

A programme conducted by a Turkish health provider showed a nursing leadership competency model can improve charge nurses' skills and identify leadership potential

Developing a leadership competency model

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Abstract Koc S et al (2013) Developing a leadership competency model. *Nursing Times*; 109: online issue. This article describes how a nursing manager competency model was developed to improve the competency of existing ward sisters and charge nurses and educate potential leaders employed by the Acibadem Healthcare Group in Istanbul, Turkey. The project included a series of workshops conducted between 2006 and 2011, an employee satisfaction questionnaire, quality indicators and a literature review. The model has been beneficial in developing new managers, and in improving team spirit and the culture of teamwork.

Competent nursing and effective leadership are fundamental to the provision of high-quality care. Cook and Lethard (2004) also recognised that nurses' ability to provide high-quality patient care involves leadership skills.

The roles of nurse managers who provide services within a large and complex healthcare system vary but there is an expectation they will have leadership skills. In this framework, nurses should demonstrate skills to improve performance, innovate and manage organisational change (Yigit, 2000).

Nurse leaders assume an important role

in the sustainability, motivation and increased personal and professional development of nursing staff. Research indicates that some leadership characteristics may increase employee satisfaction and improve staff retention.

Developing a nurse manager competency model

This project aimed to develop a nurse manager competency model to increase the number of nurse leaders through the use of leadership development programmes.

Together with Harvard Medical International, the project strategy was defined in February 2006. All charge nurses at Acibadem Healthcare Group in Turkey took part in the development programmes between 2007 and 2011 with the aim of developing skills to move into more senior management roles.

Charge nurses in Turkey have similar responsibilities to ward sisters and charge nurses in the UK, including allocating roles within their teams, organising duty rotas, auditing their unit's performance, monitoring patients' care plans and treatment, assessing their units' needs and available resources for current and oncoming shifts, and assisting with the identification and reporting of incidents.

A leadership workshop was scheduled between March and June 2006 and a work group was set up in order to ensure a common language among our leaders. The workgroup consisted of:

- › The nursing services director (chairman);
- › Nursing service managers;
- › A human resources manager;
- › A nursing development department manager;

5 key points

1 Effective nurse leadership is vital to the provision of high-quality care

2 Nurse leaders can motivate nursing staff and help with their professional development

3 The leadership development programme allows nurses to develop their skills while also practising what they have learnt

4 Individual courses to focus on issues such as crisis management and conflict resolution can be a useful adjunct to leadership development programmes

5 Nurse leaders bridge the gap between senior executives and nurses delivering patient care

BOX 1. PROBLEMS IDENTIFIED

- Poor resources for the development of new managers
- Managers lack problem-solving skills
- Staff retention
- No teamwork
- No nursing-specific indicators
- Different expectations from mid-level managers
- Lack of experience of charge nurses in guiding teams and setting goals despite their status as good clinicians
- No training for charge nurses for leadership responsibilities before assuming their role
- No leader development programme

- » Eight charge nurses;
- » Fourteen nurses with the potential to be future managers.

In the workshop, problems affecting managers' ability to do their job were identified (Box 1). This informed the development of the competency model; the subjects included in the nursing services competency model are listed in Box 2 and formed the basis of the leadership training programme.

The training programme was held annually between 2006 and 2011. During this period Acibadem Healthcare Group trained existing charge nurses and the courses were repeated for new managers. The training was provided by nursing managers who were trained by the Harvard Medical International coaching programme and had at least eight years' experience in the organisation.

An evaluation questionnaire was sent out to the 278 participants who completed the programme, asking for their views on its content and the trainers delivering it. In total, 91% of respondents were satisfied with the training (Fig 1).

After training, the nurse services director was asked to prepare task lists in accordance with the strategic plan for the organisation; these were delegated to charge nurses to include in their annual plans for their clinics. Tasks included clinical changes aimed at increasing patient and employee satisfaction. Some leaders attended individual update or development courses such as analytical thinking, crisis management and conflict resolution.

Assessing progress

Charge nurses influence job satisfaction and staff retention issues. They also

BOX 2. SUBJECTS INCLUDED IN COMPETENCY MODEL

- Creating a vision
- Delivering a strategy
- Setting direction, mentoring
- Service development and management
- Teamwork
- Personal development programme, staff training
- One-to-one care
- Patient stories and care observations
- Change management
- Unit performance management
- Communication
- Setting up of effective teams
- Establishing relationships based on cooperation
- Values
- Decision making
- Delegation
- Conflict management
- Problem solving
- Stress management
- Research process
- Motivational strategies

provide a bridge between senior executives and nurses delivering patient care. Our leadership development programme was used to test trainees' ability to handle the charge nurse position. At the end of the programme, if a charge nurse had not been found competent for the role an alternative position was recommended.

This process is a testing period when candidates are expected to develop their knowledge, skills and competencies while practising what they have learnt. Their performance is monitored by their supervisor and nursing services manager. After training they discuss further education and practice to develop nurse managers' knowledge and skills in their clinical area.

The impact of regular leadership training sessions has been measured using staff-patient satisfaction surveys. These show how the leadership model has functioned since its introduction. Before 2006 issues such as change management, unit performance management, strategic planning, communication, team building and team management, personal development, quality management and organisational values were core skills for middle

managers. However, while some managers were able to use these skills instinctively, there was no formal training or education. With this programme, nurse leader candidates were enabled to develop skills to manage stress and crisis, time and resources, and strategic planning practices such as strengths, weaknesses, opportunities and threats analyses. These are not optional skills for nurse manager candidates, but are mandatory.

Future plans

In November 2013 we plan to introduce an online personal development track page. This is a personal development map for nurses and includes education, skills and competencies. We believe it will allow nurses to view their career steps whenever they wish and to identify the need for updates to support their development. **NT**

References

- Cook MJ, Lethard H (2004) Learning for clinical leadership. *Journal of Nursing Management*; 12: 436-444.
- Yigit R (2000) Behaviour of Clinical Charge Nurses. *Journal of Cumhuriyet University Nursing Faculty*; 4: 1, 21-32.

FIG 1. PROGRAMME PARTICIPANTS SATISFACTION

