Discover a Bundle for Developing Transformational Clinical Leaders

Lee A. Galuska, PhD, RN, NE-BC
Director, Nursing Practice, Education and Research
UCLA Health, Los Angeles, CA
2015 ANCC National Magnet Conference®
October 9, 2015 12:30-1:30pm

A Call for Nurse Leaders

“Strong leadership is critical if the vision of a transformed health care system is to be realized. To play an active role in achieving this vision, the nursing profession must produce leaders throughout the system, from the bedside to the boardroom.”

Institute of Medicine, 2011

Why develop nurses as leaders?

- Relationships with members of the health care team
- Strong scientific foundation
- Understand processes and workflow in systems
- Know what works and what doesn’t
### Leadership in Quality and Safety

What does it mean for us in our organizations?
- Practice to full scope
- Advance our education
- Adopt evidence-based best practices
- Build our science
- Partner with inter-professional colleagues
- Enhance skills in EBP, process improvement
- Refine communication skills
- Engage at decision-making tables

### Transformational Leadership

- Expectations for leadership development at all levels in Magnet®-recognized organizations
- TL6: The CNO advocates for organization support of ongoing leadership development for all nurses with a focus on mentoring and succession planning.

### How do we develop transformational leaders?

Research Question?
- What are the elements of a nursing leadership development model that effectively prepares nurses, at all levels to lead throughout the complex adaptive systems of health care?
Studying Leadership Development

- Three metasyntheses conducted:
  - the role of formal education
  - the impact of mentors or guides
  - the impact of culture

- Analysis resulted in the generation of a bundle of interventions essential for nursing leadership development at all levels

What is a metasynthesis?

- Interpretive integration of findings from qualitative studies
- More than the sum of the findings from the studies but a transformation that provides a richer, more complete understanding of the phenomenon or experience
- A new conceptualization based on translating the studies into one another
- 7-phase approach described by Noblit and Hare (2009)

Benefits of a metasynthesis

- Expanded understanding of an experience or phenomenon that has been explored through qualitative research
- More than a summary of the findings of multiple studies but a deeper interpretation of the findings that we can use to inform our practice, formulate a theory or use as a basis for further research
- Aligns with a belief that nursing science must include an understanding of phenomena or events as they are experienced by people
- In this case, it captured the voices of nurses related to effective transformational leadership development
Formal Education: The Springboard for Nursing Leadership Development

- 27 qualitative or mixed-methods studies published between 2000 and 2013
- 1163 nurse participants worldwide
- Nurse participant roles from newly licensed nurses to nurse executives
- Qualitative designs: (alone or combined):
  - Descriptive/interview (n=12)
  - Focus groups (n=11)
  - Survey with qualitative component (4)
  - Content analysis (1)
  - Case study (1)

Formal Education - Four Themes:

1. Evidence-based relevant content
2. Optimized learning strategies
3. Benefits for the learner and others
4. Tensions and threats to learning and application
Leadership Learning Beyond the Classroom: Guided Experiential Learning

- 24 qualitative or mixed methods studies, 1999-2012
- 973 nurse participants worldwide, in roles ranging from nursing student to nurse executive
- Various qualitative designs:
  - Focus groups (n=7)
  - Descriptive with interviews (n=6)
  - Interpretive phenomenology (n=3)
  - Case study (n=2)
  - Narrative analysis (n=2)
  - Grounded theory (n=1)
  - Survey with qualitative component (n=2)

Guided Experiential Learning Themes

1. Not Quite Ready to Lead: Connecting the Dots through Experiences
2. Key Relationships that Guide the Journey
3. A Toolkit for the Process

Guided Experiential Leadership Learning

[Diagram showing various components of experiential leadership learning, including formal leadership learning, guided experiences, and enhanced leadership competency.]
The Impact of Climate and Culture

- 21 qualitative or mixed methods studies, 2002-2012
- 786 nurse participants worldwide, in roles ranging from newly licensed nurses to nurse executives
- Various qualitative designs:
  - Descriptive with interviews (n=10)
  - Focus groups (n=6)
  - Interpretive phenomenology (n=2)
  - Grounded theory (n=1)
  - Survey with qualitative component (n=2)

A Supportive Context for Leadership Development: Three Themes

1. Opportunity Structure
2. The Relationship Factor
   - Enabling or blocking role of the nurse manager
   - Bolstering or undermining role of colleagues
   - Role of the mentor in guiding growth
3. Organizational culture for growth
A Leadership Development Bundle

Implementation of a Frontline Leadership Program based on the Bundle

- Formal Educational Program
  - Evidence-based, relevant content
  - Optimized learning strategies
- Purposeful, guided experiential learning
  - Mentors/Coaches to guide the way
  - Relevant learning experiences/opportunities
  - Project development and implementation
- Magnet Practice Environment supports development of emerging leaders

Program Content

- Provides skills and support structure to translate ideas and potential of frontline nurses into tangible clinical and operational performance gains
- Four skill-building workshops (8-hour days) over the course of one year
- Content includes:
  - Role of frontline leader and potential for impact, problem framing, root cause analysis
  - Proactive problem solving
  - Leading teams
  - Change management
Delivery of Content

• Experienced facilitators
• Adult-learning principles and teaching/learning strategies
• Active engagement
• Peer support and coaching
• E-learning augmentation
• Mentor participation

Purposeful, Guided Experiential Learning

• Coaches to guide the way
• Experiences help connect the dots
• Performance improvement project expectations

Organizational Culture/Environment Supports Leadership Development:

• Opportunities
• Supportive relationships
• Healthy practice environment
  • Shared governance
  • Strong employee engagement scores
  • Celebration of accomplishments-
    Results Summit
Research Questions about Leadership Development in a Frontline Leadership Program

- Will participants who complete an evidence-based frontline leadership development program demonstrate greater leadership competency?
- What are the perceptions of the participating nurses about the experience?
- How do the experiences explain the leadership development outcomes?

Studying Frontline Leadership Development

- Design:
  - convergent parallel QUAN + QUAL mixed methods design
- Quantitative strand:
  - quasi-experimental pretest-posttest
- Qualitative strand:
  - focus group

Studying Frontline Leadership Development

- Setting: A 3-hospital academic health system in southern California
- Sample: 76 clinical nurse participants and 22 coaches in 2 cohorts
- Instruments:
  - Leadership Practices Inventory® (LPI)
    - Self-assessed and observed
- Data Collection:
  - LPI prior to the start of the program
  - LPI at the end of the program
  - Focus groups after program completion
Frontline Leadership Program Analysis

• Data Analysis:
  • Frequencies, means, standard deviations
  • Paired t-test for mean change in LPI overall and subscale scores for each group
  • Paired t-test for mean differences and correlations between self-assessed and observer scores
  • Focus group data analyzed thematically using Krueger and Casey’s analytic framework (2009)

Preliminary Quantitative Results-Cohort 1

LPI Results Pre and Post

* p<.05

Preliminary Focus Group Results

Participant Themes:

Coach Themes:
Frontline Leadership Development

- Frontline Leadership Development Program experience contributed to the leadership development of clinical nurse leaders
  - Modeling the way: growth in accountability, initiative, leadership behaviors
  - Inspiring a vision: envisioning a positive change and helping others to see it
  - Challenging the process: developing and challenging individual skills and abilities, confronting barriers and managing change
  - Enabling others to act: worked with nursing and interprofessional colleagues to plan and implement projects
  - Encouraging the Heart: celebrated as individuals and teams

Kerry’s Story

Kerry Gold RN, CCRN, CEN
Administrative Nurse/Pediatric Liaison Nurse
Ronald Reagan UCLA Emergency Department

Frontline Leadership Development Program

- What are the outcomes?

Kirkpatrick’s Four Levels of Evaluation

- Reaction
- Learning
- Transfer
- Results
Outcomes beyond the Study:

- Succession Planning/Career Development Outcomes:
  - Promotions to formal leadership roles:
    - Unit Director, Neuroscience/Stroke Unit
    - Unit Director, NICU
    - Interim Unit Director, Observational Unit

- Led significant organizational projects
- Contributed empirical outcomes to Magnet documents
Empirical Outcomes

EP7EO: Nurses systematically evaluate professional organizations’ standards of practice, incorporating them into the organization’s professional practice model and care delivery system.

Empirical Outcomes

EP18EO: Workplace safety for nurses is evaluated and improved.
Empirical Outcomes

**EP21EO: Nurses are involved in implementing and evaluating national or international patient safety goals**

Implications for Magnet-level Performance

- Transformational leadership development
- Improving performance and achieving empirical outcomes
- Recognition of nurses for their contributions to excellence
- Engagement of nurses in the development of new knowledge
- Dissemination of new knowledge

Conclusion

“So the need for new leadership is urgent. It is needed in communities everywhere. We need leaders who know how to nourish and rely on the innate creativity, freedom, generosity and caring of people. We need leaders who are life affirming rather than life destroying. Unless we quickly figure out how to nurture and support this new leadership, we can’t hope for peaceful change…Thus, new leadership becomes a central and pressing challenge of our time.” (Wheatley, 2007, p.164)
Thank you!

Questions?

References


Contact information

- Lee Galuska
- lgaluska@mednet.ucla.edu
- (310) 825-0929