ADVANCING THE VOICE OF NURSING THROUGH LEADERSHIP: THE CURRENT STATE OF THE EVIDENCE BASE

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ACKNOWLEDGEMENT AND CONTEXT

• This literature synthesis was completed while working to update the National League for Nursing’s Core Competencies for Nurse Educators: A Decade of Influence book (which is being published this fall)

• Presentation today is related to one of the eight competencies: Function as a Change Agent and Leader

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LEARNING OUTCOMES

• Recognize the need for strong leadership in nursing to impact change in nursing education, nursing practice, and health care delivery and policy.

• Identify nursing leadership themes gleaned from the current, evidence-based literature related to leadership in nursing and nursing education.

• Comprehend the need for future research and development surrounding leadership in nursing to optimize the voice of nursing and nursing education throughout the health care arena.
LEADERSHIP IN NURSING

• Essential to advancing:
  • nursing practice
  • nursing education
  • nursing science

• Nursing leaders are in titled or non-titled positions
THE VISION FOR LEADERSHIP IN NURSING

• Exertion of our individual and collective voices for advocacy and change
  • nursing profession - education and practice
  • health care policy and reform

• Ultimately focused on health care that is:
  • value-based
  • quality focused
  • affordable and accessible
  • equally inclusive

• Recognizes the vulnerability of populations, as well as socioeconomic and political factors, as critical for the promotion of healthy communities throughout the world
EVIDENCE-BASED LITERATURE REVIEW

• Literature related to leadership in nursing and nursing education spanning from 2005 to 2017

• Gleaned from approximately 15 evidence-based publications, various other scholarly resources, and professional organization statements and guidelines

• Databases such as CINAHL, ERIC, and EBSCOhost were searched using key words such as “change agents”, “leaders”, ”leadership”, “nursing education”, “nursing”, “nursing administration”, and “faculty”
MAJOR THEMES IN THE LITERATURE

• Advancing personal leadership potential
• Organizational success and change
• Collaboration for best practices
• Advocacy for change
ADVANCING PERSONAL LEADERSHIP POTENTIAL

• Leadership ability can emerge and evolve, through education, experiences, and purposeful effort (Grossman & Valiga, 2017)
  • Leadership development is a priority for major nursing organizations

• Mentoring, leadership courses in graduate education, and leadership programs are effective for leadership development (Branden & Sharts-Hopko, 2017; Delgado & Mitchell, 2016)
Key competencies for leaders in nursing education include having a vision for nursing education, forming relationships, and functioning as a steward of their organizations and profession (Patterson & Krouse, 2015).

Leadership theory taught in the classroom needs demonstration and reinforcement in real-world settings to support leadership development (Barry, Houghton, & Warburton, 2016).
ADVANCING PERSONAL LEADERSHIP POTENTIAL

• Nursing Leaders:
  • bolster their own voices and leadership skills
  • role model leadership behaviors and characteristics
  • develop the skills and voices of their students/graduates, as well as their colleagues
  • impact development and change formally and informally
  • are involved in professional organizations
  • create and disseminate knowledge informing education and practice
ORGANIZATIONAL SUCCESS AND CHANGE

• Inspiration and commitment to the shared organizational vision are cultivated from strong leadership skills, attributes, and awareness (Martin, McCormack, Fitzsimons, and Spirig, 2014)

• Work environments for nurses, in both clinical and academic settings, are important for satisfaction and retention, and ultimately the success of the organization (American Organization of Nurse Executives, 2015; National League for Nursing, 2006)
ORGANIZATIONAL SUCCESS AND CHANGE

• To empower nurses, organizations need to create an organizational structure that promotes both formal and informal leadership (Netherlands, Knol & Van Linge, 2009)

• An empowering organizational structure provides support including a culture that fosters leadership development (Wagner, Cummings, Smith, Olson, Anderson, & Warren, 2010; Wong et al., 2013)
ORGANIZATIONAL SUCCESS AND CHANGE

• Nursing Leaders:
  • work to bridge gaps in communication and establish relationships between nursing education, educational institutions and health care systems
  • expose themselves to the business side of nursing, and engage with other disciplines within their educational institutions or health care systems
  • understand external perspectives and priorities by formally serving on committees or task-forces, or participating in interdisciplinary research or initiatives
COLLABORATION FOR BEST PRACTICES

• Partnerships between educational institutions and health care systems to address workforce issues through models of care and models of learning are a priority (American Association of Colleges of Nursing – American Organization of Nurse Executives Advisory Committee, 2018)

• Interprofessional education has been a platform for educational and practice initiatives that has stimulated change in nursing and nursing leadership (Interprofessional Education Collaborative, 2011)
COLLABORATION FOR BEST PRACTICES

• Interprofessional education and collaboration promote safe, effective and quality patient care (Cox, Cuff, Brandt, Reeves, & Zierlere, 2016; Institute of Medicine, 2015)

• Nursing leadership is part of the necessary knowledge, skills and attitudes for successful teamwork and collaboration (Quality and Safety Education for Nurses)
Advocacy for Change

- Leaders in nursing with strong and informed voices are needed in education and in practice to make contributions for the betterment of care delivery (Institute of Medicine, 2010)

- Voices of nursing leaders are instrumental in development of health policy and changing the delivery of health care to consumers (Grossman and Valiga, 2017; Marshall & Broome, 2017)

- Leadership involves teaching others to model cultural sensitivity and respect while advocating for vulnerable populations and/or those with health disparities (Glazer & Fitzpatrick, 2013)
ADVOCACY FOR CHANGE

• Nursing Leaders:
  • position themselves and their colleagues so their informed voices are heard among internal and external networks of key players, legislators and political groups
  • take on leadership positions in/on:
    • policy-making organizations focused on health policy change
    • governing boards, serving as partners with other health care professionals, to guide health care system change
CONCLUSION

• Nursing leaders are called to impact change in the current global health care environment to advocate for accessible, and inclusive, quality care.

• Leaders in nursing education have the unique opportunity to develop and utilize their own leadership competencies, as well as foster leadership characteristics in their students.
PRIORITIES FOR FUTURE RESEARCH

• What are the most effective methods for the implementation and evaluation of leadership development in nursing curricula and formal leadership programs?

• What are the best practices for providing opportunities for students to be mentored by leaders in nursing inside and outside of educational institutions and health care systems?

• How can nursing leaders and organizations support and sustain a leadership pipeline to provide for succession planning in educational institutions, health care systems, and professional nursing organizations?
PRIORITIES FOR FUTURE RESEARCH (CONT’D)

• What are the best collaborative practices for interprofessional education and practice, as well as for building relationships between nursing programs, educational institutions, and health care systems?

• What are the most impactful ways to emphasize the variety of roles through which leaders in nursing can affect change in nursing and health care?

• How can leaders in nursing affect population health related to vulnerable populations and/or those with health disparities especially in underrepresented areas such as in rural health?