Roles, Skills, and Competencies of Middle Managers in Occupational Therapy

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This article describes the most essential roles, skills, and competencies needed by middle managers in occupational therapy organizations. Middle-level managers are responsible for a specific segment of the organization. They are uniquely positioned to foster changes in the department. Because of the challenges in the health care environment, it is important to discuss the roles that middle managers need to bring out the viability and growth of their departments and organization. These roles include planner, strategic planner, coordinator, leader, problem solver, and negotiator. To conduct these roles, skills and competencies that are closely linked to the effective performance of those roles are also described. Skills include human relations, marketing, and conceptual skills. Competencies include being able to manage attention, meaning, trust, and self, as well as being competent when conducting utilization reviews, program evaluations, documentation of services for quality and reimbursement purposes, and fiscal management. With these outlined roles, skills, and competencies, middle managers should be able to promote the mission of their organizations, support their employees, and navigate successfully in the competitive and ever-changing health care environment. Key words: Competencies, Middle managers, Occupational therapy, Roles, Skills

In today's evolving health care environment, a number of challenges have had a major impact on the survival and growth of organizations, including cost containment, quality assurance, competition, and ethical dilemmas. Recognition and response to these changes are survival strategies by which management efforts are required to make change a success. In this way, managers in health care organizations play important roles to bring about positive organizational outcomes. A manager must be able to manage resources, such as supervising staff, as well as oversee the planning, coordinating, and fiscal functions of the department. The key is to gain an understanding of the organization and individuals, whereby managers must maximize organizational and individual goals and ensure that individuals reach their potential. To effectively perform various roles, managers must have the necessary skills and competencies.

In occupational therapy, managers conduct many essential roles in order for their departments to be successful. This article describes the essential roles, skills, and competencies that occupational therapy managers should possess to ensure organizational survival. More specifically, middle-level managers in an occupational therapy department, similar to managers at the same level in other health care organizations, have authority over and are responsible for a specific segment of the organization, in contrast to the organization or system as a whole. They are uniquely positioned to foster changes in the department. Middle managers are sandwiched between first-level supervisors or the occupational therapy staff, who are considered frontline health care workers, and upper-level managers. They
see the organization from a top-down perspective as well as from a bottom-up one and often recognize fluctuations and trends in the organization and the health care industry before upper-level managers do. Because of the unique positions of middle-level managers, the intention of this article is to examine their roles in the occupational therapy field, and to describe the skills and competencies needed to be successful middle-level managers in the ever-changing health care environment.

BACKGROUND ON MANAGERS AND IN THE FIELD OF OCCUPATIONAL THERAPY

Managers are individuals formally appointed to positions of authority in organizations or systems. They direct or support others to do their work effectively, have responsibility for resource utilization, and are accountable for work results. A classification system identifies managers as top or senior, middle or first-level management. The primary differences between levels of managers are the degree of authority and the scope of responsibility at each level. Senior managers, such as CEOs, presidents, and vice presidents in health care organizations, are responsible for entire organizations, including all staff, resources, individuals, and organizational results. Reporting to senior managers are numerous middle-level managers, each of whom is responsible for smaller segments of the organization. First-level managers, who generally report to middle-level managers, such as occupational therapist staff supervisors, are responsible for overseeing specific work and a particular group of workers. Senior, middle, and first-level managers are responsible for different types of activities, but all of these activities are important, and no organization can be successful unless the work at each level is carefully integrated with the work accomplished at other levels.

Before describing the various roles, skills, and competencies needed by middle managers in occupational therapy, it is imperative to first provide the background and some general information about occupational therapy. Occupational therapy is the art and science of helping people with day-to-day activities which are important to maintain everyday functions despite impairment, disability, or handicap. “Occupation” in occupational therapy refers to all the activities that occupy an individual’s time and give meaning to his or her life. These activities are divided into activities of daily living, work and productive activities, and play and leisure activities. Impairment refers to a loss or abnormality of physical or psychologic structure or function. When an impairment interferes with a person’s ability to perform activities of daily living, work and productive activities, or play and leisure activities, the individual has a disability. When the impairment interferes with a person’s ability to complete activities that fulfill the essential responsibilities and duties, he or she is handicapped. Occupational therapists focus on helping patients/clients return to valued activities of daily living, work and productive activities, and play and leisure activities. They collaborate with clients and their friends and families to set up treatment goals. Occupational therapists work with individuals of all ages, from infants to elders. Furthermore, they work in a variety of settings, ranging from facility-based to community-based and home-based environments. Facility-based settings include general hospitals, outpatient clinics, rehabilitation hospitals, subacute or long-term rehabilitation centers, or nursing homes. Community-based settings include schools, day treatment programs, and group homes. Home-based settings refer to the client’s own homes.

ROLES OF MIDDLE MANAGERS IN OCCUPATIONAL THERAPY

Middle managers in an occupational therapy department perform various roles to be successful and efficient managers. A role is defined as an organized set of behaviors for a particular position in an organization. Not only must middle managers conduct the traditional functions of management and engage in roles of planner, strategic planner, and coordinator but their roles have been broadened.
due to necessity. Since the early 1990s, economic competition, managed care, and internal organizational conflict have affected, and continue to impact, managerial practices. These trends create stress in organizations and test managerial ability to implement change. Focused management teams have replaced more traditional management structures. Managers today must be willing to take risks and must have a vision for the future. Through additional roles of managers, the organization can then flourish. These roles include negotiator, problem solver, and leader (see Fig. 1). As organizations embrace the need for teamwork and customer satisfaction, they de-emphasize the authoritative and hierarchical roles and emphasize more supportive and edifying ones. In these new roles, middle managers are able to encourage more participative decision making, build trust, lend energy, creativity, and enthusiasm to the organization, and negotiate in the best interest of the organizations and subordinates. For example, an organization may set in place a computerized medical record system for documentation of occupational therapy evaluations and progress notes to improve accessibility of medical records, or an organization may implement a more efficient accident prevention program to reduce preventable injuries to its staff and patients. These new programs will require the input and buy-in from all employees in the organization. Primarily, it is the role of middle managers to obtain participation and consensus. In these varying situations, new managerial roles have evolved over time to better help managers tackle these issues.

**Traditional roles of middle managers in occupational therapy**

Middle managers in occupational therapy engage in a number of traditional roles. One of the traditional roles is that of planner. Planning is the process of making decisions in the present to bring about an outcome in the future. Planning is inherently systemic and is characterized by a cyclical process in which goals and specific objectives are periodically reviewed, evaluated, and modified to meet the evolving needs of the occupational therapy department. It is the most fundamental management action and precedes all other management functions. Planning is a complex function in health care due to the intricate nature of the health care system. Health care managers serve as planners.

![Figure 1. Roles of middle managers in occupational therapy.](image)

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to promote order in a rather disorganized system. Occupational therapy managers are involved continuously in planning within, between, and across departments. At the department level, managers need to be aware of the resources necessary for various programs and the financial implications of providing these resources. For instance, an occupational therapy manager should be involved in initial planning meetings and should submit reports to senior management based on data, revenue, and expense projections for resources that are necessary in the expansion of new occupational therapy programs. In addition, middle-level managers must be knowledgeable of reimbursement of occupational therapy services. Because reimbursement varies among providers depending on the types of services rendered, this information is crucial for the middle manager in planning. As planners, middle managers are responsible for analyzing the need for additional staff, and providing space and equipment in a cost-effective manner. In space and equipment planning, safety features and accessibility are paramount. A few examples include sprinkler systems, fire extinguishers, emergency alarm systems in secluded treatment areas, storage for flammable materials, and proper receptacles for disposal of materials. Furthermore, accessibility of communication systems, whether they are telephone, intercoms, or paging systems, should also be considered.

In addition to being planners, managers must also be strategic planners and focus on the long-term success of the organization. To develop strategies that strive to maintain a balance between quality service delivery and cost effectiveness with limited resources and time constraints is a major role of managers. One of the biggest challenges for managers is to help staff members understand the “big picture” in health care and how current situations have evolved. Managers constantly deal with financial constraints as they attempt to mesh departmental needs and wants with the larger objective and finances of their institution. Here, middle managers often have a more balanced view of both sides. For these managers, reduced reimbursement for services is translated into decreased financial resources available for allocation to critically needed areas. Pressure is increased to raise volume of services to make up for financial shortfalls. Because reimbursement is fixed, managers are responsible for re-evaluating staff ratio, educational and skill levels of personnel, and scope of services. As strategic planners, managers must develop effective and efficient service delivery models. According to Slater and Kyle, with a fixed pool of money, managers must develop a personnel complement by deciding which level of staffing is competent and must be able to provide each aspect of intervention based on their case mix. Because personnel resources are not always adequate to provide ideal levels of care, managers must prioritize based on objectives. In this way, prioritizing for the present and forecasting for the future are crucial activities of managers in the strategic planner role.

Furthermore, the increased role of federal and private third-party payers in determining parameters of clinical care has encroached into areas of clinical and professional autonomy. The shift from providing a service to a business orientation has necessitated changes in service delivery models and increased knowledge of fiscal operations, marketing, and systems, but more importantly, has led to new ethical challenges and dilemmas. Senior managers may challenge payers when a payer’s decision jeopardizes patient care or is clinically unreasonable, whereas middle managers serve as strategic planners to help practitioners articulate how occupational therapy treatment will result in functional outcomes within a specified period. Moreover, a middle manager’s role is to help clinicians understand that there is a continuum of care and how the occupational therapy intervention will fit in the overall rehabilitation of the patient. Thus, managers have a responsibility to guard against changing practice standards that may be developed to fit external models designed to enhance profits.
The emphasis on containing costs and ensuring that care is effective in terms of dollars spent and resource utilization is a never-ending dilemma for managers. They must ensure that the changing fiscal environment will not be detrimental to meeting the needs of clients. Consistent with the concepts of the Occupational Therapy Code of Ethics, these guidelines clarify the role of occupational therapy practitioners to ensure the common good by being diligent stewards of human, financial, and material resources. In dealing with ethical dilemmas, managers serve as strategic planners to ensure the financial outcomes of the organization while satisfying clients’ needs. Middle managers are strategically positioned to recommend changes that could be of political and financial benefit to the organization.

Another role that middle managers perform is that of coordinator, specifically, in the area of implementing and coordinating quality improvement programs and initiatives. Briefly, quality improvement is a pervasive and far-reaching approach used for change in the health care industry and is championed by the Joint Commission of Accreditation of Healthcare Organizations and the Commission on Accreditation of Rehabilitation Facilities. According to Colton, quality improvement is defined as a planned approach to transform organizations by evaluating and improving systems to achieve better outcomes. While senior managers are pivotal players to oversee progress on all quality improvement activities and provide them with the resources to carry out their quality improvement activities, middle managers may use various approaches or strategies to effect change within an organization. As “middlemen” between upper management and staff, middle managers are considered coordinators of information and are relied upon for the day-to-day operations of the department. Thus, middle managers act as coordinators to create stability within an organization. Through coordination of resources, middle managers have the capacity to enhance organizational performance. Additionally through coordination, middle managers can identify strengths of staff and develop their weaknesses so that they can reach their potential. For instance, middle managers are responsible for training and retraining skilled occupational therapists and managing productive teams. Middle managers help occupational therapists to expand their applied and theoretical knowledge base and skills as well as their ability to use information technology effectively. One of the most important roles of middle managers is to create an environment where employees engage in continuous learning.

An effective middle manager encourages a subordinate to pursue continuous professional development by recommending courses that may interest the employee and by coordinating the employee’s work schedule with other team members so that the employee can attend courses. Such a manager is also committed to offering an employee the opportunity for job enrichment. Job enrichment can be a powerful motivating force for an employee who is committed to personal growth. For example, if an employee enjoys teaching, the middle manager can have him or her provide in-service to other employees about the latest evidence-based practice in his or her area of expertise. If another employee enjoys mentoring, the manager can have him or her train fieldwork students. Job enrichment also involves ensuring that the employee has the skills and willingness to assume more responsibility. In this way, the middle manager’s role is to coordinate and develop a learning plan. Coordinating employees’ activities enables middle managers to capture and capitalize their contributions to effect positive change for individual workers and their organization.

Additional roles of middle managers in occupational therapy

In addition to the traditional roles of managers, middle managers take on a number of other roles in response to changes in the health care environment. These roles include negotiator, problem solver, and leader. As negotiators, middle managers engage in continuous bargaining and select the simplest
method to achieve a goal. They network by forging and developing interpersonal relationships across departmental and organizational boundaries. Negotiators foster change by emphasizing the need for communication and interdisciplinary collaboration. There are 3 phases of successful negotiating: positioning, bargaining, and repositioning. In the positioning phase, negotiators analyze conditions in the environmental and formulate a plan to achieve immediate objectives. For middle managers, this involves working with senior management and peers. They study organizational politics and develop plans accordingly. In the bargaining phase, negotiators cross departmental and organizational boundaries to build a network. They influence team members to collaborate with the team and adapt their goals to the resources and abilities of their subordinates. In the repositioning stage, middle managers as negotiators prepare their department for the next change and position themselves to negotiate the new change. In the case of negotiating competitive wages and financial incentives for their subordinates, middle managers are able to influence wages based on merit-based systems, which can be used as a source of motivation for employees. For example, a middle manager can help to negotiate a higher salary increase for a staff member who excels and performs beyond standards than one who demonstrates average performance.

Middle managers should also assume the role of problem solver. Internal conflict within organizations has heightened the need for managers to be problem solvers in order to maintain stability and establish guidance and direction in the organization. When middle managers assume the role of problem solver, they should focus their attention on achieving the best results in the least possible time with clear goals in mind. Problem solvers determine the scope and the time limits of the problem and ensure that senior management is on-board before implementing solutions. For example, with increased attention directed at quality problems and medical errors in health care organizations, the ability of middle managers to resolve these problems, and promote and sustain effective quality improvement efforts is vital to organizational success.

In addition, a manager’s role as a leader is also crucial for promoting and sustaining quality improvement efforts in health care. Bradley’s study reveals several roles of managers as leaders in quality improvement activities: (1) a leader as a personal engagement manager, (2) a leader’s relationship with clinical staff, (3) a leader’s role to promote an organizational culture that embraces quality improvement, and (4) a leader’s support of quality improvement with organizational structures. These activities are inherent in the manager’s role of leader to support, promote, and engage in quality improvement techniques.

In the role of a leader of an occupational therapy department, a manager is responsible for supporting, motivating and inspiring employees. A leader’s role is to provide positive energy to his or her staff, and to create an environment where individuals can learn, take chances, and make mistakes. Leaders are also known as designers, stewards, and teachers, responsible for building organizations where individuals must continuously expand their capabilities to understand complexity, clarify vision, and improve shared mental models. In this manner, individuals are able to develop relationship systems for accomplishing the work of the organization. Leaders must be consistent. In a constantly changing world, consistency is an organizational anchor. Employees need to know what is expected of them. Leaders need to communicate their visions and build coalitions of support. For instance, managers as leaders should be supportive and create a culture of education, which involves 5 basic steps. Managers leading this process begin by completing an evaluation of the practice environment. The second step is to develop a culture that supports fieldwork education. The third step is to evaluate the department’s preparedness. The fourth step is to justify the importance of participating in fieldwork education. The final step is to work on avoiding common misconceptions. In this way,
managers in the role of leaders are able to
direct their employees’ efforts toward ongo-
ing education to enhance their skills that will
better meet the needs of their organization.

SKILLS OF MIDDLE MANAGERS IN
OCCUPATIONAL THERAPY

For middle managers to perform the roles
described above, they need to have the skills
and competencies necessary to do so. A
manager’s roles, skills, and competencies are
all interrelated. A combination of all 3 is what
describes a successful manager. Regardless of
the purpose of planning, a systemic approach
is strongly recommended. In order for a
manager to be a strategic planner that relates
to goals that are essential, basic, or critical to
the continuation of an organization and
involves the allocation of resources to achieve
an organization’s long-range goals, managers
must have specific skills. In the role of
strategic planner, a middle manager must
possess conceptual skills. These are made up
of 5 basic skills: (1) the skill to assess, (2) the
skill to analyze, (3) the skill to make decisions,
(i) the skill to implement plans, and (5) the
skill to evaluate.7 Assessment involves the con-
struction of a thorough appraisal of the
current and future state of the organization.
Managers need to identify and prioritize
issues. Managers should analyze trends and
investigate their implications for the future.
The decision-making skill is another key com-
ponent for a manager. Specifically, middle
managers should consider advantages and
disadvantages of department issues and select
among alternatives. Another skill is the actual
implementation of plans. Here, middle man-
gagers should allocate adequate time and other
resources to execute plans that are aligned
with an occupational therapy department’s
mission and goals.

Middle managers are constantly using their
evaluation skills. Questions should be asked to
determine when an issue is resolved and how
it can be measured. As an evaluator, the
manager usually measures the actual outcome
against a standard. For a middle manager in
occupational therapy, it refers to the mana-
gerial skill of evaluating quality of services.
Quality assurance lies at the heart of the basic
purpose of health care. From the perspective
of a manager, quality assurance is a method
for assessing problem delivery and outcomes,
personnel performance, and staff produc-
tivity. As such, middle managers place em-
phasis on evaluation to achieve the highest
possible quality of care and quality of services.

Another useful skill of a middle-level man-
ger at an occupational therapy department is
that of marketing. Through marketing, clients' needs and desires are ascertained. Marketing
skills are closely linked to the role of a man-
ger as a strategic planner. There must be
a match between the goals and mission of
the organization and the needs of the client
in the development of any new service.7 With
ongoing changes in the health care envi-
ronment, there is a growing demand for
marketing skills. For instance, the analysis
of consumer behavior, attitudes, knowledge,
and beliefs are changing the way health
care systems are planning for new services.
Because new programs focus on lifestyle
changes, disease prevention, and alterna-
tives to rehabilitative care, middle managers
need to be aware of these new foci, and use
their marketing skills to provide these new
and growing services to the public.

Marketing can be used externally to edu-
cate the general public to the need and
availability of occupational therapy services,
such as community newsletters, workshops
for special disability groups, and participation
in health fairs within the community. This
is where the middle manager’s marketing skills
become valuable. This skill enables middle
managers to develop creative marketing con-
cepts to get the message across to their public.

In addition to maintaining external market-
ing, marketing skills are also relevant within
an organization. Methods of internal market-
ing strategies might include a departmental
open house; in-service for doctors, nursing, or
social service personnel; or future articles in
employee newspapers. Occupational therapy
service managers should integrate their mar-
keting skills into their existing management
roles. This combination enables them to
deliver high quality services while satisfying the needs of potential clients, and ensures the viability of the program through marketing strategies.

A fundamental skill of managers is their human relations skill. Managers must be able to shape and modify employee behavior through directing, motivation, and supporting so that employees can acquire the necessary knowledge and skills to perform assignments in compliance with policies and procedures of the organization. Because managers work with people, in this capacity, they must possess interpersonal skills in which to lead individuals and enable them to reach their goals and link those to organizational goals. The objectives of a good manager include raising the level of member motivation, improving quality of all decisions, developing teamwork and morale, furthering individual development of members, and increasing readiness to accept change. Closely related to human relations skills is the leader role of the manager. For instance, being supportive of employees who wish to advance their education and training in occupational therapy, middle managers are performing the leader role and must possess interpersonal skills that include being caring and accommodating their needs.

A number of skills are important to managers in general. However, this article has described a few of the most essential skills of middle managers in occupational therapy, given the fast-paced changes in the environment and the need to serve occupational therapy clients as well as focusing on their employees and organization (Fig. 2).

COMPETENCIES OF MIDDLE MANAGERS IN OCCUPATIONAL THERAPY

Competencies are explicit statements that define specific areas of expertise and are related to effective or superior performance in a job. Specific competencies are driven by actual tasks and job responsibilities assigned to a particular staff member and outlined within an individual’s job description. For example, the 4 competencies of a manager in the role of a leader are: (1) the management of attention, in which managers must build commitment and consensus; (2) the management of meaning, in which managers must communicate the organization’s vision and values; (3) the management of trust, in which managers must display consistency in their values and vision; and (4) the management of self, in which managers must be critical, aware, and knowledgeable of one’s own abilities, attitudes, limitations, and lack of understanding. This creates the basis for learning.

In addition to the competencies needed to be a good leader, the middle-level manager in an occupational therapy department must demonstrate competencies in utilization reviews, program and performance evaluation, and proper documentation. Utilization review is a hospital-wide or facility-wide function. It

Skills:
1. Conceptual skills: assessment
   analysis
   decision making
   evaluation
2. Marketing
3. Human Relations

Competencies:
1. Management of attention
2. Management of meaning
3. Management of trust
4. Management of self
5. Utilization review
6. Program evaluation
7. Documentation
8. Financial management and Budgeting

Figure 2. Skills and competencies of middle managers in occupational therapy.
is a program that monitors the use of facilities and services. Utilization review assures that the client receives only those services that are medically necessary. In addition, utilization review assures the payer that the care is delivered economically and conforms to criteria determined by rehabilitative managers and staff within the department. Utilization review programs are coordinated by an individual who has extensive knowledge of all aspects of patient care. In this case, it is the responsibility of competent middle managers in occupational therapy departments.

Middle managers should be especially competent in conducting evaluations. Program evaluation refers to the review of the results achieved following the provision of care. It is critical as a control mechanism and an outcomes-monitoring system that reflects the results of services on consumers. Another aspect of evaluation is a manager's competence in performance evaluations. The evaluation of job performance relates specifically to an individual and the assurance that the individual is qualified and performs his or her duties at a specified level of quality. Performance appraisals are formal mechanisms used by managers to provide positive and constructive feedback to an employee on performance, in comparison with prescribed expectations. Credentialing through certification and licensure assures the public that the personnel who provide care are qualified to do so. It is the responsibility of the manager to verify credentials on employment and to assure that employees maintain appropriate credentials on an ongoing basis.

Documentation is one of the most important functions performed by occupational therapy practitioners that support intervention with clients. Documentation is the key to communicating occupational therapy services to others on the professional team and to the reimbursement agency. In addition, documentation is the basis for measuring quality assurance throughout the organization or system. At the department level, middle managers need to be especially competent in this area and constantly be reinforcing complete and adequate documentation to their staff and for the purposes of establishing internal standards and meeting the criteria of external reimbursement agencies and accrediting bodies. Managers must be aware of and be up-to-date with all the latest regulations and criteria for documentation that is required by accrediting bodies and reimbursement agencies including different insurance companies, as well as Medicare and Medicaid standards and guidelines for reimbursement.

Fiscal management is another area of competence required for middle managers in an occupational therapy department. Fiscal management is an activity concerned with discovering, developing, defining, and evaluating the financial goals of the organization, department, or program. It is linked with all aspects of the manager's role because the financial well-being of the occupational therapy department is essential for its long-term survival. In addition, managers should be competent with budgeting. Budgets ensure that program objectives are formulated with financial realities in mind. Budgeting is a planning and controlling tool. As a planning tool, a budget is a specific statement of anticipated results for a specific period. Managers need to be competent with the budgeting process and methods to be able to properly administer the department.

Gaining competence in the specific areas of responsibility for middle managers is critical to the success of an occupational therapy department. It enables these managers to be knowledgeable and to possess specific expertise to ensure effective departmental performance, which ultimately leads to the viability of the organization as a whole.

CONCLUSION

This article has attempted to identify the most essential roles, skills, and competencies needed by middle managers in occupational therapy organizations. There are many different roles of managers, as well as additional skills and competencies that managers, in general, should possess; however, for the purposes of this article, a few have been selected and highlighted as particularly crucial.
in the changing health care industry. In particular, given the realities of the managed care environment, ethical challenges, the focus on quality improvement, utilization review and evaluation of programs and treatment plans for clients in occupational therapy, it is especially noteworthy to point out that the planner, strategic planner, coordinator, leader, problem solver, and negotiator roles of managers are key to the success of occupational therapy departments.

Furthermore, to conduct these roles, skills and competencies that are closely linked to the effective performance of those roles are also described. Therefore, this article points out that through the performance of the outlined roles, skills, and competencies, middle managers will have the knowledge and ability to improve their departments and their organizations. Although the demands of upper managers and the needs of their subordinates often pull middle managers in 2 directions, with these prescribed roles, skills, and competencies, they should be able to effectively promote the mission of their organization, support their employees, and navigate successfully in the competitive and ever-changing health care environment.

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