The Effective
Health Care
Supervisor SEVENTH EDITION

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Preface

In preparing each previous edition of this book it has been the practice to seriously consider a number of user comments and suggestions and to solicit editorial direction from the publisher. This seventh edition was approached in like manner; every effort was made to make it more useful to both students who employ it as a text and working individuals who might use it for continuing education purposes or as a reference for information about supervisory practice.

Although the changes from the sixth edition are not voluminous, they nevertheless address some important concerns facing healthcare organizations, for example, the continuing implementation of the Health Insurance Portability and Accountability Act (HIPAA). Some choices had to be made based on user feedback. In this book's use as a text, for example, it is likely that no single course uses all the chapters, although each individual chapter is used in some courses. The most difficult choice faced with every chapter has always been the depth of topic coverage. Most chapter topics addressed in this volume could be, and in most instances are, the topics of entire books. But if every topic addressed herein were given in-depth treatment, the book would be impractically long and, more to the point, the book's intent—that of a comprehensive introduction and overview—would be defeated.

To a considerable extent, the book deals with the fundamentals of management as applied by those who supervise in healthcare organizations. Although management fundamentals remain essentially unchanged, matters of how, why, and when they are applied are affected by the changing circumstances of the modern healthcare environment. Changes affecting the delivery of health care make it necessary for managers at all levels to continually adapt to shifting circumstances as they apply the basic concepts of management.

A number of additions and changes have been made throughout the book. Chapter format remains essentially the same. Each chapter begins with a "Situation"—a case study to consider while reading the chapter, to be addressed at a later point in the chapter after the information relevant to its assessment has been provided. The "Questions for Review and Discussion" that precede the single case or exercise that ends each chapter have been expanded; there are now 10 questions provided for each chapter.

Also, a number of changes have been made to clarify and, in some instances, expand on or update information presented in the previous edition. Every effort has been made to make the book more useful by making parts of its message clearer and easier to absorb and apply. Also, an effort has been made

to maintain simplicity of language wherever possible, in the firm belief that information presented in a conversational tone is more readily absorbed.

A word about terminology is in order, specifically about the two terms used most frequently throughout this book. The terms in question are *supervisor* and *manager*. These terms have long generated widely varying perceptions among people who use them regularly, and even among people who simply encounter them in written material. The problems arise from the conflict of the essential generic meanings of these terms with their frequent uses as organizational titles.

Taken simply as words in the English language, *manager* and *supervisor* have essentially the same meaning. This can be verified in any dictionary, and every available thesaurus lists each as a synonym for the other. Both refer to overseeing the activities of others. Management may be simply but accurately described as "getting things done through people." Likewise, supervision may be described as "overseeing the activities of people in the performance of work." In both instances the process is the same: providing the people who are doing the work at the next lowest organizational level with the guidance, instruction, support, and assistance they need to get the job done. And in both instances, the higher-up—whether called manager or supervisor—bears responsibility for the output of the subordinates.

The greatest conflict in the varying perceptions of manager and supervisor is the tendency of many people, perhaps the majority, to believe that manager is a "higher" and thus better title than supervisor. This perception is most likely due to the manner in which the terms are used as titles within work organizations, creating the basic conflict with generic meanings. Much of the time this perception is accurate; manager, as an organizational title, is superior to supervisor in some hierarchies. On occasion, however, the situation is reversed. In some places, supervisor is used as superior to manager and various other position titles.

Since manager and supervisor have different meanings for different people and are subject to varying uses in different organizations, this volume attempts to establish consistency through the use of generic meanings. Therefore, throughout this book the terms supervisor and manager are used interchangeably, as are supervision and management. At times some qualifying terms may be used in denoting "top management" or perhaps "first-line management," "first-line supervision," or "middle management," but whether one says manager or supervisor, in all instances the reference is to the person who is responsible for the output of those at the next lowest organizational level.

Much of what appears in this book is applicable to all kinds of business organizations, but much of the material reflects the unique character of the healthcare organization. The book is intended to be read and used by first- and second-line supervisors and middle managers, those with or without formal training in management, and potential supervisors. It can also serve as a refresher text for managers at all levels of the healthcare organization. It is also pertinent to many upper-level managers—the people who supervise the supervisors of the supervisors—in terms of lending perspective to the top-down view of what happens at lower levels.

There is no absolute topic order for the material in this book. Although it is divided into a significant number of chapters by topic, it is really not possible to deal with any single topic separate from all others. Each is implicitly or explicitly part of perhaps several other topics. Communication is a case in point; it is the primary topic of several chapters, yet the principles of effective communication make their presence felt in a dozen or more additional chapters.

Chapters can be read selectively, but it may be most helpful to begin with the first four chapters for the sake of obtaining an overall perspective. Then read those chapters on the topics that interest you, appeal to you, or touch on a problem you are experiencing. For instance, if the last meeting you attended was a disaster and you would like to learn about effective meetings, go straight to Chapter 20. Do not worry about skipping chapters that simply do not apply to your situation—just as long as you are certain they do not apply. For example, if you do not have budget responsibility at present, save Chapter 21 until later. Use your valuable reading time for the topics that will do you the most good on the job.

Supervision is often a tough task, and one of the conditions that make it so is the appalling lack of solutions to problems. If we were presenting technical task instructions, we could simply say, "Here's how to do it, period." However, the problems of supervision more often than not are problems of people, most of whom are unpredictably, but quite naturally, different from each other. When presented with a specific problem, your "correct" answer may be this, that, the other, or none of the above, depending on the people involved. The technical task worker may spend much time in a world of black and white, but the supervisor spends every day among varying shades of gray. Parts of this book are concerned with what are necessarily gray areas. The book can guide you in making many decisions; it cannot, however, prescribe solutions to "standard" problems, since few such problems exist in supervision.

Use this book for general enlightenment about healthcare supervision. Use it as a reference—seeking out specific topics through either the index or the table of contents. Use it as a textbook for management development classes.

Whatever value this book possesses lies largely in its potential as a working guide. Use it as your particular questions and needs suggest. If it helps you on the job in any substantial way, even only now and then, it will have served its intended purpose.

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About the Author

Charles McConnell is an independent healthcare management and human resources consultant and freelance writer specializing in business, management, and human resource topics. For 11 years, he was active as a management engineering consultant with the Management and Planning Services (MAPS) division of the Hospital Association of New York State (HANYS) and later spent 18 years as a hospital human resources manager. As an author, coauthor, and anthology editor, he has published more than 25 books and has contributed nearly 500 articles to various publications. He is in his 30th year as editor of the quarterly professional journal, *The Health Care Manager*.

Mr. McConnell received an MBA and a BS in Engineering from the State University of New York at Buffalo.