The average OR nurse manager is 51. Do you know where your replacement is? Though a lot of attention has been focused on the nursing shortage, not as much has been paid to the pending shortage of managers.

By 2010, about 20% of current nurse leaders plan to retire, and 75% plan to retire by 2020, according to a 2006 poll by Nursing Management and the Bernard Hodes Group.

Many organizations have solid leadership development programs. But often, the task of preparing a successor falls on the perioperative director.

New leaders “are almost going to have to be handpicked, mentored, and trained—and in many cases convinced there are benefits of being a leader,” says Sandy Haeberle, RN, senior vice president of the Hodes Group’s health care division.

It could take some selling.

The job of perioperative director is a big one. Directors have taken on more departments and more responsibilities. OR managers also have a growing list of demands, including financial analysis, quality reporting, and regulatory compliance, to name a few.

That calls for a big skill set—financial management, systems thinking, project management, and conflict resolution, among many others.

Managers say younger nurses aren’t as interested in taking on the demands.

“I think it’s harder to get the Gen Xers or even boomers to think about leadership positions because they can work 3 12-hour shifts and walk away,” says Haeberle, referring to the popular practice of paying nurses a full-time salary for a 36-hour week.

Yet leadership is crucial not only for organizational performance but nursing’s future. Nurses’ relationships with their manager are a key factor in whether they are satisfied and stay on the job, studies show.

Falling into management

For many nurses, management isn’t a career choice but something they fall into, says Rose Sherman, RN, EdD, CNAA, director of the Nursing Leadership Institute at Florida Atlantic University in Boca Raton.

She documented the finding in interviews with 120 front-line nurse managers. “We frequently heard they took the job on an interim basis because no one else wanted it. This stretched into months, and finally they agreed to take it. There was no defined career path.”

She conducted the study to learn about the managers’ challenges and the competencies they thought were needed for their role. That led to a competency model for nursing leadership.

The participants said they often didn’t receive formal orientation and mentoring. “Another major finding was that managers were genuinely concerned about who would take their places when they retired because so few of their younger nurses are interested in nursing leadership,” says Sherman.

In a follow-up study, she conducted focus groups to look at factors that influence younger nurses to consider or reject leadership positions.

While younger nurses saw the potential to make a difference as a manager, inadequate compensation was a deterrent, along with “the lack of true power” in the role and negative messages about the position they received from current nurse leaders.
Leaving a legacy

Part of managers’ leadership legacy will be planning for a seamless transition when they leave, Sherman says. That means preparing one or more nurse leaders to take their place.

“It’s important for all of us to get started grooming our replacements—enjoy mentoring your replacements and know you are making a difference for future generations,” she advises.

“Succession planning should occur at all levels of the organization—it should not be just considered in departmental silos,” says Betty J. Noyes, RN, MA, of Noyes & Associates, Ltd, Bainbridge Island, Wash, who provides nursing leadership education.

“It begins with a formal process of identifying and assessing employees, engagement and support at all levels of the organization, and education and mentoring programs to support candidates for advancement.

“It’s a big mistake to expect that management skills or leadership ability are genetically acquired attributes,” she adds. “A person isn’t born knowing how to calculate an FTE, nor are leaders born.”

What periop directors can do

These are some steps for developing a succession plan.

Think about competencies

Think about the competencies needed to be an effective OR manager in your organization.

A resource specific to the OR is Competencies for Management of the Operating Room, 3rd Ed by Billie Fernsebner, RN, MSN (OR Manager, Inc, 2005). The book outlines 18 competencies with measurable criteria, learning options, and relevant articles from OR Manager (sidebar).

Fernsebner suggests the book can be used to help plan a self-directed learning program for new managers.

“Learning options can be selected for each competency, and a time frame established for completion,” she says. The person overseeing the orientation can guide the process and sign off on the criteria as completed.

Sherman, in her 2007 article, outlines 6 competencies for nursing leadership based on her study:

- personal mastery
- interpersonal effectiveness
- financial management
- human resource management
- caring
- systems thinking.

A description of the model is at www.fau.edu/nli/model2.pdf. The American Organization of Nurse Executives also has resources (sidebar).

Competencies for management of the operating room

The OR management competencies can be used as a guide for developing new managers. The competencies were developed in 1996 by OR Manager, Inc, and reviewed and refined by 8 nurse managers from hospitals of various sizes across the country. After 3 rounds of review, the competencies were sent to a random sample of managers from the OR Manager database for review and validation. The competencies were revalidated in 1999. The study was conducted by Billie Fernsebner, RN, MSN.

Managerial competencies

1. Demonstrates understanding of systems that affect the operating room
2. Administers and monitors a performance improvement program
3. Uses the information system for surgical services
4. Participates in the governance of the operating room
5. Complies with the legal requirements of surgery
6. Provides an environment conducive to ethical care
7. Establishes and maintains a system for project management

Financial competencies

8. Manages fiscal resources
9. Manages material resources

Clinical competencies

10. Provides a framework for professional clinical practice
11. Manages the environment of care
12. Maintains a risk management program for the OR
13. Creates a culture of patient safety in the perioperative areas
14. Creates a climate for use and conduct of research

Interpersonal competencies

15. Manages human resources
16. Uses group process skills
17. Develops and uses negotiation skills

Technological competencies

18. Develops (or determines the existence of) a technology management program

Source: OR Manager, Inc.
Keep an eye out for leaders

Look for younger nurses who demonstrate leadership behaviors within your own staff and when you interview, Sherman suggests. Look at staff who communicate well and build relationships, see the bigger picture in the organization, develop others, and recognize the importance of standards and accountability. Identify the informal leaders on your staff or staff who have assumed leadership in professional organizations.

Offer encouraging words

Encourage younger nurses about their leadership potential, Sherman advises. Ask your high-potential staff if they have thought about leadership. They may not see their own potential. Encouraging words from a manager can be powerful in influencing career choices.

Use job shadowing

Offer a nurse with leadership potential the opportunity to shadow you or another manager for a day or a week.

“You can say, ‘Let me show you what an adventure it is.’ Let them see your role from a different perspective,” Noyes suggests. Take front-line managers and staff to an executive meeting, a conference, or a community event where you’re making a presentation.

“Expose them to new perspectives. It will be an educational gain, even if they decide not to pursue management,” she says.

Assign a learning project

Though classes are important, a learning project is one of the best ways to bring education into the world of experience, nurse leaders say.

“Research shows 70% to 80% of the development of people comes from experience and skill they get on the job,” says D’Anne Carpenter, director of leadership development for the 46-hospital Trinity Health System based in Novi, Mich.

Even if you can’t send the staff to a management program, think about the skills they need and opportunities you can create, she suggests.

Noyes weaves learning projects into the nursing leadership curriculum she designed for Trinity Health. Make sure the project is well defined, has clear boundaries, and has enough meaning that when completed, it will feel like a win (or a safe fail), she advises.

“That’s how you can recognize leadership as well as management skill,” she says. “You will see who can do a spreadsheet. You will see who can mobilize a process improvement project.”

If you assign a project, “you must provide the time to complete it successfully,” Fernsebner stresses. Not providing the time causes frustration and smothers enthusiasm.

Support development

When you identify high-potential staff, develop a plan of action that includes educational, human, and financial resources to support the aspiring leader. Some ideas Sherman offers:

• Encourage candidates to attend leadership seminars and obtain additional education.
• Nominate staff with talent for stretch assignments that will help them grow and develop.
• Discuss behaviors or performance issues that could be career derailers.
• Include them in projects, assignments, hospital committees, and leadership retreats.
• Provide them with feedback about their strengths and areas for improvement.
• Create opportunities for your high-potential staff to be viewed as leaders within your organization.
Advocate for resources

Once you’ve identified prospects and outlined a development plan, advocate for the resources to support the plan.

The case should not be difficult to make. The cost of recruiting and replacing a nurse manager is estimated at about 1.5 times the annual salary, or about $150,000 for a $100,000 employee, or more, says Haeberle.

By developing leaders, “you are offering the organization a tremendous benefit,” Noyes points out. “If you know your attrition rate for managers is going to be 25% a year, you’d better be prepared to avoid the cost of a vacancy or an interim manager.”

A generation gap in management?

Boomer managers are workaholics. Generation X and Y want a better balance in their lives and aren’t interested in management.

There may be some truth to this stereotype, but it’s not universal, nurse leaders say. “You do find people who want to advance—you can’t stereotype a generation,” Fernsebner says.

One CNO was pleasantly surprised when after an ICU manager resigned and none of the assistant nurses wanted to take her place, an experienced staff nurse stepped forward. She said she would soon be getting her MBA and wanted to apply.

Carpenter says she’s seeing a large enough group of emerging leaders who want to move ahead.

“My team can’t move quickly enough on creating career paths and development opportunities, because we’re being requested to do so.”

But Sherman thinks health care and nursing in particular need to examine how they think of leadership roles.

“We need to ask ourselves, ‘Is this practical? Is it going to be attractive as we move forward?’

“Looking at demographics, one of our challenges is going to be workforce shortages in every industry, not just health care,” she says. “We are going to be competing with other industries for qualified people.”

In her interviews with nurse managers, Sherman found they had little administrative support to do their jobs.

“We have taken it for granted that people can manage multimillion-dollar budgets and 150 personnel, and do it with one secretary,” she says.

“The only way people have been able to manage is to increase the number of hours they work. Baby boomer directors have been willing to do that. But I think future generations will view that differently.”

—Pat Patterson
References


Nurse leader development programs

American Organization of Nurse Executives

Aspiring Nurse Leaders Institute
Workshops held June 24-27 and Nov 11-14.
—www.aone.org. Look under Education.

Ninth House Network
Online leadership development courses for high-potential employees, new managers, and experienced managers.
800/824-1767

Noyes & Associates, Ltd
Provides consulting on succession planning, including management education programs for health care professionals.
206/780-8142
—www.noyesconsult.com

Institute for Johns Hopkins Nursing

Nurse Manager Academy
Baltimore
A weeklong course covering essential skills and topics related to practice as a nursing manager. 443/287-4745
—www.ijhn.jhmi.edu/NurseManager/default.htm

Nurse Manager Leadership Collaborative
This program is being developed by AONE, the American Association of Critical-Care Nurses, and AORN. Currently available are a Learning Domain Framework and a Nurse Manager Inventory Tool.

Advisory Board Company

Nursing Leadership Academy
A program for developing nursing leaders based on a national standard curriculum. 202/266-5600
Resources on succession planning

