Preparing Front-line Nurse Managers for Change:
Lurie Children’s Leadership Engagement Academy

By Andrea Fitzgerald

A leadership development program at Ann & Robert H. Lurie Children’s Hospital of Chicago provides front-line nurse managers with the support and leadership training needed to navigate ongoing change while creating a supportive and engaging environment for their teams.

Committed to advancing clinical excellence, Lurie Children’s began its quest to achieve its fifth American Nurses Credentialing Center (ANCC) Magnet® designation during a period of rapid growth and expansion. In 2017, organizational leadership proposed a major inpatient expansion project to increase from 288 beds to 364 beds to advance the hospital’s mission to care for more children. That same year, Karen Richey, associate chief nursing officer, and Stephanie Waite, director of Leadership and Organizational Development (LOD), identified opportunities to improve staff–manager relationships and the work environment on the front line when analyzing employee engagement survey results.

These improvement opportunities were confirmed in listening sessions with senior leaders. During these sessions, front-line nurse managers shared that, due to competing priorities, they were spending less time than they wanted with their direct reports. They also expressed their interest in finding ways to enhance their leadership skills to have a greater impact on their units.

“We felt that we could design an internal process to provide the necessary tools that all our front-line managers desire and that are also best in class and best for our culture,” said Waite. Empowering front-line leaders in this way would be particularly beneficial as the hospital moved forward with the inpatient expansion project, which would entail building a new Cardiac Care unit, expanding the hematology/oncology unit, renovating the intensive care unit, and accommodating multiple patient and staff moves, among other changes.

Determined to help the workforce prepare for and manage these disruptions, Richey and Waite created the framework and curriculum for a voluntary leadership development program called Leadership Engagement Academy.

Developing the Framework

During each cycle of the hospital-wide employee engagement survey, Lurie Children’s chief nursing officer establishes the goals and focus areas for nursing excellence and engagement for the year. The goals for 2017, established by CNO Brian Stahulak, were autonomy, leadership access and responsiveness, and RN-to-RN teamwork and collaboration. To align and advance these goals, Richey and Waite began drafting a preliminary framework for the LOD program, called “Leadership Engagement Academy.”

AT A GLANCE

- Embarking on a period of dramatic growth and expansion in 2017, organizational leadership at Ann & Robert H. Lurie Children’s Hospital of Chicago focused on supporting and empowering front-line nurse leaders to manage change.
- After reviewing employee engagement survey results and determining key areas of opportunity in the manager domain, the associate chief nursing officer and the director of Leadership and Organizational Development (LOD) worked together to design a framework and curriculum for a voluntary leadership development program called Leadership Engagement Academy.
- Early outcomes data from units with high nurse manager participation in the program indicate improvement across key engagement survey items including nurses’ perceptions that their ideas and suggestions are seriously considered, that they are involved in decisions that affect their work, that their manager encourages teamwork, and that their manager supports free exchanges of opinions and ideas.
“We wanted to help our managers improve not only their own engagement but the engagement of their nurses and staff on the front line,” Waite said. To this end, the pair analyzed the engagement data of seven critical and acute care units and drilled down to the lowest scoring items in the manager domain. These six questions, which align with the ANCC Nursing Excellence standards, became the pillars of the Leadership Engagement Academy (LEA).

- My ideas and suggestions are seriously considered.
- I am involved in decisions that affect my work.
- When appropriate, I can act on my own without asking for approval.
- The person I report to encourages teamwork.
- The person I report to supports free exchanges of opinions and ideas.
- The person I report to is responsive when I raise an issue.

To deliver the program in the manner in which they had envisioned—as a series of four 2-hour, in-person learning sessions, with the last being a showcase for participants to share what they’ve learned—Richey and Waite had to carefully consider how to use the time most efficiently to improve managers’ capability within the six key areas while also being cognizant of the difficulty of taking front-line nurse managers off the floor.

“For the duration of the program, nurse staffing numbers were lower, and the high acuity made it difficult for managers to step away and attend,” Waite said. “We worked with each nursing director on the floor to specify the time commitment and invited them to the ‘Portfolio Showcase’ at the end of the program so that they felt vested throughout the four sessions. We wanted them to be proud of their participants, which in turn allowed them to innately support their managers to attend the other sessions.”

Waite and Richey also noted the anticipated attendance at each session to ensure that they could provide the most support for the floors proactively and set this program as a priority. “If participants were having difficulty with attendance, we would work with the director to ensure the manager was able to participate,” Waite said.

**Designing the Curriculum**

As requirements for health care leaders to complete more education and training proliferate, Lurie Children’s moves against the tide by preserving an “opt-in” leadership development culture, where leaders choose to participate in LOD programming. This self-selection was important to the success of LEA, according to Waite. By inviting rather than mandating all in-patient front-line leaders to attend, she and Richey were able to further demonstrate that the program was a development opportunity and not another to-do item on their managers’ growing list of responsibilities.

The pair made the program interdisciplinary, inviting nurse managers as well as managers from respiratory therapy, neurodiagnostics, ECMO, and other departments. “A lot of times during a session, the group was divided into smaller pods, so a respiratory therapy manager may have been paired with a NICU manager,” Waite added. Pairing people whose paths usually don’t cross on a daily basis helped advance alignment across the front line and improve cross-functional collaboration, she said.

By combining internal resources and industry research, Waite created the following discussion-based curriculum that allowed managers to immerse themselves in the content, apply it in the classroom, and plan how they were going to apply it outside the session.

- The Highly Engaging Leader: Personal Leadership—Connect leadership characteristics to employee engagement. Identify key concepts related to autonomy, delegation, empowerment, and decision making. Apply concepts to departmental action plans to optimize results.

- Team Dynamics and Creating High-Impact Teams—Connect leadership characteristics to the creation of high-impact teams. Identify key concepts related to team dynamics and types of teams. Apply team concepts to action items that will affect engagement.
Leadership Access and Responsiveness: Facilitating Idea Generation and Team Decision Making—Define decision making in teams. Identify individual biases and how they affect decision making. Discuss techniques to effectively facilitate idea generation and group decision making. Apply concepts to departmental action plans to optimize results.

Learning Showcase: Reflection and Application of Concepts to Engagement Action Plans—Showcase learnings of the Leadership Engagement Academy through a presentation and discussion. Listen and learn from peers’ reflection and growth. Identify key action items post-program to become an even more effective and highly engaging leader.

These sessions took place over several months, running from January to July 2018. “Though we originally planned to hold one session a month, this cadence worked really well,” Richey said. “Because of the longer gaps between classes, we began each session with a review of the previous content we taught and opened the floor to the managers to discuss how they had implemented these new skills and behaviors on their units.”

Each session ended with the leaders validating what they had learned. “Managers had to fill out a job aid where they’d list best practices beneath the six engagement items targeted for improvement. This became their action plan for what they were going to do differently and a gauge for how they were improving,” Waite explained.

These exercises in self-assessment and action planning culminated in the last session, during which each participant shared a visual portfolio that demonstrated the key concepts they had learned and applied on their units. After completing an evaluation of the course, managers walked away with a certificate of completion and nursing contact hours if applicable.

Preliminary data looking at the impact of LEA participation on some of the key questions in the manager domain of the engagement survey are promising, Waite reported. At press time, an early look at an outcomes analysis of responses from front-line nurse managers from five of the 11 units participating in the LEA showed a positive correlation between program completion and moving the needle on four of the six questions in just one year:

- My ideas and suggestions are seriously considered: 3.63 to 3.69
- I am involved in decisions that affect my work: 3.56 to 3.72
- The person I report to encourages teamwork: 4.23 to 4.36
- The person I report to supports free exchanges of opinions and ideas: 4.08 to 4.16

Feedback from front-line managers who have completed the LEA program has been consistent with these positive trends. “Managers have told us they have increased their skills and changed their behaviors as a result of LEA,” Richey said, noting that she and Waite are optimistic that further gains across all the focus areas will be reflected in the forthcoming 2020 employee engagement survey.

In the meantime, the team is brainstorming ways to expand the program to sustain and spread the culture change it has nurtured. “The relationship of employees with their managers is critical for employee engagement and retention. In nursing specifically, effective leadership is critical to creating an environment that empowers nurses to share ideas, advance creative solutions, and contribute to positive outcomes,” Waite said. “Our goal is to keep advancing our progress on this journey.”