







Competences of nurse managers in primary health care and hospital services in the context of local health units: A scoping review protocol

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ABSTRACT

Introduction: This article is a protocol of a scoping review that pretends to examine the role of nurse managers in the context of a newly-evolved organizational health structure in Portugal, with a particular focus on their perceptions, emotions, actions and capacity to transition between different levels of care within a local health unit.

Objective: To map and characterize the specific content of the leadership, organizational and technical competences of nurse managers in primary health care and hospital services in local health units.

Methodology: This scoping review represents the initial phase of a larger, mixed-methods, cross-sectional investigation into the competencies of nurse managers at the two levels of care in Health Local Systems: primary health care and hospital care. The research, based on a Joanna Briggs Institute methodology, will encompass terms such as "nurs*", "competenc*", "skill*", "manage*" and "health system", with searches conducted in databases including PubMed, Scopus and Web of Science. Qualitative, quantitative and mixed-methods studies will be considered for inclusion. Two reviewers will select the studies, and the extracted data will be analyzed descriptively and categorized into main themes.

Conclusion: This research has the potential to make a substantial contribution to the understanding and improvement of healthcare management in integrated settings. The findings will be of benefit not only to nurse managers, but also to users and the healthcare system as a whole.

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RESUMO

Introdução: Este artigo é um protocolo para uma revisão de escopo que pretende analisar o papel dos enfermeiros gestores no contexto de uma estrutura organizacional de saúde recentemente desenvolvida em Portugal, com um foco particular nas suas perceções, emoções, ações e capacidade de transição entre diferentes níveis de cuidados numa unidade local de saúde.

Objetivos: Mapear e caracterizar o conteúdo específico das competências de liderança, organizacionais e técnicas dos enfermeiros gestores nos cuidados de saúde primários e nos serviços hospitalares das unidades locais de saúde.

Metodologia: Esta revisão de escopo é a primeira parte de uma pesquisa maior, com abordagem mista e transversal, que investigará as competências de enfermeiros gestores nos dois níveis de em cuidados das unidades locais de saúde: cuidados de saúde primários e cuidados hospitalares. A pesquisa, com base numa metodologia Joanna Briggs Institute, incluirá termos como "nurs*", "competenc*", "skill*", "manage*" and "health system", com buscas em bases de dados como PubMed, Scopus e Web of Science. Estudos qualitativos, quantitativos e mistos serão considerados. Dois revisores selecionarão os estudos, sendo os dados extraídos analisados de forma descritiva e categorizados em temas principais.

Conclusão: A presente investigação poderá contribuir significativamente para a compreensão e melhoria da gestão de cuidados de saúde em contextos integrados, beneficiando não apenas os gestores de enfermagem, mas também os utentes e o sistema de saúde como um todo.

Introduction

The Statute of the National Health Service (NHS), established by Decree-Law n^o 52/2022,¹ delineates the principles of proximity, integration and coordination of care as being of paramount importance to the functioning of the SNS entities. In accordance with Article 10 of the Statute, the structure of the NHS is constituted by health center groups (HCG), hospitals, hospital centers, Portuguese oncology institutes, the long-term care network and health local units (HLU), which operate under the categories of public business entities or special regime public institutes. The reformulation of public business entities within the NHS was driven by the enactment of Decree-Law n^o 102/2023,² that facilitated the implementation of the HLU organizational model, which is distinguished by the integrated delivery of primary and hospital care. Furthermore, the decentralization process is shaped by municipal and inter-municipal dynamics, as evidenced by the transfer of competencies outlined in Decree-Law n^o 23/2019,³ aimed to integrate the HCG into the HLU and consequently restructure the primary health care delivery model. The intrinsic complexity and increasing demands of the health system present challenges in identifying and mobilizing the essential skills required for organizational success.⁴ In light of this novel configuration, it is of paramount importance to delineate the scope of action for nurse managers in a HLU and to foster their professional excellence, with the objective of optimizing efficiency and effectiveness in the performance of their duties. The objective of this study is to map and characterize the specific content of the leadership, organizational and technical competences

of nurse managers in primary health care and hospital services in local health units, through the lens of Marilyn Anne Ray's Bureaucratic Care Theory,⁵ which underscores the significance of care in the context of bureaucratic healthcare systems and its interconnection with managerial practices. This theory puts forward a perspective that considers the ethical and bureaucratic constraints and difficulties encountered by nursing managers in a HLU, where qualitative care can occasionally be at odds with current policies and legislation. Ray underscores the necessity of comprehending and reshaping the evolving culture within the healthcare system. He draws attention to the obstacles posed by business and profit-maximization strategies to humanistic and managerial practices in nursing.⁵ The author presents a case for the development of an organizational culture that is orientated towards human values, which can provide guidance on innovations and organizational healthcare policies. The HLU represents an integrative model of care, which is confronted with challenges that arise from the heterogeneous nature of organizational cultures, values and pre-existing practices. It is of the utmost importance to gain an understanding of and reflect on the skills required by nurse managers who have been educated in different care contexts, and who must integrate a common organizational culture.⁴ The competencies required of nurse managers in Portugal are delineated in the Regulation of the Advanced Added Competence in Management of the Portuguese Nursing Council⁶ and are indispensable for the effective execution of the functions of planning, organizing, directing, advising, and evaluating nursing care. This is to be done in accordance with the mission, vision, and values of the HLU, as well as in alignment with the guidelines

of relevant management bodies. As the HLU model expands nationally, it gives rise to challenges associated with business management, achieving contracted goals, and managing the financial impact of healthcare. In order to meet these challenges, an increase in competitiveness and organizational efficiency is required.⁷ This context requires an exhaustive examination of the interrelationship between humanistic care philosophies and management practices, and the manner in which they can coexist within a dynamic care environment.

This scoping review aims to map and characterize the specific content of the leadership, organizational and technical competences of nurse managers in PHC and hospital services in LHU.

Methodology

As the first study in a larger mixed-methods study, this scoping review protocol will use a cross-sectional, observational, and phenomenological approach. It will adhere to the Preferred Reporting Items for Systematic Reviews and Meta-Analysis Protocols – Extension for Scoping Reviews (PRISMA-ScR)⁸ recommendations as well as the methodological approach created by the Joanna Briggs Institute⁹ for this type of study. It has the code osf.io/t4g3h and is registered in the Open Science Framework. Any methodological modifications made to the protocol during its execution will be documented in the scoping review's final output.

Using the PCC acronym (Population, Concept, and Context): a) with reference to the population: nurse managers; b) regarding the context: primary health care (PHC) and hospital services in an HLU; regarding the concept: competences required to manage, the following research question was developed: What competencies are required of nurse managers in primary health care (PHC) and hospital services in a HLU context?

Eligibility criteria

The PCC acronym will serve as the basis for defining the eligibility requirements (Table 1). Studies that do not examine nurses' managerial abilities in settings other than an HLU will not be included in the review. All full-text articles will be taken into consideration, regardless of language or publication year.

Table 1. Inclusion criteria.

Eligibility criteria	
Population	Nurse managers.
Concept	All competences required to manage.
Context	Primary health care (PHC) and hospital services in a HLU.
Types of evidence source	Databases containing peer-reviewed articles, textbooks, editorials, conference proceedings, and dissertations/theses with no restrictions on language or publication year.

Sources of information and search strategy

The search will be conducted in electronic databases (PubMed, CINAHL and LILACS), data aggregators (Scopus, Web of Science and EBSCO) and open access repositories (RCAAP), as well as sources in the grey literature, such as Google Scholar and ProQuest, including qualitative, quantitative, and mixed-methods studies; policy reports; dissertations and theses.

By combining descriptors and words found in the titles, abstracts, and keywords of relevant articles, the search strategy will attempt to locate both published and unpublished studies. This will create a search strategy for PubMed/MEDLINE (Table 2), which will subsequently be modified for each database. The articles' references will also be taken into account.

Table 2. Search strategy - MEDLINE via PubMed (search made on November 7th, 2024)

Search	Keywords	Records Found
#1	(nurs*)	1.210.666
#2	(competenc* OR skill*)	252.935
#3	(manage*)	2.364.041
#4	("health system")	149.046
#1 AND #2 AND #3 AND AND #4	(nurs*) AND (competenc* OR skill*) AND (manage*) AND ("health system")	779

Study selection and data extraction

EndNote software (Clarivate Analytics, PA, USA) will be used to select articles, and references will be imported for management and duplicate removal. Following this stage, articles will be loaded into the free Rayyan program (Qatar Computing Research Institute, Doha, Qatar) so that reviewers can categorize them as included or excluded after blindly screening them based on their abstract and title. Two reviewers will independently complete each of these steps; if they cannot agree on whether an article is eligible, a third reviewer will assist in making a decision.

Following screening, each included article will undergo full-text reading analysis to determine its eligibility for this review. During the selection process, the authors of the articles may be consulted if there are any questions or issues with access. Following data analysis in accordance with the study's content, research findings will be published in the scoping review and displayed in a PRISMA-ScR flowchart.

After reading the complete texts of the included articles, two impartial reviewers will combine the extracted data, which will include details about the following: article identification, author(s), year of publication, country of origin, type of institution(s) where the study was conducted, type of study, population/sample size, definition of competencies,

methods of assessing competencies, and main results. An auxiliary tool created by the reviewers will be used to detail the information (Chart 1).

The data will be subjected to descriptive and qualitative analysis, with the assistance of NVivo software, in order to identify competencies and categorize and synthesize principal themes. The results will be presented in tabular and narrative form.

Chart 1. Data extraction instrument

Article identification:	
Author(s):	
Year of publication:	
Country of origin:	
Type of institution(s) where the study was conducted:	
Type of study:	
POPULATION	
Population/sample size:	
CONCEPT	
Definition of competencies:	
Methods of assessing competencies:	
CONTEXT	
Main results:	

Outcomes

The definition of competencies and techniques for evaluating them are the variables that will be gathered. The tool created for this review may be modified as necessary while reading articles and synthesizing data; the final product will note these modifications.

Data synthesis

Data will be analyzed to describe study variables and methodologies in accordance with the research objectives. Analysis will be done both quantitatively and qualitatively. To address the research question and accomplish its goals, the collected data will be displayed in a flowchart, and the key findings will be highlighted in the discussion.

Ethical considerations

No specific ethical considerations are required for this scoping review, as it will be based on already published literature. Nevertheless, the dedication to rigorous research and review methodologies, including transparency and the ethical utilization of existing literature, will remain a constant throughout this study.

Conclusion

It is anticipated that the findings of this study will offer valuable insights into the discrepancies in managerial practices across levels of care, the capacity of nurse managers to transition seamlessly between hospital and primary healthcare settings, and the challenges and prospects encountered. The findings of this study have the potential to inform health policy and contribute to the enhancement of training and professional development for nurse managers, thereby promoting the quality and continuity of care within the NHS.

This research proposal is of significant merit in that it addresses critical questions regarding the integration and effectiveness of nurse managers in a HLU model, which is central to health policy in Portugal. Moreover, by elucidating the cultural and organizational impediments, it will be feasible to devise policies that mitigate conflicts and maximize synergies between disparate care units, thereby delineating strategies for HLU management that enhance efficiency, quality of care, and user satisfaction, thus contributing to the sustainability of the NHS. Furthermore, it is our intention that this model will prove beneficial to the daily practices of nurse managers.

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