

# Testing in time: from the classical management theory to the current organisation of Nursing work

Teste no tempo: da teoria clássica da administração à organização atual do trabalho de Enfermagem  
 Test en el tiempo: de la teoría clásica de la administración a la organización actual del trabajo de Enfermería

Denise Rocha Araújo\*; Francisco Miguel Correia Sampaio\*\*; Marilisa Costa e Castro\*\*\*; Sofia Alexandra Vieira Pinheiro\*\*\*\*; Ana Paula Macedo\*\*\*\*\*

## Abstract

**Background:** Henri Fayol's Classical Management Theory was based on an administrative vision marked by predictability, organisation, command, coordination, and control. To implement this administrative paradigm, fourteen general principles of management were defined.

**Objectives:** To identify nurses' representations of the current health administrative practices and analyse the extent to which these representations are in line with the principles of the Classical Management Theory.

**Methodology:** Qualitative descriptive exploratory study. Data were collected using semi-structured interviews, with previously defined categories corresponding to the fourteen general principles of management. These interviews were conducted to eight nurses, with heterogeneous professional features and chosen by rational selection.

**Results:** Interviewed nurses' representations show that for them the current health administration is relatively close to the principles advocated by Fayol.

**Conclusion:** The present study highlights that the discussion with nurses about changing the health work organisation is major when developing the best management strategies for the organisation of these professionals' work.

**Keywords:** organisation and administration; work; nursing; qualitative research.

## Resumo

**Enquadramento:** A Teoria Clássica da Administração, desenvolvida por Henri Fayol, assentava numa visão administrativa marcada pela previsibilidade, organização, comando, coordenação, e controle. Para pôr em prática este paradigma administrativo, foram definidos catorze princípios gerais da administração.

**Objetivos:** Conhecer as representações dos enfermeiros acerca das práticas administrativas de saúde atuais e perceber em que medida essas representações se aproximam dos princípios da Teoria Clássica da Administração.

**Metodologia:** Estudo qualitativo de natureza descritiva e exploratória. Recolha de dados realizada através de entrevista semiestruturada, com categorias definidas a priori correspondentes aos catorze princípios gerais da administração, realizadas a oito enfermeiros, com características profissionais heterogêneas, escolhidos por seleção racional.

**Resultados:** As representações dos enfermeiros entrevistados revelam que estes veem a administração atual em saúde de uma forma relativamente próxima dos princípios preconizados por Fayol.

**Conclusão:** O presente estudo evidencia que o debate com os enfermeiros, acerca da mudança da organização do trabalho em saúde, é fundamental quando está em causa o desenvolvimento de estratégias de gestão mais adequadas à organização do trabalho destes profissionais.

**Palavras-chave:** organização e administração; trabalho; enfermagem; pesquisa qualitativa.

\* Master's in Child Health and Paediatric Nursing, Monitor, Porto Nursing College, 4200-072, Porto, Portugal [deniscaraujo@esenfc.pt]. Address for Correspondence: Rua De António Bernardino de Almeida, S/n 4200-072, Porto, Portugal.

\*\* Specialist Nurse and Master of Mental Health and Psychiatric Nursing, RN, Hospital de Braga, Psychiatry Hospitalization Unit, Sete Fontes, 4710-245 São Victor, Braga, Portugal [Francisco.Sampaio@hospitaldebraga.pt].

\*\*\* Post-graduate student in Clinical Supervision in Nursing, RN, Junta de Freguesia de Gonça, 4800-435, Guimarães, Portugal [marilisa689@gmail.com]

\*\*\*\* Post-graduate in Clinical Supervision in Nursing, Nurse Coordinator, Institution - SAMSAP Prepsy (service d'accompagnement medico-social d'adultes handicapés); 75033, Paris, France [sofiavpinheiro@gmail.com].

\*\*\*\*\* Coordinating Professor of the School of Nursing, University of Minho, Braga, Av. Central, Edifício dos Congregados, 4704-553 Braga, Portugal. Ph.D. in Education, area of School Organisation and Administration - University of Minho, Braga, Portugal [amacedo@esc.uminho.pt]

## Resumen

**Marco contextual:** La Teoría Clásica de la Administración, desarrollada por Henri Fayol, se asentaba en una visión administrativa marcada por la previsibilidad, organización, mando, coordinación y control. Para poner en práctica este paradigma administrativo se definieron catorce principios generales de la administración.

**Objetivos:** Conocer las representaciones de los enfermeros acerca de las prácticas administrativas de salud actuales y entender hasta qué punto esas representaciones se aproximan a los principios de la teoría clásica de la administración.

**Metodología:** Investigación cualitativa, de carácter descriptivo y exploratorio. La recolección de datos se realizó a través de entrevistas semiestructuradas, con categorías previamente definidas correspondientes a los catorce principios generales de la administración, realizadas con ocho enfermeros con características profesionales heterogéneas y elegidos por elección racional.

**Resultados:** Las representaciones de los enfermeros entrevistados revelan que estos ven la administración actual en la salud de una manera relativamente próxima a los principios de Fayol.

**Conclusión:** El presente estudio muestra que el debate con los enfermeros sobre el cambio de la organización del trabajo en la salud es fundamental cuando está en juego el desarrollo de estrategias de gestión más adecuadas para la organización del trabajo de estos profesionales.

**Palabras clave:** organización y administración; trabajo; enfermería; investigación cualitativa.

Received for publication: 19.04.13

Accepted for publication: 14.04.14

## Introduction

The administrative doctrine advocated by Fayol (1989) had as a major objective to facilitate business management, emphasizing the formal structure of work organisation and adoption of principles and administrative functions. This structural serialization of the administrative process served as a basis for modern administration and it is, therefore, one of the first administration theories. Management plays a very important part in the government of undertakings: of all undertakings, large or small, industrial, commercial, political, religious or other (Fayol, 1989). In this sense, administration should be considered as a precursor to economic development, and the possible presence of Henri Fayol's ideas in the health organisations of the 21st century should be identified.

Taking into account the current management paradigm of health care organisations, which is strongly marked by an economic pressure, and as these are being increasingly governed by assumptions of efficiency, the present study aims, first, to identify nurses' representations of the current health administrative practices and, subsequently, analyse the extent to which these representations are in line with the general principles of the Classical Management Theory.

## Background

The Classical Management Theory was developed by French engineer Henri Fayol within the scope of the economic environment of the 2nd Industrial Revolution. This theory particularly aimed to increase businesses' efficiency through their organisation and the application of scientifically-based general Management principles.

This author is often associated with his contemporary, the American theorist Frederick Taylor. Both of them advocated an authoritarian style of management (Parker & Ritson, 2005; Souza & Aguiar, 2011). Fayol's Classical Management emphasizes the formal structure of the work organisation and adoption of principles and administrative functions (Ferreira, Reis, & Pereira, 2006).

In a more systematic way, his theory implies that management activities fit into six structural units with specific functions: (i) technical; (ii) commercial; (iii) financial; (iv) security; (v) accounting and (vi) administrative (Fayol, 1989). The last point includes managerial aspects, i.e., the functions of the administrator: organize, plan, coordinate, command and control. This structuralist systematization of the administrative process served as a basis for modern management (Chiavenato, 1987; Macedo, 2012; Matos & Pires, 2006).

In addition to the abovementioned factors which are part of the administrative process, Fayol stressed that, the science of administration, like any science, should be based on laws or principles (Chiavenato, 1987). Thus, as the administrative function is restricted to the social body, there is a need for a certain number of conditions. In this way, the author proposed the 14 general principles of management which are applied to every situation with which the manager has to deal: 1) division of work; 2) authority and responsibility; 3) discipline; 4) unity of command; 5) unity of direction; 6) subordination of individual interest to general interest; 7) remuneration of personnel; 8) centralization; 9) scalar chain; 10) order; 11) equity; 12) stability of tenure of personnel; 13) initiative, and; 14) *esprit de corps* (Fayol, 1989).

Several authors claim that Henri Fayol's principles can be applied to the management of modern organisations, while safeguarding the fact that each principle should not be considered rigid or absolute (Dalmolin, Oliveira, Zucco, Canopf, & Lora, 2007; Parker & Ritson, 2005; Rodrigues, 2001). The name of Henri Fayol is, thus, associated with a status of contemporary management.

In short, Fayol's Classical Management Theory is characterized by its highly prescriptive and normative focus (Chiavenato, 1987). However, Fayol's work remains as an initial contribution, whose analysis can never be neglected. Despite being considered one of most important theorists of management thinking, this author is still understudied (Souza & Aguiar, 2011). Thus, considering the general principles recommended by Fayol and the current reality of Nursing Management, there seems to be some common ground which would be important to explore.

## Methodology

An exploratory descriptive qualitative research design was used. This study aimed to answer the following research questions: a) What are nurses' representations of the current health administrative practices?; (b) To what extent nurses' representations of the current health administrative practices are closer to the general principles of the Classical Management Theory?

Participants were selected using a non-random sampling by rational choice. The following inclusion criteria were considered: nurses who were in clinical practice or in management positions; nurses who worked at hospitals or primary health care settings; the largest range possible regarding the interviewees' age and the health organisations in which the interviewees worked.

Taking into account the type of study, data were collected using individual face-to-face semi-structured interviews. An interview script consisting of 25 questions based on Fayol's general management principles (1989) was developed. A pre-test of the script was performed with three nurses with identical characteristics to those that would be interviewed to assess the clarity of the instrument's questions.

To ensure the reliability of the collected information, data were audio recorded, transcribed and coded. The meetings with participants were scheduled for reserved venues outside the work context. Interviews were conducted during December 2012. To define the number of interviewees, the interviews were conducted until data saturation was reached.

Qualitative data obtained in this study were analysed using a comprehensive content analysis of the participants' discourse. Categorization was previously conducted based on the 14 general principles of

management recommended by Fayol (1989). Each interview was given a number, thus protecting participants' confidentiality.

Content analysis was divided into four phases, taking into account the steps recommended by Bardin (2009). Thus, it was divided as follows: initial reading of the interviews; pre-analysis; classification of information; interpretation and inferences from the interviewee's answers.

Throughout the study, the ethical principles which should guide this type of studies were followed. Data confidentiality was ensured by asking participants to sign an informed consent, safeguarding the interviewees' private life, and asking for a formal authorization to audio record the interview. Participants were informed that no harm would come to them from being interviewed and were assured that they would be informed of the study results.

## Results

To characterize the study participants, descriptive statistics (measures of central tendency) were applied to a set of socio-demographic characteristics. Thus, data regarding participants' age (between 24 and 46 years, with a mean of 33.1 years) and professional experience (between 6 months and 24 years, with a mean of 9.6 years) should be highlighted. It is also worth noting that: only one of the interviewees had a Bachelor's Degree; two of the respondents (25% of the participants) occupied management positions (middle management); 62.5% of the respondents were male (Table 1); regarding their function/position, *specialist nurses* are nurses who have been awarded this title by the Portuguese Nurses' Association (*Ordem dos Enfermeiros*).

Table 1  
*Characterisation of the Study Participants*

	Gender	Type of Organisation	Academic Degree	Function	Time of Experience	Age
1	F	Public Organisation	Bachelor	Nurse Specialist	11 Years	33
2	M	Organisation	Bachelor	Nurse	6 Months	24
3	M	IPSS <sup>1</sup>	Masters	Head Nurse	8 Years	33
4	F	Public Organisation	Bachelor	Head Nurse	24 Years	46
5	M	Public Organisation	Bachelor	Specialist Nurse	7 Years	29
6	M	Public Organisation	Bachelor	Specialist Nurse	15 Years	38
7	M	Public Organisation	Bachelor	Specialist Nurse	9 Years	32
8	F	Public Organisation	Bachelor	Specialist Nurse	8 Years	30

<sup>1</sup>Private Institutions for Social Solidarity.

The initial reading and pre-analysis of the interviews showed that data saturation was reached with eight interviews. Thus, the main results obtained from the interviews will be presented below (Table 2).

Table 2  
*Description of the Results According to Fayol's Principles (1989)*

Principle of the division of work	All interviewees perceived the existence of division of work in the organisations where they work. However, most participants mentioned that, sometimes, roles are ill-defined: "(There are) some functions that belong to no one, and they are sometimes a bit lost" (E2); "(...) sometimes there is confusion in tasks" (E4).
Principle of authority and responsibility	Authority exists (at the organisational level), and some of them consider that this authority is positive: "(...) someone has to be in charge (...) otherwise we have no work organisation but disorganisation (...)" (E1). However, there are also nurses who feel that the authority is oppressive "it would be important for our superiors to have at least the notion that the excess of authority is oppressing us (...)" (E4). There is also a tendency to consider that "(...) she is the boss, period (...)" (E3). The interviewees often mention that "(...) penalties (...)" exist for those with an improper conduct" (E8). However, there is a tendency for the absence of compensation: "there should be a compensation (... ) but that's only a utopia" (E8).
Principle of discipline	Interviewees consider this principle as essential for middle managers, since "(...) the employee who is always active (...) is a desirable staff member" (E1), but little appreciated by the administration: "They don't actually see our work" (E5). Still, even at the level of middle management, most interviewees mention that there is a significant disregard for punctuality: "(...) the head nurse is the first to arrive late. She can't demand that from others" (E4).
Principle of unity of command	Some interviewees stated that although there is only one formal leader, "(...) there are influences from various areas" (E1) and it is possible that "(...) certain persons might indirectly be able to control some ideas" (E3). On the other hand, there are also cases in which there are, effectively, multiple commands: "there is a leader who has (...) two people who are below him, but we receive orders from the three of them" (E5).
Principle of unity of direction	"There are actually three groups within a large group, in which the boss is like a ping-pong ball between three different forces that pull in different directions" (E3). There is a structured plan for the organisation: "there is an annual plan that is based on standards and regulations (...)" which disseminates and tries to accomplish these objectives" (E1). However, there seems to be no convergence of efforts to achieve a certain goal so that the practices are in line with the organisation's mission: "the objectives of the board are not quite the same as those of the other workers" (E4).
Principle of subordination of individual interest to general interest	The interviewees often highlight the need for "a balance" (E5) and to examine and analyse each case, ensuring that, in the event of incompatibility with the organisation's interests, the general interest should prevail on behalf of the "coordination of efforts" (E4) and the "philosophy of the institution" (E1). Therefore, if on the one hand there is the perception that "someone who is satisfied and motivated will certainly be a better collaborator" (E3), on the other hand, "the employee must, in fact, fit into the philosophy and objectives of the institution, because that is why he works" (E1).

Principle of remuneration of personnel	Remuneration is seen as “a right of the person” (E1) and not as a prize. This view was shared by most interviewees, and, for some, remuneration is also seen as “an obligation of the institution” (E1, E2, E3) for the work they have done. As for remuneration, all participants agreed that “it is not fair” (E7), both within the profession - “we have better trained nurses developing a more sustained work and earning the same as others with less experience and training” (E4), both in comparison with other professions - “There is a large discrepancy in the wages [between professional groups]” (E7). It was also said that “ (...) remuneration doesn’t satisfy the worker (...) [and] this can reduce the quality of the work” (E4).
Principle of centralization	All interviewees feel that there is a centralization of the orders in the administration, stating that “the orders come from the top, of the administration, to the bottom” (E4). The answers reflect the idea that “major orders, the ones that change the structure, (...) the organisation (...) come from the administration” (E1) - safeguarding, however, some autonomy by the organisation’s middle managers, as long as they follow “the interests of the administration” (E1).
Principle of scalar chain	The interviewees feel that there is a clear hierarchy that ends with “the main person in charge ( ... ), the chairman of the Board of Directors” (E6). They mention the difficulty to access the administration members due to their likely unavailability and bureaucratization. They also mentioned that contacting directly a higher member of the hierarchy, without informing the middle managers, could be misinterpreted: “if I want to go and talk with a member of the administration (...) I will most likely (...) have to schedule ... explain what is the subject matter ... fill out a form, (...) if head nurses are passed over, they feel almost as they were betrayed, and they would probably use the expression “run over me” (E4).
Principle of material order	Nurses mainly refer to stocks, but they also mention the “material, (...) storage, (...) and even the organisation of the service itself, in a physical structure of the hospital” (E3). They identify the order as being ideal and desirable (E4, E8) and relate it to the improvement of the quality of care - “I remember a time in which the service was being remodelled (...) more disorganisation, temporary facilities, I mean... a chaos. This obviously jeopardised the quality of care” (E4) - and decreased costs and expenses - “people realized that, with this effort, there’s a reduction in costs and expenses” (E4).
Principle of social order	The relationship between the professional training of each nurse and the position they occupy in the organisation was considered ideal, and that “the more specific training staff members receive in a certain context, the better will be their performance” (E4). However, despite the effort, “luckily the professional will be in the right position ... or at least the position that best suits him” (E4). This process is guided mainly by the administration, and it is a complex procedure which is hard to balance: “It is difficult to have a restructuring, a reformulation. (...) People resign themselves (...) to a position, regardless of whether they are being effective or not. And the administration itself does nothing to change” (E3).
Principle of equity	The interviewees stated that “sometimes there are some unfair situations” (E2), “there is gender differentiation” and “there are clearly also personal interests” (E3), making a clear reference to the influence of the managers’ personal interests in how they treat the staff. Nevertheless, some interviewees refer that there is equity in the organisations where they work: “there is (...) some benevolence” and “ (...) there is normally some justice” (E1).
Principle of stability of tenure of personnel	In general, “ (...) moving from one place to another is avoided” (E1). On the other hand, the interviewees mention some situations in which contracts were not renewed - “ (...) there were situations in which contracts were not renewed” (E2) - and the fear of a non-renewal - “ (...) I’m in a difficult situation since I’ve been here for seven years and I still have a fixed-term contract” (E7). With regard to the integration of new members, they mention the opportunity given to people to “improve their performance to remain in their positions. They have more than enough time to (...) integrate and adapt themselves, instead of, for example, readjust the location or even being fired” (E3).
Principle of initiative	There seems to be, in general, “room for the workers’ initiative” (E1) and “ (...) initiative is always welcomed ...” (E8). However, this initiative has no visible impact; it is “masked because that what’s suggested isn’t taken into account. No one stops you from expressing your ideas and desires. But it may be no god.” (E3). With regard to the possibility of an employee developing a plan of action and a superior sacrificing his/her “self-esteem” to have it implemented, all interviewees mentioned the lack of this type of cases.
Principle of <i>esprit de corps</i>	“There is an attempt to promote well-being” (E1) - “ (...) it is complicated managing disagreements. And even more in contexts in which people spend so much time together, in which work increasingly plays a central role in our lives and in which there is so much discontent” (E4). However, interviewees describe more often situations of greater appreciation of this principle by the middle managers than by senior management: “ (...) So, the director is very much concerned (...) with the union (...). The delegation doesn’t seem to be at all concerned about this” (E2). In relation to the use of written information, all interviewees say that the information is passed on orally by the middle management, but in a written form by senior management: “Information are essentially orally from the superior to the direct subordinates but in writing between the Board of Administration and, so to speak, the middle managers” (E3).

## Discussion

The inductive process, underlying the comprehensive content analysis, allowed for data systematization and organisation so as to improve the understanding of the interviewees' answers. With an equivalent sequence to the one of the results' section, and given the lack of studies for the Portuguese context, the discussion includes two studies carried out in Brazil and North-America, comparing both of them and discussing the extent to which the findings emerging from this study are in line with or diverge from the realities in those contexts.

As regards the division of work, it aims to obtain more and better results with the same amount of effort. However it is clear, based on the participants' discourses, that some roles related to certain tasks are *ill-defined* in their organisations, and that this aspect can negatively influence the organisation's productivity. Therefore, there seems to be some deviation at this level from the principle recommended by Fayol. Contrary to what seems to be the case in Portugal, Brazilian nurses are a closed professional body with a high degree of autonomy, while maintaining a Taylorist-Fordist line of command (Matos & Pires, 2006).

When analysing the principle of authority and responsibility, it should be first highlighted that Fayol mainly focused on authority, but he only considered it to be present when accompanied by responsibility (Cole & Kelly, 2011). In these interviews, the tendency is to consider that there is, effectively, authority (especially statutory). The non-assumption of the responsibility inherent in this authority, when it exists, is generally in the form of penalties, rather than rewards. These findings are consistent with the reality in North-America, where organisations favour staff participation in empowerment programmes. In Brazil (Matos & Pires, 2006), as in Portugal, there seems to be more authority. However, this authority is more restricted to nurses (over Nursing technicians and auxiliaries), and Nursing managers have a role more administrative.

As regards the principle of discipline, Fayol apparently presents it in a very coercive way, while recognizing that the problems with discipline may be often due to the superiors' inability to deal with the subordinates' conflicts, or the existence of work agreements that are not sufficiently clear and fair (Fayol, 1989). In

this study, the interviewees tend to consider that discipline undervalued by their superiors, and that middle managers consider some principles, such as obedience, to be extremely positive. Even so, the interviewees often mention that middle managers do not comply with the principles of discipline (especially in terms of punctuality), thus they often do not require their employees to be punctual. There seems to be similarities between the Portuguese nursing context and the American reality in terms of how discipline is attained (Rodrigues, 2001), namely through informal, group peer pressure control. In Brazil (Collet, Cesarino, & Santos, 1994) there is an increasingly higher emphasis on discipline than in Portugal. However, it is unclear whether superiors are *role models*.

As regards the principle of unity of command, which is considered as being essential by Fayol since the duality of command was seen as a perpetual source of conflict (Dalmolin et al., 2007), most interviewees mentioned some cases in which the orders came from more than one superior, as well as cases in which, although there is only one formal superior, there are several agents that influence, in a (sometimes) decisive way, these orders. This aspect is somewhat similar to that of the United States of America (Rodrigues, 2001), in which organisations are becoming multi-boss organisations. Even so, there is a significant departure from how these superiors are organized, as they are at the basis of ad-hoc organisations. This reality is not in line with the interviewees' reports regarding the management in Portuguese Nursing.

Regarding the unity of direction, Fayol (1989) argues that unity is only reached through a good composition of the social body. This principle can thus be expressed by a single superior, a single programme. However, it is clear in some participants' reports that there is no notion of an organisational mission in their organisations. The definition of objectives, sharing of common values, coordination of efforts in the same direction, guidelines or concern from the administration with these aspects do not seem to be a reality in the current Portuguese context. Thus, this reality tends to deviate from the principle advocated by Fayol. In addition, in the American context, organisations are, generally, multi-industry conglomerates with matrix organizational structures containing functions with multiple bosses (Rodrigues, 2001).



Regarding the subordination of individual interest to general interest, Fayol (1989) mentions that personal ambition and selfishness were detriments to the performance of the organisation unless factors such as ambition could be harnessed to support organisational goals (Schimmoeller, 2012). Some of the interviewees' answers suggest that there is a concern to meet the specific aspirations of and an attempt to reconcile individual interests with the organisation's goals (even if giving little feedback), suggesting some distance from Fayol's recommendations. These data appear to be closer to the American context where the management seems to demonstrate more commitment to the private interests of its employees (Rodrigues, 2001).

In relation to the personnel remuneration, and unlike Fayol (1989) pointed out in his work, the interviewees do not see remuneration as a prize, with most of them considering this aspect to be an obligation of the organisation itself. According to the same author, The pay received by employees must be fair and satisfactory to both them and the firm (Fayol, 1989). The interviewees are unanimous: the remuneration is not fair. In his work, Fayol argues that the superiors should pay continuous attention to the remuneration of their workers since these tend to increase the value and the happiness of the personnel (Fayol, 1989). In fact, according to the interviewees, this does not seem to happen nowadays, which can result in a reduction of the quality of work as was reported by some participants in the study. However, in the American reality, organizations use performance-based reward systems (Rodrigues, 2001), thus the workers will produce to their maximum potential.

As for centralization, Fayol (1989) mentions that, to a greater or lesser degree, it always exists and that it is the natural consequence of the principle of unity of command. However, he also mentions that this principle should be considered as a continuum in the search for the correct amount of centralization to the company (Schimmoeller, 2012) and to the circumstance, from a fully rigid structure with passive obedience to a free organisation where the leader values the functions of the various subordinates in the hierarchy (Souza & Aguiar, 2011). This last aspect seems to fit into the interviewees' reference to the existence of, on the one hand, a hierarchy and, on the other hand, room for some initiative and autonomy of middle services and managers. The

results obtained are similar to the Brazilian context, and Matos and Pires (2006) mentioned that the changes in the health system have entailed some progressive decentralisation and debureaucratisation, streamlining the responses and management of needs.

At the hierarchy level, the interviewees' reports clearly refer to the existence of a hierarchical path, such as the information flow from and to superior authorities. It is clear that, despite being rare, the communication bridges, which allow for a direct relationship and annul the hierarchy, are used. According to Rodrigues (2001), horizontal communication should only be used when the need arises, as long as approved by the direct superiors of each one of the parties involved, and only if the latter immediately inform their superiors of what they have done (Fayol, 1989). Although considering the use of the bridge as a simple, fast and safe way to deal with an issue, Fayol believes that vertical communication should be a resource of excellence in more complex organisations. This idea seems to be implicit in the discourse of the interviewees, who often highlight the maximum representative of the organisation, his/her ability to request information when necessary and his/her power to accept or not a certain decision, leading nurses to respect all hierarchical levels in the transmission of information to the top. The American context seems to be, progressively, contradicting this principle, stressing that maximum creativity can only be achieved if the formality of the hierarchy diminishes, potentiating strategies based on the collaborators' *independence* (Rodrigues, 2001).

As regards the material order, Fayol's recommendations (1989) are similar to the interviewees' reports, thus reinforcing the analogy that the place properly chosen for each thing tends to facilitate all operations (Fayol, 1989). In relation to the social order, interviewees reveal the need for nurses to fit to the position they occupy, since every agent [should] occupies[y] the position where he/she can provide the best services (Fayol, 1989), as well as the attempt to place each nurse in a position that best suits them. In addition to this, Rodrigues (2001), when referring to the American context, shows a concern with good internal information gathering systems as a way to increase organisational effectiveness more for the purpose of maximizing the employees' preparation and performance than for the purpose of controlling

their activities. The interviewees refer that the management is not concerned with the search for the dynamic balance between the knowledge of the organisational needs and the social resources.

As regards the principle of equity, it mainly aims at satisfying and, consequently, improving the performance of the employees (Dalmolin et al., 2007). It is important that justice prevails as a way for the relationships between the employees to be based on a vision of a fair organisation (Schimmoeller, 2012). The interviewees tend to confirm the lack of equity in the organisations, even if this view is not shared by all. Thus, we are left with the idea that this principle is somewhat variable and dependent on a significant set of factors. There are substantial differences at this level in relation to the American context (Rodrigues, 2001) since it was mentioned that the organisations tend to lead the employees to become committed to them by giving workers a *sense of ownership* of the organisation, making them feel like *a piece of the action*. This situation is not observed in Portugal.

As regards the stability of the personnel, it was observed that the participants with more years of professional experience were those who felt less instability in their professional situation. In addition, it was also observed that new workers have time (although increasingly less time) to adapt to the new workplace, which is in line with Fayol's recommendations (1989) time is required for an employee to get used to new work and succeed in doing it well. The opposite situation is happening in the American context, where workers are no longer formatted to have a *job for life* and the organisations require more and more ongoing training programmes. In this reality, companies adopt a high turnover strategy, thus requiring a programme to quickly train new employees (Rodrigues, 2001).

As for the principle of initiative, Fayol (1989) describes it as being the ability to design and implement a plan. However, according to the interviewees' reports, in today's world, despite the receptiveness to new ideas and this attitude being considered a driving force of the advancement of health services, there is no feedback on its implementation. In turn, regarding the act of sacrificing *self-esteem*, it seems that there is some difficulty by middle managers to do so if they are not satisfied with the objectives proposed by others. According to Fayol (1989), Much tact and some integrity are required to inspire and maintain everyone's initiative, within the limits,

imposed by respect for authority and discipline. The manager must be able to sacrifice some personal vanity in order to grant this sort of satisfaction to subordinates. Everyone's initiative is a major force for companies. Rodrigues (2001) corroborates the idea that organisations can only create an atmosphere of maximum creativity if they reduce hierarchical elements to the very minimum, and create a corporate culture, a company philosophy, in which the strategies can be implemented by employees who think independently and take initiative. This idea, which fits into the Fayolist conceptualization, can be found in the American context, in contrast with what seems to be the case in Portuguese organisation systems.

As regards the *esprit de corps*, Fayol (1989) argues that these it is a major source of vitality for a company. The mentor of the Classical Management Theory warned against two specific dangers that should be avoided: a) divide the workers; b) abuse of written communications. In the first danger, Fayol considered it to be essential to use each person's abilities, and reward each one's merit without arousing possible jealousies and disturbing the relationships between the personnel. Nowadays, this recommendation seems to be sometimes devalued, which may translate into a decreased quality of the work. In turn, in point (b), the author concludes that, whenever possible, communications should be verbal, thus promoting speed, clarity and harmony. This aspect contradicts the current trend of using written communications. As for the American context, Rodrigues (2001) mentioned that, today, maintaining unity among employees in the organisation not imperative as in the past, which is similar to the Portuguese reality and moves away from the influences of Henri Fayol.

## Conclusion

The objectives initially set out for this study were fully met, namely a deep understanding of nurses' perceptions of the current health administrative practices, in a contextualized critical reflection and analysis, demonstrating that these agents are not all unaware of or indifferent to this matter. On the other hand, it was possible to realize that the interviewees' representations, at the light of the principles of the Classical Management Theory, should not be



considered as absolute or inflexible. Nurses often highlighted the need for the right balance and measure for each case. This idea is particularly important for the principles of subordination of individual interest to general interest and unity of direction, in which there is a clear distinction between what is formally recommended and the need for an adjustment to particular circumstances or deviations from what was structurally defined. A trend for distinct considerations between the head nurses and the nurses was also identified, which is more evident in the principles of authority and responsibility and discipline.

If, on the one hand, in a comprehensive decomposition, it can be considered that, apparently, there are principles very distant from Henri Fayol's recommendations, as in the case of the principle of unity of command and the remuneration of personnel, on the other hand, it is possible to establish some parallelism between Fayol's theory and contemporary management, highlighting the relevance of the discussion, which is in line with the results of some studies. Due to the nurses' representations of the administrative practices of the organisations to which they belong, this study contributed to suggest the added-value of involving and including these professionals in future discussions and decisions within the administration, thus revealing the need for changes in the current health organisations' practices. This suggestion seems to be essential to make an informed choice and test new management models that suit other variables which exist within the current health organisations, such as: the intensive use of technology, the flexibility of work relations, the computerisation of communication systems, on-the-job training, among others. Finally, further studies should be conducted to confirm or refute the findings described in this study, and understand possible influences from other management theories and the consequences on the current organisational dynamics.

## References

- Bardin, L. (2009). *Análise de conteúdo*. Lisboa, Portugal: Edições 70.
- Chiavenato, I. (1987). *Teoria geral da administração: Abordagens prescritivas e normativas da administração* (3ª ed.). São Paulo, Brasil: McGraw-Hill.
- Cole, G. A., & Kelly, P. (2011). *Management: Theory and practice* (7th ed.). Hampshire, England: Cengage Learning EMEA.
- Collet, N., Cesarino, C. B., & Santos, I. F. (1994). Método funcional na administração em enfermagem: Relato de experiência. *Revista Brasileira de Enfermagem*, 47(3), 258-264.
- Dalmolin, A., Oliveira, E. T., Zucco, T. S., Canopf, L., & Lora, N. C. A. (2007). Teoria clássica da administração e sua utilização na administração moderna. *Synergismus Scyentifica UTFPR*, 2 (1,2,3,4). Retrieved from <http://revistas.utfpr.edu.br/pb/index.php/SysScy/article/viewFile/103/38>
- Fayol, H. (1989). *Administração industrial e geral: Previsão, organização, comando, coordenação, controle* (10ª ed.). São Paulo, Brasil: Atlas.
- Ferreira, A. A., Reis, A. C. F., & Pereira, M. I. (2006). *Gestão empresarial: De Taylor aos nossos dias: Evolução e tendências da moderna administração de empresas*. São Paulo, Brasil: Pioneira.
- Macedo, A. P. (2012). *Supervisão em enfermagem: Construir as interfaces entre a escola e o hospital*. Santo Tirso, Portugal: De Facto Editores.
- Matos, E., & Pires, D. (2006). Teorias administrativas e organização do trabalho: De Taylor as dias atuais, influências no sector saúde e na enfermagem. *Texto & Contexto Enfermagem*, 15(3), 508-514. Retrieved from <http://redalyc.uaemex.mx/pdf/714/71415317.pdf>
- Parker, L., & Ritson, P. (2005). Revisiting Fayol: Anticipating contemporary management. *British Journal of Management*, 16(3), 175-194. doi:10.1111/j.1467-8551.2005.00453.x
- Rodrigues, C. A. (2001). Fayol's 14 principles of management then and now: A framework for managing today's organizations effectively. *Management Decision* 39(10), 880-889. Retrieved from [http://www.esf.edu/lor/germain/rodrigues\\_2\\_14.pdf](http://www.esf.edu/lor/germain/rodrigues_2_14.pdf)
- Schimmoeller, L. (2012). Henri Fayol and zero tolerance policies. *Review of International Comparative Management*, 13(1), 30-36. Retrieved from <http://www.rmci.ase.ro/no13vol1/03.pdf>
- Souza, E. M., & Aguiar, A. C. (2011). Publicações póstumas de Henri Fayol: Revisitando sua teoria administrativa. *Revista de Administração Mackenzie*, 12(1), 204-227. Recuperado de <http://www.scielo.br/pdf/ram/v12n1/a08v12n1.pdf>

