

Crisis looms in nursing leadership

Institute offers intensive courses

Former VP of nursing was inspiration

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Leadership can spring from the most unexpected source.

That's the opinion of the creator of a unique school now moulding the next generation of nursing managers.

"Leadership doesn't have to come from somebody with a title," Beverly Simpson says.

"A staff nurse can be a leader by noticing that the lunch trays are getting picked up late, or that a better policy is needed on how to manage families."

Four years ago, Simpson helped establish the Dorothy M. Wylie Nursing Leadership Institute.

It began as an intensive six-day summer course and follow-up weekend, to develop leadership skills among nursing professionals at various stages of their careers.

Now it is run twice a year to capacity — 88 participants per session — and has begun to ease the looming crisis in nursing leadership across the country.

"For me, it was a personal rejuvenation," says Linda Goldsmith, vice-president of programs and clinical services of the three-hospital Chatham-Kent Health Alliance.

She attended the inaugural course and has sent staff members to every session since.

"I realized how important it is to invest in leadership," Goldsmith says, "because you can't make changes without strong leaders who are committed to a direction that will better the profession, the organization, and ultimately the patients' care."

From the late 1980s and throughout

the 1990s, Simpson says, nursing management positions were being cut drastically, along with general reductions in hospital staff.

A manager running a 35-bed unit and 50 staff nurses was either laid off, or suddenly put in charge of 150 employees.

Now managers with solid experience are usually older than 50, in many cases not far from retirement.

Worse, anybody potentially interested in a management job faces the daunting prospect of leaping from bedside nurse to boss of 150.

"I was noticing that there were many nurses in staff roles and even manager roles who weren't taking the next step on the career ladder," says Simpson, a former nurse in Montreal and Toronto turned consultant and facilitator to the health professions.

"They didn't feel ready," she says. "They didn't feel they wanted more responsibility without more clarity about the job and more tools to do it well."

With two colleagues, Judith Skelton Green and Julia Scott, Simpson began to explore the idea of establishing a leadership institute.

They took as their inspiration Dorothy Wylie, a former vice-president of nursing at Toronto General Hospital and, until recently, editor of the *Canadian Journal Of Nursing Leadership*.

"It's hard to be a leader today because of the rate of change and the emphasis on cost-cutting," Wylie told her own publication in a retirement interview last year.

"Nurse managers are managing huge numbers of people," Wylie said.

"They don't have the mentors they need and consequently the staff nurses don't either."

Simpson's research led to the book the institute now uses as its teaching model — *The Leadership Challenge: How To Get Extraordinary Things Done In Organizations*, by Jim Kouzes and



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Consultants (facilitators) at the Dorothy M. Wylie Nursing Leadership Institute are, clockwise from left, Julia Scott, Judith Skelton Green, Beverly Simpson, retired nurse leader Dorothy Wylie and Linda O'Brien-Pallas, a professor at U of T.

Barry Posner of Santa Clara University in California.

It outlines a framework of five leadership principles and a detailed questionnaire than helps evaluate where an individual stands in relation to all five. Anybody can benefit, whether in a management position or not.

The essential principles are: challenging accepted ways of doing things; building a common long-term vision; becoming a role model for others; engaging with staff in a way that encourages them to support each other and learn new things; and treating fellow employees as whole people, taking into account outside stresses in their lives.

"Leading people is quite different from managing people," Simpson says. "We found we needed to push deeper into what is leadership and how do you develop it, and what is its application to health care?"

With her colleagues, Simpson access-

ed core funding from the provincial health ministry, established an affiliation with the University of Toronto's Faculty of Nursing, and secured meeting rooms and accommodation at the Bank of Montreal Learning Centre in Scarborough.

Sessions are intense, she says. Aside from attending lectures and workshops, participants bring special projects to work on.

Participants arrive in pairs, or sometimes in teams, with more experienced managers mentoring less experienced ones or rank neophytes.

"The projects are about changing something because changing it is going to make it better or more up to date,"

Simpson says.

Success stories abound.

One pair came up with a fresh approach to nurse recruitment and retention. Another found a way to merge two units so that they were better run at less cost.

One pair from the emergency department of Burlington's Joseph Brant Memorial Hospital worked out a more compassionate way to handle visitors during a contagious disease outbreak such as SARS.

"They had never done anything like this before," Simpson says.

This summer, the two are booked to give a paper on their solution at a conference in Ireland.