Give sisters the clout they need

Patients want ward leaders with the freedom and power to set standards, writes Alison Whyte

Ward sisters and charge nurses are the front line of the biggest workforce in the NHS. They are expected to be clinical leaders, administrators, team builders, role models, managers, motivators, communicators, educators and mentors.

In theory they have responsibility for whole staff teams, the physical environment and all their patients. Nursing Standard’s Power to Care campaign seeks to ensure ward leaders have the power to fulfil these roles and responsibilities.

Katherine Murphy, director of the Patients Association, believes ward sisters lack the authority they need. The former nurse says: ‘Many of the terrible cases we hear about where the fundamentals of care have been neglected could have been avoided if nurses were in charge of the ward. Ward sisters must be able to make the necessary decisions to run their wards efficiently and effectively. They must also be willing to speak out and say, “I cannot deliver safe care unless I have more nurses”.

Her words are echoed by Jeremy Taylor, chief executive of National Voices, an umbrella group of patients and carers, that campaigns for its members to have a stronger voice in the design and delivery of health services. He says: ‘Open, collaborative working cultures enable staff to stand up for patients’ interests and deliver better and safer care. We support a move to give nurse leaders greater status and authority.’

‘Patients want to know that someone is in charge and that nurses have the power to do what is right for their patients. They need someone they can turn to who will take responsibility. This is not always the case.’

A number of factors have contributed to the erosion of ward sisters’ authority over the years. When non-clinical hospital services were contracted out in the 1980s they lost control over ward cleanliness and nutrition.

In Nursing Standard’s 2009 survey of ward managers, 37 per cent said they wanted ‘more clout’. They said they lacked the authority to make decisions and get things done. More than two thirds did not hold a budget, and could not employ an agency nurse when they needed one without asking a manager.

In recent RCN surveys, ward sisters and charge nurses have said they felt undervalued, under pressure and frustrated. They said their low morale was a result of a lack of authority, shortage of time and understaffing. So what do patients think of ward leaders? Paul Hodgkin, chief executive of the Patient Opinion website, is a Sheffield GP who has worked for the Department of Health, the former South Yorkshire strategic health authority and several primary care trusts. He says: ‘When you read the 25,000 stories on our website, it is clear that ward sisters are generally regarded with approval by patients. They see them on the wards and in outpatient departments and they like what they see. Most patients we have been in contact with would agree that ward managers should have greater authority and status. They often say “bring back matron”.

Leadership

Although modern matrons were introduced in the 1990s, many patients seem to be unaware of their existence.

To try to strengthen the role of ward leaders, the RCN published Breaking Down Barriers, Driving Up Standards in 2009. The report identified concerns, including a lack of clarity about the role and its scope. The ward sisters and charge nurses interviewed felt particularly aggrieved about having a group of patients allocated to them for direct care on every shift. This must change, they said, if they were to fulfil a leadership role.

Nurse Monica Dennis is a founder of A Dignified Revolution, an organisation consisting mainly of nurses set up in 2008 to improve the care of older people in hospital.

She says people who contact the group often raise issues related to the lack of nurse leadership, at ward and executive level. ‘Patients and relatives are often not made aware of who is in charge of the ward, or which particular nurse is charged with looking after them during a shift. Poor communication is often raised by patients. Relatives find it extraordinary that sometimes...

SUMMARY

Professional and patient groups share a vision of how wards are run best and support our Power to Care campaign, which aims to boost the authority and status of ward sisters.

Keywords

Autonomy • Authority • Empowerment • Patient care • Patients Association • Respect • Ward sisters

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the ward manager – who should be accountable and responsible for all patient care – cannot give them any information about a patient’s progress.’

Ward sisters and charge nurses interviewed for the Breaking Down Barriers report said their passion for nursing motivated them, rather than a desire to be a manager. They almost unanimously rejected the title ‘ward manager’ and wanted to be identified as the nurse in charge of the ward.

Ms Murphy agrees: ‘The term manager deflects from the caring aspect of the role. I would support a return to the title “sister” and I am sure the vast majority of callers to our helpline would agree. After our report Patients Not Numbers, People Not Statistics was published last year, we were inundated with letters, emails and calls. A huge number made comments such as “br

A wealth of data reinforces the link between empowered ward sisters and increased satisfaction among patients and carers. Picker Institute Europe, which gathers patients’ views of healthcare, has evaluated the responses of more than 72,000 inpatients who took part in the National Inpatient Survey 2008.

Dignity and respect
Six of the seven top issues relating to patient satisfaction fell within the ward sister’s remit. These were consistency and co-ordination of care, respect and dignity, involvement in decision-making, person-centred care, cleanliness, and pain control.

Picker’s head of communications Elaine Whittaker says: ‘We support an empowered ward sister who is in overall charge of patient care and the ward team, and potentially acts as an “advocate” for the patient. This would make sure that all ward staff are communicating with patients and feeding information from patients back to the rest of the team.’

Ms Murphy is supportive of Nursing Standard’s Power to Care campaign. ‘The ward sister should be able to lay down the law on how her ward is run. If patients knew that her top priority was achieving the highest standard of clinical care, rather than performing management tasks, it would give them much greater confidence’.

Alison Whyte is a freelance journalist

Surveys show a patient’s hospital experience is enhanced when ward sisters are clearly in charge

Patients’ organisations
- The Patients Association www.patients-association.com
- National Voices www.nationalvoices.org.uk
- A Dignified Revolution www.dignifiedrevolution.org.uk
- Patient Opinion www.patientopinion.org.uk