

*Organizations within the Waterloo Wellington LHN Collaborating
on Health Human Resources Planning*

Emerging Nurse Leader Pilot Program

Presenters:

Paris Jalali, Project Coordinator

Judy Shearer, Associate Vice President in Mental Health & Addiction

March 26, 2009

Funded by :

The Nursing Secretariat, Ministry of Health and Long-Term Care

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Overview

- Background
- Method
- Findings
- Limitations
- Lessons Learned
- Successes
- Recommendations

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Background

Predicted shortage of between 59,000 to 113,000 nurses in Canada by 2011 (CNA, 1997).

Waterloo Wellington Local Health Integration Network (WWLHIN) will require an additional 926 RN and 413 RPN in the hospital sector alone by 2017 (Smith, 2008).

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Background

Organizations across the WWLHN identified a community wide need to develop sustainable nursing retention strategies.

The HHR Demonstration projects focused on three aspects related to nurse retention:

1. Emerging Nurse Leader Pilot Program
2. Managerial Span of Control
3. Flexible Scheduling Options

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Background

Minimal opportunity for:

1. Mid-career nurses
2. Leadership development for point-of-care nurses

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Definitions

Mid-career has been defined as nurses in their late 30s and 40s, with 15 or more years of experience (Donner and Wheeler, 2001).

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Purpose

To investigate the effect of an emerging nurse leader development program on participants'

- Self-rated leadership practices
- Intention to remain in the nursing profession

To uncover the experiences of program participants

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Method

A purposive sampling strategy was used to recruit 48 nurses.

Material

- Demographic questionnaire
- Leadership Practices Inventory (Kouzes & Posner, 2003)
- Nursing Retention Index (Cowin, 2002)
- 4 Focus group sessions to evaluate the program

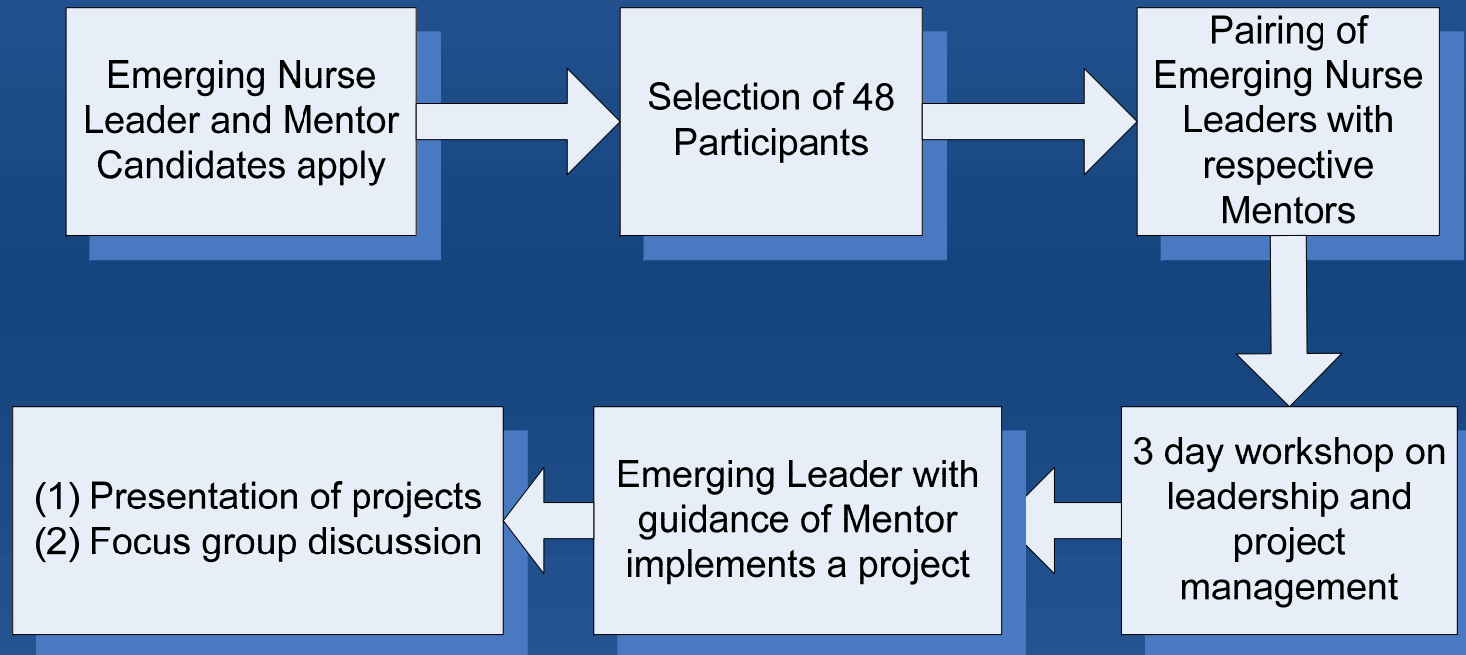
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Program

1. Attended a series of 3 six-hour leadership workshops.
2. Committed to a time-limited leadership project.
3. Worked together to move their project forward.

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Process



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Demographics

Emerging Nurse Leaders & Mentors



***"Great necessities call forth great
leaders"
Abigail Adams***

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Leadership Practice Inventory (LPI)

Five Leadership Practices

1. MODEL the WAY
2. INSPIRE a SHARED VISION
3. CHALLENGE the PROCESS
4. ENABLE OTHERS to ACT
5. ENCOURAGE the HEART

(Kouzes & Posner, 2003)

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Findings - LPI

Emerging Nurse Leaders

1. MODEL the WAY (P < .001)
2. INSPIRE a SHARED VISION (P < .001)
3. CHALLENGE the PROCESS (P < .003)
4. ENABLE OTHERS to ACT
5. ENCOURAGE the HEART (P < .001)

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Findings - LPI

Mentors

1. MODEL the WAY
2. INSPIRE a SHARED VISION
3. CHALLENGE the PROCESS
4. ENABLE OTHERS to ACT
5. ENCOURAGE the HEART (P < .002)

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Findings

Sample Group Leadership Sub-Dimension Scales out of 60 points	Pre Leadership Workshop Mean	Post Leadership Workshop Mean	T Score	DF	P
Total Sample (N=46)					
Model the Way	44.913	48.239	4.171	45	.000*
Inspire a Shared Vision	40.783	45.174	3.616	45	.001
Challenge the Process	43.804	46.435	2.924	45	.005
Enable Others to Act	49.370	51.326	2.448	45	.018
Encourage the Heart	43.544	48.500	5.232	45	.000*
Emerging Nurse Leaders (N=23)					
Model the Way	42.652	47.522	4.764	22	.000*
Inspire a Shared Vision	37.609	44.217	4.576	22	.000*
Challenge the Process	41.304	45.174	3.284	22	.003
Enable Others to Act	47.826	50.174	1.935	22	.066
Encourage the Heart	42.261	48.087	3.893	22	.001
Nurse Mentors (N=23)					
Model the Way	47.174	48.957	1.540	22	.138
Inspire a Shared Vision	43.957	46.130	1.162	22	.258
Challenge the Process	46.304	47.696	1.042	22	.309
Enable Others to Act	50.913	52.478	1.475	22	.154
Encourage the Heart	44.826	48.913	3.500	22	.002

* P < .001

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Nursing Retention Index (NRI)

1. It is my intention to continue with my nursing career in the foreseeable future.
2. I would like to stay in nursing as long as possible.
3. As soon as it is convenient for me I plan to leave the nursing profession.
4. I expect I will keep working as a nurse.
5. My plan is to remain with my nursing career as long as I am able.
6. I would like to find other employment by leaving nursing.

(Cowin, 2002)

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Findings - NRI



“Leaders make decisions that create the future they desire”
Mike Murdock

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Program Evaluation

Emerging Nurse Leaders

1. Acquired leadership knowledge
2. Empowered to make a difference
3. Learned from their mentors

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Program Evaluation

Mentors

1. Experience of being a mentor
2. Development of self as a leader
3. Disconnect enacting the mentor role

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Program Evaluation

Combined

1. Connecting with partner
2. Scheduling time off
3. Balancing work-life

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Completed Projects

- Medication Reconciliation in the ER
- Communication Tool for Transfer of Care between Units
- Streamlining Admission Consent Forms
- Developing and Implementing a 'Scent Free Policy'

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Limitations

- Small sample size
- Self selected to program
- Self assessed leadership

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Lessons Learned

- Clearly define the roles
- Designate time to network
- Designate time to work with partner

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Successes

- Completed projects
- Enhanced processes
- Empowered Nurses
- Enhanced leadership practices
- Succession planning

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Recommendations

- A regional approach
- Organizational support
 1. Financial
 2. Scheduling
- Further Research

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Thank you!