

Title:

Determining Leadership Readiness in Certified Registered Nurse Anesthetists (CRNAs) Practicing in Illinois

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Session Title:

Frontline Clinical Leadership Posters

Slot (superslotted):

FL CL PST: Friday, September 26, 2014: 10:00 AM-10:30 AM

Slot (superslotted):

FL CL PST: Friday, September 26, 2014: 11:45 AM-1:00 PM

Slot (superslotted):

FL CL PST: Friday, September 26, 2014: 3:00 PM-3:30 PM

Keywords:

authentic leadership, leadership readiness and nurse anesthetist

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE	TIME ALLOTTED	FACULTY/SP EAKER	TEACHING/LEARNING METHOD	EVALUATION/FEEDBACK
Example Critique selected definition of the term, "curriculum"	Example Definitions of "curriculum" Course of study Arrangements of instructional materials The subject matter	Example 20 minutes	Example Name, Credentials	Example Lecture PowerPoint presentation Participant feedback	Example Group discussion: What does cultural training mean to you?

	that is taught Cultural "training"				
	Planned engagement of learners				
Comprehension: demonstrate understanding of the concept "leadership development readiness", also referred to as "leadership readiness" Summarize the components of Authentic Leadership	Define "leadership readiness" Outline components of "leadership readiness": Goal orientation, developmental efficacy, self-concept clarity, leader complexity, and metacognitive ability Outline components of Authentic Leadership: Self-awareness, internalized moral perspective,	5-7 minutes	Susan Krawczyk, CRNA, MS	poster presentation, discussion	Discussion and participant feedback: How do you interpret "leadership readiness"? What are the main components of "leadership readiness"?

	<p>balanced processing, and relational transparency</p> <p>Relate Authentic Leadership as a partial measure of "leadership readiness"</p>				
<p>Synthesis: Formulate an action plan for the development and promotion of leaders: self-leaders, individual leaders and/or groups of leaders</p>	<p>Combine the components of authentic leadership as they relate to "leadership readiness"</p> <p>Estimate the value of education, work experience, and leadership training related to the "leadership readiness" of and individual</p>	<p>5-7 minutes</p>	<p>Susan Krawczyk, CRNA, MS</p>	<p>poster presentation, discussion</p>	<p>Discussion and participant feedback: Can you predict which nurses/nurse anesthetists are ready for leadership development? What changes would you make, individually, to prepare yourself for leadership development?</p>

		and/or group				
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Abstract Text:

Objectives: The purpose of this project is to (1) establish a general state of “leadership readiness” among certified registered nurse anesthetists (CRNAs) practicing in Illinois, as determined by their Authentic Leadership Self-Assessment scores and (2) correlate factors such as level of education, work experiences and specific leadership training/development on leadership readiness.

Background: The changing health care environment requires strong nurse leaders in health care and professional organizations who are able to effectively envision organizational goals and share their visions in order to motivate and inspire others to achieve those goals. Often times, nurses are called to leadership positions without consideration of the individuals’ readiness to become a leader and there have been limited studies attempting to identify a state of leadership developmental readiness among practicing CRNAs and/or advanced practice nurses. In establishing a general state of leadership readiness among CRNA members of the Illinois Association of Nurse Anesthetists (IANA), the findings of the study will provide a better understand of where the group stands as potential leaders and where to focus leadership developmental efforts.

Methods: This study is a descriptive, correlational study using a 14-item electronic survey sent to all CRNA members of the Illinois Association of Nurse Anesthetists (N=1290). 131 CRNAs responded meeting the study’s criteria of (1) being a CRNA and (2) practicing in the state of Illinois. Survey data was collected from February 01, 2014 to May 01, 2014.

Findings: The data has been collected and is in the process of being analyzed. Statistical significance will be established with correlation and independent T tests. I will have the findings and discussion ready to present at the conference.

Conclusion: This study will reveal a level of leadership readiness among CRNAs practicing in Illinois. A full conclusion and discussion of need for further studies will be ready to present at the conference.