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ANA
AMERICAN NURSES ASSOCIATION

ANA LEADERSHIP

Competency Model

For a listing of all ANA Leadership
**educational offerings**, please click

JULY**2018**

OVERVIEW

The American Nurses Association's Leadership embarked on the journey of building, enhancing, and strengthening the leadership competencies of nurses and those working or serving the nursing profession by reflecting on the seminal work of the ANA, foundational elements of the nurse profession, and incorporating evidence-based instructional design and leadership theories and research.

As depicted in the Model of Professional Nursing Practice Regulation (see Figure 1), the professional organization is responsible to the public and the profession to define the scope and standards of practice for nursing. ANA established the foundational work for the profession through the ANA Leadership Package which consists of three specific documents: *Nursing Scope and Standards of Practice, Code of Ethics for Nursing and Nursing's Social Policy Statement.* These foundational documents guide the practice of nursing, frame the standards of care and reflect the patterns of professional performance in the dynamic environment of health care.

FIGURE 1. MODEL OF PROFESSIONAL NURSING PRACTICE REGULATION (ANA, 2010)
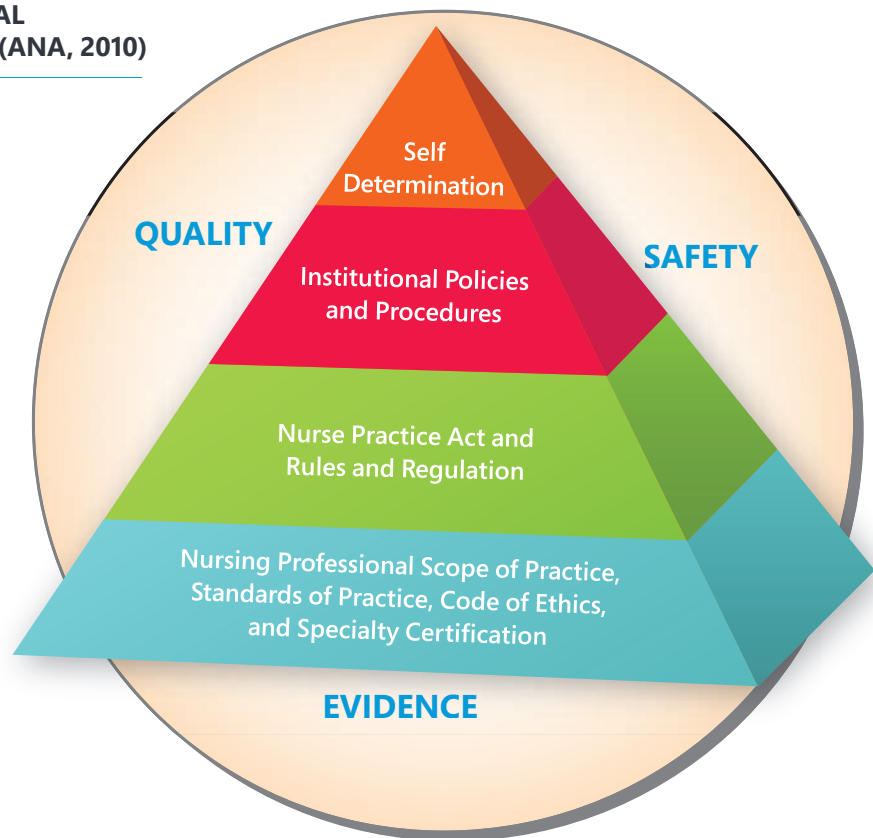
These documents also serve as the embodiment of the bottom tier of the pyramid; the highest level of the pyramid—Self Determination—is the key focus of the ANA Leadership. It is within this model and at this level that the ANA Leadership has established its work to help the nurse leader prepare and enhance the leadership qualities, abilities and impact of the nursing profession for the health of society.

The Nursing Standards of Practice and Standards of Professional Performance include competencies required of registered nurses. The *Standards of Professional Performance* contains ten standards that dovetail with the ANA Leadership competencies that were selected from the Center for Creative Leadership's (CCL®) Competency Library and serve as the foundation for all courses, programs and offerings.

1

The following standards of professional performance dovetail with the ANA Leadership competencies:

COLLABORATION | The registered nurse collaborates with health care consumer, family, and others in the conduct of nursing practice. For ANA Leadership, **collaboration** surfaces in the competencies related to participative management and building collaborative relationships. Nurse leaders must be able to work in collaboration with other health professionals and leaders from other disciplines including finance, manufacturing, and other for-profit and non-profit industries.

COMMUN ICATION| The registered nurse uses a wide variety of communication skills in all areas of practice. For ANA Leadership, **communication i**s reflected in the competencies that embrace effectively communicating information and ideas in writing and verbally as well as expressing ideas clearly and concisely and inspiring others.

EDUCATION | The registered nurse attains knowledge and competence that reflects current nursing practice. **Education** is a key element of the nursing profession and life-long learning, and the ANA Leadership embraces and encourages professional development through the various courses, seminars, and programs across the three leadership tracks.

ENVIRONMENTAL HEALTH | The registered nurse practices in an environmentally safe and healthy manner. For ANA Leadership, **environmental health** is reflected in the leadership programs related to wellness and self-care—the elements embodied in image, initiative, and self-awareness.

ETHICS | The registered nurse practices ethically. For ANA Leadership, **ethics** is reflected in the integrity competency that includes elements of honesty, responsibility, credibility, and the ability to use ethical considerations to guide decisions and actions.

EVIDENCE-BASED PRACTICE AND RESEARCH | The registered nurse integrates evidence and research findings into practice. For ANA Leadership, **evidence-based practice and research** is embodied in the work and also reflected in competencies of business acumen, systems thinking, and learning capacity.

LEADERSHIP | The registered nurse demonstrates leadership in the professional practice setting and the profession. For ANA Leadership, **leadership** competencies are the foundation of programs developed for Leadership and embody three key areas for leading the self, leading others, and leading the organization.

PROFESSIONAL PRACTICE EVALUATION | The registered nurse evaluates her or his own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations. For ANA Leadership, **professional practice evaluation** is embodied in the competencies of self-awareness, learning capacity, image, adaptability, interpersonal savvy, and self- management, self-insight, and self-development.

QUALITY OF PRACTICE | The registered nurse contributes to **quality nursing practice** through creativity, innovation and overall quality improvement. For ANA Leadership, nurse performance and overall leadership preparation and enhancement contributes to the quality of practice.

RESOURCE UTILIZATION | The registered nurse utilizes appropriate resources to plan and provide nursing services that are safe, effective, and financially responsible. For ANA Leadership, **resource utilization** is highlighted in the competencies of business acumen, influence, systems thinking, vision and strategy.

ANA Leadership Competencies embrace the Standards of Nursing Performance competencies listed above and reflect the well-established competencies for leadership from the Center for Creative Leadership (CCL®) from which they are drawn.

Professional Competence in Nursing Practice & Nurse Leadership

As stated in the *Nursing Scope and Standards of Practice* (second edition), the public has a right to expect registered nurses to demonstrate professional competence throughout their careers. This responsibility is shared across a continuum. The registered nurse is individually responsible and accountable for maintaining professional competence. It is the nursing profession's responsibility to shape and guide any process for assuring nurse competence. Regulatory agencies define minimal standards of competence to protect the public. The employer is responsible and accountable to provide a practice environment conducive to competent practice. Assurance of competence is the shared responsibility of the profession, individual nurses, professional organizations, credentialing and certification entities, regulatory agencies, employers, and other key stakeholders (ANA, 2010).

ANA believes that in nursing practice competence can be defined, measured, and evaluated. Additionally, ANA believes professional leadership competencies can also be defined and measured. The set of competencies selected from CCL's Competency Library, an evidence-based resource of research on leadership, support the foundation of work across the Nurse Leader Track.

DEFINITIONS AND CONCEPTS RELATED TO COMPETENCE

A number of terms are central to the discussion of competence whether in the clinical setting, academic or professional/administrative setting:

An individual who demonstrates **competence** is performing at an expected level. The Institute of Medicine (IOM, 2003), defined professional competence as "the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individuals and community being served."

A **competency** is an expected level of performance that integrates knowledge, skills, abilities, and judgment.

The **integration** of knowledge, skills, abilities, and judgment occurs in formal, informal, and reflective learning experiences.

Knowledge encompasses thinking, understanding of theories, professional standards of practice, and insights gained from context, practical experiences, personal capabilities, and leadership performance.

Skills include communication, interpersonal, and problem-solving skills.

Ability is the capacity to act effectively. It requires listening, integrity, self-awareness, emotional intelligence, and openness to feedback.

Judgment includes critical thinking, problem solving, ethical reasoning, and decision-making.

Interprofessional refers to the shared relationship among individuals, groups, and organizations from different disciplines. The synergies created through groups, committees, projects that comprise individuals from different disciplines; the impact of teamwork.

Interdisciplinary as used in this context refers to cross disciplines of health and health care (e.g., medicine, pharmacology, nursing) and business (e.g., leadership, communications, finance).

Transformational leadership includes the competencies required to inspire and stimulate followers to achieve extraordinary outcomes and in the process, develop their own leadership capacity. They help followers grow and develop into leaders by responding to needs, empowering the individual, and aligning the goals and objectives across the span from follower/subordinate to leader to organization.

Formal learning most often occurs in structured, academic, and professional development practice environments, while informal learning can be described as experiential insights gained in work, community, home, and other settings.

Reflective learning represents the recurrent thoughtful personal self-assessment, analysis, and synthesis of strengths and opportunities for improvement. Such insights should lead to the creation of a specific plan for professional development and may become part of one's professional portfolio. The ANA Leadership Institute has developed individual 360-degree assessment tools and instruments to support this aspect of an individual's leadership journey.

EVALUATING COMPETENCE

ANA designed the Leadership program with a focus on evidence-based application. The rich history and grounded research conducted by CCL to identify leadership competencies provided the foundation upon which ANA started the journey. ANA believes that competence in nursing practice must be evaluated by the individual nurse (self-assessment), nurse peers, and nurses in the roles of supervisor, coach, mentor, or preceptor. Additionally, other aspects of nursing performance may be evaluated by professional colleagues and patients. ANA Leadership has embarked on an additional form of evaluating competence—the 360-degree assessment tool—customized specifically for ANA and those serving the nursing profession.

Competence can be evaluated by using tools that capture objective and subjective data about the individual's knowledge base and actual performance and are appropriate for the specific situation and the desired outcome of the competence evaluation. One tool that could be used to inform improvement is the National Database of Nursing Quality Indicators (NDNQI®). NDNQI was developed to aid the registered nurse in patient safety and quality improvement efforts by providing research- based national comparative data on nursing care and the relationship to patient outcomes. NDNQI is the only national, nursing quality measurement program which provides hospitals with unit-level performance comparison reports at the state, regional, and national levels. One of the measures of NDNQI is the RN survey which is conducted on an annual basis to serve nurse managers in addressing the needs of their nurse staff, improve work environments and assist with retention and recruitment.

To assist with overall evaluation of the impact of ANA Leadership, the ANA convened an Evaluation Group comprised of key experts in nursing performance, leadership, and evaluation design to develop a series of methodologies to inform the leadership development and enhancement process.

Professional Development in Nursing—an art & science

Nursing is a scientific discipline as well as a professional journey. The science of nursing is based on an analytical framework of critical thinking known as the nursing process comprised of assessment, diagnosis, outcomes identification, planning, implementation and evaluation. Nurses as scientists rely on evidence to guide their policies and practices. Central to nursing practice is the art of caring and the personal relationship that the nurse enters with the patient. Across the profession—combining the art and science, nursing focuses on the promotion and maintenance of health and the prevention or resolution of disease, illness or disability.

While early education and professional practice enables nurses to conduct their clinical work, additional preparation and professional development is central to enhancing the ability to function and contribute in a rapidly changing health care environment. A continued commitment to the nursing profession requires a nurse to remain involved in continuous learning and strengthening individual performance within varied settings. ANA Leadership was developed with the professional development of nurse leaders in mind. Health care reform will continue to evolve and thus, provide additional opportunities for nurses to function either within their full scope of practice across various settings or in various leadership positions across health care and beyond.

ANA LEADERSHIP

ANA developed the ANA Leadership for the nurse interested in excelling in a career path, a leader within a health care organization who represents the interests of the nursing profession, a seasoned nurse or health care administrator interested in refining skills to differentiate them from the competition or to advance to the next level of leadership. The professionally developed programs draw on evidence-based practice and multi-disciplinary approaches to build, develop, enhance and grow the leadership impact of every nurse and nurse leader who makes the investment.
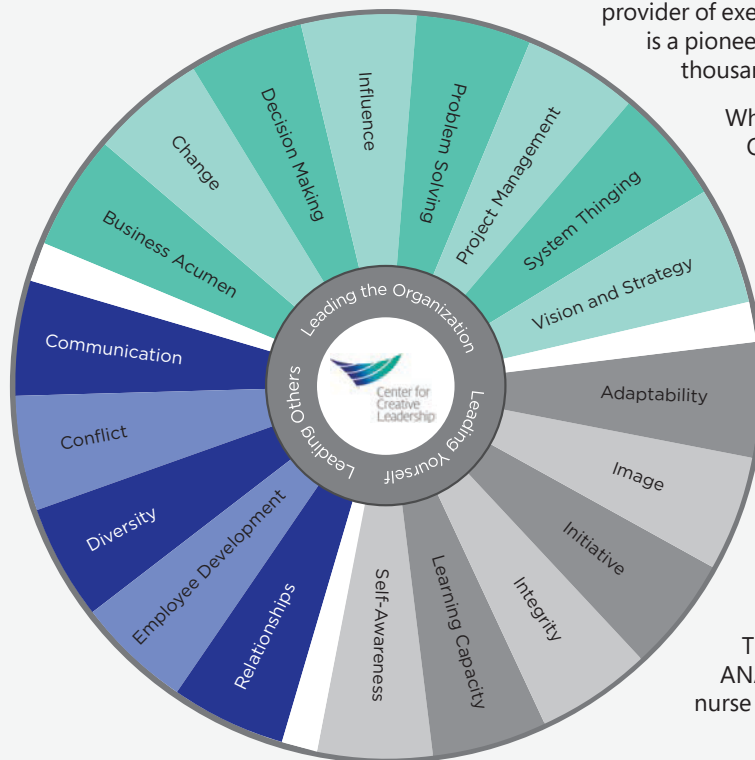
ANA Leadership
ADVISORY COUNCIL

ANA secured an external group of experts to provide input, perspective, expertise and guidance to ANA Leadership. The individuals include:

In May 2013, the Advisory Council convened to review the CCL competencies, discuss the types of leaders within each track, and identify the competencies according to a career trajectory. They completed the selection process via email exchange and dialogue to develop the final set upon which the curriculum is developed.

- **Dawn Bazarko**, DNP, MPH, RN
  Senior VP, Center for Nursing Advancement, United Health Group
  Minneapolis, MN
- **Linda Groah**, MSN, RN, CNOR, NEA-BC, FAAN, CEO
  Association of periOperative Registered Nurses
  Denver CO
- **Susan Hassmiller**, PhD, RN, FAAN
  Senior Adviser for Nursing, Robert Wood Johnson Foundation
  Princeton, NJ
- **Susan Reinhard**, PhD, RN, FAAN
  Senior VP, AARP Public Policy Institute, Chief Strategist,
  Center to Champion Nursing in America
  Washington DC
- **Rose Sherman**, EdD, RN, NEA-BC, CNL, FAAN
  Associate Professor, Director, Nursing Leadership Institute,
  Florida Atlantic University
  Boca Raton, FL
- **Les Wallace**, PhD
  Owner, Signature Resources
  Denver, CO

ANA Leadership Competencies

Each program offering is designed according to expected outcomes based on competencies drawn from the Center for Creative Leadership (CCL®) Competency Library—an evidence-based process for tailoring competencies most relevant for leadership development at different stages of a career trajectory. CCL, a top-ranked provider of executive education, is a pioneer in the use of assessment and their expertise has earned the trust of thousands of professionals and consultants around the world.

While other organizations within the nursing community (e.g., American Organization of Nurse Executives, American Association of Critical-Care Nurses, and Oncology Nursing Society) have developed leadership competencies, ANA identified a unique niche and need to develop programs based on a selection of competencies from the CCL that transcend any one specialty or profession and identify leadership competencies across the trajectory of professional development.

Additionally, ANA Leadership curriculum is designed to specifically address career derailment factors that impact career success. These factors include difficulty building and leading a team, developing good working relationships with others, changing or adapting, following up on promises or completing a job, and lacking the depth to manage outside of one's current function.

As shown in the graphic to the left, the full complement of competency clusters are organized by three distinct domains: Leading Yourself, Leading Others, and Leading the Organization. These three domains encompass specific competencies from which the ANA derived the specific competencies for career advancement for the nurse and nursing professional.

Center for Creative Leadership, CCL®

ANA LEADERSHIP COMPETENCY FRAMEWORK

NURSE LEADERS

LEADING YOURSELF

ADAPTABILITY
Openness to influence, flexibility

IMAGE
Executive image

INITIATIVE
Motivates self

INTEGRITY
Builds relationships

LEARNING CAPACITY
Knowledge of job, business

SELF-AWARENESS
Self-awareness

LEADING OTHERS

COMMUNICATION
Communicating effectively

CONFLICT
Confronting problem employees

DIVERSITY
Leveraging differences

EMPLOYEE DEVELOPMENT
Developing and empowering

RELATIONSHIPS
Building collaborative relationships

LEADING THE ORGANIZATION

BUSINESS ACUMEN
Seeks broad business knowledge

CHANGE
Change management

DECISION MAKING
Decisiveness

INFLUENCE
Strategic perspective

PROBLEM SOLVING
Getting information, making sense
of it; problem identificatn

SYSTEMS THINKING
Acts systemically

VISION AND STRATEGY
Strategic planning

PROJECT MANAGEMENT
Organizes

ANA LEADERSHIP COMPETENCIES FOR NURSE LEADERS

LEADING OTHERS

COMPETENCY CLUSTER	DESCRIPTION	BEHAVIORS
Communication	**Communicating effectively** Expresses ideas clearly and concisely; disseminates information about decisions, plans, and activities.	• Expresses ideas fluently and eloquently. • Prevents unpleasant surprises by communicating important information. • Encourages direct and open discussions about important issues. • Writes clearly and concisely. • Conveys ideas through lively examples and images.
Conflict	**Confronting problem employees** Acts decisively and with fairness when dealing with problem employees.	• Can deal effectively with resistant employees. • Acts decisively when faced with a tough decision such as laying off workers, even though it hurts him/her personally. • Moves quickly in confronting a problem employee. • Is able to fire or deal firmly with loyal but incompetent people without procrastinating. • Correctly identifies potential performance problems early. • Appropriately documents employee performance problems.
Diversity	**Leveraging differences** Works effectively with people who differ in race, gender, culture, age, or background; leverages the unique talents of others to enhance organizational effectiveness.	• Promotes policies that are sensitive to the needs of a diverse workforce. • Works well with people who differ in race, gender, culture, or age. • Leverages the unique talents and viewpoints of others. • Hires people with a diversity of skills and backgrounds. • Respects employees regardless of their position or background.
Employee Development	**Developing and empowering** Offers constructive feedback and encouragement; delegates work and encourages individual initiative.	• Delegates work that provides substantial responsibility and visibility. • Acts as a mentor, helping others to develop and advance in their careers. • Supports the decisions and actions of direct reports. • Utilizes others' capabilities appropriately. • Develops staff through constructive feedback and encouragement. • Encourages individual initiative in determining how to achieve broad goals.
Relationships	**Building collaborative relationships** Builds productive working relationships with co-workers and external parties.	• Gets things done without creating unnecessary adversarial relationships. • Uses good timing and common sense in negotiating; makes his/her points when the time is ripe and does it diplomatically. • When working with a group over whom he/she has no control, gets things done by finding common ground. • When working with peers from other functions or units, gains their cooperation and support. • Tries to understand what other people think before making judgments about them. • Quickly gains trust and respect from his/her customers. • Can settle problems with external groups without alienating them.

ANA LEADERSHIP COMPETENCIES FOR NURSE LEADERS

LEADING THE ORGANIZATION

COMPETENCY CLUSTER	DESCRIPTION	BEHAVIORS
Business Acumen	**Seeks broad business knowledge** Has an understanding of the business that goes beyond his/her own limited area; seeks to understand both the products/services and the financial aspects of the businesss.	• Has a solid understanding of our products and services. • Knows how the various parts of the organization fit together. • Knows the business. • Understands the financial side of the business.
Change	**Change management** Uses effective strategies to facilitate organizational change initiatives and overcome resistance to change.	• Leads change by example. • Accepts change as positive. • Adapts plans as necessary. • Takes into account people's concerns during change. • Effectively involves key people in the design and implementation of change. • Adjusts management style to changing situations. • Effectively manages others' resistance to organizational change. • Adapts to the changing external pressures facing the organization. • Is straightforward with individuals about consequences of an expected action or decision.
Decision Making	**Decisiveness** Prefers quick and approximate actions in many management situations.	• Does not hesitate when making decisions. • Does not become paralyzed or overwhelmed when facing action. • Is action-oriented.
Problem Solving	**Getting information, making sense of it; problem identification** Seeks information and can create order out of large quantities of information. Gets to the heart of a problem.	• Seeks information energetically. • Probes, digs beneath the surface, test the validity of information. • Creates order out of large quantities of information. • Is a keen observer of people, events, and things. • Defines problems effectively, gets to the heart of a problem. • Spots problems, opportunities, threats, trends early. • Is logical, data-based, and rational.
Project Management	**Organizes** Sets priorities, is able to help employees do the same.	• Organizes tasks and projects effectively. • Prioritizes projects and tasks logically. • Is good at helping employees prioritize tasks. • Is a good coordinator of employees and projects.

ANA LEADERSHIP COMPETENCIES FOR NURSE LEADERS

COMPETENCY CLUSTER	DESCRIPTION	BEHAVIORS
Influence	**Strategic perspective** Understands the viewpoint of higher management and effectively analyzes complex problems.	• Does his/her homework before making a proposal to top management. • Works effectively with higher management (e.g. presents to them, persuades them, and stands up to them if necessary). • Links his/her responsibilities with the mission of the whole organization. • Once the more glaring problems in an assignment are solved, can see the underlying problems and patterns that were obscured before. • Understands higher management values, how higher management operates, and how they see things. • Analyzes a complex situation carefully, and then reduces it to its simplest terms in searching for a solution. • Learns from the mistakes of higher management(i.e., does not repeat them him/herself). • Has a solid working relationship with higher management.
Systems Thinking	**Acts systemically** Understands the political nature of the organization and works appropriately within it; effectively establishes collaborative relationships and alliances throughout the organization.	• Understands the political nature of the organization and works appropriately within it. • Considers the impact of his/her actions on the entire system. • Establishes strong collaborative relationships. • Deals effectively with contradictory requirements or inconsistencies in the organization.
Vision and Strategy	**Strategic planning** Develops long-term objectives and strategies; translates vision into realistic business strategies.	• Regularly updates plans to reflect changing circumstances. • Translates his or her vision into realistic business strategies. • Weighs the concerns of all relevant business functions when developing plans. • Develops plans that contain contingencies for future changes. • Successfully integrates strategic and tactical planning. • Articulates wise, long-term objectives and strategies. • Develops plans that balance long-term goals with immediate organizational needs.

ANA LEADERSHIP COMPETENCIES FOR NURSE LEADERS

COMPETENCY CLUSTER	DESCRIPTION	BEHAVIORS
Adaptability	**Openness to influence; flexibility** Takes ideas different from own seriously; shares responsibility and collaborates with others; accepts criticism well; doesn't assume a single best way.	• Listens well. • Takes ideas different from own seriously and from time to time changes mind. • Accepts criticism well; easy to give feedback on his/her performance. • Is a participative manager; shares responsibility and influence with direct reports. • Collaborates well with others. • Is flexible; good at varying his or her approach with the situation. • Thinks in terms of trade-offs; doesn't assume a single best way. • Creates good give-and-take with others in conversations, meetings. • Doesn't let power or status go to his/her head.
Initiative	**Motivates self** Is focused and self-disciplined.	• Is self-disciplined — stays on task even if difficult. • Has a strong work ethic — creates a productive atmosphere. • Is energetic — stays active, moving, and productive. • Is determined — committed to success. • Is involved — is there when needed.
Image	**Executive image** Communicates confidence and steadiness during difficult times; adapts readily to new situations.	• Communicates confidence and steadiness during difficult times. • Projects confidence and poise. • Adapts readily to new situations. • Commands attention and respect. • Accepts setbacks with grace.
Integrity	**Builds relationships** Has credibility and is trustworthy in the eyes of co-workers.	• Is trustworthy—produces trust in employees. • Has credibility in the eyes of employees. • Keeps relationships with employees strong. • Treats people fairly and with consistency.
Learning Capacity	**Knowledge of job, business** Excels at his or her professional function; is a quick study; understands financial information.	• Is a good general manager. • Is effective in a job with a big scope. • In a new assignment, picks up knowledge and expertise easily, a quick study. • Is at home with graphs, charts, statistics, and budgets. • Understands cash flows, financial reports, and corporate annual reports. • Shows mastery of job content; excels at his or her function or professional specialty.
Self-Awareness	**Self-awareness** Has an accurate picture of strengths and weaknesses and is willing to improve.	• Admits personal mistakes, learns from them, and moves on to correct the situation. • Does an honest self-assessment. • Seeks corrective feedback to improve himself or herself. • Sorts out his or her strengths and weaknesses fairly accurately (i.e., knows himself or herself).

DERAILMENT FACTORS

COMPETENCY CLUSTER	DESCRIPTION	BEHAVIORS
Difficulty building and leading a team	Difficulties in selecting and building a team.	• Does not resolve conflict among direct reports. • Hires people with good technical skills but poor ability to work with others. • Does not motivate team members to do the best for the team. • Selects people for a team who don't work well together. • Is not good at building a team. • Does not help individuals understand how their work fits into the goals of the organization. • Fails to encourage and involve team members.
Difficulty changing or adapting	Resistant to change, learning from mistakes, and developing.	• Cannot adapt to a new boss with a more participative management style. • Has not adapted to the culture of the organization. • Is unprofessional about his/her disagreement with upper management. • Has an unresolved interpersonal conflict with boss. • Is not adaptable to many different types of people. • Resists learning from his/her mistakes. • Does not use feedback to make necessary changes in his/her behaviors. • Does not handle pressure well. • Has not adapted to the management culture. • Can't make the mental transition from technical manager to general manager.
Failure to meet business objectives	Difficulties in following up on promises and completing a job.	• Neglects necessary work to concentrate on high-profile work. • Is overwhelmed by complex tasks. • May have exceeded his or her current level of competence. • Overestimates his/her own abilities. • Has difficulty meeting the expectations of his/her current position.
Problems with interpersonal relationships	Difficulties in developing good working relationships with others.	• Is arrogant (e.g., devalues the contribution of others). • Is dictatorial in his/her approach. • Makes direct reports or peers feel stupid or unintelligent. • Has left a trail of bruised people. • Is emotionally volatile and unpredictable. • Is reluctant to share decision making with others. • Adopts a bullying style under stress. • Orders people around rather than working to get them on board.
Too narrow a functional orientation	Lacks depth to manage outside of one's current function.	• A promotion would cause him or her to go beyond their current level of competence. • Is not ready for more responsibility. • Would not be able to manage in a different department. • Could not handle management outside of current function. • Doesn't understand how other departments function in the organization.

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