AMERICAN UNIVERSITY OF BEIRUT

A CONTINUING PROFESSIONAL DEVELOPMENT PROGRAM FOR NURSE MANAGERS

by

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AN ABSTRACT OF THE PROJECT OF

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Healthcare industry has been going through monumental changes, due to social demographic shift occurrences, progress in medical technologies, cost effectiveness coupled with the need for optimal quality of care, and the fact of increased patient awareness. Managing those competing healthcare organizations is difficult. They are patient focused and aim to be successful. When targeting high quality patient care, nurses' satisfaction and the general healthcare institution' effectiveness, Management and Leadership are crucial. Nurse Managers are the interface between patient care outcome and managerial control.

This project proposes a professional development program designated primarily for middle managers/leaders the "Nurse Manager" (NM). The program focuses on leadership, management, quality and communication training based on a national study conducted by Dumit and her colleagues in 2017 addressing the Continuing Education Need Assessment for Nurse Managers in Lebanon. The main content of the proposed structured program is a combination of evidence-based didactic, interactive, face-to-face and online activities and sessions, and role-play. Those concepts will prepare the managers to acquire the necessary competence to efficiently lead, manage, and achieve quality of care at our Lebanese health care organizations. The design of the program is based on the AONL Nurse Manager Leadership Collaborative (NMLC) learning domain framework. It includes program description and outcomes, unit specific outcomes and examples of content, formative and summative evaluation plan and business plan, in addition to recommendations for implementation.

CONTENTS

CHAPTER I

INTRODUCTION

A. Introduction to Nurse Managers Leadership and Management

Nurse Managers (NMs) are professionals who are fully accountable for the supervision of healthcare providers in any patient setting. They are responsible for recruitment and retention, performance review and professional development of staff. Moreover, NMs are involved in budget formulation and quality outcomes monitoring and measurement. They help to plan for, organize and lead the delivery of nursing care for a designated patient care area" (ANCC, 2014).

Nurse Manager's role is critical for the organizational culture and status. It affects patient outcomes, quality of care, nurses and patient satisfaction, organization performance and financial achievement (Boamah, Spence, Wong, & Clarke, 2018). However, successful management of health care units may become more difficult when super clinicians are assigned nurse managers' roles without being prepared and developed into the role. Nurses who excel in their bedside care are most of the times promoted to be NMs irrespective of the needed skills to become successful managers (Gesme, Towle, & Wiseman, 2010). Moving from bedside nursing to a NM position is a transition from providing direct care to a group of patients to contributing through others. This entails leading and managing staff members, interacting with families, and coordinating with higher management, other professionals, and various stakeholders. In their role, NMs are accountable for people and

resources in a significantly changing context of health care environment that makes these roles even more complex (Wilcox et al., 2018).

For them to meet all challenges in today's turbulent healthcare environment and better lead healthcare organizations and achieve a healthy work environment, NMs should receive proper leadership and management training and coaching (Martin, Mccormack, Fitzsimons, & Spirig, 2012). Leadership development is a human capital investment that has far-reaching returns into the future (Leach & McFarland, 2014). For those development-training programs to be promising, leadership knowledge and skills have to be planned based on a thorough analysis of leadership needs (Gentry et al., 2014). Therefore, any professional development program addressing appropriate preparation of nurses into management positions should be developed based on the assessment of the learning and training needs of those nurses and utilizing assessment findings to design related professional development programs.

B. Background of Continuing Education and Professional Development for Nurse Managers:

For those front line professional leaders to manage and lead successfully, maintain their competence to practice, and increase their proficiency and expertise, professional development is crucial for them. Continuous Professional Development (CPD) programs became more desirable due to the high cost of continuing education (CE), and the increased concern of health professionals not being well prepared in their undergraduate curricula to take on leadership and management roles, due to lack of related content in undergraduate

curricula (Daly, Jackson, Mannix, Davidson, & Hutchinson, 2014). Professional development also became even more necessary as NMs are most of the time selected based on their clinical experience rather than leadership and management competency. Receiving little or no formal preparation for the transition and development from experienced nurses into management positions (Wilmoth & Shapiro, 2014) creates a potential setup for failure (Fennimore & Wolf, 2011).

The complexities and challenges in today's healthcare environment demands NMs to be educated and knowledgeable. This requires effective contribution and support from the entire leadership team to improve awareness and usage of professional development programs; such programs will help NMs improve their performance by utilizing evidence-based management that relate to better risk assessment, enhanced quality and patient safety (Kaufman, & McCaughan, 2013).

Continuing education programs and professional development programs are essential for the survival and sustainability of the organization in the competition field (Lee, Chao, & Chen, 2011). In fact, studies showed that development programs are vital investments that lead to internal promotion, staff development and success of organizational plans (Chaghari et al, 2017). Those CPD programs were also found to be vital assets in successful outcomes, job satisfaction and employee retention (Khan, Khan, & Khan, 2011), especially when ensuring that NMs individual learning needs in leading and managing their units are met. Eventually, leadership development is always desirable to assure the availability of proficient pipeline of qualified leaders for the future (Weber, Ward, & Walsh, 2015). Finally, development programs even became more commanded in

Lebanon with the Ministry of Health (MOH) requiring a thirty CNE hours each year for all healthcare providers as one critical requirement for accreditation of any healthcare institution,

C. Program significance

Front line NMs are the leaders who make things happen. Leaders should have vision and the required skills to lead the organization's mission, inspire people, organize strategies, resolve conflicts, and hold responsibilities. They are the dynamic link between administration and those at the point of care (American Organization of Nurse Leaders, 2015). Nurse Managers influence organizations culture and outcomes that are critical factors for healthcare institutions in terms of nurses' retention, quality of services, and financial performance (Canadian Nurses Association, 2005; Paterson et al., 2010; & Yoder –Wise 2013).

Healthcare delivery services are becoming more and more challenging and complex. Organizations must guarantee high levels of technical and professional expertise, as well as leadership capacity needed to achieve future outcomes (Center for Creative Leadership, 2016). The same recommendations were stated in the Institute of Medicine (IOM) report on the Future of Nursing, calling for nurses to be prepared to lead in all areas of healthcare (IOM, 2011). Thus, nurse manager's professional development should be a central activity for any health organization. This is especially important because most of the times nurses are promoted to be nurse managers without receiving formal training, overlooking the evidence linking professional development with increased staff

satisfaction, enhanced team success and workplace culture, improved outcomes and delivery of healthcare services (Wilson, Paterson, & Kornman, 2013).

In Lebanon, there is lack in development opportunities for nurses in general and no continuing professional development programs available that are specific for NMs (El-Jardali, et al., 2009). A timely opportunity of developing such a program arises with the recent national study that assess the perceived learning needs of the Lebanese NMs. It is time to move forward and design a tailored professional development program that addresses and fills the gaps in the knowledge and skills related to NMs roles and responsibilities in the Lebanese context.

D. Project Purpose

The purpose of this project is to propose a continuing professional development program tailored to the Lebanese NMs according to their needs and relevant to their practice. The project proposes an evidence-based leadership and management development program that is accessible to all NMs practicing in Lebanon, thus taking the lead in transforming the status quo and creating a positive impact on staff satisfaction and retention, and organizational and patient care outcomes.

The program is based on the Lebanese clinical context and meet the identified actual learning needs of Lebanese NMs rather than the needs perceived by the provider. Programs tailored to the perceived needs of the NMs have a higher probability to succeed since NMs might be more committed to attend and benefit from such programs that are developed based on their stated needs and responses (Fleming, 2013).

CHAPTER II

LITERATURE REVIEW

This chapter includes review of theoretical and empirical leadership and management literature. It addresses the importance, impact and barriers of NMs education and development, followed by the leadership skills and competencies identified in the literature for successful leaders. In the last section of this chapter, Nurse Managers' professional development programs available around the world are described.

A. Nurse Managers Leadership and Management Impact

Leadership is the relationship between the individuals who lead and those who take the choice to follow. It refers to the behavior of leading and directing the activities of a team or group of people towards a shared goal (Al-Sawai, 2013). This relationship is complex and said to have more than hundred definitions (Church, 1993) and characteristics over the time.

Studies throughout the literature emphasized the NMs' key role in establishing and maintaining healthy work environment and creation of high performing teams and positive culture units. However, literature also identified and correlated work environment and organizational culture to effective leadership styles. Among many leadership styles identified in literature, six are the most common and known in nursing: Coaching Leadership, Visionary leadership, Autocratic, Laissez-Faire, Democratic and Transformational Leadership. In the last decade, transformational leadership had been more

popular and commended by professional organizations since research proved its positive

outcomes on nurses, patient quality of care, and the overall organizational goals (IOM,

2011).

Nurse Managers, are the frontline leaders. They are expected to handle a twenty-

four seven daily operations of a multimillion-dollar budget, manage a big number of nurses,

and be accountable for the quality of care delivered at their clinical areas. The Nurse

Manager role is not easy, and to be successful in today's complex and continuously

changing health care environment, frontline leaders must have a broad range of skills. Yet,

few have received the formal preparation required to act successfully in their NM roles

(Fennimore & Wolf, 2011; Yoder-Wise, 2014).

According to AACN and AONE (2015), nurse managers have the most direct

impact on the care and service received by patients and families during their health care

experience. Nurse Managers' influence had been related to nurses' satisfaction, patient

satisfaction and clinical quality indicators (Wong, Cummings, & Ducharme, 2013). For

instance, unsatisfied nurses may negatively influence patient satisfaction, and eventually

patient outcomes (Lewis, 2011).

Moreover, NMs leadership behavior has a key role in achieving organizational

outcome and maintaining healthy work culture. They create environments that are favorable

to effective change, generate unit quality reports, and set strategic priorities , providing

guidance for their staff to meet the organizational goals and values (Birken, Lee, & Weiner,

2012). Effective leadership is one of the most critical component that lead an organization

to successful outcomes. Several publications proved that effective leadership styles mainly transformational leadership has a strong positive association with the high level of patient satisfaction, reduction of adverse effects, quality of care, implementation of effective management, and establishment of patient safety culture (Wong & Cumming, 2013; Havig, Skogstad, Kjekshus, Romoren, 2011). Moreover, effective leadership had also an indirect effect on reduced mortality rate by inspiring, retaining and supporting experienced staff (Sfantou, et al .2017)

Nurse Manager's role requires abilities that are beyond clinical care. They are expected to provide professional leadership on their units, and contribute to the organization's senior leadership decisions. NMs need to maintain their leadership effectiveness and develop their professional competence through participating in continuing education and continuing professional development.

B. Continuing Education and Continuing Professional Development

According to the American Nursing Association (ANA), Continuing Education (CE) is any training received beyond the basic (post-basic) education with the ultimate goal of advancing healthcare delivery. Whereas the National Research Council (2010) consider continuing education, a process by which the healthcare professionals are kept updated with the latest knowledge and developments in health care. Continuing Nursing Education (CNE) concept generally refers to increasing medical knowledge, expertise, and attitudes (European Union of Medical Specialists, 2016). Continuing Professional Development

(CPD), includes and go beyond this concept by recognizing a wide range of skills that are needed to provide high quality services through management, education, information technology, communication, ethical, social, and personal skills (Helena et al., 2014).

Continuing professional development has changed over years to include wide-ranging competencies beyond clinical update, such as research and scientific writing, multidisciplinary context of patient care, ethical practice, communication, management and behavioral skills, team building, information technology, audit, and appropriate attitudinal change to ensure improved patient outcomes and satisfaction (WHO, 2010). Continuing professional development is a lifetime learning process that develops nurse's proficiency through maintenance and enhancement of skills, performance, and knowledge. It helps health care practitioners remain updated and competent, thus, fit to practice. Continuing professional development incite professionals into keeping up with the changes in practice that preserve and develop public confidence in health care services (Power et al., 2011).

C. Impact of Continuing Professional Development (CPD) and Continuing Education (CE)

Continuing professional development was found to be an important factor for NMs retention and job satisfaction, where NMs benefited from personal and professional growth and felt committed to the organization (Fleming, 2013). Moreover, effective leadership preparation of NM enhanced staff retention, reduced turnover costs, and improved quality and financial outcomes for healthcare organizations (Mackoff, et al., 2008). In a study,

NMs education showed enhanced morale, patient satisfaction, job competency and improved practice (Gesme et al., 2010).

Furthermore, educational interventions showed positive impact on patient safety culture. In a study, introducing a patient safety intervention to nurse leaders led to improvement in three dimensions of safety culture (Ginsburg et al., 2005). Another study by Wong and colleagues (2013) showed a significant improvement in nurses' attitudes in the Emergency Department after only a three hours education course on patient safety culture. Another research showed that a course on patient safety, statistically improved five dimension of Hospital Survey on Patient Safety Culture (Amiri, 2018). Thus, CPD is crucial to ensure quality and safe care that is based on risk assessment, performance improvement and evidenced based practice.

A study by Choe et al., (2018), showed that enhanced leadership competencies through continuing education for NMs increased communication satisfaction and team effectiveness. Moreover, NMs communication was found to play a crucial role in nurses' intention to leave and turnover (Choi et al., 2018). Nurses do not leave organizations nurses do leave managers. Therefore, the best way to decrease turnover is to provide leaders the competencies required to create a motivated work climate and engaged employees (Bernthal, Wellins, & Walker, 2004).

D. Barriers and Facilitators for Professional Development

Like any other profession, the barriers for nurses' professional development exist and are identified in the literature. Five major themes of nurses' barriers to professional

development were identified by Santos (2012), these are time constraints, financial constraints, workplace culture, application of new knowledge, and competency in accessing electronic evidence-based practice literature. Other studies identified "Access" and "Relevance" as main deterring factors for nurses' education, in which limited staffing and inability to take time off work for example were impediment to nurses' abilities to leave their professional commitment to attend educational programs (Penz, et al., 2007). Access was mainly regarded in literature for nurses working in rural areas, due to lengthy travels to participate in educational activities. In other studies addressing barriers affecting continuing education and development for nurses, researchers categorized the barriers into three categories: personal barriers, work related barriers and organizational barriers (Mizuno-Lewis et al., 2014). Studies showed that effective learning was encouraged, and nurses were motivated to enroll in development activities when institutions, management and peers showed positive attitude towards professional development (Burrow et al., 2016).

On the other hand, literature also identified and broadly categorized facilitators that motivate nurses to engage in their professional development into intrinsic and extrinsic factors. Extrinsic factors recognized are quality of patient care, skills and career development, available resources for updating knowledge, proof of competence and organizational obligation (Laxmi & Sharmila, 2018). The most crucial intrinsic factors found in research were desire to improve the quality of patient care, interest in knowledge update and achievement of professional status, advancement of clinical and communication skills (Panthi & Pant, 2018).

E. Leadership and Management development programs for Nurse Managers

Nurse Managers are usually selected based on their experience rather than leadership competency, provided only with some guidance from their peers and or "on the job training". Over the time this resulted in low job satisfaction, decreased managerial effectiveness and increased NMs turnover rate, that is time consuming and expensive. Moreover, it is worth mentioning that nurse manager turnover rate and vacancies are of increasing concern. Many managers are promoted, retired, moving away or stepping down due to the overwhelming demands of their role and the strong opposition of nurses to assume management roles (Titzer, & Shirey, 2013).

In 2011 the institute of Medicine's (IOM) landmark report on the Future of Nursing recognized the need to prepare and empower nurses to lead change for advancing health care, highlighting that nurses can place themselves to lead decision making across all patient settings including public ,private, and governmental health care agencies (IOM, 2011). Although the report did not set a clear plan how to achieve this goal, but in order to prepare nurses to lead, they should develop and anchor their knowledge through continuous leadership development. Leadership development is a methodical process that immerses NMs in their role through formal managerial education and informal learning, multi-rater (360-degree) feedback, exposure to executives, action learning and mentoring programs (Giber, Carter, Goldsmith, 2000).

In response to the IOM report and due to increased awareness on leadership development, the American Association of colleges of Nursing (AACN) identified

organizational and systems leadership as one of the vital learning outcomes for baccalaureate, masters and doctoral education (AACN, 2013). Moreover, organizations with huge resources started to tailor onboarding and ongoing education programs that are individualized to their nurse managers' specific identified needs.

On the other hand, professional organizations such as the American Nurses Association (ANA) and the American Organization of Nurse Executives (AONE) also started to offer formal leadership training and structured fellowships to develop nurse leaders. The American Organization of Nurse Executives provides two levels of certification in nursing leadership, Certificate in Executive Nursing Practice (CENP), and Certified Nurse Manager and Leader (CNML) (HealthLeader, 2018).

Another leadership development opportunity that AONE offer for nurse managers is the "Nurse Manager Fellowship" program that involves a recognized yearlong education program with the opportunity of networking and reflective learning environment. Another program designed by AONE offered to Emerging Leaders and Nurse Managers is a three-day program that consists of a didactic education, practical learning and self-assessment (HealthLeaders, 2018).

Moreover, American Nurses Association (ANA) Leadership Institution offers a sequence of computer-based modules that offer nurse leaders the chance to develop and enhance their leadership skills. The ANA actually offers a course specifically designed for nurse managers, "10 steps to becoming a Successful Nurse Manager". The ANA also offers from time to time a two-day workshop for the "New Nurse Managers" that provide them a "road map to success".

Nursing specialty organizations such as the Oncology Nursing Society, the American Association of Critical –care Nurses (AACN), and the Emergency Nurses Association (ENA) in turn established programs for leadership development, and offer certifications in leadership, along with the American Nurse Credentialing Center (ANCC) (Roux & Halstead, 2017). The National Nursing Leadership (NNL) is another project, which is an online learning program, with students learning at their own pace. The program content embraces meeting effectiveness, paperwork, work-life balance, career strategies, conflict management strategies, negotiation skills, effective communication, effective strategies for leading change, ways to nurture staff, ways to develop relationships, ways to make empowerment work, stress management, and dealing with difficult employees and managers (CNA, 2005).

Leadership for Change (LFC) is another action-learning program to develop nurses as effective leaders and managers in a constantly changing environment. The program objective is to equip nurses with the knowledge, strategies and strength to be effective in any changing settings. The program is comprised of five interrelated components that approach leadership development including workshops, team projects, and structured learning activities between workshops, individual development planning and mentoring (Khorasani et al., 2015)

In Canada, the Canadian Nurses Association (CNA) also has a rich history in advocating for nursing leadership development. The CNA policy statement on nursing leadership defined a set of sixteen principles to support a professional practice environment that nurtures and facilitates leadership in any practice setting (CNA, 2005). The CNA also

organizes national nursing leadership conferences, reports and policy discussion related to leadership every now and then.

In Australia, the University of New England (UNE) in coordination and support of Medicare Local Alliance offer a Nurse Leadership Program that is specifically designed for Nurse Managers. The program runs over a year, it is computer based for distant learning, and focuses on personal skills development, effective team management, operation management and project planning. Participants are involved in the program through action learning and work oriented approach using computer based power point and video sessions, giving the participant the chance to apply leaning outcomes at workplace (UNEP, 2014).

In the Middle East, in an attempt to participate in AONE's vision of global nursing leadership "One voice advancing health" (Hancock, 2018), AONE through its Nurse Manager Institute (NMI) was able to retool the educational programs of Dynamic Leadership for Shared Governance program they offer to suit a multinational organization like Cleveland Clinic Abu Dhabi (CCAD). Another program that was found to be given in the region, is a leadership development program offered by INSEAD, an international business school in Abu Dhabi. The program courses include topics about leadership and decision-making, Value Delivery Systems: operations strategies and process management, and health care service innovation. The program courses are given over six days, and provided once a year (INSEAD, 2017).

F. Competencies of effective Nursing Leadership for Nurse Managers

To be successful in today complex health care environment, NMs must have a wide range of competencies and skills. Nurse Managers responsibilities are becoming more critical than ever due to multiple factors such as burdens for rationalization, cost cuttings, advancements in medical technology, and reduced lengths of stay (Institute of Medicine, 2011; Japanese Nursing Association, 2016). The changing nature of health care requires nurse managers to manage daily operations of their clinical areas, contain costs, build healthy work environment, maintain care, satisfy both patients and staff needs (Fleming, 2013). As leaders responsible for navigating these roles and operating the business of health care organizations, Nurse Managers need to be competent in relationship building, human resources management, financial management, performance improvement and team-building skills (Fennimore & Wolf, 2011).

Throughout the literature review, many leadership skills and competencies were identified for successful Nurse Managers. However, different studies identified common important span of skills necessary for the NM role. The IOM report for instance, recognized communication, conflict resolution, negotiation, and having necessary tools for quality and safety, as the most important needed skills for successful Nurse Leaders (IOM, 2003). Whereas the Center for Creative Leadership identified sixteen leadership skills for successful nurse managers, and ranked them from most important to less important competencies (CCL, 2010).

In 2006, in an attempt to identify and organize the skills required for Nurse Manager Position, the American Association of Critical-Care Nurses (AACN) and the American Organization of Nurse Executives (AONE), collaboratively developed a model that include competency spheres needed by effective leaders and future ones. The evidence-based framework outlines the key competencies required for nurse managers in a three spheres: the development of the Leader Within, the Art of Leading People and the Science of Managing the Business (AONE, 2015).

Leadership skills start from the Leader Within that entail understanding oneself, demonstrating personal mastery of emotional intelligence, accountability, personal growth and development, and self-confidence to empower staff. The Science of Managing the Business spans another group of competencies that qualify the NM to plan strategically for quality care and financial stability of their units. In order to improve quality of care efficiently at their units, NMs must have foundational thinking skills, clinical knowledge, performance improvement methodologies, and technology skills. In other words, NMs need to be competent in human and operational management and in assessing the financial consequence and costs of decisions. They also need to be successful in advocating for the resources needed to effectively staff and operate units. Nurse Managers should be innovative and come up with answers that fulfil the needs of their staff and do not compromise patient care, especially when limited resources are available (Fleming, 2013).

Nurse Managers must have the ability to lead in order to manage the business effectively, and for them to lead people, they must have the needed skills to manage relationships and to influence others positively toward common organizational goals.

Moreover, NMs must have expertise in dealing with problematic people, conflict management between staff, developing a learning environment, disciplinary processes, handling staff schedules and leaves, support teams to accomplish improvement projects using the available resources, priority setting, recruitment, and selection (Fleming, 2013).

In turn, the ANA developed its unique leadership skills based on a selection of competencies from the CCL, and recognized leadership competencies across the path of professional development. The American Nurses Association organized the leadership competencies using the same three distinct domains "the leader within" "leading others" and "leading the organization". Their Leadership curriculum also addressed the derailment factors that influence leaders' career success. These factors include, difficulty in building and leading a team, developing good working relationships with others, changing or adapting, following up on promises or completing a job, and lacking the depth to manage outside of one's current function (ANA, 2018).

In other studies a range of business and operational competencies were the sole competencies needed for NMs. Managing the day-to-day operations of healthcare units in a changing nature of healthcare requires qualified NMs in finance, human resources and operational management. For that reason, Nurse Leaders must be competent in relationship building, human resource management, performance improvement, financial management, and team-building skills (AONE, 2015; Fennimore & Wolf, 2011). In another study, "communication, conflict resolution, generational awareness, time management, financial management, systems thinking and customer service" are considered the most important competencies for successful leaders (Zwink et al., 2013, p.136).

G. Nurses Need for Continuing Education Programs in Lebanon

Literature and online resources showed that minimal resources are available for professional development and that only university continuing education programs are available in Lebanon. Furthermore, nursing schools in Lebanon have limited resources to establish nursing education programs for nurse management and leadership, besides the inadequate and few accredited resources to prepare graduates for leadership positions (El-Jardali et al., 2014).

Moreover, the Lebanese nursing workforce historically suffers skills drain and migration, mainly due to financial reasons and lack of development opportunities. Nevertheless, El Jardali and his colleagues (2008) showed that work environment, and unsatisfactory relationship with the nurse manager contribute to nurses seeking outside opportunities. In another study, lack of opportunities for CE was found to be one of the significant reasons behind nurses' migration (EL-Jardali et al., 2009). Lack of opportunities to advance their skills and develop their knowledge and lack of CE participation was related to nurses' intent to leave (EL-Jardali et al., 2011; 2013). On the other hand, continuing education and development was found to be a motive for immigrants to return to work in Lebanon (El-Jardali et al., 2008).

H. Nurse Managers educational needs in Lebanon:

In Lebanon, only one national study explored the Lebanese Nurse Managers' educational needs and assessed their preferred teaching methods, time, place, format, day of the week, and preferred language. The ultimate goal was to design a leadership and

management program that takes into consideration the NMs perspectives addressed in the study by Dumit and colleagues et al. (2019). It is expected that meeting the Lebanese NMs learning needs would better engage them as participants. The results of the national study showed nurses' needs for training in four nursing management and leadership areas specifically: 1) Leadership 2) Communication 3) Quality 4) Management.

The above is consistent with what the literature suggests that continuing education must be based on needs assessment, should utilize multiple educational methods, and should be interactive (National Research Council, 2010). Learning need assessment is a crucial step in the designing process, as it can help ascertain that educational programs are developed for the purposes of improving learning outcomes, improving patient outcomes, and enhancing cost effectiveness of organizational resources (Pilcher, 2016)

Nurse Manager continuing education and development is crucial for Managers themselves, the organization and the patient outcomes. Multiple competencies for effective NMs leadership and management were identified throughout the literature Common themes and significant competencies were well assembled in the Nurse Manager Leadership Collaborative (NMLC) learning domain framework. The literature also suggests that NM development programs should be based on a thorough learning need assessment. This project proposes to build on the NM need assessment study held in 2017 by proposing an evidence-based program tailored to the learning needs of Lebanese NMs. (Dumit et al., 2019).

CHAPTER III

DESIGN OF THE NURSE MANAGER DEVELOPMENT PROGRAM

This chapter encompasses the Nurse Managers Development Program designed specifically to the needs of the Lebanese Nurse Managers to achieve the aim of enhancing patient care and institutions outcome, in addition to nurses' retention and satisfaction. The chapter includes program overview, design, framework used to guide the learning program objectives and outcome, participants, recruitment strategy and program evaluation.

A. Program Description

This professional development program is designed to meet the Nurse Managers' needs with regards to the managerial and Leadership skills specific to their roles. The program aims at developing the Lebanese Nurse Manager's leadership and management capacity. It is intended to be accessible through the Order of Nurses in Lebanon. The proposed evidence-based program content covers topics determined by the Lebanese NM in the national survey that assessed their learning needs , in addition to universal NMs leadership and management concepts and competencies needed for today's challenging healthcare environment.

The major themes for the Lebanese NMs needs identified by the national survey (Dumit et al., 2019) fall under four topics of different priorities: 1) Leadership skills; 2)

Management functions; 3) Quality management and 4) Communication skills. Table 1.

Shows the results of the NMs survey indicating the areas they need development in.

Table 1. Nurse Managers' areas of development needs

Theme	Topics	Number of NMs indicating the topics
Leadership skills	• Leadership qualities • Staff motivation • Staff empowerment • Role model in the work place • Delegation	**210**
Management functions	• Work organization • Strategic planning • Problem Solving • Conflict management • Resource utilization • Disciplining • Human resources • Staff education • Professional skills & work development • Team work • Time Management • Budgeting	**431**
Quality management	• Quality & key performance indicators • Patient safety • Patient identification • Patient satisfaction • Customer service • Work evaluation • Risk management & accreditation • Auditing & evaluation • Lean management	**300**
Communication	• Communication skills • Emotional intelligence • Interpersonal relation • Stress management • Anger management • Documentation	**189**
Total		1130

For the program to be implemented successfully, its design is based on the Nurse Manager Leadership Collaborative (NMLC) learning domain framework (AONL, 2015).

B. Theoretical framework

To achieve and sustain healthy work environment and address the need for leadership development in a changing and unpredictable healthcare delivery system, the American Organization of Nurse Executives in collaboration with the American Association of Critical Care Nurses and the Association of perioperative Registered Nurses established a competency model for current and future nursing leadership development, the Nurse Manager Leadership Collaborative (NMLC) learning domain framework (AONL, 2015) Figure 1.

THE NURSE MANAGER

The Science:
Managing the Business

Financial Management
Human Resource Management
Performance Improvement
Foundational Thinking Skills
Technology
Strategic Management
Clinical Practice Knowledge

The Leader Within:
Creating the Leader in Yourself

Personal and Professional Accountability
Career Planning
Personal Journey Disciplines
Optimizing the Leader Within

The Art:
Leading the People

Human Resource Leadership Skills
Relationship Management and Influencing Behaviors
Diversity
Shared Decision Making

Figure 1. Nurse Manager Leadership Partnership Learning Domain Framework (AONL, 2015)

The model identifies three spheres of Nurse Manager Leadership practices and provide a useful structure to plan leadership development activities for future Nurse Managers. The three different domains covered by the model are the Leader within, the Art of Leading the People, and the Science of Managing the Business. In addition to the model, the Leadership development taskforce developed a Nurse Manager Inventory (NMLC, AONL, 2015) to frame the main skills needed in each competency domain area. The NMLC model will guide the program content and objectives since its components are consistent with the four areas identified by the Lebanese NMs as their learning needs. The Leader Within framework domain covering the Leadership skills learning need, while the

Art of Leading People sphere entails Communication skills learning need, whereas The

Science of Managing the Business component includes Management and Quality learning

topics. Table 2. Shows the overlapping topics between the Lebanese NMs need and NMLC

competencies.

Table 2. Showing the NMLC and the Lebanese NMS overlapping topics

NMLC Topics	Overlapping topics of Lebanese NMs need and NMLC	Lebanese NMs topics
The Science of Managing the Business The Art of Leading the People: The Leader within Creating the leader in yourself	Management competencies (Science of Managing the Business) : Financial Management Human resources Management Strategic management Communication Competencies (Leading the people) : Communication Skills Emotional intelligence Interpersonal relation Leadership competencies (Leader within) : Shared decision-making Relationship Management and influencing behavior Optimizing the leader within	Leadership skills Management skills Quality Management Communication

First domain, The Leader within: Creating the Leader in Yourself

Understanding oneself is a crucial element for leadership success as leadership

skills starts from personal mastery. Remarkable leaders exhibit self-confidence, show trust

and empower individuals. They demonstrate advanced communication skills and high

emotional intelligence, they are conscious how their communication and actions influence others, and they are sensitive to signals in their environment (Sherman, & Pross, 2010).

Second Domain, The Art of Leadership: Leading people

Leading and managing people effectively is a leadership skill that involves a broad set of competencies that includes relationship management, influencing others behavior, shared decision making, staff development and performance analysis, team building, listening, networking and guiding individuals to overcome their personal and professional conflicts (AONL, 2015). It is getting health care teams in health care settings to work in teams rather than individuals, and collaborate to achieve high quality patient care (Rosen et al., 2018).

Third Domain, The Science of Leadership: Managing the business

The competencies required to manage the business are multifaceted and varied. The Science of leadership entails the skills needed to perform the fiscal responsibilities required from a nurse manager. These competencies include financial management and budgeting, human resources management, use of technology and strategic management (AONL, 2015). To be successful in managing the business and the staff, leaders should be able to see and value the financial ramifications and costs of their decisions on their operating units. In addition to the financial and human resources management, healthcare systems are moving toward Value-based approach with health care organizations. Thus, NM Quality Management competence will be positively influencing organizational success and health-care service delivery in the future (Liang et al., 2017).

C. Participants

All Nurse Managers from different specialties and experience levels, in addition to senior nurses interested in or preparing to assume managerial roles in the future will be potential participants in the program. The class capacity is fifteen to twenty participants to allow for maximum class interaction and the chance for everyone to participate and build connections in different classes.

The inclusion criteria for applicants include

1) Supervise nursing staff delivering patient care on daily basis

2) Nurses whose scope of practice require managerial and leadership capabilities on Micro and or Macro level in a nursing clinical care setting.

3) Years of experience not to be less than three for those aspiring to be NMs

4) Designated by the nursing services director of their respective hospital

5) Registered at the Order of nurses

E. Recruitment of Participants

After getting the required approvals and support from the Order of Nurses in Lebanon, the program will be offered at eight different times in the eight Lebanese governorates to increase the participation of our target population at all Lebanese hospitals. At the start, an official email will be sent through the Order to twenty randomly selected Nursing Directors of private and public hospitals informing them about the program in general, its objectives, curriculum, and program expectations for successful completion. Nursing directors will be asked to forward the invitation and select one to two Nurse

Managers or aspiring nurses to participate in the program. The twenty randomly selected hospitals represented by the twenty NMs will be a convenience sample to pilot this program on a National level, especially that the program is not limited to a certain specialty work area or organization type.

After confirming their participation in the program through emails, the NMs will receive a pre-assessment survey (Appendix A). The survey assess the current level of knowledge and skills of the participant in the four major areas. The NM will have to complete the survey him/herself for self-evaluation, her/his direct supervisor and one of the NM's subordinates will also complete the same survey for three times through the program. This will allow tracking the NMs progress in achieving the learning objectives based on self-perception and colleagues perspective. It will also help in determining the impact of the program by analyzing and comparing post assessment surveys.

F. Program Outcomes and Learning Objectives

This program provides an evidence-based Leadership and Management continuing development program offered to all NMs of different levels of experiences in Lebanon. The program ultimate outcome is to enhance patient care and organization outcomes, and improve staff satisfaction and retention through efficient NMs functions. The long-term NM outcome is that NMs will demonstrate successfully competencies in the four needed areas: Management, Communication, Leadership, and Quality (Appendix B). The content for each competency area is designated according to expected outcomes for each Nurse Manager Competency cluster in their career trajectory

A. *Management functions learning objectives:*

Management functions is the most expressed need by the Lebanese NMs, thus more weight and time will be dedicated for this domain. The online resources for management topic is equivalent of two days face-to-face sessions. Participants at the end of this course will be able to:

➢ Resolve conflicts using different evidence-based strategies and decision-making process.

➢ Manage budget and financial resources by selecting the suitable economic principle for a healthcare organization.

➢ Use Six-sigma problem-solving methodologies, such as DMIAC (Design, Measure, Improve, Analyze, and Control) process improvement concept.

➢ Evaluate staffing patterns and needs for managing human resources within the scope of labor laws, using of evidence-based and valid staff selection, recruitment, and interviewing techniques.

➢ Develop scope of practice, role definition and implement changes consistent with scope of practice of subordinates.

➢ Manage projects successfully, through properly identifying roles, establishing timelines, allocating resources and designing relevant implementation plans.

➢ Facilitate change, through proper assessment for the readiness for change, staff involvement and communicating to them the change process plan and outcome evaluation.

B. *Quality management learning objectives*

Nurse Managers have a significant role in building a positive work environment that provide a safe and high quality care. Moreover, quality is the second most needed priority stated by the Lebanese NMs, and it is a major component in their scope of practice. At the end of the workshop, participants will be able to:

- ➢ Lead and facilitate performance improvement teams to enhance patient safety and quality of care by identifying key performance indicators (Nursing sensitive indicators and Quality Indicators), establishing the appropriate data collection methodology, and performance evaluation criteria of the findings, followed by appropriate analysis and response to the outcome measured using quality improvement and management tools.

- ➢ Maximize care efficiency and throughput by appropriately aligning care delivery model and staff performance with the key safety and economic drivers.

- ➢ Communicate patient care standards as established by the Ministry of Health, accreditation and regulatory quality agencies.

- ➢ Advocate Just culture reporting environment and support safety surveys and their recommendations.

C. *Communication skills learning objectives*

Successful managers need sound verbal and non-verbal skills in order to be effective leaders. NMs use advanced business communication techniques that persuade

higher management, and build a smooth and positive connection with others. At the end of the workshop, participants are expected to:

➢ Utilize Emotional Intelligence and Interpersonal relationships in effective conflict resolution, creating a trusting environment, and showing understanding of the needs and feelings of the followers.

➢ Maintain credibility and trustworthiness by following on promises and concerns, and establishing a positive balance between individual needs and organizational goals.

➢ Manage negative emotions in a constructive way, to inspire desired behaviors and manage undesired behaviors.

D. *Leadership skills learning objectives*

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

➢ Manage personal growth and progress through education advancement, continuing education, and professional planning, engaging in professional associations and annual self-assessment and action plans.

➢ Practice ethical behavior that supports nursing standards and scope of practice.

➢ Wins the respect of followers by having knowledge of the organization strategy, structure, processes, and environment in addition to updated knowledge about health care services, treatments and available technologies.

- Inspire, motivate, and empower subordinate through proper delegation of critical tasks and through creating a challenging and positive work culture and environment.

- Influence others through role modelling professional behavior and acting as a change agent.

- Promote professional development, and encourage evidence-based practice and leadership model.

- Apply principles of self-awareness and emotional intelligence.

- Express appreciation and constructive feedback from all sources to ensure that team members input is considered and used.

G. Program Plan

The program contains blended courses that extend over four days face-to-face workshop sessions, three weeks online module, and five days of follow up sessions. Two days of the follow up sessions are face to face with the program coordinator and lecturers, and the other three days take place quarterly for a year as follow up sessions and meetings of the participants with their mentors. The program consists of three major modules. First the face-to-face platform that includes interactive sessions, individual and group activities, and case scenarios. Second, the web-based-online module will include voice-over power point presentations, video sessions, assignments, online learning activities and a professional chat space. While the third module includes a one-year mentoring support with a follow up meeting between participants and their mentor quarterly after finishing the

workshop. Teaching methods will include a combination of high and low tech participant-centered approach, using personalized learning at mentorship level, game-based, kinesthetic and inquiry based-Learning activities at the workshop sessions.

Program participants will have to attend a total of six days workshop sessions. Four-days dedicated for the face-to-face interactive workshop session, lectures and activities while five days dedicated for the follow up sessions over a year. Two days of the face-to-face follow-up sessions are allocated three weeks after the face-to-face workshop sessions are over. During the three weeks off sessions period, participants will have to prepare and work on two different purposeful case studies, online assignments and activities that will be e-mailed on their last day of the workshop session, in addition to the online a-synchronized power points, videotaped lectures that they have to attend on their own pace. The overall Online sessions and activities are equivalent to five days face-to-face sessions.

After the three weeks online module, the participant will attend a two days face-to-face follow up session. The first day will be a discussion of the case studies and assignments to ensure that learning objectives are met. The second day follow up will include participants putting it all together, and then each participant will meet his/her assigned mentor, build up a contact strategy and a list of personal SMART goals, plan for the rest of the follow up meetings and discuss the evaluation criteria . The rest of follow up sessions will be meetings between the mentor and the participants that is going to occur quarterly on their convenience.

For the Management component, two days of face-to-face sessions will be dedicated to stress on Nursing Management topics through lectures, class activities, case scenarios, and follow up sessions. In addition, online resources and asynchronized videotaped lectures will be accessible for the participants throughout the program. Participants will also expand their budgeting skills through a review of basic concepts of financial management, and budget-building process. The NMs will have the chance to select and apply economic principles on healthcare finance in an interactive and participatory activity. Moreover, Six Sigma session will be followed by a Classroom activity where participants will identify problems at their work area as individuals and groups and use a process improvement format that suits the situation, and come up with a solution on a round table with their NMs colleagues.

In addition to the face-to-face sessions of Human Resources Management, the follow up online sessions will include a power point presentation and two case studies. The case studies permit the participant to practice their acquired skills to select a best fit for a job vacancy at their organization using evidence-based approach for recruitment selection and interviewing.

Performance improvement session will be followed by class activity in which the participants are asked to plan an improvement project that they believe it is needed at their working units. Each participant will demonstrate how he/she is going to plan implement and delegate critical tasks for the improvement project. Two days from the workshop will be dedicated for face-to-face sessions on Quality management. A total of three weeks of

asynchronous online activities that are equivalent to a two days' face-to-face module will be dedicated to this unit.

One-day face-to-face sessions will be dedicated for the Principles of successful communication, in addition a total of two days online presentations, lectures and assignments that are equivalent to a one week of a-synchronized online sessions. Communication sessions will include Oral communication skills that permit for the participants to master active listening, presentation skills, public speaking, communication strategies from intrapersonal to organizational levels, and emotional intelligence. The main class activity for the oral communication includes participants' videotaping themselves on their first day session giving a persuasive presentation and providing feedback for an ethical dilemma so that they can develop and compare their performance in the follow up sessions.

In addition, participants will also master written communication skills that allow them to write letters correctly, executive summaries, and business reports. They will have the chance to apply their acquired skills and write three formal letters that will also be discussed during the follow up sessions. The letters will target different recipients for different purposes. One addressing his/her nurse leader requesting to replace an old machine on the floor with a new expensive technology ,the second letter addressing staff subordinate communicating to them a change in the work process, and a third letter to the Ministry of Public Health and Order of Nurses convincing them of a nurse-led program.

For Leadership Competencies, a one-day face-to-face workshop to discuss various leadership styles, and approaches with emphasis on Transformational Leadership. Online

resource will be dedicated for the participants to watch recorded video sessions that target

relational Leadership focusing on relationships building and trust, creating and empowering

work environment, creating a culture that supports knowledge development, balancing

system complexities and competing values and priorities. The one-week online sessions

provided for the videos and asynchronized lectures for the leadership topic is equivalent to

a one-day face-to-face sessions.
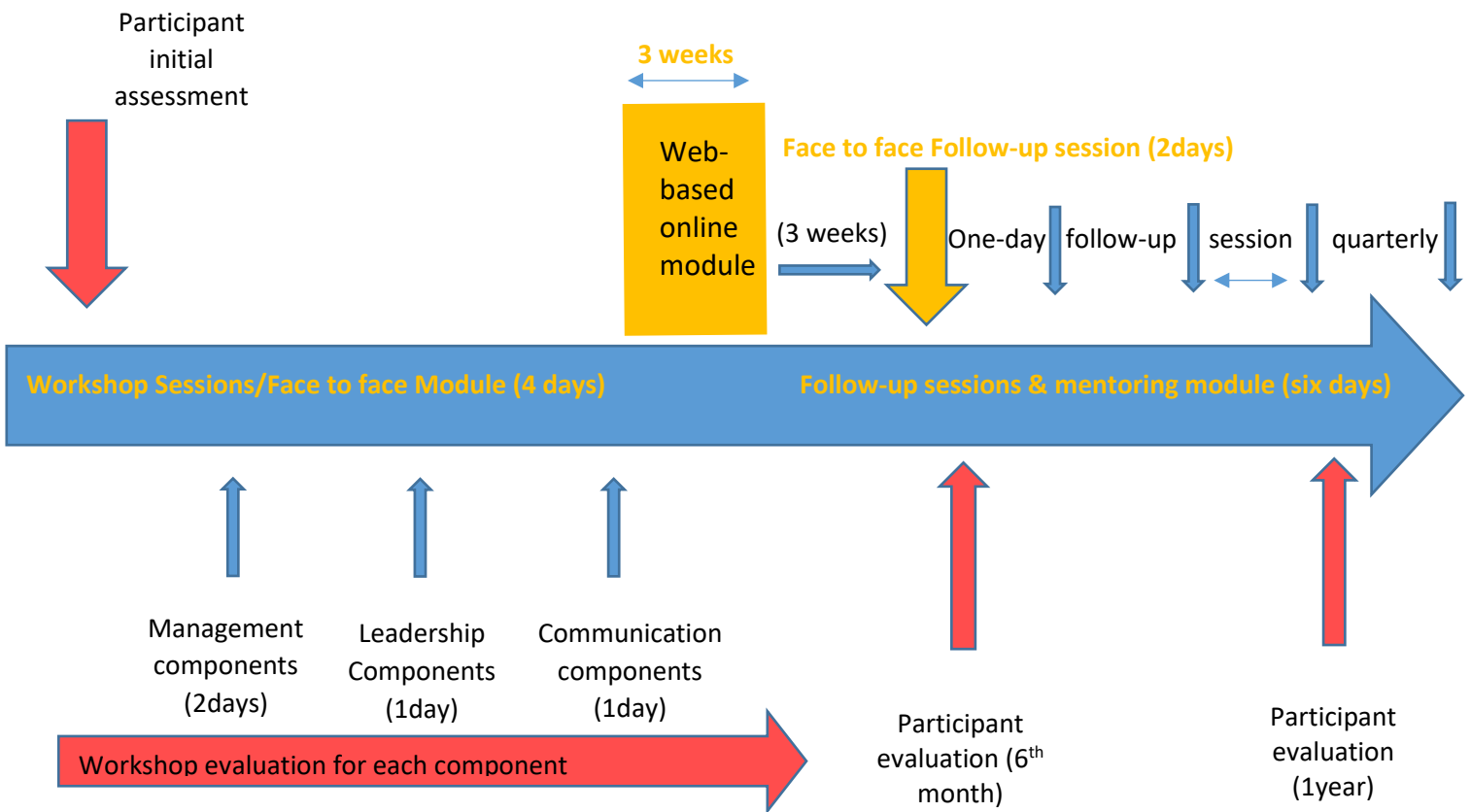
Diagram 1. Showing program module with time intervals

CHAPTER IV
A. BUSSINESS PLAN

1. Statement of Purpose

This project provide a continuous professional development program for all levels of NMs practicing Managerial and or Leadership position in a Lebanese health care facility, in an attempt to enhance effective leadership that impact nurses retention, patient satisfaction and outcome.

2. Financial Resources

The program will be implemented in different stages .First, the program piloting stage will be started with a focus group of maximum twenty participants. At this stage from the program, NMs will be participating free of charge, in which funds and resources will be either sponsored, volunteering or funds collection. The program piloting phase will take place at the Order. Since participants will be coming from different far away areas in Lebanon and in order to diminish the long distance learning deterrent, sleeping arrangement for participants coming from outside Beirut Governance will be secured. Whereas, in later stage the program will be conducted at a selected University hospital at each of the eight Governance and transportation will be on participants' expenses. The sessions and activities will be held at the conference room of the Order. The Order and program sponsors will fund the expenses of catering and stationary at the pilot phase.

Participants' comments and suggestions, program coordinators notes, limitations

and program evaluation, will be taken into consideration to improve program delivery and

content. Pre and Post surveys will be electronically collected and analyzed, if results meet

the program expectations and objectives, the program will be then offered to be accessible

and or required as an educational program for all NMs in Lebanon. At this level, applicants

will be paying a satisfactory fees range for participation. Financial benefits will be

distributed to the hospital hosting the workshop the thing that will encourage hospitals

compete to sponsor and host the workshop.

3. Budget Assumptions:

Expense Category	Cost Assumptions
Local Psychiatry Advanced Practice Nurse & a senior Nurse administrator	4000$ (2000$ each)
Consultants' (presenters) transportation	500$
Catering	1500
Stationary	1000$
Sleeping arrangements (Pilot phase)	2000$
Total	9000$

Table 3. Program budget assumptions

Local consultants will be selected from each Mohafaza and asked to volunteer for

program implementation at their area. The total expected working hours in each program

implementation for each consultant I,s around 42 hours. The 32 hours include the face-to-

face sessions, and time of the online module interaction. Nine thousand dollars to be covered by the Order of Nurses for the Program and the Pilot phase, and the cost assumption for the program implementation in later stages seven thousand dollars deducting the sleeping arrangements in piloting.

4. Human Resources

As for the Human Resources this is a National Nurse Manager Leadership and Management development, presenters and consultants will be invited to share their expertise and knowledge, and to be a role model in developing a sustainable Nursing Leadership and Management Program as part of their self-development and duty to serve the new upcoming professional NMs society; for a nominal amount of money or no expense. Presenters are advised to have a psychiatry background to deliver communication sessions and an administration background for management, leadership and quality sessions. Whereas the surveys will be analyzed by graduating students of Nursing and or Public Health faculty according to each governance University Hospital programs available. Surveys will be analyzed at no expense as part of their research assignment and service for professional societies and professionals.

5. Marketing

The program marketing will use team-based approach to encourage NMs to participate, in which every group of four NMs registering as a group they will receive an added participation membership for the program free of charge. Moreover, National key leaders of the Lebanese Health Care sector and Accrediting organization with global

nursing leadership vision such as AONL and ANCC representatives will be sent an invitation letter to attend virtually certain targeted sessions that allow them to give their experience and knowledge input besides making them recognize program significance and gain their support. In addition to the team-based approach and inviting key leaders, the content of the invitation letter to the Nursing Directors will shed the light on the promising institutional outcomes for NMs attending the program in terms of quality and finance, the thing that encourage Nursing Directors and or Leaders to sponsor and support their Managers to attend the program.

6. Program Objectives

The learning objectives of each competency arena identified the Leadership practices and Management competencies that would be achieved on the follow up sessions at different intervals of the program, starting with output, outcome and the final impact on organization and individual level (Appendix B).

B. Evaluation

In order to receive support, sponsorship and the buy in of stakeholders and hospitals administrations the program must show a positive evaluation reflecting enhanced outcomes and impact. The program evaluation will consist of two entities, the first entity evaluate the program itself in terms of program content and delivery method, and in terms of program effectiveness through evaluating the impact on patient, and unit outcomes. A formative evaluation tool will be used to evaluate program content, speakers, strategies and environment, in addition to participant's satisfaction and suggestions (Appendix C) .The

evaluation tool will be distributed at the end of each day session to be analyzed and treated by the program coordinators. Whereas program effectiveness and impact of the program will be evaluated by comparing the NM Leadership and Management performance impact on unit, and patient outcomes and staff satisfaction and retention before and after a year from the program.

The second evaluation entity monitors participants' progress at the four competency areas throughout the program. Participant's progress evaluation will be conducted at three different times throughout the program. The same tool will be completed three times by the participants him/herself, the mentor and a subordinate. The first pre-assessment survey will work as a pre-assessment data to compare the second and third evaluation results of the same tool at six, and twelve months from the program. The tool used has three different levels of participants knowledge "Sufficient, Acceptable, insufficient" and three levels for participants skills progress "Never performed, limited experience, performed competently" (Appendix A). In addition to the tool used for participant's evaluation, program coordinators and participant's mentors will also evaluate participant's progress. Program coordinators will be going over and providing constructive feedback on the assignments and activities and make sure that the learning objectives of each component embedded in the case studies and online activities are met. Mentors will provide an additional feedback about participant's progress, each according to his/her personalized set of plans and objectives they agreed for on each follow up session.

C. Recommendation for implementation

This program will move forward the Lebanese healthcare nursing leadership CPD as it provides the NMs the knowledge and essential skills to evidence based decision-making. For the program to achieve its intended outcomes and objectives and in order to be accessible through the order of Nurses, the program will be based on the CPD cycle and system adapted from Moore et al., (2009) presented in figure 2, in addition to the major barriers and suggested recommendations regarded throughout the literature.

First, the program content and main objectives are based on a thorough assessment of the perceived needs for the Lebanese NMs, a wide and evidence-based literature review, and current international programs. Second, the implementation strategies recommend a blended learning model and a combination of teaching methods including high and low tech participant-centered approach, the usage of a personalized learning, game-based, kinesthetic and inquiry-based learning activities. A professional and regulatory framework such as the NMLC evidenced based framework will be used in this program. Another valuable point for the project implementation recommendation is that the program well describes its objectives, contents, teaching strategies and assessment tools, making the program outcomes replicable and measurable. Eventually, the program will be accessible through the Order of Nurses, and delivered across the eight Lebanese Mouhafazat each at a different time with a maximum class capacity of twenty participants.

Figure 2. The continuing professional development cycle and system Adapted from Moore et al., 2009
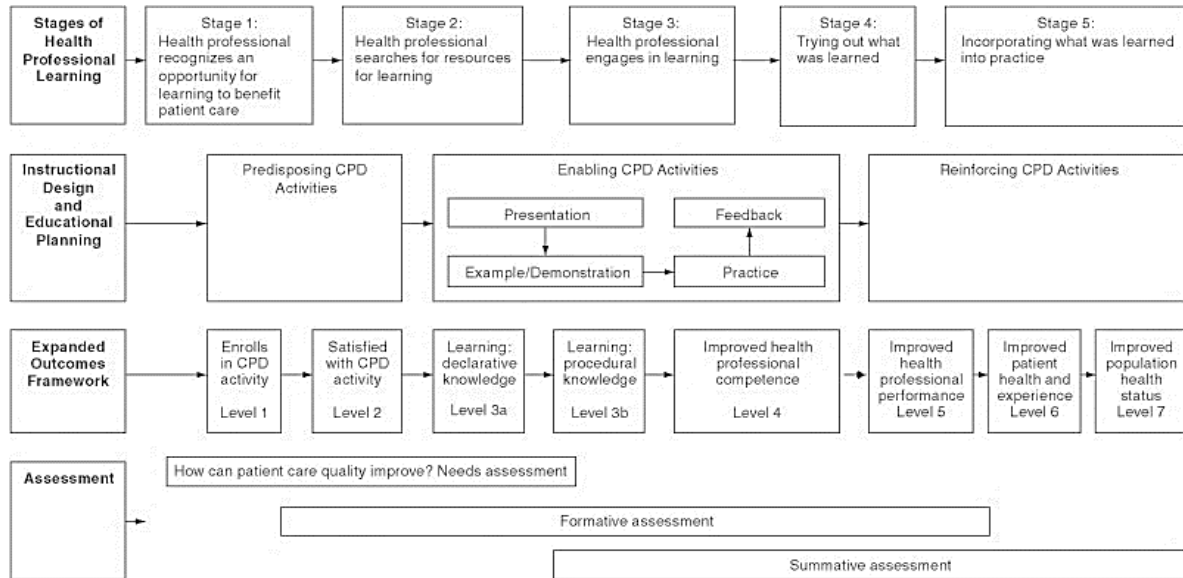
Conclusion

Continuing professional development proved to have positive outcomes for healthcare organizations in terms of patient quality of care and safety, nurses' satisfaction and financial outcomes for institutions. It also pledge the availability of proficient pipeline of qualified leaders for the future, and efficient nursing management and leadership performance in today challenging environment. NMs need to have the role-required competencies to lead and manage their units. Those required competencies varies according to international nursing organizations, healthcare systems and even nations, however this program content are specific to the Lebanese NMs learning needs topics overlapping with the AONL NM competencies.

The main purpose of this project is to deliver an effective evidenced based leadership and

management program for the Lebanese NMs, and hopefully extend to benefit other

countries.

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APPENDIX (A)

Nursing Management Skills evaluation tool

Participant Name: Evaluation and feedback provided by:

Items	Knowledge			Skills		
	Sufficient	*Acceptable*	*Insufficient*	*Never Performed*	*Limited Experience*	*Performed Competently*
1. Assess and identify staff and unit needs						
2. Develop yearly plan for the unit						
3. Follow-up on daily unit operations						
4. Role model work organization for your staff						
5. Support unit staff for performance improvement						
6. Utilize measures to motivate staff members and empower them						
7. Delegate tasks properly to the right persons						
8. Help staff members manage their time effectively						
9. Solve daily problems of the unit effectively						
10. Make the right decisions for the staff and the unit						
11. Enhance team work among staff members						
12. Support staff members' professional development						
13. Utilize positive disciplining for staff members for better performance						
14. Evaluate the outcomes of nursing interventions						

Items						
15. Lead quality initiative						
16. Manage your time effectively						
17. Assess staff learning needs for better performance						
18. Utilize evidence-based practice						

Items	Knowledge			Skills		
	Sufficient	*Acceptable*	*Insufficient*	*Never Performed*	*Limited Experience*	*Performed Competently*
19. Use effective communication with staff, colleagues, and administration						
20. Coordinate patient care and staff efforts effectively						
21. Collaborate with my fellow nurse managers to enhance care outcomes						
22. Maintain positive relationships with other departments/services in the organization/hospital						

APPENDIX (B)

Program Objectives

Nurse Manager Program Objectives

Competency /Framework structure	Output (0-6 months)	Outcome (6-12month)	Impact (after 1 year)
Management /Leading the Organization	Use different Management tools and skills to better resolve conflicts and develop their evidenced based decision-making process. Manage budget and financial resources and deal with third party payer, insurance arrangements, reimbursement to payer. Select and implement the suitable economic principle for a healthcare organization. Evaluate staffing patterns and needs and manage human resources within the scope of labor. Use evidenced based and valid staff selection, recruitment, and interviewing techniques	Properly use the Six-sigma problem-solving methodologies, such as DMIAC (Design, Measure, Improve, Analyze, &Control) process improvement concept. Develop scope of practice, role definition and implement changes consistent with scope of practice Manage projects successfully, through properly identifying roles, establishing timelines, allocating resources and manage project plans	Improvement in the overall financial performance and enhanced quality indicators for the unit, proper allocation of assets and human resources. This will be evidenced by increased improvement projects, increase in safety and quality reporting, decreased unit quality and safety incidents.

	Establish strong collaborative relationships Balance between long-term goals of the organization with its immediate needs		
Leadership Skills / Leader within	Inspire and motivate subordinates and drive them to take actions and initiatives Balance system complexities and competing values and priorities Practice ethical behavior that supports nursing standards and scopes of practice. Wins the respect of followers by having the knowledge of the organization strategy, structure, processes, and environment .knowledge about health care services, treatments and technologies. Act as a change agent Apply principles of self-awareness, emotional intelligence and practice a leadership theory Express appreciation and constructive feedback for diverse knowledge from all sources to ensure that team	Creating and empowering work environment ,creating a culture that supports knowledge development Manage personal growth and progress through education advancement, continuing education, and profession planning, involving in professional association and annual self-assessment and action plans. Proper delegation of critical tasks and creating a challenging and positive work culture environment Influence others through role model professional behavior Promote professional development, and encourage evidenced based practice, and leadership model	Healthy and positive work environment with staff having patient safety and quality of care as top priority and shared goals, in addition to staff high morale. Use transformational leadership style Achieve a Just Culture environment

	members input is considered and used		
Quality/Leading the Organization	Identify key performance indicators (Nursing sensitive indicators and Quality Indicators), and establish the appropriate data collection methodology, and performance evaluation criteria of the findings. Identify the steps involved in planning for a quality improvement program, establish quality metrics, and use quality improvement and management tools. Lead and facilitate performance improvement teams to enhance patient safety. Advocate Just culture reporting environment, and support safety surveys and recommendations.	Analyze and respond to key performance indicators and data collected and outcomes measured. Communicate patient care standards as established by the Ministry of Health, accreditation and regulatory quality agencies. Maximize care efficiency and throughput, by appropriately aligning care delivery model and staff performance with the key safety and economic drivers.	Improvement in quality of patient care as evidenced by enhanced nursing quality indicators Achieve national and international quality accreditation on organizational level
Communication Skills/Leading others	Exhibit effective conflict resolution skills and create a trusting environment Show understanding of the needs and feelings of the followers	Establish a positive balance between individual concerns with organizational goals and objectives, staff engagement in decision-making	Increase in Nurses satisfaction and decrease in their turnover rates, evidenced by the annual nurses' satisfaction surveys, and increase in team

		Appropriately invest in others capabilities and develop collaborative and productive work environment	achievements and improvement projects.
	Maintain their credibility by following on promises and concerns Manage negative emotions in a constructive way, to inspire desired behaviors and manage undesired behaviors		

APPENDIX (C)

Workshop Evaluation Questionnaire

Sample of Workshop evaluation questionnaire

Workshop Name:_____

Training location:_____

Level of education:_____

Date:_____

<div align="center">INSTRUCTIONS</div>

Please circle your response to the items. Rate aspects of the workshop on a 1 to 5 scale:

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 this workshop. Your feedback is sincerely appreciated. Thank you.

1) The program as a whole was beneficial   1 2 3 4

   5 N/A

2) The sessions and training meets program-learning objectives   1 2 3 4

   5 N/A

3) The program content is relevant to my scope of practice   1 2 3 4

   5 N/A

4) The program was enjoyable   1 2 3 4

   5 N/A

❖ **Workshop content**

5) The objectives of the training were clearly defined   1 2 3 4

   5 N/A

6) Relevance and usefulness of content   1 2 3 4 5

   N/A

❖ **Learning Environment**

7) Instructional materials (handouts, visuals aids, projector)   1 2 3 4

   5 N/A

8) The techniques used (role-play, case scenarios etc...) were effective 1 2 3 4

   5 N/A

9) The pace of this workshop was appropriate   1 2 3 4

   5 N/A

10) The difficulty level of this workshop was appropriate   1 2 3 4 5

    N/A

11) The meeting room and facilities were adequate and comftable   1 2 3 4

    5 N/A

12) Participation and interaction were encouraged   1 2 3 4

    5 N/A

13) Facilitators were helpful   1 2 3 4

    5 N/A

❖ **Self-paced delivery**

14) The content was organized and easy to follow   1 2 3 4

    5 N/A

15) The workshop was a good way for me to learn   1 2 3 4

    5 N/A

❖ WORKSHOP RESULTS

16) I accomplished the objectives of this workshop.   1 2 3 4
     5 N/A

17) I will be able to use what I learned in this Workshop.   1 2 3 4
     5 N/A

Workshop session title:_____

Speaker:_____

18) Speaker showed subject matter knowledge and expertise   1 2 3 4

     5 N/A

19) Speaker's presentation was effective, clear, and responsive to participants   1 2 3 4

     5 N/A

20) Which topics or aspects of the workshop did you find most interesting or useful?

21) How would you improve this workshop?

22) What is least valuable about this workshop?

23) What is most valuable about this workshop?

APPENDIX (D)

PROGRAM WORKSHOP AGENDA

The Science of Managing the Business	Emerging Leaders Program Objectives
Day One (9am-10:30pm)	**Optimizing the Leader within**: A professor from the order of the Lebanese Order of Nurses will address the importance of Self-development, continuing education (CE), Continuing professional development (CPD) and education self-fulfillment. (1.5hr)
10:30-11am	Coffee break (30mins)
11-1pm	**Management tools and skills**. A National senior leader will demonstrate available resources that aid in better resolving conflicts (Six sigma problem-solving methodologies) and develop NMs evidenced based decision-making process. (2hrs)
1-3pm	**Financial Management** A senior hospital Finance Manager will address Healthcare organizations economic principles. Budget and financial management on unit and organization levels. (2hrs)
3-4pm	Lunch break (1hr)

4-7pm	**Human Resources Management** (National Human Resources Director) Human resources management principles (staff development, satisfaction strategies, appraisal and performance improvement) Evidenced based selection and recruitment process Staffing and Scheduling
Day 2 : The Science of Managing the Business	
9am-11am	A professor of Adult psychology will reveal evidenced based **Conflict Resolution** skills and tactics. (2hrs)
11:30-12pm	Coffee break (30mins)
11:30am-2:30pm	**Manage, lead & facilitate Performance Improvement projects** This is a highly interactive session that will be delivered by a senior advanced adult psychiatry Nurse. Efficient time & project management concepts. (3hrs)
2:30-3:30pm	Lunch break (1hr)
3:30pm-5pm	**Effective Team building** given by a senior administrator (1.5hrs)

Day Three : Leading Others **8am-12pm** **Coffee break included(40mins)**	**Effective Team building and Learning to work together** session. Team dynamics, objectives and goals, tasks delegation and assignment will be experienced by the participants in a role-play were they will have to work as a team to solve conflicts and operate a virtual unit. A Professor of adult psychology will provide this session and the activities. (4hrs)
12-1:30pm	**Idealized Influence, & Individualized consideration.** How to develop trust with subordinates, seek different perspectives ideas and shared decision making
1:30pm-2:30pm	Lunch break
2:30pm-5pm	Promoting and sustaining **healthy work Environment, & Organizational Culture.** Staff satisfaction, motivation & empowerment, Generational Diversity, assertiveness, and ethics, role model, and delegation concepts.
Day Four :Communication **9am-11am**	Principles of **effective verbal and non-verbal communication** and **Emotional intelligence** given by a Psychiatry Advanced Practical Nurse. (2hrs)

11-11:30	Coffee break (30mins)
11:30am-3:30pm	**Advanced business communication** techniques that persuade higher management, and build a smooth and positive relationship with others. Either a senior nurse administrator or successful finance manager would give this session.(4hrs)
3:30pm-4:30pm	Lunch break (1hr)
4:30pm-6pm	Presentation & writing skills (1.5hrs).