OVERVIEW

1. What is the Problem?
2. Why is it Important?
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4. Is it Feasible?
WHAT IS THE PROBLEM?
PROBLEM: A ROOT CAUSE ANALYSIS

Health Inequities, Access issues, Mental Health

Lack of Nurse Leadership
NURSE LEADERSHIP: HISTORY

Cultural Shift in Nursing (Doctors Assistant -> Independent Professional)
Modernisation of Nursing Education (Hospital -> Tertiary Institutions)
Autonomous practice (Nurse Practitioner)
Graduate Leadership Programmes (NETP)
Integrated Leadership components in Undergraduate Nursing
Longitudinal Study of Emotional Intelligence, Leadership, and Caring in Undergraduate Nursing Students

Gerry Benson, MSc, RN; Lynn Martin, EdD, RN; Jenny Ploeg, PhD, RN; and Jean Wessel, PhD

ABSTRACT
This study describes the development of emotional intelligence (EI), leadership, and caring in undergraduate nursing students throughout their educational program. A correlational, repeated measures study design was used. Fifty-two nursing students completed four self-report questionnaires on three occasions (T1, T2, T3): BarOn Emotional Quotient Inventory, Transactional Leadership Inventory, Caring Scale, and Emotional Intelligence Profile.

In the past decade, nursing leaders have taken an increased interest in the concept of emotional intelligence (EI) and have deemed it to be a key factor for the development of effective, caring nurse leaders. It has been suggested that EI should be at the heart of the nursing curriculum as an integral part of nursing students’ education (Bellack et al., 2001; Evans & Allen, 2002; Freshwater & Stickley, 2004; McQueen, 2004; Snow, 2001).
PROBLEM: UNDERGRADUATE FRAMEWORK

Focus on Traditional Practice

Holistic Client Centred Care – Focused on the individual/ Family ignoring wider politics

Limited discussion on Health Policy, Politics, Economics, Informatics

Leadership focused on CLINICAL Leadership

Soft skills predominantly focused on Empathy and communication

Integrating leadership components may not be the best approach

Discrepancies within Educational Institutions
PROBLEM: A ROOT CAUSE ANALYSIS

Health Inequities, Access issues, Mental Health

Lack of Nurse Leadership

Lack of Nurse Leadership at an Undergraduate Level
WHY IS IT IMPORTANT?
The relationship between nursing leadership and patient outcomes: a systematic review

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The relationship between nursing leadership and patient outcomes: a systematic review
Fact Sheet – The Future Nursing Workforce: Supply Projections 2010-2035

This fact sheet discusses projections about how many new nurses we will need over the next 25 years to meet the health needs of New Zealanders.

**Figure 1.1 Total nurse workforce, 2010, age profile, %**
IMPORTANCE: LEADERSHIP

Nurses run the health system!

Rapidly evolving Health System

Current health problems requires more Nurse leadership

IT IS EVERYONE’S PROBLEM
Active learning and leadership in an undergraduate curriculum: How effective is it for student learning and transition to practice?

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ABSTRACT

Nurses are being increasingly asked to develop leadership skills in their practice and to be actively involved in continuous change processes in the workplace. Nursing students need to be developing leadership skills prior to entering the workplace to ensure they are able to meet the challenges associated with organisations and the cultures present in nursing, along with having highly tuned communication skills and leadership attributes that contribute to best patient care and outcomes. This paper looks at how the use of Active Learning in an undergraduate setting enabled the development and implementation of leadership skills. It further examines the impact on students' transition to practice.
IMPORTANCE: UNDERGRADUATE LEADERSHIP

Core Values and Nursing Philosophy is built during undergraduate years
Greater flexibility in Undergraduate Degree
Better equip students on placements and transition to RN
More likely to choose leadership pathways
WHAT IS THE SOLUTION?
Developing leadership in nursing: exploring core factors

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Abstract
This article provides an introduction to the issue of nursing leadership, addressing definitions and theories underpinning leadership, factors that enhance leadership in nursing, and the nature of leadership content taught in undergraduate programmes. Highlighted are differences between leadership and management, and the notion that leadership can be ‘learned’. The authors also point out that modern matron (Sullivan and Garland, 2010). However, the taking on of a leadership role by itself is not sufficient for ensuring effectiveness. The leader must be knowledgeable about leadership and be able to apply leadership skills in all aspects of work. Heller et al (2004) suggest that on the whole, nurses are not adequately prepared for the role of leader during their nursing education programmes. This gap between adequate educational preparation and the demands
Factors contributing to nursing leadership: a systematic review

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Objectives: Leadership practices of health care managers can positively or negatively influence outcomes for organizations, providers and, ultimately, patients. Understanding the factors that contribute to nursing leadership is fundamental to ensuring a future supply of nursing leaders who can positively influence outcomes for health care providers and patients. The purpose of this study was to systematically review the multidisciplinary literature to examine the factors that contribute to nursing leadership and the effectiveness of educational interventions in developing leadership behaviours among nurses.

Methods: The search strategy began with 10 electronic databases (e.g. CINAHL, Medline). Published quantitative studies were included that examined the factors that contribute to leadership or the development
A leadership program in an undergraduate nursing course in Western Australia: Building leaders in our midst

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SUMMARY

This paper discusses a leadership program implemented in the School of Nursing at Edith Cowan University to develop leadership in fourth semester nursing students enrolled in a three year undergraduate nursing degree to prepare them for the dynamic 'changing world' environment of healthcare. Students were invited to apply to undertake the program in extracurricular time. Nineteen students applied to the program and ten were chosen to participate in the program. The numbers were limited to ten to equal selected industry leader mentors.

The leadership program is based on the belief that leadership is a function of knowing oneself, having a vision that is well communicated, building trust among colleagues, and taking effective action to realize one's own potential. It is asserted that within the complexity of health care it is vital that nurses enter the clinical setting with leadership capabilities because graduate nurses must take the lead to act autonomously, make decisions at the point of service, and develop a professional vision that fits with organiza-
Development of Leadership Behaviors in Undergraduate Nursing Students: A Service-Learning Approach

Karen J. Foli, Melanie Braswell, Jane Kirkpatrick, and Eunjung Lim

doi: 10.5480/11-578.1

Abstract

**AIM** The purpose of this study was to determine leadership behaviors developed by nursing students and peers before and after a service-learning experience.

**BACKGROUND** Nurses have been called to fill growing needs in the health care setting, rendering care to vulnerable and diverse populations in a wide range of organizations. Leadership behaviors are therefore essential.
Active learning and leadership in an undergraduate curriculum: How effective is it for student learning and transition to practice?

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ABSTRACT

Nurses are being increasingly asked to develop leadership skills in their practice and to be actively involved in continuous change processes in the workplace. Nursing students need to be developing leadership skills prior to entering the workplace to ensure they are able to meet the challenges associated with organisations and the cultures present in nursing, along with having highly tuned communication skills and leadership attributes that contribute to best patient care and outcomes. This paper looks at how the use of Active Learning in an undergraduate setting enabled the development and implementation of leadership skills in pre-service nurses and students in clinical settings.
SOLUTION 1: LEADERSHIP MODULE

1. Technical Component – Health Economics, Public Health, Politics

2. Soft Skill Component – Assertive behaviour, Persuasion, Networking skills

3. Hands-On/Modelling Component – Placements (or practical time) with current nurse leaders, opportunities to practice leadership skills
SOLUTION 2: STANDARDISED CURRICULUM

Ensures leadership learning opportunities remain consistent across the country

Reduces discrepancies within institutions

However, the module can be modified to promote Maori and Pacific Nursing Leadership
IS IT FEASIBLE?
Leadership already exists in the curriculum, the solution only aims to modify it
Opens doors to new avenues of innovation and progressive change
Supporting the next generation of leaders
Leaders aren't born they are made. And they are made just like anything else, through hard work. And that's the price we'll have to pay to achieve that goal, or any goal.

— Vince Lombardi —
QUESTIONS


