

Who's Next? Developing High Potential Nurse Leaders for Nurse Executive Roles

Noreen Bernard, MS, RN, NEA-BC



Transformational leadership is an essential element of a high-performing organization in this era of rapid healthcare delivery system evolution. Specifically, recruiting and retaining top nurse executive talent is critical, as is development of senior nursing leadership talent, to ensure that a pipeline of prepared nurse

executives exists for key leadership roles. A nurse executive residency program was developed to address the impending need for prepared, transformational nursing leaders. In this article, the terms *chief nursing officer* (CNO) and *nurse executive* are used interchangeably to describe this senior leadership role.

NEEDS ASSESSMENT

Centura Health is a complex, nonprofit healthcare system consisting of over 23 operating entities across the state. It is Colorado's fourth largest employer with 5,000 nurses, including 15 hospitals, comprehensive health at home services, senior care facilities, ambulatory care centers, and physician practices. Nursing leaders at Centura fulfill key roles in the daily operations and ongoing strategic initiatives related to the delivery of patient care. Although there is a fair amount of uncertainty in future care delivery models, we are certain of 2 things: it means transforming the way we work to achieve effectiveness and creating greater accountability for clinical performance. Nursing leaders need to possess leadership competency to transform the work environment and ensure better patient outcomes. Literature indicates that a nurse leader's performance is a key driver of nurse engagement, nurse retention, and clinical outcomes.¹ In 2009, Centura Health experienced a 33% nursing leader turnover rate. Addressing this turnover became a strategic imperative for the system chief nurse executive. Further, in 2011, Centura Health faced a nurse executive talent crisis, with 80% of our CNOs eligible for retirement in 2013. Centura Health realized that finding extraordinary talent from outside the system was not the ultimate solution to replacing nurse executives and that building a pipeline of internal nursing leaders was key to mitigating the impending talent crisis.

BACKGROUND

Research shows that there is a key relationship between leadership effectiveness and organizational outcomes.² There is significant support for the power of transformational leadership on a nurse executive's performance and organizational, cultural metrics, including associate engagement, work environment scores, and clinical outcomes. Transformational leaders are highly effectively leaders, who in turn have highly effective teams and strong group culture.³ Specifically, nurse executives have a responsibility for creating a clear and compelling vision for the creation of professional practice environments, demonstrating competence in the areas of strategic thinking, developing the workforce, business planning, and creating a culture of patient safety.⁴ Additionally, nurse executives must be able to effectively plan, forecast, problem solve, and measure the value of clinical care delivery.

When a nurse executive vacancy exists or when there is absence of a competent nurse executive in an organization, instability, loss of momentum, lost strategic focus, lack of representation at the executive level, and increased patient safety risks occur, leaving an ineffective and unstable work environment. Therefore, procurement and preparation of quality nurse executives is more important than ever. High-quality leadership has 3 main components: leadership development, talent management systems to build a leadership pipeline, and management culture.⁵ Research shows that healthcare fares worse than other industries when it comes to succession planning.^{5(p6)} In fact, just 10% of healthcare organizations rate their succession planning system as effective.^{5(p16)} With the increased emphasis on placing clinicians in leader-

ship positions, effective processes that identify and develop potential are a large need for ensuring quality leadership at all levels in nursing. Little research has been conducted in healthcare that identifies best practices for succession planning models.⁶ Healthcare and business succession planning models all recommend planning, recognizing the importance of clarifying future needs, and identification of future leaders as important steps in succession planning. Similarly, having a candidacy development plan and evaluation process is equally important in a succession planning framework.^{6(p550)}

Retention of high-performing nurse executives is key in a comprehensive approach to ensure that nursing is led by top talent. Literature indicates that CNO turnover can be directly linked to disagreements with the chief executive officer and financial issues as contributing factors in up to 65% of CNO turnover.⁷ Other reasons for CNO turnover include a lack of organizational visibility, internal conflicts about job satisfaction (including perceived success at enhancing clinical outcomes in the role), work-life balance, physician conflict, lack of mentorship in the role, lack of financial management capabilities, lack of succession planning, and age related to retirement. Data from a 2008 study⁸ on CNO retention and turnover indicated that 62% of study respondents anticipated making a job change in less than 5 years, and slightly more than 25% planned to retire. In this same study, 73% of the respondents reported that CNO turnover was an urgent problem or a concerning problem that required attention.⁸

PROGRAM DESCRIPTION

The Centura Nurse Executive Residency Program is designed to accelerate the development of senior nursing leadership talent and to build a succession pipeline for nurse executive roles. It is also designed to mitigate the impending talent crisis and to advance integrated talent management. The residency is a year-long, blended learning, cohort-based program designed on the 70/20/10 model of development (*Figure 1*). Seventy percent of the resident's development comes from work on a group project, quarterly stretch assignments, and experiential learning opportunities. Twenty percent is from coaching and feedback they receive from a personal coach and CNO preceptor. Ten percent is based on advanced classroom sessions designed to build knowledge competency in the areas of vision, strategy, transformational leadership, governance, finance, people, and culture. A steering committee composed of non-nursing executives, nursing executives, previous program graduates, and nursing academia guides ongoing curriculum development and program evaluation.

PROGRAM DESIGN

The content design of the Nurse Executive Residency Program included 2 important nursing frameworks; the Magnet Recognition Program[®] Magnet model⁹ (*Figure 2*) and the American Organization of Nurse Executives (AONE)¹⁰ competencies (*Figure 3*). The elements of the Magnet model served as the framework for nursing culture. The elements of the model include transformational leadership; structural empowerment; exemplary professional

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