

METHODOLOGICAL APPROACHES TO THE DEVELOPMENT OF THE NURSE-LEADER'S WORKPLACE

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Currently, an effective solution to the problem of selection of nursing staff requires the development of scientifically based models of nursing jobs that provide selection, evaluation and placement of staff on a single methodological basis. An expert assessment of the nursing staff made it possible to form a workplace model of the nurse-leader.

The model of the nurse-leader's workplace, in our opinion, includes 14 elements that represent the qualitative and quantitative characteristics of the workplace.

The aim

of this work analysis of the elements of the workplace and create a model workplace of the nurse-leader.

Methods

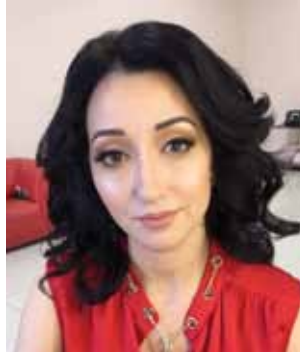
In this study we used the methods of sociological survey and non-parametric statistics

THE RESULTS OF THE STUDY

As a result of the analysis, we found that the 835 respondents (92%) give the advantage to the female sex. 77% of respondents selected the range from 30 to 40 years, as like as optimum age for the nurse-leader. According to 65% of specialists, the family status of the nurse-leader does not matter, as well as the social status (724 respondents — 81%).

The appearance of the nurse-leader should necessarily be, in most cases, charming (as noted by 500 representatives of nursing staff — 56%). Work experience is the most important criterion of the level of skill of the worker. 547 respondents noted that professional experience of the nurse-leader should be more than 10 years (61%).

Professional knowledge is the basis of effective activity of each leader. The most important in HR-management and in the organization of work of medical workers, according to respondents, are: knowledge in the field of psychology (812 respondents — 89%), management (788 respondents — 87%),



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legislation (748 respondents — 83%), pedagogy (724 respondents — 81%), knowledge of the economy, the relationship of ethics (necessary for 700 respondents — 78%), knowledge of modern models of nursing care (indicated 692 respondents — 76%).

Professional skills are also important for the nurse-leader, since in most cases she has to act as an expert, which also implies elements of practical professional activity.

The most necessary practical skills were noted: skills of working with people (772 respondents — 85%), development of training programs for nurses (indicated 796 respondents — 88%), using standards of nursing care (717 nurses — 79%), conducting methodical work (624 respondents — 69%), determining the quality of nursing care (618 respondents — 68%), scheduling (indicated 592 respondents — 65%).

Most managers select employees, assessing them according to their education. The employer should

study the duration and content of education, its compliance with the work. The nurse-leader in the opinion of 844 respondents should have a higher education in the specialty of *nursing*, qualification *manager* (94%); on specialty: *general medicine*, qualification *paramedic* (indicated 646 people, 73%); on the specialty of *nursing*, qualification *nurse* (549 specialists of the nursing staff indicated that is 61%). [1]

It is also necessary for the nurse-leader to improve the qualifications, at faculties of higher nursing education of medical schools (812 respondents — 89%) and in management schools (432 respondents — 49%).

A significant role in determining the model of the workplace of the nurse-leader playing her personal characteristics. This group of indicators is determined by a wide range of personal qualities and subjective in their perception.

The main problem is the lack of direct observations of the properties of the person. Of the human qualities, the most preferable are: justice (823 respondents — 91%), honesty (782 respondents — 86%), kindness (725 respondents — 81%), attentiveness and punctuality (705 respondents — 78%), integrity and responsibility (672 respondents — 74%), responsiveness (654 respondents — 72%), tolerance (624 — 69%), optimism (indicated by 552 respondents — 63%).

When determining the quality of the nurse-leader were noted: the ability to listen people (it is important for 812 respondents — 89%), organization (it is necessary in the opinion of 750 respondents — 83%), the ability to complete the task to the end (relevant for 724 respondents — 80%), breadth of horizons (important for 695 respondents — 77%), diplomacy (680 respondents — 75% noted), ability to see the prospect (625 respondents — 69%), efficiency (popular among 620 respondents — 68%), purposefulness and executive (599 respondents — 66%), communication skills (indicated 690 respondents — 76%), discipline and hard work (695 respondents — 77%). Personality psychology plays a special role in the activities of any leader, especially the female leader. [2]

From the point of view of women, who make up about 95% of the nursing staff who have an education in *nursing, medicine*, the extrovert must be the predominant type of personality (698 representatives of the nursing profession — 77%).

By temperament — the first place was given to sanguine (728 respondents — 81%), and 842 respondents — 93% — without any doubt noted the high level of intelligence.

The health and efficiency of nursing staff is gradually becoming one of the important factors contributing to the effective operation of the clinic.

The performance of functional duties by the nurse-leader requires from her, quite often, good physical preparation and the presence of potential health, both physical and mental.

According to our results, only 423 (48%) of able-bodied sisters-leaders can call themselves healthy people, and 719 (79%) are almost healthy.

For some specialists, the health and efficiency of the nurse-leader does not matter (78 respondents — 9%).

Hobbies are for any person an original characteristic of his inner world, his preferences and tastes, which leaves an imprint on the business side of the life of the individual. The first place among the proposed variants of hobbies was taken by literature (690 respondents — 76%), the second — art in the form of painting and music (540 respondents — 60%), the third — theater and cinema (popular in 505 respondents — 55%) (Fig. 1).

The organization of work of the nurse-leader is reported to want to be better and more comfortable.

On wages, attention was drawn to receive a percentage of profits for paid medical services (said 590 of the respondents — 65%).

The most common social benefits that should be used by the nurse-leader, according to respondents, were: payment of branded clothing (indicated 578 respondents — 61%), compensation of for food expenses (said 515 respondents — 56%) and material assistance (necessary in the opinion of the 429 respondents — 49%).

The most important social guarantees for the nurse-leader were: annual leave (said 859 respondents — 95%), sick pay (indicated 815 respondents — 90%), benefit in case of death (important for 782 respondents — 87%) and benefits in case of dismissal for staff reduction (relevant for 727 respondents — 80%). [3]

Thus, the model of the nurse-leader's workplace is the next portrait.

This is a specialist female, age from 31 to 40 years, with marital status as social is not important; preferably charming appearance, fair, decent and educated, not devoid of kindness, punctual and attentive; at the helm is enough, benefit from sanguine with a high level of intelligence who has sufficient knowledge in psychology, management, law and pedagogy; possess practical skills in working with people in development programs for nurses; respectively with tertiary education, raising the qualification as nursing and management; owning quite literary in knowledge, having the opportunity to receive a percentage of profits for paid medical services; in addition, to pay for branded clothing and to have social security on annual leave, paid sick leave and receive benefits in the event of dismissal for redundancy.



Fig 1. The main elements of the model nurse-leader's workplace

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