APPENDIX 1

Glossary

This glossary explains the sense in which certain terms are used in the Report and Appendices. The definitions apply strictly where terms are italicised in the text.

Term	*Reference*	*Term*	*Reference*
Accountable	12	Line	4
Administrative	24	Management	3
Area	17	Managing	3
Control	5	Personnel	25
Co-ordination	12	Programming	3
Decentralisation	8	Professional	23
Delegation	7	Policy-forming	3
Direct	10	Responsible	6
Division	18	Role	2
Executive	3	Sapiential authority	9
Field of influence	11	Seconded	14
Function	1	Section	15
Job	1	Sphere of authority	5
Job analysis	19	Staff	9
Job description	20	Structural authority	4
Job grading	21	Transferred	13
Job specification	22	Unit	16

Definitions

1. A *function* is a contribution towards the achievement of the purpose of an enterprise. A major function, such as the nursing function, may be sub-divided into minor functions, such as psychiatric, general or midwifery, and these further subdivided. Groupings of tasks (which, in themselves, are aggregations of finer subdivisions) constitute jobs. The word *function* may also be used as synonymous with *job*, being the contribution a person makes towards the achievement of the common purpose.

2. A *role* is the part a person plays in relation to other members of the enterprise in the fulfilling of his function.

3. *Managing* is the function of ordering and co-ordinating other functions and the persons fulfilling them. *Management* is the process involved in the function managing.

(*a*) In top-management jobs nurses have *policy-forming* tasks of proposing the objectives and limitations of nursing in achieving the purpose of the hospital.

(*b*) In middle-management jobs nurses have *programming* tasks of setting the limits within which those who execute the policy may act, by determining nursing procedures and jobs.

(*c*) In first-line management nurses have *executive* tasks in applying the nursing programme to individual patients.

4. *Structural authority* is the right, vested in the position and so the role of manager, to command and to expect and enforce obedience of others in order that the function of managing (advising and co-ordinating) may be fulfilled. The right stems from the necessity for management. (It is sometimes called *line* authority.)

5. The *sphere of authority* of a manager are the functions, and the persons fulfilling the functions, which the manager has the right to manage; and he or she is said to *control* them. The sphere of authority of the Chief Nursing Officer of a hospital are the nursing services and the nursing staff which he or she controls.

6. A person controlled is said to be *responsible* to the person in control, that is, to the one who exercises structural authority (full control—see 12(*a*) below).

7. When the sphere of authority is large the manager may delegate some of the rights and duties to another. *Delegation* then consists of:—

(*a*) assigning functions,

(*b*) specifying the kind of decision appropriate to them, and

(*c*) vesting with structural authority and so handing over the control necessary for the implementation of these functions and decisions.

8. *Decentralisation* is delegation of such a nature that the optimum number of functions and highest appropriate kinds of decision are fulfilled as near as possible to the scene of activity.

9. *Sapiential authority* is the right, vested in a person, to be heard by reason of expertness or knowledge—just as one person, relative to another, may be an "authority" on a particular subject. (It is sometimes referred to as *staff* authority and does not involve structural authority, the right to command.) Structural authority which stems from the position a manager assumes, is enhanced by his personal, sapiential authority, recognised in promotion by merit.

10. A person who exercises sapiential authority advises, instructs (meaning teaches) and informs, and is said to *direct* others (as distinct from control, implying command). A person directed is not obliged to act upon the advice, instruction or information of the one who directs, as distinct from being obliged to obey the rightful order of one who controls.

11. Those directed constitute the *field of influence* of the person who directs. Thus the Chief Nursing Officer has sapiential authority on the subject of nursing in the hospital group and has the right to be heard when any matter is discussed, at governing authority or other level, which involves the nursing services in that hospital group. This right stems from the need to have the best advice or information upon which a decision can be based. The Chief Nursing Officer's field of influence extends from the governing body downwards, the sapiential authority being limited to the subject of nursing services and staff.

12. *Co-ordination* of functions can be carried out by the exercise of either structural or sapiential authority, that is by control or direction:

(*a*) Co-ordination by *full control*, when those co-ordinated are responsible to and receive their orders or func ions and their co-ordination from the

same person—as nurses on the ward are controlled and are responsible to the ward sister.

(*b*) Co-ordination by *actual control*, when those co-ordinated and the co-ordinator are responsible to a third person, and the control consists only of ordering what is necessary for co-ordination of functions—for example, the Group Secretary, as " executive authority " of the governing body has the right (delegated to him by the governing body) to co-ordinate medical, nursing and other services, but medical and nursing officers themselves decide on the fulfilling of their functions, and are responsible for them, as is the Group Secretary for his, only to the governing body.These officers " report to " the Group Secretary. They render an account to him and so are *accountable*, but they are not responsible to him. These reports are necessary for co-ordination, and for the scrutiny of the governing body which must know whether its orders are being carried out.

(*c*) Co-ordination by *direction*—by the exercise of sapiential authority—when the co-ordinator, by reason of knowledge or expertness, is entitled to advise or inform another (pointing out or directing) on what he/she must or ought to do in order to fulfil his/her functions for which he/she is responsible to a third person. That is to say the person co-ordinated is not obliged (required) to act on the advice but must pay particular heed to it and act in its light because of the knowledge of the co-ordinator.

In this Report co-ordination, when italicised, refers to this third form of co-ordination, and is symbolised in structural diagrams by an interrupted line. For example, a Chief Nursing Officer may have control of a large hospital where the Principal Nursing Officers are responsible to him/her, being co-ordinated by full control. He/she may also have directive co-ordination of the duties of the nursing heads of other hospitals, but they are responsible to the governing body not to the C.N.O. and are not absolutely obliged to act upon his/her advice; although, if it is based upon knowledge of the need for co-ordination, they would be unwise not to act upon it. The Group Secretary in such a case can have no right to interfere in the co-ordination of the nursing services of these hospitals, he can only co-ordinate these services with the medical and other services, using actual control.

13. A person is said to be *transferred* to another sphere of authority when his/her tasks are co-ordinated with the tasks of others in that sphere of authority by one who excercises structural authority therein.

14. A person is said to be *seconded* to another sphere of authority when his/her tasks are co-ordinated with the tasks of those in that sphere of authority by the use of sapiential authority.

15. A *section* is the sphere of authority of a Charge Nurse (Grade 6), e.g. a ward.

16. A *unit* consists of a group of *sections* and is the sphere of authority of a Nursing Officer (Grade 7).

17. An *area* consists of a group of *units* and is the sphere of authority of a Senior Nursing Officer (Grade 8).

18. A *division* consists of a group of *units* (which may or may not be grouped in *areas*) and is the sphere of authority of a Principal Nursing Officer (Grade 9).

19. *Job analysis* is the study of a job by breaking it down into its tasks, processes and operations.

20. *Job description* is the description of a job as the result of job analysis.

21. *Job grading* is the ranking of jobs according to the kind of decisions involved.

22. *Job specification* is a compound of job description and job grading.

23. *Professional* functions are those requiring nursing qualifications and are not necessarily managerial.

24. *Administrative* (or managerial) functions relate to co-ordinating jobs and the people who do them (and may not always require nursing qualifications.)

25. *Personnel* functions relate to the welfare of subordinates.