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CARING WITHOUT BOUNDARIES: UNVEILING THE EXPERIENCES OF NURSE MANAGERS RENDERING BEDSIDE CARE

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Abstract: This qualitative study explores the lived experiences of nurse managers who navigate the dual responsibilities of administrative leadership and direct bedside care within healthcare settings. Using a hermeneutic phenomenological approach, in-depth interviews were conducted with ten nurse managers. From these, 586 transcribed statements were analyzed, and 215 significant statements were drawn. Three emergent themes surfaced through thematic analysis. First, Rekindling Professional Passion and Fulfillment, reflects the emotional and professional renewal derived from bedside engagement. It includes four cluster themes: Renewed Passion for Bedside Nursing, Deepened Compassion and Empathy, Enhanced Patient Connection, and Personal Fulfillment and Satisfaction. The second emergent theme, Organization and Prioritization of Responsibility, highlights how nurse managers sustain performance amid dual demands. Cluster themes include: Time Management, Teamwork and Delegation, Work–Life Balance and Stress Management, and Patient-First Commitment. The third theme, Strengthening Leadership Practices, captures how bedside care enhances managerial effectiveness. It comprises: Prioritization for Quality Outcomes, Collaborative, Evidence-Based Practice, Empathetic and Staff-Oriented Leadership, and Decisive and Effective Management. Despite challenges such as organizational pressure and emotional strain, participants found fulfillment in reconnecting with patient care. This study recommends integrating bedside presence in leadership roles to enhance staff morale, patient care quality, and professional satisfaction. It also urges nursing education to promote emotional resilience and healthcare institutions to support flexible, practice-grounded leadership models.

IndexTerms **- Social Science, Nurse Managers, Bedside Care, Phenomenology, Tagum City**

I. INTRODUCTION

Nurse managers play a critical role in healthcare by balancing administrative responsibilities with direct patient care. However, increasing administrative duties, such as compliance, staffing issues, and budgeting, often distance them from the bedside, affecting both patient care quality and staff morale. Globally, in countries like Egypt, Indonesia, and Thailand, nurse managers face similar challenges, with staff shortages and high patient turnover adding to their stress and workload (Ali & El-Said, 2024; Hidayat et al., 2023). In the Philippines, particularly in cities like Davao, Cebu, and Zamboanga, nurse managers struggle with the same issues, leading to emotional exhaustion, burnout, and role overload, especially during the pandemic (Salvador et al., 2023; Gomez & De Guzman, 2023). These pressures highlight the need for policies that support nurse managers and improve healthcare delivery.

Despite existing studies on nurse managers' administrative roles, there is limited research on their bedside care responsibilities, particularly in low and middle-income countries like the Philippines. In Tagum City, nurse managers face similar challenges, with burnout and decreased service quality as they balance administrative tasks with patient care. Existing research mostly focuses on leadership and decision-making, neglecting how growing administrative workloads impact direct care. This research gap calls for further studies to inform policies that support nurse managers and enhance healthcare outcomes (Ali & El-Said, 2024; Salvador et al., 2023).

Importance of the Study

This study will provide insights into the dual roles of nurse managers in private hospitals in Tagum City, Davao del Norte, Philippines focusing on their leadership, administrative tasks, and patient care duties. Nurse managers are essential for ensuring quality care and teamwork, but they face challenges like role conflict, resource shortages, and the growing demands of patient care,

leading to burnout and job dissatisfaction. By exploring these challenges, the study aims to help nurse managers balance their roles better, reducing stress and improving job satisfaction.

The research will benefit both patients and hospital administrators. When nurse managers are better supported, they are more likely to provide high-quality care, improving patient outcomes. The study will also offer practical strategies for nurse managers and inform training programs to enhance caregiving. For hospital administrators, the research will provide insights into improving resource management and leadership practices, leading to a more efficient and supported workforce. This study will also serve as a foundation for future research on nurse managers' roles in different healthcare settings.

Theoretical framework

This study uses two (2) important theories to understand the challenges nurse managers face in balancing administrative and clinical duties. The Roy Adaptation Model (RAM), developed by Sister Callista Roy, explains how individuals adapt to stress at four (4) levels: physiological, self-concept, role function, and interdependence. For nurse managers, RAM helps explain how they maintain their professional identity, manage stress, fulfill leadership roles, and work with teams despite challenges like staffing shortages and resource constraints (Roy, 2009; Fawcett, 2020).

Jean Watson's Theory of Human Caring emphasizes the importance of interpersonal relationships and holistic care in nursing. Her "Carative Factors" like loving-kindness, faith, and creating a healing environment are essential for nurse managers, especially in the Philippines, where there are high patient-to-nurse ratios and limited resources (Gomez & Tanchoco, 2021). These factors help nurse managers foster an empathetic environment that supports both staff and patients. Together, these theories provide a framework to understand how nurse managers adapt to stress while maintaining compassionate care and resilience in difficult working conditions.

II. RESEARCH METHODOLOGY

Design

This study uses a qualitative research design, specifically the hermeneutic-phenomenological approach, to explore the experiences of nurse managers at a private hospital who balance bedside care with administrative tasks. Hermeneutic phenomenology, based on Heidegger's philosophy, focuses on understanding the meanings individuals attach to their experiences within specific contexts. Unlike descriptive phenomenology, which simply describes experiences, this approach digs deeper to explore both the clear and hidden meanings behind participants' experiences, making it ideal for understanding the complexities of nurse managers' dual roles (Van Manen, 2014).

The hermeneutic-phenomenological approach is well-suited for this research as it allows for a deep dive into the lived experiences of nurse managers. This method helps uncover both the explicit and implicit meanings of their experiences, revealing their coping strategies and the emotional and professional impacts of their responsibilities. It provides a comprehensive understanding of the challenges nurse managers face in balancing leadership and caregiving duties.

Participants

The study was conducted in a 100-bed private hospital in Tagum City, where ten purposively selected nurse managers comprising head nurses and supervisors shared their experiences through in-depth interviews. These participants were chosen for their active involvement in both clinical and leadership roles, ensuring relevant and rich data. This study involved ten (10) nurse managers from a private hospital in Tagum City, including four (4) supervisors and six (6) head nurses, who shared their experiences of managing both administrative duties and patient care through in-depth interviews. These participants were selected using purposive sampling, ensuring they had experience balancing both roles and could provide valuable insights into the challenges they face. Their stories helped uncover the difficulties and strategies involved in managing these two responsibilities in a hospital setting.

Qualitative research typically involves smaller, purposefully selected sample sizes to explore specific experiences in detail, rather than making broad generalizations. In this study, the ten (10) participants were chosen because their experiences offered important perspectives on the dual roles of nurse managers. To ensure a diverse range of experiences, participants were selected based on the following criteria: (a) must be a registered nurse; (b) must be an active nurse manager involved in both administrative duties and bedside patient care; (c) must be employed at a private hospital in Tagum City, Davao del Norte; and (d) must hold a role such as supervisor or head nurse, ensuring both leadership and clinical responsibilities. Participants were selected regardless of their gender identity, socio-economic status, or academic background.

Nurse managers who were not performing both administrative and bedside roles, those working in hospitals outside of Tagum City, and those who declined to participate or were unavailable during the interview period were excluded. These criteria ensured that the data collected was focused, relevant, and aligned with the study's goals

Data and Sources of Data

Data were collected through semi-structured interviews, audio-recorded with consent, transcribed verbatim, and analyzed thematically following Van Manen's framework. Additional hospital documents and field notes supported contextual understanding. Ethical approval, informed consent, and strict confidentiality protocols were observed throughout the process. The study involved 10 nurse managers from the private hospital who were actively engaged in both administrative leadership and

bedside care responsibilities. Prior to data collection, informed consent was obtained from all participants. Each nurse manager received a comprehensive overview of the study's objectives, procedures, and their rights as participants, including the option to withdraw at any time without penalty. An orientation session was conducted to explain their roles and responsibilities, emphasizing the voluntary nature of participation. Consent was formally documented through the signing of an Informed Consent Form (ICF) to ensure ethical compliance.

Data Analysis

This study uses Van Manen's hermeneutic phenomenological approach to analyze the experiences of ten (10) nurse managers balancing leadership and patient care. This method is ideal for exploring complex human experiences, as it seeks to uncover deeper meanings in participants' stories. Van Manen's approach involves six (6) key research activities that guide the reflective analysis of qualitative data, helping to reveal the essence of nurse managers' dual roles and their challenges and coping strategies in healthcare settings. The first activity focuses on understanding the lived experience by orienting the research around the central question: *how do nurse managers handle the demands of leadership while providing patient care?* The second activity involves collecting rich data through in-depth interviews, allowing participants to share their experiences. The third activity identifies key themes like role conflict and emotional strain. The fourth and fifth activities involve reflective writing to capture the essence of these themes in clear language. Finally, the sixth activity synthesizes the themes into a cohesive understanding of the participants' experiences, offering valuable insights into the challenges and coping strategies of nurse managers.

Ethical Consideration

Ethical considerations will be a top priority in this study to ensure responsible research practices, protect participants' rights, and follow ethical principles. Key ethical aspects include Social Value, Informed Consent, Risks and Benefits, and Privacy and Confidentiality. The study aims to provide valuable insights into the dual roles of nurse managers at a private hospital in Tagum, with the potential to improve healthcare management, workforce strategies, and patient outcomes, especially in resource-limited settings (Nowell et al., 2020).

Informed Consent will be obtained from all ten (10) nurse managers, ensuring that participants are fully aware of the study's purpose, procedures, risks, and their rights to withdraw at any time. A Risk-Benefit Assessment will be conducted to minimize any potential emotional discomfort, and support resources will be available as needed (Creswell & Poth, 2018; Korstjens & Moser, 2021). To maintain Privacy and Confidentiality, personal information will be anonymized, and data will be securely stored in encrypted formats, ensuring compliance with the Data Privacy Act (RA 10173) and promoting a safe, respectful research environment (Noble & Smith, 2021).

III. RESULTS AND DISCUSSIONS

This chapter presents the lived experiences of nurse managers rendering bedside care, shedding light on navigating the demands of dual roles managing units while actively engaging in direct patient care. The findings delve into their emotional labor, professional struggles, coping strategies, and insights into how leadership and hands-on care intersect in today's healthcare environment.

Table 1. Participants Profile

Code	Age	Gender	Employment	Study Group
M1	**37 years old**	MALE	Supervisor	IDI
M2	**37 years old**	FEMALE	Head Nurse	IDI
M3	**39 years old**	MALE	Supervisor	IDI
M4	**54 years old**	FEMALE	Supervisor	IDI
M5	**38 years old**	MALE	Head Nurse	IDI
M6	**32 years old**	FEMALE	Head Nurse	IDI
M7	**32 years old**	FEMALE	Supervisor	IDI
M8	**35 years old**	FEMALE	Head Nurse	IDI
M9	**45 years old**	FEMALE	Head Nurse	IDI
M10	**32 years old**	FEMALE	Head Nurse	IDI

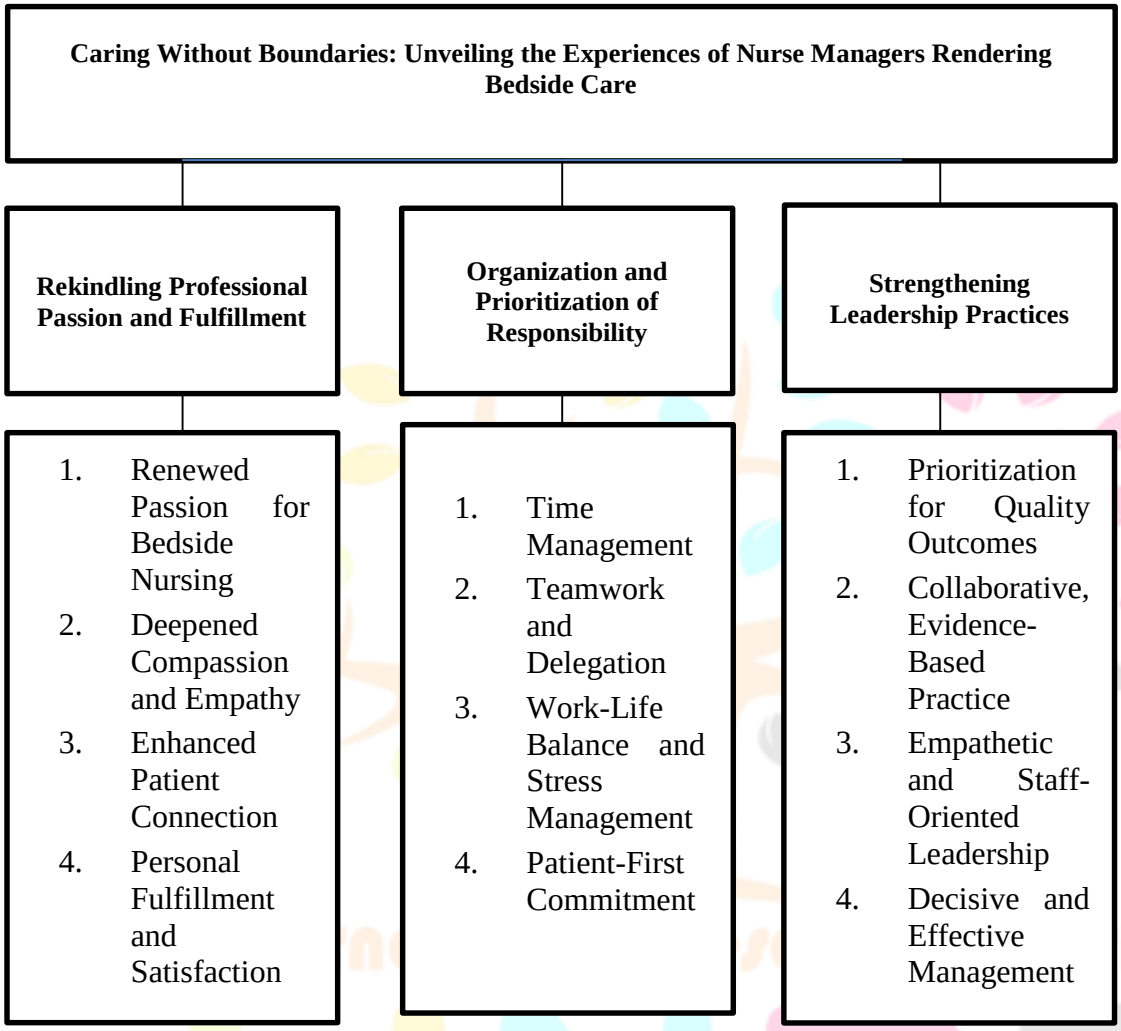
Table 2. Examples of Significant Statements and Related Formulated Meanings

Significant Statements	Formulated Meanings
"When I return to bedside care, I feel renewed; it reminds me why I became a nurse." (M10, Lines 8 to 11)	Bedside care rekindles the original passion for nursing.
"There are times when I have to choose between a meeting and attending to a deteriorating patient, and I always choose the patient." (M7, Lines 33 to 36)	Clinical urgency is prioritized over administrative obligations when necessary.
"As a leader, you're not just managing work, you're inspiring people through action." (M5, Lines 92-94)	Role modeling through action strengthens leadership influence and credibility.

Table 3. Examples of Formulated Meanings with their Associated Theme Clusters

Formulated Meanings	Cluster Themes
• Providing direct patient care brings joy and reminds nurse managers why they became nurses in the first place. • Witnessing patient recovery firsthand gives deeper meaning to leadership roles. • Reconnecting with patients at the bedside helps nurse managers reflect on their professional identity.	***Renewed Passion for Bedside Nursing***
• Juggling patient needs and paperwork calls for constant reprioritization and time-blocking strategies. • Nurse managers adapt daily schedules to meet administrative demands without compromising bedside presence. • Quick decision-making and triage skills help nurse managers balance leadership responsibilities and clinical urgency.	***Time Management***
• Making prompt ethical decisions in emergencies is part of effective leadership. • Being present and responsive in crises builds team confidence and improves patient safety. • Being present and responsive in crises builds team confidence and improves patient safety.	***Decisive and Effective Management***

Thematic Map



Three Major Themes emerged from the data, supported by Twelve Cluster Themes:

Theme 1: Rekindling Professional Passion and Fulfillment

The first emergent theme delves into the emotional journey that nurse managers undergo as they balance administrative duties with direct patient care. This theme highlights how re-engagement in patient-centered nursing helps nurse managers reconnect with their professional identity, emotional engagement, and sense of purpose. Direct involvement in patient care revitalizes their leadership, reinforcing the emotional and professional benefits of bedside care. This theme reveals that returning to the bedside not only rejuvenates a nurse's passion for the profession but also strengthens their leadership competencies, ultimately benefiting both the caregivers and the patients they serve (Wei et al., 2022; Labrague et al., 2022).

The first cluster, **Renewed Passion for Bedside Nursing** illustrates how nurse managers rediscover their core identity and emotional connection to nursing through bedside care. Many participants expressed excitement and fulfillment when engaging in direct patient care, despite their administrative roles. One nurse manager shared, *"I feel excited that despite being a nurse manager, I was able to go back with my roots."* This aligns with Canet-Vélez et al. (2021), who found that clinical engagement enhances nurses' professional identity and emotional well-being. Nurse managers find that returning to bedside care energizes them and helps them regain a sense of purpose, as evidenced by the statement, *"It's not just paperwork, this is where I really connect on the bedside."* Similarly, Ke et al. (2021) note that direct patient care boosts intrinsic motivation, which is particularly valuable for nurse leaders who often feel distanced from patient interactions.

The second cluster, **Deepened Compassion and Empathy** emphasizes how direct patient care reawakens a deeper sense of humanity in nurse managers. Participants shared that engaging with patients on a personal level enhanced their emotional intelligence, improved their leadership skills, and fostered a more compassionate approach to both patients and staff. One participant expressed, *"You need to be empathetic. Not sympathetic. Put your shoes in their shoes,"* reflecting the emotional depth needed for effective care. Yılmaz and Gözütok (2022) argue that empathy in nursing leadership strengthens decision-making and moral sensitivity, making leaders more responsive and ethically grounded. Additionally, bedside care helps nurse managers understand patients' emotional and psychological needs, thereby improving patient care and staff relationships (Moudatsou et al., 2021; Yeo et al., 2020). As one nurse manager noted, *"Empathy drives me to ensure the patient is not just clinically cared for but also emotionally,"* reinforcing the connection between empathy and leadership effectiveness.

The third cluster, **Enhanced Patient Connection** underscores the role of nurse managers in building trust and rapport with patients through bedside engagement. Direct involvement in patient care fosters trust, satisfaction, and emotional security, which enhances the overall quality of care. Nurse managers reported that their presence at the bedside helped calm patients and foster a deeper connection. *"Patients calm down when they know someone in charge is handling their case."* exemplifies how visible leadership at the point of care improves patient perceptions of safety and responsiveness (LoGiudice & Bartos, 2021). Additionally, effective communication with patients allows nurse managers to better understand their needs, which aligns with Lee et al. (2021), who found that active listening increases patient satisfaction and adherence to care plans. By connecting with patients, nurse managers not only enhance the care experience but also humanize their leadership style, fostering trust and improving clinical outcomes (Neves et al., 2022).

Last cluster, **Personal Fulfillment and Satisfaction** explores the emotional rewards that nurse managers experience when engaging in bedside care. Despite the pressures of administrative duties, many nurse managers find that direct patient care provides a deep sense of joy, meaning, and professional affirmation. *"I feel fulfilled helping patients directly, it's different from paper tasks."* reflects the intrinsic satisfaction that comes from making a tangible difference in patients' lives. Özkan Şat et al. (2021) also noted that nurses derive greater job satisfaction when they see the direct impact of their care. Moments of patient interaction not only reaffirm their commitment to nursing but also prevent burnout by offering emotional rewards that administrative tasks cannot provide (De Los Santos & Labrague, 2021). As one participant shared, *"Even a small task at bedside gives me satisfaction I don't get from meetings."* highlighting the emotional value of patient-facing work, which is often missing in administrative roles. This aligns with findings by Zhang et al. (2020), who argue that bedside care contributes to a stronger sense of professional purpose and reduces feelings of depersonalization.

In summary, it highlights the significant emotional and professional benefits nurse managers gain from direct patient care. The themes of renewed passion, deepened compassion, enhanced patient connection, and personal fulfillment emphasize how engaging with patients not only revitalizes nurse managers' passion for nursing but also strengthens their leadership skills and improves patient outcomes. Healthcare organizations should recognize the value of allowing nurse managers to engage in patient care periodically, as it benefits both their emotional well-being and leadership effectiveness.

Theme 2: Organization and Prioritization of Responsibility

This emergent theme captures the strategies and adaptive mechanisms employed by nurse managers to balance the complexities of both clinical and administrative duties. This theme sheds light on the resilience, adaptability, and resource management skills that nurse managers rely on to sustain high levels of performance under pressure. By exploring four distinct cluster themes—Time Management, Teamwork and Delegation, Work–Life Balance and Stress Management, and Patient-First Commitment—this theme emphasizes how nurse managers prioritize their tasks and responsibilities to maintain equilibrium in a demanding healthcare environment (Watkins et al., 2021; Schroyer et al., 2021).

The first cluster, **Time Management**, effective time management is central to balancing the demands of clinical care and administrative responsibilities. Nurse managers consistently emphasized the importance of strategic scheduling, decision-making, and the ethical prioritization of patient care. One participant shared, *"I will see to it how my day goes along... then I do my to-do list."* which reflects the proactive approach to managing their time. Almazan et al. (2022) support this by highlighting that structured time management helps improve clinical decision-making and reduce stress. Additionally, flexibility in managing tasks as priorities shift based on ward conditions is crucial. As Hernández-Martínez et al. (2021) note, the ability to *"triage"* responsibilities allows nurse leaders to adapt quickly in dynamic environments. Nurse managers often prioritize patient care over administrative tasks, as illustrated by the statement, *"If the ward is toxic, I will set aside paperwork to help my nurses."* This demonstrates the critical balance between operational tasks and clinical urgency. Effective time management helps sustain both leadership and caregiving responsibilities (Pérez-Raya et al., 2021).

The second cluster, **Teamwork and Delegation** which are vital for nurse managers to balance their dual responsibilities. By empowering staff members and fostering trust, nurse managers can distribute responsibilities more effectively, ensuring smooth operations and high-quality patient care. One participant remarked, *"I rely on my team... someone is always ready to assume responsibility when I'm not around."* Jiménez-Herrera et al. (2021) argue that empowering frontline staff improves autonomy, builds trust, and fosters shared accountability. Delegation is not seen as relinquishing responsibility but as a strategic leadership choice. Kim and Kim (2022) emphasize that clear delegation pathways enable efficient responses during high-pressure situations, allowing nurse managers to focus on urgent clinical needs. By assigning tasks based on team members' strengths and providing

leadership through example, nurse managers create a cohesive, responsive team (Yao et al., 2020). This approach, often described as *"shared leadership,"* enhances collaboration, reduces stress, and boosts overall team performance (Zarei et al., 2021).

The third cluster, **Work–Life Balance and Stress Management** maintaining a healthy work-life balance and managing stress are crucial for nurse managers to sustain their emotional and physical well-being. Nurse managers shared that setting boundaries and engaging in self-care activities are essential for preventing burnout. One participant emphasized, *"If I'm off duty, I will be on leisure mode. I don't indulge in work,"* highlighting the importance of disconnecting from work during personal time. Labrague et al. (2021) found that nurses with clear work-life boundaries report lower stress levels and greater job satisfaction. Social support and time with family also play a significant role in emotional recovery, as noted by one participant*: "Being with family on holidays is part of my stress strategy."* Additionally, engaging in physical activities such as jogging or going to the gym provides stress relief (Ramos et al., 2022). Kim et al. (2021) highlight that mindfulness techniques and short breaks during shifts can help nurse managers regulate their emotions and increase clarity in high-stress situations. These strategies help nurse managers maintain focus, emotional resilience, and leadership effectiveness throughout their shifts.

Final cluster, **Patient-First Commitment**, despite the competing demands of administrative tasks, nurse managers consistently prioritize patient care above all else. This unwavering commitment to patient welfare shapes their decision-making and leadership style. One participant shared, *"When a conflict arises, I make sure the patient will be my focus"*, emphasizing the moral responsibility to prioritize patient needs. Karaca and Durna (2020) found that nurses' professional responsibility intensifies when immediate clinical needs arise, often superseding administrative duties. Participants also noted that clear communication is crucial when balancing clinical priorities with administrative responsibilities, stating, *"If the situation is urgent clinically, I communicate my absence to the admin team"*. This communication ensures transparency while reaffirming the nurse manager's commitment to patient care. Makaroff et al. (2021) assert that moral courage in nursing leadership includes prioritizing patient needs even in the face of institutional pressures. Patient-first commitment is not just a response to emergencies; it is a core value that guides nurse managers' daily operational decisions, promoting a culture of compassionate care within the unit (Benton et al., 2021).

In summary, this emergent theme highlights the critical skills and strategies nurse managers employ to balance their administrative and clinical duties. Effective time management, teamwork, self-care, and patient-centered decision-making are essential for sustaining high-quality care and leadership performance. These skills not only enhance the nurse manager's ability to navigate complex healthcare environments but also improve patient outcomes and staff well-being. Healthcare organizations should support these leadership practices through training, policy development, and a culture that empowers nurse managers to maintain their focus on patient care while managing their broader responsibilities.

Theme 3: Strengthening Leadership Practices

The third emergent theme reveals how nurse managers develop and reinforce key leadership competencies through their engagement in patient care and critical decision-making. This theme emphasizes that direct involvement in bedside care not only strengthens emotional connections with patients but also enhances leadership skills that are essential for effective management in dynamic healthcare environments (Watkins et al., 2021; Schroyer et al., 2021). Through four distinct cluster themes—Prioritization for Quality Outcomes, Collaborative, Evidence-Based Practice, Empathetic and Staff-Oriented Leadership, and Decisive and Effective Management, this theme explores how nurse managers grow as leaders by integrating compassionate care, teamwork, and effective decision-making into their leadership practices.

The first cluster, **Prioritization for Quality Outcomes** highlights how nurse managers use critical thinking and real-time decision-making to prioritize patient care and team effectiveness. Nurse managers must triage tasks based on severity and urgency, ensuring that patient safety and care quality are maintained even under pressure. One participant noted, *"You need to prioritize which patient really needs you the most."* This aligns with Gómez-Rico et al. (2022), who found that prioritization is key to delivering high-quality care, particularly in complex or resource-limited environments. Nurse managers who can prioritize effectively improve patient outcomes, streamline workflow, and reduce delays in critical interventions (Douglas et al., 2020).

The second cluster, **Collaborative, Evidence-Based Practice**, nurse manager promotes quality care through teamwork and research-driven practices. Collaboration among healthcare professionals, such as nurses, physicians, and allied health staff, enhances problem-solving and improves patient outcomes. One participant shared, *"When we talk as a team, we find better ways to do things."* Reflecting how teamwork encourages shared accountability and fosters innovation. According to Jones et al. (2021), team-based collaboration improves care coordination and reduces errors, while Albaqawi et al. (2020) highlighted that knowledge-sharing through collaborative practices boosts clinical judgment and cohesion among healthcare teams. Nurse managers who model evidence-based practices also instill a culture of learning, improving patient care and staff performance (Manley et al., 2021).

The third cluster, **Empathetic and Staff-Oriented Leadership** emphasizes how nurse managers lead with emotional intelligence, creating a supportive environment for staff. Participants reported that empathy fosters trust, loyalty, and morale, which improves team performance and care delivery. One participant reflected, *"I've been a staff nurse, so I know what overwhelms them."* Showing how shared experience helps build rapport with the team. Ali et al. (2021) found that empathetic leadership reduces burnout and improves job satisfaction among nursing staff, particularly in high-stress environments. By actively listening to staff and adjusting expectations based on their emotional needs, nurse managers enhance team cohesion and performance (Xie et al., 2021; Yoo et al., 2020). This relational leadership also contributes to a more compassionate caregiving environment.

Finally, **Decisive and Effective Management** underscores the need for clear, consistent decision-making in nurse leadership. Nurse managers who make firm, timely decisions earn the respect of their teams and ensure operational efficiency. As one participant shared, *"Firm decisions earn respect and reduce confusion."* Decisive leadership is linked to increased team stability and morale, as ambiguity in decision-making can disrupt workflow (Wong et al., 2021). Nurse managers also need to base their decisions on principles rather than panic, as stated, *"We decide based on principle, not panic."* This aligns with the work of Marques-Quinteiro et al. (2020), who emphasized that consistent, value-based leadership fosters alignment between leaders and their teams. Nurse managers who demonstrate clear and ethical decision-making create a stable and accountable care environment, which is crucial in healthcare settings (Duggan et al., 2022).

These clusters highlight the various ways in which nurse managers strengthen their leadership practices through prioritization, collaboration, empathy, and decisiveness. These competencies are not only essential for managing patient care but also for fostering a supportive, efficient, and ethical work environment. Healthcare institutions should invest in leadership development programs that cultivate these qualities, ensuring that nurse managers are well-equipped to lead in complex healthcare settings.

Discussions

The emergent themes highlight the key factors that contribute to the growth and effectiveness of nurse managers as they balance their leadership and patient care roles. **Rekindling Professional Passion and Fulfillment** emphasizes how nurse managers find emotional fulfillment and a renewed sense of purpose by re-engaging in direct patient care. This involvement helps them reconnect with their professional identity, reigniting their passion for nursing and improving both their leadership skills and job satisfaction. The themes of Renewed Passion for Bedside Nursing, Deepened Compassion and Empathy, Enhanced Patient Connection, and Personal Fulfillment and Satisfaction demonstrate how bedside care strengthens nurse managers' emotional intelligence, leadership, and relationship-building with patients and staff, ultimately improving care quality and team morale.

Organization and Prioritization of Responsibility discusses the strategies nurse managers use to effectively manage both clinical and administrative duties. Time management, teamwork, and delegation are essential skills that help nurse managers balance their workload and prioritize patient care. Effective Time Management allows them to make quick decisions and manage tasks based on urgency, while Teamwork and Delegation ensure that the workload is shared, empowering staff and improving efficiency. Work–Life Balance and Stress Management highlights how nurse managers take care of their well-being through self-care practices, such as setting boundaries and engaging in physical activities. Lastly, Patient-First Commitment underscores the core value of prioritizing patient needs over administrative tasks, reinforcing compassionate and ethical leadership.

In **Strengthening Leadership Practices**, the focus is on how bedside engagement and leadership competencies strengthen nurse managers' ability to lead effectively. Prioritization for Quality Outcomes emphasizes the ability to make ethical decisions that prioritize patient care, while Collaborative, Evidence-Based Practice shows the importance of teamwork and using research to improve patient outcomes. Empathetic and Staff-Oriented Leadership stresses the role of emotional intelligence in building trust, loyalty, and a supportive work culture, while Decisive and Effective Management highlights the need for clarity and consistency in decision-making. These themes illustrate that leadership in nursing is not just about administrative skills but also about creating a compassionate, efficient, and patient-centered care environment.

Conclusion

The experiences shared by the participants show that nurse managers find deep meaning and satisfaction in bedside care. At the same time, they face challenges in balancing responsibilities. However, with the right strategies and mindset, they continue to lead with compassion, competence, and clarity. For future research incorporating a variety of data collection methods, such as focus groups discussions, could offer a broader perspective and strengthen the validity of the findings. This would not only improve the generalizability of the results but also allow for a deeper exploration of the challenges and strategies employed by nurse managers in different healthcare settings.

Furthermore, employing a mixed-methods approach would add depth to the qualitative findings. By integrating quantitative data, such as surveys or structured interviews, future research could offer insights into the broader trends and patterns in nurse managers' experiences, complementing the rich, in-depth narrative provided by qualitative methods. This approach could also facilitate comparisons between different hospitals or regions, providing a more comprehensive view of the factors that influence the effectiveness of nurse managers in bedside care.

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