

QUALITIES OF A LEADER

the act of leading
leaders collectively

Leadership

ion of being
IONS

to show the way

For a week in September, RNAO welcomed (L to R) Weilu Yi, Jianing Li, Lisha Yu and Xiu Zhang to Toronto for internships that gave them a close-up view of the work Ontario RNs are doing to care for patients in hospitals, and to educate the next generation of RNs.



LEADERSHIP IN ACTION

OCTOBER 2005

RNAO Executive Director **Doris Grinspun** is invited to speak about the association's **policy and clinical work** at a national conference in China.

NOVEMBER 2005

Beijing Nightingale Consultation of Culture (BNCC) asks RNAO to develop leadership curriculum based on the association's ***Developing and Sustaining Nursing Leadership*** best practice guideline.

AUGUST 2006

RNAO signs an **official partnership** with BNCC and the Chinese Nursing Association to offer leadership and management education to senior nurses in China.

FEBRUARY 2007

BNCC representatives visit RNAO home office in Toronto and meet with several of the association's designated **Best Practice Spotlight Organizations**.

NURSING through visitors' eyes

RNs from Ontario and China take part in an exciting partnership to share knowledge in new ways. BY JILL SCARROW • PHOTOGRAPHY BY LAURA ARSIE

When Karen Gaunt, manager in the emergency department at Toronto's St. Michael's Hospital, learned a blunt trauma victim was on his way to the hospital for care, she immediately thought about Jianing Li, a visiting nurse from Beijing. Gaunt enlisted the help of a few resourceful colleagues to find the Chinese nurse and her translator – who were touring other units of the hospital – because she wanted the visitor to witness first-hand the work of Canadian health-care professionals in an emergency situation. Li made her way up to the emergency room just in time to watch a waiting team of nurses, physicians and respiratory therapists tend to the man's injuries. She was still watching as he was rushed off to the operating room.

At home, Li is chief superintendent nurse at a military hospital. She was in Toronto for an internship that promised to reveal the role nurses play in one of the city's busiest hospitals. In addition to observing in the adrenaline-infused emergency room, Li was paired up with Mandarin-speaking RNs on the medical-surgical, trauma and cardiovascular ICU.

Kaiyan Fu, Director of Nursing Innovation and Change Management at St. Mike's, hosted Li and says the visiting RN was interested in more than just a glimpse of

nursing work in Canada. She also wanted to absorb everything she could about the working environment, even down to the dimensions of the helipad and the signs that direct staff and patients around the labyrinthine hallways.

Li was one of four Chinese nurses visiting as part of a joint project between RNAO and the Beijing Consultation of Culture (BNCC), an organization that provides nurses with professional development opportunities. While she was at St. Michael's, her colleagues Lisha Yu, a former chief superintendent nurse from another military hospital, and Xiu Zhang, a nursing manager, toured University Health Network (UHN) to learn how nurses at the facility's three hospitals contribute to patient care and decision making. Weilu Yi, a nursing teacher at Beijing's Capital Railway Health School, was also in town, and divided her week between UHN and York University. Through the intense week-long internships, all four nurses relied on Canadian colleagues like Fu to lend their linguistic and cultural expertise to make the trip a success.

Fu was born and lived in China until 1989. Providing Li with an insider's view of St. Michael's is just the latest thing she's done to share her knowledge with nurses from her home country. "I've always had this passion to give

FALL 2007/SPRING 2008

Irmajean Bajnok, Director of RNAO's International Affairs and Best Practice Guidelines Programs, and Karen Ellis-Scharfenberg, Senior Manager, Centre for Professional Nursing Excellence, travel

to China to deliver 10-day leadership and management education programs, as well as sessions on teaching and facilitation skills.

SEPTEMBER 2008

Four Chinese nurses participate in week-long internships at Toronto's St. Michael's Hospital, University Health Network and York University.

OCTOBER 2008

RNAO and BNCC host their first international conference in Beijing, *Nurses: The Solution in Health Care Transformation*.

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 the act of leading
 ABILITY
 leaders collectively
 Conduct

Leadership
 the state or position of being
 Direction

ACTIONS
 to show the way
 Guidance



CHINESE NURSES (from left to right) Jianing Li, Xiu Zhang, Weilu Yi, and Lisha Yu (opposite page) tell *Registered Nurse Journal* about their experiences during the five days they spent touring Toronto's St. Michael's Hospital, University Health Network, and York University.

back," she says. "I wanted to use my knowledge and expertise to make a difference."

Last year, Fu travelled to China to translate for members of RNAO's Centre for Professional Nursing Excellence who were visiting the country to deliver workshops as part of the association's nursing leadership and management recognition program.

The journey that took Fu to Beijing, and brought Li and her colleagues to Toronto, began in 2005, when RNAO Executive Director Doris Grinspun was invited to China as a keynote speaker at a national nursing conference about the future of the profession. She discussed the association's policy and clinical work at length, and got the attention of the Chinese Nurses Association and BNCC. After learning more about the association's best practice guidelines (BPG), the two Chinese organizations asked RNAO to develop a leadership program based on its *Developing and Sustaining Nursing Leadership BPG*.

In the three years since Grinspun first visited China, RNAO has forged a comprehensive partnership with BNCC that includes the leadership training program, reciprocal visits between the two countries, an international conference that was held in Beijing and co-hosted by RNAO and BNCC in October, and the internships that the four visiting nurses took part in this fall. Grinspun says she's thrilled with the way

the partnership has grown, and credits Irmajean Bajnok, Director of RNAO's International Affairs and Best Practice Guidelines Programs, with much of the success as she led the development of the 17 modules that serve as the basis for the program. "This partnership started off with big hopes, and it's growing by leaps and bounds. It has already produced tremendous results," Grinspun says.

At the core of this groundbreaking partnership is RNAO's leadership education program, which focuses on leadership attributes, hiring practices, interviewing skills, participatory management, performance appraisals, budgeting principles, effective communication, collaboration, and scheduling practices. More than 100 nursing leaders in China have taken part in the initiative so far, and some graduates of the full 10-day program also participate in shorter sessions to strengthen the teaching skills they need to continue sharing their knowledge with colleagues all over China. By helping prepare an initial group of nurses, RNAO anticipates its knowledge will eventually reach each of China's 60,000 nurse managers and enrich the working lives of its 1.3 million nurses.

Li says the program helped her understand the importance of listening to nurses who work at her hospital. "In the past, management talked and other people just lis-

tened," she said through a translator. "Now, we raise an issue, give an example and analysis, and invite input."

RNAO's work is also bringing many benefits to nurses here at home.

Canadian RNs of Chinese descent now have the chance to re-connect with the country where they once lived. RN Fan Guo spent five years nursing in China before emigrating in 1996. When she heard UHN would be hosting the visitors she rearranged her shifts so she could be available to translate for them. That meant long days. Guo would spend the day translating, then head off to work the evening shift in the operating room. But she says she was eager to do it because she believes nurses should be ready to help each other out, and she felt a special connection with these women from the country where she grew up.

Guo says Yu and Zhang were impressed by the influence Ontario nurses have in decision making. They really noticed it when she translated for them during an interdisciplinary meeting to discuss solutions to hospital-wide issues such as staff safety. Guo says the role nurses play in making decisions at the hospital isn't the only difference she recognized between the two systems. She says she was also reminded of how lucky Canadians are to have a universally accessible health-care system.

"People here worry less because (Canadians') have a good system," she says.



“They have the care they need.”

Jiao Jiang, an advanced practice nurse specializing in acute pain at UHN, agrees that publicly funded health care in Canada makes our system very different from systems in other parts of the world. When she was working in China in the 1990s, she says she was always conscious of what patients could afford. She says that kind of understanding of the Chinese health-care system helped her as she translated for Yu and Zhang during a visit with post-operative patients at the Toronto General site.

During the tour, Jiang asked patients to rate their pain on a scale from zero to 10. She inquired about any side effects they might be feeling, and adjusted their medication accordingly. She says the nurse interns were surprised to discover the hospital has nurses dedicated solely to easing patients' pain. Jiang wasn't surprised by their reaction. Canadian nurses have much more autonomy and greater responsibility than nurses in China, where the doctor is responsible for most aspects of the patient's care.

When asked what she took away from the experience at UHN, Yu said the visit showed her how to make BPGs a bigger part of nursing at home. She has already had some experience with guidelines and has implemented the pressure ulcer BPG at her workplace. She would now like to model UHN's practice of posting BPG resources online so her staff members have easier access to them. The BPGs, she says, have introduced her to a new way of thinking

about patient care, and to new ways that managers give their staff members the information they need to improve their own practice. “Managers must consider how to best serve nurses,” she says.

In addition to discovering just how Canadian nurses practise their profession, the Chinese nurses also explored how RNs learn. Weilu Yi, a nursing teacher at Beijing's Capital Railway Health School, says, in China, the focus is very one-sided. The teacher talks and students listen. That's very different from the way students learn at York University's School of Nursing, especially in Pat Bradley's *Teachers and Learners* course.

When the assistant professor asks students to discuss learning theories, she'll give them pieces of coloured paper and ask them to pair up with other students based on the colours they're holding. This helps students get to know one another and share ideas. Yi says watching the exercise reinforced what she learned at RNAO's leadership workshops about how to teach in a way that will “help students start thinking on their own.”

During a visit with RN Karin Page-Cutrara, coordinator of York's post-RN program, Yi observed students responding to a mannequin with a simulated case of food poisoning. In China, students also use mannequins in their labs, but the focus is on teaching certain skills, instead of encouraging them to cultivate the critical thinking and teamwork expertise they'll need when they're working with real patients.

Page-Cutrara says she enjoyed hosting her Chinese colleague because the experience gave her the chance to learn more about what school is like in China. This new-found knowledge renewed her appreciation for the diversity she's become so accustomed to at York.

While having lunch at the busy student centre, Page-Cutrara watched Yi's eyes grow wide as she found herself inside a crush of people representing ethnicities from around the world. She says Yi was surprised to see so many nationalities and cultures, something Page-Cutrara and her colleagues usually take for granted.

“My impression was – so? It's always like this,” she says. “But when I did a double take, there was every culture imaginable represented, and motorized wheelchairs were whipping by.”

Back at St. Michael's, Fu agrees there are many things Canadian nurses will come to appreciate if given the chance to see their

THE CHINA DIARIES

Travelling thousands of kilometres to attend RNAO's first ever international conference in October, two RNAO staff tell us what it was like to finally arrive after months of preparation...

Oct. 19: The 13-hour flight was not as bad as we expected. Everyone arrived – with their luggage – at our tranquil, traditional Chinese hotel.

Oct. 20: So much work and dialogue went into this conference at RNAO home office. During today's planning meeting, we got a sense of the hard work our colleagues in China also put into the event.

Oct. 21: During today's pre-conference workshops we had our first experience with translators. Group activities were sometimes difficult given concurrent translation, but joint learning was terrific. We realized our Chinese counterparts face similar nursing leadership challenges to those we face.

Oct. 22: Today, the impact of this event really hit home. We shared the best of nursing internationally. It inspires tremendous pride to hear research, evidence and anecdotes from nurses all around the world. The energy was fantastic.

Oct. 23: It's almost a shock to believe the conference is over. After so much planning, the conference is drawing to a close. With 300 participants, the place was a buzz of activity.

Oct. 24: We participated in several hospital tours today that gave us wonderful insight into the working lives of our counterparts in China. Our hosts were welcoming and excited to answer our questions. We visited critical care units, emergency rooms, nursing classrooms, and more. The day was long, but terrific. **RN**

Karen Ellis-Scharfenberg and Leigh Chapman are senior manager and manager (respectively) for RNAO's Centre for Professional Nursing Excellence.

workplaces through international visitors' eyes. RNs here have access to equipment, knowledge and expertise that makes them the envy of their colleagues around the world. “Our nurses are very lucky. Although we have our challenges...nursing is a well-respected profession in Canada. Nurses in Canada are very proud to be nurses.” **RN**

JILL SCARROW IS STAFF WRITER AT RNAO.

follow the LEADER

Four Ontario RNs at different stages of their careers tell us what inspires them to guide, mobilize and motivate others. BY JILL SCARROW

Nursing leaders can be found at all ages and stages of their careers. Although, traditionally, leadership has been associated with executive directors and vice-presidents, it isn't always attached to a specific job title.

Colleen McKey is past-president of the Nursing Leadership Network, an interest group of RNAO. She is also the director of the McMaster University School of Nursing's Leadership and Management program for health professionals. "Leadership is in all of us... whether we're in a clinical practice setting, research or education," she says. "Leadership is pervasive regardless of the role."

Poonam Sharma, Amanda Leroux, Valerie Parkes and Carole Devine are bringing McKey's words to life every day. Respectively, they are a student whose volunteerism brings better health to her peers, a new graduate whose green approach at work is inspiring others, an RN whose encouragement compels colleagues to embrace challenge, and a nurse using her political skills to make her community a better place. While their experiences differ, they all share common traits that define leadership. They have a vision for the future, a proactive frame of mind that motivates them to achieve their goals, and the communication, teamwork and mentorship skills to make change a reality.

Here are their stories ...

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Poonam Sharma is not yet an RN, but her vision to improve the health of her fellow students has made her a leader far beyond the classroom. During her first year in the collaborative nursing degree program at Humber College, Sharma was a peer health mentor to her classmates, promoting healthy eating and safe sex. This year, she's helping students both in and out of her program to quit smoking by heading up the school's *Leave the Pack Behind* program. Sharma believes nurses – and aspiring nurses who may not have as much clinical experience – can use their leadership skills to make others' lives healthier.

Part of the reason Sharma is so motivated and eager to volunteer at Humber is because of the inspiration she's received from mentors. One of those mentors is RNAO Immediate Past President Mary Ferguson-Paré, who encouraged Sharma to become

an RN when the two worked together at Toronto Rehab. At the time, Sharma was coordinator of a dental program and most of her work focused on improving the lives of people living with physical and cognitive disabilities. She provided oral-care education for her patients and colleagues, and implemented infection control procedures. Ferguson-Paré saw qualities in her that would transfer to nursing.

Today, Sharma offers her leadership skills to RNAO as student executive member for the Peel chapter and as a nurse ambassador who educates high school students about a career in nursing. She is also an RNAO liaison in Humber's Nursing Society. This fall, she led efforts at her school to recruit more than 300 nursing students to become members of the association. It's that work that's earned her the moniker of 'RNAO girl' on campus. **RN**



Poonam Sharma
Student at the University of
New Brunswick-Humber College



Amanda Leroux
Intensive Care RN
Queensway-Carleton Hospital (QCH)

Amanda Leroux has always envisioned herself as a leader. Before becoming an RN, she was an RPN at a Peterborough retirement home and was the go-to person for health-care aides who had patient care questions. During her four years as a student at Trent University, she continued to lead as she worked towards her BScN, holding several positions on student council. Leroux admits, however, that once she graduated and was surrounded by colleagues with extensive clinical experience, her confidence began to wane. Suddenly, she was the person with all the questions.

“It was a real culture shock for me to move into the RN role,” she recalls. “It was me who needed to go to people.”

Fortunately, her insecurity didn't last. In fact, her confidence came back in spades last March when Leroux attended a conference hosted by the Nursing Leadership Network (NLN). She was inspired when she heard a keynote speaker talk about how all nurses can command attention and get things done, regardless of rank or seniority.

“The conference gave me the impetus

to take charge...without being in a formal leadership role,” she says. “It made me realize that just because I was inexperienced in terms of my clinical experience, that didn't mean I didn't have something else I could offer.” With an idea, determination, and a team committed to the cause, Leroux launched a project in her workplace that may not have been clinically focused, but enacted her vision of making QCH a more environmentally friendly place.

Over the course of several months, Leroux met with the hospital's environmental services department to launch a blue box program. She organized education sessions with colleagues, and, on Sept. 1, staff began sorting their paper, plastics, glass and cans into containers on Leroux's unit.

A new 'Green Team' has been formed and Leroux hopes to expand the program hospital-wide. She also hopes to do some 'recycling' of her own next year when she returns to the NLN conference to present details of her project to the group of nurses who inspired her to take it on in the first place. **RN**

For RN Valerie Parkes (second from left) one of the best ways to demonstrate leadership is to help others see the potential in themselves. That's why she is always encouraging her colleagues to develop their knowledge and build their expertise so they can provide the best patient care. Parkes knows from personal experience that it sometimes takes a co-worker to kick-start your career. In the late 90s, she was working as an RN at Sunnybrook Health Sciences Centre when a manager encouraged her to return to school to earn her BScN. Parkes was interested in a more senior role but was worried that, with three sons, a return to the classroom may not be possible. It took a colleague to show her it was, although earning the degree wasn't easy. It meant a lot of late nights and vacation days spent in the classroom.

Today, Parkes is a patient care manager at West Park Healthcare Centre and frequently encourages others to return to school to earn their degrees. She also offers personal support workers encouragement if they are considering a switch to nursing. Some women, she says, think they can't return to school because they are single mothers, and can't afford to take time away from work. She reminds them that working on their education sets a good example for their children. She also makes sure they know about tuition funding, and helps them secure time off when school obligations have to come first. More education, she tells them, can be a springboard toward career success down the road.

Parkes recalls mentoring one RPN who was initially worried about going back to earn her nursing degree. Today, that same nurse is preparing to write her acute-care nurse practitioner exam. “I always tell people – until you get started, you can never see the finish line.” **RN**



Valerie Parkes
Patient Care Manager
West Park Healthcare Centre

RNAO inspires new grads to lead by example

Leigh Chapman, an RN and manager for RNAO's Centre for Professional Nursing Excellence, says when new nurses start their careers, it's not uncommon for them to find the leadership skills they learned at school take a back seat as they adjust to their new work environments. Helping new grads and nursing students move beyond their apprehensions and tap into their leadership expertise was the goal of RNAO's first-ever workshop called *Thriving in the Work Environment: Leadership for New Grads*.

The day-long session was led by Chapman in partnership with Jessica Peterson, a PhD student whose work examines job satisfaction among new grads. Approximately 80 participants spent the day reviewing what theorists have written about the leap from the education system into the working world. The group also talked amongst themselves about common challenges, the qualities of a true leader, and how they can demonstrate leadership in their own careers.

Chapman and Peterson used RNAO's *Developing and Sustaining Nursing Leadership* best practice guideline to show participants how to create workplaces that are better not only for their own personal well-being, but also that of their co-workers and their patients.

They discussed the value of adopting the leadership practices recommended in the BPG, especially those that pertain to building relationships with co-workers. The guideline was developed under the leadership of University of Western Ontario nursing professor Heather Laschinger.

Former Ontario resident and new grad Rosabella Vito travelled to Toronto from Calgary for the workshop. She says it helped her overcome some of the jitters she's been feeling since she started working last spring. "I think there's a huge gap between being a student and actually working. I felt overwhelmed that I was responsible for a person's health and life."

Vito says the workshop gave her the chance to learn more about the transformational leadership practices described in the BPG. It also got her thinking about how she can show more leadership in her own work through reflective practice that will help her identify different areas she needs to work on.

"I realized I should be more proactive and be internally motivated and look for personal development ... I can review the concepts on my own and work on my weaknesses," she says. The workshop will be offered again next October. Visit www.rnao.org in 2009 for details. **RN**

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Carole Devine
Executive Director
Supples Landing Retirement Home

Carole Devine (second from right) always tries to remain optimistic when others around you are struggling to see the silver lining of a bad situation. This fall, the Pembroke RN ran as a Liberal candidate in the federal election. When the polls showed she wasn't going to win, her focus was not on feeling negative, but staying upbeat for the volunteers who helped her door-knock and put up lawn signs. Even though she wasn't the front runner in her riding, Devine kept reminding her team that they were doing important work by presenting voters with a different choice on their ballot.

"(Anyone) can lead on a good day," she says. "It's the mark of a [true] leader to lead on bad days."

A mother of three, Devine decided to run for MP because she got a taste of politics as a school board trustee in the 90s, and was eager to get involved again, now that her

children are grown. She knew she had the teamwork and communication skills because of her experience as a nurse. But, like any good leader, she also knew she was going to have to learn new things on the fly. She says her biggest challenges were learning to be on the attack during all-candidates debates, and summarizing her party's platform into two-minute statements.

Now that the votes have been counted and her opponent has taken office, Devine is thinking about the next challenge. She's not quite sure yet what that will be. Even though she lost the election, she says there are plenty of people who expect she will do something to help improve their community. And she approaches that expectation with the same optimism she showed on the campaign trail. "I entered this process to make a better world. I still have that task," she says. "I just have to look at it in a different way." **RN**