Written specifically for the experienced nurse enrolled in an RN-to-BSN program, this text guides nurses through an interactive critical thinking process to become effective and confident nurse leaders. All nurses involved with direct patient care already rely on similar strategies to oversee patient safety, make care decisions, and integrate plan of care in collaboration with patients and families. This text expands upon that knowledge and provides a firm base to reach the next steps in academia and practice, enabling the BSN-prepared nurse to tackle serious issues in care delivery with a high level of self-awareness and skill.

Leadership and Management Competence in Nursing Practice relies on a keen understanding of what experienced nurses already bring to the classroom. This text provides a core framework and useful skills and strategies to successfully lead nursing and healthcare forward. Clear, concise chapters cover leadership skills and personal attributes of leaders with minimal repetition of material covered in associate's degree programs. Content builds on the framework of AACN Essentials of Baccalaureate Education, IOM Competencies, and QSEN KSAs. Each chapter presents case scenarios to promote critical thinking and decision-making. Self-assessment tools featured throughout the text enable nurses to evaluate their current strengths, areas for growth, and learning needs.

- Provides information needed for the associate's degree nurse to advance to the level of professionally prepared baccalaureate degree nurse
- Chapters contain critical thinking exercises, vignettes, and case scenarios targeted to the RN-to-BSN audience
- Self-assessment tools included in most chapters to help the reader determine where they are now on the topic and to what point they need to advance to obtain competence and confidence in the professional nursing role
- Provides information and skills needed by nurses in a variety of healthcare settings
- Includes an instructor's manual and PowerPoint slides

ISBN 978-0-8261-2524-8
Leadership and Management Competence in Nursing Practice
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Leadership and Management Competence in Nursing Practice

Competencies, Skills, Decision-Making

Audrey Marie Beauvais, DNP, MSN, MBA, RN

EDITOR
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Springer Publishing Company, LLC
11 West 42nd Street
New York, NY 10036
www.springerpub.com

Acquisitions Editor: Elizabeth Nieginski
Production Manager: Kris Parrish
Compositor: Graphic World

ISBN: 978-0-8261-2524-8

Instructors Materials: Qualified instructors may request supplements by emailing textbook@springerpub.com.

19 20 21 22 23 / 5 4 3 2 1

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Library of Congress Cataloging-in-Publication Data
Names: Beauvais, Audrey Marie, editor.
Title: Leadership and management competence in nursing practice: competencies, skills, decision-making / [edited by] Audrey Marie Beauvais.
Subjects: | MESH: Nursing | Leadership | Nurse's Role | Decision Making, Organizational
Classification: LCC RT89 (ebook) | LCC RT89 (print) | NLM WY 105 | DDC 362.17/3--dc23
LC record available at https://lccn.loc.gov/2018032247

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Printed in the United States of America.
This book is dedicated to my family:
To my husband, John, whose support helped make this possible.
To my children, Jeffrey and Rebecca, who fill my heart with joy.
To my mom and dad, who have always been my biggest fans.
This is a sample from LEADERSHIP AND MANAGEMENT COMPETENCE IN NURSING PRACTICE: COMPETENCIES, SKILLS, DECISION-MAKING

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CONTENTS

Contributors xi
Foreword Joyce J. Fitzpatrick, PhD, MBA, RN, FAAN, FNAP xv
Preface xvii
Acknowledgments xix

Share Leadership and Management Competence in Nursing Practice: Competencies, Skills, Decision-Making

I. INTRODUCTION

1. Transition to the Professional Nurse Role 3
   Audrey Marie Beauvais

2. Leadership Attributes 13
   Audrey Marie Beauvais

3. Leadership and Management Roles in Professional Nursing 31
   James Cyrus

4. Foundational Aspects of Effective Leadership 51
   Mary E. Quinn and Mary T. Quinn Griffin

II. LEADERSHIP SKILLS ESSENTIAL TO THE PRACTICE OF NURSING

5. Handling Stress in the Workplace 81
   Susan DeNisco

6. Setting Priorities and Managing Time 99
   Bonnie Haupt and Audrey Marie Beauvais

7. Effective Communication in Leadership and Management Roles 109
   Sherylyn M. Watson

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8. Accountability and Delegation 135
   Susan A. Goncalves

9. Building and Leading Teams 157
   David M. Depukat and Karri Davis

10. Facilitating Problem-Solving and Decision-Making in Teams 181
    Audrey Marie Beauvais

11. Conflict Resolution Skills in Professional Nursing Practice 205
    Robin S. Krinsky

III. LEADING CHANGE

12. Factors That Influence Organizational Culture 229
    Kelly Hancock

13. Innovation and Change 245
    Audrey Marie Beauvais and Kimberly Spahn

14. Power and Politics in Professional Nursing Practice 267
    Audrey Marie Beauvais

15. Managing Quality and Safety 279
    David M. Depukat

IV. MANAGING HUMAN AND FISCAL RESOURCES

16. Management and Leadership Roles in Professional Nursing 303
    Kristy Dixon Stinger

17. Care Delivery Models, Staffing, and Scheduling 319
    Karen Burrows

18. Budgeting and Managing Fiscal Resources 341
    Deirdre O’Flaherty and Jean Marie DiNapoli

19. Selection and Promotion in Staff Development 355
    Lisa M. Rebeschi

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V. INTEGRATING LEADERSHIP AND MANAGEMENT COMPETENCIES INTO NURSING PRACTICE—YOUR EVOLUTION AS A PROFESSIONAL

20. Envisioning and Developing Your Career: Where Am I Going?  
   Linda Roney  
   377

21. Preparing for Professional Opportunities  
   Karri Davis and David M. Depukat  
   393

22. Contributing to the Profession—Our Responsibility as a Professional Nurse  
   Susan A. Goncalves  
   415

Index  
   441
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This book, *Leadership and Management Competence in Nursing Practice: Competencies, Skills, Decision-Making*, is a very welcome addition to the nursing leadership and management literature. Geared toward RNs enrolled in RN-to-BSN programs, it is concise, straightforward, and engaging. The academic standards for baccalaureate nursing programs promulgated by the American Association of Colleges of Nursing in the *Essentials of Baccalaureate Nursing Programs* provides the rationale for leadership and management content as core components of all BSN curricula.

This new book on leadership and management includes all of the basic content that RN-to-BSN students need. Personal attributes of leaders are addressed so that students can develop their self-awareness regarding their own leadership and management styles. Leadership skills such as effective communication, priority and time management, accountability, teamwork, decision-making, conflict management, and stress management are all important topics that are thoroughly addressed in the chapters.

Each chapter begins with learning objectives for the student. The format is useful to students who are often expert clinicians but have not previously been introduced to the key concepts central to leadership and management in nursing and healthcare. Chapters also include a case scenario demonstrating the specific topic of the chapter and self-assessment tools that will help students discover their learning needs, strengths, and weaknesses in the important content areas.

Another important section of the book is focused on preparing nurses to lead change. Basic components of organizational analysis are addressed as important to understanding the systems in which nurses work. Managing quality and safety, and managing resources are dimensions that are addressed in the section of the book on developing management skills. These are significant issues in care delivery today, and nurses who are in management and leadership positions, or those who aspire to be in these positions, must have the necessary skills in the ever-changing healthcare arena. This book includes the basic content in a user-friendly format. The structured chapter format is particularly useful to faculty new to teaching these students as well as to faculty who have large classes of RN-to-BSN students, including virtual and in-person classes. As the external pressures increase
for RNs without BSN degrees to return to school for the BSN degree, we can expect that the class sizes will further increase, particularly in core-required courses such as leadership and management.

The chapter contributors have a wealth of experience and expertise in their content areas. Many of the authors have held or currently hold leadership positions in healthcare delivery organizations and academic nursing. Their real-life leadership experiences enhance the basic content in the chapters, particularly in the case scenarios included.

The book editor, Dr. Audrey Beauvais, has gathered the necessary content experts and structured the content to be included in each chapter. She has authored the first two chapters of the book. Both of these introductory chapters set the tone for the students, introducing core content in ways that help students relate to the learning objectives. The depth of Dr. Beauvais’s leadership in both content and style of the book will make it easy for both faculty and students to follow her lead.

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This leadership and management textbook is part of a series of concise, interactive, and engaging textbooks geared toward nurses enrolled in RN-to-BSN or RN-to-MSN completion programs. Leadership and management skills are necessary at all levels and roles of nursing practice. The American Association of Colleges of Nursing’s Essentials of Baccalaureate Education for Professional Nursing Practice states that baccalaureate-prepared nurses need beginning leadership and management skills to effectively practice professional nursing. The content in this book directly relates to the associate degree nurse’s practice and assists the nurse in developing a higher level of self-awareness and skill to be able to function effectively in a leadership and management role. There are currently no books specifically designed for RN-to-BSN or RN-to-MSN students on this topic. Many of the current leadership textbooks are designed primarily for BSN students who are not yet licensed and have not worked as practicing nurses. As a result, many of the books have a focus on preparing them for the National Council Licensure Examination (NCLEX-RN® exam) which is not necessary or relevant for students in the RN-to-BSN and RN-to-MSN programs.

Each chapter of the book contains essential information that acknowledges the prior learning experience of the practicing nurse who is now an RN-to-BSN or RN-to-MSN student. It provides information needed for the associate’s degree nurse to advance to the professionally prepared baccalaureate degree nurse. Each chapter begins with a brief overview of specific leadership and management topics. Case scenarios are woven throughout the chapters to help readers apply the information to practical situations. It provides concise and application-based examples that help promote self-growth as a professional. Self-assessment tools are included in most chapters for the reader to see where they are now on the topic and to what point they need to advance to obtain competence and confidence in the professional nursing role. The book provides application opportunities geared to one’s own practice. Questions are posed throughout each chapter in an effort to promote discernment and reflection. Each chapter is built on the framework of the American Association of Colleges of Nursing’s Essentials of Baccalaureate Education for Professional Nursing Practice, the National Academy of Medicine (formerly called the Institute of Medicine) competencies, and the Quality and
Safety Education for Nurses (QSEN) knowledge, skills, and attitudes (KSAs). Each chapter ends with critical thinking activities that are intended to promote reflection and application of the material presented in the chapter.

This textbook contains five parts. Part I provides introductory information such as leadership attributes, leadership and management roles in professional nursing, and foundational aspects of leadership. Part II discusses leadership skills that are essential to the practice of nursing. Those skills include handling stress, setting priorities, managing time, communication, accountability, delegation, teams, problem-solving, decision-making, and conflict resolution. Given the need for nurses to lead us to a preferred healthcare future, Part III focuses on leading change. Readers are introduced to the factors that influence organizational culture, innovation, change, power, politics, and managing quality and safety. Part IV concentrates on the business aspect of healthcare by reviewing how to manage human and fiscal resources. Finally, Part V of the book helps the reader to contemplate his or her evolution as a professional by discussing how to integrate leadership and management competencies into his or her nursing practice. Although one book cannot cover all aspects of leadership and management, our goal is to provide a core framework and useful skills and strategies to successfully lead nursing and healthcare forward.
ACKNOWLEDGMENTS

I would like to acknowledge Dr. Joyce Fitzpatrick, who provided my name to Springer Publishing for this opportunity: Dr. Fitzpatrick is an inspirational nursing leader and legend. I have had the good fortune to get to know her during my doctoral studies at Case Western Reserve University and have appreciated her support and mentorship ever since. I am honored and grateful that she wrote the Foreword to this book.

I would also like to acknowledge the support I had throughout the process from Dr. Meredith Wallace Kazer and my colleagues at Fairfield University. Their kind words, guidance, and encouragement were an enormous help to me as I worked on this project.

I thank my talented colleagues who contributed to the chapters: This project would not have been possible without their willingness to share their leadership and management expertise.

I am grateful to Elizabeth Nieinski, executive editor at Springer Publishing Company, and Rachel X. Landes, assistant editor for nursing, for their support, guidance, and encouragement throughout the publication process.

And last, but by no means the least, I would like to acknowledge Janet Weber, the supervising editor for her constructive critiques and skillful edits. I cannot thank her enough for all her time and effort. She was supportive and encouraging, a true joy to work with. She is a wonderful example of what mentorship is all about.
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Leadership and Management Competence in Nursing Practice: Competencies, Skills, Decision-Making
LEADERSHIP ATTRIBUTES

AUDREY MARIE BEAUVAIS

LEARNING OBJECTIVES

After completion of this chapter, the reader will be able to

- Describe personal attributes of effective leaders.
- Discuss a variety of leadership styles.
- Explain the significance of self-awareness in leading others.
- Describe a variety of methods to increase one’s level of self-awareness.
- Explain how to overcome barriers that obstruct one’s level of self-awareness.
- Discuss the concept and benefits of emotional intelligence.
- Apply the concept of emotional intelligence to a leadership case scenario.

As you develop further into your leadership roles, you will need to develop certain personal attributes and skills to enhance your success. In this chapter, we review personal attributes of effective leaders and discuss ways to promote your level of self-awareness. The topic of emotional intelligence (EI) is explored as an ability that can enhance your leadership effectiveness.

PERSONAL ATTRIBUTES OF EFFECTIVE LEADERS

Leadership attributes are the personal qualities and characteristics that describe how an individual conducts himself or herself. These qualities and characteristics include the person’s character, motives, behaviors, and skills. Personal attributes not only describe the leader’s personal character but also help establish direction and mobilize the commitment of others.

Think of a leader you admire. What personal attributes come to mind? Now think about your own personal attributes. How would your friends and
coworkers describe you? A sample of personal attributes of effective leaders is given in Table 2.1. Highlight each word that you think applies to you.

As an associate's degree nurse, you already possess many personal attributes that will promote your success as a leader. However, there may be other attributes that you can further cultivate. As you can see from the list in Table 2.1, there are numerous leadership attributes—and those are only a sample of them! However, there are some essential qualities we should highlight for you. An essential personal attribute for an effective nurse leader includes a strong ethical core in which human dignity and caring are at the center of decisions and actions. Effective leaders act with integrity and honesty to keep and carry through with their promises. At certain times in your role as a leader, you will need to enlist the help of your coworkers. To encourage coworkers’ assistance, you should be likable and authentic, which in turn will help you develop genuine relationships. Leaders often have to address problems calmly, giving people the benefit of doubt and being careful not to humiliate others. Such attributes highlight the essential characteristics that will promote your success as a leader.

Another leadership attribute gaining attention in the literature is “grit.” Angela Duckworth, an associate professor of psychology at the University of Pennsylvania, has spent time examining this concept. Duckworth has

<table>
<thead>
<tr>
<th>TABLE 2.1 SAMPLE PERSONAL ATTRIBUTES OF EFFECTIVE LEADERS</th>
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<tbody>
<tr>
<td>accountable</td>
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<tr>
<td>authentic</td>
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<td>candid</td>
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<td>courageous</td>
</tr>
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<td>creative</td>
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<tr>
<td>critical thinker</td>
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defined “grit” as perseverance and passion for long-term goals. She believes that to be successful it is not just about your talent and intelligence but about your tenacity. Grit encompasses several characteristics such as courage (ability to manage your fear of failure), achievement orientation (work tirelessly to complete a task), endurance, resilience, optimism, confidence, creativity, and a desire for excellence (Perlis, 2013). Box 2.1 provides you with additional resources and an exercise on grit.

Most likely you possess some of the qualities noted in the self-assessment of great leaders listed in Box 2.2. Perhaps you developed those qualities or maybe you were born with them. However, there may be other qualities that you are lacking. The good news is that you can set out to gain those skills you do not currently possess. As a leader, you need to look to improve yourself. Tracy (2014) mentions four steps to improve your leadership attributes:

1. Do more: Spend more time on the activities that are of greater value to you and on the activities that are important in achieving your leadership goals.
2. Do less: Likewise, decrease the amount of time you spend on the activities that will not help you achieve your leadership goals or will hinder your accomplishments as a leader.
3. Do things you should be doing: Identify the skills, knowledge, and competencies that are needed to be a successful leader. Once those qualities are identified, learn and/or acquire them.
4. Stop doing other things: Reflect on all your activities with the perspective of what you want to achieve as a leader. Perhaps what you are spending your time on is no longer pertinent to your leadership goals. You may realize that the activities that were once valuable are no longer valuable and are taking up precious time.

Access Duckworth’s website www.angeladuckworth.com and listen to the TEDtalk on grit in which she discusses the power of passion and perseverance. In addition, access the Grit Scale, a 10-question quiz, which will help you assess how “gritty” you are.

**Box 2.1 Exercise**

Access Duckworth’s website www.angeladuckworth.com and listen to the TEDtalk on grit in which she discusses the power of passion and perseverance. In addition, access the Grit Scale, a 10-question quiz, which will help you assess how “gritty” you are.
The following qualities have been identified by Bornstein and Bornstein (2016) as contributing to making "great leaders." How many of these qualities of "great leaders" do you possess?

- **Focus**: Are you distracted by minor issues or are you able to focus on major concerns?
- **Confidence**: Do you instill confidence in others? Do you have a clear vision? Do you show empathy? Do you like to coach others?
- **Transparency**: Are you authentic? Do you engender the trust of others?
- **Integrity**: Do you need to be right or do you do what is right? Are your words and actions consistent?
- **Inspiration**: Are you driven? Are you powered by your values and beliefs? Do you have an internal drive? Are you able to motivate others?
- **Passion**: Do you love your job? Are you obsessed with your career? Are you never satisfied and strive for something better? Do you lead by example?
- **Innovation**: Are you creative? Do you like to solve challenging issues? Do you like to think outside the box to address issues and concerns?
- **Patience**: Are you able to stay the course when you have a vision or a cause? Do you know when to abandon the cause?
- **Stoicism**: Are you able to anticipate the worst-case scenario? In difficult situations, are you able to regulate your emotional reaction?
- **Authenticity**: Have you learned from other great leaders but retained your own character and voice?
- **Open-mindedness**: Do you keep an open mind? Are you flexible and able to adjust if necessary?
- **Decisiveness**: Are you wishy-washy when making decisions? Do you second guess your decisions? Or do you make decisions with conviction and do not look back?
- **Personableness**: Are you able to make genuine connections with people? Do you look for ways to help others (as opposed to look for ways they can help you)?
- **Empowerment**: Do you appropriately delegate responsibility? Or do you feel it is easier to do it yourself?
- **Positivity**: Are you able to create optimism? Are you able to make the impossible seem possible?
- **Generosity**: Are you able to create up others? Do you help others to grow as individuals?
- **Persistence**: Do you feel that great accomplishments can take time? Do you have the tenacity needed to accomplish your goals?
- **Insightfulness**: Do you have the wisdom to know what is important and what is not?
- **Communication**: Are you a good communicator? Are you able to express your expectations? Do you treat your job as a collaboration?
- **Accountability**: Do you take responsibility for your behavior? When you make a mistake, do you take steps to make it right?
- **Restlessness**: Do you think that you and your team have all the answers? Are you willing to look outside your group to find information and answers?
LEADERSHIP STYLE PREFERENCE

In your role as an associate’s degree nurse, you have developed a leadership style but perhaps have not given it much thought. As you develop in your BSN role, it is helpful to contemplate your leadership style and decide how you would like to develop it further. There are different leadership styles based on different assumptions and leadership theories. The first major study about leadership was conducted by Lewin, Lippit, and White (1939), which outlined several major leadership styles. Table 2.2 highlights several leadership styles.

Additional leadership theories such as transformational leadership, servant leadership, situational leadership, and authentic leadership are presented in Chapter 3.

Your leadership style will be based on your values, beliefs, and preferences as well as your organization’s culture and norms. Your leadership attributes are combined to create your overall leadership style. Understanding your baseline leadership style preference will help you to further develop your leadership awareness and skills. Box 2.3 will help you assess your leadership style.

Chances are that as an associate’s degree nurse, you have been using a number of different styles at different times. Your style may involve expecting excellence and often exemplifying it yourself. If someone in your team is not performing well, perhaps you demand more of them and maybe even step in to help them. At other times, maybe you are all about keeping the peace. At those times, harmony and working in a collaborative manner that focuses on emotional needs over work issues might take precedence. Emergency medical conditions with your patient might require you to take quick decisive action. However, if you are working on a policy change, you might choose to gather key stakeholders to get their input and foster their commitment while making a group decision about policy revision. No matter what your leadership style is, you should make sure it is aligned with the mission, vision, and philosophy of your organization. Think about what kind of a leader you want to be. Also, consider how your leadership style can assist you in becoming a successful leader. Refer to Box 2.4 for a critical thinking exercise that will help you apply leadership styles to practice.

SELF-AWARENESS

Self-awareness is an important leadership attribute and crucial to effective leadership. Self-awareness requires an honest self-appraisal of your motives, mental state, emotions, attitudes, personality, abilities, beliefs, and values (McKenna, 2017; Showry & Manasa, 2014).

If you answered the previous questions with a concrete response such as “I am a nurse and a mother,” then we ask you to reflect a little deeper.
<table>
<thead>
<tr>
<th>Leadership Style</th>
<th>Definition</th>
<th>Decision Maker</th>
<th>Disadvantages</th>
<th>Example of When It Is Used</th>
</tr>
</thead>
</table>
| Authoritarian          | The leader tells staff what to do and does not solicit their input          | Leader         | Doesn’t allow for others’ opinions  
Can result in strikes and disputes, can produce frustration  
Impedes development of employees  
May lead by fear and force  
Leader takes responsibility for decisions | Used to facilitate quick decisions, prompt action, and unity of direction  
Used with a new employee who is learning the role  
Used in an emergency situation when time is of the essence |
| Paternalistic/materna-  | Like the authoritarian leader, this leadership style involves a dominant      | Leader         | Leader functions like a father/mother  
Leader guides and protects staff (like family members)  
When staff are treated like children, then they act like children  
Staff may not think for themselves  
Staff wait to be told what to do  
Staff don’t want to be held accountable | Used commonly in small family-run businesses |
| listic                  | authority figure; however, the paternalistic/maternalistic leader treats    |                |                                                                               |                                                                                          |
|                        | staff like members of a family; the leader expects the staff to be loyal    |                |                                                                               |                                                                                          |
|                        | and obedient                                                                |                |                                                                               |                                                                                          |
| Democratic             | The power is vested in the staff and executed by their leader. The leader   | Group          | Collaboration can take time especially if people aren’t in agreement  
Difficult to make fast decisions  
Can be dangerous to depend on consensus of people who may be misinformed or lack accurate information | Used to solve safety issues |
<p>|                        | leads by persuasion. The leader and staff share responsibility.              |                |                                                                               |                                                                                          |</p>
<table>
<thead>
<tr>
<th>Leadership Style</th>
<th>Description</th>
<th>Leader's Role</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participative</td>
<td>Includes staff in the decision-making process but often makes the final decision</td>
<td>Must set priorities and delegate certain tasks</td>
<td>Used with employees who know their role</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Can blame others when things go wrong</td>
<td>Used if the leader is aware there is a problem but doesn’t have all the information</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Can backfire if people feel their input is ignored</td>
<td>Used when creating new policies and procedures</td>
</tr>
<tr>
<td>Laissez-faire</td>
<td>Allows staff to make decisions but the leader is responsible for the decisions that are made</td>
<td>Leader avoids power and responsibility</td>
<td>Used when employees are experienced, skilled, and self-starters</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Responsibility passed to subordinates</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Leader takes minimum initiative with administration</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Leader gives no direction</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Group establishes own goals</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Group works out own problems</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Organization is likely to struggle</td>
<td></td>
</tr>
</tbody>
</table>
BOX 2.3 LEADERSHIP STYLE SELF-ASSESSMENT

To help you to understand your leadership style, consider taking the following online leadership style surveys: www.nwlink.com/~donclark/leader/survstyl.html and www.yourleadershiplegacy.com/assessment/assessment.php

BOX 2.4 CRITICAL THINKING EXERCISE

Let us put some of these styles into practice by reviewing some scenarios in which different leadership styles (such as authoritarian, paternalistic, democratic, participative, and laissez-faire) are used. Describe the style being used. Would you use the same style or would you handle it differently? Although there is no right or wrong ways to handle each situation, there may be more effective ways to get the results you want. As you work through each scenario, try to cultivate your ability to act like a leader in each scenario.

1. The nursing manager at a long-term care facility wants to order new bed alarms for her unit. She has different vendors come in to show the staff their products. Although the team discusses the pros and cons of each product, the nurse manager will make the final decision.

2. The nurse manager at the rehabilitation facility is told she needs to reduce the fall rate. She immediately starts telling the staff what changes will be implemented. When staff offer their thoughts, she tells them she will be making the decision and does not need their input.

3. The outpatient clinic has no nursing supervisor. The staff are expected to function on their own to find staffing and to provide safe patient care.

4. The charge nurse has to clear all decisions regarding staffing and patient assignments with her nurse manager before taking action.

5. The physician’s office in which you work performs similar functions each day. The office manager needs to get information to the staff. She chooses to send an email to convey this information rather than calling a meeting or talking to people face-to-face.

QUESTIONS TO ASK BEFORE READING ON

Who are you?
What kind of impression do you make?
What do you want to achieve?
What do you believe in?
However, if you answered the previous questions with well-articulated values such as “I am caring, honest, and competent,” then you are more apt to respond to challenges with integrity and consistency (Flanagan, 2013). Cultivating self-awareness will help to free you of dysfunctional habits and self-defeating behaviors, which in turn can lead to personal transformation (Flanagan, 2013). Knowing your strengths and weaknesses, looking for feedback from others, and obtaining insight from mistakes can allow you to expand your self-awareness and thus improve your leadership skills (Glazer & Fitzpatrick, 2013, p. 249).

An effective leader is willing to obtain self-awareness from a number of sources. Two such sources are introspection and social comparison (Showry & Manasa, 2014). “Introspection” is an internal process of examining who you are (your thoughts, feelings, character, traits, etc.). Effective leaders can also see how other people view them (“social comparison”) and understand the impact of their actions (Showry & Manasa, 2014). If you can be honest about your strengths and weaknesses, then you will have an opportunity to change your weaknesses into strengths by developing yourself (Showry & Manasa, 2014). Self-awareness can help change how you think and what you think, and thus provide the opportunity to transform your behavior (Flanagan, 2013).

Showry and Manasa (2014) note the following obstacles to gaining self-awareness:

- **Incompetence:** You need to be competent to engage in self-assessment. If you are not competent to assess yourself free from biases and prejudices, then you will not obtain an accurate self-reflection.
- **Motives:** There may be conflict between your need to be accurate in your self-perception and your desire to feel good about yourself. Hence, if your motive is to feel good about yourself, then it can prevent you from getting objective feedback.
- **Self-presentation:** Self-presentation is your ability to persuade public perceptions. You are what you are able to lead others to believe you are. However, deliberately creating a false impression is destructive and will create a fake identity, which will lead to a high degree of distortion.
- **Core self-evaluation:** Core self-evaluation is the bottom line assessment you make about your self-worth. It is made up of self-esteem, self-efficacy, and self-confidence. Having low self-esteem, self-efficacy, and self-confidence can hinder your ability to see what others see in you, which can lead to a distorted self-assessment.
- **High self-monitors:** High self-monitors refer to those individuals who present an impressive representation of themselves versus low self-monitors who tend to present their true selves. High self-monitors also have the ability to present different impressions depending on what the situation requires. This can present a problem when they change their core values to suit a specific situation.
Self-deception: Self-deception may protect you from the truth that could potentially cause pain and anxiety. Self-deception happens when you lack openness and objective self-evaluation.

Defense mechanisms: Defense mechanisms like denial, displacement, and isolation can promote feedback-avoiding behavior. This can influence the way you gather information and derive conclusions about yourself.

Distorted feedback: People's misconceptions about you can affect your self-awareness. The more power you have, the less candid feedback you tend to receive because of people's fear of the repercussions. As a result, it is vital to assess the feedback for its honesty and disregard the feedback if it is detrimental to you.

Narcissism: Narcissism refers to people who are obsessively interested in themselves and tend to be emotional authoritarian decision makers. Their self-absorption is done at the expense of others via displays of egotism, dominance, and aggression. They tend to have a distorted self-concept, which makes them blind to their weaknesses.

Being aware of these obstacles will help you avoid the pitfalls to self-awareness. Leaders who succeed are aware of who they are and what they want to achieve. Rather than not acknowledging their weaknesses, successful leaders embrace this information and make needed changes. How might you foster your self-awareness? For starters, you need to be open to feedback. Participate in self-reflection activities that can help you analyze, understand, and gain meaning from the feedback you are given. See Box 2.5 for a self-reflection exercise.

BOX 2.5 SELF-REFLECTION EXERCISE
Consider keeping a daily journal to reflect on the events of your day. Which events went well? What could you have done to make the day go better? What sources of feedback did you use to help make judgments about the day?

EMOTIONAL INTELLIGENCE
Emotional intelligence (EI) has been identified as an important leadership attribute for nurses (Doe, Ndinguri, & Phipps, 2015; Sadri, 2012). But what exactly is EI? EI is often defined by either an ability-based model or by an expansive model. For the purposes of this chapter, we focus on the ability-based model by Mayer, Salovey, and Caruso (2004) who define EI as the ability to reason with emotions to enhance thinking. In this model, EI encompasses four abilities: to accurately perceive emotions, to use emotion to facilitate thoughts, to understand emotions, and to manage emotions. This model is measured by the Mayer–Salovey–Caruso Emotional Intelligence Test (MSCEIT). Box 2.6 will help us put this into practice with questions to consider and a case scenario.
Keep the following questions in mind as you read the following case scenario. The first part of this case scenario focuses on the EI ability to perceive emotions.

Perceiving emotions:
• What are Nancy’s feelings?
• What might the nurse manager be feeling?

A year ago, the nurse manager who was feeling stretched by her numerous responsibilities decided to delegate the task of developing the staffing schedule to a trusted certified nursing assistant who had been working with the organization for over 30 years. Although this arrangement worked well for the first 6 months, the staff are now starting to feel that the system is unfair and that the certified nursing assistant is playing favorites and not taking their requests into account. Nancy, a staff nurse and leader on the unit, has spoken with her colleagues who have also expressed concerns. Nancy worked with her peers to develop a viable alternative solution to developing the staffing schedule. The scheduling issue has become personal for Nancy because she requested a day off to go to her grandmother’s surprise 85th birthday party but was denied this request. Frustrated by the situation, Nancy is anxious to present the problem and the potential solution to the nurse manager. On Friday afternoon, Nancy goes to find the nurse manager to discuss this but she is not in her office. The unit secretary shares that the nurse manager was called to an emergency budget meeting with the chief financial officer and the senior vice president/chief nursing officer. The unit secretary also shares that the nurse manager was hoping to leave early given her plans to get away for the weekend to celebrate her wedding anniversary.

How do you think Nancy was feeling? It is safe to say that Nancy is feeling frustrated perhaps even downright angry that she was not allowed to go to her grandmother’s surprise 85th birthday party, especially when the nurse manager will be leaving early for her own personal reason (wedding anniversary). Nancy is also anxious to speak to the nurse manager to express her feelings and get this resolved.

How might the nurse manager be feeling? Although there are no emotions listed in the above-mentioned scenario, one can deduce that the nurse manager might have a host of feelings related to the emergency budget meeting that was called. Chances are the emergency meeting did not deliver happy news such as the institution has a surplus of money they need her to spend. Chances are that there is a crisis that needs to be managed. Hence, most likely the manager may feel anxious, upset, or even angry. In addition to this emergency budget meeting on a Friday, remember the nurse manager wanted to leave early to celebrate her anniversary. Hence, she might have additional feelings about this meeting imposing on her time when she wanted to leave and celebrate. Let us continue this case scenario and focus on the EI ability of using emotion to facilitate thought.
As you continue with this case scenario, consider the following questions that will focus on the EI ability of using emotion to facilitate thought.

Using emotion to facilitate thought:
•   What is the impact of Nancy’s feelings on the situation?
•   What might the impact of the nurse manager’s feelings be on the situation?
•   How can Nancy use her feelings to help her make decisions that are healthy for her and others involved?
•   Should Nancy redirect and prioritize her thinking on the basis of the associated feelings to focus on the goal at hand?

Nancy decides to wait for the nurse manager to discuss the perceived staff scheduling problem and to present her solution. Nancy has been upset about the situation and is anxious to get this off her chest. The nurse manager returns to the unit and is visibly preoccupied and troubled from her previous emergency budget meeting. Despite this, Nancy heads to the nurse manager and asks to speak with her. The nurse manager explains that she does not have much time as she needs to leave work early. Nancy insists they speak and says it will not take much of the nurse manager’s time. The nurse manager does not appear pleased but agrees to hear what she has to say if she can make it quick.

The impact of Nancy feeling anxious and frustrated about the scheduling situation was that she insisted on speaking with the nurse manager that day. Nancy seems to have not noticed (or perhaps ignored) that the nurse manager was upset on returning from her emergency budget meeting. The impact of the nurse manager’s feeling on this situation is that she may not be open to hear about Nancy’s problem because she has other pressing issues at hand. Using the information that the nurse manager is upset could help Nancy to redirect and prioritize her thinking to achieve her goal of changing how the schedule is created.

As you continue with this case scenario, consider the following questions that will focus on the EI ability of understanding emotions and managing emotions.

Understanding emotions:
•   What were the goals of the interaction for Nancy?
•   What were the goals of the interaction for the nurse manager?
•   Can you understand the reasons for Nancy’s emotions?
•   Can you understand the reasons for the nurse manager’s emotions?
•   What is the purpose of the emotions that each person felt?
•   How have these emotions impacted the outcomes?
•   Does Nancy understand why the nurse manager has reacted this way?

Managing emotions:
•   How could Nancy have channeled her emotions in a positive fashion?
   Do you think Nancy can identify the negative emotions expressed and channel them in a positive fashion?
• How could Nancy work through the situation in a constructive manner? How can Nancy use emotional data and cues to achieve a positive outcome?

Nancy sits down in the manager’s office and begins to recount how she and her fellow colleagues feel the current system of determining the staffing schedule is “unfair.” As Nancy talks, the nurse manager appears uncomfortable and is fidgeting in her chair. Nancy cannot tell if the nurse manager is upset or angry or feeling some other emotion. Nancy continues on with discussing the problem and the potential solutions. Once Nancy finishes talking, the nurse manager takes a deep breath and says, "As I shared with you, I don't have much time. I can't believe it has been a year and this is the first I am hearing about this. I can't make a decision about this right now. In fact, I have a lot going on and frankly have bigger and more immediate problems to deal with. I am going to think about this and get back to you." Nancy leaves the meeting feeling hurt, misunderstood, and defeated. The nurse manager feels blindsided and frustrated to have yet another problem to deal with. Although the nurse manager did not share with Nancy, she had just been told at her budget meeting that she has to eliminate two positions.

Nancy’s goal for the interaction was to feel heard and understood. She wanted to present the problem and a potential solution to how the schedule is created. The nurse manager in this case has a very different goal. Her goal most likely is around leaving early to celebrate with her husband. These competing goals lead each individual to have unique feelings. These feelings then impact outcomes. Seeing that the manager was just delivered difficult news about the budget and wants to leave early, she is not receptive to what Nancy has to say. If Nancy was able to identify and understand the nurse manager's feelings, the outcome may have been different. If Nancy was able to perceive that the nurse manager was upset and anxious, she could have used the information to help make decisions. She could have attempted to manage her own emotions and realize that the timing was not right to have such a conversation with her manager. Perhaps she could have asked to set up a meeting for next week to discuss the problem when hopefully they would both be in a better place emotionally.

The case above provides one example of how EI might influence nursing leaders. There are many other reasons that EI is needed in nursing leadership. For example, EI is helpful in fostering mutual respect with colleagues, superiors, and subordinates (Băeșu & Bejinaru, 2015). EI can be helpful in times of stress/crisis, because those abilities will help you to acknowledge the thoughts and feelings of others and to anticipate their reaction and
decide the best option (Băeșu & Bejinaru, 2015). EI can be useful as you manage projects, build effective teams, and create educational programs (Powell, Mabry, & Mixer, 2015).

EI is believed to develop with age much like your intelligence quotient (IQ). What happens if you do not have the level of EI you want? Does that mean it is a lost cause? No, the good news is that it is believed that EI skills can be enhanced with educational strategies. This is promising as many of us can benefit from enhancing these skills!

BOX 2.7 what is your level of emotional intelligence?

This is not a scientific self-assessment but rather is intended to foster reflection. Please answer “yes” or “no” to the following questions.

Identify emotions:
- I am aware of my emotions.
- I am able to accurately identify how other people are feeling.
- I am able to express my emotions.
- I am able to express my needs related to my emotions.
- I do not read too much into people.

Use emotions:
- I redirect my thinking based on how I am feeling.
- I am able to use my emotions to facilitate problem-solving ability and creativity.
- I am able to use my feelings to help me make healthy decisions.

Understand emotions:
- I am able to determine the cause of emotions.
- I am able to determine the consequences of emotions.
- I can understand complex feelings.
- I can understand transitions among emotions.
- I often know the right thing to say.
- I make good predictions about what people may feel.

Manage emotions:
- I am open to feelings (pleasant and unpleasant).
- I reflect on my emotions.
- I can manage my own emotions.
- I can manage the emotions of others.
- I am able to turn unpleasant emotions into positive learning opportunities.

If you answered “yes” to the majority of these questions, then you most likely have high emotional intelligence. If you have answered “no” to some or many of these questions, you have an opportunity to hone your emotional intelligence skills.
Research supports that higher levels of EI can help improve patient outcomes, enhance nurse–patient relationships, and lead to organizational improvement (Doe et al., 2015; Powell et al., 2015). EI abilities such as managing emotions can lead to higher levels of overall well-being, reduced occurrences of burnout, and generation of improved patient outcomes (Powell et al., 2015).

Despite all the above-mentioned positives, it should be noted that the concept/measurement of EI has faced criticism. The criticism is mainly because of inconsistent theoretical and operational definitions as well as inconsistent measurements of EI. Such inconsistencies make it challenging to synthesize the literature and translate it into practice. Regardless of these issues, EI continues to be of interest as evidenced by the numerous articles found in the literature. EI continues to be a promising concept but will require further research to determine the utility of EI in nursing.

**QUALITY and SAFETY EDUCATION for NURSES (QSEN) CONSIDERATIONS**

As you read the following QSEN competencies related to leadership attributes, ask yourself:

- Which of these competencies do I meet and which competencies do I need to develop more fully?
- What plan of action can I take to enhance those competencies in which I am weak and to develop those which I lack at this time?

**BOX 2.8 LEADERSHIP ATTRIBUTES: SELECT RELEVANT QSEN COMPETENCIES**

- Demonstrate awareness of own strengths and limitations as a team member
- Act with integrity, consistency and respect for differing views
- Function competently within own scope of practice as a member of the healthcare team
- Communicate with team members, adapting own style of communicating to needs of the team and situation


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CONCLUSIONS

In this chapter, we discussed how your personal attributes can contribute to your effectiveness as a leader. Your leadership attributes help to create your overall leadership style. You may use different leadership styles depending on the situation to achieve maximum results. Keep in mind that your leadership style needs to be congruent with the mission and vision of your organization. An essential personal attribute that is critical to effective leadership is self-awareness. We discussed sources of information to promote self-awareness as well as obstacles to gaining self-awareness. Finally, we examined the concept of EI as it relates to effective leadership.

CRITICAL THINKING QUESTIONS AND ACTIVITIES

- Personal attributes of effective leaders: Name three personal attributes of an effective leader that you possess. Name three personal attributes you would like to develop.
- Leadership style: Give an example when you (or another leader) used the leadership styles discussed in this chapter: authoritarian, paternalistic/maternalistic, democratic, participative, and laissez-faire. What style do you prefer to use? What style do you see used most often at your place of employment?
- Self-awareness exercise: What do you want people to think about you as a leader? What do you not want people to think about you? Is it more important that people like you or that you do your job well? Explain.
- EI: Think of a “put down” (critical remark) someone in nursing leadership has said to you or a coworker. How did it make you feel when you heard that remark? How do you think the leader felt after making such a comment? Why do you think your leader made that comment? What was the purpose of such a statement? What negative words/phrases affect you the most? How often do you hear them at work? If no one at work ridiculed others, what would happen? Would you or your coworkers lose anything? What are the benefits of not using critical remarks?

REFERENCES


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Many nurses encounter challenges in envisioning and developing their careers. Although some nurses pursue their bachelor of science in nursing (BSN) degree with a specific career opportunity in mind, for many, the path is not as clear. The steps for professional development following graduation may present opportunities to develop new skills and ideas. Although you may have some thoughts from colleagues at your workplace, who may have motivated you to complete your bachelor’s degree, you will continue to gain additional knowledge and tools to plan for the next phase in your career.

This chapter will help you understand the process of thoughtful envisioning as part of this next step in your career planning process. Thoughtful envisioning is based on the Quality and Safety Education for Nurses (QSEN) competencies (QSEN Institute, 2014) that relate to career development. The role of the career coach is described as it relates to your role development as a BSN-prepared registered nurse. You will learn how to use the CHAMP model to select a professional mentor to assist you with your career development.

LEARNING OBJECTIVES

After completion of this chapter, the reader will be able to

- Discuss the role of career envisioning as part of the career planning process.
- Identify Quality and Safety Education for Nurses (QSEN) competencies that relate to career development skills.
- Explain the role of a career coach in successful professional development.
- Use the CHAMP process to select a professional mentor for career development.
- Apply the Nursing Professional Networking (NPN) model to develop one's personal career.
In Box 20.1, you will consider a case scenario of an associate's degree-prepared registered nurse who begins to consider the next phase in her professional development journey. Finally, the significance of developing a lifelong professional network is described using the Nursing Professional Networking (NPN) model.

Tamika is a registered nurse (RN) who earned her associate’s degree in nursing at an area community college 3 years ago. After taking the National Council licensure examination (NCLEX®; NCBSN, n.d.), Tamika started her nursing career as a staff nurse on a musculoskeletal unit at an American Nurses Credentialing Center (ANCC) Magnet®-accredited medical center (ANCC, n.d.). At the same time, Tamika enrolled in an RN-to-BSN program at a state university near her home. This spring, she will graduate with her BSN degree. Many of her coworkers have completed their BSN degrees and continue to work on the musculoskeletal unit; however, Tamika has aspirations of doing something different with her career. Although both her manager and unit educator have their master’s degrees in nursing, they do not seem to be able to provide Tamika any support related to developing her career in a new direction. As a first-generation American and the first in her family to graduate from college, Tamika does not know to whom to turn for advice as she envisions her career. At the end of one particularly busy shift, Tamika begins to think that she would like to explore options for her next phase in her professional development as she asks herself: Where am I going?

In Box 20.1, you will consider a case scenario of an associate’s degree-prepared registered nurse who begins to consider the next phase in her professional development journey. Finally, the significance of developing a lifelong professional network is described using the Nursing Professional Networking (NPN) model.

ENVISIONING AND DEVELOPING YOUR CAREER

Until this point in your career, much of the career planning that you have done might have been linked to finding and securing a job as an RN. Now that you have taken this important step in your nursing career to earn your BSN degree, you have the opportunity to consider new opportunities this degree will open for you. An important step in this reflective process is visualization. Visualization, or envisioning, is a form of mental rehearsal that has been found to have a positive effect on the brain, which enhances one’s motivation, confidence, and self-efficacy (Neason, 2012).

In the 1970s and 1980s, researchers began to study the influence of visualization on athletic performance. Ungerleider and Golding (1991) explored the effect of visualization on the performance of elite track and field athletes before the 1988 Olympic trials and after the Olympic games in Seoul, Korea. Findings support that visualization has a positive effect on performance. Over three decades since this original study and in preparing for the 2016 Summer Olympics in Rio, Olympic gold medalist Kayla Harrison spent 10 minutes every night before bed visualizing her performance at
Perhaps you are returning to school for your BSN degree because your employer requires that you return to school as a condition of your employment. If the choice to return to school is not your own, it might seem like a burdensome task. Before you started taking classes for your BSN degree, you might have felt that you already have the clinical skills to effectively care for patients in your work setting. Yet the skills that you are developing as part of your BSN program will enhance your professional performance as well as broaden your career trajectory. Table 20.1 presents each of the QSEN competencies that you can consider and reflect upon relating to your own professional career development.

QSEN COMPETENCIES SUPPORT PROFESSIONAL CAREER DEVELOPMENT

QSEN (2014) offers competencies that will help you develop skills in your own professional career development (Table 20.1). Consider each of these QSEN competencies and reflect on actions that you can take related to these competencies in your current or future practice area. The competencies are divided into three domains: knowledge, skills, and attitudes.

QUESTIONS TO CONSIDER BEFORE READING ON

• Which of these competencies do you believe you meet?
• Toward which competencies are you now working?
• With which competencies do you need assistance to understand and pursue?

Perhaps you are returning to school for your BSN degree because your employer requires that you return to school as a condition of your employment. If the choice to return to school is not your own, it might seem like a burdensome task. Before you started taking classes for your BSN degree, you might have felt that you already have the clinical skills to effectively care for patients in your work setting. Yet the skills that you are developing as part of your BSN program will enhance your professional performance as well as broaden your career trajectory. Table 20.1 presents each of the QSEN competencies that you can consider and reflect upon relating to your own professional career development. QSEN Institute (2014) competencies that relate to developing knowledge in career development are a great example. Perhaps when you first started working on your unit, you learned about standards, such as national patient safety resources and clinical practice guidelines you need to integrate into your daily nursing practice. With
your enhanced knowledge as a bachelor’s-prepared nurse, you may soon be ready to take a leadership role seeking out new national patient care standards to integrate into nursing practice on your unit. Instead of relying on the information others tell you to integrate into your practice, you will learn new skills to evaluate research and evidence to develop a culture of safety at work. Perhaps your attitude about reading professional journals related directly to your nursing practice has changed since you have returned to school as you now see how this information can improve patient outcomes.

**APPLYING WHAT YOU LEARNED**

Building on these ideas generated from the QSEN competencies (QSEN Institute, 2014), there are specific strategies to help you envision and develop your career. These include developing a professional vision board, creating a career map, finding a career coach, selecting mentors, and developing a professional network. Each of these is described in detail. Make time to pursue and complete each of these skills with the guidelines and directions provided as follows.

**TABLE 20.1 DEVELOPING SKILLS IN CAREER DEVELOPMENT: RELEVANT QSEN COMPETENCIES**

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Skills</th>
<th>Attitudes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discuss potential and actual impact of national patient safety resources, initiatives, and regulations</td>
<td>Evaluate research and evidence reports related to patient safety</td>
<td>Explain the importance of regularly reading relevant professional journals</td>
</tr>
<tr>
<td>Delineate the reliable sources for locating evidence reports and clinical practice guidelines</td>
<td>Use national patient safety resources for own professional development and to focus attention on safety in care settings</td>
<td>Acknowledge own potential to contribute to effective team functioning</td>
</tr>
<tr>
<td>Describe own strengths, limitations, and values in functioning as a member of a team</td>
<td>Demonstrate awareness of own strengths and limitations as a team member</td>
<td>Value relationship between national safety campaigns and implementation in local practices and practice settings</td>
</tr>
</tbody>
</table>

VISION BOARDS

A professional vision board is a collage of artifacts, images, and other important items that an individual can collect and display in one area to remind him or her of a goal or to be kept inspired (Figure 20.1). Developing a professional vision board may help bring you closer to identifying your goals (Rider, 2015).

Identify a box or a folder in your home where you can collect artifacts for your professional vision board. These items might include an ad for your “dream job” from a professional journal, a picture of the newly built medical center in a location where you hope to move when you graduate, the text from your professional organization’s website identifying a professional certification you hope to achieve, or a motivational quote that you print from the Internet. Create a collage on a wall or corkboard in an area where you regularly work, which will keep these visions in the forefront of your mind. You can add to or change artifacts as your ideas regarding your professional development evolve. Place this board in a location where you can regularly see it so you can easily incorporate envisioning your career into your daily routine. As the case scenario continues in Box 20.2, Tamika begins to envision her career and creates a professional vision board.

CAREER MAPPING

Taking this identified vision to the next and more concrete level, career mapping is a process in which an individual describes his or her career destination and goals and then identifies a specific career goal and strategic career plan to meet his or her career destination. The career map and career goal are routinely revisited and revised until the career goal is met (Feetham & Doering, 2015).

FIGURE 20.1 Example of a professional vision board.
When you were first hired into a nursing position, you were probably assigned a preceptor. A “preceptor” is an individual who is given the time-limited responsibility of helping the new nurse develop the clinical skills and

Career mapping can assist you to create your lifelong learning and professional goals, provide service to your community and profession, and achieve your specific goals. We all have strengths and talents that can lead to success. This can be achieved by using a career map to promote self-discovery in one’s professional life. To start your career map, consider where you are currently in your professional career and where you aspire to be in the future (Inglis, 2014). Webb, Diamond-Wells, and Jeffs (2017) created the Professional Career Map (Figure 20.2) that you can use to articulate the plan for your career vision. This tool provides you with the opportunity to consider the intermediate goals that you will need to achieve to reach your major career goal. It also prompts you to identify strategies to reach those goals. In Box 20.3, Tamika reflects on the artifacts she has gathered to reflect her professional goals. She uses the professional career map to help her articulate her goals.

### Questions to Consider Before Reading On

You can begin envisioning your future career by asking yourself the following questions:

- Where do I see myself professionally in 5/10 years?
- In what work setting can I see myself being successful?
- What is one professional goal that I can accomplish in the next year?

### Career Coaching

When you were first hired into a nursing position, you were probably assigned a preceptor. A “preceptor” is an individual who is given the time-limited responsibility of helping the new nurse develop the clinical skills and

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While in her leadership class, Tamika reads about the Professional Career Map (Webb, Diamond-Wells, & Jeffs, 2017) and decides to use this tool as she begins to plan her professional goals. In reviewing the professional vision board, she notices that she has many “artifacts” related to unit-based orthopedic nursing education. After some reflection, Tamika begins to realize that this goal is a natural fit for her. She uses the Professional Career Map (2017) as a model to create her own professional career map in her journal (Figure 20.3).

orientation necessary to work on a specific unit (Paton, 2010). Similar to this, a “career coach” is someone who interacts with a client in a specific, purposeful, and result-oriented way to help a person reach higher effectiveness (Fowler, 2014). There are times that this person might be a peer, as in the case of a colleague who has completed his or her portfolio for advancement on the clinical ladder and shares his or her experience with you and helps you learn from his or her perspective as you prepare to apply for promotion. A career coach is
someone who may or may not be paid to help you identify solution-oriented steps to achieve your career goals (Cheek, Walsh Dotson, & Ogilvie, 2016).

**FIGURE 20.3 Tamika’s career map.**


A “mentor” is a more experienced professional in your field (or one that you aspire to pursue) who offers career advice, guidance, and support from a real-world point of view (Scivicque, 2011). Mentors address mentees’ attainment of
professional goals (Cheek, Walsh Dotson, & Ogilvie, 2016). There is a five-step process, “CHAMP” (Figure 20.4), that can help you select professional mentors. (Box 20.4 describes Tamika’s exciting experience attending her first professional conference. While there, she uses the CHAMP model for selecting a professional mentor.)

Choose mentors you admire. Take a moment to think about individuals in either your personal or professional life whom you admire. Maybe you admire one of your former coworkers who has left to work in another department after finishing a BSN degree. Perhaps you have attended a professional nursing conference and one of the speakers left a significant impression on you. I have chosen several mentors who had a national reputation for being the best at their careers.

Have the courage to ask. Many mentoring relationships develop informally through professional working relationships. For many nurses who are looking for new opportunities or career mobility, this might not meet their needs. Once you have identified a mentor(s) you admire, do not be afraid to ask them directly. For example, after hearing a presentation at a professional nursing conference on a topic about which you are passionate, you might approach the speaker during a break and introduce yourself. After a brief conversation, ask if it would be okay to meet for coffee or to set up a time to talk by telephone if he or she does not live close to you. In one of your first meetings, say what you admire about him or her and ask if he or she would be willing to be your professional mentor. While the first time you do this, it might feel quite awkward but, with practice, it will become less uncomfortable as you realize how flattering it is to be asked to be a mentor.

A good mentor should have a perspective different than your own. Although it might feel more comfortable to ask a friend at work to be your mentor, there is limited value in seeking mentorship from a person whose perspective is

FIGURE 20.4 How to be a CHAMP when selecting professional mentors.
exactly the same as yours. Instead, if there is someone who has a skill set that you aspire to develop, you might want to reach out to that person. For example, if you have a strong desire to work as a charge nurse, you might want to seek out opportunities to meet new people at your medical center. Instead of sitting with the same colleagues with whom you work every day on the unit when you take a continuing education course or hospital-based training, find a seat in another part of the room. During breaks, talk and network with at least one new person. If you have not done this before, you will be very surprised how easy this is to do. You may meet your future mentor in the role of charge nurse who works on a unit other than yours. This fresh set of eyes offers a different vantage point and advice for you as you strive to reach your goals.

More than one mentor is always a great idea. Oftentimes, when we are about to make a major purchase, we solicit many opinions about what we might buy. For some of us that means turning to user reviews on the Internet and for others that might mean asking friends and family members for their opinions. Most times, we seek multiple opinions before making a big purchase. Why would we not do the same when it comes to our own career and professional development? One mentor’s opinion is typically based on his or her own experience and in all cases, the suggestion may not apply to your specific situation. You might speak with one mentor about the types of educational opportunities that might help you reach your goals. You might

Tamika decides to take her professional development to the next step and attend the National Association of Orthopedic Nurses annual conference. While on the airplane to travel to the conference, she reads about the CHAMP model for selecting professional mentors. During the conference, she attends a focus session about innovations in pain management for postoperative joint replacement patients. She is captivated by the speaker (Dr. Michaels) and despite sweaty palms and a racing heart, Tamika approaches the podium to introduce herself to the speaker. They quickly greet one another, and Tamika is thrilled when Dr. Michaels offers her email address so they can connect with one another in the future.

Tamika emails Dr. Michaels on the last day of the conference and they set up a time to speak by telephone the following week. Inspired by her career path, Tamika asks Dr. Michaels if she would be willing to be her mentor. Dr. Michaels works as a clinical nurse specialist for the musculoskeletal service line at a major medical center almost 2,000 miles away from where Tamika works. The stories that she shares with Tamika on the basis of her experience are so interesting and her medical center is so different from where Tamika works. Their discussions open Tamika’s eyes to a new perspective and new ideas to consider in her own professional development. Although Tamika has mentors at her own workplace, she enjoys her conversations with Dr. Michaels because the focus is less on hospital politics and more on improving patient outcomes.
Networking is the development of using contacts for purposes outside the original reason for the contact (Entrepreneur staff, 2017). For example, after completing a master’s degree in nursing administration, a coworker leaves the hospital at which you work to take a promotion as a nurse manager on a medical surgical unit at another medical center in your state. To network with this former colleague, you reach out to meet for lunch and discuss potential job opportunities at the person’s new place of work. Sometimes networking has a specific focus (e.g., looking for a new job) and sometimes it just involves a social exchange, either online or in person to broaden your thinking about your professional development. Professional networks lead to more job opportunities, deeper knowledge about your field, faster professional career advancement, and improvement in the quality of work (Casciaro, Gino, & Kouchaki, 2016).

Perhaps consider what you can offer in return to your mentor. Although you may be adjusting to the idea of asking someone to be your mentor, did you ever think about what you can offer him or her in return? It is extremely generous for anyone to take the time to share his or her ideas with someone who is either just starting out or looking for new opportunities. In some of these relationships, you might offer to meet your mentor at a coffee shop at a time and location that is convenient for him or her (and then treating to coffee!). In other relationships, the exchange might be more reciprocal. Perhaps you used to work on a cardiac unit before transferring to work on a surgical unit. Your mentor may wish to develop skills in reading electrocardiograms (ECGs; something that you are very good at!). You offer to help your mentor learn ECG interpretation in exchange for his or her mentoring you in the area of professional development.

QUESTIONS TO CONSIDER BEFORE READING ON

- Who would be a great mentor for you in your current work setting?
- Who would be a great mentor for you outside of your current work setting but within your profession?
- How can you connect with a great mentor outside of your current work setting (e.g., through a professional organization, alumni organization, professional meeting, seminar, or conference)?
START NETWORKING NOW

Networking is a proactive practice that should continuously take place before one decides to make a career move. Perhaps you are considering what will be your next steps following graduation with your BSN degree. Inviting a colleague who graduated a few years before you to meet you for coffee to discuss the steps he or she took to advance his or her career might be a great initial step. Perhaps you are at a nursing conference and you meet a nurse who works in the same clinical specialty at a hospital 30 minutes away from you. Discussing your clinical and professional interests might be a great first step in networking.

PLAN WHAT DO YOU WANT AND WHAT YOU CAN OFFER

Using tools presented earlier in this chapter, such as the career vision board and the professional career map, you have had the opportunity to consider what you want. The CHAMP model guided you in considering what you can offer a mentor. These same considerations apply when you meet with others as you try to broaden your professional network. Figure 20.5 presents the NPN model, a tool to help you get started with professional networking.

FIGURE 20.5 Nursing Professional Networking (NPN) model.

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DEVELOPING A POSITIVE ONLINE PRESENCE

Going online is so much easier now that many of us have access to the Internet from a smartphone; nearly two-thirds of Americans own one. Having a smartphone has made it easier for people to go online to receive and post information. In a recent study, 43% of participants have used their smartphones to look up information about a job and 18% of people have used their smartphones to apply for a job online (Smith, 2015).

This increased access to going online also includes searching and posting on social media. Kung and Oh (2014) studied social media use among nurses and describe that 94% of nurses use social media with over 90% of nurses using social networking sites such as Facebook and Instagram. These activities can support professional development, such as “Liking” a professional nursing organization’s Facebook page or following a governmental organization’s Instagram page. Professional social media platforms, such as LinkedIn, can help nurses build and engage with a professional network online. Nurses can build a professional profile and virtually connect with a professional network. Best practices with LinkedIn include joining professional groups, sharing professional articles, and making networking connections with those who are in your specialty area of practice (University of Arizona with Duquesne University, n.d.). Most employers do maintain policies about social media use by employees, which includes activities both inside and outside of work, so be sure to familiarize yourself with their guidelines before posting any information that identifies your place of work or your role as an employee at your organization. Never post anything online that might look unprofessional or breach patient confidentiality (Smith, 2016). Box 20.5 describes how Tamika’s engagement with her professional organization continues to grow after the conference.

BOX 20.5 THE CASE SCENARIO CONTINUES TO UNFOLD

Tamika enjoys attending the National Association of Orthopedic Nurses annual conference so much that she decides to join the educational committee. Her commitment to the committee is participation in every other month conference calls. During these meetings, she is able to share and receive information from other orthopedic nurses from across the country. She creates a LinkedIn profile that is linked to her professional organization’s online community. The committee collaboratively develops a quarterly continuing education webinar series for orthopedic nurses across the country. Tamika really enjoys working on the committee and looks forward to the regular communication that she has with her new network.

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PROFESSIONAL INVOLVEMENT AND ACTIVITIES

If you have not already done so, join a professional organization. After you do that, take the next step and determine the steps to join a committee or special interest group (SIG) for that professional organization. This will provide you with close interactions and the opportunity to work with others whose interests are similar to your own.

SHOW APPRECIATION TOWARD YOUR NETWORK

Whether it is by sending holiday cards or posting professional, inspirational quotes on platforms, such as LinkedIn and tagging your network, it is important to show your appreciation. If someone has been particularly helpful to you, a handwritten note or a small token gift goes a long way in our fast-paced lives.

HELPFUL HINT

Many professional organizations offer discounted memberships to students. If you are considering joining a professional organization, do not wait until you graduate. There might be opportunities that might apply to your career goals. Once you join a professional organization, consider attending the annual state or national conference. This is a great way to get involved in the organization and to find out how to join a committee or other work group. Some employers do offer financial assistance to employees for conference travel. If you are thinking about attending a conference, check in with your employer early as there might be a stipulation for the financial assistance (e.g., you must present a poster for them to support your travel expenses). If your employer does not offer financial assistance to attend a conference, you still should consider attending. Career development expenses may be tax deductible. Discuss this with your professional tax preparer.

SELF-ASSESSMENT

Do you effectively manage your career? Answer “true” or “false” to the following statements to determine your level of competency with regard to career development:

- I understand the strengths I offer to work.
- I know my areas for professional growth.
- I have a long-term vision for my career.
- I set goals consistent with performance feedback.
- I take my department’s goals into account when setting my career goals.
- I effectively balance my career goals and personal priorities.
- I remain current on the skills that are relevant to my nursing specialty.

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I participate in training/educational activities each year to develop my skills.
I have a mentor for my professional and career development.
I have developed a professional network to help develop my personal career.

Reviewing the results of these statements, what competencies have you met? What competencies can you continue to develop? What strategies presented in this chapter can you use to further develop these competencies?

CONCLUSIONS
In this chapter, you have had the opportunity to consider specific strategies to envision and develop your career. After reading this chapter, you have seen that none of these strategies are particularly challenging or demanding. They do require time and planning on your part. Time spent planning is time well spent. Take time after completing this chapter to consider ways that you can use these new tools to help you with your own professional development. It takes time to achieve your goals but with an organized and systematic approach, career development should be a natural progression of your goals that you develop over time.

CRITICAL THINKING QUESTIONS AND EXERCISES

• After using the tools presented in this chapter, what is clearer about your career goals? What needs more thought? Privately journal your thoughts or discuss with your mentor.
• Use your calendar to set up a monthly appointment for 30 minutes with yourself to review your plans for career development. Use this time to reach out to mentors to meet for coffee or update your online professional profile on a site such as LinkedIn. If something comes up, you should commit to reschedule this appointment within 1 week.
• Identify one professional article about a topic of interest to you. Use an Internet search engine (e.g., Google) to find out more about the author of this article. Do they have a professional online presence? If they do, make an attempt to join their professional network or reach out to them by email to share comments of appreciation of their work.

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