Maternal-Child Health (MCH) Nurse Leadership Academy:
Helping to Development the Next Leaders

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2014-2015 MCH Academy Co-Lead Faculty

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2013-2014 MCH Academy Mentor
1. Articulate the purpose and goals of the MCH Nurse Leadership Academy
2. Describe outcomes of inter-professional team leadership projects and personal leadership development
The academy is designed to develop the leadership skills of maternal-child health nurses and nurse midwives to effectively lead inter-professional teams to improve the quality of healthcare for childbearing women and children up to 5 years old.
THE 2002 MATERNAL-CHILD HEALTH THINK TANK
THINK TANK MEMBERS

• Maternal-child health nurse experts from Canada and the United States

• Sigma Theta Tau International Leadership

• Johnson & Johnson Pediatric Institute
AREAS OF CONSIDERATION

• Collaborative models of practice

• Leadership development

• Evidence based practice

• Societal issues
“The greatest impact is with the leadership development of front-line nurses to improve the health care outcomes of mothers and babies.”
INTERNATIONAL LEADERSHIP INSTITUTE (ILI) ACADEMIES

• Maternal-Child Health Nurse Leadership Academy

• Geriatric Nursing Leadership Academy

• Nurse Faculty Leadership Academy

• Maternal-Child Health Nurse Leadership Academy - Africa
ILI Academy Participants Since 2004
172 Dyads from 9 Countries; 37 US States; 2 Canadian Provinces
ILI ACADEMY STRUCTURE

- Leadership academies range from 18-20 months
- Each participant is a part of a triad relationship
- Each participant takes part in evaluations that measures their leadership practices, skills and knowledge
- Each participant works with a Leadership Mentor to develop a leadership plan
- Each participant develops and manages an inter-professional team project
- Each participant attends workshops (2) and site visits (2)
- Each participant disseminates project outcomes at STTI Convention
ACADEMY TRIAD RELATIONSHIP

Fellow

Faculty Advisor  Leadership Mentor
THE FOUNDATIONAL LEADERSHIP MODEL

- Model the Way
- Inspire a Shared Vision
- Challenge the Process
- Enable Others to Act
- Encourage the Heart
MCH IMPACT DATA

Fellow's Leadership Behaviors

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<thead>
<tr>
<th>Cohort</th>
<th>Fellows baseline</th>
<th>Fellows follow-up</th>
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<tbody>
<tr>
<td>3rd Cohort</td>
<td>86.5</td>
<td>90.8</td>
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<tr>
<td>4th Cohort</td>
<td>209.5</td>
<td>242.4</td>
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<td>5th Cohort</td>
<td>229.8</td>
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</table>
# MCH IMPACT DATA

## Leadership Mentor

### Leadership Mentor's Leadership Behaviors

<table>
<thead>
<tr>
<th>Overall LPI Score (avg.)</th>
<th>LMs baseline</th>
<th>LMs follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd Cohort</td>
<td>101.7</td>
<td>108.8</td>
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<td>5th Cohort</td>
<td>235.5</td>
<td>260.6</td>
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MCH FELLOW EXPECTATIONS

• Select a Leadership Mentor who will guide them through their leadership development over the 18-month period

• Maintain collegial relationship with academy triad (Fellow, Leadership Mentor and Faculty Advisor)

• Attend two intensive workshops with their chosen Leadership Mentor
• Design an individualized leadership development plan with guidance from their Leadership Mentor and Faculty Advisor (assigned by STTI)

• Implement and manage an inter-professional team leadership project that results in practice outcomes and aligns with the mission and vision of the Fellow’s association/organization/institution (A/O/I).

• Facilitate two site visits (at least one in-person) with triad

• Present leadership project outcomes poster at STTI’s Biennial Convention

• Attend academy celebration activities at STTI's Biennial Convention
• Not the Fellow’s direct supervisor
• Familiar with the Fellow’s practice setting
• Agrees to champion, advise and advocate for the Fellow
• Demonstrates the leadership characteristics required of a Leadership Mentor
FACULTY ADVISOR
EXPECTATIONS

• Participates in the academy’s online application review and selection process as a reviewer

• Participates in curriculum development, presentation and evaluation; advising and mentoring

• Works with other MCH Nurse Leadership Academy faculty advisors, STTI and Johnson & Johnson staff to achieve program goals and objectives
MCH SOUTH AFRICA

THE CURRENT COHORT
THE NEED FOR MATERNAL-CHILD HEALTH NURSE LEADERS IN AFRICA

“Women are not dying because of diseases we cannot treat ... they are dying because societies have yet to make the decision that their lives are worth saving”


http://www.unicef.org/mdg/maternal.html
LOOKING AHEAD

MCH NLA Africa: Cohort I 2014-2015

• 12 dyads – 7 from within South Africa; 1 from Swaziland, 2 from Malawi and 2 from Uganda in Africa

• Utilize current and new faculty from within SA and outside, utilizing a train the trainer model for new faculty

• Workshop 2 will be held in February 2015 in Pretoria, South Africa
My Experience Within the Maternal Child Health Nurse Leadership Academy

Mary Browning
2012-2013 MCH Leadership Mentor
Opportunity:
CEO of Community Hospital North and Maternal Child Clinical Nurse Specialist discussed the STTI Maternal Child Health Leadership Academy

Project:
Discussion was underway to provide support for pregnant teens as many unwed mothers were delivering without prenatal care placing themselves and baby at risk

Application:
Financial and network support received from CEO and CNE
Each Fellow selects an expert Leadership Mentor who participates in the academy workshops and guides the Fellow through the leadership development journey.
LEADERSHIP EXERCISES
Facilitate new networking opportunities and assist with navigating organization structure and culture

Listen and provide feedback to assist throughout the Fellow’s leadership journey
**Project:** Developing a Prenatal Teen Support Group

**Design:** Very Important Pregnant Persons (VIPP) met weekly throughout the school year after school and included guest lectures followed by healthy snacks. Transportation was provided by the school district.

**Patient Impact:** Many of the teens established a physician relationship and friendships through the project. The teens felt more in control of their pregnancy and had direct contact to the Maternal Child Clinical Nurse Specialist.

**Health Network Impact:** Informed teens presenting for a healthy delivery.

**Fellow:** Jonell Allen
• **Fellow Impact:** “…used prenatal experience …to become a more effective leader…” Personal challenges included time management, establishing relationships with school district, keeping the scope of project manageable and learning leadership techniques.

• **Mentor Impact:** “…learned to be an effective mentor by working with the Faculty Advisor to allow Fellow to become a leader” Personal challenges included patience when delays occurred and assisting fellow to summarize thoughts in a succinct manner.
THANK YOU

Questions??

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