ABSTRACT

Nursing administration takes on a bureaucratic orientation in Brazil. In this article, the authors report a strategy of participative management as a useful resource for transforming bureaucratic organizations. Principles of participative management, in the context of a social model of management, are presented and applied to nursing.
THE ADMINISTRATION of patient care is the essence of the nurses’ work in Brazil. However, Trevizan (1988) found that the administrative work of nurses in management positions has notably been oriented toward bureaucracy. This is detrimental to both patient care and the needs of the members of the nursing profession. The basis of management should be collaborative and maintained by involvement and participation of nursing personnel via teams.

Discussing administrators as “technicians of power” and their important role as investigators of systems, Toffler (1980) reports that “complaints of participation in management, of division of decision making, of control of the worker, of consumer and of citizen, and of anticipated democracy sprout in nation after nation” (p. 79). According to Toffler, new ways of structuring to relegate hierarchy to a secondary plane are appearing more often in advanced organizations. Most organizations are being pressured to intensify the decentralization of power, and this provides an opportunity for social and political reform. Consistent with Tobar’s (1991) view, the authors of this article believe that decentralization is a strategy that lessens the load at the central level and confers stability to the democratic process. Also, decentralization constitutes a functional prerequisite to the attainment of greater levels of efficacy and efficiency.

As mentioned earlier, patient care by nurses has been subject to bureaucratic and conventional administration and, thus, is a concern that calls for reform in the search of excellence. The strategy of participative management can be a useful resource in this search. In this article, the social model of management is evaluated by examining principles of participative management from the perspective of nursing.

**SOCIAL MODEL OF MANAGEMENT**

The social view of management is based on behavior theory and is concerned with democratizing and humanizing businesses. Informal participation, motivation and human needs, communication, and leadership in organizations are important aspects of the social model of management. Work satisfaction is a major concern because of the understanding that production levels and satisfaction are directly related. One of the main objectives of the humanistic and social movement is to break the excessive hierarchial control and encourage spontaneity of work (Trevizan & Mendes, 1993).

The social perspective comes from the principle that there are certain forces that determine a result and presupposes that decisions are influenced by values and are not mechanical. "These decisions are made not as much by cold reasoning but by the coalition of social nature, models of habits relative to the past and other dynamic aspects which affect the work of groups of people" (Peters & Waterman, 1987, p. 52).

Barnard (1950/1987) offered a comprehensive theory of behavior of cooperation in formal organizations. He concluded that managers fulfill the promise and actively manage the informal organization and at the same time guarantee that the organization reaches its economic objectives. Barnard designated the main role of the manager as motivator and manager of values. Selznick
(1957/1987) elaborated a similar theory with the concept of organizational character. He emphasized the idea of organizations as cultures. According to Selznick, the term organization comes from "a system without contradictions of consciously coordinated activities" (p. 106). In their analyses on organizations, behavioralists emphasize a psychosocial system, focusing more specifically on human components and their organizational conduct, interactions, and mutual cooperation (Trevizan & Mendes, 1993).

Evidently the process of developing a social model of management is not strictly an object of the technical forum but involves a molding of the social character of the institution. It is here that leadership must go beyond efficiency and deal with the essential issue, that is, developing a social organization capable of accepting its mission (Selznick, 1957/1987).

Peters and Waterman (1987) formulated several principles that characterize the distinction of excellence in organizations. These principles are fundamental in participative management and can be synthesized and incorporated into nursing.

**PRINCIPLES OF PARTICIPATIVE MANAGEMENT**

**Potential for Action**

This principle includes techniques for supporting action of individuals, promoting constant movement in the organization, and showing which issues are of real interest. Toffler (1970) identified the need for "adhocracy" as a rule in the life of institutions. Adhocracy challenges the arrangement of bureaucracies. The manager organizes transitory teams to solve specific problems quickly in response to changing needs. In the ad hoc process, the intensity of communication and the insistence on informality is notable, giving rise to a need for people to maintain contact with each other. Documentation is informal and generally meager.

Another component of this action principle is the powerful tool of experimentation. The participative manager must support risk taking, stimulate action and innovation, allow failures, evaluate successful experiences, commend victories, and guide the dissemination of the achievement.

**Proximity With the Client**

Another fundamental principle of participative management is to be close to clients to tend to their needs and anticipate their desires. In some organizations, clients are viewed as annoying; their unpredictable behaviors disorganize previously organized plans and consequently alter strictly constructed operations. Participative managers fully use this proximity and behave as good listeners. Most innovations originate from this relationship with clients. In other words, these institutions learn from those they serve. In innovating businesses, everyone participates, and many "arrive at their best products through ideas of clients. This can only be attained with attentive and frequent listening" (Peters & Waterman, 1987).
Simultaneous with the orientation toward the client, successful businesses concentrate on aspects that generate long-term return. In other words, service, quality, and trust are strategies that lead to loyal clients and constant, growing return (Peters & Waterman, 1987).

Creativity and Innovation

Levitt (1981/1987) affirms that

*creativity is the process of thinking and imagining new ideas. Innovation is to make new ideas ... a new powerful idea can drift within a company for many years without being used, not because its merits are not recognized, but because no one wants to take on the responsibility to convert words into action. Ideas themselves have no use if they are not used. The proof of their value resides only in their implementation* (p. 194).

Although there are many creative persons, there appears to be a lack of innovators. Creative persons tend to pass the responsibility of transforming their ideas into action to others and, thus, hinder rather than facilitate the implementation of their ideas. What appears to be lacking are persons who have knowledge, energy, and tenderness and who are willing to take risks to see their ideas implemented. Creativity without subsequent action, oriented toward innovation, can be viewed as irresponsible behavior (Levitt, 1981/1987).

Productivity by Persons

The fundamental lesson of successful organizations in relation to people can be summed up as treating persons as adults and associates and with dignity and respect. People are the primary source of quality and productive gains. In other terms, if one wants productivity and financial success, it is necessary to consider the workers as the most important capital. Respect of the individual represents the central theme in management that values participation and seeks excellence. It is necessary to grant autonomy to workers so that they can offer efficient and competent work.

The orientation toward people brings with it a formidable aspect. Successful organizations are highly performance oriented. The difficulty comes more from mutual expectations and evaluation by colleagues rather than by superiors. This aspect is perhaps harsher than that observed in more formal organizations (Peters & Waterman, 1987).

Creation of Values

For an organization to survive and be successful, it must possess a solid foundation of beliefs to direct its policies and actions. Devotion to these beliefs constitutes the singular factor for success. To face changes resulting from external factors effectively, the organization must be prepared for any transformation, using its beliefs to guide decisions and actions.
Selznick (1957/1987) comments that “the leader of an institution is primarily a specialist in the promotion and protection of values. . . . Leadership fails when it concentrates only on simple survival. Survival of an institution ... is a question of the maintenance of values and the preservation of identity” (p. 253). If general values are not transmitted formally, they are divulged in other ways, such as through stories, myths, legends, and metaphors. Outstanding organizations are collectors and tellers of stories, myths, and legends about service, quality, and innovation that support their basic beliefs.

Properties Simultaneously Rigid and Flexible

This principle is essentially the coexistence of a strong central direction and a maximum of individual autonomy. Institutions that are maintained by simultaneously rigid and flexible properties are, on the one hand, rigidly controlled, and, on the other, have autonomy, company spirit, and innovation from all levels in the organization. This is accomplished through adherence to a system of values and through attention to all details (Peters & Waterman, 1987).

The history of great organizations has shown the importance of value systems and loyalty to them. For many leaders of these organizations, values are all that exist. “These men live for their values . . . and apply this principle in their organizations with great care” and believe in the client, concession of autonomy and maneuvering space, open-door policy, and quality. “But each of them was a defender of discipline. Much leeway was given on the principle that some of their collaborators would hang themselves” (Peters & Waterman, 1987, p. 284). Curiously, attention to the client is one of the most rigid properties. This is perhaps the most rigid manner of self-discipline.

PERSPECTIVES OF PARTICIPATIVE MANAGEMENT IN NURSING

It is believed that the principles of participative management can be incorporated into professional nursing management in Brazil. There is a need toward a more decentralized organizational structure and for a higher level of education for nursing personnel. Nurses should increase their knowledge and emphasize personal abilities, favoring the implementation of the principles of potential for action and productivity. Nursing managers need to support risk-taking behaviors by structuring an environment where employees are treated as a most important resource and creativity and innovation are celebrated.

Nurse leaders can assume responsibility for the promotion and protection of established organizational values. The values can be used to direct work and decisions at the organizational level while at the same time providing a framework to support an employee's autonomy.

One of the most important aspects of participative management is the clear attention on the client (patient) and his or her needs. The nurse manager and his or her team members are focused on patient care and toward understanding the patient as a person. This orientation and knowledge, arising from proximity with the client, guides nursing actions necessary for the delivery of outstanding care and service.
The principles of participative management can be used to move an organization from a hierarchical model to one where power and decisions are more decentralized. The nurse and his or her colleagues can support and facilitate this shift by establishing creative and innovative actions that emphasize the needs of their clients (patients) as well as by developing work teams that are alert to the individual needs of its members.

**REFERÊNCES**


