Title:

Global Leadership Development: Expanding the Voice of Nurse Leaders and Clinical Nurses Together

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Session Title:

Global Leadership Development: Lessons Learned and Strategies for the Future **Slot**:

D 14: Sunday, 29 October 2017: 2:45 PM-4:00 PM

Scheduled Time:

2:45 PM

Keywords:

Empowerment, global leadership development and interprofessional partnership

References:

Eisler, R. & Potter, T. Transforming Interprofessional Partnerships: A new framework for Nursing and Partnership-Based Care, Sigma Theta Tau International Honor Society of Nursing: Indianapolis, IN, 2014.

Klopper, H & Hill, M. Global Advisory Panel on the Future of Nursing (GAPFON) and Global Health, Journal of Nursing Scholarship, 2015, 47:1, 3-4.

Abstract Summary:

Nursing is recognized as the most trusted profession in the US Gallup poll for the past 14 years. Strategies for using this important distinction for nurses to use as they advocate, influence, collaborate, translate, navigate and drive change in the US and globally will be discussed and evaluated for feasibility.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Identify the basic elements of the voice of nurses in practice, education and evidence based healthcare in the US and across the globe.	What is the voice of nurses? a. Factors: Socialization, Education and b. Organizational: Structures and processes c. Challenges and opportunities
Describe specific strategies that can be used for increasing and enriching the voice of nurses: direct care, advanced	Organizational and professional culture change a. Set expectations b. Educate,

practice, educators and nurse leaders and others in US and global nursing	educate, educate c. Hold people accountable and role model
Describe innovative strategies for enriching interprofessional collaboration and partnership through integrating nursing's voice in the US and in other parts of the world.	Journey toward empowerment a. Workplace - Leadership support b. High performance teams c. Recognition of contributions

Abstract Text:

Nurses are primary drivers in building and improving cultures of quality, safety, collaboration and patient satisfaction. Nursing leaders are expected to lead and achieve strategic and operational goals and priorities through genuine engagement of nurses and nursing workforce in improving the Patient Experience. In the United States, the majority of acute care hospitals and ambulatory care organizations recognize the importance of leadership development for nurse leaders and nurses. Most offer and/or provide resources so that nursing leaders can participate in the learning opportunities to acquire the knowledge and skills needed to meet and exceed the challenges of the complex health care system. In addition, nurse and other interdisciplinary leaders have acknowledged the importance of involvement of the bedside nurse in unit, departmental and organizational decision making. The Magnet Hospital Recognition Program which has been in place for over 20 years has been a champion of ensuring that the "voice of the nurse" is part of the organizational culture. The program through its application and site visit verification process has required documentation of how nurses are involved in interdisciplinary decision making and required documentation of outcomes. Hospitals and other organizations that have achieved Magnet designation demonstrate evidence through ongoing written documentation and during actual site visits that nurses do have a "voice" in decision making that goes beyond nursing. While the number of Magnet designated hospitals in the US is less than 450, there are hospitals outside of the United Statesin that have also met these rigorous Magnet standards related to the voice of nurses with objective verification by the Magnet Program of the meaningful involvement of nurses in organizational decision making.

This presentation will discuss the strategies used in the past 14 years to provide leadership development education to nurse leaders and nurses from the across the globe and how these educational processes have improved outcomes and initiated changes in the organizational culture. Building leadership capacity in nurse leaders was identified as the first priority because of the significant role nurse leaders play in building and sustaining positive work environments where the "voice of nurses" is valued and sought as part of decision making in the Patient Experience. Limited leadership development opportunities for nurse leaders and nurses were found in the former Soviet Union and in Central Eastern European countries and became part of our targeted areas of focus. Leadership development education program implementation strategies used include: face to face programs with online check-ins with assigned projects, dissemination of knowledge through presentations at 6 International Nursing

Conferences, mentoring and coaching and sharing resources to promote lifelong learning. Specific lessons learned from these programs and processes will be shared to assist in avoiding rework. Participants will learn about steps needed to build a mutually satisfying partnership and benefit from this important investment in the future of healthcare.