Educating Leaders in Nursing: Faculty Perspectives

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Abstract

Recent changes in health care legislation have presented an unprecedented opportunity for nurses to engage as full partners in transforming health care (Institute of Medicine, 2010). According to diverse opinion leaders from insurance, corporate, health services, government, and higher education, nurses should have more influence than they do now on health policy, planning, and management (Robert Wood Johnson Foundation, 2010). More than ever before, nursing needs leaders, and nursing faculty are in a pivotal position to educate leaders in nursing. This article describes the findings of a descriptive study that surveyed nursing faculty teaching in all degree levels to ascertain how they prepare students to be leaders in nursing. Data were analyzed using qualitative methods. Findings demonstrate that faculty engage in self-development as leaders, promote student role development as leaders, and use multiple teaching-learning strategies to educate students to be leaders in nursing.

KEYWORDS: leadership, nurse leaders, nursing education, nursing faculty

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According to the report released by the Institute of Medicine (IOM, 2010), The Future of Nursing: Leading Change, Advancing Health, “nurses have key roles to play as team members and leaders for a reformed and better integrated, patient-centered health care system” (p. xi). This means that all nurses need to be academically and experientially prepared and positioned as leaders to positively impact the outcomes of health care and that nursing faculty must challenge students at all degree levels to develop the knowledge, values, and skills necessary to be leaders in nursing. However, a recent review of the literature failed to identify research related to how faculty prepare students to be leaders in nursing. This study was conducted to address this gap and describe how faculty educate students at all degree levels to be leaders in nursing.

BACKGROUND

Nursing needs leaders. Professional and academic standards in nursing emphasize the need for faculty to educate students to be leaders (American Association of Colleges of Nursing [AACN], 2006, 2008, 2011; American Nurses Association [ANA], 2001, 2010a, 2010b; Council of Associate Degree Nursing Competencies Task Force & National League for Nursing [NLN], 2000). Furthermore, the IOM (2010) recommends that nursing education programs incorporate leadership theory and leadership-related competencies across the curriculum.

The nursing literature abounds with examples of leadership characteristics and behaviors, including theories and models of leadership (Huber, 2006; Huston, 2008; O’Brien, 2011; Parse, 2008; Porter-O’Grady & Malloch, 2011; Robinson, 2009). However, the literature is silent about faculty perspectives related to how faculty prepare students enrolled in different degree levels of nursing programs to be leaders. Specifically, the literature lacks description, pedagogy, and strategies of how nursing faculty foster leadership knowledge and skills that promote the development of students as leaders in nursing. This descriptive study was conducted to ascertain how nursing faculty educate students to be leaders in nursing.

METHOD

This qualitative study was conducted at a private Midwestern university that emphasizes leadership in its mission. Approval from the institutional ethics review board was obtained. A convenience sample of faculty (N = 76) teaching in four degree levels of nursing programs at this university was invited to participate by completing an online researcher-designed survey. Announcements about the
study were made by the researchers in faculty meetings prior to the distribution of the online survey. An invitation with detailed information about the study was also distributed to faculty via print and electronic formats. An electronic invitation was sent to all faculty; this invitation included a link to access the survey. Two reminder messages were also sent. The online survey was available for one month. Data collected from faculty participants were analyzed using qualitative methods to describe how they educate students to be leaders in nursing.

**Survey Instrument**

An online survey was developed by the researchers asking faculty to respond to the following question: How do you teach nursing students to be leaders in nursing? Faculty participants were also asked to provide information addressing their (a) academic preparation, (b) years of academic teaching experience, (c) nursing program in which primary teaching responsibilities are assigned, (d) formal coursework in leadership, (e) nursing certifications, and (f) perceptions of self as a leader in nursing.

Face validity was evaluated by asking three faculty members with expertise in nursing leadership to review the survey and its relevance. A consultant with extensive experience in survey design also reviewed the survey for clarity and organization.

**Data Analysis**

After the online survey was completed by faculty participants, the researchers reviewed the data. One of the researchers met with a nurse expert in qualitative analysis to read the participant narratives and to create a list of preliminary codes. Next, this researcher used Atlas.ti 5.0 software (Atlas.ti, Scientific Software Development GmbH, Berlin, Germany) to further develop the coding scheme by extracting words and phrases that pertain to teaching students to be leaders in nursing. To ensure dependability of the data analysis (Guba, 1981), this researcher coded all of the participant narratives twice using the Atlas.ti 5.0 software program. Next, three of the researchers met to review the coding schema, to extract common themes, and to identify relevant participant quotations. This information was shared with two of the researchers who had not participated in the initial data analysis. The group of researchers met again to compare findings and to discuss what they considered to be key messages. The group used an inductive approach to collapse the codes into three major themes, each with multiple subthemes. Researchers also compared responses from faculty teaching in different levels of nursing programs (i.e., associate, baccalaureate, and
graduate programs) to determine if there were differences in faculty descriptions of strategies used to teach students to be leaders.

The researchers used the strategy of sharing the findings with the study participants at a departmental nursing faculty meeting to obtain feedback and to enhance the credibility of the study findings (Guba, 1981). Study participants agreed that the findings captured the essence of how they educate nursing students to be leaders and readily generated areas for further research. To enhance confirmability (Guba), study findings were also shared with the nurse expert in qualitative analysis for review and critique.

RESULTS

Participant Information

Survey participants included 44 of 76 (58%) nursing faculty: 17 participants were teaching in the associate degree program, 15 in the baccalaureate program, and nine in the master’s and practice doctorate programs (three participants did not provide demographic data). The majority of faculty participants were master’s prepared (54%), 34% were doctorally prepared, and 12% were baccalaureate prepared. More than half (56%) have completed coursework in leadership. About half of the participants have more than 10 years of teaching experience (41%) and over 60% hold one or more nursing certifications. Almost all participants (98%) perceived themselves to be leaders in nursing.

Study Findings

Findings describing how faculty educate students to be leaders in nursing revealed that faculty participants in all degree levels of nursing programs are intentionally educating students to be leaders in nursing. More than 90% of participants identified at least three specific strategies for educating students to be leaders. Teaching-learning strategies were essentially consistent across degree levels. Three themes with related subthemes emerged (see Table 1). In the following paragraphs, findings are presented according to the identified themes.

Faculty Leadership Self-Development

The first theme reflects the commitment of faculty participants to engage in self-development as leaders in nursing. Participants described the importance of being excited and passionate about nursing and sharing this enthusiasm with
others, including students. One participant explained, “As a nurse educator, I am in a position to influence future practice.” Other participants described that “being a leader in nursing…means being excited about what nursing has to offer us and what we have to offer nursing” and “being challenged and mentored by colleagues to develop new gifts to share with others and committed to keep learning from and with others and to share that learning with others.”

Table 1

<table>
<thead>
<tr>
<th>Themes</th>
<th>Subthemes</th>
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<td>Faculty self-development as leaders in nursing</td>
<td>• Being excited and passionate about nursing</td>
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<td></td>
<td>• Engaging in self-reflection and knowing self</td>
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<td></td>
<td>• Serving others, including participation in nursing organizations and the profession of nursing</td>
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<td>Faculty role in student development as leaders in nursing</td>
<td>• Empowering and encouraging</td>
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<td>• Role modeling</td>
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<td>• Partnering and working collaboratively</td>
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<td>Teaching-learning strategies for student development as leaders in nursing</td>
<td>• Integrating leadership content in classroom activities</td>
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<td>• Designing clinical experiences that enhance leadership knowledge and skills</td>
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<td>• Promoting student self-reflection as leaders</td>
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Engaging in self-reflection and knowing oneself captures another perspective shared by faculty participants related to their self-development as leaders in nursing. As one participant stated, “I believe the most important leadership trait is possessing a high level moral maturity. This kind of leading extends beyond individual interests and group norms, even when those norms represent current nursing or institutional practice. Moral maturity leads to thoughtful, responsible, inclusive decisions and actions.”

Serving others, including nursing organizations and the profession of nursing, was expressed by many participants as a way of developing oneself as a leader in nursing. “As a nurse educator leader I am giving back and inspiring the next generation of nurses.” Another participant described serving others “by continuing to be a clinically active RN, by being a volunteer and serving patients by facilitating a colon cancer support group for patients and families.”
The second theme expressed by faculty participants describes their role in facilitating students’ leadership development in nursing. Empowering and encouraging students to be leaders was identified by multiple participants. “One role of faculty is to empower and facilitate students to identify and build upon leadership skills...by providing students opportunities to lead in a safe environment.”

“It [being a leader] means encouraging and empowering others to recognize and develop and use their gifts and abilities to serve others.”

“[I] encourage students to continue to ask questions, challenge that the best really is the best, and when necessary, actively make change when change is needed.”

Faculty participants also described the importance of encouraging students to listen to diverse viewpoints, engage in critical thinking, and serve the profession. One participant stated, “My intention is to grow their leadership/followership from within. As students begin to believe in themselves they move toward inclusion of others.” Another participant emphasized the importance of encouraging students by “expressing confidence to them that they can assume this leadership role. I like to hear what the student has to say, ask them to ‘tell me more,’ acknowledge their ideas, and then encourage them to take the next step.” Participants also described how they “encourage students to become empowered to problem solve situations, communicate effectively, and collaborate with peers and faculty.”

Role modeling leadership was emphasized by participants in all programs. Participants consistently identified the importance of modeling leadership behaviors and activities with students. This theme was exemplified by statements such as “I role model leadership” and “I model leadership behaviors” and “[I] model leadership that is self-aware and able to take risks that may improve nursing and health care, while continuing to assess risks and benefits.” Other participants explained, “The first way I teach nursing students to be leaders is to model the behavior I expect of them” and “[I] role model for students what a leader in nursing might say and do.”

Partnering and collaborating were also identified by faculty participants in educating students to be leaders. One participant explained, “We teach in teams; we plan in teams; we lead by example of good behavior.” Another participant responded, “Each year I partner with a senior nursing student. We form a teaching team and offer support to junior students.” Other examples of how faculty partner
and collaborate with students to promote their leadership development include “partnering and working side by side with students,” “working collaboratively with them on projects in the community and in co-authoring manuscripts based on that work,” and “[providing] opportunities to learn from and with nurse leaders in multiple clinical and academic settings.”

**Teaching-Learning Strategies for Student Leadership Development**

The third theme that emerged in the data analysis focused on the diverse strategies and teaching-learning practices used by faculty participants to educate students to be leaders in nursing. Pedagogies and practices described by participants were related to teaching students the knowledge, skills, and values consistent with leadership in nursing and providing opportunities for student leadership development.

Participants identified multiple classroom strategies for integrating leadership content. One participant reported “using case studies to dialogue with students about applying leadership competencies and the effect of doing so or not.” Multiple participants described the need for addressing cultural considerations related to leadership and how to lead and influence in an inclusive healthcare environment. For example, one participant commented, “In the classroom we can model leadership and carefully attend to placing before students the work of nurse leaders who come from the students’ communities.” Participants also emphasized the importance of using evidence and “abiding by the standards of the profession.” Web forums, seminars, discussion and debate, research, and presentations about leadership were other classroom strategies identified by participants when educating students to be leaders.

Participants expressed that integrating classroom activities with clinical experiences was essential for student leadership development. For example, one participant described the need for “providing the pertinent theory and clinical experiences that allow students to develop emotional intelligence and caring behaviors for individuals, families, and communities, particularly those in our communities who are most vulnerable and underserved.” Another participant stressed the need to “intentionally discuss the role of nurses as agents of change. In post-clinical, we discuss disparities in the health care system and the unique role that nurses have in affecting change.” Other participants identified how they “strive to encourage communication opportunities with the multidisciplinary team to build confidence and assertiveness” and arrange for students to learn from nurse leaders in their clinical experiences by “shadowing a formal leader in a health care organization.”
Examples of clinical leadership opportunities designed by faculty participants were also enumerated. “I teach students in their final semester to engage in the new role of team leader. In that role, students make patient assignments for their peers, are available for delegation of patient care as needed, observe the leadership skills and styles of nurses on the unit, and reflect on their own leadership skills and styles.” Another participant stated,

It is important for students to find their strengths. One role of faculty members is to empower and facilitate students to identify and build upon their leadership skills…by providing students opportunities to lead in a safe environment, whether it is leading a project, educating other students, leading at clinical, leading in student nursing organizations, or participating in research presentation and publication.

Participants emphasized the importance of encouraging students to engage in self-reflection about their own leadership skills and abilities. For example, “I encourage students to reflect on their practice and share their reflections with each other” and “I incorporate…more reflection on their own practice and the practice they observe in clinical and tying those reflections to leadership.” Other participants described how they encourage students to “reflect on their own leadership skills and styles” and to “reflect upon their own ability to lead and to follow.”

Participants also described how they invite students to reflect on their clinical experiences by “looking at examples of what they have observed in the practice and how they want to incorporate this into their practice or seeing areas for improvement.” By asking students to “reflect in writing on their actions, communications, and organization…what went well, what they learned, how they changed their approach, how they applied the nursing process,” participants promote leadership development in their students. As one participant explained,

“This [reflection] engages the students in being leaders, identifies strengths and areas for improvement, and puts them in a position for direct feedback to and from peers. It also makes them accountable directly to their peers–qualities of a leader–feedback and accountability.”

**DISCUSSION**

Study findings are supported by the literature and validate the importance of teaching students to be leaders in nursing. According to the IOM (2010), “all nurses…must take responsibility for their personal and professional growth by developing leadership competencies” (pp. S-6, S-7) and “by continuing their education and seeking opportunities to develop and exercise their leadership.
skills” (p. S-12). This is consistent with the first theme that emerged in the analysis of participant responses: faculty self-development as leaders in nursing.

Engaging in self-reflection was described by participants as a strategy for self-development as a leader in nursing. The *Core Competencies of Nurse Educators* (NLN, 2005) stress that nurse educators engage “in self-reflection and continued learning to improve teaching practices that facilitate learning” (p. 1).

The role of faculty in developing students to be leaders in nursing, the second theme, is also addressed in the literature. This is reflected in the *Core Competencies of Nurse Educators* (NLN, 2005), which state that nurse educators facilitate learning by serving as role models for professional nursing and by “helping students develop as nurses and integrate the values and behaviors expected of those who fulfill that role” (p. 2). Learning the knowledge, skills, and values of nursing leadership in the classroom is also reinforced by preceptors and mentors who model leadership behaviors and skills in practice settings. According to one participant, “seeing leadership in action” can have a profound influence on students and inspire like-minded behaviors. Valiga (2001) asserts that “excellence in nursing begins with the educator” (p. 1). It may also be argued that leadership in nursing begins with the nurse educator, and is promoted by nurse leaders across all practice settings where students are engaged in learning.

The importance of faculty demonstrating leadership also echoes the role of nurse educators as leaders and models of professional behaviors described in the *Core Competencies of Nurse Educators* (NLN, 2005): “Nurse educators function as change agents and leaders to create a preferred future for nursing education and nursing practice” (p. 5). For example, one participant explained, “I intentionally discuss the role of nurses as agents of change. We discuss disparities in the healthcare system and the unique role that nurses have in effecting change.” Educating students to become agents of change is explicitly recommended by Benner, Sutphen, Leonard, and Day (2010). Benner et al. explain that in order for students to be prepared to meet the reform challenges in practice settings, and be influential leaders in the political and public arenas for improved healthcare systems, they need to learn theories of organizational development and policy-making, as well as strategies to change organizations. Furthermore, these authors assert that faculty teaching in all levels of nursing education are obligated to prepare students for the complex bureaucratic settings where they will practice, learn, and teach (Benner et al., 2010).

Faculty participants emphasized the importance of creating student learning opportunities about leadership “through collaborative work with others in
nursing education and nursing practice.” The IOM (2010) states that all nurses “must exercise these [leadership] competencies in a collaborative environment in all settings…within nursing and across the health professions. And in doing so, they must not only mentor others along the way, but develop partnerships and gain allies both within and beyond the health care environment” (p. S-7).

Participants also described how they promote student development as leaders “by providing students opportunities to lead in a safe environment…at clinical.” According to Cronenwett et al. (2007), faculty need to collaborate with service partners to design innovative systems of education that prepare students to demonstrate “the competencies necessary to continuously improve the quality and safety of the healthcare systems in which they work” (p. 122). By designing systems and structures that facilitate interprofessional learning experiences for students in classroom, clinical, and community settings, faculty ensure that students have opportunities to learn with and from students in other health professions, and how to collaborate to improve patient care outcomes. As leaders, faculty create a preferred future for nursing education, the nursing profession, and healthcare delivery systems “when they conceptualize new curriculum models, design innovative educational experiences, and form interprofessional partnerships” (Halstead, 2007, p. 116).

The literature supports the need to incorporate classroom and clinical strategies for student leadership development, the third theme, throughout the nursing curriculum. The IOM (2010) states that “leadership-related competencies need to be embedded throughout nursing education” (p. S-6) and that “nursing education programs should integrate leadership theory and business practices across the curriculum, including clinical practice” (p. S-12). For example, by integrating academic and professional standards that address leadership in curricula, faculty ensure that students have opportunities to demonstrate role competencies consistent with leadership behaviors and communicate the profession’s expectations that all nurses be engaged as leaders in practice (e.g., academic standards and competencies related to organizational and systems leadership purported by the AACN [2006, 2008, 2011]). As one participant asserted, “The values, beliefs, and standards I communicate to nursing students can have profound impact on their practice.”

Multiple participants emphasized encouraging students to engage in self-reflection as leaders in nursing. In their article about leadership and transformative learning, Dingel-Stewart and LaCoste (2004) propose that “the self-reflective nurse will approach everyday practice with the questions how, what, when, who, or why” (p. 215). By teaching the new realities in health care
and stressing the political, organizational, and economic contexts in which students will practice, faculty promote transformative learning and inspire a broader, more integrative perspective of leadership in nursing (Dingel-Stewart & LaCoste).

**IMPLICATIONS FOR NURSING EDUCATION AND RESEARCH**

Leadership in nursing curricula cannot be limited to a single “leadership/management” course; rather, teaching the knowledge, skills, and values related to leadership needs to include both core knowledge and integrative learning experiences throughout the curriculum. Faculty participants emphasized the need for students to have multiple opportunities to demonstrate leadership concepts, skills, and decision making in a variety of practice settings along the continuum of care. Faculty are optimally positioned to design learning experiences with service partners where students engage with and learn from nurse leaders who communicate and collaborate in healthcare teams.

Faculty participants reported a variety of teaching-learning practices to educate students to be leaders in nursing, as well as the need for faculty development activities related to pedagogy and teaching practices that prepare students to be leaders. Research is needed to identify best practices for teaching-learning activities that promote student learning about leadership in all levels of nursing education, including opportunities to demonstrate and practice leadership (e.g., the use of simulation in developing leadership behaviors).

Faculty identified their commitment to model leadership behaviors in their interactions with students. Research is needed to evaluate if faculty who model leadership behaviors promote the development of these behaviors in students, as well as in their faculty and nursing colleagues.

In this study, the overwhelming majority of faculty participants perceived themselves to be leaders in nursing. Further research is needed to evaluate factors that facilitate and/or interfere with the ability of faculty to serve as leaders in their environments of practice, including specific strategies for faculty leadership development.

Research is also needed to investigate student perceptions about leadership in nursing, including whether faculty have effectively prepared them to be leaders in nursing. Conducting research with program graduates and employers is also imperative. This research is needed to ascertain if students are able to demonstrate the knowledge, skills, and values consistent with the role competencies related to
leadership addressed in their nursing curricula and needed in their practice environments. Ultimately, faculty need to evaluate if they are educating students to be leaders and ensure that all students are prepared to lead and influence in nursing and health care now and in the future.

Limitations

The following limitations are identified. First, although the response rate was adequate, the number of participants was small. Secondly, the convenience sample included faculty teaching in one department of nursing and is not representative of all nursing faculty. An additional limitation is that the meaning of “completion of formal courses/coursework in leadership” was not defined. Finally, the survey used in this descriptive study was designed by the researchers. Face validity was examined; however, the survey has not been tested for other measures of validity or for reliability.

CONCLUSION

“Nurses are leaders and vigilant advocates for the delivery of dignified and humane care” (ANA, 2001, p. 8). Nursing faculty are challenged to ensure that basic competencies, including leadership, are integrated in the curriculum and that students achieve these competencies. Furthermore, faculty must inspire students to enact leadership in nursing and the delivery of health care.

According to faculty participants, educating students to be leaders in nursing means “extending a hand and heart in this chaotic healthcare environment.” It means “modeling leadership characteristics, instilling confidence and ensuring competence, partnering and working side-by-side with students.” It means “developing leader skills to lead in these chaotic, complex, and challenging times” and “mentoring, guiding, and encouraging nurse leaders of the future.”

Leadership in nursing is fundamental to advancing the profession of nursing and health care (IOM, 2010) and is of paramount importance at this time (Stewart, as cited in Bartels, 2005). It is a way of being that can be taught and learned and developed in service to others. Nursing needs leaders, and nursing faculty play an essential role in promoting the development and socialization of nurse leaders. By engaging in self-development as leaders in nursing, role-modeling leadership attributes and behaviors, and using diverse pedagogies and practices that challenge students to enact their own vision of nursing leadership, nursing faculty educate students to be leaders in nursing and help to “create a preferred future for nursing education and nursing practice” (NLN, 2005, p. 20).
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