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Effectiveness of nursing home administrators

Cohn, Arthur M., Ph.D.

The Ohio State University, 1988

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EFFECTIVENESS OF NURSING HOME ADMINISTRATORS

DISSERTATION

Presented in Partial Fulfillment of the Requirements for
the Degree Doctor of Philosophy in the Graduate
School of The Ohio State University

by

Arthur M. Cohn, B.A., M.S.W.

* * * * *

The Ohio State University

1988

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ACKNOWLEDGMENTS

Special thanks are due to Bev Toomey whose genuine interest and concern were a major source of support for the duration of the study. Her ongoing consultation and advice were indispensable for the planning and completion of the project.

Stan Blostein and Bill Eldridge are also due special thanks for their ongoing consultation, advice and support. I was fortunate to have a committee of dedicated professors who generously provided instruction and guidance whenever needed.

I wish to thank Selection Research, Inc., (SRI), 301 South 68th Street, Lincoln, Nebraska 68510, and Dr. Richard McCluskey of SRI for their cooperation and assistance in this study.

Thanks are due to the administrators who participated in the study for generously sharing their insights, knowledge, and experience.

Much appreciation is also due my wife, Carol, son, Richard and daughter, Lisa, for their support and patience during the long period required for this endeavor.
VITA

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<tr>
<td>October 5, 1942</td>
<td>Born, Brooklyn, New York</td>
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<td>1964</td>
<td>B.A., Queens College, Flushing, New York</td>
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<td>1968</td>
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<td>1974-76</td>
<td>Director, Town of Babylon Youth Bureau, Babylon, New York</td>
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<td>1976-82</td>
<td>Executive Director, Jewish Family Service, Division of Jewish Federation of Greater Dayton, Dayton, Ohio</td>
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<tr>
<td>1982 to present</td>
<td>Executive Director, Covenant House, Jewish Home for Aged, Division of Jewish Federation of Greater Dayton, Dayton, Ohio</td>
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FIELDS OF STUDY

Major Field: Administration
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CHAPTER I
INTRODUCTION

"A few years ago, one of the special congressional committees studying problems in nursing homes concluded that the administrator . . . was the single most important influence on the quality of long-term care . . ." (Miller & Barry, 1979, p. xx).

General Description of the Area of Concern

One of the most significant trends in the United States in the past twenty years has been the aging of its population. At age 65, the typical American can expect to live for sixteen more years (Johnson & Grant, 1985). Further, the proportion of "old old" people over age 75 has been and will continue to increase dramatically. With this increase in the aged population comes the challenge of providing the aged with alternative living conditions which best care for their physical, mental and emotional needs. The administration of nursing homes is central to this issue. In the United States, there are more than 23,000 nursing homes with almost three million beds compared to 1200 long-term care facilities with about 25,000 beds fifty years
ago. This dramatic increase reflects trends in our society that will continue in the foreseeable future. The aged population will continue to grow, and nursing care facilities will continue to increase.

According to Johnson and Grant (1985), five percent of the population over 65 resides in nursing homes until death. However, almost one-fourth of all aged persons will reside in a nursing home at some point, often for short term recuperation or rehabilitation. In addition, 40% of the over 65 population is 75 or older. This is the population most in need of long-term care. The majority are women, living alone, with multiple chronic conditions (Johnson and Grant, 1985). "While society rejects institutional care for the ill-aged and persists in seeking so-called alternatives to institutionalization, the demographic facts of life mandate the continuing need for nursing homes" (Breger & Pomeranz, 1985, p. ix). In response to these "facts of life," the federal government has expanded its commitment to provide care and assistance to this population (Allen, 1987; Miller & Barry, 1979). Nursing homes evolved from various forms of custodial institutions designated to serve the poor. With the passage of the Social Security Act in 1935, more of the aged had income to pay for their care. Federal funds to states also improved the base of support for these institutions.
In recent years, nursing home costs have markedly increased. According to figures available in July, 1988, the State of Ohio paid $691 million in the past fiscal year to care for aged in nursing homes through the Medicaid program (Association of Ohio Philanthropic Homes and Housing for the Aging, 1988). Personal communication on July 20, 1988 with Michael Compton, Director of Government Affairs for the Association of Ohio Philanthropic Homes and Housing for the Aging, (AOPHA), confirmed that costs, shared 42% state and 58% federal, have been increasing at a mean annual rate of 10.26% for the past five years. About 70% of Ohio's 78,360 nursing home beds are occupied by residents on Medicaid. In other words, about 55,000 Medicaid recipients are residents of Ohio's 1,200 nursing homes (Ohio Report, 1988). Rapidly increasing costs are considered an urgent concern by the state and federal governments.

In addition to the allocation of funds to more adequately provide for the aged, the federal government also mandated the licensure of nursing home administrators by the states in 1970. Any person who wishes to earn a state license must pass an examination which covers prescribed core areas of knowledge (Allen, 1987). The need for highly skilled administrators has rapidly increased with the growth of this area of human service. It is a developing
profession, entrusted with great responsibility for the care of frail and dependent people. As organizations, nursing homes are complex, but small enough for the administrator to influence every facet of their programs and services (Allen, 1987).

The combination of funding and licensure made a significant impact on the quality of care offered in nursing homes. However, a 1974 congressional report states that in spite of the large amounts of federal funds available, half the nursing homes offered a substandard or marginal level of care at that time (Johnson & Grant, 1985). Other critics report considerable evidence of improvements in quality of typical nursing homes through the 1970s (Johnson & Grant). It is common knowledge within the field that quality of care has continued to improve through the present due to detailed inspections and stringent enforcement of federal and state regulations. Repeated, serious violations have resulted in suspension or termination of funding, and closure of facilities in extreme cases. It should be noted that there are many fine facilities with dedicated staffs; however, publicity and public attention tends to focus on those with problems.
Importance of the Study

Methods and approaches must be found to provide better care for all of the aged residents of nursing homes. A key issue in this search for solutions is the performance of nursing home administrators. Administrators are key actors in the shaping of the mission, goals, and objectives of long-term care facilities. The disabled aged, often unable to articulate their needs, are largely dependent upon the administrator for the quality of life available within the facility. Because of the size and complexity of this human service enterprise, there is a need for more knowledge of the skills and competencies required for the effective practice of nursing home administration.

Successful performance requires diverse skills. As in any profession, there are variations in the levels at which administrators perform. These differences are a major concern of the study. The lack of well-developed administrative skills can be a serious barrier to effective and efficient operation of a nursing home/housing facility.

Purpose

The primary purpose of this study is to identify superior, High Reputational administrators in order to determine through structured interviews if and how they
differ from other administrators, called "Typical." Previous research by the American College of Health Care Administrators (Burmeister, 1977) identified essential areas of knowledge and skill needed to competently administer a nursing home. Also, Selection Research, Inc. (referred to as SRI elsewhere in this study) of Lincoln, Nebraska developed a questionnaire used to determine the presence, absence, and relative strength of ten "themes" or characteristics essential to success in this field. The predictive validity of the SRI instrument in discriminating between High Reputational and Typical administrators was tested. Because of the importance of the administrator in the successful operation of a nursing home facility, a body of information which describes the achievements and skills of superior administrators could contribute to the knowledge base of the profession.

Assumptions

Because of the complexity of this study, certain assumptions were made. The following is a list of those assumptions:

1. A successful nursing home administrator can be identified and defined.
2. The client group (residents) most affected by the management qualities of the administrator is not critical to the process of this study.

3. Nursing home administrators are able to identify and judge superior performance without prejudice. Those in a position to judge will share this information.

4. Reputation is a relatively stable characteristic. Administrators judged to be High Reputational will continue to perform at that level.

5. The systems in which administrators work do not have a marked impact upon their success. The actions and behavior of administrators are the determining factors.

6. The criteria by which administrators are selected and evaluated are important issues in social work and human services.

Definitions of Terms

A nursing home "functions to care for those who can no longer care for themselves and who have no one else to whom they can turn" (Johnson & Grant, 1985, p. 13). The nursing home is a "final refuge for the elderly" and provides care on a twenty-four hour basis (p. 17). Nursing homes are charged with meeting the medical, nursing and social needs of their patients/residents. The terms resident and patient are used interchangeably in the literature.
The administrator of a long-term care facility must organize "the resources and finances available to the nursing home facility to best meet the needs of the patients" (Allen, 1987, p. 3). To accomplish this task, the administrator plans, organizes, staffs, directs, controls, innovates, and represents (Allen, 1987).

In this study, administrators may be responsible for a nursing home only or for more than one program including other forms of long-term care, considered housing. Housing may include one or more levels of care indicating lesser degrees of dependency. The terms nursing home, nursing home/housing, and long-term care facility are used in this study.

Many definitions can be found in literature for the terms leader, administrator, manager. Definitions are presented to clarify use of these terms in the dissertation.

"The skilled administrator of a long-term care facility is a person capable of organizing the resources and finances available to the nursing home facility to best meet the needs of the patients" (Allen, 1987, p. 3). "The two terms 'manager' and 'administrator' are used interchangeably to mean exactly the same functions or set of behaviors" (p. 4). In the dissertation, the terms should be understood to have the same meaning unless otherwise noted.
"Leadership means motivating people to their highest level of job performance. It is the process of directing behaviors and satisfying needs -- of both workers and organization" (Haimann et al., 1982, p. 380).

A leader is "a person seen by others as being primarily responsible for achieving group objectives" (Reddin, 1970, p. 329).

Leader effectiveness is "the extent to which the leader influences his followers to achieve group objectives" (Reddin, 1970, p. 329).

A manager is "a person occupying a position in a formal organization who is responsible for the work of at least one other person and who has formal authority over that person" (Reddin, 1970, p. 329).

Managerial effectiveness is "the extent to which a manager achieves the output requirements of his position" (Reddin, 1970, p. 329).

Three general roles, further described in Chapter II, characterize the work of managers: interpersonal roles require managers to be involved with interpersonal relationships; informational roles require managers to acquire, digest, and transmit information; and decisional roles require managers to start and implement projects, allocate resources, negotiate policies and objectives (Mintzberg, 1975; Haimann et al., 1982).
Each role demands the following corresponding skills: human (interpersonal) skills are required to understand and motivate individuals and groups; technical (informational) skills enable managers to understand and carry out technical activities; and conceptual (decisional) skills enable managers to integrate and coordinate work activities to reach mutually shared goals (Katz, 1955; Haimann, et al., 1982).

Systems refers to community human service systems, for which "systems theory is useful for explaining the various processes in terms of their interrelationship and interdependence" (Weiner, 1982, p. 57). Open systems interact with their environments which are seen as necessary for existence (Robbins, 1976). A nursing home is a complex system composed of interacting parts. It also is a subsystem to a larger supra-system consisting of community medical care, rehabilitative and social service resources, educational and religious institutions, government agencies, third party payment organizations, regulatory agencies, etc.

Summary

Care of the frail, disabled aged is one of the major concerns of our country. Nursing home care providers must be prepared to respond to this concern. One of the key ingredients to operating a good nursing home is the skill of the administrator. This study attempts to validate the SRI
test for identification of superior administrators, and to further identify and describe those characteristics which differentiate superior performers from others in the profession.
CHAPTER II
LITERATURE REVIEW

Introduction

The quality of administration is a critical variable for the successful operation of nursing homes and housing for the aging. This study, which uses the reputational approach and the SRI instrument to examine the behavior and characteristics of nursing home administrators, requires a survey of the literature of management effectiveness. The review provides background for understanding the roles of nursing home/housing administrators, the development of the high reputational approach to identifying leaders, the SRI instrument for assessing strengths and weaknesses of administrators, and necessary management theory as it relates to nursing home administration.

Efforts to Delineate Roles of Nursing Home Administrators

According to Burmeister, Cyr, and Gjullin (1979), early efforts to delineate the roles of nursing home administrators were based on expert testimony. In 1967, the National Advisory Committee on Nursing Home Administration developed a
model code for State Licensure Boards which included a "core of knowledge" based upon the results of testimony at public hearings held around the United States (p. 1). There was need for a national data base and, as a result, empirical studies were undertaken on the roles of nursing home administrators (Burmeister et al., 1979). A national mail survey, focusing on specific tasks of administrators, and a series of workshops, held throughout the United States in 1977, were conducted. The goal was to develop competency-based certification procedures and necessary curricula for continuing education. The study served as the basis for developing performance statements for each category of practice and led to a "definition of professional practice for nursing home administrators" (p. 11). Stemming from the performance statements and two years of field testing, a certification examination was established. The distillation of the knowledge and ability statements was the basis for establishment of the examination.

The definition of professional practice includes administrative and leadership abilities in relation to six areas of practice: community relations; personnel management; financial management; departmental management; planning, organization and control; and resident care and services (American College of Health Care Administrators,
1980). Rankings of these aspects were found to be stable by region of the country, by facility size and by not-for-profit versus for-profit status. Results supported the model of administrative practice used to develop the definition of practice and the certification process. Further research supported the definition of professional practice and was consistent with the work roles listed above (Hayez & Wilets, 1986). The study validated the major performance domains of practice and their corresponding tasks.

This was considered the first valid, reliable evidence for structure of a "body of knowledge" which is an important characteristic for a profession. With that basis it was considered appropriate for government regulators, educators, and professionals to work together toward developing the knowledge base that is needed for success in this important profession, (Burmeister et al., 1979).

In 1974, the Federal Government conducted a long-term care facility improvement study (Yokie, 1976). The study recognized that the administrator is the professional who must provide leadership so that quality care is provided for residents. A study finding was that "the nursing home administrator is the key person who can provide the leadership and bring about needed changes in nursing homes to see that quality care is provided in a safe environment for older Americans and others needing long-term care" (p. iii).
Selection Research, Inc. (SRI)

A major purpose of this study was to test an instrument used to assess the strengths and weaknesses of practicing administrators. Selection Research, Inc. (SRI), had developed an interview format purported to do this. Permission was obtained to use their instrument. Their only requirement was that the researcher attend a seminar to be trained in the background and techniques necessary for conducting the interviews.

Selection Research, Inc. is a Nebraska-based corporation which provides services in individual interviewing and analyzing of interview data for purposes of (1) selecting and developing people in business, education, health care, and (2) conducting survey research. Tape-recorded interviews are used to identify qualified applicants.

Summary of SRI Themes Related to Literature

SRI theme definitions (see Appendix C), are reflective of various concepts expressed in the management literature. This section discusses linkages of SRI with management theory. The SRI arranger theme, which refers to abilities in organizing human and physical resources for productivity, appears related to Reddin (1970) who states that leaders must properly diagnose situations and staff plans in relation to
their own power, the interplay of relationships, and the structure of the task. The arranger theme also shares commonality with Mintzberg (1973) who maintains that when a problem or improvement project is selected for attention, the manager works out a series of decisions and planning activities, arranged in a sequential order.

The SRI growth responsiveness and stimulator themes also have parallel concepts in the literature. Growth responsiveness, which recognizes the ability of managers to gain satisfaction from personal growth of staff and to enjoy staff development and training activities, is related to the concepts explained by House and Mitchell (1980). They state that the behavior of managers should inspire staff motivation to a higher level of effort. Further, managers should play a nurturing role by providing coaching, guidance, support, and rewards valued by subordinates. They should know how to enhance motivation for better performance. Similarly, the stimulator theme indicates that the manager can increase the work activity of subordinates in a positive way, primarily through understanding, enthusiasm, and recognition.

The SRI performance orientation theme relates to the manager's ability to evaluate staff efforts in terms of results and is similar to ideas expressed by Norville (1979) and Olsson (1968). Norville maintains that a positive,
supportive climate, oriented towards achievement, must be encouraged. Further, cohesive group action is needed, but to achieve results, objectives must be defined and transmitted to all staff. The goals for individual jobs must coincide with organizational objectives. Olsson suggests that reports and reviews should tell management their progress toward goals.

The SRI innovator/activator and work related themes can be seen as similar to ideas presented by Mintzberg (1973). The innovator/activator theme refers to bringing creativity, new ideas, and improvements to the organization. The ability to turn ideas into action and production is seen in this theme. Similarly, Mintzberg notes that managers set the tone and define the work atmosphere of the organization. They should project to staff that they possess vision as well as energy to improve the organization. Managers must recognize that the needs of individuals should coincide with organizational goals for best results. Managers conceptualize plans and design and initiate changes. Ability in the work related theme refers to continuous rehearsal and review of work activities.

The SRI relator theme refers to the ability to build rapport with staff and residents. Such a person is empathetic and strives to establish productive communication with others. Similarly, Likert (1961, 1967) asserts that
achievement of effective participation to solve problems depends on effective communication. Information relevant for decisions should flow easily among the various parts of an organization.

The SRI focus theme relates to Management by Objectives (MBO), which is a methodology where staff participate in formulating long and short-term goals and objectives to be achieved within specified periods of time. The focus theme refers to the ability to discriminate and set specific, realistic goals.

SRI themes appear to describe qualities desirable in all administrators. SRI does not have a unique theory of management. It appears to borrow ideas and phrases from other management literature and adapt them to create its own themes essential for success. The mission and individualized perception themes are discussed in relation to literature later in this chapter.

The Reputational Approach

The purpose of this section is to justify use of the reputational approach for selection of the High Reputational and Typical groups of nursing home administrators. The "High Reputational" are seen as an elite group to be compared and contrasted with other administrators not so identified. Characteristics of effective leaders are described. There is
similarity between characteristics of effective leaders and effective managers, as cited in literature.

In a summary of leadership traits, Stogdill (1974) describes leaders as

characterized by a strong drive for responsibility and task completion, vigor and persistence in pursuit of goals, venturesomeness and originality in problem solving, drive to exercise initiative in social situations, self-confidence and sense of personal identity, willingness to accept consequences of decision and action, readiness to absorb interpersonal stress, willingness to tolerate frustration and delay, ability to influence other persons' behavior, and capacity to structure social interaction systems to the purpose at hand. (p. 81)

The above cluster of characteristics differentiates leaders from followers as well as effective from ineffective leaders, and higher echelon from lower echelon leaders (Stogdill, 1974).

Considered separately, the characteristics do not have much predictive or diagnostic relevance. However, when viewed together, "they interact to generate personality dynamics advantageous to the person seeking the responsibilities of leadership" (Stogdill, 1974, p. 81-82).

A list of characteristics is provided by Stogdill:

Task-Related Characteristics:

Need for achievement, desire to excel
Drive for responsibility
Enterprise, initiative
Responsible in pursuit of objectives
Task orientation
Social Characteristics:
Ability to enlist cooperation
Administrative ability
Attractiveness
Cooperativeness
Nurturance
Popularity, prestige
Sociability, interpersonal skills
Social participation
Tact, diplomacy (p. 81-82)

Hunter (1953) supports the researcher's assumption of a tendency for the most recognized, most accomplished individuals to rise to positions of prominence within professional associations on the state and national level. Hunter's methodology of reputational ratings determined the top leaders of a city and a small town. According to Stogdill (1974), leadership theory is an extremely important subset of theory in management effectiveness. Marriner (1988) discusses the interrelatedness of leadership and management skills. Managers must direct people and work activities to accomplish the tasks and goals of the organization. Knowledge of leadership style and management approaches are both important. Managers must motivate and discipline staff and deal with conflict, tasks that require a combination of management, leadership, communication skills, and assertive behavior (Marriner). The acknowledged leaders of the profession of nursing home administration, it is believed, will demonstrate both leadership and management effectiveness.
Hunter's (1953) approach was to seek identified leaders who were asked to nominate others. Repetition of this process led to identification of additional recognized leaders. The interviewer brought the list from the first to subsequent informants and obtained general consensus of opinion. As the study proceeded, there was growing consensus as to who were the leaders.

The instructions given by Hunter (1953) were similar to those in the dissertation:

Place in rank order, one through ten, ten persons from each list of personnel—who in your opinion are the most influential persons in the field designated—influential from the point of view of ability to lead others. If there are persons . . . you feel should be included in the ranking order of ten rather than the ones given, please include them. (p. 265)

Judges showed a high degree of agreement as to who were the top leaders in several fields.

The methods of Hunter's study indicate a basis for the reputational approach in identifying superior nursing home administrators. The literature of management effectiveness shows that major components of effectiveness concern leadership abilities. A reputational approach that seeks to identify the most effective in the profession is at the same time identifying the leaders. The high reputational approach identifies leaders, whom we assume are the most effective.

The dissertation sought to study a High Reputational group among nursing home administrators who possess
considerable influence in the field of not-for-profit homes and housing for the aged. Evidence about the makeup and origins of elites has led some to conclude that "who you are" is the essential criterion for acceptance into elite positions. Prewitt and Stone (1973) state that this is incorrect. Although "who you are" can provide advantages, it is no guarantee of a position among the powerful. Those who reach elite positions have demonstrated their ability to lead and manage. In this sense, achievement is the final arbiter of recruitment into elites.

Subsequent to his earlier study, Hunter (1959) established another method for studying the relationships of "men in power". In a nationwide field study, he interviewed a large sample of "men" designated by their peers as top leaders in making opinions, policies and decisions. High status organizations were asked to nominate those deemed most influential so that a manageable number could be approached as nominators of top national leaders. Results showed empirically that there was high agreement of an identifiable group leading society.

Further, Putney and Putney (1962) used the reputational approach to identify the "prestige leaders" in a Mexican community:

A questionnaire administered to all heads of households in this community of 1,000 asked the respondent to name the "most important people" in the village, the "real
leaders," their own "best friends," those people of whom they "most often sought advice," and those whom they "most often visited." This analysis revealed the existence of a tightly knit clique. . . . which stood at the apex of the prestige hierarchy. The clique was dominated by the two men who were mentioned most often in response to each of the five questions. . . . By all criteria, the members of this clique constituted a high prestige elite in their community. (p. 548)

All members of the clique had brought innovations to the community. As a result of the efforts of this elite, "the concept of progress had come to these villagers" (p. 550).

In applying this study to the dissertation, it was anticipated that members of the administrator elite would also be those who had brought innovation and improvements to their facilities and to the field.

**Comparison of Leadership and Management Theories**

Theories of leadership and management have developed consensus on factors necessary for effectiveness (Hersey & Blanchard, 1977). The Ohio State Leadership Studies, in attempting to explain how a leader carries out activities, identified "Initiating Structure" (task), and "Consideration" (relationships) as the key dimensions of leadership (Schriesheim, Tolliver & Behling, 1980; Szilagyi & Wallace, 1983). Initiating Structure refers to "the leader's behavior in delineating the relationship between himself and members of the work-group and in endeavoring to establish well-defined patterns of organization, channels of
communication, and methods of procedure" (Hersey & Blanchard, p. 36). Consideration, on the other hand, refers to "behavior indicative of friendship, mutual trust, respect, and warmth in the relationship between the leader and staff" (Hersey & Blanchard, p. 36). An effective manager is one who maintains the correct balance of consideration and task, appropriate to the needs of subordinates. SRI themes are in general agreement with literature of leadership and management effectiveness.

3-D Theory of Manager Effectiveness:

According to Reddin (1970) the management style that most often coincides with high effectiveness is called the "integrated" manager (p. 229). This type of manager uses both a "task" and "relationship" orientation. In addition, this involves the setting of overall goals or other motivational techniques. A variety of participative techniques are used.

The effective integrated manager is often found in situations where it is necessary to supervise subordinate managers who need to interact to make good decisions. This is characteristic of nursing homes where the administrator must obtain optimum performance from department heads and line staff for the institution to function properly. A type of structure needs to be set up whereby there is mutual cooperation which results in the attainment of the
The integrated manager uses participative techniques to "flatten" the power differential vis a vis subordinates. Authority is made less personal (Reddin, 1970), and there is emphasis on obtaining subordinates' commitments to changes and decisions.

The integrated manager goes to considerable lengths to ensure that subordinates understand the reasons for change or why they are asked to do something. Further, he wants to depersonalize authority. To accomplish this, it is necessary to stress the mission, ideals, aims, goals, and policies, and it is to these higher purposes that responses are expected (Reddin, 1970).

This is consistent with the SRI "mission" theme (see Appendix C), as well as with the 9.9 orientation of the managerial grid (Blake, Mouton & Tapper, 1981), or McGregor's (1960) precepts of Theory X versus Theory Y. The grid approach (see Appendix F, Figure 1) presents similar concepts but in a two dimensional graph approach in which the X and Y coordinates each represent a different constellation of managerial characteristics. The 9.9 style is similar to the concepts expressed in SRI theme definitions (see Appendix C).

Grid Approaches for Management: Blake et al. (1981) developed the generic "grid" approach, a conceptual framework for managerial leadership in a variety of organizations (p. vi). The basic principles for the administrator in the
health care setting are the same as for other types of managers and administrators.

Primary emphasis is placed on the theories in the corners of the grid because they are most distinctive and the ones most often seen in day-to-day work situations. In the lower right hand corner is the 9,1 oriented manager. High concern for delivering services is matched with little or no concern for staff as individuals whose thoughts and feelings need to be taken into consideration. Pressure is for results and the style is to expect staff to do as they are told with no discussion. This is related to Likert's (1961, 1967) system 1, exploitive, authoritative style of management, or Theory X orientation (McGregor, 1960).

In the upper right hand corner is the most desirable, 9,9 style which couples high concern for delivery of quality services with high concern for staff as individuals whose needs must be considered. This type of leader strives to gain the involvement, commitment and participation of subordinate staff to achieve goals they have agreed upon and share mutually. Personnel working together in a 9,9 type of style feel a commitment to a common stake in the outcome of their efforts. Their personal and professional goals can be achieved by delivering better health care that can be carried out in a mutually rewarding and satisfying way (Blake et al., 1981).
This team-oriented leader sees people as potentially productive and enhances this productivity by building commitment and mutual responsibility. In the Blake and Mouton model, the 9,9 management style is seen as the ideal one toward which managers can and should strive. (Lewis & Lewis, 1983, p. 120)

The 9,9 style appears to be analogous to Likert's (1967) system 4 theory of participative group style of management. Likert's theory spans a linear scale from system 1 to system 4, each demonstrating different constellations of characteristics, styles, motivational forces, modes of communication, and assumptions about people.

Theory X refers to a closely controlled climate with autocratic leadership where decisions are dictated from the top downward. It assumes that human nature is to avoid responsibility and that threat is necessary to ensure compliance. Theory Y assumes that the average person is self motivated, finds work satisfying and will seek responsibility. Authority may be decentralized. Decisions are made in a more participative atmosphere. Leadership style is more democratic (McGregor, 1960). As long as subordinates can be instructed to respond to these and accept the behavior entailed, they can be used as control mechanisms.

A manager who has mastered the integrated style will try to dovetail individual needs of staff with those of the organization. To do so necessitates a clear perception and
understanding of the individual. This coincides with the SRI theme of "individualized perception. The integrated style is close to the ideal styles encouraged by McGregor's Theory Y, Likert's System 4, and Blake's 9,9. According to the theories, if these precepts are followed, increases and improvements are more likely seen in productivity, efficiency, morale, financial position, improvements in operations, etc.

**Working Roles of Managers**

Some concepts contributed by Mintzberg (1973) are similar to definitions that form the basis of the SRI administrator selection process. The following is a brief summary of the working roles of managers as identified by Mintzberg.

**Interpersonal Roles**
- figurehead: symbolic, ceremonial
- leader: motivation, activation, staffing
- liaison: maintain informational network

**Informational Roles**
- monitor: sifts incoming information, nerve center
- disseminator: transmits, interprets information, integrates value positions
- spokesman: transmits information to important outsiders

**Decisional Roles**
- entrepreneur: improvement strategies
- disturbance handler: initiates corrective action
resource allocator: programming significant organizational decisions
negotiator: represents organization at major negotiations (p. 92-93)

The SRI themes are similar to Mintzberg's roles, as the following suggests:

**MINTZBERG and SRI**

Interpersonal roles related to SRI Themes

leader--------------------------mission
leader------------------growth responsiveness
leader---------------individualized perception
leader-----------------------stimulator
leader-----------------performance orientation
leader-----------------relator
leader-----------------focus
figurehead-------------------mission
liaison-------------------arranger

Informational roles vs. SRI correlate

monitor-------------------relator
disseminator------------innovator-activator
spokesman----------------relator

Decisional roles vs SRI correlate

entrepreneur-----------innovator, activator
resource allocator----------focus

It can be inferred that the majority of correlations are with the themes and characteristics of leadership. It is mentioned elsewhere (Burmeister, 1978; Stogdill, 1974) that leadership theory is the most important subset of management theory. The most important role of the administrator is that of leader. Effective leadership and effective management, while not synonymous, are highly dependent upon each other.
Mintzberg's Contributions:

The researcher was influenced by Mintzberg (1973), who wrote extensively on the nature of managerial work with a focus on "what do managers do?" (p. 5). During the 1960s Mintzberg studied the work of chief executives and managers. He sought to clarify misconceptions in the field and decrease managers' reliance on practice wisdom, not substantiated by systematic research. His introduction poses the question: "Is it possible to try to arrive at a specification of what constitutes the job of a top manager?" (p. 3). Mintzberg maintains that this question "has remained essentially unanswered in the literature of management" (p. 3). The author's purpose is to begin to answer this question and to seek more precise information. The presentation is a generic work stating that the roles of administrators have much in common regardless of formal title or field of practice. The book is based on participant observation with several executives representing diverse organizations.

Mintzberg (1973) focuses specifically on the interpersonal roles and obligations of managers rather than on functional areas of responsibility such as personnel administration, budgeting, etc. Administration or management (the terms are used interchangeably), is viewed as a field of practice with commonalities which cut across types of
organizations, whether businesses, not-for-profit, government, etc.

It is theorized that managers are continuously bombarded with information which is absorbed and formed into a "series of mental models--of the internal workings of his organization, the behavior of subordinates, the trends in the organization's environment, the habits of associates . . . ." (Mintzberg, 1973, p. 89).

Mintzberg (1973) believes that the plans of managers are not explicit, not documented or available for observation. Formulations within the manager's mind appeared to exist as unformed plans, termed "improvement projects" that he or she would like to initiate within some type of time frame (p. 90). A manager makes choices about these projects and at the same time interrelates several decisions at the same time, with the plan of trying to insure that they all lead the organization to the desired state for the accomplishment of its goals.

Plans tend to be flexible. Managers are sensitive to "unanticipated disturbances, unpredictable timing factors, possible new information," and therefore generally "cannot afford the luxury of rigid plans" (Mintzberg, 1973, p. 90). Managers maintain flexibility in order to respond to uncertainties in the environment. Plans are not documented
in detail because it is realized that quick modifications might be necessary.

Mintzberg's (1973) studies hinge upon a conceptual framework based on theories of "what managers do" (p. 54). A body of theory and research is synthesized into statements of 10 roles, based on logical argument and empirical evidence. These roles are seen as common to the work of all managers, regardless of setting and type of organization. The roles are categorized as follows: I. Interpersonal roles, II. Informational roles, and III. Decisional roles (p. 59).

Under Interpersonal roles are listed (a) Figurehead, (b) Leader, and (c) Liaison. The "figurehead" role is considered the most basic and elementary. Some of the duties are symbolic, others trite, but all are obligatory. Some are inspirational. Examples are, presiding at a recognition ceremony honoring long term employees, making a speech at a women's auxiliary luncheon, etc.

In their "leader role" (Mintzberg, 1973, pp. 60-61), managers set the tone and define the work atmosphere of the organization. The manager or administrator should project a sense of energy and vision throughout the various levels and departments. Success or failure in doing so could figure significantly in achieving either a thriving organization or one on the road to stagnation. In almost every interpersonal contact or activity, the administrator's actions are closely
observed by subordinates, who look for clues to the executive's leadership approach. By almost every word, phrase, or gesture, the manager may either encourage, inhibit or give clues, perhaps unwittingly, which are anxiously "read" by subordinates.

A key purpose of the management role is to bring about "an integration between individual needs and organizational goals" (Mintzberg, 1973, p. 62). To achieve efficiency of the organization, the manager must reconcile the needs of subordinates with organizational needs. The leader is also the only one invested with the power to "weld diverse elements into a cooperative enterprise" (p. 62).

In explaining the "liaison" role of leadership, Mintzberg (1973, p. 63) discusses the "web of relationships that the manager maintains outside the organization." Homans is cited in referring to these as "exchange relationships" (p. 63). The manager gives something in order to get something in return. Examples are chief executives who attend conferences to "keep in touch" and to keep open channels of communication. Another example is of those who seek board appointments with voluntary agencies to express a philanthropic commitment along with building one's network for contacts and status. Keeping in touch with colleagues serves a dual role of maintaining social relationships and collecting important "tidbits" of information that may be
useful. The liaison role is described, as linking the 
environment with the organization through maintaining a 
network or "web" of contacts (p. 64).

According to Mintzberg, the leadership role is one of 
the most significant roles of administrators and has received 
much more attention than the others. The "informational" 
roles analyze the sending and receiving of information. 
Managers are "bombarded" with information every day that they 
must use to understand what is going on within their 
organization as well as the environmental system (p. 67). 
Managers try to detect changes, identify problems needing 
attention, as well as opportunities to make improvements. 
They strive to develop knowledge about their environment, to 
be abreast of information that must be transmitted to 
subordinates, and to be prepared for making decisions.

In addition to receiving information from all corners, 
both internal and external, executives receive information 
from subordinates. They must keep in mind that those under 
them may seek to exert pressure of their own to gain 
advantages or greater power. Information deemed most useful 
by managers is often not in formal reports or gained through 
management information systems. Rather, it comes by word of 
mouth or gossip. Much of the up to date information needed 
by managers consists of essential "tidbits" not included in 
formal communications. This is a primary reason that
managers rely greatly upon personal "networks" of communication within the organization, outside, as well as other private channels that are cultivated. Administrators use their information to search out problems as well as opportunities. Often they develop "mental images" or "models" of the workings of the organization within its environment (p. 71). All the time, they are conceptualizing plans of where the organization ought to be going.

Within the "disseminator" subset of informational roles, administrators channel data selectively within the organization to, as well as between, subordinates. The manager must see to it that information is conveyed to those who need it. Frequently, the manager also expresses the value preferences of the organization, which guides subordinates in making decisions of their own (Mintzberg, 1973). For example, the governing body has certain points of view as to the interpretation of policy to the community. An administrator is expected to understand these largely unwritten policies and to transmit them appropriately to subordinates as well as to outsiders and the community.

In the "spokesman" subset of informational roles, the manager channels information outward to the environmental system. Key persons to be kept informed include the board of directors and various other key lay leaders. Clients and the public at large within the community served also need to be
informed regarding the mission, goals, and objectives of the agency or organization (Mintzberg, 1973). The administrator is also the only one with the authority and responsibility to publicly make these interpretations to the community, whether in written form such as publicity, or by speaking engagements, appearances in the media, etc.

The third set of managerial activities is categorized as the "decisional roles" (Mintzberg, 1973, p. 77). These involve "strategy making," which is defined as the "process by which significant organizational decisions are made and interrelated" (p. 77). The manager is involved in all important decisions and is also the only person with the authority to commit the organization to new courses of action. He is the "nerve center," who, with superior information, can make sure that decisions reflect the current values and goals of the organization. By having one person control all strategic decisions, they can more easily be integrated into a unified course of action.

In the "entrepreneurial" subset of decisional roles, the manager designs and initiates changes to be brought about within the organization (Mintzberg, 1973, p. 78). The entrepreneurial manager scans the organization, seeking opportunities for improvements, always looking for problems to solve. For example, a manager makes unannounced tours of the organization, asks questions at random, always looks for
ad hoc data rather than being satisfied with routine reports. Only the administrator has the right to cut across levels of authority. He or she can initiate conversations with anyone in the organization. Once a problem or opportunity is selected for attention, the manager will enter a design phase for implementing the improvement. This consists of a series of smaller decisions and other activities which are arranged mentally into a sequential order over a period of time. The resulting sequence of steps results in the improvement project.

In the "disturbance handler" subset of decisional roles, the manager must deal with unforeseen events which may precipitate a crisis, conflict, disturbance, or problem (Mintzberg, 1973, p. 85). Disturbances may consist of conflicts between subordinates, problems between organizations, and threats of losing resources. Within voluntary social service organizations and nursing homes, this often means decreased government funding. Though the administrator seeks to maintain harmonious stability, disturbances will inevitably occur.

In the "resource allocator" subset of decisional roles, the manager makes choices as to the distribution of resources within the organization (Mintzberg, 1973, p. 85). These decisions hinge upon strategies as to how resources should be
used, renewed, and protected. Resources may include time, money, materials, equipment, manpower, or reputation.

In the "negotiator" subset of decisional roles, the manager participates both as figurehead and as spokesman (Mintzberg, 1973, p. 90). Whether a new union contract, a salary plan, or budget presentation, the administrator must be a resource allocator and use his authority to make commitments of organizational resources. Only the person in authority is empowered to conduct meaningful negotiations.

It is important to mention that, according to Mintzberg (1973), the primary distinguishing characteristics of managerial work are:

1. A great deal of work at an unrelenting pace.
2. Activities characterized by brevity, great variety, and fragmentation.
3. A preference for live action.
4. Attraction to the verbal media.
5. The manager stands between the organization and a network of contacts.
6. A blend of rights and duties.

**Likert's Key Variables of Administrator Effectiveness**

During the 1950s and through 1967, Rensis Likert conducted research and published empirical, quantitative studies of management and organizational effectiveness (1961,
His conceptual framework characterized the managers in industry and government who were achieving the highest levels of productivity, lowest costs of operation, least amount of employee turnover and absence, and the best levels of motivation and satisfaction on the part of their staff (1961). Later he expanded his framework to include non-profit organizations. A limited number of studies within social services upheld the validity of his principles. (For example, Fallon, 1978). In this dissertation, Likert's ideas, regarding administrator effectiveness, are used when analyzing the interview transcripts.

Likert's first generalization states that the superior managers display a distinctly different pattern of leadership from those who are less successful. According to his second generalization, the highest producing managers were deviating from existing theory and practice in a systematic fashion but most had not integrated their principles into a cohesive theory of management practice.

Likert believed that the highest achieving managers could be isolated in terms of the principles and practices used. He stated that this could be expressed in a newer theory of organization and management. In addition, the theory is expressed in quantitative, measurable terms on a scale from system 1, exploitive-authoritative to system 4, participative (1967, pp. 14-24). Some characteristics of
high producing managers, separating them from managers of much less productive units are described as follows:

Within very productive organizations, there is an overwhelming trend among the members of attitudes that are favorable toward their work, their superiors, toward the organization in general, as well as the tasks, responsibilities and other aspects of their jobs. These attitudes reflect a high degree of confidence and mutual trust throughout the organization. Staff tend to identify with its goals and objectives. They feel a high degree of involvement in achieving organizational goals and as a consequence, performance goals tend to be high. (p. 98)

Another major characteristic isolated is that through taking advantage of and utilizing all of the major motivational forces, managers are able to influence the organization. These forces lead in the direction of productivity and must be accompanied by attitudes that are both cooperative and favorable. The older, authoritarian approach has been to rely on the "... economic motive of buying a man's time and using control and authority as the organizing and coordinating principle of the organization" (Likert, 1961, p. 98). Though still a commonly used form of management, this is seen by Likert as an outmoded thought system, a relic of past societal values, that will not serve organizations well in the future.

Likert contended that various motive forces are examined and used by enlightened managers in order to achieve an effect which is both cumulative and reinforcing. Much appears based on humanistic theorists such as Mazlow and
Herzberg. The influence of Theory X and Theory Y is very apparent (Weiner, 1982). Likert cites ego motives such as desire for approval, recognition, status, and needs for achievement, personal worth and a sense of importance. These are seen as leading to personal growth, but along with motives indicating needs for security, curiosity, creativity, and desire for new experiences. Economic needs are seen as important but secondary to motives toward human growth. The goal of management is summarized as follows:

By tapping all the motives which yield favorable and cooperative attitudes, maximum motivation oriented toward realizing the organization's goals as well as the needs of each member of the organization is achieved. . . The organization consists of a tightly knit, effectively functioning social system. This social system is made up of interlocking work groups with a high degree of group loyalty among the members and favorable attitudes and trust between superiors and subordinates. (Likert, 1961, pp. 98–99).

The recurrent theme through Likert (1961) is that manager's talent and ability in tapping the motives of subordinates, which yield favorable and cooperative attitudes, will lead almost inevitably to success. The sum total of these motivational forces will lead toward the realization of the goals of the organization and in addition will meet the needs of each member of the organization. The reverse is also stated, that when attitudes of resentment and hostility are present, this contributes in a serious fashion to inefficiency which will act as a "drag" and impediment to
smooth, productive functioning (p. 99). Negativism and hostility are seen as motivational forces that pull directly opposite to those forces pulling toward success.

The substance of Likert's (1961) theoretical orientation is that organizations should be "tightly knit" and in effect should be "social systems" made up of "interlocking work groups" (p. 99). There should be a very significant amount of group loyalty present among the members, along with positive, favorable attitudes and trust between managers, supervisors, and subordinate line workers. Relationships should be characterized by sensitivity to others and a relatively high degree of sophistication in the types of personal interactions and group functioning that takes place.

Likert (1961) asserts that the achievement of effective participation to solve problems depends upon communication that is both efficient and effective. Information that is relevant for making decisions must flow easily among various parts of the organization. The leadership needs to develop "a highly effective social system for interaction and mutual influence," characterized by Likert as a key variable (p. 99).

This conceptualization requires that measurements of performance of an organization should be used mainly for self-guidance rather than as a tool for management to superimpose control over the work force. The use of work
measurements as a coercive tool to insure obedience is deplored. We are instructed and encouraged to tap the human motives which bring forth attitudes that are cooperative and favorable rather than hostile. It seems a design for management in that participation and involvement in decisions are seen as a normal part of the leadership process.

Anticipating criticism from more traditional, authoritarian managers, Likert states that, in the most highly productive organizations, the superior administrators were still using all of the technical resources at their disposal. They were applying the classical theories with scientific analysis of jobs, time and motion studies, advanced methods of budgeting and fiscal controls, etc. The critical difference pointed out is that these resources are used differently from the manner in which they are used by low producing managers. This difference is ascribed to the differences in motivation that characterize the two opposing styles of management, i.e. authoritarian versus participative.

Low producing managers believe that control and authority motivate and direct the behavior of subordinate staff. Likert states unequivocally that authoritarian methods are relics and unworkable in modern organizations, with very few exceptions.
Likert (1961) states that high producing managers recognize that the resentment and hostility created by the exercise of direct authority will inhibit effectiveness. The best managers try to use all the major motives of their staff which have the potential for yielding favorable and cooperative attitudes. If favorable attitudes are elicited, positive motivational forces will tend to reinforce each other.

The critical difference between authoritarian methods and Likert's participative approach, as validated by his empirical research, is that the most productive managers have developed within their organizations a type of social system which is cooperative, highly organized, and in which staff exhibit positive motivations. Under this form of leadership, the motivations of staff, instead of differing, have come together. According to Likert (1961, 1967), managers with the ability to encourage and elicit positive motivation have become the most productive.

Research In Leader Effectiveness

Hersey and Stinson (1980) describe several decades of research on leadership and stated that "too often ... the dissemination of knowledge to practitioners lags far behind research and theory development" (p. vii). These authors follow the patterns expressed by Mintzberg and Likert who
emphasized theories of what managers should do to maximize abilities for successful practice.

The theories are diverse but have much in common. According to Schriesheim, Tolliver, and Behling (1980), the "situational approach is now dominant within leadership research" (p. 6). This approach examines the interrelationships between leaders and subordinates in terms of the behaviors and characteristics of the situations in which they find themselves. Leaders are described as being either relationship-motivated or task-oriented. Reddin (1970) describes Fiedler's approach to situations which may be favorable to either approach. The task of a leader is to properly diagnose the characteristics of any situation in which he finds himself, as well as the characteristics of the staff with whom he or she must deal. The important elements are the power of the leader, the amount of structure of the task, and relationships between leaders and members. The most favorable situation for a leader to be influential exists when the position has much power, the task is highly structured, and relations between leader and members are very favorable. A key dimension is power that is conferred by the organization. For example, the worst type of situation is where all three dimensions are low, such as for a disliked leader of a voluntary organization, where tasks may lack structure and authority is often diffuse.
Without accurate assessment, one runs the risk of using an inappropriate approach. The situational approach provides a set of diagnostic tools to the manager who must then adjust leadership style to the needs of the moment. Flexibility must be maintained to change style and approach over time, when necessary. The point is made by Schriesheim, Tolliver and Behling (1980) that leaders are not born but are made through systematic training.

Hersey, Blanchard, and Hambleton (1980) discuss situational leadership which is based on the extent of direction, (task behavior) and socio-emotional support (relationship behavior) that is necessary by the leader. The most effective approach depends on the amount of task versus relationship behavior the leader must provide given the circumstances and the "level of maturity" of the work group. Acceptance of task and relationship as important variables of leadership behavior has been understood for many years. In further research, leader behavior was classified in terms of "initiating structure" (task behavior) and "consideration" (relationship behavior). To determine which style is most suited for a particular situation, it is necessary to assess the maturity of subordinates which can be rated.

According to Hersey and Blanchard (1977), maturity of the followers or group is explained as follows:
Maturity is defined in Situational Leadership Theory as the capacity to set high but attainable goals (achievement-motivation), willingness and ability to take responsibility, and education and/or experience of an individual or a group. These variables of maturity should be considered only in relation to a specific task to be performed. That is to say, an individual or a group is not mature or immature in any total sense. All persons tend to be more or less mature in relation to a specific task, function, or objective that a leader is attempting to accomplish through their efforts. (p. 161)

Lee (1970) states that leadership theories and models have paid insufficient attention to the sources of power which to a great extent determine the type of leadership model to be used. Administrators can make costly mistakes if they fail to analyze the power system in which they operate. It is important to make an inventory of leader power available to initiate change. Frequently, efforts have bogged down because of "vague assumptions about leader power available to change organizations" (p. 35). In terms of performance appraisal of executives and subordinate managers, we are cautioned to be realistic and recognize the constraints under which they operate. A series of propositions is presented to measure position power. Alternative courses of action in terms of making changes must be measured against the amount of real power and influence that can be mustered.

Hunt and Osborn (1980) define leadership as "the influence attempt a superior makes toward his subordinates as
a group or on a one-on-one basis" (p. 49). At the core of their theory is the distinction between "discretionary and nondiscretionary leadership" (p. 49). "Discretionary leadership is that initiated by the leader himself" (p. 49). Nondiscretionary leadership concerns the dictates of the environment or organization. The successful leader fills "the gap between subordinate desires and abilities on one hand and organizational goals and requirements on the other" (p. 49). Filling the gap should produce satisfied employees who perform to high standards. The gap is filled by the type of leadership exerted. On the first level, group meetings and emphasis on committees is utilized. One-on-one contacts with individuals is key to the second method. The nature of the setting affects the discretion of the leader in filling the gaps. It is seen as essential, that leadership attempt to build greater discretionary influence.

The most important dimensions of leadership are termed consideration, and initiating structure. Hunt and Osborn (1980) use those concepts, as do others mentioned previously, but they take the ideas in another direction. The former refers to human relations efforts on the part of the leader. The latter is a much more directive approach, determining what tasks and in what manner are to be performed by subordinates. Hunt and Osborn (1980) believe that leadership training programs though widespread are often not effective.
Due to poor diagnosis of actual needs, much training may be geared to changing behaviors and approaches when in reality, there is little or no discretion allowed. Often, training programs are geared to attitude change and human relations approaches. These can be dysfunctional when job demands do not allow for the consideration approach. The recommendation offered is that training be more diagnostic in assisting leaders to evaluate the following: "the mix of discretionary leadership to accompany nondiscretionary behavior and to utilize the mix of group and one-on-one leadership most appropriate to the setting" (p. 60).

House and Mitchell (1980) suggest that:

leaders are effective because of their impact on subordinates' motivation, ability to perform effectively and satisfactions. The theory is called Path-Goal because its major concern is how the leader influences the subordinates' perceptions of their work goals, personal goals and paths to goal attainment. The theory suggests that a leader's behavior is motivating or satisfying to the degree that the behavior increases subordinate goal attainment and clarifies the paths to these goals. (p. 81)

Two important propositions of path-goal theory should be mentioned. First, leader behavior is accepted by subordinates if they see this as a source of reward, satisfaction or as leading to future satisfaction. Second, the leader's behavior should inspire motivation to a higher level of effort. This will happen if the meeting of subordinates' needs is made to be contingent on effective
performance. Further, the leader's behavior must be nurturing by providing coaching, guidance, support and rewards valued by the subordinates.

From a strategic point of view, the leader must know how to enhance the motivation of his subordinates to perform better, to increase job satisfaction, and to accept the leader. It is a strategic challenge for the leader to recognize and arouse "subordinates' needs for outcomes over which the leader has some control" (House & Mitchell, 1980, p. 84). Second, the leader must be able to deliver rewards or "payoffs" for achieving work goals. Third, the leader must make the path to payoffs easier by providing coaching and direction. Fourth, the leader must help subordinates to clarify what they expect. Fifth, the leader must reduce and eliminate barriers and frustrations. Sixth, the leader must increase opportunities for employees to achieve personal satisfactions which are contingent on their excellence as workers. The challenge then for administrators is to create an environment in which excellence is valued and attitudes are fostered which move the organization to a higher level of functioning.
Management Effectiveness Literature Within the Long-Term Care Field

Norville (1978, 1979) developed a methodology for more effective management of day-to-day operations in nursing homes. According to his model, most homes have achieved integration of planning and operations, at least to some extent. "The degree to which integration has been achieved can usually be determined by assessment of the organization's overall level of effectiveness and efficiency" (p. 25). Stability and a positive, supportive climate oriented toward achievement are necessary to implement the system (p. 26). The prevailing management style must be participative with leadership that stresses concern for both productivity and people. If absent, the approach should not be initiated.

The methodology takes the nursing home through specific steps that begin with an evaluation of the facility. Organizational goals and objectives must be defined along with plans to address problems or weaknesses that are identified. With the full participation of key staff, performance expectations and objectives must be mutually determined. A series of worksheets are provided with questions and scales for self-rating. The scales are for self-measurements, for "extent to which achieved," from a low of 1 to a high of 7 (Norville, 1979, p. 35). This provides
the administrator with a plan and tool to use and adapt as needed. Norville is helpful because the method is specifically geared to use in nursing homes. The questions for self-assessment are in language familiar to nursing home administrators. In a subsequent article, Norville and Breindel (1981) state that administrators are relatively inexperienced in continuous assessment and evaluation, which is important because it enables problems to be identified before a crisis develops and while there is time to take corrective action. Administrators are advised to work with department heads to select data that can be collected easily and that can offer insights about progress.

Norville depends on the writings of Blake and Mouton (1981), as well as "Management by Objectives" or "MBO." Management by Objectives is a method that focuses attention on and provides a logical framework for achievement. It provides for leadership and motivation, and as a basis for review and control (Olsson, 1968). "Management by Objectives is an effective base from which to develop a practical management system" (Olsson, p. 9). Olsson explains that:

the purpose of the Management by Objectives system is to obtain cohesive group action. To do this demands the delineation of the enterprise objectives and the transmission of these objectives to each person in the organization. The goals for an individual's job must support the objectives of the enterprise. Only in this way will more effective, unified group action be created. (p. 43)
Review is another important element of the process. Reports should tell staff, management, and boards their rate of advancement toward the goals and objectives defined for a planning period.

Social agencies recently began using Management by Objectives, though business and industry adopted the method and used it widely for more than 20 years (Raider, 1985). It is a methodology where staff participate in formulation of long and short-term goals and objectives to be achieved within specific periods of time. The form chosen for a particular agency should reflect the unique needs, characteristics, and culture of that agency. There is no single model that can be applied to all organizations.

Management by Objectives must be tailored to the needs of the agency. Norville (1978, 1979) attempts to do this for nursing homes. Staff feedback is an essential part of the MBO process. Staff must have opportunities for participation by making suggestions and proposals. They will begin to experience commitment to the system only when they witness their suggestions as being considered and used. MBO, based on participative methods, is compatible with Likert's (1961, 1967) positions, as well as the Grid approach (Blake, et al., 1981).
More Specific Literature Needed

Much management literature is available that could be of value to practicing nursing home/housing administrators. However, little is specifically focused on the problems and needs facing administrators in this field. Much of the material is quite technical and may be difficult for busy human service executives to assimilate without intensive study. The researcher sought to review management literature and draw some linkages to the achievements and roles of practicing administrators. A need was perceived by the researcher for study of high performing administrators in this field. In this emerging profession within a rapidly changing field, it may be difficult for administrators to assess their performance and to know if they are focusing their energies to best advantage. The researcher sought to contribute useful knowledge to this profession.

Hypotheses and Research Questions

The researcher sought to identify superior nursing home administrators for comparison with others. Review of literature suggested avenues of investigation. From the reputational approach successfully used by Hunter (1953, 1959) as well as Putney & Putney (1962) came the expectation
that superior nursing home/housing administrators could be identified by their peers within the profession.

SRI had a test instrument based on assessment of strengths in ten areas of management ability relevant to nursing home administrators. The areas are compatible with theory previously described in this chapter. The SRI instrument appeared an appropriate tool to discriminate between the identified groups. The researcher sought to determine whether or not the reputational approach and SRI testing would lead to similar findings regarding group membership. The researcher further sought to determine whether peer nominated High Reputational administrators and those scoring high on the SRI test would demonstrate "systems" views as previously defined in Chapter I.

As a result of literature review and the researcher's interests, the following hypotheses were developed:

$H_1$ The reputational approach, using nominations by peers within the profession, can identify superior/outstanding nursing home administrators.

$H_2$ The SRI survey instrument will discriminate the High Reputational administrators from the sample of Typical administrators as measured by total SRI score.

$H_3$ The SRI instrument will discriminate between the two groups on SRI subscores.
"High SRI" and High Reputational administrators will state broad, comprehensive, "systems" views and approaches to management/administration/leadership.

Other research questions and issues were also explored. Achievements as "output requirements" (Reddin 1970, p. 329) are related to the definition of managerial effectiveness in Chapter I. Therefore, achievements are an important indicator of effectiveness for both the administrator and the facility. Accordingly, the researcher tried to determine whether the quantity and types of achievements were related to differences between groups. Growing awareness of the importance of management literature led the researcher to explore whether and to what extent nursing home/housing administrators had formal education in management. Because the researcher sought to identify a superior group, perceptions of self-effectiveness were seen as a potential source of insight. This led to the question: Do High Reputational administrators have higher self-effectiveness ratings than Typical administrators?
CHAPTER III
METHODOLOGY

Introduction

The study sought to determine if peer-identified high reputational nursing home administrators possessed characteristics in common. This group was contrasted with a comparison group, labelled Typical. Once identified, these distinguishing qualities were analyzed in order to understand the qualities and skills of the successful nursing home/housing facilities administrator. In addition, the ability of the SRI instrument to correctly assess these management traits was tested.

At first, a quantitative study, using a proposed sample size of 25 High Reputational and a control group of 25 Typical administrators appeared adequate to test this study's contentions. However, several unforeseen circumstances required adjustments to the planned research. First, the High Reputational group was significantly smaller than expected. Only 11 High Reputational administrators were nominated by other administrators in recognition of the high quality of their work. Also, the time required to complete the SRI questionnaire and the functional questionnaire proved
to be too long for phone interviews. Hence, all interviews were conducted in person. These on-site visits and tours of facilities proved to be much more meaningful in acquiring rich and important detail. Each meeting was taped, and the transcripts of these tapes contained insights and commonalities warranting detailed content analysis. For these reasons, the style of research was altered to include qualitative and quantitative analysis.

Applicability of the Qualitative Approach

Styles of management and contributions of administrators influenced the development and texture of their organizations. Qualitative methodology was useful in assessing variables contributing to success of administrators, particularly in view of the small sample size. The constant comparative method of joint coding and analysis was used to identify patterns of administrator behavior, to categorize these patterns and to develop concepts. This method used "explicit coding and analytic procedures" as described by Glaser and Strauss (1967, p. 102) for analyzing interview transcripts. The trustworthiness of the data was enhanced by coding the qualitative data and making comparisons until categories and concepts emerged. It was necessary to revise concepts as the material was reviewed. According to Lincoln and Guba (1985), the aim of
naturalistic inquiry "is to develop an idiographic body of knowledge in the form of 'working hypotheses' that describe the individual case" (p. 38).

Qualitative methodology allows for development of additional categories of interpretation, if theoretical significance is observed (Lincoln & Guba, 1985). According to Bogdan and Taylor (1975), ideas and hypotheses are refined during analysis of qualitative data. Further, they state that previously overlooked ideas and hypotheses can emerge. For example, the Substantial Achiever subgroup emerged during review of data and seemed of value for additional study.

Data analysis, according to Bogdan and Taylor (1975), "refers to a process which entails an effort to formally identify themes and to construct hypotheses (ideas) as they are suggested by data and an attempt to demonstrate support for those themes and hypotheses" (p. 79). The researcher attempts to "demonstrate the plausibility of his or her hypotheses" (Bogdan & Taylor, p. 80). Although statistical methods are available for testing hypotheses, the use of those procedures, they state, will not result in proving the hypotheses.

Bogdan and Biklen (1982, p. 112) state that "quantitative data is often included in qualitative writing in the form of descriptive statistics." However, "there are no canons, decision rules, algorithms, or even any
agreed-upon heuristics in qualitative research to indicate whether findings are valid" (Miles & Huberman, 1984, p. 230). The researcher uses descriptive statistics and Mann-Whitney U tests to analyze data and to test hypotheses in the quantitative section of the dissertation. In the qualitative section, research questions and ideas regarding the Substantial Achiever subgroup, achievements, and other group differences are presented. Evidence in support of $H_4$ is considered in that section.

The sample provided a broad range of information. It appeared that as interviews continued, previously stated information was confirmed and less new information was generated. According to Lincoln and Guba (1985), one should expand a sample until "redundancy with respect to information is reached" (pp. 233-34). At that point, they state, data collection may be terminated.

**Sampling**

A High Reputational group was identified through peer nominations. A control group of Typical administrators was randomly selected from not-for-profit facilities within southwest Ohio.

Nominations for the High Reputational group were made by administrators of not-for-profit, philanthropic nursing homes/housing facilities in Ohio. All facilities are members
of AOPHA which represents the interests of not-for-profit long-term care facilities in Ohio. During workshops and meetings sponsored by AOPHA, for administrators and other managers, nomination forms were distributed and explained to the participants. To further facilitate response, return envelopes were attached to each form. The potential group to be reached included 120 administrators. In addition, the responses of second-level managers were sought. Although the nominations were anonymous, the nominator's title was requested in order to verify the types of positions held by respondents. Sixty-six nomination forms were received. In addition, receipt of a major award by AOPHA was counted as a nomination because the Awards Committee actively sought to recognize outstanding contributions in the field of aging. Similar to the approach of this study, the Awards Committee based its selections on peer nominations.

An administrator who received four or more nominations was placed in the High Reputational group. Only 11 met this standard. The researcher succeeded in interviewing 9 of the 11. The comparison group of 14 was selected randomly from the three southwest Ohio regions of AOPHA.
Data Collection Instruments

Selection Research, Inc. (SRI) models the selection process of executives around the characteristics of highly successful performers (Erickson, 1987). Permission was obtained from SRI to use the structured questionnaire, "Home Administrator Perceiver," for assessment of nursing home administrators. The questionnaire tests for the presence of "Themes," characteristics which have been identified as important for success in nursing home administration. SRI analyzed tapes of interviews with the participants in this study. Transcripts and scored worksheets were returned to the researcher.

In addition to the SRI questionnaire, a "functional" questionnaire developed by the researcher, was administered. The term functional was chosen because it focused on specific job content and tasks. This questionnaire contained indicators of effectiveness and achievement to be compared with results of the SRI Perceiver. Subject areas covered were adapted from the competency areas of the definition of professional practice and the certification process for nursing home administrators developed by the American College of Health Care Administrators (1980). Please refer to Appendix B for the questionnaire and the variables assessed.
The questionnaire was designed to assess administrators' achievements in relevant subject areas. The categories were validated by a national survey as relevant to the work roles of nursing home administrators (Burmeister, 1977). These areas are: community relations; personnel management; financial management; departmental management; planning, organization, and control; and resident care and services (American College of Health Care Administrators, 1980). Data concerning achievements was related to theories of management effectiveness. Please refer to the Literature Review for further details of research on areas of practice.

A demographic questionnaire was also completed for each participant. Questions included information on age, gender, length of time in present position, degrees, education in management, etc. For the complete demographic questionnaire, please refer to Appendix B.

Validity of SRI Perceiver

A study by SRI (1983), compared the predictive validity of the SRI Perceiver by using supervisor ratings of a sample of nursing home administrators. High ratings were equated to recommended or highly recommended SRI ratings. Conversely, low ratings by supervisors were associated with low SRI recommendations (Selection Research, Inc., 1983). Results of the study indicated the SRI Perceiver had significantly
predicted strengths in areas highly rated by supervisors in evaluations. Such strengths included the administrators' abilities to maintain constructive relationships with the multiple constituencies of a nursing home, skills in general administration, staff development, in-service training, and in the implementation of an overall resident care program.

Additionally, an earlier study prepared by SRI for the American Lutheran Church (Lorenzen, 1980) examined the internal validity of the interview process as used in this research. All ten themes showed positive correlation to the total score, p<.05. Of the 50 questions, 44 had significant correlations with their respective themes. The greatest amount of variability in total score was attributed to the themes labeled "Individualized Perception" and "Arranger." Kuder-Richardson Formula 21 procedures showed an internal item consistency of 69%, and 50% of questions had a significant correlation with the total interview score.

Data Collection Procedure

Administrators were initially approached with a phone call. The opening statement was, "I am calling to request your help in a study I am conducting for my doctoral dissertation. It is a study of the characteristics important for success in our profession. The study has been reviewed and approved by AOPHA and the Professional Development
Committee. Our association feels this is a worthwhile project that can provide information we need. Can we set up an appointment at your convenience?" All those called agreed to participate.

At the beginning of the interview, the following statement was read:

If it is all right with you, I am going to ask you some questions about your opinions toward your practice of nursing home administration. There are no right or wrong answers. Replies will be in strict confidence. I need to record our conversation in order to collect the data. No individual will be identified in any way. I know you are busy, and your time is limited, but I believe the findings of this study will be useful to us as administrators. I will share the findings and would be happy to send you a summary. It will take at least one and a half to two hours to complete this.

All subjects were willing to extend additional time if needed. In three cases, the questionnaires could not be completed in one session. It was necessary to schedule another appointment.

The researcher first administered the SRI Perceiver Questionnaire, then, the functional questionnaire. These were followed by the demographic questions. The entire session was recorded. No break was taken unless requested by the administrator. A tour of the facility followed. The entire procedure generally required from 2-1/2 to 4 hours.
Data Analysis

Data obtained from the SRI questionnaire and the functional questionnaire was described in tables, using means, percentages, and frequency of occurrence. In all instances, the mean or average refers to the arithmetic average.

Nine High Reputational administrators and 14 Typical members of the control group completed the interview process. From this control group, a subgroup of five was identified because of its high number of achievements. This subgroup, called the Substantial Achievers, was considered in the qualitative analysis.

Tapes of the SRI Perceiver questionnaire were sent to SRI in Lincoln, Nebraska for evaluation. Scores were received for each participant in the study. The questionnaire consisted of five questions for each one of the ten themes, and each question had a value of one point. Tables were prepared to show SRI scores by each category of participant: High Reputational, Typical, and Substantial Achievers. However, the qualitative subgroup is discussed separately in Chapter IV.

Because the sample size was small, non-parametric statistics were used. The Mann-Whitney U, with an acceptable alpha level set at .05, was used to test for differences.
between the High Reputational and Typical groups in the following areas:

a. SRI Perceiver overall scores,
b. number of SRI predictive subscores,
c. scores on the "Arranger" theme,
d. scores on the "Individualized Perception" theme.

The functional questionnaire was designed to elicit achievements in the most important areas of administration. In order to compare the groups of participants, each administrator's achievements were listed and placed in categories. To establish reliability of major versus routine achievements, six judges, five of whom were nursing home/housing administrators, and one of whom was an experienced long-term care professional for the state association, (AOPHA), rated the achievements as major or routine. Major achievements were those considered to be beyond normal expectations, requiring extensive planning and mobilization of human and financial resources. All achievements rated as major were given the number 1. Routine achievements were those necessary to operate facilities and to remain abreast of the changes and trends of the nursing home field. Such achievements were given the number, 2. Consensus was considered to be reached when four of the six judges agreed on the rating.
The Mann-Whitney U was also performed to assess differences between the High Reputational and Typical groups with respect to achievements and self-effectiveness ratings. The number of achievements of administrators by group was tested at the .10 level of significance. To assess self-effectiveness, each administrator was asked to rate his/her effectiveness on a scale of 1-5, for each area of practice. The researcher calculated the mean for each administrator for use with the Mann-Whitney test. The .05 level of significance was used.

For the qualitative analysis, the Typical group of 14 is separated into the Substantial Achievers, n=5, and the "other" Typicals, n=9. Profiles are presented to demonstrate that the groups are different. This is followed by excerpts from SRI transcripts in five areas of administrative practice. The transcripts proved to be a rich source of data. Content analysis enabled the writer to glean knowledge, techniques and approaches developed by administrators during their years of practice. The constant comparative method was used to generate categories and properties. Incidents applicable to each category were compared (Glaser and Strauss, 1967). Such data may be obtained from interviews, observations, documents, etc. The researcher used SRI transcripts, the writer's functional questionnaire, and observations during site visits to
identify responses that were characteristic of the three
groups. Transcript excerpts were chosen to demonstrate
differences by group in administrators' ability to
conceptualize approaches that are meaningful and of value to
the profession. In the next section, achievements are
presented descriptively by category, to indicate that the
groups are represented by administrators who differ in their
approaches, complexity, and depth of contributions.
CHAPTER IV
FINDINGS AND DISCUSSION

Introduction

The data were analyzed both quantitatively and qualitatively. For this reason, the chapter is divided into three sections: (1) Quantitative Analysis. (2) Qualitative Analysis, and (3) Summary; Nature of Findings. When the research began, only two groups were defined—High Reputational and Typical administrators. However, as the data were collected and analyzed, a third category—Substantial Achievers—emerged.

In Section I, Quantitative Analysis, data, including the number of achievements, self-effectiveness ratings, SRI scores, and education, are presented and discussed quantitatively. By comparing and contrasting the data on the two original groups—High Reputational and Typical—the testing of all but one hypothesis is possible. Additionally, a description of the subgroup Substantial Achievers is provided by using quantitative analysis.

In Section II, Qualitative Analysis, the data on the three groups—High Reputational, Substantial Achievers, and other Typicals—are presented and discussed to make clear the
similarities and differences between the groups. Of the original hypotheses, only \( H_0 \), which states that High Reputational Administrators will express broad, comprehensive, "systems" views and approaches to management, administration, and leadership, is tested using qualitative data.

In Section III, Summary and Nature of Findings, all hypotheses and all three groups are discussed with consideration of both quantitative and qualitative analysis.

**Section I: Quantitative Analysis**

Findings analyzed quantitatively are presented in four units labeled A, B, C, and D. The first three units address specifically mentioned hypotheses and research questions as tested by the findings. The fourth unit, Unit D, quantitatively describes the Substantial Achievers subgroup of the Typical group.

**Unit A: Response to Hypothesis \( H_1 \).** In this first unit, demographics, the number of achievements, and the self-effectiveness ratings are used to test hypothesis \( H_1 \), which states that the reputational approach can identify superior/outstanding nursing home/housing administrators, and the research question which explores whether High Reputational administrators have higher self-effectiveness ratings than Typical administrators.
The sample consisted of 23 nursing home/housing administrators. On the basis of four or more peer nominations, 11 administrators were designated High Reputational. The researcher was able to interview nine of the 11 people nominated. Data are for those nine High Reputational and 14 Typical administrators, who were selected randomly from the three Southwest Ohio regions of the state association. The two groups are assumed to represent high reputational and typical administrators of not-for-profit nursing home/housing facilities for the aged throughout Ohio.

High Reputational's years of service as nursing home administrators ranged from 10 to 25 years, with a mean of 17.2 years. The administrators were characterized with one exception by long tenure in their present positions. The exception was an executive who had made a job change six months before the interview. With the newly relocated executive included, the mean number of years in the present position of all the executives was 13.6. With the newly relocated executive excluded, the mean rose to 15.25 years in position.

In contrast, Typical administrators' number of years experience as a nursing home administrator ranged from a low of six months to a high of 21 years, with a mean of 7.5. The time served by Typicals in the present position ranged from a low of six months to a high of 12 years, with a mean of 3.8.
Both in years of experience and the time served in the present position, the Typical group means are considerably less impressive than the High Reputational's. These findings provide support for hypothesis $H_1$.

Regarding other management experience, six of the nine High Reputational executives reported previous management experience before assuming the position of administrator of a nursing home/housing facility. Their management experience included career changes from other fields as well as related experience within the long-term care field. The total years of management experience ranged from 12 to 38 years with a mean of 22.9 years.

Of the 14 Typical administrators, 11 reported previous management experience before assuming the position of administrator of a nursing home/housing facility. Their experience also included changes from other fields as well as related experience within the long-term care field. However, total years of management experience ranged from six to 31 years with an average of 16.1 years. The Typical group's years of management experience were considerably fewer than the High Reputational group's. The writer makes an assumption that a higher level of management experience is relevant to the expectation of higher level performance. For that reason, the data is used to suggest support for $H_1$. 
The High Reputational executives administered facilities ranging from a 50 bed intermediate-care nursing home to a 600+ bed facility with multiple levels of care. The mean size of the facilities was 347 beds, substantially larger than the Typical group, which managed facilities of 60 to almost 600 beds but with a mean of only 215. Because larger facilities are more complex, further support of $H_1$ is suggested.
Table 1
Comparison of Demographic Characteristics
And Work Experience by Group

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Age</td>
<td>52.0</td>
<td>51.3</td>
<td>44.2</td>
</tr>
<tr>
<td>Percentage Male</td>
<td>89.0</td>
<td>64.0</td>
<td>60.0</td>
</tr>
<tr>
<td>Percentage Female</td>
<td>11.0</td>
<td>36.0</td>
<td>40.0</td>
</tr>
<tr>
<td>Mean Years as Nursing Home Administrator</td>
<td>17.2</td>
<td>7.5</td>
<td>4.1</td>
</tr>
<tr>
<td>Mean Years in Present Position</td>
<td>13.6</td>
<td>3.8</td>
<td>2.5</td>
</tr>
<tr>
<td>Mean Years of Management Experience</td>
<td>22.9</td>
<td>16.1</td>
<td>14.0</td>
</tr>
<tr>
<td>Mean Number of Beds</td>
<td>347.0</td>
<td>215.0</td>
<td>260.0</td>
</tr>
<tr>
<td>Mean Self Rating</td>
<td>4.5</td>
<td>4.1</td>
<td>4.2</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.

Regarding the number of major and routine achievements (see Table 2), the nine High Reputational subjects had 106 major and 101 routine achievements for a total of 207 and means of 11.8 major and 11.2 routine achievements per person. The Typical group of 14 subjects had 74 major and 159 routine achievements for a total of 233, and means of 5.3 major and 11.4 routine achievements per person. High Reputational
administrators had substantially more major achievements per person than the Typical. Routine achievements were very close. In total achievements, High Reputational subjects had a mean of 23 and Typical administrators 16.6 per person. A Mann-Whitney U test was performed using the number of achievements as criterion to compare the two groups. U of 93 was significant at the .10 level, providing evidence to support hypothesis H1.

Table 2

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>*Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Achievements</td>
<td>11.8</td>
<td>5.3</td>
<td>7.2</td>
</tr>
<tr>
<td>Routine Achievements</td>
<td>11.2</td>
<td>11.4</td>
<td>20.0</td>
</tr>
<tr>
<td>All Achievements</td>
<td>23.0</td>
<td>16.6</td>
<td>27.2</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.

Because the High Reputational group had more years experience as nursing home/housing administrators, had more years of other management experience, managed larger facilities, and realized significantly more achievements, it
appears that the reputational approach can identify superior/outstanding nursing home/housing administrators.

To test perceived self-effectiveness, the researcher asked administrators to rate themselves on a scale of 1 to 5, from least to most effective, in the areas of expertise covered in the functional questionnaire (See Table 1). The mean score for the High Reputational category was 4.5, and for the Typical category 4.1. A Mann-Whitney U test was performed. U was greater than 95, showing a significant difference at the .05 level, indicating that High Reputational administrators have significantly higher self-effectiveness ratings than Typical administrators.

The tests suggest that not only do High Reputational administrators' peers see them as superior/outstanding administrators, but High Reputational administrators see themselves as superior. In other words, their self-perception appears valid.

Unit B: Response to Hypotheses $H_2$ and $H_3$. This second unit presents SRI total scores and subscores. Two hypotheses are considered: hypothesis $H_2$, which states that the SRI survey instrument will discriminate the High Reputational from the Typical administrators as measured by total SRI scores, and hypothesis $H_3$, which states that the SRI instrument will discriminate between the High Reputational and Typical groups on SRI group mean subscores. For the
convenience of the reader, tables, detailing and summarizing the findings, are in Appendix C.

In the High Reputational group (See Appendix C, Table 8), three of nine administrators achieved SRI total scores of 25 or above, the score necessary to be considered "passing" by SRI criteria. Individual scores ranged from 17 to 33, with a mean of 23.9. In the Typical group (See Appendix C, Table 9), seven of 14 administrators achieved SRI total scores of 25 or above. Individual scores ranged from 11 to 32, with a mean of 24.8.

Mean SRI scores for the two groups did not quite reach the "passing grade" of 25. Thirteen of 23 subjects scored less than 25. When a Mann-Whitney U test was performed on the total SRI scores, U was 56.5, showing no significant difference at the .05 level. Hypothesis $H_2$ cannot be supported on the basis of this analysis. It does not appear that the SRI survey can discriminate the High Reputational superior/outstanding administrators from the Typical administrators as measured by total SRI scores.

The number of predictive subscores achieved by individual High Reputational administrators ranged from 2 to 9, with a mean of 4.9 per person. The number of predictive subscores achieved by individual Typical administrators ranged from 1 to 8, with a mean of 4.7 per person. Both groups performed similarly, achieving predictive mean scores
on slightly less than half the SRI themes (See Appendix C, Tables 8 and 9).

The High Reputational group (See Table 3), containing nine individuals' theme subscores, achieved four group mean subscores of 2.5 or above, the subscores considered "predictive" by SRI standards. The four predictive themes were: arranger, innovator/activator, focus, and work related. The Typical group (See Table 3), containing 14 individuals' subscores, also received mean subscores of 2.5 or above in four areas: individualized perception, innovator/activator, focus, and work related. The two groups were shown to be predictive in three identical areas: innovator/activator, focus, and work related. The High Reputational group was uniquely predictive in only one area, that of arranger, and the Typical group was uniquely predictive only in the area of individualized perception.
Table 3
Comparison of Mean Subscores by Group

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>*Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission</td>
<td>1.9</td>
<td>1.8</td>
<td>2.2</td>
</tr>
<tr>
<td>Growth Responsiveness</td>
<td>1.3</td>
<td>1.7</td>
<td>1.8</td>
</tr>
<tr>
<td>Individualized Perception</td>
<td>2.4</td>
<td>3.0</td>
<td>4.2</td>
</tr>
<tr>
<td>Arranger</td>
<td>2.6</td>
<td>2.1</td>
<td>2.0</td>
</tr>
<tr>
<td>Stimulator</td>
<td>2.4</td>
<td>2.2</td>
<td>2.2</td>
</tr>
<tr>
<td>Performance Orientation</td>
<td>1.4</td>
<td>1.6</td>
<td>2.0</td>
</tr>
<tr>
<td>Relator</td>
<td>2.2</td>
<td>2.1</td>
<td>2.0</td>
</tr>
<tr>
<td>Innovator/Activator</td>
<td>3.3</td>
<td>3.6</td>
<td>4.2</td>
</tr>
<tr>
<td>Focus</td>
<td>2.8</td>
<td>3.4</td>
<td>3.2</td>
</tr>
<tr>
<td>Work Related</td>
<td>3.4</td>
<td>2.8</td>
<td>3.6</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.*
Discussion of these findings for predictive and non-predictive SRI themes follows. As stated, the arranger theme, by SRI criterion, was predictive, though not strongly, in the High Reputational group only. This characteristic indicates flexibility dealing with people and ideas, an awareness of patterns of interaction, and the ability to organize human and physical resources for productivity. Strength on the arranger theme indicates the ability to utilize human and material resources for accomplishment of tasks (Selection Research, Inc., 1980). Such individuals tend to be open and able to enhance communication that leads to productivity. This characterization fits High Reputational administrators who described themselves as team builders and pursued the concept of excellence in staffing facilities. To be an arranger is essential for those who aspire to be builders of facilities, which requires the ability to mobilize and coordinate human and financial resources.

SRI conceptualizes the arranger theme as placing resources into configurations in a sequence that maximizes both efficiency and effectiveness. A manager with this ability will accomplish tasks more productively than one who is committed to highly structured procedures, tight controls, and who compels staff to adhere to such a system. The more able manager with arranger skills is selective and flexible
in using loose versus tight controls (Selection Research, Inc., 1980).

The concept of "loose-tight" properties is discussed by Peters and Waterman (1982, pp. 318-321) and is presented because of its direct relation to the arranger theme. Though applied to business, the material appears equally relevant to not-for-profit nursing homes/housing facilities. Loose-tight properties, meaning "firm central direction and maximum individual autonomy" (p. 318), co-exist simultaneously. Organizations that adhere to these properties are tightly controlled while at the same time both allowing and insisting on autonomy, entrepreneurship, and innovation from the rank and file. They do this by developing and instilling faith in value systems, by attending to the small details, as well as to the larger aspects.

The arranger concept is also supported by Likert (1961, 1967) whose work is described in the Literature Review chapter of this study. The goal of management is summarized as the ability to successfully encourage and elicit motives which yield favorable, cooperative attitudes. This leads to high motivation and excellent performance, enabling realization of organizational goals while meeting the needs of staff. Ideally, the organization functions as a close-knit social system of interlocking work groups.
Individualized perception was predictive for the Typicals, but not for the High Reputationals. This theme indicates the ability to perceive and appreciate individuality among staff. Strengths, weaknesses and interests of subordinates are understood and managed so as to obtain the best results, while minimizing the effects of weaknesses. The value seen in individualized perception rests on the common belief that staff members who work in areas of their individual interest and expertise will demonstrate higher motivation and more job satisfaction than those who must work in areas outside those interests and expertise. Nurses, for example, may differ on preferences for caring for patients, managing, handling documentation or other facets of the job.

To see how the arranger and individualized perception themes relate to the administrators studied, it is necessary to note the differences observed on visits to the sites. Visits to facilities administered by members of the Typical group generally revealed smaller organizations. Six of nine High Reputationals had large campus arrangements with various levels of care available, such as nursing homes plus more independent assisted levels of care. Two others were planning for new buildings and levels of care. One had a stable establishment and had no plans to expand. Of the Typical, nine of 14 had nursing homes only, with no other
level of care available. Five had nursing homes plus other levels of care. That the average size of High Reputational facilities was 347 beds and the average size of Typical facilities was 215 beds also is important.

A connection can be suggested between the High Reputational's uniquely predictive score in the arranger theme and the large, complex facilities the members manage and between the Typical's uniquely predictive score on the theme of individualized perception and the smaller, less complex facilities they manage. High Reputational administrators have management teams to handle all operational areas and to oversee subordinate supervisors. The premium talent for High Reputational managers is that of arranger, organizing the various parts around the common goal, overseeing communications among team members, and troubleshooting when the machinery of management falters from time to time. The Typical have smaller staff with whom they work more closely than the High Reputational do with their larger staff. Typical are forced to be more directly involved in the assignment of staff and must have or develop more sensitivity to staff members' individual interests and abilities. This is one possible explanation based on available information.

Three themes—innovator/activator, focus, and work related—were predictive for both groups. For all three,
group mean scores were higher for Typical than High Reputational administrators, counter to expectations of $H_3$. See Table 3 for comparisons of group mean subscores.

The innovator/activator theme (see Appendix C for definition) indicates courage and willingness to try new ideas. Such individuals possess ego drive to take charge and like to be leaders. They are adventurous and seek opportunities to accomplish goals and to make things happen.

Focus (see Appendix C) is an attribute of people with high goal orientation. Such individuals set goals for success, both personally and for their organizations. Their goals and objectives are clear. They faithfully pursue their goals and are skilled at making corrections based on experience.

Work-related people (see Appendix C) are always thinking about their work and are not able to let their minds rest. Persons low in work orientation will "check out" mentally from the moment they leave work until they return and "check in" again.

Of the 10 themes in the SRI perceiver, five were not predictive in either the High Reputational or the Typical groups. The other themes are described as follows.

Mission: "The mission theme is evident to the extent that a person has a communicable, altruistic purpose . . . for his or her vocation or profession" (Selection Research,
Inc., 1980). The administrator with a sense of mission is identified with a larger purpose, and his or her life is meaningful in terms of that direction. Uniformly low mean scores of 1.9 for High Reputational and 1.8 for Typical administrators were unexpected. Within the philanthropic, not-for-profit field where most facilities are under religious auspices, one would expect the sense of mission to be very evident. It is possible that the leadership of these subjects was motivated more by ego drive or ambition, than by an altruistic drive.

Growth Responsiveness: Administrators with ability in this area gain satisfaction from growth and development of staff, for example training staff to become future managers. Eight of nine High Reputational and five of 14 Typical administrators described achievements in staff development though their self-satisfaction could not be assessed. This quality is of importance for facilities which must provide essential services 24 hours a day, where vacancies and absences must be quickly covered. Uniformly low group mean scores of 1.3 for High Reputational and 1.7 for Typical administrators were obtained. Data suggests there was more strength in this area than detected by the SRI instrument.

Stimulator: This is closely allied to the Relator characteristic. "This theme deals with the creation of positive feelings in the persons with whom the manager works."
The manager has the capacity to generate positivity, understanding, and enthusiasm" (Selection Research, Inc., 1980). Stimulators are morale builders, as Arrangers are organizers. Group mean scores of 2.4, for the High Reputational group and 2.2 for the Typical group, show weakness in ability to relate to others. This points to weakness in team building skills that enable administrators to draw highly competent people who like and want to work closely with them. These findings suggest administrators more focused on numerical indicators such as financial performance rather than on the human factors. However, High Reputational's team-building skills were evident in achievements and in describing good staff meetings.

Performance Orientation: Those with strength in this theme enjoy measurement "and spontaneously think about measurable results" (Selection Research, Inc., 1980). They believe that staff are more likely to improve performance in activities that provide measurable feedback. When measurements are linked to specific objectives, the effects are motivational. Administrators with strength in this characteristic would seek data to assess performance. They are objective evaluators, constantly aware of and thinking about methods of quantification. Mean scores were low, 1.4 for High Reputational and 1.6 for Typical administrators. It is possible that administrators within this field have
compensating factors that diminish their need for strong capacity in that aspect of their work. For example, the organizational structure can place performance expectations on administrators to compensate for weakness. The Medicaid and Medicare reimbursement systems, to which facilities are subject, are highly structured with numerical indicators. There is also a prevailing belief, undocumented, that not-for-profit charitable organizations are not sufficiently concerned with measurable performance and efficiency.

Relator: Administrators with strength in this area have "mutuality of awareness" with subordinates who feel cared about and have "ongoing rapport" (Selection Research, Inc., 1980). Employees like the person and want to participate in achieving his (her) goals and expectations. The weak group mean scores of 2.2 for High Reputational and 2.1 for Typical administrators were unexpected for such labor-intensive human service settings.

Future studies could address whether the SRI perceiver can adequately discern the cues for strength in the non-predictive areas of Mission, Growth Responsiveness, Stimulator, Performance Orientation, and Relator.

Three Mann-Whitney U tests were performed to test for the differences in subscores as follows:

1. On number of group mean predictive SRI subscores, 
   \[ U = 65. \]
2. On individual Arranger theme scores, \( U = 77 \).

3. On individual Individualized Perception theme scores, \( U = 149 \).

To achieve significance, the critical value \( U \), the test statistic, must be less than or equal to 31, or greater than or equal to 95 (Runyon, 1977). Test one and two given above showed no significant difference at the .05 level. The test of Individualized Perception, test 3, was significant at the .05 level. This significance represents ability of the SRI perceiver to discriminate on only one of the 10 theme subscores. Also this result was not in the direction expected. The Typicals, with less impressive records of achievement, showed more strength than the High Reputationsals.

Predictive themes follow a similar pattern in both groups. It was hypothesized that the High Reputationsals, who are assumed to be higher achievers, would demonstrate significantly higher subscores on the SRI perceiver. The analysis of SRI findings makes clear that the SRI perceiver did not discriminate between the High Reputationals and Typical groups on the basis of SRI total scores or subscores. Both Hypotheses \( H_2 \) and \( H_3 \) were not supported by the findings. It was also necessary to consider the possibility that the administrators were not different enough for the test to detect their differences. Because both groups had
non-predictive group mean scores on six of ten themes, and because all the administrators had proven themselves in their jobs, it appears unlikely that they were at fault for their low scores. Six of 9 High Reputationals and 7 of 14 Typicals, a total of 13 out of 23 subjects, failed to attain "passing" scores of 25 or more on the perceiver. In the opinion of the researcher, the perceiver test could not distinguish validly between the groups or identify good administrators.

Unit C: Education and Areas of Knowledge. This third unit will present findings regarding administrators' education and the areas of knowledge administrators judged important to their work. Appendix E tables provide the details of the findings discussed in this unit.

Many members of both the High Reputational and Typical groups reported degrees containing management-related coursework. Specifically, the High Reputational group of nine administrators reported six bachelor's level degrees and three master's level degrees that had management course content. The 14 Typicals reported one bachelor's level degree and six master's level degrees that had management course content. Continuing education in management also was reported by administrators. Seminars and workshops were the most frequently mentioned sources of training, with a mode of 4 for the High Reputationals and 5 for the Typicals. When
asked what areas of knowledge they deemed important for success, they mentioned several areas of management as well as health care, aging, government relations, etc. Human relations skills, meaning counseling, social work, interpersonal skills, were seen as important by all members of both groups. It appears that 8 of 9 High Reputational and half the 14 Typical administrators had degrees containing management related course content. This suggests a positive relationship between superior performance and management related education.

**Unit D: Substantial Achievers Subgroup.** This fourth unit will present demographic data on the Substantial Achievers, a subgroup of the Typical group. Of the 14 Typical administrators, 5 make up the Substantial Achievers subgroup. The term "other" Typicals is used when comparing the 5 Substantials to the other 9 in the Typical group.

The third group emerged during the qualitative analysis. The transcripts had first been divided into High Reputational and Typical groups, but it became evident from the data on the basis of achievements, SRI scores and commonalities found in the transcripts that a subgroup of five Substantial Achieving administrators could be separated from the Typical group.

The Substantial Achieving group members were younger (see Table 1) than the High Reputational or other Typicals.
High Reputational mean age was 52, and the other Typicals mean age was 55.2. In contrast, the mean age for Substantial Achievers was 44.2.

The five also had fewer years of service as nursing home administrators and had been in their jobs a shorter time than either the High Reputational or the other Typicals. Years of service ranged from six months to over six years with a mean of 4.1 years, while the High Reputational mean was 17.2 and the other Typicals mean was 9.4. The mean time Substantial Achievers were in the present position was 2.5 years, which was also less than the High Reputational mean of 13.6 and the other Typicals mean of 4.5.

Even with less time in the present position, the quantity of mean total achievements per person was highest among the Substantial Achievers—27.2, while the High Reputational mean was 23 and the entire Typical group mean was 16.6 (see Table 2). In the number of major achievements, the Substantial Achievers, with a mean of 7.2, scored higher than the entire Typical group, with a mean of 5.3, but not as high as the High Reputational, with a mean of 11.8.

These Substantial Achiever executives administered facilities ranging from about 125 to 600 beds with a mean size of 260, a figure between the High Reputational mean of 347 and the other Typicals mean of 179 (see Table 1).
SRI total scores ranged from 23 to 32, with a group mean of 27.4, which was higher than both the High Reputational mean of 23.9 and the Typical mean of 24.8 (see Appendix C, Table 10).

Regarding SRI subscores, the Substantial Achievers were predictive on the same four group mean subscores (individualized perception, innovator/activator, focus, and work related) as the Typical group of 14 (see Table 3). They were, in fact, responsible for the Typicals' predictive scores in work related and individualized perception, and when separated, leave the other Typicals predictive on only two themes, innovator/activator and focus. The Substantial group maintains the three in common with the High Reputational group plus individualized perception. Additionally, mean subscores for the Substantial group are somewhat higher than the High Reputational on the common predictive themes.

The above quantitative analysis of age, experience, tenure, achievements, facility size, and SRI total scores and subscores describes the subgroup Substantial Achievers as an emergent recognizable subgroup. Further discussion of this subgroup will be in Section II, Qualitative Analysis.
Section II: Qualitative Analysis

In this section, findings on the three groups—High Reputational, Substantial Achievers (as a subgroup of the Typical group), and the other nine Typicals—are presented. The presentation will be in two units, A and B. Unit A, which provides profiles of the three groups to aid understanding is divided into two sub-units. In Sub-unit 1, General Description, an individual is described in terms of mean demographics and most frequently occurring characteristics, revealed by on-site interviews. In Sub-unit 2, Managerial Description, High Reputational, Substantial Achiever, and other Typical responses to five important areas of management, selected from transcripts, will be provided. Hypothesis H4, which posits that "High SRI" and High Reputational administrators will state broad, comprehensive, "systems" views and approaches to management, administration, and leadership, will be considered. Because the SRI test did not distinguish between groups, the hypothesis is now discussed without reference to SRI. Unit B will present and discuss the similarities and differences between the groups' achievements. Hypothesis H4 will be considered further. The complete lists of achievements are in Appendix D.

Unit A: Profiles. In this first unit, the profiles of the three groups and their responses to five management
issues selected from the transcripts are presented and discussed. The purpose of the profiles is to describe an administrator who is representative of the data collected. Hypothesis H₅ will be considered.

Sub-unit 1: General Description. The High Reputational administrator was a white male, early fifties, 13 years in present position, with a bachelor's degree in business. Much responsibility was delegated to highly qualified middle managers. The executive had board support to be active with the state and national associations for many years. Involvement included chairing committees, legislative action, serving as board member, officer and as president. Other activities included advocacy for improvements in long-term care and community services to the aged.

The administrator assumed the job when the facility was a medium-sized, older nursing home. Because of increasing needs, the administrator planned and coordinated several expansion programs. Both institutional and community services were developed. With growth, management staff were added to handle tasks previously handled by the administrator. The title was changed to chief executive officer with further removal from day-to-day details due to focus on planning and coordination. Ongoing challenges, high job satisfaction and opportunities to experience goal attainment were reasons given for remaining in the position.
The Typical administrator was a white male, mid-fifties, with a master's degree and in the present position less than five years. Though a participant in the professional association and its meetings, in contrast to the High Reputational, leadership roles were not assumed. Programs and services were stable, and expansion appeared unlikely. The facility was more likely to be housed in a functional building not in need of renovation or replacement. The administrator was focused on day-to-day responsibilities, such as developing a stable, well-trained staff, monitoring expenses and maximizing reimbursement. Consideration of new program initiatives was balanced and restrained by weighing the additional demands and risks that would accompany changes.

The Substantial Achiever administrator was a white male, mid-forties, in the position less than five years. Job satisfaction, self-confidence, and high energy level were expressed. The facility was of medium to large size. The administrator was professionally oriented and trained, with a master's degree in human services. The degree was regarded as relevant to the job. The administrator attended meetings of the state and national associations to learn and develop a network of contacts. Though totally invested in operating the Home, some committee assignments in the organizations
were accepted. The many improvement projects in various stages of completion were described with enthusiasm.

The facility was more likely (three of five cases), to be a large nursing home with an older building in need of renovation or replacement. Extensive, time consuming planning and fundraising were issues being addressed. The administrator saw many needs for improving direct services as well as other operational areas. Dissatisfaction was expressed with the performance level of some key staff. How to replace persons with long tenure without causing stress within the organization was a concern. Direct care of residents was improving, for example, in restorative and rehabilitation therapy programs. The administrator was pursuing long-range goals with the board that included renovation, construction and additional services.

Sub-unit 2: Managerial Description. The qualities of the High Reputational, Substantial Achiever, and other Typical groups of nursing home administrators were best identified by their deeds and responses. The researcher found "common denominators" of High Reputational subjects. Among these were strong team orientation, with stress on sharing, input, and participation. Staff were seen as sources of creative ideas. There was commitment to comprehensive planning with board and staff to develop shared goals and objectives. For residents, there was an underlying
commitment to a maximum of freedom and choices. These qualities occurred more frequently and forcefully in the High Reputational group as can be seen in the comparison of comments made by the three groups to explain their approaches to important management functions. The researcher focused on the following management issues because they demonstrated differences between the groups: approaches to building morale, prioritization, conducting effective staff meetings, attaining highest quality of resident care and pursuing creativity. Table 4 shows the number of administrators, by group, who made innovative statements regarding their approaches to these areas. The following is a digest of recurrent characteristic comments by subject area. These in turn are followed by evaluation of the statements.
Table 4

Innovative Approaches to Management by Frequency of Mention

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>&quot;Other&quot; Typical Group, N=9</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Morale</td>
<td>4</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Prioritization</td>
<td>3</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Staff Meetings</td>
<td>4</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Quality Care</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Creativity</td>
<td>2</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the original Typical Group of 14.

Approaches to Building Morale

Morale is very important because staff unhappiness will adversely affect the residents. High Reputationalists expressed importance of quick response, fairness, and commitment to the staff's well-being. This shows deeper insight than the other Typicals who expressed importance of showing appreciation. Substantial Achievers stressed open communication and clear expression of expectations, which are also important but not as central as the points made by the High Reputationalists.

The High Reputational: "To maintain morale requires quick response to concerns of employees. Treat staff with absolute fairness, even when the administrator cannot give
them everything they want. To maintain morale, all the staff, the lowest as well as the highest, must feel that what they are doing is important and that they have a part in making decisions and in making things happen."

The Typical: "It's important that the administrator be very visible, to let staff know they are appreciated.

The Substantial: "An open line of communication is an important ingredient for controlling the temperature of your organization. . . . Have a philosophy and stick with it. Let people know where you stand."

Approaches to Prioritization

High Reputationals described well-developed planning programs while Typicals and Substantial Achievers lacked structured approaches. Comments of Substantials, however, seemed more pertinent than those of the other Typical administrators.

The High Reputational: "We have set priorities through a very extensive analysis, a program of strategic planning, beginning with the staff of the organization and then after a few months, bringing all of the trustees on board, in terms of an in-depth process. Through the implementation of this plan, the board and staff made and established priorities."

The Typical: "Prioritization has to be a cerebral, deliberate process. However, in this industry we are always
subject to the 'squeaky wheel gets the grease' kind of prioritization."

The Substantial: "You choose the most critical. . . . You never quite get one thing completed. And you can't because it is like the domino theory. You are so interlocked and interrelated that you have to start in kind of a circle around you, building up together. . . . The first priority is anything directly related to basic care or concern about a resident. Regulatory compliance is a close second. Employee relations is also a high priority."

Approaches to Staff Meetings

High Reputational administrators encouraged full participation, welcomed controversial issues, sought staff consensus on issues and used their ideas. Their meetings were stimulating, at times intense, with high expectations of staff to produce useable ideas. Typical administrators understood how to run a meeting; however, their meetings were forums for routine rather than spirited, controversial discussion. Substantials appeared effective at conducting productive, participatory meetings.

The High Reputational: "The best staff meeting is where everybody has input and then feedback, where everybody gets into it and there is an easy balanced communication between staff members, where everybody can really feel free to put out their ideas and others respond, but no one is put down
for any ideas. In a good staff meeting you feel that something has been accomplished, it is time limited and does not drag out."

The Typical: "The first key is to have at least a minimal agenda that you want to talk about. Let people know what you're going to be discussing. The key is for the staff to be prepared and to participate. There should be a lot of give and take."

The Substantial: "A good staff meeting has an agenda and is one where everyone is not in agreement. There are opposing points of view and discussions on those points of view. There are not always solutions. But at least there is some working toward solutions. From the opposing views there is an ability to reach a middle ground where you have the best solution to whatever problems you are trying to resolve. A good staff meeting has input from every member."

**Approaches to Attaining Highest Quality of Care**

High Reputational administrators stressed providing residents with maximum freedom, choices, privacy, and a cheerful, stimulating, active atmosphere. The home should provide inviting, interesting small environmental spaces, along with maximum interaction with the community. The Typical administrators' responses reflected expectations for a clean, comfortable environment with respect for residents choices and independence, within limits. Similarly,
Substantial Achievers stressed the need for quality services and a caring staff.

The High Reputational: "In an excellent home, the residents have choices. They are given as much freedom as they possibly can have. Our staff, whether nurses, cooks, housekeepers, etc. are extensions of their person."

The Typical: "If there are no odors in the home, we know it's clean. You don't have to see or chat with many patients to know whether they are adjusted, content, and feel comfortable. You can walk down the hall and know whether staff are reasonably happy."

The Substantial: "An excellent home should provide recognized quality service through well-trained, caring staff. A good home should be constantly innovative. It should try to come up with ideas to deal with and respond to changing needs. You must give the impression that you are listening and that carries through the entire organization."

Approaches to Creativity

High Reputational administrators gained creative ideas from their teams and had the resources to turn concepts into programs. Typical administrators, with more routine concerns, focused on details of daily management. Substantials scanned their environment for ideas and were receptive to creative approaches.
The High Reputational: "I have surrounded myself with stimulating imaginative, creative people. . . . Ideas are generated either from people or from concert with people. We have a very strong team orientation. We have management retreats where we let our minds soar and do a lot of brainstorming. Out of that has come some very significant programs.

The Typical: "Ideas are obtained from "the network, literature and common sense."

The Substantial: "Ideas are obtained from "just thinking, dreaming about things."

"Lots of interaction with other people."

"You have to take in everything around you."

"Start with something you know and put it together another way."

All responses demonstrate dedication to serving residents, and the ability necessary to administer the facilities. However, a pattern emerges in the tone of the responses.

The High Reputational, as leaders of larger organizations, after years of experience, and with more resources--money and personnel--describe a world that tends to operate at the boardroom level. Preoccupations tend to be more conceptual and assume an available team of talented professionals to whom details can be delegated.
The nine Typicals, administering smaller organizations and with more limited resources, demonstrate more responses at the day-to-day level. They deal face-to-face with the many staff around them, delegate less (some because they have fewer delegatees, others perhaps because they personally are less inclined to delegate), and are more directly involved with administrative detail than with philosophical direction and long-term goals.

The five Substantials, demonstrate a middle ground between the down-to-earth other Typicals and the more conceptual High Reputationals. Working at the same class of facility with the other Typicals, they perform their day-to-day duties as expected of such executives. However, they perform with more energy and imagination and perceive a greater range of options than the other Typicals. What has emerged may be a group of potential, future High Reputationals who have the ability to make that transition. They display a broader array of approaches to their work, a greater range and a somewhat deeper level of relevant professional training.

The High Reputational responses, especially when viewed in contrast to the Typical responses, reveal that these administrators are "planners" and "conceptualizers," leading to support for hypothesis H₄.
Unit B: Achievements. In this second unit, High Reputational, Substantial Achiever, and other Typical administrators' achievements will be presented and discussed qualitatively and according to achievement category. This section attempts to demonstrate some differences between the High Reputational, other Typicals, \((n=9)\), and Substantial Achievers.

Personnel Management: High Reputational executives described progressive, innovative approaches to personnel management, compatible with literature of Chapter II (Blake et al., 1981; Likert, 1967; McGregor, 1980; Olsson, 1968; Raider, 1985). These authors maintain that this type of practice can lead to very good employee relations and high performance. The Substantial Achievers made important and significant advances. But they did not appear to approach the level of the High Reputational group. Accomplishments described by the other Typical executives are necessary and desirable. However, they are not as innovative or progressive as examples from the High Reputational group.

High Reputational executives were totally committed to their staff's well-being, satisfaction, development and participation. For example, they utilized staff personnel advisory committees. These groups met regularly and provided suggestions that were highly valued. Revisions of policies were made with substantial, ongoing input. Investment was
made in staff development by High Reputationals. For example, promotional job categories were established to retain good staff by providing upward mobility. Quality training programs were offered.

High Reputational executives strived to provide generous, progressive wage and benefit packages, and flexible schedules to recruit and retain quality staff. They were consistent in their commitment to developing highly motivated staff teams. Progressive approaches resulted in low rates of turnover, high levels of staff satisfaction, and high morale. Careful attention to recruitment, selection, training, motivation, incentives, recognition, etc. contributed to progress toward solving the problems of absenteeism, turnover, etc. that plague many facilities.

In general, the Substantial Achievers made improvements such as revising personnel manuals, job descriptions, and upgrading fringe benefits. There were recognition programs for staff and efforts to foster growth and development. Under the guidance of the Substantials, training programs were being developed and improved for their facilities. Staff were being given opportunities to attend workshops. Policies and procedures were being developed and improved to deal with absenteeism, evaluation, etc. They were trying to improve the level of staff by emphasis on selecting quality applicants. They also were working toward replacement of
workers with performance problems. There was recognition of
the need for staff participation. For example, task forces
and committees were organized to identify problems and
provide input for improvements. Executives were tackling
problems that they felt had to be "cleaned up." Executives
tended to inherit situations that required much effort to
correct.

For the other Typicals there was general awareness of
maintaining and improving basic personnel functions.
Personnel policies and job descriptions were being reviewed
and revised. Wages and fringe benefits were being upgraded
by some administrators. There was variation among these
typical administrators, ranging from executives who strived
to offer competitive wages and benefits to others who offered
as little as possible. Other Typicals were aware of the need
for staff input. However, there was much less emphasis on
mechanisms for employee suggestions and feedback like those
found in the High Reputational group. They did not use
formal committees for input.

Departmental Management: One of the common denominators
of the High Reputational group was its members' emphasis on
and striving towards development of highly qualified key
personnel who could function as a close-knit cooperative
team. This is consistent with theory of management
effectiveness as discussed in the Literature Review, Chapter
In comparing the Typical Group with the High Reputational Group, a major difference is the latter's greater stress on developing strong departments by recruiting outstanding professionals. This may also be related to the larger mean size of High Reputational administrators' facilities which creates a greater need for such structuring. Large facilities also can generate more revenue and may be better able to offer the higher salaries necessary to attract highly qualified people.

High Reputational administrators were very sensitive to the support their subordinates needed. They encouraged openness and sharing as high priorities. Their supervisory staff members were working together on solving problems. This appeared to the researcher as a value shared within the agency, though staff would have to be surveyed to verify its existence. One executive echoed the general sentiment of the High Reputationals by referring to his key staff as "a fine-tuned" team.

The Substantial Achievers and other Typicals seemed generally less sophisticated in this area. Teamship, openness, sharing and participation did not come across nearly as strongly in the interviews. They described tasks such as teaching supervisors to monitor attendance and to be
responsible for their budgets. They did give supervisors responsibility, include them in goal setting, and solicit their input, but their style was not as deep or broad.

One of five Substantial administrators and two of the remaining Typical administrators mentioned building team concepts of openness between department heads. In contrast, eight of nine High Reputational showed evidence of team development, with generally greater depth and commitment.

Four of nine High Reputational administrators mentioned reduced turnover, while only two of the nine other Typicals and none of the five Substantial Achievers mentioned reduced turnover.

Expansion and Construction: Only by visiting the facilities could one gain an appreciation for the greater magnitude of achievements in expansion and construction by the High Reputational group. Of nine individuals, six presided over attractive campus-type complexes. The executives had been closely involved with the development of those complexes and had taken part in all phases of planning. Of the other Typical group, six of the nine managed single-building facilities.

High Reputational executives were heavily involved in expansion, construction and development of new programs. The nine administrators described 22 expansion and renovation projects. They also developed Alzheimer's units, adult
daycare, respite care, sheltered workshops and extended community based services to neighborhoods surrounding their facilities. Community-based programs included geriatric assessment centers, home health care, meals on wheels, transportation, etc. They planned and implemented apartments for congregate, semi-independent living and other forms of residential care. Their management teams could perform feasibility studies for expansion of facilities, conduct the planning, and undertake management of additional facilities.

Of the Substantial Achiever group all five managed single-building facilities. They were involved in expansion and construction but to a much lesser degree. These individuals mentioned less complex projects, such as adding additional beds, re-designing and constructing a new kitchen, and obtaining a security system for safety of residents to detect "wanderers." They worked to improve the management of their physical plants with projects to promote energy efficiency. Two out of the five were in process of planning for expansion and construction or renovation. Alzheimer's Units were being established by two facilities.

The other Typicals also did not develop the extensive campus type complexes that characterized the High Reputational Group. They planned and developed specialized programs such as Alzheimer's Units and added more beds to their facilities. They improved the preventive maintenance
of their buildings and planned renovations for older buildings. Only one Typical subject was actively involved in planning a major project of expansion and construction.

The Substantials were all interested in planning for expansion or renovation, and development of new programs. A majority of the other Typicals did not show this interest or enthusiasm. Three of 9 other Typicals were not interested in or not involved in plans for expansion. Two had done planning for expansion, but the plans were not executed.

Seven of nine High Reputational administrators recognized their organizations as part of a larger system and had extensive community-based services. None of the other Typicals and only one Substantial Achiever mentioned developing community-based services.

Financial Management: High Reputational administrators with larger organizations and more resources had experienced financial managers and sophisticated computer systems. They described their financial managers as highly qualified. The Typicals had fewer resources for sophisticated financial management. They were generally without computers and more likely to be personally responsible for accounting functions with the aid of a bookkeeper or outside accountant.

The High Reputational executives, characterized by large facilities, had the financial resources and expertise to acquire advanced, computerized financial management systems.
The homes could maximize reimbursement because staff had become sophisticated in dealing with the Medicaid and Medicare payment systems. These executives took advantage of advances in computerization for medical and nursing records in addition to all aspects of finance, payroll and budget. One executive, using consultants, developed a comprehensive computer system that was marketed to the field. Another executive was author of a book on financial management. They had highly qualified financial managers and could boast of being "state-of-the-art" in all financial areas. Large size, high reputation, resources, and the ability to acquire sophisticated computers and assemble quality teams seem to correlate. Findings suggest that outstanding people are drawn to settings where these things are possible. Further, the settings might not have developed without an outstanding person as leader.

The Substantial Achiever group had significant financial achievements, approaching the level of the High Reputational group. Its members had improved their methods and systems for accounting, monitoring costs and budgets. Three of the five were involved in computerization. Executives of two large multi-level of care facilities described extensive computer systems for accounting, patient charting, and personnel records. They felt every aspect of their financial management system was functioning at an optimum level.
Financial achievements of the other Typicals were of lesser magnitude than the High Reputational or Substantial groups. They had, in some cases, improved ability to qualify for Medicaid reimbursement. They also cited improvements in their accounting systems and kept rate increases to a minimum. None of the nine other Typicals reported computerization as an achievement.

Resident Services: The High Reputational executives had developed a variety of sophisticated programs involving families and residents. The Typical executives, many of whom managed much smaller facilities, tended to describe more limited activity programs.

The High Reputational group saw needs and had management and financial resources to act on them. For example, support groups for families of Alzheimer's victims were formed, bereavement groups were established, and regular monthly meetings were held with resident groups. Meetings were held to involve families in the treatment process and to provide direct access to staff in decision-making positions. There were "open door policies" so that families felt able to get questions answered as well as complaints addressed. All the High Reputational executives had established effective residents councils. Family nights were held on a regular basis to provide opportunities for exchange of views and complaints as well as programs, such as speakers and
discussions. Family educational, social, and recreational programs were extensive. Family conferences were used as a tool involving residents and families for participation in the care-planning process. Large, highly-developed volunteer programs were well established. Physically capable residents also were encouraged to serve as volunteers. High Reputational executives made these commitments to the area of resident services.

Important advances for the Substantial Achievers included improvement of rehabilitation services. Resident councils were developed and executives were available for face-to-face meetings with residents on issues. Despite presiding over large facilities, executives made themselves available for many individual contacts with families. They were developing more sophisticated treatment services such as subacute stepdown units, the ability to treat respirator patients, and other programs long established by the High Reputational subjects.

The other Typical executives described significant achievements but of lesser magnitude. They discussed specific activities, whereas High Reputationals mentioned programs. Family nights, resident theater, cooking groups, taking residents out to restaurants and shopping centers were described as achievements. Spouse support groups, support groups for families of Alzheimer's victims, newcomers'
groups, resident councils, music therapy, choir, and pastoral care were mentioned. While these are excellent activities, they are not as all encompassing or varied.

Community Relations: The High Reputational group had professionals for public relations efforts while the Typical group, generally lacking personnel resources, were limited to simpler efforts. High Reputational executives' facilities were more sophisticated in the area of community relations. As a result, facilities received frequent media coverage and their publications were widely distributed. Their high visibility enhanced the facilities' reputations for leadership and excellence. Other facilities, lacking these resources were more dependent on word-of-mouth relationships to inform the public. High Reputational executives and their public relations professionals were involved in issuing press releases, frequent speaking engagements, and producing quality brochures and newsletters. There was emphasis on a high level of positive communication with board members to keep them informed.

The Substantial Achiever group mentioned newsletters and activities, such as hosting facility tours, membership on community planning committees, speaking engagements, and serving on boards of community agencies as necessary to promote the image of the facility. The ability to do
successful fundraising in the community was also seen as a barometer of successful community relations and acceptance.

The researcher found that involvement in community relations was fairly minimal for the other Typicals, not a highly developed area of involvement. Generally, it was merely another of the myriad duties falling upon the administrator. They lacked the time and/or expertise to perform the function. Also, they could not justify or afford funding for a paid public relations professional. Communication through newsletters was mentioned as an achievement, along with staff and administrators' membership on committees of community organizations. Placing articles in newsletters of other organizations was seen as important. Attending meetings of fraternal, business and/or professional organizations in the community was seen as desirable.

Planning, Innovations, Linkages and Contributions To The Field: Extensive involvement in these areas was the domain of High Reputational leaders of large, sophisticated facilities. Most Typicals were not involved in this arena. They were more concerned with daily operations. Their many day-to-day responsibilities did not permit the time, and their facilities lacked the resources for such involvement.

For the High Reputational group, projects included a model teaching nursing home, a university affiliated gerontological institute, area training centers, and research
foundations. University and hospital affiliations supported training for medical students, nurses and other personnel. High Reputationals were teaching, writing and serving as guest speakers on issues of aging. They served as presidents of the state and national professional associations. As a result, other organizations and professionals frequently sought consultation from them and their staff. High Reputationals also had well-developed strategic planning programs for board and staff. Successful fundraising enabled program development and expansion. An executive described his facility as a catalyst for developing community based services for the aging.

The Substantial Achiever group showed efforts in this arena but far below the level of the High Reputational group. They described internal projects, such as improving policies and procedures and replacement of major equipment. They were establishing strategic planning processes with boards, but efforts were recent. An executive described use of the regular board and staff meetings for planning purposes and for defining the mission, goals, and objectives.

Among the members of the Substantial Achiever group, there was emphasis on developing relationships with colleges and universities for clinical training of nurses and nursing assistants. Executives were serving as preceptors to train students in gerontology and nursing home administration.
There was some teaching being done at the university level in gerontology. Institutions were involved with fairly extensive staff training and, in one case, agreements were made with local schools to give credit for courses offered by the facility to its staff.

Most other Typicals had minimal responses. Planning took place at monthly board meetings. Two of the nine had training affiliations with universities and colleges for nurses, nursing assistants and medical students. It appeared to the researcher that demands of residents, families, government regulations, and heavy workloads absorbed all the time available. The executives and key staff could not devote time or energy to the above activities.

The High Reputational administrators again demonstrated recognition of their organizations as part of a larger system. Seven of the 9 mentioned 24 interorganizational affiliations. One of 5 Substantial Achievers mentioned two interorganizational programs. Two of the 9 other Typicals mentioned 4 interorganizational relationships.

Conclusions

Two important conclusions can be drawn from the qualitative analysis of achievements. First, hypothesis H₄ is provided more support. High Reputational administrators appear to be broad thinkers, whose achievements demonstrate
comprehensive, "systems" views and approaches. Second, the Substantial Achiever subgroup is responsible for many of the achievements of the entire Typical group of fourteen.

With evidence from responses to questions in Unit A and achievements in Unit B, hypothesis H₄ appears to be supported. High Reputational administrators stated and demonstrated broad, comprehensive, "systems" views and approaches to management, administration, and leadership.

Section III. Summary: Nature of Findings

The following capsulizes and discusses the nature of the findings as analyzed quantitatively and qualitatively:

First, the reputational approach can identify superior/outstanding nursing home/housing administrators.

Second, the SRI survey instrument needs to be improved in order to discriminate High Reputational administrators from Typical administrators as measured by total SRI scores or SRI subscores. Five of 10 themes were not predictive for either group, and the majority, 13 of 23 administrators, who have proven themselves in responsible positions, did not attain a passing score. The sensitivity of the SRI instrument is questionable.

Third, formal education in theory of management/administrative effectiveness is not lacking among nursing home/housing administrators. Several areas of knowledge were
judged important. However, knowledge of human relations,
meaning interpersonal skills, was the only area judged
important by every administrator. This area appears to
assume a great deal of significance for the profession. (see
Appendix E, Table 17).

Fourth, High Reputational administrators did have higher
self-effectiveness ratings than Typical administrators.

Fifth, High Reputational administrators did state broad,
comprehensive, "systems" views and approaches to management,
administration, and leadership. The High Reputationals, as
leaders of larger organizations, after years of experience,
and with more resources—money and personnel—appeared to
operate on a conceptual level to a much greater extent than
did others. The Typicals, administering smaller
organizations and with more limited resources, demonstrate
more responses at the day-to-day level. The Substantials
appear to demonstrate a middle ground between the
down-to-earth Typicals and the more conceptual High
Reputationals.

In their short tenure, the Substantial Achiever subgroup
had more total achievements than the other groups, but major
achievements were in between the Typicals and the High
Reputationals. High Reputational persons had long tenure,
and it can be anticipated that the Substantial group will
equal the former, if they remain in their positions and excel
in the "Major Achievement" tasks of planning, fundraising, expansion, construction, and team development. Mintzberg (1973) refers to these activities as improvement strategies within the entrepreneurial role.

Length of tenure in position, when accompanied by requisite skills and achievements, appears to be an important variable. Achieving positive change is a slow, deliberate process, requiring perseverance and continuity. Substantial group administrators appear to be striving and moving ahead energetically. They do not yet show the seasoned maturity and established excellence of the High Reputational administrators. Findings suggest that these administrators have potential to be high reputational. Long tenure, high levels of achievement, and attainment of leadership positions in the associations appear to be prerequisites for peer recognition and high reputational status. The emergence of the Substantial Achievers from the Typical group gives reason for optimism for the future of nursing home/housing administration in the region under study.
CHAPTER V
CONCLUSIONS AND IMPLICATIONS

Introduction

Because the field of nursing home/housing administration has received little attention from researchers, the results of this study are particularly important. Conclusions reached about the SRI instrument, the reputational approach to identifying outstanding administrators, and the education, achievements, managerial styles, and self-effectiveness ratings of the studied administrators lead to implications in a number of areas. Despite limitations of the study, a direct link can be made to the literature discussed in Chapter II, as well as other literature that focuses on the field of social work. Additional implications lead to a recognition of potentially beneficial information, in terms of selection of nursing home administrators, further research, and presentation of research.

Limitations

Perhaps the most obvious limitation is the small sample size of 23 subjects. To analyze data quantitatively with a sample of this size raises questions about validity and
generalizability. However, the depth of the interviews and the extensiveness of the data collected compensate to some extent for this limitation.

A second limitation is the inability to control for facility size. This variable is important because the scope of responsibilities for nursing home administrators varies accordingly. Someone charged with the administration of a large facility may have the funding, physical plant, and personnel required to create and implement various programs for the residents and their families. Someone else charged with the administration of a smaller facility may not have the necessary elements to achieve the same level of services. Differences between the administrators' achievements may have been influenced by the inability to control for size in this study. Once again, though, the information gathered through lengthy interviews and on-site visits does provide some compensation. Also, uniformity is imposed on administrators' responsibilities by detailed government regulations.

The possible criticism that largeness rather than administrative ability determines high reputational status is mitigated by the fact that at the time of interview two of the nine long tenured High Reputationals did not operate large facilities. One operated a 50-bed nursing home which after a strategic planning process was on the verge of major construction and expansion to a larger nursing home and
levels of care. The second administrator operated a 100-bed facility that had already doubled in size, had developed community based services and was about to expand further by constructing assisted-living apartments.

The exploratory nature of the study is a third limitation. As mentioned earlier, there has been little research in this field. The researcher had to begin by searching for and creating adequate instruments and methodology to use in the study. Without a base of past research for support, this study is clearly a beginning.

Fourth, this study was limited by what one person could do in a doctoral study. The sample size was limited by the time and resources of one person. To obtain a larger sample would require funding and staff to study a larger region, several states, or, perhaps, the entire United States.

Fifth, the study dealt with administrators of not-for-profit nursing homes/housing facilities in Ohio. Therefore, results can be generalized only to this population.

A final limitation involves human error. Much of the study is based on the interviews. While the recordings and transcripts reveal a great deal, the information contained is solely the remembrances and perspective of each administrator. There is no way to account for information
that an administrator chose not to mention or simply forgot to mention.

**Relationship of Findings to Current Theory**

The reputational approach was used successfully in this dissertation and therefore is supportive of the methods used by Hunter (1953, 1959) to identify top leaders. Nomination forms were widely distributed and showed consensus as to who were the High Reputational leaders/superior performers. Hunter, as well as Putney & Putney (1962), identified leaders responsible for progress and innovation. Further confirmation of the reputational approach is provided by Marriner (1988), Mintzberg (1973), Stogdill (1974), and Szilagyi & Wallace (1983), who state that the characteristics of effective leaders and managers are interrelated.

The reputational approach enabled selection of the High Reputational and Typical groups. The SRI test was used as a tool to explore group differences. SRI themes are related to functions of effective leaders and managers. In Chapter II, SRI themes are linked to and consistent with House & Mitchell (1980), Likert (1961, 1967), Mintzberg (1973), Norville (1978), Olsson (1968) and Reddin (1970). SRI themes express desirable qualities found widely in the literature. Even though the theme descriptions are consistent with literature, findings indicate that the test does not demonstrate
predictive validity. As previously discussed, it appears likely the SRI test will reject able candidates if used as a tool of selection.

The individualized perception theme showed predictive strength in the Typical group but not in the High Reputational group. The ability to individualize is an important skill for all managers, described by Blake et al. (1981), Hunt & Osborn (1980), and Reddin (1970). It is unlikely that High Reputational administrators with impressive achievements in personnel development are lacking in this ability. The arranger theme, only predictive in the High Reputational group, has been previously linked to Likert (1961, 1967). This theme appears more essential to the management of larger, more complex organizations.

The researcher sought information on management related education. The findings show evidence that education in management is important for nursing home administration. For example, High Reputational expressed approaches consistent with literature, particularly human relations approaches such as team development and participation, as previously described by Blake et al. (1981), Likert (1961, 1967), and Reddin (1970). They also exhibit entrepreneurial behavior as described by Mintzberg (1973).

Qualitative data provides evidence that High Reputational are more systemic in their thinking. They
operate on a higher conceptual level, describing many affiliations and linkages to other community organizations. Content analysis of transcripts shows them to be planners and conceptualizers with heavy involvement in expansion, construction, new programs, development and extension of community based services. Their achievements reflect major programmatic linkages with universities and hospitals for training and research. Community involvement is expressed as a high priority. These activities reflect broad conceptual skills which enable managers to integrate and coordinate activities to reach mutually shared goals (Katz, 1975, Haimann et al., 1982). High Reputationals' awareness of interrelationships and interdependencies reflect understanding of their organizations' need to be open systems interacting with their environments, as described by Robbins (1976) and Weiner (1982).

Support for the idea of an emerging Substantial Achiever group is offered by Prewitt & Stone (1973) who discuss ability as prerequisite for entre to elite status, in the dissertation called High Reputational status. Prewitt & Stone state that ability, rather than "contacts," or social status is the arbiter for admission to elite status. Future leaders may come from this group.

The management literature reviewed is clearly compatible and consistent though there are differences in terminology
and in how models are constructed. The findings of this study are consistent with and support theory discussed in Chapter II defining the importance of personnel and human relations skills in management. Team development emerged as a high priority with the high reputational administrators, with emphasis placed on building highly-motivated, qualified, cohesive staffs who can be trusted to function with a high degree of autonomy. The implication that to be highly successful in nursing home/housing administration demands knowledge and skill in human relations is supported by the literature. Several authors, among them Blake et al. (1981), Likert (1961, 1967), McGregor (1960) and Reddin (1970), discuss similar ideal management styles based on concern for tasks, relationships and participation. Norville (1978, 1979) and Olsson (1968) discuss structured planning processes also using participative techniques.

Clearly presented in literature is the importance of the human element in management. Several authors summarize the literature which should send a clear message to practitioners of management. According to Likert (1967, p. 1), "every aspect of a firm's activities is determined by the competence, motivation and general effectiveness of its human organization." He further maintains that "of all the tasks of management, managing the human component is the central and most important task, because all else depends upon how
well it is done" (Likert, 1967, p. 1). Berliner (1971), Katz (1975), and Olmstead (1973) also stress the importance of the human element involved in administration. Participative management, which the High Reputational administrators practice successfully, "is gaining momentum in social service agencies and in the delivery of social services" (Skidmore, 1983, p. 150).

This study focuses primarily on the managerial activities involving human relations abilities. Achievements in areas such as finance and community relations can be linked to technical and informational skills (Mintzberg, 1973) which enable managers to understand and carry out technical activities. Technical areas can all be learned but there are many specialty areas in a nursing home. It is not possible for the administrator to be expert in more than a very few. Even if an expert, he or she very likely needs to delegate most or all of that area to another person. Therefore, human relation skills become most important because the administrator must ensure that the tasks and services are successfully performed by others.

While this emphasis on human relations may seem to be the result of common sense and hardly worth discussion, the Typical administrators, especially when compared with the High Reputational administrators, make it clear that there are people in positions of authority who do not use participative methods.
Berliner (1971, p. 564), writes that sharing power "leads to high staff morale, organizational effectiveness, and on-the-job education." But the findings of this study indicate that administrators differ in their acceptance of shared decision making and participation.

Perhaps the self-effectiveness ratings shed light on differences between the High Reputational and Typical administrators. Stogdill (1974) describes the need for achievement, desire to excel, self-confidence and sense of personal identity as characteristics of leaders. Needs of managers to have self-worth and to feel effective are also reported by Mintzberg (1973) who states that managers need to have confidence to project a sense of vision and energy. In the researcher's opinion, a leader needs to be self-assured to mobilize and influence others, suggesting that an administrator, similarly, needs to feel effective. The researcher speculates that an administrator confident of his or her ability would be less threatened by subordinates having some control, and an administrator with less confidence would be more threatened by subordinates having control. A link is suggested because findings show the High Reputationals did have higher self-effectiveness ratings than the Typicals and encouraged participative management/team development more freely than the Typicals.
The extensive lists of achievements are appropriate for the areas validated by research (Burmeister et al., 1979). The lists of achievements were reviewed by judges who agreed they well represented the tasks of administrators. However, there is an exception. The High Reputationals are strong in the area of expansion and construction, developing levels of care, and community based services. This area is not included in the previously validated areas of practice.

**Implications for Education of Nursing Home Administrators and Social Workers**

With interpersonal skills an acknowledged necessity for successful management and given the social nature of nursing home administration, the field of social work might appear to be the logical educational background for those in the field of nursing home administration. However, this study does not support that logic. Only three subjects (one High Reputational and two Substantial Achievers) out of 23 had degrees in social work. Social workers are not well-represented. Instead, degrees in business were more frequently cited. This finding suggests that social workers are not assuming leadership positions in this important area of human service. In the absence of social work, other fields assume these leadership roles. According to Patti (1983), graduate social work education in general has not
been perceived as providing a high level of preparation for administrative positions. Concern is expressed that MBAs will increasingly seek these jobs, to the detriment of social work.

Morris (1977), who presents a conceptual framework of social work practice, states "the core of social work development lies in the assumption of full responsibility for providing, administering and planning a range of concrete care services for populations dependent on others for their survival" (p. 353). Morris believes the social work profession should assume primary responsibility for care of dependent people and management of their social environments. He points out that an extensive network of nursing homes has developed since the 1940s. Except for relatively few of the nonprofit homes for the aged, Morris states, social work has remained peripheral to this field. According to Schatz (1970) and Patti (1983), competent social work leadership is very much needed to administer and improve existing programs and to plan new services.

If social work is to be granted sanction to perform a significant mission in the field of long-term care, social workers must be competent to care for as well as to care about people and be capable of staffing and managing systems of social support (Morris, 1977). If achieved, they can then be clearly accountable for the services they provide. Social
workers are qualified to seek entry into the parallel profession of nursing home administration. The two identities are compatible. Social workers could then be in a position to infuse nursing home administration with their extensive knowledge, skills, and humanistic values.

It appears reasonable to conclude that a social work knowledge base with additional training in administration provides a suitable framework for managing long-term care facilities for the aged. If social work administrators had taken more of an interest in nursing homes, perhaps much of the all-too-frequent and well-publicized substandard care could have been avoided.

To ensure social workers are competitive with business-degreed individuals, those charged with the education of social workers could assess course and field work offerings. Perhaps students and graduate social workers need to be encouraged to pursue long-term care as a field of practice. Continuing education credits should be offered for courses that focus on management training. Perhaps educators could plan seminars in which practicing administrators would focus on theory and sharing of experiences. Social work educators have the knowledge and skill to combine theoretical learning with experiential sharing.

Patti (1983, p. 238) agrees that social work educators must intensify management course content: "Specializations
in social welfare administration must be equal to those of
other management fields in theoretical rigor and technical
sophistication."  Slavin (1985, p. 341) offers a similar
position: "Social workers increasingly trained in managerial
skill hold promise for greater competence in the direction of
service organizations, a competence that will be all the more
necessary if the values of service to clients in need are to
be enhanced."

Implications for Administrator Selection

Because there has been little research in this area, no
methodology for nursing home/housing administrator selection
has been standardized. The findings of this study suggest
that the SRI instrument should not be used as a sole
criterion. Very successful nursing home administrators did
not achieve the expected impressive scores. Boards charged
with the hiring of an administrator would be wise not to rely
on the SRI instrument until it has been refined, re-tested,
and proved to be discriminating. If the SRI instrument is
used and shows a candidate weak in an area, the board should
thoroughly question the applicant to determine if he or she
really is weak in that area.

What might be more helpful to boards are the
achievements, managerial approaches, and educational
backgrounds noted in this study. While a candidate might not
have the experiential background to present a list of accomplishments, he or she could be questioned about aspirations. After being provided information about the facility, the candidate could answer questions about what his or her priorities would be. Questions about how recruitment, training, and decision-making would be handled could be enlightening when compared and contrasted to the findings of this study. It would be of interest to selection committees that five out of nine High Reputational administrators told the researcher they were approached by the board and had not applied for their positions. This indicates their abilities were noticed by others who felt they had the necessary qualities to lead their facilities. It may be conjectured that board members felt that a talented administrator would be a critical factor for growth, development and future success of the institution.

Implications for Further Research

Additional research would benefit not only boards who strive to find outstanding administrators, but also educators and all nursing home personnel and residents. Opportunities for research are abundant. As mentioned earlier, the SRI instrument needs to be improved and re-tested. But beyond that, three important areas of research remain essentially untouched. One area involves the field of social work; the
other involves the High Reputational group studied by this researcher. The third involves the Substantial Achievers subgroup.

Researchers need to find out why social workers are not well-represented at the top level of nursing home management. Is the answer as simple as the perceived lack of management training? Is social work a relevant degree for an individual administering a nursing home? Should social work become more involved in long-term care or leave management positions to those with business and other related degrees? The answers to these questions would be particularly interesting to educators, students, and governing boards. Research could provide answers to questions such as what to teach, what to study, and who to hire.

The High Reputational group also offers an interesting opportunity for more research that would benefit many in the nursing home field. The findings indicate that these nine people are making a positive difference in the lives of many—both staff and residents. They are accomplishing outstanding programs and projects that matter, but no one is pulling the information together to benefit other administrators, their personnel and residents. Many of these excellent administrators are older and will not be available much longer to provide their insights gained from years of experience. The field desperately needs an established base
of knowledge that these administrators could provide. Intensive research into the lives and practices of superior administrators could help explain successful approaches to the various areas of administration in long-term care.

Presentation of the results needs to be in a format easily accessible to administrators and others. Books, articles, and documentary/training films could focus on how these people developed good administrative skills. With these tools, the field of nursing home/housing administration could improve significantly. Residents would be the most important beneficiaries, but all concerned, including family members, staff, board members and volunteers would also benefit.

Research that would follow the Substantial Achieving subgroup is also needed. Members of this subgroup are bright, energetic, and well trained academically. They may represent an emerging group of technocrats within the field. They appear highly motivated to move their organizations to higher levels of sophistication, complexity and accomplishment. Following their careers would test the expectation that the Substantial group can become as able and productive as the High Reputational.
Recommendations for Clinicians who Become Administrators

The motivation for the dissertation topic came from the writer's experiences as a clinically trained social worker who moved into administration, first in youth services, second as director of a family service agency, and third as administrator of a nursing home. Based on that experience and findings of the study, suggestions are offered to other clinical social workers who move into administration. The vast majority of social work master's degree graduates are clinically trained and many become managers and agency executives within a few years. Clinical training provides interpersonal skills that are essential for administrators. However, it is also essential for this to be supplemented by education in management theory and practice. Schools of social work should advise clinical graduates that further training will be needed in the future and be prepared to offer the necessary courses. Those who take one or even a few management courses during the master's program should be cautioned that this may be insufficient. One cannot fully appreciate, digest, and apply management theory unless it can be applied to real life work experiences. This is similar to the rationale for clinical field work experience.
Dear Colleague:

I am working on a doctoral dissertation, a study of the characteristics of executives of nursing homes. I would appreciate it if you would make a list of nursing home administrators you consider highly successful, who are distinguished in the field, have demonstrated outstanding leadership ability and have made significant contributions. Please give their names, home and location. If the facility includes both nursing home and housing components, please indicate as shown below. I am most interested in administrators and facilities within Ohio, but feel free to add names from other states if you wish.

Please use this letter as a reply form, (see below and other side), and either mail to me or give to AOPHA staff.

After I compile a list of highly successful administrators, I plan to ask twenty five of them for interviews about their philosophy, views on management, etc. By doing the study I hope to learn more about the qualities needed for success in our work. This will help me, and hopefully, the information will prove useful to us as colleagues, and to AOPHA.

Replies are anonymous. Feel free to nominate yourself if you are outstanding. All information will be held in strictest confidence.

Thank you for your help.

Sincerely,

Arthur Cohn
Exec. Director

*****************************************************************

To person completing form: PLEASE INDICATE YOUR TYPE OF POSITION, (for ex., administrator, asst. administrator, finance director, etc.):

(PLEASE USE BACK OF PAGE FOR NOMINATIONS)
APPENDIX B

QUESTIONNAIRES AND SUMMARY OF
PRACTICE AREAS ASSESSED
DEMOGRAPHIC INFORMATION

In addition, demographic information will be obtained from files of the Board of Examiners of Nursing Home Administrators, as follows:

Age

Gender

Length of time in present position?

Previously administrator of other Homes?

If so, list others.

Total number of years experience as a nursing home administrator.

Executive or manager of any other type of organization?

If so, description.

Number of years of experience as a manager and administrator.

Type of education and/or training in management and administration?

Educational background.

Degrees earned.
FUNCTIONAL QUESTIONNAIRE

Present Position
Number of facilities, types of certification, levels of care managed.

FREE STANDING, PART OF CHAIN, OTHER

POPULATION SERVED

What, in your opinion, are the most important areas of knowledge to be successful as a nursing home administrator?
Having attended workshops, courses, seminars, which ones in your opinion were of the greatest value in contributing to success as a nursing home administrator?
In terms of your personal philosophy and point of view, to what do you attribute success as a nursing home administrator?
On a scale of 1 to 5, with 1 being least effective and 5 being most effective, where would you place yourself?
1 2 3 4 5
ARE YOU SUBJECT TO A FORMAL EVALUATION BY YOUR GOVERNING BODY OR SUPERIOR? IF SO, PLEASE DESCRIBE.

Do you use any indicators, or evaluation tools to gauge or measure your own effectiveness?
If so, please describe.

For each indicator, please place yourself on a scale of 1 to 5, with 1 being least effective and 5 being most effective.

indicator:__________________
1  2  3  4  5
......................................................

indicator:__________________
1  2  3  4  5
......................................................

indicator:__________________
1  2  3  4  5
......................................................

indicator:__________________
1  2  3  4  5
......................................................

(If a respondent has a large number of indicators, a separate score sheet may be used.)
If not already mentioned, could you comment on the following outcome indicators in terms of how effective you feel you are?

Community Relations

Do you implement relations with the community, with residents and families, and with potential residents and their families?
Does your Home maintain relationships with colleges and universities for training students? Any other training affiliations?
Please list improvements, changes and accomplishments in this area.
Each item of improvement, change, or accomplishment will be counted, so that a total number can be obtained.
On a scale of 1 to 5, with 1 being least effective and 5 being most effective, how would you judge yourself on community relations?

1  2  3  4  5

........................................
Personnel Management

Have you made any changes and improvements with regard to:
job descriptions
personnel policies
preventing or reducing absenteeism
reducing or preventing turnover
performance reviews
Please list any other improvements, changes or accomplishments in this area.
subtotal
Overall, on the same 1 to 5 scale, how would you rate yourself on personnel management?
1 2 3 4 5

Financial Management

Can you cite any improvements/changes/accomplishments in the following:
budget system
wage and salary plan
computerization
inventory controls
patient assessment
others
On the same scale, how would you rate yourself as a financial manager?

1  2  3  4  5

Departmental Management

Please cite any improvements/changes/accomplishments in getting a department to function more effectively.

re dietary
re business office
re nursing
re maintenance
re housekeeping/laundry
re activities
re social services

On the 1 to 5 scale, how would you rate yourself in departmental organization and management?

1  2  3  4  5
Planning, Organization and Control

Please cite changes/improvements/accomplishments:
- solving internal problems
- board and committee development
- planning process
Please list any other improvements, changes or accomplishments in this area.
On the same scale, how would you rate yourself on planning, organization and control?

1  2  3  4  5

------------------------

Resident Care and Services

Please describe methods of communicating and dealing with residents' complaints?
Mechanisms for family complaints?
If not already mentioned, would you comment on the following:
- new and innovative programs
- expansion of facilities-certificate of need
- occupancy rate the past year
Do you have any other "outcome indicators" rating scales or other ways of measuring success?
If so, please describe?
Any problems resulting from inspections audits, and surveys?
If so, how did you solve them?

Could you name which of your programs and services you consider the most successful, and make you the most proud?

On the same 1 to 5 scale, how would you rate yourself in this area?

1  2  3  4  5

Does your Home have accreditation, such as JCAH?

Are you a member of the American College of Health Care Administrators?

Have you gone through their certification process?

If so, are you certified?

Can you make any recommendations or describe any other factors that would help others to achieve success?

ANY SIGNIFICANT PROBLEMS YOU CARE TO COMMENT ON? HOW DO YOU PLAN TO APPROACH THEM?

Tally of number of improvements, positive changes and accomplishments. ______________

Mean of 1-5 rating scales:______
SUMMARY. AREAS OF ACHIEVEMENT EXPLORED IN QUESTIONNAIRE

Community Relations: residents, families, university and other training affiliations
Personnel Management: job descriptions, personnel policies, absenteeism, turnover, performance evaluations
Financial Management: budget system, wage plans, computerization, inventory controls, patient assessment, maximizing reimbursement
Departmental Management: effectiveness of dietary business office, nursing maintenance, housekeeping/laundry, activities, social services
Planning, Organization & Controls: internal controls, solving internal problems, board effectiveness, planning process
| Resident and Patient Care & Services | complaint mechanisms, innovative programs expansion, occupancy, surveys and deficiencies |
APPENDIX C

SELECTION RESEARCH, INC. (SRI) THEME

DEFINITIONS AND TABLES 5 THROUGH 10
SRI THEMES SIGNIFICANT FOR NURSING HOME ADMINISTRATORS:

MISSION: This theme conceptualizes the significance and purpose of the organization, the significance of caring for aged. An administrator who is high on "mission wants to make a direct and significant difference in the lives of associates, and/or clients via development, programs and services. Thereby enables subordinates to have a chance for meaningful self-expression. (This correlates with Theory Y, motivators, need for work to have meaning, to make a difference, to be part of something important.)

GROWTH RESPONSIVENESS: Takes satisfaction from growth of staff. A manager who is high in this theme would be continuously oriented toward recruiting and attracting talented people, focusing upon strengths of people and maximizing opportunities by moving from strength. Another talent grouped in the Growth Responsiveness theme is developer. This administrator takes satisfaction out of each increment of growth of their associates. At the highest level, this administrator enjoys developing and training persons who become future managers for their organization.

INDIVIDUALIZED PERCEPTION: Ability to think individually about co-workers, to develop sequential growth programs for
workers. There is understanding that each employee is different rather than treating all basically the same.

ARRANGER: The arranger theme is evident when the administrator shows awareness of patterns of interaction among workers. Ability to organize human and physical resources for productivity. Evidence of those high in "arranger" demonstrate neatness, cleanliness, scheduling, work completion. Is open and flexible to enhance communication and individual productivity with the management unit and/or organization.

STIMULATOR: Develops positive attitudes among staff and residents based on enthusiasm and understanding. Strength in this theme indicates that the manager can positively increase the activity of others. There are three major ways: understanding, enthusiasm and recognition. At its highest level this can be the "Show Biz" in management.

PERFORMANCE ORIENTATION: Thinking in terms of results. Evaluation of staff in terms of impact on residents. This manager's evaluations of people are related to their production and effort. The manager is objective as well as results oriented. Subjectivity does not interfere with ability to make decisions.
RELATOR: Builds rapport with staff, residents. Has empathy for staff and residents, studiously establishes productive relationships with other people.

INNOVATOR/ACTIVATOR: Continuously brings in and implements new ideas. Creative and a change agent. Managers strong in this theme find creative ways to reduce costs, increase funding, programs, and "business". Can see opportunities, not just the problems. The ability to make things happen—to turn ideas and goals into action and production. In a sense it is the critical "sales" component required in the management arena, i.e., courage, ego drive, persuasion and the like in order to get others to perform.

FOCUS: The ability to discriminate, maintain direction, and set specific goals that are realistic. This person has models, learns from others, determines priorities, sets objectives.

WORK RELATED: Work involvement is revealed in ongoing rehearsal and review of work-related activities. The mental intensity for the work effort. Attitudes related to the organization for which one works. Feelings about working with aged, how one deals with death. Energy expended toward work, spontaneous ongoing awareness of staff.
Table 5
SRI Group Mean Subscores for the High Reputational Group

<table>
<thead>
<tr>
<th>Subject No.</th>
<th>Growth Responsiveness</th>
<th>Individualized Perception</th>
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<th>Performance Orientation</th>
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Table 6
SRI Group Mean Subscores for the Typical Group

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Table 7
SRI Group Mean Subscores for the Substantial Achiever Subgroup

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Table 8
SRI Total Scores And Predictive Subscores
For High Reputational Administrators

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SRI Total Scores And Predictive Subscores
For Substantial Achieving Administrators

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APPENDIX D
LISTS OF ADMINISTRATORS' ACHIEVEMENTS
ACHIEVEMENTS OF ADMINISTRATORS BY CATEGORY

A. PERSONNEL MANAGEMENT ACCOMPLISHMENT GROUP

1. Absenteeism
2. Turnover
3. Replacing bad staff
4. Better discipline
5. Selection of staff
6. Revising personnel policies
7. Revising job descriptions
8. Evaluations
9. Wages and benefits
10. Providing training
11. Developing skills of supervisors
12. Creating new positions, flexible scheduling
13. Participatory employee advisory groups
14. Other
1. **ABSENTEEISM**

Eliminated "excused" absences.
Developed stringent policy on absenteeism and tardiness.
Absenteeism averages only five days per year.

2. **TURNOVER**

Reduced turnover by selecting the right people.
Low turnover, staff stability.
Turnover infinitesimal, staff is satisfied.
Staff turnover rate of 20-25% is low in field.

3. **REPLACING BAD STAFF**

Replaced DON with a much better person.
Replacing poor workers.

4. **BETTER DISCIPLINE**

Re-wrote the work rules to be stricter.
Greater stress placed on verbal counseling, "writing up" staff.

5. **SELECTION OF STAFF**

In hiring process, work group participates in selection and 90 day evaluation.
Much stronger staff screening process, including physical and personality tests.

Major emphasis on attracting top notch people.

6. **REVISING PERSONNEL POLICIES**

Revised personnel policies.
Constantly upgrading personnel policies and procedures.
Revised personnel manual with much input from employee suggestion committee.

7. **REVISING JOB DESCRIPTIONS**

Revised some job descriptions.
Total revision of job descriptions; enabled evaluations to be more specific.

8. **EVALUATIONS**

Developed new performance evaluation instrument with staff committee.
Initiated staff evaluations.

9. **WAGES AND BENEFITS**

Improved fringe benefit package.
Improved wages of low paid staff.
Negotiated favorable union contract.
Established very competitive wages and benefits.
Upgraded pay scales and improved health insurance.
Total revision of wage and salary scales.
Developed progressive wage and benefit plan, as generous as possible.

10. PROVIDING TRAINING

Implemented a nursing assistant training program.
Sending staff to more outside workshops and conferences.
Training nurses to understand Medicaid reimbursement system.
Brought in consulting firm to train staff to improve charting and documentation.
Giving more responsibility, "ownership" to nursing staff.
Created an extensive training department.
Provides highly developed training programs for staff.

11. DEVELOPING SKILLS OF SUPERVISORS

Developing management training for staff.
Focus on growth and development of supervisors.
More autonomy for nurses.

12. CREATING NEW POSITIONS, FLEXIBLE SCHEDULING

Created new fundraising and social work positions.
Hired masters level RN to do teaching/training.
Established flexible staffing patterns.
Established job sharing.
Created half-time volunteer coordinator position.
Created senior nursing assistant position to retain good staff.

13. PARTICIPATORY EMPLOYEE ADVISORY GROUPS

Task force of staff to identify problems and give input for improvements.
Established staff personnel advisory committee.
Actively uses employee suggestion committee.

14. OTHER

Established recognition day or week for all staff.
Developing pay for skills approach.
Developed fitness/wellness program.
Developed highly motivated staff.
Morale was high.
Has highly qualified personnel manager and is "state of the art" in all areas of human resources management, policies, job descriptions, etc.
Discontinued use of time clock based on high levels of trust and honesty.
B. DEPARTMENT MANAGEMENT

1. Finding good department heads
2. Developing skills of department heads
3. Making department heads accountable
4. Openness - teamwork
5. Improving departments
6. Departmental training programs
7. Other
1. **FINDING GOOD DEPARTMENT HEADS**

Replaced department heads who were poor managers, with better qualified people.
Hired and developed dependable, high quality department heads.

2. **DEVELOPING SKILLS OF DEPARTMENT HEADS**

Helped Director of Nursing learn management skills to deal with staff, to document and deal with negatives.
Much emphasis on supporting and training supervisors to give them supervisory skills.
Developing training programs to make charge nurses better managers.

3. **MAKING DEPARTMENT HEADS ACCOUNTABLE**

Got supervisors to monitor attendance.
Taught department supervisors to be responsible for their budgets.
Involved department heads in budgeting.
Gave supervisors more responsibility.
Day to day tasks and problems now solved at the department level.
Encourages department managers to observe staff performance, how they spend time. Watches for and has located excess down-time.
If problems, gets with department head, meets with them twice a week. Conducts quality assurance inspection weekly. During tours and inspections, makes notes for evaluations. Well developed internal control systems and internal audits of every major department.

4. **OPENNESS – TEAMWORK**

Developed an effective team.
Encourages department heads to meet together to solve problems.
Encourages openness, "two or more brains working on a problem".
Builds team concept of openness toward one another.
All key staff have input to resolve concerns.
Key management staff report to executive weekly, review areas, exchange views and ideas.
Has monthly management team meetings.
Discusses problems and solutions with department heads.
Senses the support his subordinates need.
Encourages his leadership staff.
5. IMPROVING DEPARTMENTS

Improved perceived food quality.
Home is cleaner, kitchen is cleaner.
Achieved substantial reduction in laundry costs due to efficiencies.
Includes department heads in goal setting.
Changed and improved care plans.
Reorganization of dietary department to new style of management with reduction of positions.
Identified weaknesses in dietary department. "Turned it around" by working intensively with the department head.
Redefinition and restructuring of department roles and position descriptions.
Developed excellent dietary department with highly qualified manager.

6. DEPARTMENTAL TRAINING PROGRAMS

Implemented aide training program.
In previous position implemented an extensive aide training program.

7. OTHER

Department heads, management staff stable for several years.
Changed part-time Director of Nursing to full-time.
Hired dietitian to professionalize food service.

Increased staffing levels to free the supervisor for supervision.

Reduced the number of nursing, dietary aides, and housekeepers by improvements in efficiency.

Successfully reduced staff on many units without sacrificing quality.

Established information board at time clock for staff to be knowledgeable of patient changes of condition.

Developed a strong division structure with outstanding professionals in charge of every major department.

Recruited highly qualified personnel administrator.

Recruited highly qualified financial administrator.

All departments at or close to optimum functioning.

Developed excellent staff, "fine tuned team".
C. EXPANSION, BUILDING IMPROVEMENTS, CONSTRUCTION

1. Expansion, new beds
2. Alzheimer's unit
3. Combined renovation, construction, expansion
4. Renovations
5. Building improvements
6. Levels of residential care
7. Other programs
1. **EXPANSION, NEW BEDS**

Working on expansion, construction of additional office space.
Planned very attractive and functional physical design.
Planned and carried out construction, major expansion of Home.

2. **ALZHEIMER'S UNIT**

Planning and construction for Alzheimer's unit.
Developed Alzheimer's unit recognized for its quality.
Alzheimer's program in the development stages.
Developed Alzheimer's adult day care program.

3. **RENOVATION, CONSTRUCTION, EXPANSION**

Major renovation of building, added several beds.
Major renovation/construction/expansion program underway.
From one antiquated building, several major construction programs to develop campus complex over a period of years.
Led three major expansion programs of the Home.
Completed five major construction projects.
Implemented 22 million dollar renovation and expansion of an old facility.
Design and construction of new kitchen.
4. **BUILDING IMPROVEMENTS**

Improved preventive maintenance schedule, inspection of equipment.

Created outdoor sitting and recreation area.

Purchased three new whirlpool bathing units.

Obtained window glass tinting to reduce glare in resident areas.

Researched and obtained alarm system for wanderers.

Closed circuit TV with live broadcasting for residents entertainment.

Developed overall maintenance and preventive maintenance program.

Implemented computerized energy management system, programmed to use energy most efficiently.

5. **LEVELS OF RESIDENTIAL CARE**

Planning and construction of cottage units.

Planned, developed, built a HUD apartment building for the elderly.

Major expansion, construction of independent living units.

Planning to build condominium units.

Independent living apartments under construction.

Large apartment project being built.

Developed congregate building.
Developed extensive assisted living programs.
Major expansion, new campus, apartments and cottages under construction.

6. OTHER PROGRAMS

Home health care program established.
Developed adult day care program.
Developed child care center involved with residents.
New construction underway for community based programs.
Established Montessori pre-school.
Home health agency in process of development.
Major development of community based services.
Developed day care for young adults with spinal cord injuries.
Developed respite care program.
Developed sheltered workshop program.
Performed feasibility studies for expansion of facilities and management of additional facilities.
Developed management agreements with other facilities.
Planning merger with a facility.
D. **FINANCIAL MANAGEMENT**

1. Improved the financial position
2. Improved reimbursement
3. Improved inventory system
4. Improved accounting system
5. Improved the budgeting system
6. Saved money
7. Computerization
8. Other
1. **IMPROVED THE FINANCIAL POSITION**

Got home into the "black" financially. Stopped dependence on interest income for operations.
Established a financial reserve.
The home earns a substantial surplus.
Financial condition went from loss to surplus able to finance capital improvements.
Home is in a strong financial position.

2. **IMPROVED REIMBURSEMENT**

Major improvements in patient assessment documentation and reimbursement.

3. **INVENTORY SYSTEM**

Implemented inventory control program.
Established focused inventory system tied to over and under supply.
Inventory system going on computer.

4. **IMPROVED ACCOUNTING SYSTEM**

Established a system for payment authorization.
Put accounts receivable system in place.
Put accounts payable system in place showing costs per patient day by department.
Took over doing own payroll, payables, receivables on computer.
From old manual system, payables now transmitted to data processing service. Terminal at Home.

5. IMPROVED THE BUDGETING SYSTEM

Established a capital budget.
Developed quality financial reports.
Taught department heads to develop their own budgets.
Holds department heads accountable for their budgets.

6. SAVED MONEY

Reduced spending to within Medicaid reimbursement ceilings.
Saved money through better portion control.
Achieved lower deficit than expected.
Achieved large savings.
Tours facility and observes for signs of financial waste.
Quickly makes corrections.

7. COMPUTERIZATION

Budgets, wages, salaries, bookkeeping on accountant's computer.
Computerization of nursing documentation and health care scheduling.
Going into second, more sophisticated computer system.
Developed extensive computer system. Payroll, billing, personnel records, payroll, etc., on computer. Using consultants, developed in-house comprehensive computer system. Highly advanced, computerized financial management system. Computer for finance, payroll, budget. Personal computers for nursing records, etc. Has advanced, computerized financial, budgeting and payroll system. Computerized medical records. Researched the market; awaiting installation of new computer system.

8. OTHER

Better controls and follow-up on past due accounts. No rate increases since 1984 while providing same high quality care. Put in place that Home's pharmacy can do Part B billing. Monthly in-house audit of patient records. Every aspect of financial management system at optimum level. Inventory and purchasing used to be "loose". Hired Director of Purchasing. Studying whether to go to laundry contract.
Has the ability to assume leadership of financially troubled facilities and quickly "turn them around" from loss to profit or surplus.

Wrote book on financial management.

Has highly qualified financial administrator and is "state of the art" in all financial areas.
E. RESIDENT CARE AND SERVICES

1. Resident activities
2. Family programs
3. Specialized treatment
4. Communication channels, complaint mechanisms
5. Resident councils
6. Spiritual care
7. Other
1. **RESIDENT ACTIVITIES**

Resident theatre.
Cooking group.
Increased number of resident activities.
Exercise group.
Music therapy.
Activity worker conducting a joint program, with senior center.
Personal health management, lifestyle courses in health maintenance, spiritual growth and mental stimulation.
Almost all residents serve as a volunteer in some way.

2. **FAMILY PROGRAMS**

Increased number of family nights.
Spouse support groups.
Organized club for family group meetings.
Family support group is meeting. Staff are giving presentations, explaining roles, getting feedback.
Using family conferences effectively, involving residents/families for participation in care planning process.
Family Council successfully involves families in treatment process.
Support groups for families of Alzheimer's patients.
Established bereavement groups.
Family meetings and councils, direct access to individuals in decision making positions.
Family nights held quarterly.

3. SPECIALIZED TREATMENT

Implemented primary nursing care program.
Implemented an improved program for the mentally impaired.
They are experimenting with eliminating restraints.
Improved ancillary rehabilitative services.
Established sub-acute stepdown unit.
Developed program to treat respirator and IV patients.
Developed comprehensive rehabilitation program.
Established short-term total living quarters for training before return home.
Developed "Lifeline" program of automatic notification in case of emergency for seniors in the community.
Developed environmental stimulation program for confused residents.

4. COMMUNICATION CHANNELS, COMPLAINT MECHANISMS

Menu Committee meets with Dietary Manager once a month.
The Home is more responsive to families' complaints, for example, mailing survey forms to all and evaluating responses.
CEO has many individual contacts with families. In cases of complaints, fully explains nature of situation to the family.

Has grievance committee but is so visible that any problem gets to him first; before a resident or family member finds it necessary to use the complaint mechanism.

Is very active in solving problems with families and residents through department heads and employees.

Advocacy program, encouraging residents to identify an advocate to represent and assist them in articulating concerns.

Open door policy. Families feel able to get questions answered and complaints addressed.

Very visible and accessible social work office.

Has grievance committee, formal grievance procedures for residents and staff.

5. RESIDENT COUNCILS

Active resident council.

Just formed residents council.

Face-to-face group meetings with residents on issues like rate increases.

Resident committees are well developed.

Has effective residents council.
6. **SPIRITUAL CARE**

Quality religious services on holidays. Pastoral care program, choir.
Small group meetings with clergy.

7. **OTHER**

Newcomers group.
Raised money for a new bus.
Developed selective menus including special diets.
Obtained grant to offer services to people in their own homes.
Large, highly developed volunteer program.
Secured Medical Director and psychiatrist who are highly regarded professionally.
Placements sought by applicants, long waiting list.
F. COMMUNITY RELATIONS

1. Articles, newsletter, speeches
2. Other boards, committees
3. Organization, club memberships
4. Board development
5. Professional PR program
6. Professional organization memberships
7. Liaison with religious institutions
8. Other
1. **ARTICLES, NEWSLETTERS, SPEECHES**

More communication through newsletters.
Places articles in church bulletins.
Frequent stories in local newspaper.
Serves as career day speaker in schools.
Home receives much newspaper coverage.
Writes and issues press releases.
Frequent speaking engagements.
Writes brochures, newsletters.

2. **OTHER BOARDS, COMMITTEES**

Administrator and key staff serve on agency and organization committees.
Member of county planning council for housing and human services.
Serves on state human services committee to evaluate group homes.
On board of community agency for the aged.
Chairs a key committee of an agency board.
CEO serves on several committees in community.
Staff serve on community planning committees.
Staff are leaders among health and social agencies in financial support of United Way.
3. **ORGANIZATION, CLUB MEMBERSHIPS**


4. **BOARD DEVELOPMENT**

"In synch" with president. Had "great" Annual Meeting. Board and CEO communicate perfectly and fulfill the mission of the Home. Highly effective board process, makes clear recommendations for action. Communicates lavishly with trustees - keeps them informed.

5. **PROFESSIONAL PUBLIC RELATIONS PROGRAM**

Development and community relations staff are very active in the community. Has full-time public relations professional and very effective community relations program.

6. **PROFESSIONAL ORGANIZATION MEMBERSHIPS**

Was President of American College of Health Care Administrators. Held several posts as officer.
Served as president of state or national association.

7. LIAISON WITH RELIGIOUS INSTITUTIONS

Active in church committees.
Has a liaison with every church in the area.
Maintains good relations and is responsive to all religious institutions.

8. OTHER

Float in 4th of July parade.
Hosting tours of facility for school children.
High level of community acceptance.
Successful fund-raising in the community.
6. **PLANNING, ORGANIZATION AND CONTROL**

1. Planning with staff
2. Planning process - with board
3. Policies and procedures
4. Administrator planning
5. Other
1. **PLANNING WITH STAFF**

Conducts monthly staff meetings for planning.
If he wants to develop a plan, sells the department heads.
Gets them to "throw out" ideas and "buy in".
Gets the team of department heads together to develop plans
and programs, set goals, solve problems.
Staff retreats held regularly to stimulate ideas.

2. **PLANNING PROCESS - WITH BOARD**

Helped board decide to do extensive renovation.
Conducted board education in other facilities.
Planning is accomplished through monthly board meetings.
Planning process - Long Range Planning Committee, for new
equipment, Alzheimer's Unit.
Has strategic planning process.
Board planning for mission, goals, objectives, strengths,
weaknesses.
With lay leadership, developed strategic plan for their
facilities.
Board restructuring for greater role in decision making.
Developed strategic planning program with staff and board.
Went through detailed corporate self assessment process with
board and staff, involving retreat, short and long range
planning, goal setting.
3. **POLICIES AND PROCEDURES**

Revised admissions committee manual, including an admission fee.

All policies and procedures revised and up to date.

4. **ADMINISTRATOR PLANNING**

Program to replace aging equipment with cost saving models.

Studied and modified organizational structure.

Achieved licensure for Home.

Researched and developed plan to replace outdated rented phone system with more efficient "lease to purchase" system at lower cost.

5. **OTHER**

Now has nurse for quality assurance and medical records.
H. INNOVATIONS, LINKAGES AND CONTRIBUTIONS TO THE FIELD

1. College/University affiliations for training
2. Hospital affiliations
3. Publications
4. Teaching
5. Programs with the community
6. Other
1. **COLLEGE/UNIVERSITY AFFILIATIONS FOR TRAINING**

Has residents from Wright State University School of Medicine on short rotations.

Medical school intern field site.

One month rotation of residents of local medical school.

Some affiliations with local colleges for training nursing interns.

Developed university clinical site for nurse and nursing assistant training programs.

Music therapy interns.

Agreements with local schools to give credit for courses given by the facility to its staff.

In previous position, established a clinical training site with university.

Developing a relationship with local community college for education and training.

They have trained many interns in nursing home administration.

Working on joint ventures with colleges, universities and acute care hospitals.

2. **HOSPITAL AFFILIATIONS**

Just beginning hospital affiliation.

Affiliation with major hospital.
3. **PUBLICATIONS**

Co-authored text on nursing home administration.
Authored article on board role.

4. **TEACHING**

Teaches gerontology at university.
Preceptor for university students in gerontology.
Teaches continuing education for nursing home administrators at university.

5. **PROGRAMS WITH THE COMMUNITY**

Intergenerational programs with public schools.
Area training center involving 60 other facilities.
Developed Council On Aging.
They have been a catalyst for development of United Appeal and other community services.

6. **OTHER**

Received major grant for teaching nursing home project.
Established Gerontological Institute with university affiliations.
Chosen as test site for accreditation program.
Research foundation with local colleges.
Developed research department.
Developed area training center.

Raised millions of dollars.

Developed Gerontology Center.

Provides corporate services to several facilities: purchasing, legal, financial accounting, construction planning, services of Gerontology Center, other management services.
APPENDIX E

TABLES 11 THROUGH 17
Table 11
Percentage of Administrators Possessing Degrees, by Group

<table>
<thead>
<tr>
<th>Percentage with</th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bachelor's Degrees</td>
<td>89</td>
<td>79</td>
<td>80</td>
</tr>
<tr>
<td>Master's Degrees</td>
<td>44</td>
<td>79</td>
<td>80</td>
</tr>
<tr>
<td>Doctoral Degrees</td>
<td>11</td>
<td>7.5</td>
<td>0</td>
</tr>
<tr>
<td>Highest Degrees</td>
<td>Law</td>
<td>Ph.D</td>
<td>Master's</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.*
Table 12
Comparison Of Bachelor's Degree Majors by Group

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Degree</td>
<td>1</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Health Care Related</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Theology</td>
<td>0</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Liberal Arts</td>
<td>3</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Business</td>
<td>5</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Note. One High Reputational subject possessed two Bachelor's Degrees.

*This subgroup of five was separated from the Typical Group of 14.
### Table 13
Comparison Of Graduate Degree Areas by Group

<table>
<thead>
<tr>
<th>Degree Area</th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care, Gerontology, Long-Term Care</td>
<td>1</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Human Services</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Business</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Education</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Theology</td>
<td>1</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Law</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note. Numbers refer to degrees reported by subjects. Three subjects in the Typical Group and one in the High Reputational Group possessed more than one graduate degree.

*This subgroup of five was separated from the Typical Group of 14.*
Table 14

Group Comparisons By Educational Background

<table>
<thead>
<tr>
<th>Highest Level</th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Degree</td>
<td>1</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Bachelor's</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Master's</td>
<td>3</td>
<td>9</td>
<td>4</td>
</tr>
<tr>
<td>Doctoral</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Bachelor's Degree Major</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Care Related</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Business</td>
<td>5</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Human Services</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>Master's Degree</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Care Related</td>
<td>1</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Business</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Human Services</td>
<td>0</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Doctoral</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Law</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Theology</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Note. One subject had two Master's degrees, one subject had two Bachelor's and two Master's degrees. Numbers are as reported by subjects.

*This subgroup of five was separated from the Typical Group of 14.*
Table 15
Administrators Who Reported Degrees Containing Significant Management Related Course Work

<table>
<thead>
<tr>
<th>Bachelor's Level</th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>*Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Business</td>
<td>5</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Master's Level</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Work</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Health Care, Long-Term Care</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Business</td>
<td>2</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Education</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.*
Table 16
Continuing Education in Management
Reported by Administrators

<table>
<thead>
<tr>
<th></th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>None Reported</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Seminars, Workshops</td>
<td>4</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Non-credit College Courses</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Agency Sponsored Course</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Course for Licensure</td>
<td>0</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Note. Table refers to number of seminars, courses reported by administrators as having attended.

*This subgroup of five was separated from the Typical Group of 14.
Table 17
Areas of Knowledge Stated by Administrators as Most Important for Successful Management, by Frequency of Mention

<table>
<thead>
<tr>
<th>Area</th>
<th>High Reputational Group, N=9</th>
<th>Typical Group, N=14</th>
<th>Substantial Achiever Subgroup, N=5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>3</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Health Care, Aging</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long-Term Care</td>
<td>6</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Financial Management</td>
<td>5</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Government Relations</td>
<td>4</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Business Administration</td>
<td>6</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Human Relations</td>
<td>9</td>
<td>14</td>
<td>5</td>
</tr>
<tr>
<td>Public Relations</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Building Maintenance</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*This subgroup of five was separated from the Typical Group of 14.*
<table>
<thead>
<tr>
<th>Concern for People</th>
<th>Concern for Production</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Country Club Mgmt</td>
<td>Team Management</td>
</tr>
<tr>
<td>Thoughtful att</td>
<td>Work accomplishment</td>
</tr>
<tr>
<td>ention to needs</td>
<td>is from committed</td>
</tr>
<tr>
<td>of people for</td>
<td>people, interdependence</td>
</tr>
<tr>
<td>satisfying</td>
<td>through a &quot;common</td>
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Figure 1
The Managerial Grid

BIBLIOGRAPHY


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