Review Article

Management of e-mails by the Health Executive: The Case of the Executive Trainer at the Avicenne-Jean Verdier Nursing Training Institute

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Summary

The Covid-19 health crisis, with containment measures that led to telecommuting, highlighted an activity that is not often considered in the workplace: email management. It has become an inescapable activity, which can be characterized as reviewing unprocessed e-mail and deciding what to do with it. E-mail management is an activity in its own right and is part of the activities of the health executive training health professionals in his missions. In carrying out their tasks, health professionals' trainers have various correspondents with whom they have a hierarchical and/or functional relationship. In fact, he exchanges electronic messages with the hierarchy, his colleagues and with students. With the increase in telecommuting, it is difficult for the health professional trainer to differentiate between private and professional emails.

Keywords: Emails; Management; Trainers; Nursing students

Introduction

The Covid-19 health crisis, with containment measures that induced telecommuting, highlighted an activity that is not often considered in the workplace: email management. With the increasing number of messages received and the multiplication of accounts [1,2], email has become one of the most used services within private and public entrepreneurship networks. The of use mail that can dictate the functioning of organizations [3] and punctuate our working days [4] allows us to maintain communication with the various actors by sharing information and collaborative work [5]. It is unavoidable, omnipresent and its management would represent 30% of daily activities [6]. Email management can be summarized as email prioritization or triage, the process of reviewing unprocessed emails and the decision of what to do with them [7]. It has been the subject of many studies in the healthcare field [8-10]. In the health organization and training sector, although not stipulated, email management by health executives (care activity area managers and health professional trainers) is in the 2012 health executive degree competency activity repositories. Indeed, among the 7 activities of the health executive, it is the second activity of management of information, means and resources of the care activity sector or for a training device [11]. The management of e-mails is an activity in its own right which is part of the activities of the health executive in his missions. This is included in the job description of the health executive trainer at the Avicenne-Jean Verdier Nursing Training Institute (IFSI) of the AP-HP Training and Skills Development Center.

In this article, we propose a reflection on the management of e-mails by the training managers of health professionals, which is little documented and the case of this IFSI held our attention. Indeed, apart from the face-to-face pedagogical or interprofessional meetings (pedagogical follow-up interviews, student guidance or meetings between colleagues), an important part of the implementation of the pedagogical devices relies on electronic mail whatever the medium (smartphone or computer). This article aims to analyze the activity of email management by the IFSI Avicenne-Jean Verdier training manager.

More specifically, we will:

▪ Analyze the professional digital correspondences of the health executive training health professionals.

▪ Describe the posture of the executive trainer in front of these digital correspondences.

▪ Describe his electronic correspondences with students.

▪ Sketch a difference between private and professional emails of the trainer.

Professional Digital Correspondences of the Trainer

In the performance of their duties, health executive trainers have various correspondents with whom they have hierarchical and/or functional relationships. From the general management, he receives information emails (news, career or salary management, continuing education, computer support, the trainer receives correspondence from the director or deputy director of the institution, staff transfers or new positions, positions to be filled in an APHP IFSI, readings, etc.), the answer to which depends on the content and the interest of the trainer. The trainer receives administrative or pedagogical correspondence from his director or deputy director, which is of a hierarchical, informational or functional nature (news, continuing education, pedagogical devices, interviews or professional evaluations, etc.). As for the previous correspondences, the answers or not are also according to the content and the interest of the executive trainer but are more related to his missions and activities and therefore require an adequate inherent answer. Correspondence with the pedagogical coordination is related to the pedagogical devices (training, evaluation of students' competences), while with the internship coordination these mails are related to the clinical training of the internship students. They can communicate directly with a professional in the hospital field about a trainee's situation (welcome booklet, course of the internship, supervision, approach and clinical reasoning). In the context of university education or nursing research, the training manager can exchange e-mails with the nursing research chair, which is attached to the Education and Health Promotion Laboratory (LEPS) at the University of Sorbonne Paris Nord (SEDIEF news, seminar dates, research work including students). The trainer's digital communication with students is essentially based on their training (information on training schedules and rooms, evaluations, pedagogical follow-up appointments, evaluation of clinical approaches, answers to various questions related to their training). Figure 1 above summarizes the diagram of the trainer's correspondents at the IFSI Avicenne-Jean Verdier.

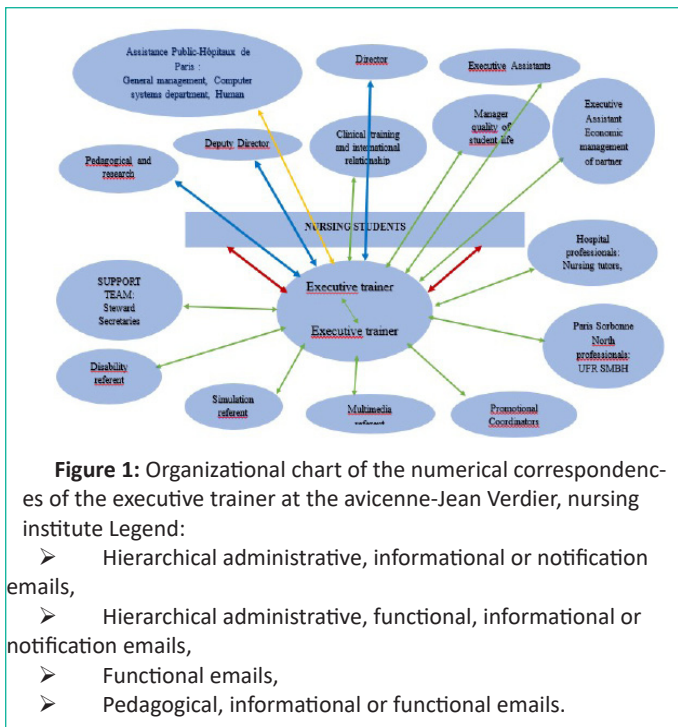### The Trainer's Postures when Faced with Professional Emails

The health executive trainer has different postures according to the e-mails: either he does not read them or reads them without reacting or postpones reading. He may read them without answering to the correspondent's email but reacts differently (this is the case for advice, recommendations or directives). Some e-mails have "do not reply" labels, for example). The trainer can read e-mails with a response without action (a request for information, advice or guidance) or immediate or deferred action (document to be provided, presence at a pedagogical regulation session, team meeting, etc.) [12]. Generally, like any user, the trainer uses the identity of the sender to determine the emergency of his answer and the subject line as a filter for deciding what to do with an e-mail [13]. A message

sent by the IFSI director, for example, might attract more attention for an answer and/or action than a message sent by a colleague or student. but it is mainly the emergency or the necessity that guides his behavior. The subject line can also condition the health executive trainer's reaction even if it is from the same sender. The e-mail from the director and the e-mail from the fellow executive trainer or student might thus attract roughly equal attention because he will be unable to distinguish between messages from the same senders relating to tasks of different importance. Thus, a sender can send an e-mail with explicit cues about the emergency, cost and importance of responding to their message in order to influence the responsiveness of the correspondent. For example, "URGENT: Can we meet today?" will not make much difference in the reactivity of a trainer depending on the correspondent. Some messages from the hierarchy may have explicit indicators on the subject line that condition the trainer's responsiveness such as "high importance," "high priority," "low priority," "Prompt response, or "response required." [14]. But the urgency of a message does not automatically make it important [15]. This subject line can also be empty by purpose or omission and elicit responsiveness [16] from the instructor. This line can be completed on top with a field content "cc"(carbon copy in reference to the carbon paper used in the past to duplicate a document) or "cci" - invisible carbon copy when one would like to hold in copy other persons more or less concerned by the message, visible or not by the receiver. On the other hand, and conversely, some messages sent by the trainer to correspondents are often not answered, probably due to work overload or the futility of the response [17] in favor of a face-to-face verbal response. Some responses may be delayed due to the fact that of slow decision making is more rational and deliberate [18]. In any case, the responsiveness of the health executive trainer or that of the recipient to a sender's e-mail and depending on the content of the subject line or copy field, obeys to a lesser extent the basis of the Kantian metaphysics of morals [19]. In the sense that the reactivity of the trainer or his correspondent is done according to legality or regulations and is subject to sometimes categorical or technical imperatives. In other words, the response to an e-mail depends on the importance that the person correlates to the subject of his message but politeness can modulate this dependence. According to Picard [20], the courtesy is a set of rules proposing models of conduct adapted to different social situations such as nursing education. It is essential in the professional activities of the training manager, both in terms of relationships and self-concept and positioning in organizations. The courtesy would therefore be one of the key issues in pedagogy [21].

In addition, Dwight D. Eisenhower, created a management tool that facilitates the prioritization of tasks to be accomplished. His matrix can be applied to the management of e-mails according to their importance and emergency in order to better manage them. Thus, the trainer can prioritize, in a decreasing order, important and urgent mails, not important but urgent mails, important but not urgent mails and not important and not urgent mails.

Electronic Correspondence with Students

Like patient-centered care, training activities are centered on the learner who is the craftsman (takes a full part) of the construction of nursing skills. Health training activities are therefore based on the deep aspirations to acquire these skills demanded by society and for which the executive trainer is a facilitator. In fact, the executive trainer and the professionals

Figure 1: Organizational chart of the numerical correspondences of the executive trainer at the avicenne-Jean Verdier, nursing institute Legend:
- ➢ Hierarchical administrative, informational or notification emails,
- ➢ Hierarchical administrative, functional, informational or notification emails,
- ➢ Functional emails,
- ➢ Pedagogical, informational or functional emails.

in the clinical field are involved in the co-construction of caregiving skills by providing the learner an enabling and affording environment. The management of information, and therefore of electronic mail, by the training manager is based on the permanent or specific general missions assigned to him and according to his field of competence. Thus, the training manager is required to manage the e-mails of a group of students, as a referent of pedagogical follow-up, of competence, of teaching unit or internship or as a promotion coordinator. Depending on the need or importance of the email, he may make an appointment for a face-to-face response/action, answer the student's question remotely, or alternate the two (make an appointment or answer remotely). Comments on a situation analysis, a clinical approach, guidance on a research note or a dissertation can be made on the electronic file sent by the student before it is returned to him by the same means. The slow responsiveness of some learners is often the cause of an overloaded inbox, making it difficult to manage e-mails more efficiently and effectively, which is a source of stress.

Private or Professional E-mail of Health Executive Trainers?

The worldwide pandemic linked to Covid-19 and the inherent containment measures have been at the origin of a revolutionary boom on work, with the implementation or acceleration of telecommuting and the consecration of the intrusion of work in the intimate space. Indeed, with the connection that offers us a virtual spatiotemporal ubiquity, it is difficult to make the difference between private and professional emails. According to the French national commission for data processing and liberties (Commission Nationale de l'Informatique et des Libertés) and in accordance with Article 68 of Law No. 2016-1321 of October 07, 2016 [22] for the digital republic, private mail is "any message exclusively intended for one or more natural or legal persons, determined and individualized." It is difficult to differentiate private mails from mails professional. Only the recipients or correspondents are likely to define this barrier according to their identities, the objects, the contents of the messages and the attachments. An e-mail from a relative or a friend can end up in our mailbox if our address is communicated to him, whereas the so-called professional correspondences are those of the trainer with the different direct actors (colleagues, stu-

dents, librarian) or indirect actors (administration, secretariat, logistics, stewardship...) of the training. However, according to the previous law, the secrecy of correspondence applies to the identity of these corresponding actors, to the title and content of the messages, to the attachments of the correspondence and to the unified support center of the AP-HP IT department. The operators of this center are therefore privy to private or professional e-mails, even though they are not directly integrated into the educational system.

Theoretical Approach to E-mail Management by the Health Executive Trainer

The management of e-mails by the health executive training health professionals places him in a social network that allows him to manage messages with his correspondents in an interactionist way, independently of space and time. This management could be linked pedagogically to the connectivist current according to which teaching-learning processes take place in a spatiotemporal dynamic and can be constructed in real time in different geographical environments [23,24]. This current combine relevant elements of many learning theories, social networks and digital technologies to create a theoretical approach for learning in the digital age (Perrin). More generally, this electronic message management goes beyond pedagogy in that it is not limited to correspondence with learners for their training. In fact, in the exercise of his function, the health executive who trains health professionals uses not only professional e-mails but also private emails and this would be part of a "socioconnectivist" theoretical approach.

Conclusion

E-mails are one of the most efficient means of communication between humans, facilitating their contacts in the management of their daily life activities, whether in a professional or private situation. However, communication by telephone, by mail and especially face-to-face communication are still the best means of communication between humans, especially in education and particularly in the training of health professionals. Face-to-face communication allows the health executive trainer to better manage the activities related to his different missions in the sense that neither paper nor electrons, like information and communication technologies, can replace human contact, hence the lack of consideration given to e-mail management in the activities of health professionals. For the manager training health professionals or responsible for care activities, this management of emails is still the subject of few studies and is included in the management of information in the reference frame of activities. The diffusion and generalization of e-mails in organizations can pose managerial and psychosocial problems in the quality of work, such as the stress it can generate [25-27]. It would therefore be important to also direct reflections on this subject to improve the quality of life and working conditions of health care executive trainer.

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