REVIEW

# Administration models applied to care management: an approach to macro, meso and micromanagement

## Modelos de administración aplicadas a la gestión del cuidado: un enfoque a la macro, meso y microgestión

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ABSTRACT

**Introduction:** healthcare organizations require the use of management models as theoretical tools to achieve corporate efficiency and minimize risks in achieving objectives. These models are fundamental for the implementation of care management, so that both are aligned in mission, values, structure, strategies and processes. The objective of this article is to describe 21st century administration and management models that are applicable in care management at the macro, meso and micromanagement levels.
**Method:** narrative review. Data source: WOS, Scopus and Scielo using the keywords: "theory", "model", "management", "administration" with the booleans "AND" and "OR".; publications between 2000-2024 and in English and Spanish. The selection of documents was based on complete reading. Three experts on the subject validated the models and these were presented for discussion to a team of health managers.
**Results:** the models of: 7 "S" of McKinsey, Birkinshaw & Goddard, trends in people management according to Deloitte, Werther & Davis, Beer Management Model and the Corporate Social Responsibility Management Model are presented, providing the focus of applicability to the health system from macro management, then in meso management and finally operationalizing them in micromanagement.
**Conclusions:** the various theories and models of administration or management of the 21st century have the potential to be a fundamental pillar in the implementation of care management by integrating it as an organic element in a health institution at the macro, meso and micromanagement levels.

**Keywords:** Model; Administration; Management; Care.

RESUMEN

**Introducción:** las organizaciones sanitarias requieren utilizar modelos de gestión, como herramientas teóricas para lograr eficiencia corporativa y minimizar riesgos en la consecución de objetivos. Estos modelos son fundamentales para la implementación de la gestión del cuidado, de manera que ambos se alineen en misión, valores, estructura, estrategias y procesos. El objetivo de este artículo es describir modelos de administración y gestión del siglo XXI que son aplicables en la gestión del cuidado a nivel macro, meso y microgestión.
**Metodología:** revisión narrativa. Fuente de datos: WOS, Scopus y Scielo usando los palabras claves: "theory", " model", "management", " admistration" con los boleanos "AND" y "OR".; publicaciones entre 2000-2024 y en idioma inglés y español. La selección de documentos se basó en lectura completa. Tres expertos en el tema validaron los modelos y estas se presentaron a discusión a un equipo de gestores sanitarios.
**Resultados:** se exponen los modelos de: 7 "S" de McKinsey, Birkinshaw & Goddard, las tendencias en la gestión de personas según Deloitte, Werther & Davis, Modelo de Gestión de Beer y el de Gestión de Responsabilidad Social Empresarial, entregando el enfoque de aplicabilidad al sistema sanitario desde la macro gestión, luego

en la meso gestión y finalmente operacionalizándolos en la microgestión.
**Conclusiones:** las diversas teorías y modelos de administración o gestión del S XXI, tienen la potencialidad de ser un pilar fundamental en la implementación de la gestión del cuidado al integrarla como elemento orgánico en una institución sanitaria en los niveles de la macro, meso y microgestión.

**Palabras clave:** Teoría; Administración; Gestión; Cuidado.

## INTRODUCTION

Health care organizations, whether public or private and that provide different levels of care, operate in an environment where management is essential for their permanence in a constantly changing system.[1] Scientific management, which started in the 19th century with classical schools, has evolved and is applied to companies and services, including hospitals and health centers.[2,3] Conceptually, there is a difference between "administration" and "management". Administration is defined as the process of designing and maintaining an environment in which people, working in groups, efficiently achieve selected goals, directly coordinating resources. In contrast, management focuses on the set of actions necessary to develop a specific process, conceived as a global and integrative function that encompasses the adoption and execution of decisions on policies, strategies, plans, and actions derived from the central activity of the organization.

Management directs its strategy toward organizational objectives and the means by which to achieve them.[4] In this context, organizational management models are tools that consider all systemic aspects and essential resources to improve corporate efficiency and minimize risks in the achievement of objectives. A model is a simplified theoretical design of a complex system or phenomenon that facilitates its understanding and study.[1] To implement care management in any health institution, a management model that incorporates the fundamental principles of care, supported by a theory of care and operationalized through the nursing process, is necessary.

Care is the essence of the nursing profession, being the driving force and focus of this discipline, for the benefit of people and communities.[5] Thus, the management of care and the organizational management model are aligned in terms of their missions, values, structures, strategies, and processes. The nurse manager, in this context, can plan, organize, direct, and control work teams and physical, material, and financial resources to effectively meet the objectives of the organization and the needs of users.[6] This systemic perspective requires nurse managers to base their decisions on their knowledge of various disciplines, such as organization sciences, management, economics, sociology, and politics, among others, for better professional practice.

The objective of this article is to describe the administration and management models of the 21st century that are applicable and implementable in the management of care at the macro-, meso- and micromanagement levels.

## METHOD

A narrative review was carried out to identify the administration or management models generated in the 21st century in the WOS, Scopus, and SciELO databases via the following keywords: "theory", "model", "management", and "administration", with the Booleans "AND" and "OR", combining them in the following way: theory OR model AND management OR administration AND organization. The year of publication was filtered between 2000 and 2024 and publications published in English and Spanish were included. All types of documents were searched, with book chapters being intentionally searched. The selection of documents was based on reading the title, abstract, and full text. For the selection of the models generated in the 21st century, the researchers submitted three experts on the subject to validate the selection, and later, they the researchers themselves presented for discussion with a team of health managers to legitimize their applicability in the management of care.

## RESULTS

The six selected 21st management models are presented considering their general topics as well as their most specific topics according to the current organizational context.

### McKinsey's "7S" model

The McKinsey 7-S framework addresses organizational complexity, taking into account the levels of structure, teams, and individuals. Developed by R. Waterman, T. Peters, and JR Phillips at McKinsey[7,8], this model is based on management according to objectives and presents the concept of organizational "health", which combines management methods with corporate culture.[8] The seven elements that make up this model facilitate the identification of possible dysfunctions in the management process.[7] These 7-S elements—values, strategies,

structures, systems, personal factors, styles, and shared skills—are key factors that affect organizational performance.[7]

The performance of the organization, according to this model, arises from the dynamic interactions among these components, with the "shared values" being at the center of the system (figure 1).[7] The diagram is divided into two main sections. The "hard" section includes the structures, strategies, and systems. The structure represents the framework of functions and positions within an organization, often reflecting hierarchies, authorities, responsibilities, and roles.

Systems, or procedures, are the processes by which individual activities and collaborators are managed, coordinated, and directed to achieve organizational objectives. For example, a human resource system defines how the recruitment, promotion, and transfer of employees are carried out.

The strategy includes activities aimed at achieving specific organizational goals and objectives, such as a strategy to improve public health.[7,9]

The remaining elements form the "soft" dimension of the model. "Skills" refer to the set of individual capabilities of each employee in an organization. "Staff" comprises employees with diverse knowledge, experiences, intelligence, skills, and training. "Style" is defined as the way in which rights and responsibilities are assigned within an organization. "Shared values" include beliefs and expectations about and attitudes toward the work and the organization, as well as any communication related to the vision, mission, and values that establish general goals for all collaborators.[7,9,10,11] The "hard" elements are linked to the technical aspects of the organization, whereas the "soft" elements represent its social aspects. In management terms, soft factors are considered to have greater prominence than are hard factors.[7]

In the macromanagement sphere, which encompasses public policies, regulations, financing systems, the market, and regulators, the 7-S model is crucial for the health system. Here, "shared values" represent the essence and focus of those health guidelines set forth by the World Health Organization (WHO).[12]

Likewise, the Sustainable Development Goals (SDGs) issued by the United Nations propose the 2030 Agenda, with these values guiding strategic and political health decisions. The structure, strategy, and systems are vital elements for the functioning of the health system and can be restructured in the health reform of each country according to global guidelines. Such a strategy establishes long-term goals, such as improving health systems or implementing preventive policies. The organizational structure, which is based on the ministries of health and their divisions, and the systems, such as those for financing and health information flows, are vital for effective model implementation.

The mesomanagement level involves strategic management at the organizational level, which, in this case, is the management of institutions such as hospitals or primary care networks, where the 7-S model is replicated following the guidelines of the 7 elements, especially shared values. The organizational structure defines roles and responsibilities, reflecting the hierarchy and coordination necessary for effective care. Management systems, such as quality and risk management systems, guarantee the operability and quality of care. Management style influences the implementation of these practices, whereas skills and medical and administrative personnel determine the ability of organizations to execute effective health strategies. Such a strategy establishes long-term goals, such as improving health systems or implementing preventive policies. The organizational structure, such as the ministries of health and their divisions, and the systems, such as those for financing and health information, are vital for the effective implementation of these strategies on a large scale.

At the micromanagement level, which focuses on clinical management within units such as hospital services or clinics, the 7-S model is still relevant. Here, individual skills and medical personnel are crucial for user care. Shared values influence the culture of safety and user-centered care, whereas management style shapes daily dynamics and decisions at the point of care.

In short, the McKinsey 7-S model offers a comprehensive approach to analyzing and improving management at all levels of health care, integrating hard and soft elements to understand how organizational structures, strategies, systems, and cultures interact and affect the overall performance of health systems and services.

## Birkinshaw and Goddard management model

Birkinshaw and Goddard[13,14] identified the following four crucial activities for organizations: goal setting, motivation, activity coordination, and decision-making. These activities vary in their execution, reflecting two extreme approaches. Goal setting can range from short- to long-term goals. Motivation can be extrinsic or intrinsic, coordination can be formal or informal, and decision-making can be centralized or decentralized. These elements are divided into "ends" (goal setting and motivation) and "means" (coordination and decision-making).

The planning model is characterized by clear short-term objectives, bureaucratic processes, and extrinsic motivation, with hierarchical decision-making. The quest model shares clear objectives and extrinsic motivation with the planning model but delegates decision-making to collaborators. The scientific model establishes

defined management processes and structured decision-making, promoting autonomy and intrinsic motivation. The discovery model is characterized by its flexibility and adaptability to changing environments, fostering innovation. Each model is adapted according to the context at hand—the planning model for stability, the quest model for growth, the scientific model for innovation, and the discovery model for dynamic environments[13,14] (figure 1).

The Birkinshaw and Goddard management model[13,14] offers a versatile tool with which to improve health care management at the macro, meso and micro levels, adapting to each context. At the macro level, the planning model stands out for establishing specific objectives and centralized decision-making to address public health problems. The scientific model is adapted to research institutions, promoting innovation. At the meso level, the quest model allows for the setting of operational objectives while delegating implementation to medical and administrative teams, promoting flexibility. The discovery model is ideal for innovation units, encouraging experimentation. At the micro level, the scientific model ensures the application of evidence-based clinical protocols, whereas the planning model provides a clear structure for emergency situations.

The adaptation of these models to the specific dynamics of each level makes it possible to optimize health care management, improving efficiency and results. This flexible and adaptable approach is crucial for meeting the changing and diverse challenges of the health sector, ensuring quality and effective care for all users.
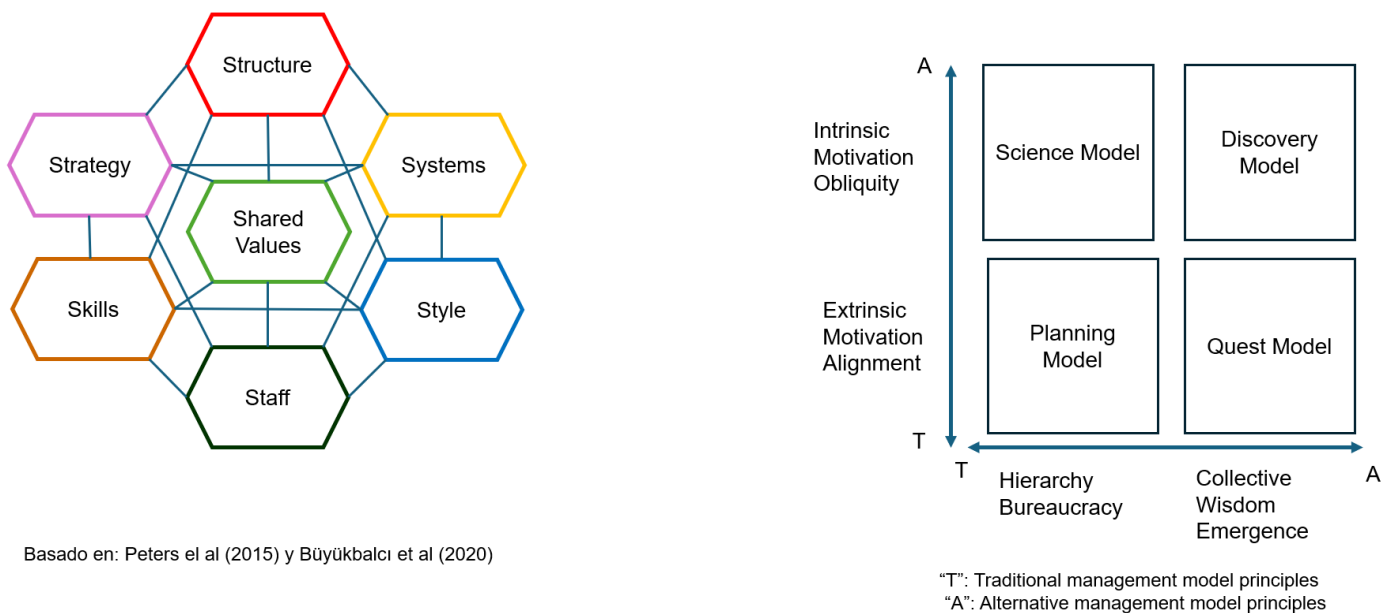


Basado en: Peters el al (2015) y Büyükbalcı et al (2020)

"T": Traditional management model principles
"A": Alternative management model principles

**Figure 1.** McKinsey's 7S Model and Birkinshaw and Goddard's Management Model

### Trends in people management (Deloitte 2017)

Deloitte's "trends in people management" model[15] highlights transformational trends in human talent management and focuses on transformational leadership that inspires innovation, the promotion of inclusive and diverse organizational cultures, and the adoption of disruptive technologies such as artificial intelligence and data analysis. In addition, this model emphasizes improving the experience of employees with flexible policies, remote work, and continuous and personalized skill development. This model provides organizations with a strategic framework through which to adapt to a changing work environment, maximizing employee retention and engagement while aligning with the needs of the market and the long-term goals of the organization (figure 2).

At the macro level, this model emphasizes the redesign of the system for the digital age in the health context and the management of people through policies and regulations that generate innovation, creativity, and development in a changing context facing the complexities of health at the national level.

At the mesomanagement level, such as hospitals and primary care networks, the model proposes diverse and inclusive policies to improve the quality of care through culturally competent teams and personalized development programs. In addition, this model suggests the adoption of emerging technologies, such as artificial intelligence and automation, to optimize administrative operations and free up time for direct customer service. In health care organizations, agile structures and interdisciplinary teams are promoted for innovations in digital health and telemedicine. Improving the user and collaborator experience is emphasized through environments focused on both increasing satisfaction and increasing efficiency.

At the micromanagement level, the model improves the user and collaborator experience through efficient appointment management and communication systems and wellness programs. This model also focuses on the continuous development of skills adapted to the individual needs of clinical collaborators and effective

leadership that promotes teamwork to improve the coordination and quality of medical care.

In summary, the Deloitte model on trends in people management offers an integrated approach to improving operational efficiency and quality of care at all levels of the health sector, adapting to the particularities of each context to optimize the satisfaction of both collaborators and users.

## Werther and Davis management model

The Werther and Davis management model[16] offers a comprehensive framework for organizational management, focusing on key aspects such as strategic planning, organizational structure, human resource management systems, and corporate culture. This model recognizes the importance of aligning organizational objectives with the capabilities and motivations of employees to optimize performance and efficiency. Moreover, this model proposes strategies for the effective implementation of human resource policies that ensure the adaptability and competitiveness of the organization in a dynamic environment. Werther and Davis highlight the need to integrate effective leadership practices that foster a collaborative work environment, promoting both individual development and the fulfillment of organizational goals. This balanced approach between the technical and human aspects of management enables organizations to face complex challenges while cultivating a positive and sustainable business culture (figure 2).

The Werther and Davis management model provides a robust approach that can be applied at various levels of health care management. At the macro level, this model focuses on strategic planning, which, in this case, would be governmental and ministerial, to establish long-term objectives that improve public health and health infrastructure. In addition, this model emphasizes the effective management of human resources to guarantee the competence and availability of health personnel through training and retention policies. Financial management is optimized through techniques that ensure efficiency in the allocation of financial resources, promoting the sustainability of the health system. The integration of ethical principles and social responsibility in strategic decisions ensures that the benefits of health policies are equitably distributed.[16-18]

At the mesomanagement level, quality management programs based on the Werther and Davis model are implemented to meet rigorous standards in hospitals and primary care networks. Human resource management focuses on improving the efficiency and satisfaction of employees through professional development and adapted wellness programs. Operational management techniques optimize hospital resources and strengthen community relationships through social responsibility.

At the micromanagement level, user management techniques are applied to improve the health care experience and efficiency. Effective leadership and teamwork strengthen the coordination and quality of care within specific units. Tailored human resource policies ensure a supportive environment and support the ongoing development of clinical and administrative staff. The integration of innovative technologies increases the levels of diagnostic accuracy and operational efficiency, thus improving the overall user experience.

In summary, the Werther and Davis model offers a flexible and adaptive framework that improves the efficiency, quality, and satisfaction of both providers and users at all levels of health care management.

## Beer management model

The Beer management model[19] focuses on building an organization capable of managing strategic changes effectively. This approach highlights the importance of aligning management systems with organizational strategy and shared values. Beer proposes that successful organizations must develop a strong and coherent culture in which employees feel committed and motivated. This model emphasizes open communication and participation in decision-making, thus creating an environment where employees at all organizational levels actively contribute to the achievement of strategic objectives. Beer suggests that effective management involves not only the implementation of formal structures and control systems but also the creation of conditions that foster organizational learning and continuous innovation. In summary, the Beer management model is referred to as the strategic fitness process (SFP) and proposes a holistic approach to organizational design, with a focus on strategic alignment, solid organizational culture, and employee commitment as fundamental pillars for the long-term success of the organization (figure 3).

The beer management model, which is applied in the health sector at various levels of management, promotes an effective organizational transformation aligned with current and future needs. At the macro level, this model focuses on implementing transformational leadership that aligns public health strategies with the goals of the population, facilitating organizational changes that improve the efficiency and quality of care. In addition, the commitment of employees is prioritized through policies that promote collaboration and professional development, ensuring sustainability and equity in access to care.[19]

At the mesomanagement level, an organizational culture focused on excellence and user safety is promoted, along with performance management systems that continuously monitor and improve clinical performance. Interdisciplinary collaboration and innovation are key to integrating best practices and advanced technologies that optimize customer service and operational efficiency.

At the micromanagement level, the model emphasizes the development of clinical leadership and the

management of human resources to guarantee the competence of collaborators and the effective management of resources in specific units. The implementation of rigorous quality and user safety standards, backed by innovative technologies, improves diagnostic accuracy and the user experience at the point of care.

In summary, the Beer management model provides a comprehensive framework for health care management, facilitating an organizational transformation that strengthens commitment, quality of care, and operational efficiency at all levels of the health system.
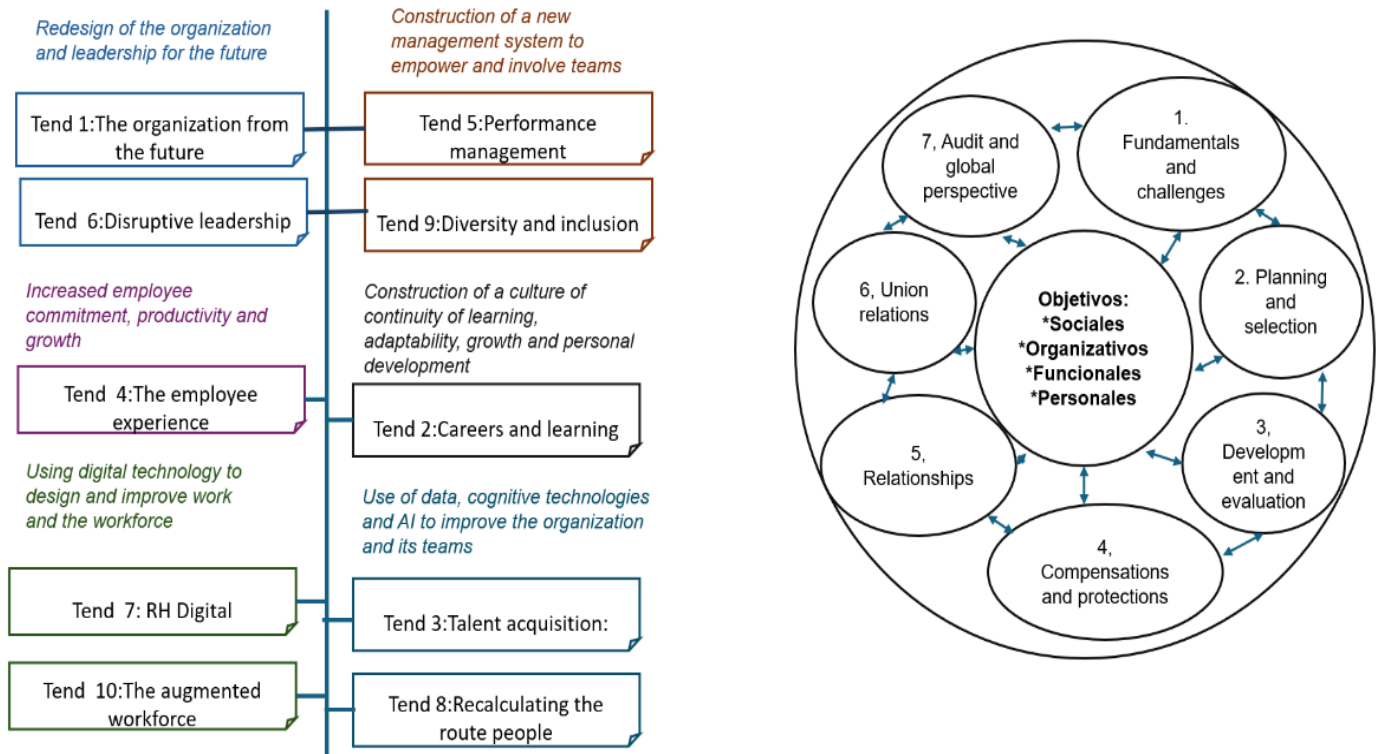


Fuente: Deloitte (2017); Wether et al (2014)

**Figure 2.** Trends in people management, Deloitte and Werther and Davis Management Model

## Corporate social responsibility (CSR) management model

According to Jonker et al.[20], a CSR management model focuses on the integration of ethical, social, and environmental considerations in business operations and strategies. This holistic approach goes beyond legal compliance, demonstrating positive impacts on society and the environment. The main characteristics of the model include a strong commitment to stakeholders, fostering collaboration and open dialog with employees, local communities, suppliers, and customers.

The CSR model stands out in that it promotes transparency and ethics in all business decisions and operations, ensuring the trust and respect of all parties involved. In addition, the model incorporates the proactive management of social and environmental risks, evaluating and minimizing negative impacts while maximizing the benefits for the community and the environment. This model supports long-term sustainable development, balances current needs with future generations, and recognizes the integral responsibility of the organization beyond financial results, considering its global impact.[20-22] In 2002, the "Development of a management model of corporate social responsibility as a tool to improve the competitiveness of companies and institutions in emerging countries" was initiated[23] (figure 3).

In summary, the CSR management model provides a valuable strategic framework for organizations to manage their social and environmental impacts in an ethical and responsible manner. This model contributes significantly to the sustainable development and general well-being of the community by prioritizing sustainability and comprehensive responsibility in all facets of business operations.

At the macromanagement level, which encompasses public health policies and strategic management at the national or regional level, the CSR management model can be applied in several key ways. First, the CSR criteria can be integrated into CSR public health policies to ensure that government decisions promote sustainable and equitable health practices, guaranteeing fair access to medical care and the transparent management of resources. In addition, promoting community health through CSR initiatives, including disease prevention and health education programs, strengthens the social commitment of the health sector to local communities.

Facilitating collaboration among the government, nongovernmental organizations (NGOs), the private sector, and civil society is essential to address public health challenges in a sustainable and shared way.

At the mesomanagement level, which encompasses the management of hospitals, primary care networks, and local health systems, the implementation of responsible management practices is essential. This implementation includes adopting standards of quality, user safety, and environmental stewardship to promote ethical and transparent health care. The development of CSR programs at the local level, such as corporate volunteering and responsible purchasing policies, benefits users, collaborators, and local communities alike and strengthens the relationships among and social responsibility of hospitals. The evaluation and management of the social impact of hospital operations in the community ensure that they contribute positively to local economic and social development. Similarly, each self-managed hospital can favor the implementation of the learning and service methodology with the higher education institutions with which it maintains teaching–care agreements.

Finally, at the micromanagement level, within specific units such as hospitals or clinical services, it is crucial to promote an ethical and responsible culture among users, ensuring the quality and safety of clinical care. The implementation of inclusive human resource policies that promote the diversity and professional development of clinical staff, together with the responsible adoption of innovative technologies, contributes to improving user care, operational efficiency, and environmental sustainability.

In summary, the CSR model for health care management promotes ethical, sustainable, and socially responsible practices at all levels. By integrating these principles into policies, operations, and the organizational culture, health institutions can move toward more inclusive, quality health care oriented toward the integral well-being of the community.
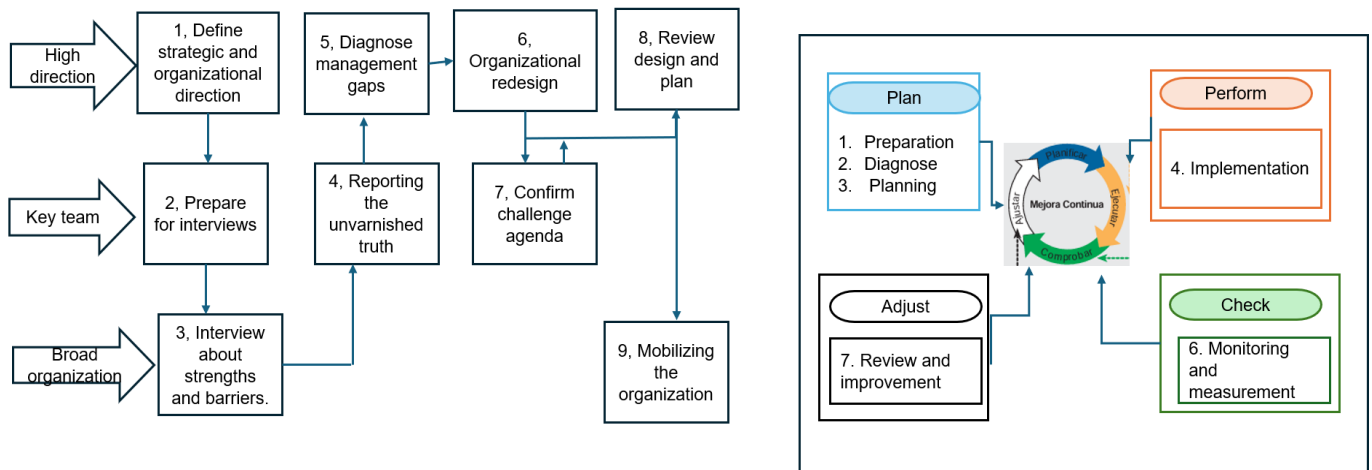


Basado en Beer (2013); Pontificia Universidad Católica de Valparaíso (2006)

**Figure 3.** Beer Management Model and CSR Management Model

## CONCLUSIONS

The analyzed models provide valuable tools and approaches for addressing the complex challenges faced by nursing professionals in their role as managers and offer specific strategies through which to optimize operational efficiency and decision-making in the field of clinical management, allowing an administration to obtain more effective resources and have more focused attention on the user, considering the social and environmental impact of their actions.

By integrating these models into care management, health care organizations systemically integrate their processes to optimize the quality of care, guarantee user safety, and promote a healthy and motivating work environment for nursing professionals. Thus, the management of nursing care should be seen as a fundamental component of all health organizations.

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