

Using a 360° Feedback Evaluation to Enhance Interprofessional Collaboration

Deborah Sikes, DNP, RN, CNE, Emily Jestes, DNP, RN, CNL, NE-BC, Colleen LeClair-Smith, DNP, RN, NEA-BC, and Rowena R. Yates, DNP, RN, NE-BC, CCRN

Feedback



The enactment of the Patient Protection and Affordable Care Act (ACA) created limitless opportunities for change and leadership in the U.S. healthcare system.¹ Nurse leaders are responsible and accountable for improving patient safety, increasing patient satisfaction, and decreasing cost while simultaneously creating a supportive, healthy work environment for their nursing staff. With the ever-changing healthcare landscape, nurse leaders must be able to create a common vision among teams and facilitate safe and

improved patient outcomes across the continuum of care. Leadership is a crucial factor in nurse and patient outcomes and ultimately in the success of healthcare organizations.² Furthermore, transformational leadership competencies of nurse leaders are essential for managing change processes effectively and delivering high-quality care within healthcare organizations.³ An effective and efficient way to assess and develop transformational leadership competencies is to use 360° feedback. Transformational leaders look for pathways to foster and enhance communication within their teams and the organization. Although providing feedback is important, it is also necessary for leaders to receive feedback from their teams regarding their performance as leaders. By receiving feedback, especially 360° feedback, leaders can better address the needs of their subordinates. Transformational leaders focus on the “greater good” of the organization by using interprofessional feedback because it allows a pathway for higher team performance.

360° FEEDBACK

The purpose and theory of leadership development using 360° feedback has been well documented during the past 25 years.⁴ Although clinical and nursing leadership experiences play vital roles in professional development, research suggests that the empirical evidence for this assumption is far from

definitive.⁵ Some assume that strong clinical experience will translate into being a strong nurse leader; however, the skills and competencies of clinical nurses are not the same as leadership competencies. Having a well-rounded assessment of leadership strengths, as well as areas for development, not only helps leaders know where to focus, but also helps direct

Table 1. LPI Nursing Leadership Studies

Authors	Year Published	Study Focus	Instrument Used	Findings
<i>Kelly et al.</i> ¹²	2014	To examine the relationship of transformational leadership practices, nurse characteristics, and formal leadership training of frontline nurse leaders in a large health system: 512 frontline nurse leaders in 23 hospitals	LPI Self-Assessment	Formal training influences only 1 component of transformational leadership behaviors, helping train leaders to model the way for their employees. Increasing a nurse leader's level of formal education has a significant effect on improving overall transformational leadership practices and behaviors that inspire a shared vision and challenge the process.
<i>Ross et al.</i> ¹³	2014	The transformational leadership practices of nurse leaders in professional nursing associations: 448 nurse leaders in professional nursing associations	LPI	Nurse leaders of professional nursing associations emulate practices of transformational leadership.
<i>Kallas</i> ¹⁴	2014	Profile of an excellent nurse manager	LPI Self-Assessment	The LPI can be used to identify, recruit, and develop RNs in the nurse manager role as excellent leaders of effective healthcare teams.
<i>Fardellone and Click</i> ¹⁵	2013	73 RNs (convenience sample)	LPI Self-Assessment	RNs with more experience show fewer leadership behaviors. Scores demonstrated a need for leadership training at all levels of practice. The highest average responses were for Enabling Others to Act and Modeling the Way.
<i>Krugman et al.</i> ¹⁶	2013	To examine longitudinal outcomes of a leadership program for permanent and relief charge nurses from 1996 to 2012 divided into 3 phases	LPI	Charge nurse leadership reported significant gains despite institutional changes and educational interventions. Charge nurse leadership development cannot take place without purposeful mentoring and coaching by nurse managers and directors, led and modeled by the CNO.
<i>Clavelle et al.</i> ¹⁷	2012	Transformational leadership practices of Magnet CNOs: 225 CNOs completed the survey	LPI Self-Assessment	Enabling Others to Act and Modeling the Way are the top transformational leadership practices exhibited by Magnet CNOs. As CNOs gain experience and education, they exhibit more transformational leadership characteristics.
<i>Pedaline et al.</i> ¹⁸	2012	Formal mentoring program development for 10 frontline nurse managers in acute care	LPI Self-Assessment and 8 to 10 observers	Comparison of the LPI pre- and post-assessments revealed an increase in the average score of the nurse manager's self-assessment in all 5 leadership practices. Managers identified increased awareness, focus, and clarity as insights into their leadership skills as a result of the 360° feedback.

Download English Version:

<https://daneshyari.com/en/article/2670405>

Download Persian Version:

<https://daneshyari.com/article/2670405>

[Daneshyari.com](https://daneshyari.com)