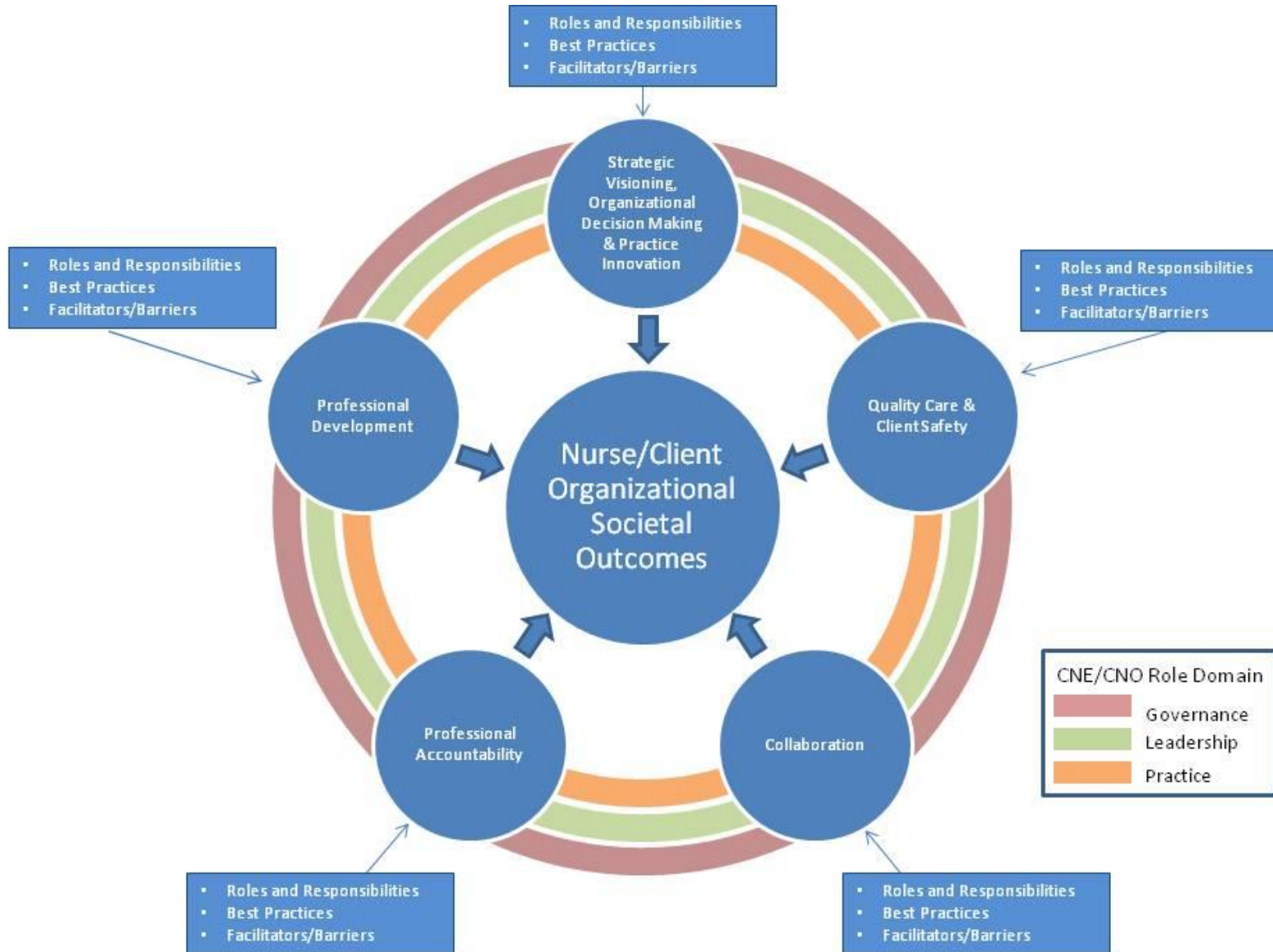


RNAO's Framework for Nurse Executive Leadership





RNAO's Framework for Nurse Executive Leadership

1. Framework Overview

The Framework for Nurse Executive Leadership is a unique model that is designed to delineate, shape and strengthen the evolving role of the nurse executive leader in Ontario and beyond. In order to facilitate role clarity and optimal role development for nurse executives in Ontario, RNAO, in collaboration with the nurse executives from both hospitals and public health units across Ontario, developed the Nurse Executive Leadership Roles and Responsibilities document during monthly knowledge exchange teleconferences hosted by the RNAO. The contents of this document reflect the mandated nurse executive role according to legislation/organizational standards, as well as best practices available in the literature. In addition, in the absence of Canadian literature in this area, much of this document reflects the expert opinion and lived experiences of nurse executives, itself a strong source of evidence. Best practices as well as common “facilitators and barriers” to success in the nurse executive role, are only now becoming better known and documented. It is RNAO's hope that through this beginning work and related dialogue and discourse, we will begin to identify and scale up the best practices and facilitators of this important role, and begin to link the impact of the nurse executive role on nurse/patient, organizational and societal outcomes.

In describing the key framework elements, the framework has as its central core the key drivers and impacts of the nurse executive role, that of client, nurse, organizational and societal outcomes. Such outcomes are impacted by roles and responsibilities of governance, leadership and practice of the nurse executive leader in the key leadership spheres of: strategic visioning, organizational decision making and practice innovation; quality care and client safety; collaboration; professional accountability and professional development. In each of these areas the nurse executive enacts specific competencies, utilized best evidence based practices, and leverages with key facilitators to address and overcome environmental barriers.

Framework for Nurse Executive Leadership illustrates the nurse executive roles and responsibilities in the context of membership and participation at the senior management and/or board room table. This framework assumes that the nurse executive is responsible for nursing activities throughout the organization and reports directly to the most senior leader, be that the Chief Executive Officer (CEO), Medical Officer of Health (MOH), or otherwise. As such, they are a senior member of executive-level decision-making management and their roles and responsibilities reflect governance and leadership functions recently enhanced by changes in legislation and organizational standards.

RNAO's Framework for Nurse Executive Leadership

2. Key Framework Elements

2.1 Outcomes

- **Client Outcomes**

To enhance the applicability of this framework to other nurse executives across the various healthcare sectors, the roles and responsibilities presented herein reflect broad nursing-related areas of responsibility rather than those which focus on accountabilities that may be inherent to one specific sector. As such, the definitions of particular concepts within the framework are broad and all-encompassing. "Client" is broadly applied to "individuals, families, groups, communities, populations, or systems", as defined by the Community Health Nurses of Canada (CHNC).¹ Similarly, "healthcare" is defined as "any service provided within the continuum of health care delivery, including direct clinical care, health promotion, health teaching, and illness prevention"². The terms "client and patient" will in general be used interchangeably throughout the description of this framework.

Client outcomes are central to the Organizing Framework for Nurse Executive Leadership. Research and practice confirm that a strong case can be made for centering healthcare resources and efforts on improving client-centred care³⁴⁵⁶. According to the RNAO Client Centred Care Best Practice Guideline⁷, client-centred is defined as:

"an approach in which clients are viewed as whole persons; it is not merely about delivering services where the client is located. Client centred care involves advocacy, empowerment, and respecting the client's autonomy, voice, self-determination, and participation in decision-making (p.12).

- **Nurse, Organizational and Societal Outcomes**

While optimal client outcomes remain the primary objective of healthcare services, nurse, organizational and societal outcomes must also become central as the interdependence of each is considered in achieving optimal client outcomes. To consider the client in isolation, rather than as a key participant within this quadratic relationship, is narrow and dangerously naive,⁸ given the interconnection that we know exists between structure, process and outcome in healthcare.

The Framework for the Nurse Executive Leader proposes that the roles and responsibilities of the nurse executive significantly impact client, nurse/other providers, organizational and societal outcomes. Given that nurses comprise over half of Ontario's 231,068 healthcare professionals (2009), with even higher proportions in the hospital and public health settings, and that nurses are integral to both effective structures and processes of healthcare delivery, the roles and responsibilities of the nurse executive, in governance, leadership and practice, are key determinants of nurse, client, organizational and societal outcomes.

RNAO's Framework for Nurse Executive Leadership

2.2 Governance, Leadership and Practice Role Domains

The nurse executive acts as the “chief” nurse in their organization and is mandated to govern, as well as lead and direct practice. To depict this, the organizing framework is encircled by three bands of responsibility: 1) governance, 2) leadership and 3) practice. In this framework, leadership is broadly differentiated from governance in that leadership is a shared responsibility with other nursing leaders and reflects both current and future decision making related to strategic and operational issues, while governance reflects an ultimate accountability for strategic decision making affecting the entire organization. Practice is broadly differentiated from governance and leadership in that practice reflects the work a nurse executive performs together with staff related to the provision of direct care or services.

The accompanying Nurse Executive Leadership Self-Assessment quantifies the roles and responsibilities of nurse executives in each of these three domains-governance, leadership, and practice. Competence is measured according to Patricia Benner's Novice to Expert theory (novice, advanced beginner, competent, proficient and expert) . Confidence is measured on an ordinal scale (no or low confidence, somewhat confident, confident, very confident, and fully confident), as is consistency (never consistent, sometimes consistent, often consistent, very often consistent and always consistent).

2.3 Nurse Executive Spheres of Leadership

The Nurse Executive Spheres of Leadership are identified as:

- Strategic visioning, organizational decision making and practice innovation;
- Quality care and client safety;
- Collaboration;
- Professional accountability and
- Professional development

These five key leadership areas of focus are elaborated on below with attention to the governance, leadership and practice role domains of each sphere of leadership.

RNAO's Framework for Nurse Executive Leadership

- **Strategic Visioning, Organizational Decision-Making & Practice Innovation**

Governance

In this governance role, the nurse executive advances the safety and quality agenda by being an active, engaged and knowledgeable participant at the senior management and/or board room table. They contribute best by articulating a strategic vision for the delivery of nursing and interprofessional care that is aligned with professional standards as well as the organization's mission, vision, values and expected outcomes. Innovation is encouraged within the context of organizational goals, objectives, forecasts as well as risks and opportunities. A respect for nursing is conveyed and demonstrated through proactive nursing health human resource planning. As well, a level of political acumen is developed in relationships with board members as well as internal and external stakeholders.

Leadership

In this leadership role, the nurse executive provides direction to nurses, and to some extent other disciplines, in the dissemination of the organization's strategic vision, inspiring innovation and participating in program planning while prioritizing and identifying the necessary resources to support each program selected for implementation. Evidence-based decision-making at all levels is encouraged through the establishment of a professional practice council, which can assist in the development of relevant nursing-sensitive quality improvement indicators for optimal nurse/client, organizational and societal outcomes.

Practice

In this practice role, the nurse executive creates and promotes evidence-based nursing practice by focusing on research utilization and capacity building in partnership with academic and other relevant stakeholders.

- **Quality Care and Client Safety**

Governance

In this governance role, the nurse executive participates as an active and engaged member of the board/senior management quality committee and as such champions policies and protocols that promote effective health care delivery that is evidence-based and services quality. The nurse executive assumes accountability for monitoring data collection on nursing-sensitive quality indicators and communicates these results to the board/senior management team. They meet quality and safety performance targets and provide evidence-based recommendations whenever possible. The link between nursing work environments and nurse/client and organizational outcomes is clearly articulated to the board/senior management team. As well, structure, process and nursing-sensitive outcome indicators are promoted by the nurse executive for inclusion in organizational quality improvement plans.



RNAO's Framework for Nurse Executive Leadership

Leadership

In this leadership role, the nurse executive proposes, leads and directs strategies to improve quality outcomes and advance evidence-based care/services. They oversee and report on risk management strategies and participate on task forces/ad-hoc committees as necessary and appropriate. A culture of learning is promoted through the implementation and evaluation of clinical and healthy work environment best practice guidelines and quality improvements that are consistent with the organization's broader quality improvement plan. The development, implementation and evaluation of data collection, measurement and analysis tools and strategies are led by the nurse executive, ensuring the most effective use of informatics to inform nursing practice and organizational effectiveness.

Practice

In this practice role, the nurse executive role models vigilance in providing and ensuring high quality care. They are along with the nursing staff engaged in assessing variability in nursing practice within the organization in order to determine areas in which the quality of care through use of best evidence, might be improved and risks to patient safety might be decreased. They evaluate nursing practice from a structure, process and outcomes framework and select appropriate outcomes for measuring progress towards organizational healthcare delivery goals. They facilitate the implementation and evaluation of clinical and healthy work environment best practice guidelines while monitoring the organizational processes and change this creates; keeping in mind the impact of each on nurse/client, organizational and societal outcomes.

- **Collaboration**

Governance

In this governance role, the nurse executive develops and maintains collaborative relationships with their nurse executive colleagues within and across organizations, sectors and regions in order to collectively advance the nursing governance and leadership agenda. They work together with their board/senior management team towards common quality improvement goals and promote inter-organizational, cross-sectoral and regional synergy to optimize client care and services across the continuum of care. The nurse executive promotes an interdisciplinary approach to the coordination of care and services and collaborates with key stakeholders to complement current healthcare service delivery and assists in the development of new and innovative ways of providing care. As a function of this role, the nurse executive establishes credibility as an expert on nursing and nursing-related matters within the organization.

Leadership

In this leadership role, the nurse executive fosters team work and collaboration among the various health professionals within the organization by emphasizing a collective advancement towards a shared vision, mission, values and expected organizational outcomes. A commitment to and respect

RNAO's Framework for Nurse Executive Leadership

for nursing and its values, knowledge, contributions and achievements is evident. As such, membership is maintained with nursing regulatory and professional associations. Partnerships with schools of nursing, which facilitate appropriate clinical placements and shape curriculum, is enhanced by the nurse executive in order to prepare future nurses to meet the nurse/client, organizational and societal needs of the future.

Practice

In this practice role, the nurse executive role models interprofessional relations and champions interprofessional collaboration to achieve optimal client care and service outcomes and effective integration of care. As such, the nurse executive actively participates in creating and establishing tools and processes for communicating and collaborating with and between direct care nurses.

- **Professional Accountability**

Governance

In this governance role, the nurse executive assumes responsibility for obtaining and implementing governance and leadership skills and knowledge for effective participation on the board/senior management team. In taking on this responsibility, they obtain knowledge of how legislated governance and management requirements impact and support their governance role and responsibilities as well as nursing services. They communicate clearly the nursing perspective and provide expertise on the nursing practice environment which can enhance the delivery of client care / services. As an expert in nursing, the nurse executive communicates both current and anticipated demands for clinical and program/service requirements. They advance priority initiatives and accept accountability for meeting specific targets set by the board/senior management team. As such, they monitor, interpret and report on nursing-sensitive performance indicators and broader organizational indicators. Exemplary nursing leadership is profiled within the organization, to senior leadership and within the board / senior management team.

Leadership

In this leadership role, the nurse executive establishes a vision for nursing practice and client care/service that complies with ethical standards and values. They champion evidence-based, client-centered models of care delivery and nursing practice that are consistent with professional standards as well as the mission, vision values and expected outcomes of the organization. By identifying and leveraging key initiatives that enable enhanced nursing practice and work environment outcomes (ie. becoming a Best Practice Spotlight Organization), they foster opportunities throughout the organization for staff to develop, enhance and profile their nursing leadership skills and contributions.

Nursing services are consistently evaluated by the nurse executive against evidence-based standards set by the profession, administration, human resources and departmental policies and procedures. A Nursing Professional Practice Council is championed by the nurse executive to facilitate professional nursing excellence. Effective strategies that promote nursing recruitment and retention, while



Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

Speaking out for nursing. Speaking out for health.

RNAO's Framework for Nurse Executive Leadership

recognizing excellence in nursing, will also be promoted to foster a healthy work environment that enables better client and societal outcomes.

Practice

In this practice role, the nurse executive champions safety, quality care and evidence-based nursing practice while promoting evidence-based models of nursing care delivery and client-centred clinical and management decision-making. Ensuring consistency of practice with the College of Nurses of Ontario's standards and relevant best-practice guidelines, the nurse executive develops and supports the Nursing Professional Practice Council to communicate, interpret, and assist in the application of standards, competencies, required organizational practices, and other legislative and regulatory requirements of nurses. They create, support and sustain a safe and healthy work environment by promoting and inspiring management practices that support nurses' health, safety and well-being. By identifying success measures, and developing reporting mechanisms and metrics, they capture the excellence of nursing care, education and research.

- **Professional Development**

Governance

In this governance role, the nurse executive fosters their own professional development as well as the professional development of others in the organization. In their own development, the nurse executive maintains awareness of the ever-changing health care environment and its potential impact on the organization's mission, vision, values and expected outcomes. They assume confidence and competence in communicating a strategic vision to the board/senior management team while demonstrating a clear commitment to advance excellence and innovation in nursing practice. Ongoing self-assessment by the nurse executive reflects a commitment to life-long learning and continuous quality improvement, which are key to maintaining optimal effectiveness as a member of the board/senior management team.

Leadership

In this leadership role, the nurse executive demonstrates active and visible leadership within the organization by encouraging, supporting and enabling staff to pursue professional development opportunities to enhance skills, develop expertise and advance their roles. They facilitate rewarding and enriching teaching/learning experiences for nursing students by rewarding staff involvement and recognizing student contributions to care. The nurse executive assumes responsibility for learning and professional development by seeking mentors as well as requesting and accepting feedback from supervisors and direct reports. As a nursing leader, they perform ongoing self-assessments to determine their effectiveness as a leader within their organization. The nurse executive helps shape a culture of professionalism, and professional growth and development through role modeling such behaviors in their own roles.

RNAO's Framework for Nurse Executive Leadership

Practice

In this practice role, the nurse executive role models professional development and life-long learning. They provide mentorship and guidance to staff and facilitate nurses' access to and use of support, feedback and guidance from superiors, peers and subordinates. They create a professional learning environment to mobilize and enhance the clinical expertise of staff. The nurse executive also enhances the meaningfulness of nursing work by facilitating nurses' participation in decision-making, while optimizing nurses' opportunities for autonomy as well as personal and professional growth.

2.4 Best Practices

Executive Nurse Leaders utilize best practices to inform governance, leadership and practice decisions. This Nurse Executive Leader Toolkit embodies critical best practices related to all three role domains. In particular nurse executive leaders are referred to the RNAO clinical best practice guidelines to shape clinical nursing and to the best practices related to organization and system wide knowledge transfer to enable uptake of clinical best practices. In addition they are directed to the RNAO healthy work environment guidelines that are key pillars to shaping work environments that will enable clinical excellence.

2.5 External Facilitators and Barriers

While each Ontario hospital and health unit are required to designate a nurse executive within their organization, with the expectation that the role will influence client, nurse, and organization outcomes. The impact this role has on outcomes is also dependent on external factors, and how the nurse executive and indeed the organization manages these external factors. The key nurse executive leader competencies outlined in the model will greatly influence how well the nurse executive leader is able to manage the external factors, utilizing key facilitators to overcome barriers to full achievement of outcomes. The collective of nurse executive leaders will also be critical in maximizing external facilitators and addressing barriers so as to realize the impact of this crucial role in the health care system.

Conclusion

Given the consensus among nurse executives that the roles and responsibilities outlined above facilitate optimal expectations of the nurse executive in meeting client, nurse, organizational and societal outcomes, RNAO presents this Framework for Nurse Executive Leadership in the anticipation that it will be well used and often referenced. In keeping with the objective to remain relevant and timely, this model will be reviewed and revised regularly incorporating new evidence, from research and expert executive leader contributions.

RNAO's Framework for Nurse Executive Leadership

References

1. Community Health Nurses of Canada (2011).
2. Ibid.
3. Registered Nurses' Association of Ontario. (2010). Position Statement: Strengthening Client Centred Care in Hospitals. Retrieved March 18, 2012 at http://www.rnao.org/Storage/66/6056_RNAO_Client_Centred_Care_Position_in_Hospitals_FIN_AL_Feb_18_2010.pdf
4. Registered Nurses' Association of Ontario. (2010). Position Statement: Strengthening Client Centred Care in Long-Term Care. Retrieved March 18, 2012 at http://www.rnao.org/Storage/73/6791_LTC_client_centred_care_PS_-_Sept_24_final_version.pdf
5. Registered Nurses' Association of Ontario (2011). Position Statement: Strengthening Client Centred Care in Home Care. Retrieved March 18, 2012 at http://www.rnao.org/Storage/77/7150_Position_Statement_Strengthening_Client_Centred_Care_in_Home_Care.pdf
6. Registered Nurses' Association of Ontario. (2006). Best Practice Guideline: Client-Centred Care. Retrieved March 18, 2012 at http://www.rnao.org/Storage/15/932_BPG_CCCare_Rev06.pdf
7. Registered Nurses' Association of Ontario. (2006). Best Practice Guideline: Client-Centred Care. Retrieved April 12, 2012 at http://www.rnao.org/Storage/15/932_BPG_CCCare_Rev06.pdf
8. Kunkel, S., Rosenqvist, U. & Westerling, R. (2007). The structure of quality systems is important to the process and outcome, an empirical study of 386 hospital departments in Sweden. *BioMed Central Health Services Research*, 7:104. Open Source. Retrieved March 18, 2012 at <http://www.biomedcentral.com/content/pdf/14726963-7-104.pdf>
9. Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park, CA: Addison-Wesley.