Leadership Coaching .... Smarter Than Cliff Notes

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Excited, energized, motivated, eager, enthusiastic – all words to describe how a nurse manager or director feels about the opportunity to advance or transition into a new leadership role. Conversely, there can be moments of angst, indecision, and uncertainty as unknown situations call for untried solutions. And once the on-boarding process and close connection with a formal preceptor is concluded, new leaders can at times feel uncertain about next steps in their role transitioning process. Often new managers question their decisions but frequently there are limited trusted colleagues or mentors to assist in difficult problem solving circumstances. These are the times when nurse executives seek additional support engaging outside assistance in order to ensure the new leader is successful. In steps the professional coach; a seasoned nurse leader who can assist with the next stage of essential role transitioning.

Formal coaching is described as one on one interactions that occur with an objective third party, who is not tied to the organization or other executive or company influences, and can provide a focus that other forms of organization support cannot.¹ In the case of the Kirby Bates Associates coaching model, the coach is charged with supporting the Nurse Manager in acclimating to the role of unit based leader ensuring confidential support along the developmental journey. The ultimate goal is the provision of essential skills and leadership competencies interwoven into an organized individualized coaching plan.

The idea of a “coach” brings forth various visceral responses when managers are initially introduced to the concept. Some are thankful for the opportunity to share work experiences with a confidential colleague. Some are highly aware of a missing skillset they would like developed. Others may think they are being singled out due to poor performance or for not meeting expectation. Leadership as we define it does not come naturally to many individuals and is more a talent than a skill.² But with the assistance of a professional coach, the incorporation of transactual skills, the goals and agreements, coupled with transformational leadership skills, morality and motivation, the ultimate
success of the manager can be actualized.\textsuperscript{3} The coach is there to assist with real time problem solving, competency education, and the sharing of life learned lessons that guide problem solving and adult learning.

Throughout the evolution of the nurse manager role; financial acumen, budget development, human resource expertise, clinical outcome measurements, business skills, relationship development, and technology management on multiple levels, has gained higher levels of organizational importance. Administrators, regulatory agencies, members of the medical staff, and the community, have all come to rely on the Nurse Manager as the pivotal leadership element contributing to significant outcomes. The investment in the development of the nurse manager is critical to achieving and sustaining high performing clinical work teams as well as guaranteeing achievement of organizational goals.

The Kirby Bates Associates coaching program is designed around several key elements and incorporates face to face site visits geared towards the exploration of skillset proficiencies. An intake assessment is conducted by the coach and includes one on one meetings with the new leader; observations in the clinical environment; interviews with peers, staff, physicians and superiors using open ended behavioral questions; and the manager’s completion of the American Organization of Nurse Executives “Nurse Manager Skills Inventory Tool”.\textsuperscript{4}

The interview and observation elements are the most pivotal portions of the program as they evaluate the new leaders valued strengths as well as incorporate productive criticism. The synthesis of these collected data elements results in the compilation of a written initial assessment report, which outlines findings and next steps, along with a timeline, of the coaching process. This report is reviewed with the hiring manager and nurse executive as well as the new leader. An agreed upon course of action is determined and progress is measured during the six month coaching engagement.
Many times, the new manager will identify the business and financial aspects of their new role as the most important element of focus. But more frequently, it is the relationship development, political awareness, and communication elements that require needed intervention. One way to manage the disconnect between the manager’s personal assessment and those obtained during the intake assessment is to summarize solicited responses to the open ended interview questions in a simple spreadsheet outlining overarching themes. This diminishes the personal aspect of the message and focuses the work on general perceptions and desired results. Confidential coaching, competency education, and supportive communication are provided by the coach in person and also using web based distance learning mechanisms.

Learning modules are tailored for specific competencies and human resource elements. Action learning is employed allowing the new leader to gain confidence and alter their style as needed. Coaching suggestions are always delivered in a productive exploratory manner supporting introspection and the use of appreciative inquiry.\textsuperscript{5} Positivism is the basis for all learning interventions supporting better understanding of complex problems. Implementation of mutually agreed upon actions ensuring the smooth transition of the Nurse Manager includes the development of unit operational plans, understanding roles, timelines and milestones of project management, and demonstration of foundational and critical thinking skills.

As the coaching engagement continues, progress in competency achievement is measured and discussed with the manager. Concise updates are provided to the nurse executive, and hiring manager when applicable, and course adjustments are made along the way. At the conclusion of the six month engagement, a final written report is developed by the coach and shared with all parties. Recommended strategies for the continued success of the Nurse Manager and ongoing confidential consultation and support by the coach are offered, and frequently taken advantage of. A coaching evaluation tool is completed by the manager and also shared with all parties.
Since the inception of the coaching program in 2008 at Kirby Bates Associates, thirty leaders, comprised of nurse managers, directors and nurse executives from eight organizations in six states have participated in the coaching process. Participant outcome evaluation ratings, measured on a scale of one to five with five being the highest, indicate 95% of all participants consider the program to be at the highest level. More importantly, evaluation comments reveal the following participant views: “Most importantly, my coach gave me emotional support. I always looked forward to our meetings and was excited to share any good or bad news.” Another manager stated, “The discussions with my coach were the best; her review of content, examples, and open communication style were appreciated. She was nonjudgmental, open and available”.

Furthermore, retention statistics of all participants reveal that out of the 30 participants, twenty-two, or 73%, have remained in their respective leadership positions with the longest being a little over seven years. Five leaders have subsequently been promoted and as is sometimes the outcome, three individuals were assessed to not be the correct fit for the position and were ultimately not successful in their respective roles.

Sustained results from the program demonstrate the advancement of the new leaders’ self-reliance while supporting the development of their respective work team. Participants learn to capitalize on their strengths while diminishing weaknesses, a key aspect of appreciative inquiry and transformational leadership. More importantly, managers learn to keep their options open and expect good surprises along the way. They stay committed to the leadership journey striving to be the best nurse leader they can be.

From a CNO perspective, it has been identified that the Nurse Manager position just might be one of the most difficult positions in the hospital environment. The large span of control, defined as the number of direct reports, coupled with a 24/7 environment, make the workload excessive. Add in the financial pressures to keep within budget and vacillating inpatient census today, and work life balance
becomes very difficult to achieve. This scenario does little in creating a very attractive position to those looking on. Effective Nurse Managers are key to staff satisfaction and retention, quality of patient care, and achieving organizational goals.  

Over the years, Nurse Managers have been chosen because they filled an interim position or were an informal leader. There never was much formal training for this position but rather a very soft approach of learning as you go. Some succeeded and some did not. In the past, there has not been much attention given to succession planning. What many organizations are experiencing now is a lack of interest in this position by younger staff. This has caused healthcare and nursing executives to look at the Nurse Manager role differently. Leadership training, ongoing support, and active succession planning have taken on new meaning. AONE has reported vacancy rates in the nurse manager role to be as high as 8.6%.  

The alignment with purpose is one of the two essentials of Nurse Manager engagement; the other essential being emotional mastery to meet the unique challenges of being in charge. At Main Line Health, once the need for training and coaching was identified, we began thinking of the best resources needed to provide optimal results. Working with a consultant helped us identify achievement traits and personal development skills needed to be successful, aligning these with the AONE nurse manager skills inventory. Together with our managers, we then began to identify where their strengths lie and in what areas they envisioned opportunities for growth. Obviously this varies by manager but allows for a ‘custom fit’ matching consultant expertise with each individual manager.

Together, the CNO and consultant planned the message for the managers. We did not want them to feel we were offering ‘remedial’ help nor suggest this was solely performance driven, but rather present this as an opportunity for professional growth, as well as personal growth, for the individual.
Receiving this in the right manner, the Nurse Managers actively worked with their ‘coach’ to outline opportunities for their own growth strategies.

Outcomes were important to identify as well. While engagement and retention were foremost, effective use of the leadership skills learned was also of value. As a result of this investment, we witnessed the following: zero turnover and increased feelings of satisfaction, empowerment, and ownership after five years’ time. This has resulted in increased quality outcomes at our organization and improved employee satisfaction. When we compared managers who received this support versus those that did not, the coached group ranked higher in the leader development process using the classic Nine Box grid to identify talent management. In the coached group, the majority landed in the future star, solid performer, or key performer categories.

In closing, executive coaches can be very helpful in training effective, strong and engaged nurse managers. The outcomes metrics indicate this is a needed investment for the future success of our leaders, wherever their career paths may lead them. And indeed, the personal relationship and connection with the coach has sustained long term relationships with many managers who continue to seek advice and guidance. The process is indeed better than any written manual or “Cliff Notes”.
References


