

## Nursing Education Research Conference 2018 (NERC18)

### Lend Me a Hand: A Collaborative Nurse Leadership Mentoring Program

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As aging nurse leaders retire, a gap is left for nurse leadership and a growing need to prepare an intergenerational workforce of nurse leaders who will fill the gap (AHA, 2014; Dyess, Sherman, Pratt, & Chiang-Hanisko, 2016). Shirey (2006) has projected a shortage of at least 67,000 nurse leaders by 2020. The rapidly changing current healthcare environment coupled with the projected shortage of nurse leaders, necessitates an enhanced level of technical and professional expertise as well as the leadership capacity to adapt and be successful (Center for Creative Leadership, 2016). As health care systems provide leadership in an evolving state of change, Ibitayo and Baxley (2013) note a different model for support and development may be needed to alleviate concerns facing newer nurse leaders (Ulrich et al., 2014). Dyess et al. (2016) noted the impact of challenges such as a rapidly evolving health care environment, increased impact of outcomes on reimbursement, and increased span of control on a healthy work environment. Ulrich et al.'s (2014) findings in a study of more than 8000 nurses that perceptions of healthy working environments were diminishing for frontline managers as well as CNOs, suggested support for leadership development may alleviate concerns facing newer nurse leaders. Nurse leaders of tomorrow must be equipped with the ability to transform knowledge into practice that will positively impact the culture of the healthcare environment and effect positive patient outcomes.

#### **Purpose**

The purpose of this presentation is to articulate gaps identified in leadership development by aspiring and current nurse leaders in Western New York (WNY) that will allow nurse leaders to chart a course to transition more fully into nurse leadership roles that transform care through participation in a Nurse Leader Development Program (NLDP). The presentation will describe a collaborative effort between academia and practice that is open to all WNY area nurse leaders and aspiring nurse leaders. Discussion will include the specific leadership gaps identified in nursing leadership skills and attitudes. A NLDP will be described that was designed to helping nurse leaders make the climb to successful leadership skills that enhance a healthy work environment and positive patient outcomes.

#### **Methods**

A qualitative study recruited nurse leaders (n = 14) and aspiring nurse leaders (n = 42) from the healthcare systems in WNY. After receiving IRB approval and informed consent, participants were placed into nine focus groups dependent on their current leadership status: established or aspiring nurse leader. Focus group participants were asked the same questions of their perceptions of the gaps in nursing leadership in WNY. Digital recordings of the focus group responses were then transcribed and analyzed for themes using content analysis and nVivo 10 software; consensus was achieved among the team of researchers. The identified gaps in leadership development were used to create an outline and objectives for the NLDP. The objectives for the NLDP were matched to the AONE Nurse Executive Competencies, giving structure to the NLDP.

#### **Results**

The data was analyzed both individually from the aspiring and current nurse leaders and then compared between the groups. When speaking of charting a path to leadership, the experienced nurse leaders identified a need to develop essential relationships along the way stating, "... *start to develop relationships with multiple people that are going to be in life positions, and have come from different experiential base and they need to spend time with the critical point people that they're going to have to depend on, and develop a relationship with*". Additionally, they expressed a need to better understand the role of a nurse leader with a rhetorical question of "*What are their roles and responsibilities? I think that's another thing that is really important to make sure that everybody is aware and understands exactly what that is*". They lamented that "*we don't have a common language*" that helps nurse leaders to communicate with the interprofessional team. Finally, the nurse leaders stated a need for mentoring of new nurse leaders: "*we have a huge gap even from leadership to leadership roles, there's not very much mentorship between our senior leaders and you know we don't have the resources.*"

The aspiring nurse leader groups were frank in their admission that while they "*would be interested in leadership*", they were not sure how to chart the course to leadership, stating I am "*not feeling the opportunity necessarily exists for you to step up that ladder because it is so well established as it is already*." Navigating to the leadership role seemed to be nebulous and required "*some sort of shadowing opportunity to really see because I don't really necessarily have a specific goal into leadership, I would like to really see different roles*." Some aspiring leaders were not sure of the progression through leadership stating, "*I think there is also a gap in steps. So like sometimes you will take a nurse off the floor and she will become a manager, and there are no steps going up, there is no career ladder that moves you into that role*." The group further expressed that this sometimes sudden thrust into leadership was not supported by recognition of their leadership abilities, noting a need for assistance with reaching success in leadership: "*they say good leaders should be grooming their succession plan, like you should be grooming the person who is going to take over your job. That's like what you should walk into a leadership role doing*."

There was an identified need among all participants for a nurse leader self-assessment "*to help a young leader understand...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*". Paramount to success as a nurse leader was "*communication...I think they have to be able to connect with people. I've just seen too many people that they are so smart that they could not navigate the relationships...conflict resolution's something that every leader must be able to get over because if you can't there's no way you can be successful...or be a leader*." Both the aspiring and current nurse leaders identified a need for leadership development that included "*an effective mentor, somebody's who been through it, who can coach you, and suggest avenues to take to ensure your success*". The experienced nurse leaders had these words for the aspiring nurse leaders: "*Don't expect to be perfect, because it's not going to be. 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*."

This presentation will review the identified leadership gaps as they were compared to the AONE (2015) Nurse Executive Competencies for the purpose of developing a NLDP that will mentor nurse leaders to potentially increase retention of nurse leaders as well as enhance outcomes and leadership capacity. The AONE Nurse Executive Competencies represent the transformational leadership knowledge, skills and attitudes needed to excel as a nurse leader. Competencies identified as targets for leadership development included: Communication and relationship building, Knowledge of the healthcare environment, Leadership, Professionalism and Business Skills. The goals for the NLDP included: 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.

## Conclusion

This presentation will present identified leadership gaps in WNY that were used to develop a NLDP. The identified leadership gaps represent the thoughts and experiences of aspiring and experienced nurse leaders. Both groups clearly described the need for a leadership development program that addressed a lack of understanding related to the leadership role and how to make the leadership climb. The developing NLDP will recruit and matches mentors (experienced nurse leaders) with protégés (aspiring nurse leaders) into a nine month multi-organizational leadership development program where mentors will facilitate the cultivation of transformational leadership knowledge that will advance and strengthen nursing leadership. The NLDP includes a logic model specifically focused on changes in knowledge, skills and attitudes to meet the identified gaps in leadership development. Future nurse leaders are charting their paths to leadership success; a formal leadership mentoring program will lend a hand to aspiring leaders as they navigate their leadership climb.

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### Title:

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### Keywords:

AONE Nurse Executive Competencies, Leadership and Mentoring

### References:

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### Abstract Summary:

A collaborative academia and practice study identified the leadership development needs of aspiring nurse leaders from multiple sites across Western New York. Results of focus groups were used and applied to the American Organization of Nurse Executive competencies to develop a topical outline for a multi-site leadership and mentoring program.

### Content Outline:

I. Introduction

A. Need for leadership succession planning

B. Academic, practice and Sigma Theta Tau collaborative effort aimed at developing nurse leaders of tomorrow

## II. Body

A. Main Point #1: Need for collaborative leadership development

i. Key players

ii. Multi-system approach

iii. Crosses Organizational Boundaries

B. Main Point #2: Leadership Development gaps

i. Nine focus groups of aspiring and experienced nurse leaders

ii. Themes (gaps) identified

iii. Comparison to literature gaps and AONE Nurse Executive Competencies

C. Main Point #3: Building and using a multi-site coalition designed to strengthen nurse leaders

i. Program development to meet identified gaps

ii. Individual growth of self as leaders

iii. Program evaluation plan (logic model)

## III. Conclusion

A. Ongoing research

B. Plan for sustainability

First Primary Presenting Author

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**Professional Experience:** 1993 - Director of Home Care Services 1995-1999 - Director of Rehabilitation Services President, New York State Western Region Association of Rehabilitation Nurses, 1995-present ARN Clinical Nurse Specialist Special Interest Group, member Committee to Review Rehabilitation

Nursing Grant member, 1992 University at Buffalo CNS Advisory Committee member, 2002-5 American HealthCare Association Quality Award recipient, 2006 Western New York Case Management Special Interest Group, member Whitehaven Road Baptist Church Medical Missions Team Leader, 2002-2011 Sigma Theta Tau, member 2012 - present Sigma Theta Tau, Pi Zeta Chapter Vice President - 2016 Sage Graduate School Nursing Fellowship Grant recipient, 2012, 2014 Patricia McGhee Nursing Faculty Scholarship recipient, 2011 - 2013 Zonta International Career Scholarship recipient, 2012 Lounsbury Adaptive Ski Program Penguin Paddle Auction Chairperson, 2013-present Colon Cancer Alliance Undy Run Team Hobba's Heinies Captain, 2012-present

**Author Summary:** Janice Hobba-Glose has over 25 years of experience in leading organizations and institutions. Her knowledge of organizational structure, function and leadership is built on formal education as well as experience in nursing organizations, religious organizations, non-profit groups and informal group settings. Her experiences as President, Vice President and treasurer of professional organizations have provided her with the foundations to assist with the development and delivery of a Nurse Leadership Development Program.

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**Author Summary:** Deborah is a nurse educator with a passion for excellence, and more specifically excellence in nursing education as the quality of nursing care is directly related to the academic preparation of nurses. She loves to use pedagogy appropriate technology to engage students and promote a community of learning.

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**Professional Experience:** Margarita is an experienced nurse administrator, and a graduate of a Nursing Executive Leadership master's program. She has held positions in nursing management for over 25 years. She is also an adjunct professor in a Nurse Executive Leadership Program at Daemen College.

**Author Summary:** Margarita is an experienced nurse administrator, having held positions in nursing management for over 25 years. She is also an adjunct professor in a Nurse Executive Leadership

Program at Daemen College. She has successfully served as a mentor to aspiring nurse leaders for many years in her roles as a nurse administrators.

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**Author Summary:** Jill has had an extensive career in staff development. She currently coordinates a nursing education program to meet the needs of an academic research health care organization.