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## > JULY 2017 Focus on Leadership Development

### Voice of the President



**Joan Shinkus Clark,**  
DNP, RN, NEA-  
BC, CENP, FACHE,  
FAAN, 2016-2017  
president, AONE  
Board of Directors

At the AONE annual meeting in March, I had the opportunity, along with my colleague Dr. Paula Spears, to reflect on our take on the top ten lessons for nurse leaders. On that list were ingredients that have helped us to be successful in moving towards a culture of “one nursing service, multiple sites” at Texas Health Resources. As we have journeyed in that direction over the past nine years, it has been necessary to set a mutual vision and strategy; start small and act on areas of key priority and agreement; involve all staff in leading the change; create a common structure; and standardize processes. In addition, we had to be patient and were able to have fun along the way. Some of the key actions that moved our culture forward were

those owned and designed by frontline champions, such as the development of a common professional practice model and the development of a peer-to-peer feedback process at all levels. The investment to develop frontline staff into leaders of this work has been very worthwhile at Texas Health; in fact, leadership development has been a necessary part of building our culture.

The exemplar by Karen Mayer and Rachel Start on empowered decision-making speaks to the positive results of developing empowered staff and leadership at all levels in their community hospital setting. They also tie the investment in bottom-up leadership to better clinical outcomes and engagement of staff in professional activities.

I am not sure when I actually began to see myself as a leader in nursing. I know that it occurred sometime after I was functioning in a manager capacity. My skills in managing people had gotten me through development as a charge nurse and then a frontline manager, but I did not start leading until I had

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of building our culture.

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# AONE education calendar

**July 2017**

Certified in Executive Nursing Practice (CENP) Essentials Review Course	July 12	Chicago
Certified Nurse Manager and Leader (CNML) Review Course	July 25	Chicago

**August 2017**

Nurse Manager Institute	August 9–11	Chicago
Finance and Business Skills for Nurse Leaders	August 22	Indianapolis
Emerging Nurse Leader Institute	August 28–30	Chicago

**September 2017**

Certificate Program in Health Care Finance for Nurse Executives	September 21–22	Seattle
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**October 2017**

Certified in Executive Nursing Practice (CENP) Essential Review Course	October 6	TBA
Certified Nurse Manager and Leader (CNML) Essentials Review Course	October 17	French Lick, Ind.

**November 2017**

Nurse Manager Institute	Nov. 1–3	Chicago
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## Circle of Life Award Nominations Open

Circle of Life award nominations are open through Aug. 14 to U.S. organizations that provide palliative and/or end-of-life care. The award recognizes innovation in palliative and end-of-life care. The award honors programs that can be models for other health care organizations working to embed palliative and end-of-life care in a variety of care settings. Up to three programs or organizations are given the award each year, and others may receive a citation of honor. The awards are supported by the California Health Care Foundation and the Cambia Health Foundation, with major sponsorship from the American Hospital Association, the Catholic Health Association and the National Hospice and Palliative Care Organization & National Hospice Foundation. For more information on criteria and the nomination process, visit [www.aha.org/circleoflife](http://www.aha.org/circleoflife).



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1 Porché, RA, ed. *Medication Use: A Systems Approach to Reducing Errors*, 2nd ed. Joint Commission Resources; 2008.

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# BD

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# Creating the Future: Engaging Nurses in Authentic Visioning

Forward thinking, envisioning a better future and engaging others in a shared vision are attributes that distinguish leaders from non-leaders (Kouzes & Posner, 2009). How do nurse leaders create a vision that is meaningful and inspirational? How do nurse leaders inspire others to follow the vision? We have all experienced visioning exercises where the group tries to come up with a catchy vision statement that will rally the organization to higher levels of performance only to have the “vision” become a bumper sticker cliché. Superficial visions may check the box on having a vision, but do not grapple with the real challenges that nurses face in health care. Typically, people in organizations that have checked the vision box become more cynical than inspired. If you ask them about the vision of the organization they may rummage through their files to bring out the copy, but there is no deep memory of personal commitment prompted by the vision statement. Paradoxically, while vision can be an important leadership tool, a superficial vision process can actually undermine leadership.

However, nursing leaders can take strategic steps to develop their forward-looking capacity, not to become an emissary of the future but to create an image of the future that draws others in. Nursing leaders can foster an environment in which people realize their visions through dialogue that reaches below the surface to tap into the motivations that brought them into health care in the first place.

## Personal visioning

First, nursing leaders must carve out the time for looking ahead and reflecting on what could be. Looking ahead and reflecting takes time and practice as it is something that is not developed in the other nursing roles an RN masters prior to moving into a leadership position. This skill differentiates a leader from a manager. The vision that emerges is personal, not something you take to others for reaction and buy-in, but your personal yardstick and touchstone to test that other visions align with your own.

## Shared vision

How do personal visions become shared visions? Just as the nurse leader needs time for forward thinking and reflections, his or her followers need time to share their hopes, aspirations and challenges. They also need a safe place for deep conversations to occur. Author Peter Senge describes this as creating the container, a safe space to reflect on what really matters, a place for people to connect with each other in a spirit of curiosity, inquiry and

advocacy (1990). As these conversations unfold, the leader can use questions to engage others in meaningful dialogue. Expressing your vision can be disempowering, so the leader should use his or her vision to generate questions that invite curiosity, inquiry and advocacy. As people express their visions for the future, jot down phrases that resonate and read them back to the group. It is important to understand that not everyone will react the same way to expressions of the vision as it develops. The expressions will move some to tears and make others very uncomfortable. Working through the diversity of personalities, world views and thought patterns deepens the connections between people and allows the common aspirations to mature.

The shared vision that emerges forms the commitment to journey in the same direction over a sustained period of time. This process develops a vision that goes beyond the superficial bumper sticker statement to a vision with real power that manifests in a shared commitment to act. The only visions that become an integral part of organizations are shared visions. The vision statement itself is less important than the memory colleagues and co-workers have of the shared aspirations used in crafting the statement. In that way, the vision statement is a reminder of what matters most. The test of an authentic vision: Is the statement consulted when the organization is faced with major decisions? Employees who contributed to the vision’s creation are more likely to do this.

## Visioning as an ongoing process

The people who were not privileged to be part of an initial vision process may not feel included when the vision begins to stimulate changes in the culture. How do we bring them on the journey? We often ask the participants in visioning to share the experience with their peers. This can backfire if the conversations lack depth, authenticity or feel evangelistic. Inviting people into the visioning process begins by asking the key question: How does this relate to your personal vision? Each person sees an individual picture of the organization at its best, an image from his or her point of view. As they are invited to relate their unique vision to the whole, the image becomes more intense, more lifelike. As more people share a vision, the vision becomes a mental reality that people can truly imagine achieving.

As a leader, your work continues to bring people to you who want to be included in the vision, want to go in another direction or halt the shift taking place. Leaders must be able to speak from their own vision beyond any official corporate vision statement

and ask their staffs: Is this vision worthy of your commitment? Leaders can use a process for engaging staff so they can feel invited to join the effort or make clear that their own vision does not align with the leadership direction. The Nuka System of Care, developed in the late 1990s after legislation allowed Alaska Native people to take greater control over their health services, offers a valuable example of how leaders can engage people in an ongoing vision process. Every employee, physician, volunteer and board member at the health care system goes through a three-day Core Concepts Training. Each person learns how to connect to his or her personal story, share that story and receive other's stories. Each person learns to accept the other's story and experience acceptance of their story. This process increases the capacity of clinicians to relate to their peers and their customer-owners (Gottlieb, 2013). Core Concepts Training is a lived experience of the Nuka System of Care's vision of "A Native Community that enjoys physical, mental, emotional and spiritual wellness" (Southcentral Foundation, 2015). We have found that sharing personal stories, then entering dialogue and expressing personal visions works as a process across a great diversity of people.\* Through these deep conversations, a transformation takes place from individual visions of the organization at its best to a collective vision of the future.

The most important role of a nurse leader is to bring out the best in the staff we serve and create more meaning in their lives through work. Our staff want us to be forward thinking; they want us to be asking, What's new? What's next? What's better? The answers cannot come exclusively from our perspective but must reflect our collective hopes, dreams and aspirations. Kouzes and Posner write "The best way to lead people into the future is to connect deeply

with them in the present" (2009). Developing a shared vision through deep conversations, authentic sharing and uniting diverse perspectives binds us together by a common aspiration. ■

\*By way of example, this article was created through a dialogue between the authors.

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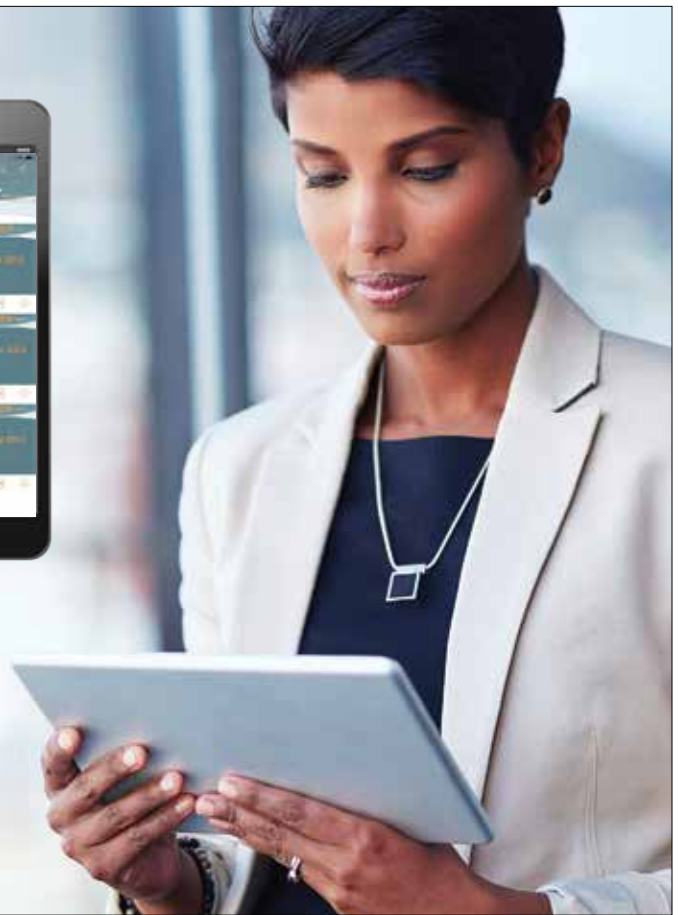
# 50<sup>TH</sup> FACTS

Assessments for AONE Nurse Executive Competencies and Nurse Manager Competencies are now available online, but this is just the latest development for these inventories of knowledge, skills and abilities. The competencies are widely used by health care organizations to write job descriptions, evaluate nurse leaders and determine ways to support and enhance a nurse leader's development. The Nurse

Executive Competencies were published in *Nurse Leader* in 2005. That same year the Nurse Manager Inventory Tool, an early version of the Nurse Manager Competencies, was released by the Nurse Manager Leadership Collaborative, a partnership including AONE, the American Association of Critical-Care Nurses and the American Organization of periOperative Registered Nurses. AONE has continued to work on both sets of competencies, with the nurse executive and nurse manager competencies undergoing updates in 2014. In addition, AONE has created other competency sets as nurse leader roles have expanded. Available on the AONE website, the competencies now include those for system chief nurse executives, and nurse leaders working in post-acute care and population health. AONE is committed to developing and disseminating core competencies for nurse leaders in a variety of settings as health care delivery continues to evolve.

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**➤ Finance and Business Skills  
for Nurse Leaders**

August 22 | Indianapolis

Strong financial skills are necessary to be an effective leader in today's health care environment. Finance and Business Skills for Nurse Leaders better equips participants for nursing finance management. For more information on the Aug. 22 session, visit [aone.org](http://aone.org).

**➤ Nurse Manager Institute**

August 9–11 | Chicago

Through this three-day interactive program, nurse managers can learn health care business management, including budget forecasting, benchmarking and productivity. They also will gain skills in performance management and the art of the negotiation. For more information, visit [www.aone.org/nmi](http://www.aone.org/nmi).

**➤ Emerging Nurse Leader Institute**

August 29–30 | Chicago

During the three-day program, you'll explore the basics of budgeting, quality and patient safety, conflict management and the tools necessary to make the transition to nursing leader. The ENLI program is intended for staff nurses, charge nurses and nurse coordinators looking to advance their careers. Visit [aone.org/enli](http://aone.org/enli) for more information.

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## Core Competencies

- + Frameworks outlining the essential skills nurse leaders need for success

## Guiding Principles

- + Foundational resources guiding the development of best practices

## Career resources

- + Reports on compensation, satisfaction and transformational leadership

## Advocacy for the field

- + Title VIII reauthorization advocacy resources

## Community of leaders

- + Leader2Leader online community to discuss challenges and successes

## AONE membership is for all nurse leaders in all settings:

- |                          |                             |
|--------------------------|-----------------------------|
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