AMERICAN UNIVERSITY OF BEIRUT

DEVELOPING A LEADERSHIP PROGRAM FOR NURSE MANAGERS

by SARA M. TBAILY

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AMERICAN UNIVERSITY OF BEIRUT

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AN ABSTRACT OF THE PROJECT OF

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Title: Developing a Leadership Program for Nurse Managers.

Healthcare organizations are difficult to manage, especially when different logics and value systems are at play. Leadership and management are of importance when aiming at ensuring high quality patient care, employee satisfaction and overall organizational effectiveness. This is particularly so for frontline nurse managers (NM); they are the key interface between care, cure and managerial control. In working to improve our nurses' retention and satisfaction, leadership is our most important channel. It is the engine that pulls the train.

This project proposes a leadership and management development program designed primarily for middle level managers to prepare them for their roles as effective leaders and managers. The program focuses on nursing leadership in daily work. Having insight in the strategic and clinical role a nurse leader plays in healthcare is of great value nowadays. With a combination of class sessions, unit activities, and role play, this program will augment the potential of the participants as nurse leaders and give them the opportunity to gain competence in effectively leading and managing teams of patient care units.

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Chapter I

INTRODUCTION

A. Introduction to Leadership Programs in Nursing

Looking at the history of nursing it is noted that Florence Nightingale was able to demonstrate exceptional leadership under very difficult conditions. She was able to provide patient care, reduce death rates, control infections, improve processes, collect statistics, implement systems, improve quality, initiate cost control, improve documentation and train nurses. As a result, Florence Nightingale was able to influence policy at a very high level by writing, lobbying and being politically active. In essence, she was a nurse leader living at a time when women lacked social equality and she was able to change the way the world thought about and delivered health care. In that sense, leadership skills are vital when managing issues of nursing and patient care (Stanley & Sherratt, 2010).

Healthcare organizations are difficult to manage, especially when different logics and value systems are at play. Leadership and management are of importance when aiming at ensuring high quality patient care, employee satisfaction and overall organizational effectiveness. This is particularly so for frontline nurse managers (NM); they are the key interface between care, cure and managerial control. In working to improve our nurses' retention and satisfaction, leadership is our most important channel. It is the engine that pulls the train (Martin, Mccormack, Fitzsimons, & Spirig, 2012).

In their role, NM are responsible for the management of people and resources. A well-managed budget and staff eventually impact the financial and quality status of the hospitals . However, NM cannot practice these business skills and perform well without receiving the

proper training that they need to meet their job responsibilities and even beyond (Martin, Mccormack, Fitzsimons, & Spirig, 2012).

B. Background of Nursing Leadership Programs

Despite the significance of the responsibilities of their units, NM are often not well prepared to manage the unit's operations and lead their staff as they are prepared for the clinical activities. There are leadership and management skills that are of critical importance to develop this role. These skills are a set of competencies that are gained through professional development training required for nursing management positions. Some nurse executives value the acquisition of a master's degree as essential for a NM performance. A study showed that strategies nurse executives may employ to develop NM business knowledge include traditional undergraduate and graduate degree programs, online programs, certificate programs, continuing education, inservice education offerings, seminars, and mentoring activities (Kleinman, C. 2003).

There is not any evidence that selection for the NM position and their development afterwards are being carried out in any strategic way. While succession planning is becoming common and taken seriously in the corporate world, it has received little attention in the nursing literature, and is relatively still an unknown concept in many health care institutions. Preparation to handle a NM position or succession planning is to simply place the best and most qualified employees in key positions. this in order to lower staff turnover rates, improve staff morale, enhance organizational performance, facilitate early adaptation to change, and develop leadership competencies (Duffield, & Franks, 2001).

Despite strong support from the literature, mentoring of nurse managers, a key part of succession planning is uncommon among nurses worldwide. There is little formal preparation for

the transition and development of clinical nurses into management positions. To start with, many NM lack appropriate educational qualifications to do their jobs effectively. Many of today's NM are appointed on the basis of clinical expertise and credibility rather than for their management and leadership potential. Adding to this lack of educational preparation is the fact that the transition from clinical nurse to NM is recognized to be traumatic and challenging. There are many reasons for this, not the least of which is the change from working with staff as colleagues to managing them (Duffield, & Franks, 2001).

In the USA, academics and health care executives want future NMs to be prepared at the master's level or above. In particular, joint degrees in clinical and management disciplines are favored, although this is still not a requirement for entry to management. They believe (Duffield, & Franks, 2001).

ANCC describes the NM as a leader with a Bachelor degree in nursing with a preferred master's degree in nursing management. The NM is someone who can handle full accountability for the overall supervision of registered nurses and other healthcare providers in any patient setting. He/she is typically responsible for recruitment and retention, performance reviews of staff, and professional development and should be involved in the budget formulation and quality outcomes; and helps to plan for, organize and lead the delivery of nursing care for a designated patient care area (ANCC, 2104).

In Lebanon, the nursing profession has a dual burden of nursing shortage and poor work environments and together they threaten the quality of patient. Lebanese nurses are lacking organizational support and career development (El-Jardali, et al., 2011).

In fact, the core of career development is proper continuing nursing education through training, education and mentoring (El-Jardali, et al., 2011).

C. Program Significance

NMs have the critical role in transforming healthcare and driving it into advanced quality in terms of work practices and reform. Nurses are visionary, creative, involved in decision making at patient level and have the communication strategies that the healthcare sector needs (McSherry et al., 2012).

Some of the nursing education programs in Lebanon cover the fundamentals or basics of nursing management and leadership at the senior level in their undergraduate program; a few cover the concepts and their practice in their graduate programs. Moreover, the complexity of healthcare needs and their challenges necessitates nurses to be adequately and competently prepared in leading and managing healthcare outcomes effectively. It is time to develop creative leadership. In other words, as health care administrators, hospital administrations should improve the capacity of nurse leaders to think and act beyond the boundaries limiting their potential in order to avoid professional derailment or faltering career moves. It is leaders who make things happen. It is leaders who have a vision, take initiative, make proposals, influence people, organize logistics, solve problems, follow up, and most of all, take responsibility. That is why leadership development should be a central activity for any leader (Hanson, & Ford, 2011).

Lebanon is facing a serious problem in nurses' drain and migration searching for better opportunities outside Lebanon, mostly in gulf countries and North America. In addition to the financial reasons behind this migration, there are other factors related to work environment, dissatisfaction with the relationship with their NMs, in addition to lack of autonomy and development (El-Jardali et al., 2008).

Clearly, NMs from their side need to be mentored and educated about the skills and the leadership experience to create better working relationships and healthier environments (El-Jardali et al., 2008).

D. Program Purpose

This project proposes a leadership and management development program designed primarily for middle level managers to prepare them to their roles as effective leaders and managers.

The program focuses on nursing leadership in daily work. Having insight in the strategic and clinical role a nurse leader plays in healthcare is of great value nowadays. With a combination of class sessions, unit activities, and role play, this program will augment the potential of the participants as nurse leaders and give them the opportunity to gain competence in effectively leading and managing teams of patient care units.

Chapter II

LITERATURE REVIEW

In this section, the literature review of nursing leadership styles and programs will be addressed. The first section will cover current practices and then address the extended role of NMs in today's healthcare organizations. The last section will describe some international programs available in nursing leadership and education expressing the need to have similar initiatives at the local and regional levels.

Today, leadership positions in nursing are among the most challenging, with multiple units and large numbers of employees to supervise, manage and lead. Studies show there is a link between the quality of nursing professional leadership and good patient care and the recruitment and retention of nursing staff (Sellgren, 2006).

A. Nursing Leadership and the Work Environment

Leadership in general is defined as a process of one person influencing others toward goal attainment; nurses are leaders when they influence others toward achievement of goals (Kelly, 2008). Leadership in health care has been defined as the use of individual traits and personal power to interact constructively with patients experiencing clinical problems for which there are no standard solutions to guide health care providers in strategic development to resolve these problems. However, for NMs, these interactions extend beyond encounters with patients to include interactions with colleagues, peers, supervisors, subordinates, and all other members involved in the health care delivery process (Lewis, 2011).

Several international studies have investigated the reasons why nurses leave work and how this turn over negatively affects patients outcomes and quality of care delivered. These studies found that the desire for professional development and the lack of respect and recognition by society were key factors behind this nurses' drain. As for the work environment and the sense of belonging, nurses report that cultural factors and positive atmosphere within a health organization such as acknowledging and valuing nurses' contribution, and maintaining good relationships and workforce cohesion enhance their satisfaction and their overall relationship with their NM .However, in relevance to the leadership and management development factors which are the focus of this project, a huge number of bedside nurses leave due to dissatisfaction with the supervisor's leadership and management styles, inflexible schedules, and desire to work in a different field where they can be better appreciated. Emphasizing the importance of leadership style effect on satisfaction and innovation, Cook in 1999 identified transformational leadership as a key to develop from a traditional hierarchical structure which was aligned with the transactional model that was operating within nursing at that time, to a model promoting an innovative spirit (Fleming, 2013).

The managerial and leadership skills and positive communication of nurse managers are predictors of unit effectiveness and are of great significant predictors of staff perceptions of unit quality. NMs need to be aware of the importance of leadership skills and communication related to overall unit functioning, perceptions of quality, and job satisfaction. In fact, job satisfaction has an impact on patients. Nurses who are less satisfied may negatively impact patient satisfaction. In other words, nurse managers impact staff outcomes and eventually patient outcomes (Lewis, 2011).

The current way of some NMs in leading within the nursing profession may be contributing to poor job satisfaction outcomes for nursing staff. In many cases, nurses are not well prepared to handle the role and be effective (Fleming, 2013).

In the body of literature, leadership styles that focus on relationships consistently demonstrated an association with an increase in nurses' job satisfaction and other positive nursing outcomes. The job satisfaction factors that have been addressed in most studies conducted around that topic include: leader's vision, visibility and accessibility, empowerment, manager's support, decision making abilities, team cohesion, workloads, autonomy, transformational leadership, peer support, recognition and valuing nursing work (Fleming, 2013).

A study by Gifford et al. in 2006 indicated that NMs in their role, to increase staff satisfaction, should facilitate the use of guidelines by providing support to their staff, being accessible and visible for them and communicate adequately. Leadership support was described as encouraging staff and creating opportunities for education in addition to addressing individual concerns (Fleming, 2013).

However, the role of the NM has evolved significantly and has expanded beyond the basic leadership competencies. This evolvement is response to changes in the health care system. Today, nurse managers are not responsible for the clinical coordination of nursing care within the wards, but also they are also responsible for the operation of their units from a business perspective within hospitals. Unfortunately, NMs are often less well prepared to manage these business responsibilities, than they are to manage their clinical responsibilities (Fleming, 2013).

B. Competencies of Effective Nursing Management and Leadership

To be effective in the NM role, a range of business and operational competencies are required. Although these competencies are not directly addressed within the job satisfaction and leadership literature but they affect the performance, the judgment, the way nurse managers deal with their staff and eventually the patient and hospital outcomes (Fleming, 2013).

As a leader responsible for operating the business units of hospitals, NMs need to be competent in finance, human resource and operational management. The changed nature of health care requires NMs to manage the day-to-day operations of their units, contain costs, build productive work teams, maintain quality care and satisfy both patients' and staff's needs (Fleming, 2013).

Financial competencies:

The health care context had changed dramatically during the last decade to have an increased focus on fiscal responsibilities and budgets. Researchers in the latest studies identified frontline NMs as carrying broader responsibilities within the whole health care organization than those described in earlier studies. Participants in one study nominated business administration and financial management in the top five subjects for NMs competencies (Fleming, 2013).

Financial responsibilities of a NM is to ensure the unit's expenses fall within its budget, sharing financial expectations with unit staff so staff members are aware of the unit's financial conditions. They plan and ensure that operating and physical plant costs are met; they make sure that staff members have access to the equipment and supplies they need to care for their patients and complete their interventions. When financial resources are limited, NMs should be creative and come up with solutions that satisfy the needs of their staff and do not compromise patient care (Fleming, 2013).

Human resource and operational competencies:

Literature of nursing leadership and management in the last two decades considered the NM role to be central in managing staff and staff relationships. NMs are required to have expertise in dealing with difficult people, conflict management between staff, developing a learning environment, disciplinary processes, managing staff schedules and leaves, support the efforts of the team by helping the them develop a way for work to be completed within available staffing resources, priority setting, recruitment, and selection of new hires (Fleming, 2013).

In a study by Scoble and Russell's in 2003, human resource management were included in the top five competencies required for NM's education in 2020 (Fleming, 2013).

In another study, unit nurses perceived appropriate support from nurse their NMs as sharing information, encouraging staff to have influence on their organization and on its policies, and assisting them to receive recognition for their nursing work (Fleming, 2013).

C. Programs Available For Continuing Nursing Education in Management and Leadership

Many programs around the world target nurse managers and other nurse leaders to help them achieve their highest potential and be competent in their roles. These programs are based on educational activities to lead change and advance health outcomes.

The American Nurses Association (ANA) Leadership Institute recently launched a program consisting of a three-day workshop tackling various leadership concepts, staff management, conflict resolution and communication skills, and then an ongoing development program in partnership with The Ohio State University College of Nursing. The program provides leadership enhancements opportunities through online resources that focus on the following individual nurse leadership competencies: professional success, patient care environments, and personal development (ANA, 2014).

In Australia, University of New England (UNE), in conjunction with the Australian Medicare Local Alliance, has developed the Nurse Leadership Program. This program is designed for NMs who have responsibilities and contribute to the management of people and resources. It runs over a twelve-month period and is delivered to individuals via distance education. It focuses on the development of personal skills, effective team management, projects management and operations planning. The program is based on action learning and a workplace orientated approach via distant learning computer based power point and video sessions, with an intention of applying learning outcomes in the workplace (unep, 2014).

In Europe, specifically in Netherlands, Nursing Management and Clinical Leadership course is taking place this year in 2014 as a small summer course. This course focuses on nursing leadership in daily work. With a combination of workshops, lab sessions, lectures, and role play, the course aims at making the NMs investigate their own potential as leaders and give them the opportunity to meet other highly motivated participants, giving a boost and drive to their practice. NMs will work closely together form different countries on topics such as professionalization, intercultural nursing, leadership and management in nursing, staff and financial management and communication (shortcoursesportal, 2014).

In Canada, a program took place last summer under the title of "Supporting & Strengthening the Skills of Registered Nurse Managers in collaboration with the Continuing Nursing Education (CNE) program of the College of Nursing, University of Saskatchewan.

During the one-day workshop, participants heard from a panel of nurse leaders around the world sharing their personal leadership journey and educating them about best practice guidelines on leadership with skills and humor. It's an inspirational workshop based on telling personal stories

of how nurse leaders challenged the status quo and led the way on a variety of challenges. The instructors went over clinical, educational, political issues, management, coaching and employees engagement strategies. After the workshop, the program provides a commitment to a full year of mentoring aimed at providing support and skill development in leadership (Muzio, 2009).

On the regional level, Abu Dhabi Corniche Hospital, UAE in December 2013 established an innovative nurse leadership program that was addressed to NMs in the United Arab Emirates in affiliation with Johns Hopkins Medicine International. This initiative aimed at allowing current nurse leaders or those who are being trained to become managers to build on their strengths for future challenges. It is a one week program that was offered to 32 attendees from all nursing departments in the hospital system and delivered by three Johns Hopkins nurse experts from Baltimore, USA. The content included employee engagement, performance management, staff development, goal setting, service excellence, patient satisfaction, problem solving and team work. Instructors and managers discussed how to foster an environment conducive to a culture of improved patient outcomes, quality improvement, and studied staff recruitment and retention (Corniche Hospital, 2013).

On the national level, several workshops were offered at Lebanese hospitals to NMs;

However, these workshops are rather be classified as offerings more than programs for they lack the element of continuity and follow up.

D. Literature Review of the Outcomes of Continuing Nursing Education Programs

Needs assessment is one of the critical phases when planning for a training program for it is the milestone on which the content and the methods are set. In one of the big studies in Victoria, Australia, the total nursing population was surveyed and assessment results showed a strong need for management education among M,s in that region. Results of that study confirmed that educational programs in management for nurse leaders are viewed as a high priority for the professional development of the participants and their subordinates; it fostered an atmosphere of team work and professionalism and decreased perception of fatigue (Sellers, 1996).

In a study by Thompson in 2006, outcomes came out to reveal that there is evidence that nurse management training programs impact various outcomes like nursing staffs' turnover and retention. The leadership skills that nurse managers acquired in the program had a significant positive correlation with job satisfaction of nurses and their relationship with the manager. Findings of this study encourage the adoption of a leadership style based on training and consultancy programs to help create better nursing environments (Thompson, 2006).

A study in New Jersey showed that training programs for NMs foster higher levels of commitment and improved retention rates of nurses. The leadership behaviors increased perception of recognizing, participative decision making, decisive problem solving, leading by example and empowering in the evaluation of nurses managed by the participants (Lewis, 2011).

This chapter summarized the nursing working environment addressing the importance of the NMs role in the evolving healthcare world. Hospitals are looking at leadership and management programs more seriously around the globe because of their positive effect on NMs competencies and skills improvement.

Chapter III

LEADERSHIP DEVELOPMENT PROGRAM DESIGN

In this chapter, the leadership development program tailored to the needs of middle nurse managers to achieve the aim of developing nurse managers' leadership capacity is presented. This chapter is divided into several sections addressing program overview, design, the framework adopted to conduct the program, length, participants, recruitment and program outcomes, as well as data collection methods, needs assessment, relevant detailed content and indicators for each level.

A. Program description

The overall purpose of this project is to create a leadership development program for NMs. This leadership development program aims at developing the leadership capacity of Lebanese NMs; thus this program will be proposed to be offered through the Order of Nurses in Lebanon. Due to the differences in experience, needs, and seniority among NMs, the program will be designed at three different levels for emerging, developing and advanced leaders (ANA, 2013).

The program consists of a three day workshop and year-long leadership follow-up periodic meetings between participants and their mentors. The content is evidence-based and covers universal leadership and management concepts, addressing leadership issues of relevance to NMs in today's complex healthcare environments.

The program consists of three major components:

1. A three-day workshop that delivers content on core leadership and management competencies through lectures and class interactions.

- 2. A mentor-supported leadership relationship that continues over the course of a year within participants' respective organizations.
- 3. A leadership website that provides NMs with online resources, video-based presentations and discussions, chat space and lists of leadership projects and trainers' contact information.

B. Theoretical Framework

To address this need for leadership development, the American Organization of Nurse Executives, the Association of perioperative Registered Nurses, and the American Association of Critical Care Nurses worked collaboratively to develop a model that would identify competency domains needed by current and future nurse leaders: Nurse Manager Leadership Collaborative (NMLC) Learning Domain Framework presented in figure 1. This framework outlines key competencies needed by nurse managers in three different domains: The Leader within, the Art and the Science. The three domains in the framework provide a useful structure to plan leadership development activities that target current and future nurse leaders at the unit level. (Sherman, R., & Pross, E., 2010).

Domain One - The Leader Within: Creating the Leader in Yourself

The first domain is the Leader Within. Leadership skills begin with understanding one self and this is a critical component for leadership success. Outstanding leaders demonstrate self-confidence and they are able to trust and empower others. They know how their communication and actions impact others and are sensitive to watching the cues in an environment when things are not going well (Sherman, R., & Pross, E., 2010).

Domain Two - The Art of Leadership: Leading People

Leadership is both an art and a science. The art of leadership involves guiding team members to smoothly get over their professional and personal problems, conflicts, and communication issues and focus on working as one team rather than individually and this is a big challenge for today's leaders. Yet the need to do this is critical in healthcare environments where team synergy and interdependence are required for high quality patient care (Sherman, R., & Pross, E., 2010).

Domain Three - The Science of Leadership: Managing the Business

If nurses are unable to see the financial ramifications and costs of decisions, they will be less successful in advocating for the resources needed to successfully staff and operate units. Science of Leadership describes the competencies needed to perform the fiscal skills required from a NM. The competencies in this domain are set to help leaders develop confidence in their ability to build business knowledge and human resource management skills to run a unit (Sherman, R., & Pross, E., 2010).

Nurse Manager Leadership Partnership Learning Domain Framework



Figure 1.

C. Learning environment and length of the Program

This project is a continuing professional development (CPD) program that will run over a period of one year. CPD programs are very different than the continuing education (CE) which is teacher driven, they predominantly build on education theory and are often associated with traditional learning methods such as lectures and seminars. On the other hand CPD is a learner driven approach, tailored to individual's needs. It is a broader concept of teaching using CE but

adding broader important features like mentorship, follow up, communication and direct field application (nap, 2010).

Based on that, this program will take place over a period of one year to be able to observe the long term goals and the change in behaviors which cannot be evaluated immediately after the workshop. One year is needed to measure changes in satisfaction and leader behaviors between groups as assessed by leaders and nurses reporting to them. In addition, at least one year is needed to give room for a proper mentorship to take place. The sessions of the workshop will be designed in a way that is supportive yet challenging to the participants. NMs will be asked to work collaboratively in individual and group class assignments to enhance their ability to work as teams, integrate different skills and learn from each other.

D. Participants

All NMs of different units, different specialties and experience levels employed in Lebanon are potential participants in the program. Whether well experienced, beginners, or challenged in their leadership roles, the program is designed to develop NMs according to their needs assessment scores, and external consultant opinion. A class size is eight to ten NMs so that they all get the chance to know each other and actively participate in the different sessions. Inclusion criteria for participants include:

- 1- Direct supervision of nursing staff who deliver direct patient or client care on a daily basis.
- 2- Responsible for nursing staff employed in a defined clinical work unit within the hospital.

E. Recruiting Participants

Initially, an invitation letter would be sent by the Order of Nurses to nursing directors of 10 large-size Lebanese hospitals informing them about the program overview, objectives and content. In the invitation, the nursing directors will be asked to select three NMs with different needs and experience levels from their hospital to participate in the program, and hopefully with time, all NMs from all Lebanese hospitals will get the turn to enroll. After receiving the names from the invited hospitals, each NM will receive an envelope containing a pre-assessment questionnaire and a return envelope. All questionnaires will be analyzed so that the NMs are grouped into emerging, developing, and advanced managers. Post-assessment will be done for matching of baseline and follow up data.

F. Program learning outcomes

The objective of this program is to provide evidence based leadership training accessible to all NMs to take lead in transforming the work environment and creating an impact on staff retention and satisfaction and eventually better patient care outcomes. The strategy of this program is to shift the participants into the expertise level in all three domains of the framework (figure 1).

At the end of the program the NM will be able to:

- 1. Utilize various leadership and management tools and techniques in successful problem solving, decision-making and conflict resolution.
- 2. Set a realistic agenda to implement learned leadership and management skills in the work area.
- 3. Relate the significance of ethical practice to professional nursing.
- 4. Discuss strategies for managing change effectively.

- 5. Examine own organizational and management skills in terms of managing time efficiently to maximize productivity, meeting staff educational needs, delegating effectively, and improving own and staff performance
- 6. Organize work group toward team effort through utilizing effective communication and group skills.
- 7. Develop appropriate motivational strategies to meet needs of subordinates and institutional goals.
- 8. Develop a plan of select quality improvement initiative at a unit and service level.

G. Needs Assessment

Like any professional program, needs assessments prior to training increases the probability of successful outcomes. In fact, a proper needs assessment prior to the development of a leadership program is seen as a way to better tailor curricular content and delivery to the needs of an intended audience (Fleming, 2013).

To support the identification of real needs in an objective manner, a panel of expertise will be asked to conduct an extensive needs assessment of what NMs really lack and what competencies should be reinforced in the program. This extensive assessment will be in two levels:

- 1. A questionnaire to be completed by all nurses, all NMs and by their superiors in Lebanon. This questionnaire is a tool to evaluate the leadership behaviors, cost-effective care communication and many other attributes in a leader and manager (Appendix A).
- Conducting a focus group per hospital, seven nurses from each hospital to meet with an external consultant who will listen, collect concerns and find out the gaps to be addressed in the program.

The survey that will be used measures the skills and behaviors that are envisioned for the successful NM and it is based on the three domain model (figure 1).

3. Based on the survey results, needs expressed, data collected from the focus group, number of nurses reporting to the nurse unit manager, duration in the role, duration of managerial experience and age, NMs will be assigned to the relevant level of the program. Accordingly, three levels of the program will be provided addressing different experiences, needs, and seniority levels.

After level allocation, NMs will receive a detailed invitation for the workshop, the agenda, content, speakers and venue.

H. Program Content

Content for each level is designed according to expected outcomes based on leadership development competencies for different stages of a career trajectory. The three leadership levels of nurse managers will be: Emerging, Developing and Advanced. Additionally, this development program is designed specifically to address career factors that impact career success. These factors include the depth to manage outside of one's current function, building and leading a team, developing good working relationships with others, changing or adapting to change, following up on promises or completing a job (ANA, 2013).

The full competency clusters of all the three levels of NMs and leaders are organized by three distinct domains: Leading Yourself, Leading Others, and Leading the Hospital. These three domains contain specific competencies for career advancement for the NM (ANA, 2013).

The workshop content agenda along with the expected short term and intermediate term objectives for each level are described in appendices (B, C, and D).

Chapter IV

BUSINESS PLAN, EVALUATION, CONCLUSION AND LIMITATIONS

In this chapter, the business plan for the program is addressed including the financial planning, human resources, marketing ideas and program objectives. Finally, the measurement tools and evaluation methods to test the effectiveness of the program looking at different indicators and at the leadership behavioral changes in NMs at periodic times of the program are addressed. In this section, an evaluation of the program itself is also proposed.

A. Business Plan

1. Statement of purpose

This project is designed to provide a leadership development program for all NMs so that they get prepared to create an impact on staff retention and satisfaction and eventually patient care outcomes. Leading staff effectively will impact the retention and satisfaction rates positively which will eventually cut off costs at different levels.

2. Financial Resources

The initial phase will start with a pilot group of 8-10 NMs for each level. At this stage, resources will be collected as funds and volunteer work. The workshop part of the program can be conducted in a conference room at the Order of Nurses premises. Hospitals will be asked to offer conference room venues for the focus groups at no expense. Catering and stationary will be covered by sponsors or by the order.

After the pilot phase, if the program posttest survey results show improvement in comparison to the pretest, then this program is a potential integration in the educational

requirements of all NMs of the Lebanese hospitals to start with and hopefully spreads to the region. At that level, participation will be charged according to acceptable ranges for similar programs and this will generate not only educational, but also financial benefit to the hospital hosting and organizing it.

Budget assumption:

A local senior consultant will be asked to do the needs assessment through meeting with the nurses of the ten focus groups from the ten hospitals selected for the pilot phase. The expected total working hours in meetings & in consolidating minutes & reports is around 30 hours.

- Consultant Transportation: \$ 500.
- NMs & RAs transportation within facilities & to the Order of Nursing: \$ 1000.
- Questionnaires prints & stationary: \$ 1500.
- Transportation for data collection: \$3500

Total of \$ 6500 will be covered by the Order of Nurses for the survey and the pilot phase.

3. Human Resources

Surveys will be analyzed by the faculty of nursing at the local universities at no expense as part of the service these universities do for professional societies and professionals. Trainers will be invited to give the sessions at no expense in the intention of sharing their expert knowledge and skills in preparing leaders in nursing. As for the program assistants, they will be different staff members from different hospitals invited via emails to volunteer in assisting in different tasks of the workshop.

4. Marketing

This service-based program can be very beneficial from the marketing aspect with its team-based approach because it decreases the educational costs in comparison to individual-based approach. For future marketing of the project, it is important to invite key opinion leaders to attend different sessions of the workshop to get them on board and get them to believe in the program so that they would recognize the importance of such a program to help their NMs become efficient leaders.

The program identifies several target market segments that will be pursued. The largest segment is NMs of hospitals based in Lebanon. Therefore, nursing directors should establish close relationships with the professors and head of departments for a larger support and sponsorship; they should also integrate it in the orientation curriculum for all assigned managers. However, as the program develops, it could be addressed to other segments of the healthcare world and content could be tailored accordingly.

5. Program Objectives

The learning objectives of each program level identified the leadership practices and business competencies that would be achieved at different intervals of the program starting with outputs, outcomes and the final impact on the individual and organizational level (appendices E, F, and G).

B. Evaluation

The evaluation results of this program will play a significant role in the sustainability and growth of the program. A positive evaluation will get the buy in of the nursing and hospital administrations to adopt the program and support it. There will be two entities for the evaluation;

the first entity is the program evaluation which will evaluate the program itself, the content, the delivery and the learning environment. The second entity is the NM's evaluation which will evaluate the program effectiveness and benefit for the nurse managers.

1. Program evaluation

Program evaluation: At the end of each session, NMs will be asked to fill an evaluation questionnaire (appendix H). The results of this questionnaire will be used to evaluate the content, the relevance and learning environment and improve them accordingly.

2. Participants evaluation

NMs evaluation: the objective of this evaluation is to test the effectiveness of the program. The summative evaluation for the three levels of the programs will be conducted using a pretest and posttest methodology, the same needs assessment tool (appendix A) will be used at three, six and 12 months of the program, and then results will be compared. In addition to the results of the survey, nurses turnover rates, nursing quality indicators reports and staff satisfaction survey results will be used to support the findings. The formative evaluation will be a qualitative observation and feedback from the trainers and the NMs on engagement, enthusiasm and participation during different sessions.

C. Conclusion

A large number of negative nursing and patient outcomes are associated with nurses' job dissatisfaction. Dissatisfied nurses are more likely to resign from their job or even leave the profession and they are more likely to perceive the care that they give to be of lesser quality.

Among all the factors that contribute to nurses' retention and to the quality patient care they provide, leadership of NMs and the relationship quality with them are well recognized as being able to influence nurses' job satisfaction, either positively or negatively. For this reason, leadership has been addressed extensively in the last decade.

The major purpose of this program is to provide effective evidence-based leadership program for NMs and hopefully later on extend and develop to benefit other categories of healthcare providers.

D. Strengths and Limitations

This program will provide distinctive contributions to hospitals in terms of knowledge and skills for nursing leadership. First, the program's content and the theoretical framework are based on a wide and evidence-based literature review and on previous leadership development programs on the national and the international levels. As for the design, the components of this program were combined with the evidence to create a diverse workshop, teaching strategies and learning environment. Practicality is strength for this program in which it is not only applied to nursing leadership but to other disciplines in healthcare as well; the fact that the project used a well described program, which outlines its content, its learning objectives and teaching strategies and a valid and reliable assessment tool means that this program could be replicated. This program could serve as credit to professional hours that should be completed by NMs to relicense their membership and eligibility to practice by the Order of Nursing.

Despite these strengths, a number of limitations need to be taken into consideration while applying and evaluating the program. To start with, asking nursing staff to evaluate their NMs may positively improve the NMs behavior and bias the results. Another limitation is the lack of

clear financial feasibility study for such a program since it is a virtual program based on assumptions and history from similar programs and not on a real one that actually took place; it is hard to predict the amount of funds and sponsorships and how feasible it is to get them. It is a challenge as well to provide trainers and speakers at no cost on different levels. As for the implementation phase, the program is expected to face resistance in the early stages and doubts in its ability to deliver what it says it would deliver. The language might be a barrier for some NMs as the program will be delivered in English or in French, but Arabic could be an option of delivery for later stages. The mentorship which is supposed to continue one year after the workshop needs commitment and follow up from both parties and it is a big challenge to have the proper trained mentors to do the job.

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APPENDICES

Appendix A

Assessment Tool:

For nurses:

Please read each statement and indicate to which extent you agree or disagree about your nurse manager according to the following scale:

- 1: Strongly disagree
- 2: Disagree
- 3: Average
- 4: Agree
- 5: Strongly agree

For nurse managers:

Please read each statement and indicate to which extent you agree or disagree about yourself according to the following scale:

- 1: Strongly disagree
- 2: Disagree
- 3: Average
- 4: Agree
- 5: Strongly agree

For nurse leaders:

Please read each statement and indicate to which extent you agree or disagree about the nurse manager under your supervision according to the following scale:

- 1: Strongly disagree
- 2: Disagree
- 3: Average
- 4: Agree
- 5: Strongly agree

The science: Managing the business

I. Financial Management

1. Understanding of healthcare economics and healthcare public	1	2	3	4	5

policies as they apply to the delivery of patient care including third party providers, current healthcare policies, and key legislative initiatives in the country.					
2. Managing unit based budgeting that includes creating, monitoring, analyzing, and reporting on budget, in addition to planning of budget revenue forecasting, expense forecasting and interpretation of financial reports.	1	2	3	4	5
3. Concepts of capital budgeting that include financial planning for capital equipment and knowledge of key financial concepts such as depreciation, ROI (Return on Investment), ROA (Return on Asset) and cost-benefit analysis.	1	2	3	4	5

II. Human Resource management

1. Recruitment techniques which includes an understanding of institution's recruitment strategies and initiatives, various alternatives, competition, and marketing.	1	2	3	4	5
2. Interviewing techniques which Includes individual and team interviewing, skills in detecting key success criteria for selection and retention programs.	1	2	3	4	5
3. Labor laws pertaining to hiring which includes practice laws, compensation structures, leaves and appraisals.	1	2	3	4	5
4. Hiring policies and procedures from the facility HR department like identification of key skills and attributes for each role and ability to implement changes in roles based on changing department and health care environment needs.	1	2	3	4	5
5. Orientation of new employees which includes development and	1	2	3	4	5

implementation of appropriate plans for each employee.	

III. Professional development

1. Knowledge of quality improvement and quality management tools and indicators.	1	2	3	4	5	
2. Patient safety which includes sentinel event monitoring and reporting root cause analysis, accreditation requirements, incident reporting, medication safety policy and procedures.	1	2	3	4	5	
3. Workplace safety which includes knowledge of regulatory requirements.	1	2	3	4	5	
4. Promoting and facilitating intradepartmental and interdepartmental communication.	1	2	3	4	5	

IV. Foundational thinking skills

1. Systems thinking knowledge as an approach to analysis and decision	1	2	3	4	5	
making.						
2. Adaptation to complex definitions and applications in the system.	1	2	3	4	5	
3. Understanding organization behaviors which include planning and integration in the strategic vision.	1	2	3	4	5	
4. Influencing nursing practice: self-awareness, dialogue, conflict resolution and navigating change.	1	2	3	4	5	
5. Decision making skills.	1	2	3	4	5	
6. Problem solving skills which includes emotional intelligence and fairness.	1	2	3	4	5	

V. Technology

1. Basic computer skills which include word processing and data	1	2	3	4	5
management, internet and email skills to access information.					
2. Information to shool a several in already on an denoted diagraphic of its officet	1		2		<i>E</i>
2. Information technology which includes an understanding of its effect	1	2	3	4	3
of on patient care systems to reduce work load.					
3. Ability to integrate technology into patient care processes to support	1	2	3	4	5
business decisions.					

VI. Strategic management

1. Project management which includes understanding of roles, resource utilization and the ability to develop a project plan.	1	2	3	4	5
2. Business plan development which includes the ability to create a business plan for specific unit or hospital projects.	1	2	3	4	5
3. Presentation skills: a. Written: including reports, program descriptions,	1	2	3	4	5
evaluations, and reports. b. Oral: includes educational presentations, project presentations,	1	2	3	4	5
and media and meetings skills. c. Persuasion skills which nuclide influencing selling	1	2	3	4	5
skills. 4. Developing strategic plans in various methods.	1	2	3	4	5
5. Developing operational plans which include strategies to support and move the unit to accomplish a strategic plan.	1	2	3	4	5

VII. Clinical practice knowledge

Ī	1. Based on organizational requirements, the nurse manager should	1	2	3	4	5	
	have the clinical knowledge pertinent to the unit of charge.						

The Art: Leading the people

I. Human resource leadership skills

1. Performance management which includes staff annual evaluation, goals setting, continual performance development, periodic conversations and evaluations, corrective action and disciplinary processes, and termination.	1	2	3	4	5
2. Staff development which includes staff education, needs assessment, education programming, competency assessment, and talent development.	1	2	3	4	5
3. Succession planning which includes developing leadership capacity of staff aiming at preparing them to handle stretched responsibilities.	1	2	3	4	5
4. Coaching and guiding skills which include demonstrating behaviors and role modeling.	1	2	3	4	5
5. Mentoring which includes modeling behaviors of leadership, advising, facilitating and developing staff as mentors.	1	2	3	4	5

II. Relationship management and influencing behaviors

Communication skills which includes active listening, feedback, questioning and validation.	1	2	3	4	5
2. Emotional intelligence which includes how well nurse managers know themselves and how they relate effectively with their environment.	1	2	3	4	5
3. Self-awareness which is the understanding of one's own values, beliefs, and attitudes and how they affect one's own responses and behaviors.	1	2	3	4	5
4. Effective use of dialogue that is the understanding and practicing the process to encourage the free flow of ideas within groups to discover insights and aim for a common understanding.	1	2	3	4	5

5. Team dynamics that include understanding the functions of group process both in nursing and multidisciplinary groups.	1	2	3	4	5	
6. Collaborative practice that includes trust, respect and good communication among colleagues.	1	2	3	4	5	
7. Conflict management that is the understanding of the process to work through opposing views in order to reach a common goal.	1	2	3	4	5	
8. Negotiation that includes using of conflict resolution techniques to maintain collaboration. (This skill is based on isolating the facts, asking clarifying questions, and interpreting of verbal and body language to reach a common ground).	1	2	3	4	5	

III. Diversity

1. Cultural competence that includes understanding the components of cultural competence and apply to the workforce to make everyone feel acceptance.	1	2	3	4	5
2. Social justice that includes maintaining an environment of fairness and equity within staff.	1	2	3	4	5
3. Generational diversity which is the ability to capitalize on differences to promote highly effective work groups.	1	2	3	4	5

IV. Shared decision making

1. Includes understanding the structure, reporting channels and processes of shared governance.	1	2	3	4	5
2. Implementation of shared decision making structures and processes on the unit through opinion sharing and open door policy of exchange ideas.	1	2	3	4	5

The leader within: Creating the leader in yourself

I. Personal and professional accountability

1. Personal growth & development which includes continuing education,		2	3	4	5
career planning, and periodic self-assessment to set action plans.					
2. Ethical behavior and practice that is the support of nursing standards	1	2	3	4	5
and scopes of practice.					
3. Professional association involvement that is membership and	1	2	3	4	5
involvement in an appropriate professional association to facilitate					
networking and professional development.					
4. Certification that is achieving certification in an appropriate	1	2	3	4	5
specialized field.					

II. Career planning

1.Understanding the current job description and requirements and 1 2		2	3	4	5
comparing them to current level of practice					
2. Knowing the future of the profession and planning where to go in			3	4	5
one's career and what is needed to get there.					
3. Positioning oneself which is the development of a career path that	1	2	3	4	5
provides direction while offering flexibility and capacity to adapt to					
	1				
future scenarios.					

III. Personal journey disciplines

1. Shared leadership and council management which includes knowledge and skills in managing councils that promote shared leadership.	1	2	3	4	5	
2. Reflective practice which includes knowledge of reflection on one's	1	2	3	4	5	
own and others' behaviors to promote development and insight.						

IV. Optimizing the leader within

1. Holding the truth that is the presence of integrity as a key value of	1	2	3	4	5
leadership.					
2. Diversity as a vehicle to wholeness which is the appreciation of	1	2	3	4	5

diversity in all its forms: religion, race, gender, sexual orientation,					
generational, and differences of all kinds.					
3. Holding multiple perspectives without judgment by creating space so	1	2	3	4	5
that multiple perspectives are listened to before decisions are taken.					
4. Discovery of potential in the ability to search for and find the potential	1	2	3	4	5
in ourselves and in others.					
5. Quest for adventure towards knowing and creating a constant state of	1	2	3	4	5
learning for the self as and for the organization.					
6. Knowing something of life which is the use of reflective learning and	1	2	3	4	5
the translation of that learning to the work at hand.					
7. Nurturing the intellectual and emotional self by constantly increasing	1	2	3	4	5
one's knowledge of the world and the development of the emotional self.					
8. Keeping commitments to one by creating the balance that regenerates	1	2	3	4	5
and renews the spirit and body so that it can continue to grow.					

Appendix B

Level 1: Workshop agenda for Emerging Leaders

Day 1: leading others

Duration	Description	speaker
8:00 am- 9:30 am	The art of effective communication: This session will target the basics of effective verbal and written communication skills, politeness and assertiveness in disseminating information and the art of influencing resistant opinions.	Professor of adult psychology
9:30 am- 11am	Conflict management: This session will target the basics of conflict management, fair judgment, confrontation and negotiation properly when dealing with individuals and groups.	Psychiatry Advanced Practice Nurse
11:00 am-11:30 am	Coffee Break.	
11:30am-2:00 pm:	develop your nurses: This session targets the role of the manager in attracting, motivating, and developing employees. This session also trains participants how to create a positive work environment.	Professor in Nursing Administration
2:00pm-3:00pm	Lunch break	

3:00 pm- 4:30 pm:	Build positive relations:	professor in Nursing
	This session will address how to build a positive smooth relationship with staff to make them feel at ease.	Administration

Day2: leading the hospital

Duration	Description	speaker
8:00am-10:00am	Financial Management: A session that targets the basic business knowledge needed to practice the nurse manager's role in terms of financial management. This session will address concepts of managing unit budget, capital equipment, purchasing, and strategic planning for headcounts and supplies.	Business Skills, Finance Manager
10:00am-10:30am	Coffee Break	
10:30am-12:30pm	Human resources management: A session that targets the basic business knowledge needed to practice the nurse manager's role in terms of human resource management, handling leaves, scheduling, recruitment strategies and initiatives, staff satisfaction, staff development and staffing	HR Manager of an International company.

	plans.	
12:30pm- 1:30pm	Lunch break	
1:30pm -3:00 pm	Make decisions: Lessons from the Expert:	
	A session where participants get trained to take actions, make decisions, to follow up on pending issues and to finalize tasks.	Senior Nurse Manager.
3:00pm-4:30 pm	Project Management: A session that targets at building skills to organize unit level and hospital level projects step by step, set priorities, and drive staff members to do the same.	Nursing Quality Improvement Manager.

Day3: Leading yourself

Duration	Description	speaker
8:00am-10:00am	Adapt to change: In this session, participants will learn how to adapt to changing business conditions and to be open to new ideas and new methods. Participants will also learn to set priorities and value others' opinions.	Psychiatry Advanced Practice Nurse
10:00am-10:30am	Coffee Break	

10:30am-12:30pm	Initiative and integrity:	
	A session that trains participants to motivate themselves, do self-discipline, practice integrity in daily work, tell the truth, and be responsible for their actions.	Senior Nurse Manager
12:30pm- 1:30pm		
	Lunch break	
1:30pm -3:00 pm:	Know your learning capacity:	
	In this session participants will learn how to recognize their own limitations and learn through and build constructively on that by learning through others.	professor in Nursing Education
3:00pm-4:30 pm	Mentorship overview for the continuity of the program.	
4:30om-5:00pm		
	Filling the evaluation forms.	
		Research assistant.

Appendix C

Level 2: Workshop agenda for Developing Leaders

Day 1: leading others

Duration	Description	speaker
8:00 am- 9:30 am	The art of effective communication: This session will target the skills of confident verbal and written communication, dissemination of important decisions like hiring and termination at the unit level.	Psychiatry Advanced Practice Nurse
9:30 am- 11am	Conflict management: This session will target the skills and approaches used in conflict management on the multidisciplinary level and among different units.	Professor of adult psychology
11:00 am-11:30 am	Coffee Break.	
11:30am-2:00 pm:	develop your nurses: In addition to attracting, motivating, and developing employees, this session trains participants on how and what to delegate, to give a sense of worth and stretching of capacities to their employees.	Professor in Nursing Administration
2:00pm-3:00pm	Lunch break	professor in Nursing

3:00 pm- 4:30 pm:	Build positive relations:	Administration
	This session will address how to build a positive smooth relationship with staff and help them build positive relations with other disciplines and other units.	

Day2: leading the hospital

Duration	Description	speaker
8:00am-10:00am	Financial Management: In this session, participant learn to go beyond the business of their own unit to a broader business approach to learn how decisions are being made and how budgets are being allocated on the hospital level.	Business Skills, Finance Manager
10:00am-10:30am	. Coffee Break	
10:30am-12:30pm	Human resources management: A session that targets a slightly advanced level of human resource management, handling unexpected leaves, developing staff satisfaction strategies, performance appraisal and talent development.	HR Manager of an International company.
12:30pm- 1:30pm	Lunch break	
1:30pm -3:00 pm	Make decisions: Lessons from the Expert, A session where participants get trained to take	Senior Nurse

3:00pm-4:30 pm	fast actions, make relatively tough decisions, and learn what to compromise. Project Management: This session will train participants on a slightly advanced level of project management in which they can point at problems, set processes for the problems, analyze the gaps and come up with interventions based on their understanding to the hospital quality indicators and culture.	Manager. Nursing Quality Improvement Manager.
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Day3: Leading yourself

Duration	Description	speaker
8:00am-10:00am	Adapt to change: In this session, participants will learn to start coming up with change initiatives for perceived problems, propose it to higher management, influence others and collaborate with them to accept positive change.	Psychiatry Advanced Practice Nurse
10:00am-10:30am	Coffee Break	
10:30am-12:30pm	In this session participants get trained how to earn credibility trustworthiness in the eyes of co- workers. They will be able to come up with solution initiatives to problems and accept criticism more constructively.	Senior Nurse Manager

12:30pm-1:30pm	Lunch break	
1:30pm -3:00 pm:	Know your learning capacity: In this session participants will be trained to excel at their professional function and get the skills in knowing accurately the strengths and weaknesses of themselves and others.	professor in Nursing Education
3:00pm-4:30 pm	Mentorship overview for the continuity of the program.	
4:30om-5:00pm	Filling the evaluation forms.	Research assistant.

Appendix D

Level 3: Workshop agenda for Advanced Leaders

Day 1: leading others

Duration	Description	speaker
8:00 am- 9:30 am	The art of effective communication: This session will target the skills of presenting goals and objectives on the organizational level, and influencing decisions through information, charisma, confidence and personality.	Psychiatry Advanced Practice Nurse
9:30 am- 11am	Conflict management: This session will target the advanced skills of negotiating effectively with individuals and groups, and how to skillfully make confrontations and resolve conflicts in a winwin approach.	Professor of adult psychology
11:00 am-11:30 am	Coffee Break.	
11:30am-2:00 pm:	develop your nurses: In addition to attracting, motivating, and developing employees, this session trains participants on preparing their staff to become leaders themselves. They get trained to be powerful and send their nurses to external development programs.	Professor in Nursing Administration

2:00pm-3:00pm	Lunch break	
3:00 pm- 4:30 pm:	Build positive relations:	
	In this session, participants will get trained in building strong relations with external parties to influence leadership and gain power. They will be trained in creating a mission and a vision and drive others to it.	professor in Nursing Administration

Day2: leading the hospital

Duration	Description	speaker
8:00am-10:00am	Financial Management: In this session, participant Understand the perspectives of different functional areas in the organization and develop a sharp financial grasp of external conditions affecting the organization, employees and patient care.	Business Skills, Finance Manager
10:00am-10:30am	Coffee Break	
10:30am-12:30pm	Human resources management: In this session, advanced leaders will be trained to manage organizational strategic plans for staffing, recruitment, and retention and talent development. They will learn the forecast of challenges based on history and present situations.	HR Manager of an International company.

12:30pm- 1:30pm	Lunch break	
1:30pm -3:00 pm	Make decisions: Lessons from the Expert, A session where participants get trained to take decisions at the organizational level, involving the real representatives, make tough decisions, and learn what to compromise.	Senior Nurse Manager.
3:00pm-4:30 pm	Project Management:	Nursing Quality Improvement Manager.
	This session will train participants on an advanced level of project management in which they can initiate project on a multidisciplinary level, and on a strategic basis. They will learn to set processes for the problems, analyze the gaps and come up with interventions based on their understanding to the hospital quality indicators and culture.	

Day3: Leading yourself

Duration	Description	speaker
8:00am-10:00am	Adapt to change: In this session, participants will learn to start lead change that positions the organization for the future and offer new fresh ideas to accept and adopt change.	Psychiatry Advanced Practice Nurse
10:00am-10:30am	Coffee Break	

10:30am-12:30pm	Initiative and integrity: In this session participants get trained how to practice credibility and act according to organizational values, to keep promises, use ethical considerations and communicate the vision in everyday practice.	Senior Nurse Manager
12:30pm- 1:30pm	Lunch break	
1:30pm -3:00 pm:	Know your learning capacity: In this session participants will be trained how to think outside the box, engage themselves in areas that they shine at, and easily realize what they lack and learn it in order to seek excellency.	professor in Nursing Education
3:00pm-4:30 pm	Mentorship overview for the continuity of the program.	
4:30om-5:00pm	Filling the evaluation forms.	
		Research assistant.

Appendix E

Emerging Leaders program objectives

	Output (0-3 months)	Outcome (3-6 months)	Impact (after 1 year)
Leading others	1-Explains, answers questions, and patiently listens to concerns especially when implementing a change. 2-Treat staff with respectDisplays warmth and a good sense of humor.	1-Delegates important tasks and creating challenging opportunities for staff. 2-Demonstrates trustworthiness, enthusiastic, innovative, accountable, and ethical.	1-Increase in the overall nurses' satisfaction, financial returns on unit and hospital levels, and improvement in quality of patient care as evidenced by satisfaction surveys, financial reports and nursing quality indicators dashboards.
	3-Shares decision making with employees to boost their confidence in their ability to make those decisions.	3- Selects the best qualified people to run the unit successfully.4- Finds and attracts highly talented and productive staff members.	
	4-Uses his/her knowledge to broaden the range of problem-solving by direct discussions. 5- Rewards hard work and dedication to excellence by verbal praise, written recognition or direct	5- Provides clear and active reports to senior management.	
	reward.		

	6- Acts fairly and does not practice with favors.		
Leading The hospital	1-Able to do basic financial budgets of supplies and expenditures. 2-Able to get information and make sense of it and test its validity.	1- Demonstrates good coordination of employees and projects organizing and prioritizing tasks and projects effectively. 2-Stays up to date on new trends in the market.	1-Improvement in the overall allocation of assets, financial and human, in addition to innovation completion of successful project.
	3-Is an alert observer of people, events, and things.	3- Demonstrates behaviors in a logical, data-based, and rational manner.	
	4-Defines problems effectively, and spots possible causing factors.		
	5-Spots problems, opportunities, threats, and trends.		
Leading yourself	1- Is self-disciplined, active, moving, and productive.	1-Demonstrates strong work ethic and creates a productive atmosphere.	1-Become a unique manager and leader who will impact the work environment positively and creates a positive strong
	2- Is involved when needed and open to others' perspectives.	2- Shows commitment to success.	bond with staff that will eventually perform on higher standards.
	3- Listens to others before	3- Recognizes situations	

finalizing a decision and learns from people and	through other people's eyes.	
events.		
	4-Works effectively with different kinds of people showing openness to new ideas and new methods.	
	5-Demonstrates openness to requests for changes in his/her leadership actions	

Appendix F

Developing Leaders program objectives

	Output (0-3 months)	Outcome (3-6 months)	Impact (after 1 year)
Leading others	1-Explains, answers questions, and patiently listens to concerns especially when implementing a change.	1-Delegates important tasks and create challenging opportunities for staff.	1-Increase in the overall nurses' satisfaction, financial returns on unit and
	4-Uses his/her knowledge to broaden the range of problemsolving by direct discussions.	2-Be trustworthy, enthusiastic, innovative, accountable, and ethical.	hospital levels, and improvement in quality of patient care as evidenced by
	5- Rewards hard work and dedication to excellence by verbal praise, written recognition or direct reward.	3- Demonstrate ability to gain trust and respect from his/her customers.	satisfaction surveys, financial reports and nursing quality indicators dashboards.
	6- Acts fairly and does not practice with favors.	4-Correctly and quickly identifies potential performance problems and deals with them effectively for the best outcomes.	2-Utilizes others' capabilities appropriately to
	7-Supports the decisions and actions of the organization and communicate periodically direct supervisors.	5-Acts as a mentor, helping others to develop and advance in their careers.6-Gets things done by finding common ground for issues.	build collaborative and productive working with co- workers and external parties.
	8-Develops and encourages staff through constructive feedback and advice.	7-Demonstrate ability to gain cooperation and support of individuals and teams.	

The hospital	1-Knows how the various departments of the organization fit together and considers the impact of his/her actions on the entire system. 2-Effectively involves key people in the design and implementation of change and take their concerns into account. 3-Is straightforward with individuals about consequences of an expected action or decision. 4-Establishes strong collaborative relationships.	1-Adjusts management style to changing situations. 2-Demonstrate solid understanding of unit products and services. 3- Manage tough situations effectively. 4-Demonstrates understanding of the political nature of the organization and works appropriately within it. 5-Translates his or her vision into realistic financial and human resource strategies.	1-Improvement in the overall allocation of assets, financial and human, in addition to innovation completion of successful project.
		6-Demonstrates understanding of cash flows, financial reports, and corporate annual reports.	
	6-Develops plans that balance long-term goals with immediate organizational needs.		
Leading yourself	1-Accepts criticism well; easy to give feedback on his/her performance.	1-Demonstrates trustworthiness and credible in the eyes of employees, he\she treats them	1-Become a unique manager and leader who will impact the

2- Is flexible and adopts a	with respect, warmth and justice.	work environment
give-and-take approach with		positively and
others in conversations and		creates a positive
meetings.	2- Shows mastery of job content	strong bond with
	and excels at his or her function	staff who will
	or professional specialty.	eventually
3- Communicates confidence		perform on higher
and steadiness during difficult		standards.
times.	3-, Shares responsibility and	
	spreads the feeling of ease as a	
	participative manager.	
4-Shows interest in new	participative manager.	
assignment picks up	4-Demonstrate thinking in terms	
knowledge and expertise for	of trade-offs without sticking to a	
implementation.	single best way.	
r		
5- Does an honest self-		
assessment, admits mistakes		
and learns from them.		
und reums from them.		
6-Seeks corrective feedback to		
improve him/herself.		
7.0 (1: //)		
7-Sorts out his/her strengths		
and weaknesses fairly		
accurately.		
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Appendix G

Advanced Leaders program objectives

	Output (0-3 months)	Outcome (3-6 months)	Impact (after 1 year)
Leading others	1-Keeps individuals informed of future changes that may impact them.	1-Uses effective listening skills to gain interest and trust from others.	1-Increase in the overall nurses' satisfaction, financial returns on unit and
	2-Is clear about his/her expectations.	2-Uses good timing and common sense in negotiating with individuals and groups over roles and resources.	hospital levels, and improvement in quality of patient care as evidenced by satisfaction surveys,
	3-Inspires enthusiasm and commands attention when speaking.	3-Makes his/her points in the right time and does it diplomatically.	financial reports and nursing quality indicators dashboards.
	4- Acts fairly and does not practice with favors.	4-Demonstrate trustworthiness, enthusiasm, innovation, accountability, and ethical conduct.	2-Utilizes others' capabilities appropriately to build collaborative and
	5-Supports the decisions and actions of the organization and communicate periodically direct supervisors.	5-Correctly and quickly identifies potential performance problems and deals with them effectively for the best outcomes.	productive working with co- workers and external parties.
	6-Develops and encourages staff through constructive feedback and advice.		
Leading The	1-Understands the roles of different functional departments	2- Manage tough situations effectively	1-Improvement in the overall allocation of assets, financial and

hospital	in the organization.	3-Demonstrates understanding of the	human, in addition to
nospitai	in the organization.	political nature of the organization and	innovation completion
		works appropriately within it.	of successful project.
	2-Sees underlying facts and patterns in complex situations and effectively develops solutions to address these problems.	4-Demonstrates firm understanding of competitors as well as external governmental, social, and economic conditions affecting the organization.	or successful project.
	3-Makes effective decisions in a timely manner and accurately identifies important issues.	5-Demonstrate ability to persuade the organization to adopt novel ideas and perspectives and take personal as well as business risks.	
	4-Develops plans that balance long-term goals with immediate organizational needs.	6-Inspires, motivates people and drives them to take actions and initiatives.	
		8-Clearly communicates the organization's vision, stays focused on it sells it to employees and customers	
- II		1.77	1.5
Leading yourself	1-Adjusts leadership style according to the demands of the situation.	1-Tries new approaches and departs from norms of thinking and behaving when necessary.	1-Become a unique manager and leader who will impact the work environment positively and creates
	2-Can be trusted to maintain confidentiality and encourages honesty throughout the organization.	2-Adjusts to changes in unexpected circumstances easily and confidently.	a positive strong bond with staff that will eventually perform on higher standards.
	3- Is eager to learn and grow	3-demonstrates understanding of his\her own impact on situations and people and tailors communication accordingly.	

and continuously seeks out new experiences. 4-Compensates for own weaknesses and capitalizes on own strengths.	4-Wins concessions from others without harming or practicing formal authority.	
5-Responds with maturity to new situations that require him or her to stretch and grow.	5-Demosntrates awareness of his/her feelings and makes needed adjustments in negative behaviors.	

Appendix H

Sample Workshop Evaluation Questionnaire

SAMPLE WORKSHOP EVALUATION QUESTIONNAIRE

Workshop Name:

Training Location:	_
Participant Name (optional):	
Date:	
Date: Job Title:	
INSTRUCTIONS	
Please circle your response to the items. Rate aspects of the wor 1 = "Strongly disagree," or the lowest, most negative impression 3 = "Neither agree nor disagree," or an adequate impression 5 = "strongly agree," or the highest, most positive impression Choose N/A if the item is not appropriate or not applicable to the sincerely appreciated. Thank you.	1
WORKSHOP CONTENT (Circle your response to each item.)	
1. I was well informed about the objectives of this workshop.	1 2 3 4 5 N/A
2. This workshop lived up to my expectations.	1 2 3 4 5 N/A
3. The content is relevant to my job.	1 2 3 4 5 N/A
WORKSHOP DESIGN (Circle your response to each item.)	
4. The workshop objectives were clear to me.	1 2 3 4 5 N/A
5. The workshop activities stimulated my learning.	1 2 3 4 5 N/A
6. The activities in this workshop gave me sufficient practice and feedback.	1 2 3 4 5 N/A
7. The difficulty level of this workshop was appropriate.	1 2 3 4 5 N/A
8. The pace of this workshop was appropriate.	1 2 3 4 5 N/A
WORKSHOP INSTRUCTOR (FACILITATOR) (Circle you	r response to each item.)
9. The instructor was well prepared.	1 2 3 4 5 N/A

10. The instructor was helpful.	1 2 3 4 5 N/A
WORKSHOP RESULTS (Circle your response to each item.)	
11. I accomplished the objectives of this workshop.	1 2 3 4 5 N/A
12. I will be able to use what I learned in this workshop.	1 2 3 4 5 N/A
SELF-PACED DELIVERY (Circle your response to each item.)	
13. The workshop was a good way for me to learn this content.	1 2 3 4 5 N/A
14. How would you improve this workshop? (Check all that apply.)
Provide better information before the workshop.	,
Clarify the workshop objectives.	
Reduce the content covered in the workshop.	
Increase the content covered in the workshop.	
Update the content covered in the workshop.	
Improve the instructional methods.	
Make workshop activities more stimulating.	
Improve workshop organization.	
Make the workshop less difficult.	
Make the workshop more difficult.	
Sample Workshop Evaluation Questionnaire	
How would you improve this workshop (cont'd)	
Slow down the pace of the workshop.	
Speed up the pace of the workshop.	
Allot more time for the workshop.	
Shorten the time for the workshop.	
Improve the tests used in the workshop.	
Add more video to the workshop.	

15.	What other improvements would you recommend in this workshop?
16.	What is least valuable about this workshop?
17.	What is most valuable about this workshop?