The Role of the Chief Nursing Officer: Leadership Capacity & Succession Planning in a Leadership Role

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Outline

• Role
• Leadership
• Succession
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The CNO role provides an unparalleled opportunity to build, input, and shape public policy and action (health & social), also provides a platform to work together with the nursing and health care community while providing insight to others on the value of the role of nursing.
Many nursing groups see the CNO as a built-in lobbyist.

The CNO is there on behalf of all nurses and the public not to lobby government, but to exert influence using the nursing knowledge and experience.

Bringing nursing perspective, and knowledge to the table to contribute to the development of Health/social Policy.
Complex Role, complex operation
Navigate, Lead, Feel, Anticipate....

VON CANADA
Same title, Different Roles
The Chief Nurse Role

- Executive Model
- Advisory Model
- Dispersal Model
- Program Model

*Splane & Splane, 1994*
Executive Model

- more likely to be found in unitary states where the ministry directly administers the health care system throughout the country

- applies to positions in national ministries in which the CNO exercises line authority over nurses and nursing services throughout the jurisdiction in question

- for CNOs to exercise their authority effectively in this model, they need to have a reporting relationship within the upper levels of the bureaucracy where policy and macro management decisions are made and carried out on a day-to-day basis

Splane & Splane, 1994
• This position does not carry line responsibility for the nursing workforce but, for optimal effectiveness, the reporting relationships of the position must again be at a senior level

• Where that applies, an advisory CNO position can exercise influence on ministerial policy comparable to that of the executive model, although with less bearing on day-to-day management

_Splane & Splane, 1994_
Dispersal Model (or quasi-model):

- one in which there is now no chief nursing officer though in many instances, the pre-existing CNO position was eliminated and the nurses were dispersed in the ministry's various programmes
- they may exercise some influence on policy and management as part of multidisciplinary teams and in certain situations, they may be the team or programme leader
- although relatively senior in such instances, they remain at a distance from central decision making.

* Splane & Splane, 1994
Program Model

- Manage specific programs like education, human resources, HIV and others
- Content expert/manager
- Influence/manage program level functions
- Cross functional/sector links
Role of the CNO

- Provides advice to government
- Participates in policy development
- Participates in government agenda
- Provides access to decision makers
- Participates in agenda setting
- Retains authority
- Is the visible face of nursing for a nation
- Is a unifying voice for diverse interests and roles
- Provides and promotes nursing leadership
CNO’s formal & informal role

Policy
The Policy Cycle

• 4 Major Stages:
  1. Setting the policy agenda
  2. Moving into Action/Legislation
  3. Policy Implementation
  4. Policy Evaluation
The Policy Cycle

Getting to Policy Agenda

Values & Beliefs

Problem or Issue Emerges

Knowledge Development & Research

Public Awareness

Public Policy Deliberation & Adoption

Moving into Action

Interest Group Activation

Political Engagement

Regulation, Experience & Revision

Adapted by J. Shamian and ONP, from Tarlov, 1999
Outline

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The next 10 years will be about change and flux

- Nursing’s leaders/CNOs will need to have charisma, courage, connections, a strong sense of self, intellect, stamina and most of all, be “bilingual” …
  - Leaders must speak and understand “nursing” as well as the language and world of systems, health care, politics and the rules of the game.
  - They need to know both worlds intimately and be able to explain one to the other!
What is the “BIG” picture???
The Storms are inside and outside
It’s not a walk in the park: safe to risky
The race is picking up.....
the Leadership march!!!
1. Be Visible: How?

- Regional visits
- Conference presentations, workshops
- Teaching classes
- Meet with nurses at all levels on an ongoing basis
- Forums for nursing and non-nursing stakeholders
- Links with relevant government colleagues
- Participate in Ministers and Deputy Ministers meetings Nationally and Internationally
- Regular E-mail newsletter
- Articles published in professional/academic nursing and health journals
- Bringing the face of nursing into government-visiting scholars & other invited guests
- Host National and International meetings
2. Engaging Key Stakeholders

FACE to FACE
• Regional visits
• Meet with gov. departments
• Meet with health authorities
• Meet with boards
• Facilitate meetings among sectors

ARTICLES & UPDATES
• Regular E-mail newsletter
• Share research and relevant information
• Source of expertise and advice.

MEDIA
• extensive newspaper coverage, television, lay magazines,
• In the Ministry
• Serve on numerous high level committees
• Work on health policy issues
• Network with Health Care leadership
3. Knowledge Broker

• Work with scholars, Collaborating Centres
• Build a national evidenced based policy agenda – adding one block at a time
• Disseminate knowledge widely in government and externally
• Engage and interact with broad stakeholders, including targeted individuals and groups
4. Build Strategically
5. Political Expertise and Savvy

• Critical for success:
  - Know the government structure and key members within it
  - Target those who share interest in the issue
  - Person-to-person contact important
  - Customize message
  - Keep those interested updated on the issue
6. Teamwork and Partnerships with External Groups

The leadership role of the CNOs is expressed in the many relationships they have with groups and associations both in and beyond the human services professions and reaching to the public at large.

_Splane & Splane, 1994, p. 218_
Lets Get the Direction Right!!!
(right “MY” way)
7. Relationships

• Internal
• External
• Building and Maintaining relationships
Key Attributes

- Consistency
- Perseverance
- Focused
- Purposeful
- Backward & forward
Outline

• Role
• Leadership
• Succession
Mentoring, Coaching and Succession Planning

- Recognize emerging leaders
- Support and guide emerging leaders
- Provide opportunities
- Leadership Pipeline
What is mentoring?

• “…a reciprocal and collaborative learning relationship between two (or more) individuals who share mutual responsibility and accountability for helping a mentee work toward achievement of clear and mutually defined learning goals.”

What is mentoring?

• Mentors provide 3 primary types of functions:

• Career development behaviors which involve coaching, sponsoring advancement, providing challenging assignments, protecting protégés from adverse forces, and fostering positive visibility.

• Psychosocial roles, which include such functions as personal support, friendship, acceptance, counseling, and role modeling.

• Role modeling functions that are involved with identification.

## Mentoring vs. Coaching

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<th>Coaching</th>
<th>Mentoring</th>
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<tbody>
<tr>
<td><strong>Key Goals</strong></td>
<td>To correct inappropriate behavior, improve performance, and impart skills that the employee needs to accept new responsibilities.</td>
<td>To support and guide personal growth of the protégé.</td>
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<tr>
<td><strong>Initiative for Mentoring</strong></td>
<td>The coach directs the learning and instruction.</td>
<td>The mentored person is in charge of his or her learning.</td>
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<td><strong>Volunteerism</strong></td>
<td>Though the subordinate’s agreement to accept coaching is essential, it is not necessarily voluntary.</td>
<td>Both mentor and protégé participate as volunteers.</td>
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<td><strong>Focus</strong></td>
<td>Immediate problems and learning opportunities.</td>
<td>Long-term personal career development.</td>
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<tr>
<td><strong>Roles</strong></td>
<td>Heavy on telling with appropriate feedback.</td>
<td>Heavy on listening, providing a role model, and making suggestions and connections.</td>
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<tr>
<td><strong>Duration</strong></td>
<td>Usually concentrates on short-term needs. Administered intermittently on an “as-needed” basis.</td>
<td>Long-term.</td>
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<td><strong>Relationship</strong></td>
<td>The coach is the coachee’s boss.</td>
<td>The mentor is seldom the protégé’s boss. Most experts insist that the mentor not be in the other person’s chain of command.</td>
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Benefits of Mentoring

- Mentoring relationships have been found to be related to a variety of organizational, career, and development outcomes:
  - Develops the human assets of the organization
  - Helps to transfer important tacit knowledge from one set of employees to another
  - Aids in the retention of employees
  - May result in career progression and higher incomes
  - Protégés report more career satisfaction
  - Protégés report more mobility

Dyad Model of Mentoring

• Traditional approach to mentoring with a higher-ranking, more experienced manager as a mentor to a lower-ranking, less experienced protégé

• Mentoring is a dyadic relationship that is developed by both members and has outcomes for both parties

Within the triad model, the mentoring process is outcome based.

The outcome is based on the goals and the investments, short and long term, of the involved partners: protégés, mentor, organization.

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• Mentoring must be thoughtfully planned and implemented. It cannot be left to change or good fortune

• Mentoring must be nurtured within the organizational culture

• Some institutions have established formal mentoring programs

www.med-ed-online.org
Developmental Network: the set of people a protégé names as taking an active interest in and action to advance the protégé’s career by providing developmental assistance.

Effective Mentors

- Set high standards
- Make themselves available to their protégés
- Orchestrate developmental experiences for those they counsel
- Demonstrate good people-development skills
- Are candid in their dealings
- Have good “chemistry” with their protégés
Effective Protégés

• Take responsibility for their plan of learning
• Respect their mentor’s time and confidentiality
• Never insist on special favors that the mentor has not already offered
• Listen carefully and heed their mentor’s advice
• Give back as much as they get
Don’t be alone at the race
To succeed, influence, shape we need the art/science (the heart and the head), to lead, to mentor, to build incrementally and deliberately and act strategically and thoughtfully!!!
Make the “Leadership March” Meaningful to you and to Society.
THANK YOU

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