

INSIGHTS

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Competencies for Leadership

Peggy Sellers Benson, MSN, RN, MSHA, NE-BC

In my more than four decades in the nursing profession, healthcare administration, and now, as EO of the ABN, I have seen tremendous evolution in healthcare delivery. and professional development has always been crucial to maintaining the quality of nursing care. But now, more than ever, we, the leaders of our profession, must invest in the future of nursing in Alabama and throughout the US. This means growing a new generation of leaders, to bear the Nightingale Lamp and maintain the standards to which nurses have held themselves for as long as the sick and suffering have needed gentle hands to heal them.

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Leadership Competencies

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As we work together to meet the challenges of the 21st Century, the ABN Leadership Institute (LI) offers a comprehensive, high-quality curriculum for developing professionals into leaders at all levels of nursing. The LI is based on six leadership competencies synthesized from the results of queries and surveys of nurses and administrators, as well as existing literature from the American Nurses Association and the American Organization of Nurse Executives:

Effective Communication

Effective leaders are able to communicate effectively in any format, whether written, verbal, or electronic. This includes, among other things, the ability to communicate negative information, to offer feedback constructively, to embrace diversity of thought, and to recognize and modify their own styles of communication to communicate with specific audiences.

Conflict Resolution

Leaders demonstrate the ability to resolve disagreement among frontline staff, as well as both administrative equals and organizational leadership. This requires a leader who is able to identify the stages of and take action to prevent conflict, to apply discipline within a Just Culture framework, and to mitigate conflict among professionals and within a group or team.

Proficiency in Nursing Regulation

Strong leadership requires understanding of regulatory form and structure, as well as the effects of regulation on professional practice. In a nursing context, leaders demonstrate understanding of the principles of delegation, skill determination and competency evaluation, and the standardized procedure process in compliance with the Nurse Practice Act and the Alabama Administrative Code. They are conversant with legal and discipline issue consistent with the comprehensive regulatory framework.

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Leadership Competencies

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Collaboration

Management of relationships, either as a contributing member or as the leader of a team, is essential to leadership. Leaders exemplify the ability to manage team dynamics, apply emotional intelligence to relationship management, and recognize necessary qualities for effective coaching and fostering effective collaboration.

Critical Thinking

Analyzing problems and synthesizing information from diverse sources to achieve a proposed outcome is another key competency in a leader. This includes the ability to think critically and make quick but reasoned decisions in high stakes situations, as well as to identify and address ethical challenges, to demonstrate ethical and moral courage, and to identify various strategies for risk mitigation.

Innovative Leadership

Finally, leaders drive workplace transformation, managing change and guiding organizational projects. They identify areas in need of change, resources necessary for change, and potential issues in planning for seamless transitions. Leaders are able to develop, implement, and evaluate action plans, identify strategies and leadership roles for change, and foster a culture of excellence that encourages buy-in and contributes to a positive dynamic for change.

The ABN Leadership Institute is structured according to an innovative paradigm designed to develop these competencies at every level of the profession, from the Individual through the Team and, ultimately, Organizational tiers of leadership. The LI Individual and Team tiers officially launched in January of this year, while the development continues for the Organizational tier, with an anticipated launch date later in 2022. Further information, as well

as resources and access to the LI Course Catalog, is available at: www.abn.alabama.gov/leadership-institute/.

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ABN Speaker Bureau Available for Live and Virtual Presentations

The Alabama Board of Nursing maintains an active and engaged Speaker Bureau to ensure that licensees and the public are informed on a variety of issues, including practice, discipline, regulation, substance use disorders and interventions, and mental health and wellness among healthcare workers. Our professional staff will be happy to arrange a presentation for your facility, education program, or organization. We maintain pre-prepared presentations, but may be able to address a specific issue or concern, provided adequate lead time for research and approval. For further information or to request a presentation, please visit the [Speaker Bureau](#) on the ABN website.



SAVE THE DATE!
THURSDAY, JUNE 2ND, 2022

**ABN LEADERSHIP CONFERENCE
RENAISSANCE BIRMINGHAM - ROSS BRIDGE**

ATTENDANCE IS LIMITED! FIRST COME, FIRST SERVE.





An Invitation for Individualized Professional Development

LaDonna M. Patton, MSN, RN, CEN, FRE

Recently, I read an article about how geriatric guideline implementation remains unrealistic in most Emergency Departments. This is an example of care that is provided to a population of patients not meeting best practices and guidelines as recommended by several major organizations (Splete, 2022). Reading this Medscape article, I began to consider such a scenario:

An 83-year-old female is admitted to the Emergency Department (ED) via ambulance from the long-term care (LTC) facility where she resides. The resident fell in the hallway returning to her room after lunch in the common area. She sustained a head laceration, and she is on anti-coagulant therapy. Following a complete work-up and closure of the wound in the ED, she is admitted to the medical unit. After about 18 hours, she experiences a decreased level of consciousness and requires transfer to the Intensive Care Unit (ICU). After three weeks in the hospital, the patient recovers and is transferred to rehabilitation at the LTC facility where she resides. Following completion of her period of rehabilitation, she returns to her previous room in the LTC.

Then I began to contemplate the various levels of care and provider types that this patient would encounter during her hospitalization and transfer to the LTC facility. Consider all of the LTC nurses, ED nurses, med-surg nurses, ICU nurses, discharge planning nurses and social workers, nursing assistants, radiology techs, physical therapists, dietary staff, housekeeping staff, and physicians this patient would see in her three weeks of care outside her usual LTC facility. Where might care be missed, or opportunities to improve care be identified and implemented?

The nurses who are involved in patient care situations and who engage in daily problem-solving while providing care are the best people to educate others. So, if you are willing to share your expertise on a patient care or leadership subject that is important to you, I challenge you to embrace this opportunity to engage in individual professional development and create educational content for nurses.





Invitation

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If you would like to help others grow, the ABN invites you to research your topic and develop your content. If you choose to pursue this, here's what the ABN can do for you:

1. Develop your content into an online CE module, providing you authorship credit which you can use on your resume'.
2. Award CE to you, as the developer of the CE content.
3. Consider your content for inclusion on a future ABN Workshop or Conference Agenda with you as the presenter. (This is also a great opportunity for Leadership Development.)

For further information, please email anrc@abn.alabama.gov.

REFERENCES

1. American College of Emergency Physicians, The American Geriatrics Society, Emergency Nurses Association, and the Society for Academic Emergency Medicine. (2014). Geriatric emergency department guidelines [Policy Statement]. *Annals of Emergency Medicine*, 63(5), 7-25. <https://doi.org/10.1016/j.annemergmed.2014.02.008>
2. Splete, H. (2022, March 3). Geriatric guideline implementation remains unrealistic in most EDs. *Medscape*. https://www.medscape.com/viewarticle/969623?spon=24&uac=149620DX&impID=4073233&sso=true&faf=1&src=WNL_mdpls_220308_mscpedit_nurs#vp_1&impID=4073233&sso=true&faf=1&src=WNL_mdpls_220308_mscpedit_nurs#vp_1

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