

THE CONTRIBUTION OF THE NURSE MANAGER TO HEALTHY LABOUR RELATIONS PART 2



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ABSTRACT

This study had its origins in the continuing evidence that health services in South Africa were increasingly being implicated in labour unrest. Trade unions are seeking greater involvement in the management of health services and are utilising any deficiency in the system to become involved in issues where employees felt they were unfairly treated. Thus giving them an opportunity to organise within the nursing profession and extending their membership numbers. The presence of trade unions within the health service need not necessarily be seen as a negative occurrence, but in the current political climate they aim to abolish the ethical code that has guided nurses in the past to care for their patients first and foremost. This has resulted in disruption of services, unprofessional behaviour by nurses and the death of several patients due to strike action by nursing staff. In part one of this article the background, assumptions, conceptual framework and research methodology was discussed. In part two, the findings and conclusions of the study will be provided, while part three will deal with the recommendations.

OPSOMMING

Die studie het sy oorsprong in voortgesette bewyse dat die gesondheidsdienste in Suid-Afrika tot 'n al groter mate betrek word in arbeidsonrus. Vakbonde beoog om groter betrokkenheid in die bestuur van gesondheidsdienste te verkry en benut tans enige leemte in die stelsel waar werknemers voel dat hulle te na gekom is, om betrokke te raak. Hierdeur word hulle die geleentheid gebied om binne die verpleegberoep te organiseer en hul ledetal uit te brei. Die teenwoordigheid van vakbonde in die gesondheidsdienste hoef nie noodwendig as negatief beskou te word nie, maar in die huidige politieke klimaat beoog hulle om die etiese kode, wat die verpleegkundige in die verlede gerig het, te vernietig. Dit het gelei tot onderbrekings in dienslewering, onprofessionele gedrag deur verpleegkundiges en die dood van verskeie pasiënte weens stakingsaktiwiteite deur verpleegpersoneel. In deel een van die artikel is die agtergrond geskets, die aannames en die konseptuele raamwerk beskryf en die navorsingsmetodologie verduidelik. In deel twee, word die bevindinge en gevolgtrekkings voorsien, waarna die aanbevelings in deel drie hanteer sal word.

INTRODUCTION

In Part 1 of this article the background, assumptions, conceptual framework and research methodology was discussed for a study to determine the nurse manager's contribution to healthy industrial relations within her service. In this second, of a three part article, the findings and conclusions will be discussed.

In the health services it is not sufficient to only avoid labour conflict, but especially to encourage and maintain labour peace, as the objective of the service relates to the patient, who is a person in need at the time of his or her hospitalisation. In order to achieve employee satisfaction and consequently labour peace, it is essential for the nurse manager to be optimally knowledgeable and efficient in handling matters that may lead to discontent and labour action (Brannigan, 1987:4).

The study was undertaken against this background to determine the role of the nurse manager with regard to her human resources management function and the particular inputs she needs to make to establish healthy labour relations within her service.

PROBLEM STATEMENT

It was established from the literature and from previous research that the nurse manager in general, was not adequately skilled in handling the most common aspects having an impact on labour relations pertaining to her staff.

AIMS OF THE STUDY

The aim of this study was to:

- Ascertain the knowledge base of the nurse manager regarding the content, implications and handling of labour relations within her service.
- Determine the relationship between the variables in the human resources management process and the nature of labour relations within nursing services.
- Determine the manner in which the nurse manager handles labour relations according to her subordinates.
- Develop guidelines for nurse managers in order to maintain healthy labour relations.

RESEARCH DESIGN AND METHOD

A quantitative exploratory design was used to determine the relationship between the human resources management function of the nurse manager and its effect on labour relations. The target population for this study constituted nursing personnel in private and provincial hospitals. Two categories were involved, namely nurse managers responsible for the management function within hospitals, and secondly, subordinates, who were nurses functioning in both professional and sub-professional categories. A proportional stratified sample of nurse managers and nurses as subordinates was drawn to represent the private and public sectors.

The data collection instruments consisted of two structured questionnaires which were developed specifically for each of the two groups of respondents. Eighty-nine variables existed with similar content in both questionnaires. During the application of the t-test, 48 of these variables displayed significant differences between the two groups of respondents.

The findings and conclusions will be discussed under the separate aims of the study, taking into account the responses of both groups of respondents. The overall view gained from the findings of this study is that nurse managers are aware of the importance of labour relations as a component of their managerial function, but certain deficiencies exist that require attention.

KNOWLEDGE BASE OF NURSE MANAGERS WITH REGARD TO LABOUR RELATIONS

From the findings it appears that the nurse manager is not adequately equipped with regard to the basic knowledge of the content, implications and handling of matters related to labour relations. A lack of training, exposure and experience in situations that have a bearing on labour relations seems to be the reason for this.

Experience in situations related to labour relations

Most respondents have not had any experience with situations in the work place, that are concerned with labour relations such as:

- Dealing with a disciplinary interview, a go-slow action by employees, requests to deal with a trade union, or membership with a trade union, strike action by employees, organising by trade unions, unfair labour practices, or the establishment of a recognition agreement.
- However, some of the nurse managers indicated that they have dealt with a reported grievance, or have received complaints about their supervisors.

It can be deduced that exposure to these situations is minimised by the fact that the medical superintendent; in co-operation with higher authorities, usually handles any form of labour action in the provincial services.

It is important for the nurse manager to gain experience in dealing with these matters and to acquire confidence in handling them, as they form part of her human resources management function and are often the starting point for trade union intervention (De Beer, 1987:4).

Formal training in labour relations

It is rather disconcerting that the majority of the nurse managers and subordinates have not had any formal training in matters related to labour relations.

It can be concluded that most nurse managers have had no theoretical instruction in labour relations, and seeing that their exposure to these practical issues in the work environment is limited, they can not be expected to be knowledgeable and skilled in the handling of labour related matters.

Acts affecting labour relations within health services

Managers are expected to be aware, if not knowledgeable about the acts that govern their practice and services.

- Just over 50 percent of the nurse managers indicated that eight of the ten applicable acts did effect labour relations in health services.
- The fact that 20 to 40 percent of the nurse managers did not know whether any of these acts were applicable to the health services is disconcerting and needs attention.

It can be assumed that in most hospitals a specific labour relations policy does not exist, and that as no one person is responsible for dealing with issues related to labour relations, a study has not been made with regard to the appropriate acts. It might well be that the superintendent is familiar with this legislation.

Definition of labour relations

 It is pleasing to note that the majority of nurse man-agers and subordinates chose the generally accepted definition of labour relations, emphasising the importance of the relationship between employer and employee (Bendix, 1992:4).

This is indicative that nurses in general, are aware of the significant role relationships play in the labour scene.

Non-formal relations within the work environment

The non-formal relations that exist between the supervisor and subordinates indicate the real working relationship evident on the functional level.

 It appears that most nurse managers are aware of the issues that may effect the non-formal relations in a negative way: they are the manner in which instructions are given, the attitude in which disciplinary action is taken and the exhibition of a paternalistic management style (Hayes, 1988:6; De Beer, 1987:3).

It can therefore be assumed that managers are mindful of paying attention to these aspects in their daily communication with subordinates.

Approaches to labour relations

- In determining people's attitude towards labour relations, it is evident that the majority of both the managers and subordinates favoured the pluralistic approach.
- Nurse managers emphasised that employee representative organisations protect the interests of employees, that collective bargaining is a means of achieving compromise, and that commitment to reform by both parties is essential for survival of the enterprise.
- While subordinates affirmed that conflict of interests and goals within an organisation does exist.

It can therefore be deduced that most of the respondents have a balanced view with regard to the rights of both the

employer and employees within the enterprise (Salamon, 1992:35). It appears that these principles require application and implementation in practice, as the nurse managers previously indicated that they have had little experience and exposure to labour related issues. This is confirmed by Potgieter (1992:42) who states that the same mistakes are made repeatedly because managers are not confident with regard to labour related matters.

Description of a trade union

- Most respondents from both groups accepted that a trade union is an organisation established to further the economic and social interests of its members (Basson, 1990:2).
- It must be noted though, that in the case of nurse managers, almost 40 percent, and more than 20 percent of the subordinates indicated that a trade union is aimed at polarising management and employees or that a trade union is a number of united workers acting as a pressure group with the objective of discrediting management.

The assumption can be made that the respondents know what the legitimate aims of trade unions are supposed to be, but experience the realities in practice to be different, as no consideration is given to the needs of patients, nor is the ethical code affirmed by nurses when disruptive action is initiated by trade unions.

The perception of current events in provincial hospitals is that many professional nurses easily discard their ethical values and participate with vigour in the disruptive activities of trade unions.

Functions of the shop steward

It is clear that nurse managers have a good indication of the true functions of the shop steward, as the majority indicated that it is the responsibility of the shop steward to:

 check the strict adherence to conditions of service by the employer, that he assists with the handling of disciplinary investigations, that he acts as a link between the employer and employees and that he attempts to maintain an equilibrium between management and employees within the framework of existing rules and regulations.

It is apparent that dealing with the shop steward in practice, and experiencing their confident assertiveness can be very frustrating for the nurse manager, as it seems as if no communication with subordinates can, or may, take place without the intervention of the shop steward (Wade, 1985:6).

Collective bargaining

Collective bargaining is an accepted principle of the pluralistic perspective for achieving a compromise (Castrey & Castrey, 1980:24). In order to negotiate on matters of interest to both parties, some means of achieving a balance of power between the employer and employees must be obtained prior to negotiations:

- Most nurse managers and subordinates selected joint decision making, collective bargaining, participatory management, and open communication as means of achieving a balance of power (Sauer & Voelker, 1993:12; Jewell & Siegall, 1990:313).
- However, between 37 and 64 percent of the managers and 45 to 59 percent of the subordinates did consider the dismissal of undesirable employees, strict control over subordinates, and sanctions by either the employer or

- employee as acceptable means of levelling the balance of power.
- Strike action was not considered an important factor in achieving a balance of power by both the managers and subordinates.

It can be concluded that the important and significant issues, bringing about shared discussion and responsibilities, were selected as a means of sharing power with management. It is disconcerting though, that drastic measures such as dismissal of undesirable employees and strict control over subordinates are considered acceptable behaviour by both the managers and subordinates.

In relation to the latter conclusion, it appears as if the main aim of disciplinary action, namely to bring about change in unacceptable behaviour, and the value of open and fair negotiations, have not been realised or experienced by these nurse managers.

- Most respondents from both groups indicated that they are familiar with the prerequisites for the process of collective bargaining.
- They indicated that both parties must be willing to move from their original positions signifying their willingness to make a compromise, both parties must have a mandate enabling them to know how far they can move along the line of negotiation, and mutual respect and good faith are essential for sustaining the collective bargaining process.
- More that 50 percent of the managers and subordinates felt that it was important for the employer to maintain his superior power as guarantee for survival of the organisation.
- Nurse managers did not consider the place of negotiation as important and indicated that it may be determined by either party without consultation of the other. This is in contrast with the literature (Bernhard & Walsh, 1990:186), where it is stated that selecting a neutral meeting place is one of the first ways of promoting a balance of power.

If the latter two issues are the general perception, then the playing fields are not even and collective bargaining cannot proceed in good faith.

INTER-RELATIONSHIP BETWEEN HUMAN RESOURCES MANAGEMENT AND LABOUR RELATIONS

In determining the inter-relationship between certain variables in the job context environment of human resources management and labour relations, deficiencies seem to be evident in aspects such as leadership style, organisational climate, interpersonal relations and the quality of work life.

Leadership and management philosophy

Leadership and management styles are very important issues when it comes to the psychological well-being of staff.

Nurse managers and subordinates agreed that the leadership style exhibited by managers is the way in which the management philosophy of the organisation manifests itself in practice, and that management's leadership style has a definite effect on the level of the employee's performance inclination (Gerber, Nel & Van Dyk, 1992:136).

It can be concluded that leadership and management styles of senior people in the organisation have a distinct effect on the outputs of subordinates and the way they perceive their seniors.

- Most respondents from both groups indicated that a position of authority is required in management positions to ensure successful influencing of subordinates (Beach, 1991:336).
- Nevertheless, 67 percent of the nurse managers and 62 percent of the subordinates are also of the opinion that managers should care for the needs of their juniors, signifying the necessity for a sense of caring between management and subordinates, while still retaining a position of authority.

It is evident that subordinates are of the opinion that it should not be impossible for managers and supervisors to care about the needs of each of their subordinates. They accept management's position of authority, but as a counter action, their expectations as individuals need to be considered.

- The majority of both groups of respondents indicated that the leadership style of nurses has traditionally been autocratic in nature.
- The autocratic leadership style has become unacceptable if it is applied as a general rule.

The situational leadership style, tailored to the specific situation and the abilities and readiness of subordinates to participate, has many more positive results in employee satisfaction and development of personnel (Bernhard & Walsh, 1990:67-72).

Organisational structure and policy

- Most of the respondents conceded that personnel policies ensure consistent treatment of all personnel, and that sound policies help to build employee loyalty.
- Nurse managers felt that human resources management cannot adequately be managed by the personnel department alone, supporting the literature (Schuitema, 1991:37).
 While subordinates were of the opinion that the latter department is quite capable of dealing with human resources management on its own.

It can be inferred that the need and value of sound personnel policies are appreciated, and that nurse managers realise the need for their application in dealing with matters related to personnel management.

- Nurse managers emphasised to a greater extent than the subordinates, that rigidity in work schedules give rise to employee dissatisfaction. However, in large hospitals with staff shortages, it is not always possible to be more flexible when attempting to cover the different services adequately.
- With regard to problem solving, just more that half of the nurse managers and subordinates indicated that problem solving should not be done by the supervisor alone (Marriner-Tomey, 1992:166), but that the implicated subordinates should participate in the process.
- It is important though, to note that almost 40 percent of the nurse managers and 39 percent of the subordinates, were of the opinion that problems can better be handled by the supervisors alone.

It is gathered that the autocratic management style comes into play here when management claims the right to resolve problems without consultation of the appropriate subordinates.

The majority of respondents from both groups considered performance appraisal to be an evaluation process only, negating the opportunity for identifying shortcomings and taking remedial action to enhance staff development or for motivating staff toward higher achievement (Schuler, 1981:211).

It is regrettable that so many of the respondents hold this view about performance appraisal. In practice subordinates appear to be apprehensive about the process of performance appraisal due to the negative connotation attached to being evaluated.

Development and quality of work life

- The majority of respondents acknowledged that the quality of work life plays an important role in determining the degree to which personal needs of employees are met.
- That extrinsic motivation entails the stimulation of goal achievement, and that regular feedback on work performance acts as a motivator for aspiring to even higher aims (Shaw, 1989:179; Gillies, 1989:62, 529).

It appears that both groups of respondents are in agreement about the relevance and importance of the quality of work life to their well-being, the role motivation plays, and the positive effect regular feedback has on staff performance.

A large difference exists between the views of nurse managers and subordinates on the matter of autonomy to make work related decisions. Only 50 percent of the managers felt that subordinates should have a measure of autonomy, while 42 percent indicated that autonomy in subordinates is unacceptable, whereas 79 percent of the subordinates felt they had a right to have autonomy in work related decisions (Gerber et al., 1992:370).

The deduction can be made that nurse managers are of the opinion that subordinates are not competent to make decisions about their work, or that managers prefer to make all decisions themselves, displaying an autocratic tendency.

- Communication skills are essential prerequisites for any manager: 97 percent of the nurse managers and 98 percent of the subordinates clearly indicated that adequate communication skills were essential for nurses in management positions (Blanchard, 1985:18).
- It was confirmed by the managers and the subordinates that nurse managers have a training function, despite the heavy workload they may encounter.

It is evident that both employer and employees realise the importance of good communication skills in the management process. It is also encouraging to note that it is considered acceptable for the manager to have a training function, as much controversy came to the fore when nursing colleges became autonomous and nursing managers indicated that they were consequently exempted from the training function.

Availability of procedures

In determining whether certain procedures are available in written format within hospitals, significant differences are evident between the responses of managers and subordinates:

 Both groups confirmed that a disciplinary code, a disciplinary procedure, and a grievance procedure were available in written format within their services.

- However, there appears to be a 20 percent discrepancy in the opinions of managers and subordinates indicating that the subordinates may be less familiar or unaware of the existence of these procedures.
- For the greater number of respondents from both groups, these three documents were available in the manager's office.
- Almost 25 percent of the nurse managers indicated that their staff had a personal copy of the grievance procedure, while only 12 to 18 percent of the subordinates indicated that they actually had a personal copy.
- Thirteen percent of the managers acknowledged that they did not have a disciplinary code available in their service.
- It is necessary to take note of the fact that between 20 and 30 percent of the subordinates did not know if these documents existed, indicating ignorance either as a result of poor orientation or inadequate in-service education.

It is evident that these procedures are available in written format, but mostly in the offices of the managers.

NURSE MANAGERS' SUPERVISORY ROLE WITHIN THE AMBIT OF LABOUR RELATIONS

With regard to the supervisory role of the nurse manager, attention needs to be given to creating effective communication opportunities, the formulation and communication of clear policies, the knowledge of supervisors in dealing with disciplinary action, the handling of grievances, development of subordinates and recognising the expectations of employees.

Discipline

- The majority of both groups of respondents were in agreement that a disciplinary code outlines appropriate penalties for infringements of rules and regulations (Salamon, 1992:592).
- Most of the managers and subordinates indicated that disciplinary action is instrumental in helping employees correct unacceptable behaviour.
- In contrast almost 40 percent of the nurse managers and half of the subordinates indicated that it is accepted practice to punish those who make mistakes (Manthey, 1989:19).
- With regard to the aims of disciplinary action, half of the managers did not agree that disciplinary procedures are primarily intended to ensure that employees are properly disciplined. This is in contrast with Mcleer and Heirferman (1990:31) who believe that management should have a strong commitment to counselling employees as to their specific deficiencies, rather than focusing on punitive action.

It can be concluded that some uncertainty exists as to the true function and aims of discipline, as subordinates still have a strong negative connotation to disciplinary action. This could be due to their personal experiences in practice or it may be derived from the belief that mistakes deserve punishment.

As to the handling of outspoken employees, the managers indicated that it is unavoidable to continuously check on subordinates who are not afraid to speak their mind. Just more than half of the subordinates were in agreement and indicated that supervisors do actually continuously check on subordinates who are not afraid

to speak their mind.

If this is the case, it may be inferred that a degree of victimisation is displayed, as employees should feel free to voice their genuine concerns. It is important to distinguish between subordinates who are outspoken because they have leadership qualities and those who incite discord. Nurse man-agers and supervisors appear to feel threatened by subordinates who seem to demonstrate strong personalities and leadership qualities when voicing their concerns.

Grievance procedures

- Most nurse managers and a third of the subordinates did not consider the grievance procedure a difficult one to implement.
- The greater majority of nurse managers and subordinates were of the opinion that a grievance usually stems from a personal grievance experienced by an individual employee, rather than a complaint formulated by a collective body (Bendix, 1992:283).
- It was generally accepted that the grievance procedure creates the opportunity for upward communication by employees.
- Most nurse managers and the subordinates felt that the grievance procedure could be utilised as a timely alternative to strike action as it enables immediate regulated expression of all forms of dissatisfaction (Cunningham, 1990:36).
- Most respondents were in agreement that the grievance procedure aims at resolving a grievance at the lowest possible level but also creates a structure for access to the highest authority.
- It was further acknowledged by 76 percent of the managers and 75 percent of the subordinates that the grievance procedure is aimed at interaction between the supervisor and employee at the functional level, emphasising the importance of good interpersonal relations.

It is clear that both the nurse managers and subordinates understand the communication paths incorporated in the grievance procedure, they have insight and a good general knowledge about the grievance procedure and its application. It is also evident that the respondents appreciate the positive effects that could be derived from effective bilateral implementation of a set grievance procedure.

Aspects related to negotiation

- Most nurse managers and subordinates acknowledged that a recognition agreement is a document signed by the employer and an organisation representing the employees, where this organisation then has the right to represent and bargain on behalf of the employees (Nursing News, 1991 15(9):8).
- A greater number of managers than subordinates indicated that both mediation and arbitration involve a third party in the resolution of disputes: 87 percent of the managers and 54 percent of the subordinates accepted that the decision made by an arbitrator is binding on both parties.

Approximately half of all the respondents agreed that compulsory arbitration takes place in respect to disputes occurring in essential services.

It is clear that the managers are more knowledgeable than the subordinates where third party involvement in dispute resolution is concerned.

- The vast majority of respondents agreed that a sense of mutual trust between management and subordinates is essential in any institution to create trust as a baseline from which to negotiate.
- Just over 40 percent of the managers and 20 percent of the subordinates indicated that management is obliged to bargain with a representative union of its employees, while 38 percent of the managers and 52 percent of the subordinates felt that management was not obliged to do so.
- In most instances between 20 and 44 percent of the respondents were uncertain as to the content and handling of issues related to negotiation.

It could therefore be deduced that both the nurse managers and subordinates are less familiar with the process and characteristics of negotiation than they are with the handling of grievances.

Aspects related to management and human resources management

- Most of the respondents consider unilateral change in conditions of employment as an unfair labour practice.
- Most respondents also clearly indicated that they expect nurse managers to know their subordinates.
- Giving feedback on the supervisors under whom they work was considered important by the majority of both managers (96%) and subordinates (95%).
- Respondents also indicated that feedback serves as positive encouragement, reassuring the employee that she has an important contribution to make. Welman (1989:10) considers acknowledgement as one of the strongest motivating factors.

It can be concluded that employees want to be recognised as individuals, they appreciate feedback and find it reassuring, but they also feel that they have the right to report on matters relating to the supervisor under whom they work. This reiterates the importance of open vertical communication channels (Wade, 1985:10).

 Another point of view, supported by most managers and subordinates, is that individuals should have the right to participate in creating the system in which they work.

It can be assumed that subordinates feel they want to be recognised as more than just a employee, they want to contribute and participate in the development of their organisation (Van Aardt, 1989:13).

- The time for reactive management has passed, as indicated by the majority of managers and the subordinates who were of the opinion that managers should attempt to be more pro-active in their management of anticipated situations.
- Between 80 and 90 percent of the respondents felt it was important for the nurse manager to know everything in relation to personnel management, so as not to create a negative image when she appears uncertain about some aspects.

With this perception in mind, it is necessary to remind managers that it is not possible to know all about everything and

certainly not all the detail. What is important though, is to know which resources are available (Brannigan, 1989:3).

- Retrenchment was correctly defined by two thirds of both groups of respondents, as meaning termination of the employment contract due to financial difficulties of the employer.
- However, between 20 and 25 percent of the respondents did not know what this term meant.

It is important for employees to realise that financial resources are limited and that it may sometimes be necessary to reduce the number of employees. Therefore being an asset to the enterprise should be a realistic counter action to being selected for retrenchment.

- Nurse managers were almost equally divided on the matter of their knowledgeability or the absence thereof, with regard to labour relations: 44 percent felt that they were not adequately equipped while 42 percent of the managers and 55 percent of the subordinates were of the opinion that managers were adequately prepared for their labour relations task.
- However, between 20 and 25 percent of all respondents did not agree that managers were proficient in this field (Brannigan, 1988:9).

It can be concluded that almost half of the nurse managers did not feel themselves competent to deal with the topic of labour relations, while 45 percent of their subordinates either agreed with this view or indicated an uncertain response.

Aspects related to management skills

The importance of good communication is reiterated by more managers than subordinates, who agree that, when effective opportunities for communication do not exist, trade unions have appeal as an alternative to goal achievement.

- In support of this latter statement, the majority of respondents demonstrated that the nurse manager must be prepared to devote much time and effort in mastering interpersonal relations and communication skills (Bruwer, 1985:17).
- On the matter of authority, an equal number of managers and subordinates indicated that nurse managers have the necessary authority to perform their functions and managerial tasks, this in contrast to Dewar's (1990:10) opinion.

In practice, the nurse manager is subordinate to the medical superintendent or manager of the hospital, her level of authority and autonomy is dependent on her personal attributes and on his attitude and willingness to delegate.

When considering the rights of patients and nurses, conflict is often caused by trade unions who suggest that nurses are workers, and that their rights are ignored by management. Nurses are consequently encouraged to disregard their ethical code and participate in labour action in order to make a stand.

It is heartening to note that the vast majority of both groups of respondents (96 percent of the managers and 92 percent of the subordinates) gave a very clear indication that the nurse, as a professional practitioner, should always place the interests of her patients before self-interest.

This view supports the value of human life and the significance for nurses to honour their ethical code.

Strike action

- Strike action is viewed by 66 percent of the managers and 48 percent of the subordinates as the main form of collective action.
- Two thirds of both groups of respondents confirmed that employees may not strike if a dispute has been referred to arbitration. The remaining 30 percent of the respondents did not know if this was so.
- The withholding of normal facilities such as food and accommodation from striking employees during illegal strike action was supported by 53 percent of the managers and 55 percent of the subordinates.

The latter opinion could be viewed as a negative input, intensifying the existing conflict levels between management and employees.

CONCLUSION

The findings indicate that even thought there are differences in the views and perceptions of the two groups of respondents with regard to the nurse manager's knowledge and handling of industrial related matters, they also support one another on many aspects. Indicating mutual understanding and respect for the position of the other.

The findings of this study indicate that nurse mangers are aware of the importance of human resources management, and their supervisory function as it relates to labour relations, and hence labour peace. However, it is evident from the conclusions that certain deficiencies exist that require attention.

In part three of this article, the recommendations provided are aimed at practical guidelines as to how both management and subordinates can become more acquainted with, and proficient, in handling matters that may lead to dissatisfaction and eventual labour unrest.

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