CHARTING THE COURSE: NAVIGATING THE LEADERSHIP CLIMB

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PROGRAM OBJECTIVES

• Describe an academic, practice and Sigma Theta Tau collaborative effort aimed at developing nurse leaders of tomorrow.

• Compare and contrast leadership development gaps in Western New York to those in the literature and personal practice settings.

• Contrast the AONE competencies for nurse executives as applied to identified gaps in nursing leadership development in Western New York.

• Identify methods of building and using a multisite coalition designed to strengthen nurse leaders.
BUILDING A COALITION

- Began with a need
- Recruited participants
- Focused on identifying gaps
- Collaborated on NLDP
  - Recruitment
  - Delivery
- Academia plus Practice
- Ongoing conversations
WHAT ARE THE GAPS IN LEADERSHIP DEVELOPMENT IN WESTERN NEW YORK?

• IRB Approval
• 14 Experienced Leaders
• 42 Aspiring Leaders
• 9 Focus Groups
LACK OF CLEAR ROLE DESCRIPTION

- Walk a mile in my shoes
- Identifying an entry level of leadership

- You look at leadership differently when you spend a day with someone, it makes you look at things differently as a staff nurse.
- So it’s hard to really pinpoint where to start...maybe we need to develop different programs for different people with different phases of their career.
- I think for us as nurses we really should sit and say, you know, there should be an entry level in where you come in if you want to sit around the table.
LACK OF PATHWAYS TO LEADERSHIP

- What are the opportunities of leadership?
- Transition into leadership
  - Making the leadership climb
- What is there now in the leadership? I myself would be interested in that. It’s not just the one thing anymore.
- Not feeling the opportunity necessarily exists for you to step up that ladder because it is so well established as it is already
- I think there is also a gap in steps…there are no steps going up, there is no career ladder that moves you into that (leadership)role.
LACK OF CONSISTENT MENTORING

- Lack of mentorship
  - Figure it out as you go
  - Loneliness

- Going from bedside to supervisor to manager, it’s kind of you learn as you go.

- You walk into the gap not being fully informed of what all of your duties are, and what to expect in that role perhaps

- I feel very alone, and I feel very isolated, and I’m making decisions by default right now

- I was even thinking like even mentorship throughout the different steps would be a great thing to have
EMOTIONAL INTELLIGENCE IS KEY

- Self-assessment
- Mentor
- Open to feedback
- Communication/conflict resolution
- Emotional Intelligence

- To help a young leader understand how to identify that in yourself. It didn’t go well, you look upset, let’s talk about that, what could you have done differently in that position, to make it more comfortable for you because in order to be successful you have to be comfortable in your own skin

- Communication, they just don’t communicate the same.

- I think they have to be able to connect with people
FEAR OF FAILURE

• How are we going to pay for college?

• Lack of recognition of leadership ability

• Leaving bedside care

• I already have so many student loans from my undergrad work that I could buy a house with that...I’m not guaranteed to have a payoff...I’m not guaranteed to have a nurse manager position when I’m done with it,

• I think we have leaders within every area that aren’t formal leaders, they are informal leaders, and I think we need to reward that in some way, and recognize it

• [Manager] do look stressed... And I’m not too sure how many of our leaders leave saying wow, I feel great today.
OVERARCHING THEMES

• Lack of clear role description
• Lack of clear pathways to leadership
• Lack of consistent mentoring
• Emotional intelligence key
• Fear of failure
WHAT WE KNOW FROM THE LITERATURE

- Mentorship (IOM, 2010; ANA, 2010)
- Healthy work environments (Ulrich, Lavnadero, Woods and Early, 2014)
- Technical skills, professional expertise and adaptability (Center for Creative Leadership, 2016)
- Effective communication (Bazley, Ibitayo and Bond, 2013)
<table>
<thead>
<tr>
<th>AONE Competency</th>
<th>Identified Gap</th>
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<tbody>
<tr>
<td>Communication and Relationship Building</td>
<td>Lack of consistent mentoring</td>
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<td>Need for recognition of leadership potential</td>
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<td>Need to develop essential relationships</td>
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<td>Need for conflict resolution skills</td>
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<td>Knowledge of the Healthcare Environment</td>
<td>Need to find funding for advanced education within healthcare system</td>
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<td>Lack of recognition of opportunities</td>
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<td>Need coalition of leaders</td>
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<td>Leadership</td>
<td>Lack of clear role description</td>
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<td>Lack of clear pathways to leadership</td>
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<td>Emotional Intelligence</td>
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<td>Team building skills</td>
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<td>Professionalism</td>
<td>Importance of self-assessment</td>
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<td>Developing an openness to feedback</td>
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<td>Need mentoring program to further development</td>
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<td>Business Skills</td>
<td>Lack of common language</td>
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WHAT DO YOU NEED TO KNOW TO BE SUCCESSFUL? (ASPIRING/EXPERIENCED)

- Self-assessment
- Mentor
- Open to feedback
- Communication/conflict resolution
- Emotional Intelligence

- To help a young leader understand how to identify that in yourself. It didn’t go well, you look upset, let’s talk about that, what could you have done differently in that position, to make it more comfortable for you because in order to be successful you have to be comfortable in your own skin
- Communication, they just don’t communicate the same.
- I think they have to be able to connect with people
WHAT DO YOU NEED TO BE SUCCESSFUL? (EXPERIENCED)

• A team builder
• A mentor
• Timely feedback
• Network
• Respect from above
• Skills: humor, not perfection, humility, organization, prioritize, balance

• I think that goes back to emotional intelligence of the leader, know where your strengths are in your team, and sometimes that informal leader is not a negative, it’s a positive.”

• And it’s just throwing ideas off, what would you do, who should I resource, what can I do? You know it probably was the most productive relationship. I thought it was real, it’s truly coaching, and its ongoing coaching and mentoring experience, and it’s very rewarding.

• You don’t know everything, you will never know everything, and you don’t have to know everything. You do have to know how to seek out the answer if you don’t’ know something.
WHO DO YOU LEARN IT FROM (EXPERIENCED)?

- Coalition of nurse leaders
- Not one person
- Formal Nurse Leadership Program

I think there should be a coalition of nurse leaders in any organization that are recognized the same way to be an effective mentor, and they’re paired up with a new nurse leader.

Everyone has different expertise’s, so one person might not be enough for a new nurse leader.
NURSE LEADERSHIP DEVELOPMENT PROGRAM PHASE 1

- Recruit mentors and protégés
- Match mentor and protégé
- 9 month program
- Across organizational boundaries
LEADERSHIP DEVELOPMENT PROGRAM OBJECTIVES

• Compare differences in roles, expectations, and commitment of the nurse leader
• Utilize findings from self-assessment to develop a plan for self-care
• Apply acquired knowledge of business and finances involved in healthcare in the role of a nurse leader
• Utilize communication and relationship management skills in the role of a nurse leader
• Create a plan to achieve two measurable goals to strengthen leadership skills and professionalism
• Design a 3-5 year plan for consistent professional development in the role of a nurse leader
LESSONS LEARNED FROM PHASE 1

- We need more time and manpower to coordinate
- Technology was not our friend
- The cross site mentorship was good and bad
- Aspiring leaders are thirsty for knowledge and skills!
- 75% of survey respondents indicated they were able to meet their goals
QUESTIONS?

SUGGESTIONS YOU MIGHT HAVE FOR PHASE 2?