

# Nursing Leadership

in the

## Era of Health Reform

*Nursing the oldest of arts and  
the youngest of professions*

Understanding nursing history  
helps us understand the  
factors impacting the ability of  
nurses to lead and to take on  
leadership roles

# The history of nursing is collateral to the history of women



History and advancement of women

History of nursing

Which is seen as a significant factor in keeping nursing in more subservient roles until recent years

# Definition of Nursing

## ANA

“ ... the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations.”

- ▶ Diagnosing and treating? Sounds like the medical model BUT
  - The diagnosing and treating is in relation to a person's RESPONSE to factors such as health problems and life changes that can impact their health. These factors impact the person's ability to function independently

# Nursing History - TimeLine

## Prior to nursing development in the US

- Nursing knowledge part of oral history; services provided by lower class women
- Nursing started to organize in the early Christian era - focus was on charity

- 1700s and 1800s services continued to be provided by lower class, uneducated women
- Mid 1800s, Sisters of Charity formed to provide nursing care

- Last half of the 1880s, Florence Nightingale created the first school of nursing - she came from a higher class and was well-educated
- Nightingale used statistics to study the results of the care they provided; introduced training in theory and clinical practice

# Nursing History - TimeLine

## From Florence Nightingale

- In the US, nursing services provided by women who were criminals and prostitutes
- During the Civil War, nursing services provided by women volunteers who had no formal training; these women recognized the need for formal training

- In 1872, the first professional nursing school founded by a female physician
- Despite opposition from many, three other schools started in New York; NEW HAVEN, CONNECTICUT; and Boston

- Nursing education took place within hospitals and hospitals and physicians saw nursing students as free labor. Because of this, nursing education took a back seat to meeting the needs of the hospital
- In the late 1800s, public health nursing came into being. These nurses identified problems in the community and implemented programs to address the problems

# Nursing History - TimeLine

## Development of Professional Nursing

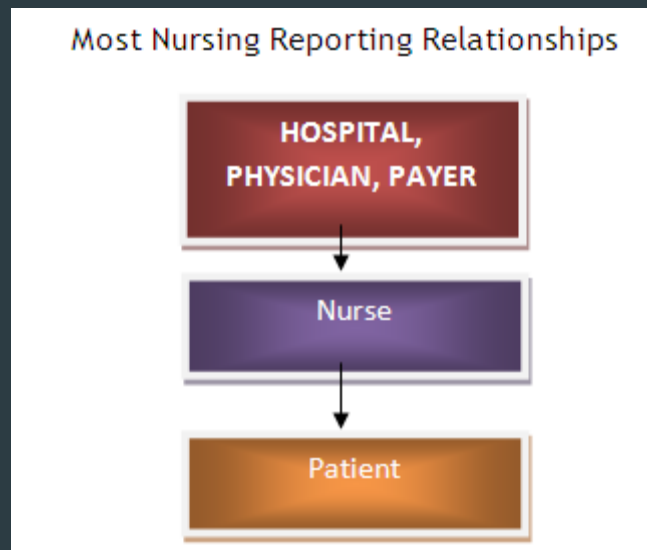
- In early 1900s, standardization of nursing practice and licensure
- 1911, American Nursing Association formed

- 1919; Committee for the Study of Nursing Education was formed and the Goldmark report was published - recommended that nursing education be moved to universities; hospitals and physicians resisted this
- Two other reports were published recommending the same approach to nursing education. Because of the resistance, these recommendations were ignored

- Last half of the 20<sup>th</sup> century, master's and doctoral degree programs were developed; nursing theories were also developed in an attempt to define the practice of nursing
- The role of nursing has expanded despite resistance at times from the medical community

# Power Relationships

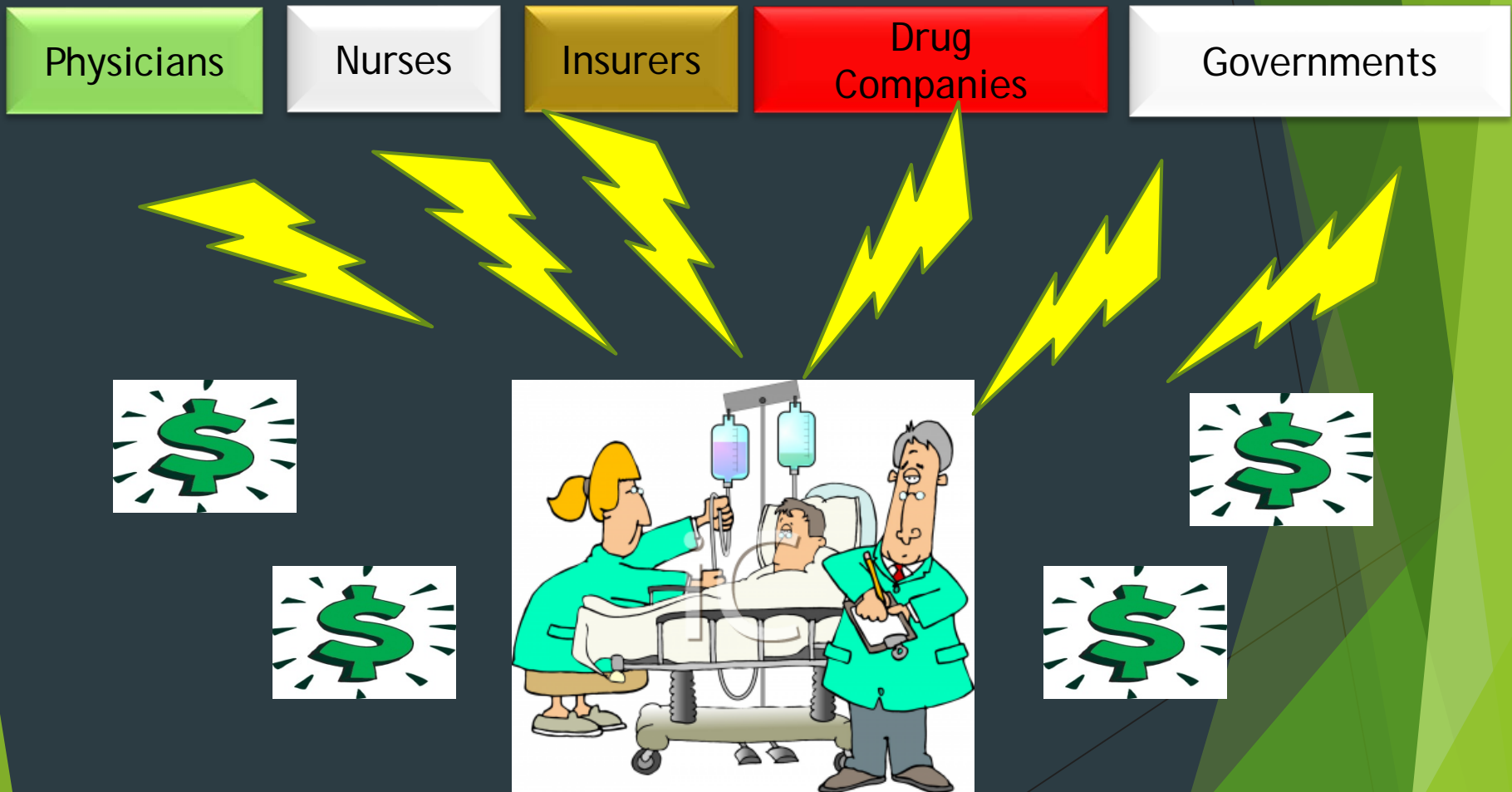
Historically nurses have been under the authority of others – the reporting structure shown earlier depicts this -





# Power Relationships a natural competitive model

- ▶ To “compete”, it’s natural to go head to head with power....could look like this.



# A More Effective Real Power Relationship regardless of the organizational structure



Individuals/People  
What are their needs?



Personal Health Nurse  
How do I support them?

Social /  
Spiritual health

Habit  
Modification

Lifestyle  
management

Sickness  
management

Leadership involves -

A common task

A vision

Followers

Because they historically had little authority on their own and the lines often blurred between nursing and other health professionals, nurses were not considered leaders but rather followers

In order to lead, nursing had to strengthen their understanding of their role and the contribution they make to the health of people and populations

# Nursing Domains

## Theory Categories

- ▶ **Needs theories** focus on the nurse's role in helping an individual meet their physical and psychological needs; however, these theories have been criticized as being more based in the medical model.
- ▶ **Interaction theories** focus on the relationship nurses develop with the people they serve. Interestingly these theories have been criticized for ignoring the medical model.
- ▶ **Outcomes theories** focus on nursing interventions that are designed to help a person as they adapt to forces that can impact health
- ▶ **Humanistic theories** focus on the nurse as an advocate for helping the person they serve attain self-actualization; supporting the person's own capacity for growth and health

# Nursing Domain

## Basic Concepts

These concepts are in all nursing models

- Person
- Health
- Environment
- Nursing

AND how they interrelate

# Nursing Domain

Nursing domains that relate to the IHMS PHN Leadership domains

Clinical skills and knowledge

Therapeutic relationship

Professional relationship  
(Collaboration)

Professional development

# Nursing Leadership

## WANTED:

A group of professionals who can:

Deliver / coordinate patient-centered; safe; quality health care

Engage with physicians and other health professionals to achieve this goal

## Overall nursing leadership takeaways:

- Leadership occurs from the bedside to the boardroom
- Nurses are FULL partners with other health professionals
- Nurses are then are accountable for their own contribution

# Leadership Skills

From the Healthcare Leadership Alliance - leadership skills collateral to the nursing domains -

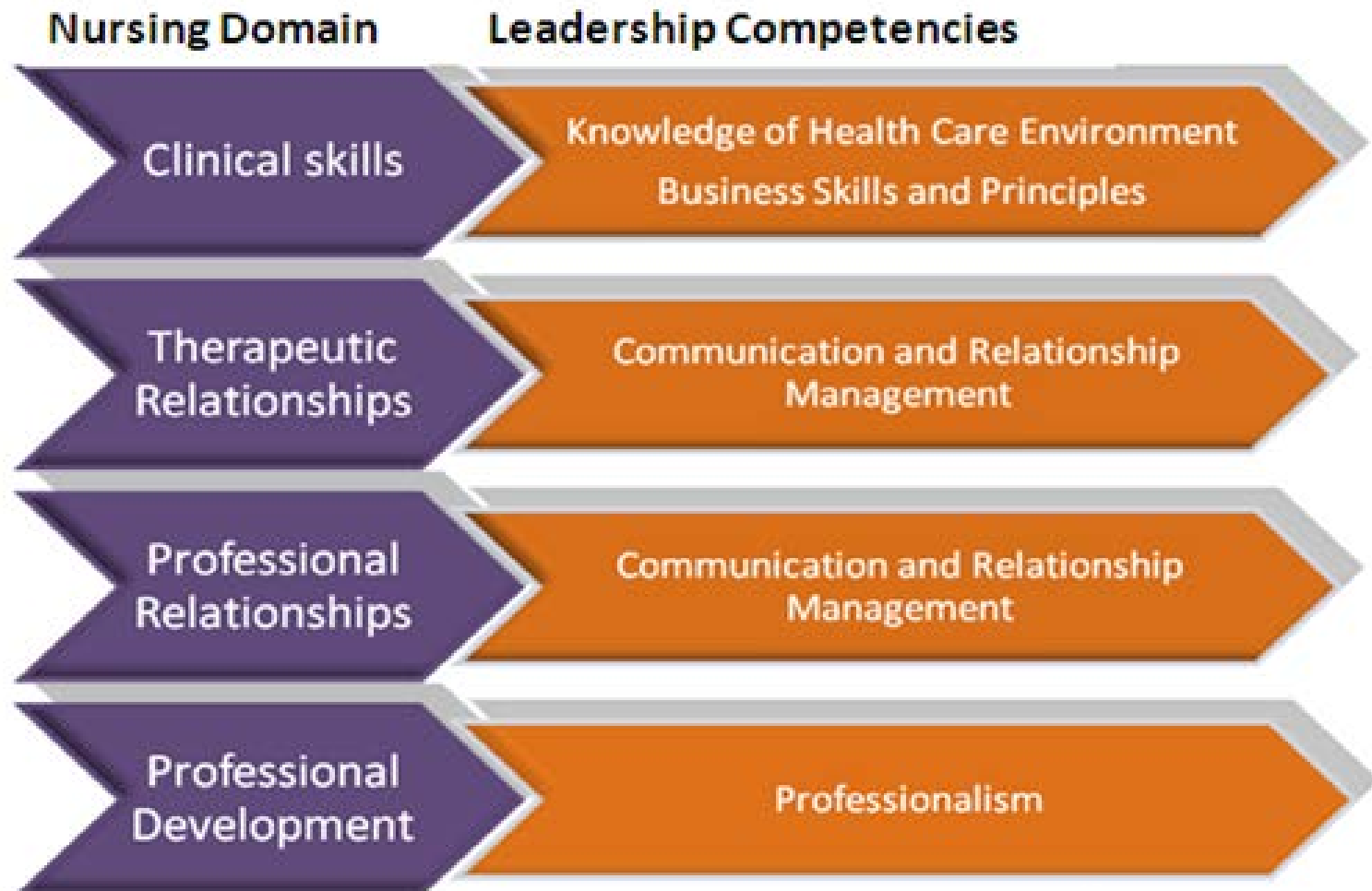
Leadership Skills -





# Leadership Skills

In relation to Nursing Domains



# Leadership Competencies

## Examples

### Communication and relationship management

- Seeing the participant's needs through their eyes
- Advocating for the participant's goals
- COLLABORATION

### Knowledge of the healthcare environment

- Clinical practice skills necessary to effectively provide personal health management
- Care delivery models that can be employed to impact positive outcomes
- Continuum of care needs

### Business skills and principles

- Plan management
- Strategic management
- Staff management
- Marketing

### Professionalism

- Personal and professional accountability
- Ethical practice of nursing