.9 Appointments

Acting appointment

An acting appointment is made where an officer is absent from his or her post for thirty (30) consecutive days or more. An acting appointment may be approved for a short period than thirty (30) days consecutive working days in special cases or where there is a legal requirement that certain matters may only be dealt with by the officer holding a particular post. An officer appointed to act in a higher post is given an acting allowance equal to the difference between his or her substantive salary and any other allowances applicable to the post. An officer can also be appointed to act in a higher post for administrative convenience which is the difference between his/her substantive salary and any other allowances applicable to the post.

12.10 Leave

Local leave

An officer is allowed to take local leave of not less than ten (10) working days once every year.

Leave earning rates

- Officers in Division I $3^{1}/_{2}$ days
- Officers in Division II 3   days
- Officers in Division III $2^{1}/_{2}$ days

Commutation of leave days for cash

A responsible officer may authorise an officer going on leave to commute up to one hundred and twenty (120) days of his or her leave for cash.

Urgent leave for personal reasons

An officer who has no leave days due to him or her and who wishes to be absent from duty for urgent personal reasons may apply to the responsible officer for leave.

Leave for teachers **(chptr VI sec.105)**

A teacher or any other officer employed on the staff of a school must take leave during the school holidays, unless the period of leave is one school term or more.

Occasional leave

Occasional leave must be taken during the calendar year in which it is granted, if not taken, it shall be forfeited.Twelve (12) working days a year to nursing officers, sisters, nurses, clinical officers, other than those working in training institutions in the Ministry of Health, Defence and Home Affairs. Eighteen (18) working days a year to radiologists and radiographers in the Ministry of Health.

Paternity leave

Granted to male officers to be absent from duty for five (5) days when their spouse deliver and upon production of a record of birth of the child.

12.11 Promotion

The existence of a vacancy is not in itself entitle any officer in a lower grade to be promoted to that vacancy and there is no obligation on the part of a responsible officer or the Service Commission to fill a vacant post by direct promotion.

12.12 Acting with a view for promotion

Officers selected for promotion will normally be appointed by Service Commission or a Responsible Officer to act for a period of six (6) months with a view to establishing suitability for substantive promotion.

12.13 Transfer

An officer may be transferred to any duty station where his or her services are required. An officer who wishes to be considered for transfer to another Ministry shall apply to his or her Responsible Officer giving the reasons for requests and qualifications for the post.If the Responsible Officer has no objection, he/she will write to the Responsible Officer in the other Ministry. The responsible officer of the receiving Ministry accepts the request, shall refer it to a Service Commission for a decision.

12.14 Termination of appointment

This can arise from:

Resignation

Retirement

Resignation

An Established Officer may resign at any time, by giving the Government three months' notice, in writing, exclusion of leave, or by paying Government. An officer on probation may resign at any time by giving the government one month's notice, in writing or paying government one month's salary in lieu of notice.

Withdrawal of resignation

An Established Officer may withdraw his/her resignation within three months after the date of resignation. The Responsible Officer may accept the request or not. A probationer may withdraw his/her resignation within one month after the date of resignation.The responsible officer may determine whether to accept the request or not.

12. 15 Retirement

An established officer is retired as prescribed in the Public Service Pensions Act no. 35 of 1996. No officer may continue serving after attaining pensionable age. A Service Commission may require an established officer to retire in the national interest and this restricted to cases where an officer has to relinquish his or her appointment at the instance of the government either to take up another appointment outside the Public Service or for reasons of government policy. A Service Commission may require an established officer to retire in the Public interest on the following grounds:

Failure to perform his or her duties.

Incompetent performance of his or her duties

An offence under the disciplinary code

On medical grounds if the registered practitioner certifies that an officer can no longer perform Government duties due to ill health.

An officer who is either dismissed or discharged from the Public Service is entitled to the following:

Cash in lieu of any accrued leave

Benefits on dismissal or discharged as provided for in the Public Pensions Act of 1996).

An officer who has died or retired from the Public Service is entitled to the following:

- Cash in lieu of any accrued leave.
- Repatriation allowance
- Benefits on retirement as provided for in the Public Pensions Act of 1996).

An officer on retirement must claim his/her repatriation allowance within a period of twelve (12) months.The entitlement is in accordance with the Cabinet Circulars that are issued from time to time.

Statutory Retirement

An established officer shall be retired as prescribed by the PSP Act No. 35 of 1996. Currently, the statutory age of retirement in the Public Service is 55 years for both male and female officers. Retiring officer to be given a reminder of his retirement 6 months before his retirement date. Submit to the Division a recommendation for the officer's retirement in good time to allow for processing.

Note: -

- Effective date of retirement will be the date before an officer's fifty-fifth birthday.
- Last day of duty shall be determined by the PSC.
- Duly signed PSC form 1
- Appointment letter bearing date of 1st appointment and position

12.16 Confirmation letter

Letter of promotion to current position

Recommendation must clearly state officer's names and position

Proof that officer has been contributing to the PSPS*.

Note : -

 1. PSC Form 1 is legal document which is binding on the officer, therefore, HR practitioners must make sure that all the information is filled in his/her own handwriting and signed by the officer.

Application for Pension/Gratuity form

- Leave certificate
- Clearance certificate
- Ministerial files including salaries files

Note: - HR practitioner must ensure that the Commission's directives are conveyed to the officer as soon as they are received and must ensure that the officer has actually been informed.

ii. Post humous Retirement: Notification of death, Post humous confirmation

Officer must have worked for 20 years or more continuous service before his/her death

In addition to the above documents, HR officers must ensure that a copy of the date officer's death certificate is attached to your recommendation

Notification of death, post humuos confirmation*

Retirement on Medical Grounds

In addition to all the documents in (a), ministries must ensure that a Medical Board Report is submitted together with the recommendation.

Retirement in the National Interest

Where an established officer is required by Government to take up another appointment outside the Public Service or for reasons of Government Policy.

Recommendation must clearly state the reason for the retirement in National Interest and the effective date.

Examples of when an officer can be retired in National Interest: -

- Abolition of office.
- Restructuring of an Organisation.
- Retirement in the Public Service Interest
- As a disciplinary measure for:
    − Failure to perform his/her duties
    − Incompetent performance of his/her duty
    − An offence under the disciplinary code.

Common Problems Encountered When Processing Retirements

- Missing documentation
- Wrong documentation
- Delay in submission of retirement recommendation to PSMD
- Loaded' recommendations
- Missing AE/S numbers

12.17 Disciplinary ode

GRZ in recognizing the importance of the role of the Public Service in national development and in the delivery of quality services to the people of Zambia has developed and is implementing the Code of Ethics for the Public Service. The Code outlines broad principles of core values and behavioural standards that call for a high level of ethical conduct by Public Service employees designed to enhance public confidence in the Public Service. Observance of this Code serves to ensure that there will be no conflict of interests between an employee's private interests and the Government's primary interest in providing services to the public efficiently, impartially, and with integrity. The Code shall be read with other existing Public Service Management Policies, Procedures and Guidelines in the Public Service, and Administrative Circulars and Instructions issued by the Secretary to the Cabinet, the PS,

PSMD and other appropriate authorities. Each Public Service employee in accepting an appointment in the Public Service accepts personal responsibility for developing and exhibiting positive work ethics and affirms commitment to combating negative work habits.

The Purpose of the Code

Create a Public Service that has enduring core values;

Provide guidance on the standards of behaviour required of Public Service employees; and

Form the basis for the development of Codes that may be required for specific institutions in the Public Service to suit particular operational requirements and circumstances

Principles

Public Service employees are expected to carry out their roles and responsibilities with dedication and commitment to the Public.

They shall fulfill their lawful obligations to the Government of the day with high degree of professionalism while adhering to the principles of natural justice.

Core Values

Public Service employees, in the performance of their duties, shall carry out their roles with dedication and commitment to the Public Service based on its Core Values of:

i.   Integrity

Putting the obligations of the Public Service above   one's personal interests, and conducting oneself in a manner that is   beyond reproach

ii.   Honesty

Being truthful and declaring all private interests   relating to one's public duties

iii. Objectivity

Being open and basing one's advice and   decisions on unbiased and rigorous   analysis of the evidence

Iv. Impartiality

Acting solely according to the merits of   the case and serving the public fairly

v. Loyalty

Serving the Government of the day   regardless of one's political, religious,   social or cultural beliefs

vi. Respect

Being considerate to the needs, beliefs, opinions and rights of others whether   juniors, equals, peers, or superiors, and the public in general

vii. Accountability

Being responsible to the Government and the public for decisions and actions taken, and submitting to whatever scrutiny is appropriate to one's office

viii. Excellence

Being diligent, committed, efficient, and effective in the execution of one's duties

ix. Confidentiality

Being trustworthy by not revealing or disclosing privileged information observing confidentiality even after one has left the Public Service

x. Selflessness

Being noble and avoid seeking personal gain or benefits for one's family or friends though one's official position

Personal and Professional conduct

i. Integrity

Discharge functions according to law

Comply with ethical standards

Report any misconduct by any other employee

Not accept gifts, rewards or hospitality

Not consume alcoholic beverages on duty

Not engage in outside employment without authority

ii. Honesty

Set out facts and relevant issues truthfully

Avoid situations in which private interests conflict with impartial fulfilment of official duties

Disclose direct or indirect financial interests in any undertaking that may be viewed as conflicting with Government interests

iii. Objectivity

Provide information and advice on the basis of evidence and accurately present the options and facts

Make decisions based on merit

Take due account of expert and professional advice

iv. Impartiality

Carry out responsibilities in a way that is fair, just and equitable

Serve the Government of the day whatever it political persuasions to the best of one's ability

v. Loyalty

Pledge and fulfil allegiance of the Government of the day

Absolute and undivided loyalty to the laws of the land

Maintain relationship of mutual trust and confidence with superiors, colleagues and general public

vi. Respect

Refrain from using offensive, intimidating and derogatory words

Being courteous and protect every person's dignity as enshrined in the constitution

vii. Accountability

Ensure proper, effective and efficient use of public resources

Carry out responsibilities in a transparent manner

Not absent themselves from official duties without authority

viii. Excellence

Uphold highest standard of performance

Strive to excel in all their endeavours

Project a good, right and positive image of the Public service

ix. Confidentiality

Observe confidentiality even after the service

Not disclose information without authority

x. Selflessness

Carry out responsibilities in a noble, unselfish and gallant manner

Apply themselves to the best of their abilities in the discharge of duty.

Breach of the Code

A breach of the Code may lead to the application of appropriate disciplinary action in accordance with the provisions of the existing Disciplinary code.

Code of Ethics Acknowledgement Form

Every Public Service employee shall be provided with a copy of the code of ethics and will be required to fill in an acknowledgement form to certify that he/she has acknowledged receipt, read, understood and undertakes to adhere to the provisions of the code.

Disciplined behaviour is essential for the well being of the individual officer and the successful achievement of the objectives of the public service. Code of conduct ensures officers are treated in a fair and consistent manner. Disciplinary action to be in accordance with the code

Relationship Between The Terms And Condition Of Service (Tcs)And The Disciplinary Code

The TCS provides a general framework of what constitutes misconduct

The Disciplinary Code of Conduct provides details on the various offences, penalties and procedures for handling offences

Basic Principles

Code is based on

counseling, correction & punishment as last resort.

Protection of Public Service against indiscipline

Protection of officers against arbitrary judgment and punishment

Classification Of Offences

A. Absenteeism and poor time keeping

B. Sub standard performance

Carelessness

Negligence

Poor supervision

Inefficiency

Loafing, failure to perform

C. Undisciplined, improper or disorderly behaviour

Refusing to obey instructions

Failing to obey instructions

Non compliance to established procedure

Unethical conduct

      abusive language & insubordination

      insolent behaviour; threatening violence, disorderly behaviour

      alcohol & drug related offences

D. Loss, damage & misuse of GRZ property

- Wilful loss, damage Due to negligence

-Misuse of Government property

-Breach of licence to occupy GRZ housing

E. Bribery/corruption, theft, fraud &misappropriation

      - falsifying , altering documents

F. Illegal industrial action

Illegal strike action

Incitement

Intimidation

Sabotage

G. Breach of trust or confidentiality

Unauthorized disclosure of confidential information

Concealing of relevant information from previous employment

Deliberate breach of state secrets Act *(Cap 111 of the laws of Zambia)*

Deliberate giving untrue or misleading information verbally or in writing

Sexual harassment

Seductive sexual advances

Sexual bribery

Sexual imposition

rape

      -sexual threat or coercion; *threats of violence or victimization.*

Penalties For Offences

Unrecorded warning for first offence /or minor breaches of rules. No entry will be made in the officer's disciplinary record.

Recorded warning

 absenteeism for not more than 3 days, disobedience &disorderly behavior

Severe warning

Final Warning

Suspension

Demotion

Demotion

Persistent poor work performance

Discharge or Summary Dismissal

When other forms of disciplinary action have failed

When officer is absent for 10 days or more

\When an officer commits rape

When a teacher or any public officer impregnates a pupil or vice-versa

Retirement in Public Interest

Surcharge for Loss of Moneys or Properties

Procedures For Handling Ordinary Offences

Immediate supervising officer initiate preliminary investigations & may

Dismiss the allegations or

Lay a formal charge in writing giving time for exculpation

suspend accused pending full investigation

Note: Accused shall be informed whether exculpation is accepted

Refer the matter to HRM Dept. which shall. Investigate and arrange for hearing (within 7 days)

Note:

Accused may be accompanied by union representative. If accused refuses to attend case hearing within 10 days shall be liable for dismissal. Reporting Officere shall

Impose punishment

If dismissal is considered refer the matter to the PS PSMD

Note: Accused shall be informed of intended action

Documents required on submission

recommendation letter for action

charge letter

exculpatory letter, if any

Suspension letter, if any

Letter informing the accused of intended action and

any other evidence adduced

PS, PSMD shall submit to PSC for consideration and determinations.

The Commission shall give directives

Reporting Officer shall convey to the accused the Commission's directives

Note: Accused shall be informed of rights to appeal

Right To Appeal

shall be made within 7 days

Shall be heard within 14 days of appeal

  Note: Appeals against demotion or dismissal will be heard at Service Commission Level

Procedures For Handling Criminal Offences

Reporting Officer shall ascertains whether criminal proceedings will be instituted

Immediately suspend the accused

Forward a report to PS, PSMD

On conviction Reporting Officer shall obtain:-

- A true copy of the charge
- A certified copy of the judgment of the court
- A certified copy of the proceedings, if any.

A Reporting Officer shall recommend to PS PSMD the dismissal of a convicted officer.

SELF ASSESSMENT

MATCH THE STATEMENTS WITH THE CORRECT VALUES	

i. Integrity
 	
      Putting the obligations of the Public Service above   one's personal interests, and conducting oneself   in a manner that is beyond reproach
ii.   Honesty
      Being truthful and declaring all private interests relating to one's public duties
iii. Objectivity
      Being open and basing one's advice and decisions on unbiased and rigorous analysis of the evidence
iv. Impartiality
      Acting solely according to the merits of the case and serving the public fairly
Maintain relationship of mutual trust and confidence with superiors, colleagues and general public
	a.Honest
	b.Integrity
	c.objectivity
	d.impatiality
	e.Loyalty

ANSWERS

1.Integrity

2.Honesty

3.objectivity

4.Impatiality

5. Loyalty

The Role f Human Resources Management Officers And The Trade Union Representatives In Handling Of Disciplinary Cases

 HR must: ensure compliance, interview and   take exculpatory statements; investigate & ensure facts are collected, and presented without bias

UNION-   mitigating on officer's behalf.

'Congratulations you have come to the end of Leadership and Management course!'

12.18 Unit Summary

Hello learner! We have discussed the Industrial and Labour Relations Act Cap 269 of the laws of Zambia and the Employment Act Cap 268. Here we looked at the major parts of these Acts. We have also looked at the trade unions and the conditions of service for public service workers.

12.15 Unit References

Http://dictionary.reference.com/browse/postings

NHS Terms and Conditions of service Handbook www.nhseemployers,org/...AFCtcof servicehandbook .fb.pdf