Human-Centered Leadership in Healthcare: Evolution of a Revolution

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- Susan Campis
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Kay Kennedy, DNP, RN, NEA-BC, CPHQ Emory University Nell Hodgson Woodruff School of Nursing – Sr. Clinical Instructor Sr. Principal - uLeadership™

Meet Our Team!

- Dr. Kay Kennedy is a nurse executive, nurse educator, and entrepreneur.
- By combining a love for nurses, patients, and quality improvement, she has led large nursing teams to create health work environments, satisfied patients, and consistent, high-quality care.
- Dr. Kennedy has held multiple leadership roles from the bedside to Chief Nursing Officer.
- Dr. Kennedy's goal as a leader is to ignite innovative problem-solving; develop others to be their best; and lead by serving others.



Lucy Leclerc, PhD, RN, NPD-BC
Assistant Professor, Kennesaw State University
Sr. Principal Consultant, uLeadership™

Meet Our Team!

- Dr. Lucy Leclerc is a nurse executive, entrepreneur, and Assistant Professor of Nursing at KSU where she teaches leadership, professionalism, and ethics to the future of nursing.
- Dr. Leclerc's research focuses on nursing leadership in practice and in academia.
- She serves on the Editorial Board of the Journal of Nursing Education and has published research in many peer-reviewed journals.
- Dr. Leclerc seeks to reveal what already exists within nurses and nursing teams...excellence and professionalism.



Susan Campis, MSN, RN, CCRN-K, NE-BC Sr. Principal Consultant, uLeadership™

Meet Our Team!

- Susan Campis has served in progressive leadership roles for over 12 years, her last role being Executive Director, Grady Burn Center, Grady Hospital in Atlanta Georgia.
- As Executive Director of the Grady Burn Center, she and her team received recognition as a 'top tier' unit for Patient Satisfaction 4 years in a row.
- Susan is a nurse leader whose passion for coaching and mentoring others helped produce successful nursing teams throughout her career.
- As a nurse leader, Susan works to create a safe and healthy work environment where her team can be and perform at their best, ensuring quality care and patient safety

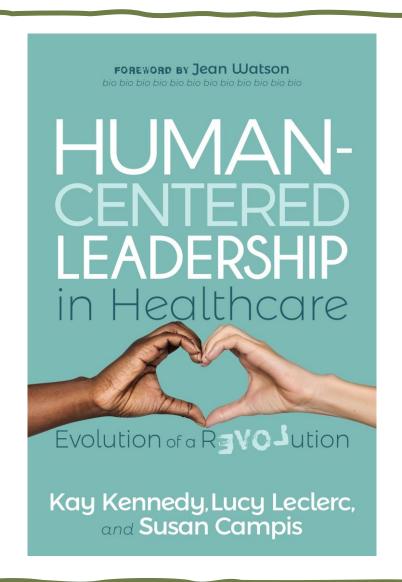


Disclosure Statement

There is no conflict of interest for anyone with the ability to control content for this activity.

Objectives





Foreword - Excerpt

"So many books have been written, and so many theories have been put forth on leadership—especially in the nursing field. However, to have expert nursing scholars share their vision, grounded research, emerging theory, experience and deep wisdom about leadership, from within, is a unique gift to this pressing and haunting human phenomenon. You will see in this work; it is all about humanity and all about you and NOT about you. It is about a higher consciousness that holds and captures the core truths of leadership as a universal living phenomenon of knowing/being/becoming a human-centered leader."

-Jean Watson, PhD, RN, AHN-BC, FAAN, LL (AAN)
Founder/Director Watson Caring Science Institute
Distinguished Professor/Dean Emerita University of Colorado Denver, CON

"Nothing is more powerful than an idea that's time has come."

-Victor Hugo

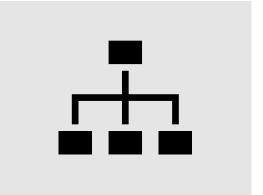


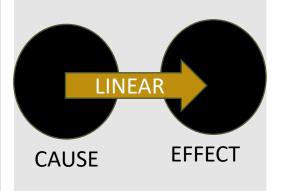
Part 1: A New Model of Leadership – It's Complex

- Chapter 1: Recognizing Humanity in a Complex World
- Chapter 2: Show Me the Evidence

Traditional Leadership

- Top-Down
 Communication
- Leader is above the system
- Linear Thinking
- Outcomes result from Leader's Authority and Influence







Complexity Theory in Health Care Leadership

- Leader is Embedded in the System
- Collateral Thinking
- Influencers and Innovators at the Point of Service
- Value is Determined by Consumers
- Change and Unpredictability are Predictable

O'Grady & Malloch, 2018



"Research is to see what everybody else has seen, and to think what nobody else has thought."

-Albert Szent-Györgyi



Gap in nursing leadership research

Background



Borrowed approaches & theories



Practice Theories v. Leadership Theories

Show Me the Evidence!!



Aim: Generate theory aligned with essence of nursing



Background: Gap in nursing leadership research; borrowed approaches and theories; complexity science



Methods: Constructivist Grounded Theory; focus groups, qualitative analysis



Results: 15 attributes; 4 dimensions; 3 outcomescultures



Conclusions: unique, contemporary nursing leadership theory suited to address structure, process, outcomes



Implications: test and validate theory with proposed metrics (ANCC Magnet or Pathway/HWE) and cultures.



"Invisible threads are the strongest ties." -Friedrich Nietzsche

Results

Advanced Coding:

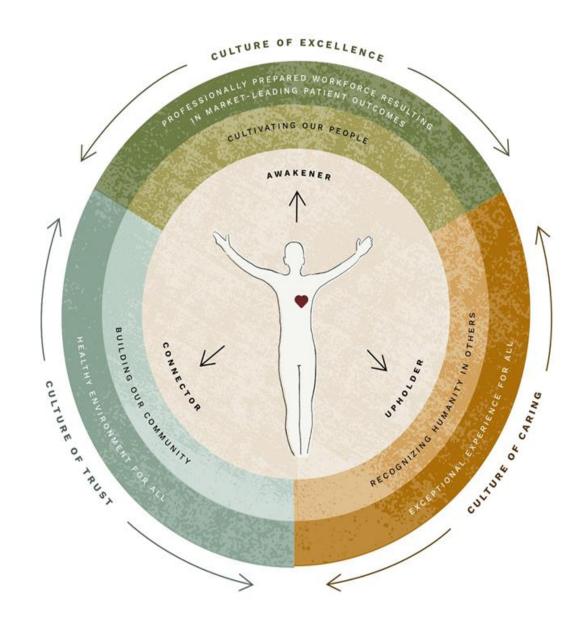
Placing Attributes within Dimensions

wakener Cultivates our people			
Motivator	Establishes a learning culture with high expectations for ongoing learning for self and others		
Coach	Provides honest feedback, address behaviors inconsistent with learning culture		
Mentor	Advises on member accountability for individual growth plans		
Architect	Designs structures/processes so innovation can emerge		
Advocate	Ensures resources are available for best practice and professional growth		

Connector	r Builds our community		
Collaborator	Unifies others around shared mission and vision		
Supporter	Supports, recognizes, and appreciates independent problem-solving and individual contributions at the point of service		
Edgewalker	Embraces change/chaos by endorsing experimentation of ideas to generate innovation		
Engineer	Ensures people are plugged into processes/structures for emergence of new ideas		
Authentic Communicator	Builds mutual respect and trust through nurturing intentional connections with others		
Upholder	Recognizes humanity in others		
Mindful	Focuses attention, awareness, and energy on present		
Others Oriented	Supports with respect, kindness, empathy, and empowerment		
Emotionally Aware	Recognizes and embraces humanity at all levels, self-reflective		
Socially and Organizationally Aware	Leads with an open mind		
Personally Well and Healthy	Practices self-care, self-compassion, self-awareness		

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Human-Centered Leadership in Health Care



Implications: Nurse Leaders



Answer the million-dollar question!



Evidence-Based Leadership



Influence positive cultures with a leadership style customized and rooted in the essence of nursing

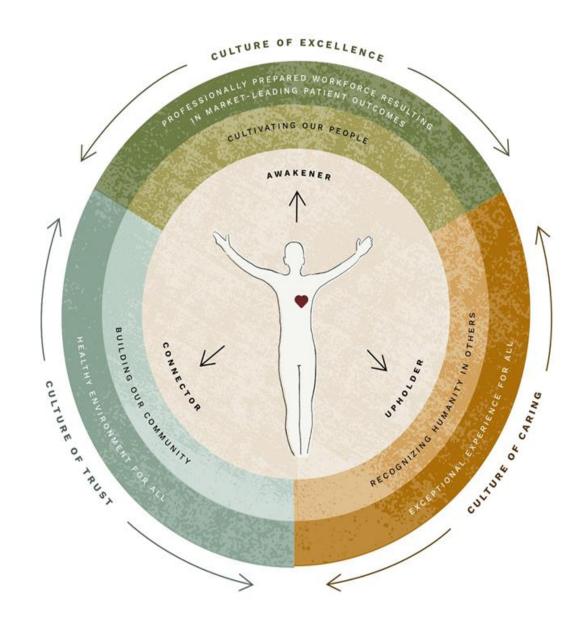


Test and validate HCL in relation to metrics e.g., HWE, Caring Science

Part 2: It Starts With You

- Chapter 3 The Human at the Center: The Journey to Self-Awareness
- Chapter 4 The Importance of Self-Care and Self-Compassion in a World Full of Burnout
- Chapter 5 Two Tigers, A Mouse, and a Strawberry: The Art of Mindfulness

Human-Centered Leadership in Health Care



Leclerc, Kennedy, & Campis, 2020

It starts with you!



Well-Being



Self-Awareness



Self-Care



Self-Compassion



Mindfulness

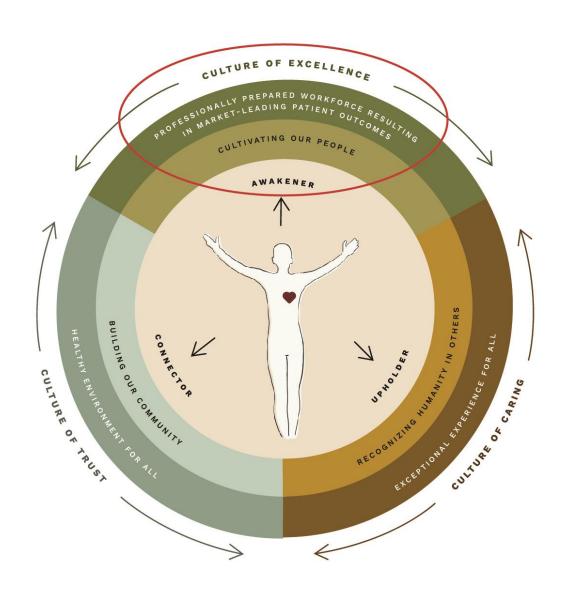
But It's Not About You!



Part 3: It's Not About You

- Chapter 6 But It's Not About You!
- Chapter 7 The Awakener: Developing a Culture of Excellence
- Chapter 8 The Connector: Creating a Culture of Trust
- Chapter 9 The Upholder: Cultivating a Culture of Caring

The Awakener

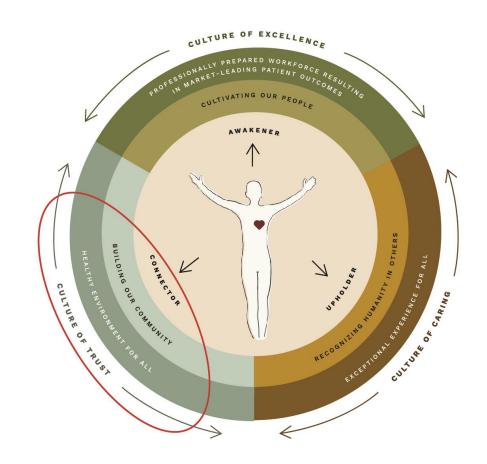


Leclerc, Kennedy, & Campis, 2021

Attributes of the Awakener

- Motivator
- Coach
- Mentor
- Architect
- Advocate

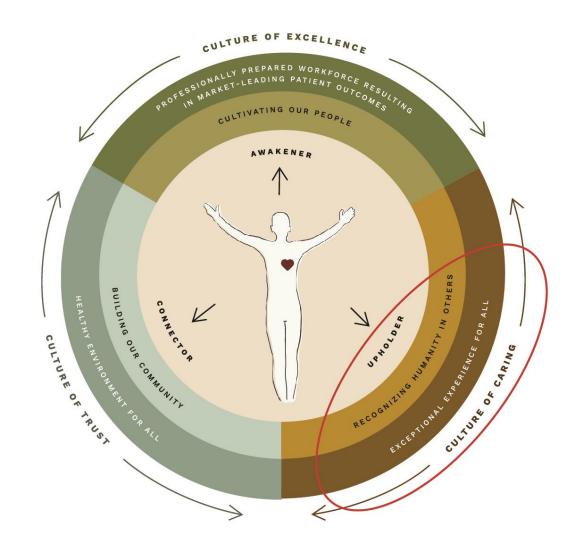
The Connector



Attributes of the Connector

- Collaborator
- Supporter
- Edgewalker
- Engineer
- Authentic Communicator

The Upholder



Leclerc, Kennedy, & Campis, 2021

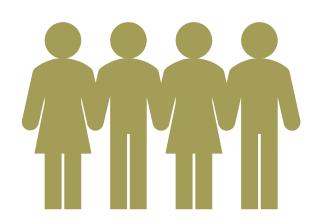
Attributes of the Upholder

- Personal Wellbeing
- Mindfulness
- Others Oriented Mindset
- Emotional Awareness
- Social and Organizational Awareness

Part 4: Developing the People Who Lead the People

- Chapter 10 Emotional Intelligence: The Key to Human-Centered Leadership
- Chapter 11 Change Management: Expect the Unexpected!
- Chapter 12 Connecting the Three Cs: Competence, Capability, and Complexity
- Chapter 13 Reflective Practice: Learning from Experience
- Chapter 14 Innovation: The Power of Thinking Differently
- Chapter 15 Dealing With "Joy Interrupters"





Develop the People
Who Lead the
People
Who Care for the
People

DEVELOP



EMOTIONAL INTELLIGENCE



CHANGE MANAGEMENT



INNOVATION COMPETENCY



CAPABILITY VS. COMPETENCY



DEALING WITH DISRUPTION



REFLECTIVE PRACTICE

Part 4: Join the Movement

- Chapter 16 Imagine What Could Be...
 - Butterflies, Chaos, and Your Part in All This
 - Momentum
 - Don't Let Anything or Anyone Stop You
 - Invitation to Collaborate

Appendices: Excerpts

- Appendix A: Human-Centered Leadership in Healthcare: Do a Pulse Check
- Appendix B: Attributes and Constructs with Definitions
- Appendix C: Crosswalk of ANCC (2015) Magnet Standards with Human-Centered Leadership Constructs and Outcomes
- Appendix D: Crosswalk of American Nurses Association Code of Ethics for Nurses (2015) with Supporting Culture Created by Human-Centered Leaders
- Appendix E: Crosswalk of AACN Draft Essentials for BSN, MSN, and DNP Programs (2020) with Human-Centered Leadership Constructs, Attributes, and Outcomes
- Appendix F: American Association of Critical Care Nurses (2016) Healthy Work Environment Crosswalk with Human-Centered Leadership Attributes and Cultures

Human-Centered Leadership in Healthcare Appraisal: Do a Pulse Check

Instructions: Listed below are 15 statements. Each statement provides a possible strategy for leadership. Rate each statement on a scale of 1 to 5, indicating how likely you are to use this strategy. Don't answer as you think you should, answer as you actually conduct yourself.

• 1=Rarely, if ever 2=Not very often 3=Sometimes 4=Very Often 5=Always

Score		Statements
	a.	I provide a safe environment for my team members to grow and expect accountability for individual growth plans.
	b.	I practice self-care, self-compassion, and self-awareness as a role model for my team.
	C.	I make sure my team members are plugged into processes and structures (councils and committees) to support the emergence of new ideas.
	d.	I facilitate and support structures and processes (councils and committees) so innovation can emerge from my team at the point of care or work.
	e.	I use self-reflection to recognize humanity in myself and my team members.
	f.	I embrace unpredictability and change as the norm by endorsing experimentation of ideas to generate innovation.
	g.	I provide honest feedback and address team member behaviors that are inconsistent with a culture of excellence.
	h.	I support my team with respect, kindness, empathy, and empowerment.
	i.	I unify my team and others around a shared vision and mission.
	j.	I ensure resources are available for my team to do research and adopt evidence-based practice.
	k.	I lead my team with an open mind to respect everyone and withhold judgment.
	I.	I aim to build mutual respect and trust through nurturing intentional connections with others.
	m.	I establish a learning culture with high expectations for ongoing learning and growth.
	n.	I focus my attention, awareness, and energy on the present moment when with my team members.
	0.	I support, recognize, and appreciate independent problem-solving and individual contributions at the point of service.

Crosswalk of American Nurses Association Code of Ethics for Nurses (2015) with Supporting Culture Created by Human-Centered Leaders

ANA COE Provision	Description	Human-Centered Leadership Dimension	Associated Culture
Provision 1	The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.	Upholder	Culture of Caring
Provision 2	The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.	Upholder	Culture of Caring
Provision 3	The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.	Upholder	Culture of Caring
Provision 4	The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to provide optimal patient care	Awakener	Culture of Excellence
Provision 5	The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.		Culture of Caring
Provision 6	The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.	Connector	Culture of Trust
Provision 7	The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.		Culture of Excellence
Provision 8	The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.	Connector	Culture of Trust
Provision 9	The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.	Connector	Culture of Trust

Note: For ANA COE provisions see American Nurses Association. (2015). Code of ethics with interpretative statements. http://www.nursingworld.org/MainMenuCategories/EthicsStandards/CodeofEthicsforNurses/Code-ofEthics-For-Nurses.htm uLeadership Copyright 2021

Cross-Reference of ANCC (2015) **Magnet Standards** with Human-Centered Leadership Constructs and Outcomes

Magnet Outcome Requirement	HCL Component	Culture Change Required
Commitment to Culture of Safety	Awakener	Culture of Excellence
Mentoring plans	Awakener	Culture of Excellence
Improve nursing practice environment	Connector	Culture of Trust
RN satisfaction: Leadership access and responsiveness	Upholder	Culture of Caring
Nurses' involvement in population heath outreach	Connector	Culture of Trust
Delivery of culturally and socially sensitive care	Connector	Culture of Trust
Nurses and interprofessional groups contribute to strategic goals of organization	Connector	Culture of Trust
RN satisfaction: Autonomy, Interprofessional relationships, Fundamentals of quality, Adequacy of resources and staffing,	Upholder	Culture of Caring
RN to RN teamwork and collaboration / interprofessional collaboration	Connector	Culture of Trust
Decrease in never events / quality improvement based on EBP	Awakener	Culture of Excellence
Advancement of research in nursing / interprofessional	Connector/ Awakener	Culture of Trust/ Culture of Excellence

Note: From Leclerc, L., Kennedy, K., & Campis, S. (2020b). Human-centered leadership in healthcare: A contemporary nursing leadership theory generated via constructivist grounded theory. Journal of Nursing Management, 00, 1–1. For ANCC Magnet Standards see American Nurses Credentialing Center (2015). ANCC Magnet Recognition Program. https://www.nursingworld.org/organizational-programs/magnet/

American Association of Critical Care Nurses (2016) **Healthy Work Environment (HWE)** Crosswalk with Human-Centered Leadership (HCL) Attributes and Cultures

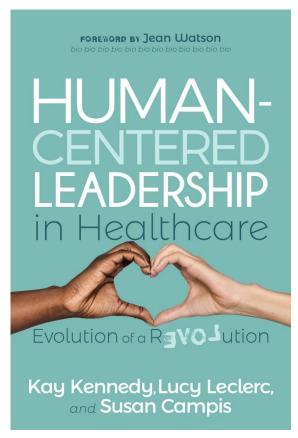
		Human-Centered	Human-Centered
HWE Standard	HWE Questions	Leadership Dimension	Leadership Culture
	Administrators, nurse managers, physicians, nurses and other staff maintain frequent communication	Awakener	Excellence
Communication	to prevent each other from being surprised or caught off guard by decisions.	Connector	Trust
		Upholder	Caring
	Administrators, nurse managers, physicians, nurses and other staff make sure their actions match	Awakener	Excellence
	their words- they "walk their talk."	Connector	Trust
		Upholder	Caring
	1		Excellence
	and abuse. If they see or hear someone being disrespectful, they hold them accountable regardless of	Connector	Trust
	the person's role or position	Upholder	Caring
	Administrators, nurse managers, and physicians involve nurses and other staff to an appropriate	Connector	Trust
	degree when making decisions		
	Nurses and other staff feel able to influence the policies, procedures, and bureaucracy around them		Trust
	When administrators, nurse managers, and physicians speak with nurses and other staff, it's not one-		Trust
	way communication or order giving. Instead, they seek input and use it to shape decisions	Upholder	Caring
Effective	Administrators, nurse managers, physicians, nurses and other staff are consistent in their use of data-	Awakener	Excellence
	driven, logical decision -making processes to make sure their decisions are the highest quality		Trust
	The right departments, professions, and groups are involved in important decisions		Trust
Making	Administrators, nurse managers, physicians, nurses and other staff are careful to consider the		Caring
	patient's and family's perspectives whenever they are making important decisions.	opholaei	carrig
	patient 3 and rannily 3 perspectives whenever they are making important decisions.		
Appropriate	Administrators and nurse managers work with nurses and other staff to make sure there are enough	Connector	Trust
	staff to maintain patient safety		
	Administrators and nurse managers make sure there is the rights mix of nurses and other staff to	Awakener	Excellence
	ensure optimal outcomes		
	Support services are provided at a level that allows nurses and other staff to spend their time on the	Upholder	Caring
	priorities and requirements of patient and family care		
U	The formal reward and recognition systems work to make nurses and other staff feel valued		Caring
	Administrators, nurse managers, physicians, nurses and other staff members speak up and let people know when they have done a good job	Upholder	Caring
	There are motivating opportunities for personal growth, development and advancement	Awakener	Excellence
	Most nurses and other staff here have a positive relationship with their nurse leaders		Caring
	Nurse leaders demonstrate an understanding of the requirements and dynamics at the point of care	Awakener	Excellence
	and use this knowledge to work for a healthy work environment.		
	Nurse leaders are given the access and authority required to play a role in making key decisions	Connector	Trust

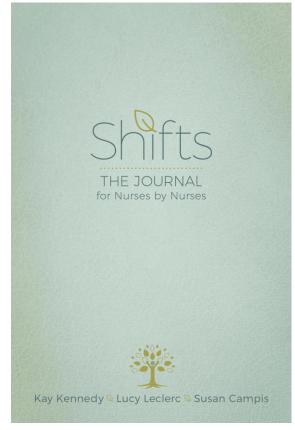
Note: For ANCC HWE Standards see American Association of Critical Care Nurses (AACN) (2016). AACN Standards for Establishing and Sustaining Healthy Work Environments: Journey to Excellence, 2 Mid ed. American Association of Critical Care Nurses.

Crosswalk of **AACN Essentials** for BSN, MSN, and DNP Programs with Human-Centered Leadership in Healthcare

	Description	Human-Centered Leadership: Book Chapter	Dimension	Attribute	Outcome
	Demonstrate a commitment to personal health and well-being.	Chapter 3: The Human at the Center Chapter 4: Self-Care and Self-Compassion Chapter 5: Mindfulness Chapter 9: The Upholder	Upholder	Personally well & healthy, Mindful	Culture of Caring
;	Demonstrate a spirit of inquiry that fosters flexibility and professional maturity.	Chapter 5: Mindfulness Chapter 7: The Awakener Chapter 10: Emotional Intelligence Chapter 12: The Three Cs: Competence, Capability, and Complexity Chapter 13: Reflective Practice Chapter 14: Innovation	Awakener	Motivator	Culture of Excellence
		Chapter 6: It's not about you Chapter 7: The Awakener	Awakener	Motivator, Coach, Mentor, Advocate, Architect	Culture of Excellence
		Chapter 8: The Connector	Connector	Supporter, Collaborator, Edgewalker, Engineer, Authentic Communicator	Culture of Trust
		Chapter 9: The Upholder	Upholder	Personally well & healthy, Emotional Awareness, Others-oriented, Social and Organizational Awareness, Mindful	Culture of Caring
		uLeadership Copyri	gnt 2021	Awareness, william	

Coming soon!





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