

# **The Gerontological Nursing Leadership Academy: Leading Advancements in Interprofessional Care of Older Adults**

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# Needs Grow for Older Adults



# Demographic Shifts

Aging

Aging of the Aging

10,000 turn 65 each day

Pew Charitable Trust; NCHCS FastFacts



# Purpose

To prepare and position nurses  
in leadership roles in various health care settings to  
lead interprofessional teams  
in the improvement of health care quality  
for older adults and their families.

# Origins

- Ideas
- Conversations
- Commitment
- Reality



# Academy History

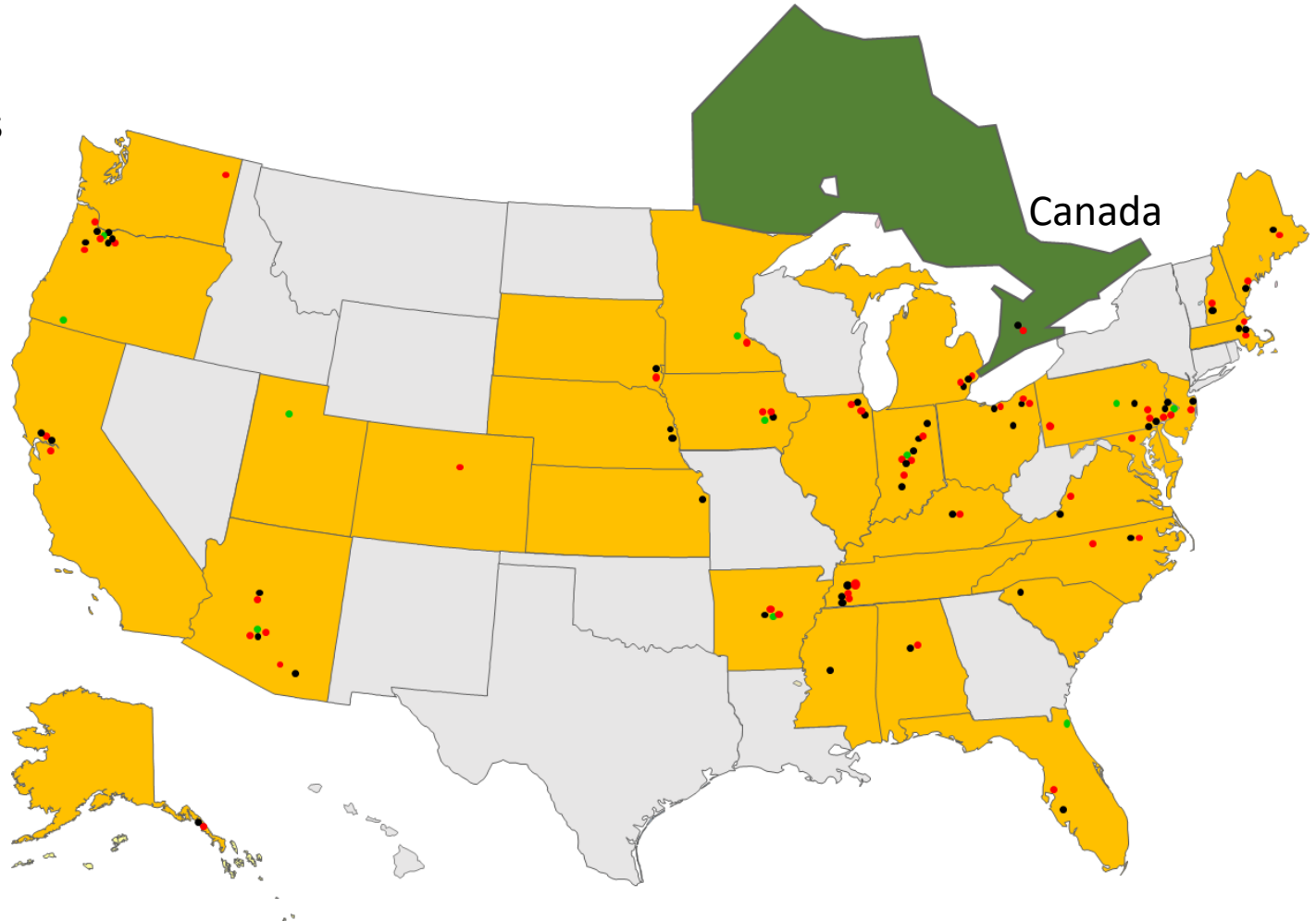
## Five cohorts:

- 2007 - 2008 Planning Grant
- 2008 - 2009 US
- 2010 - 2011 US
- 2012 - 2013 US
- 2014 - 2015 US & Canada
- 2016 - 2017 US & Philippines

# GNLA Academy Participant Impact Across the World

Philippines

Canada

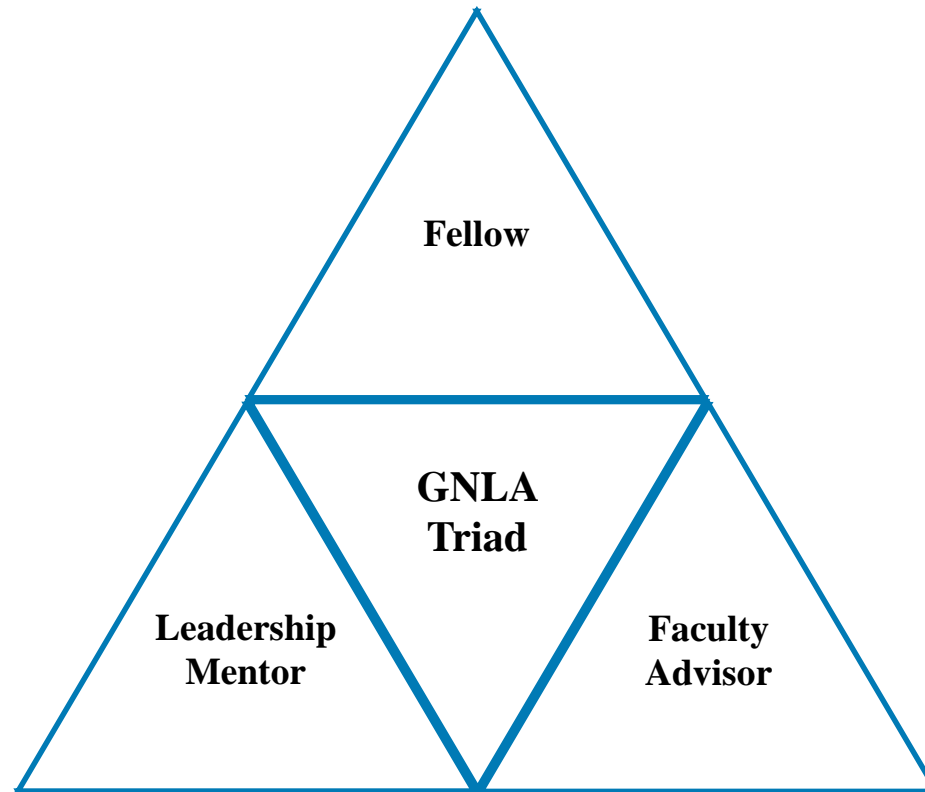


# Leadership Development Model

- Self-awareness and Self-assessment
- Behavioral focus
- Reflective analysis
- Relationship foundation – triads
- Kouzes-Posner “Leadership Challenge”



# Leadership Development Model



# Three Learning Domains

- Individual Leadership Development
- Advancing Nursing Practice through an Interprofessional Team Leadership Project
- Expanding Scope of Influence:  
Organization, Community, Profession

# Curriculum Overview

- Competitive selection
- 18 month guided leadership journey
- Two three-day immersion workshops
- Fellow & Leadership Mentor relationships
- Individual leadership development plan
- Self development

# Curriculum Overview

- Faculty consultation
- Facilitated site visits by the academy faculty
- Monthly faculty led learning activities & discussion groups
- Design & implementation of interprofessional team leadership project

# Curriculum Overview

- Journaling
- Evaluation of experience and project
- Dissemination of results
- Professional presentations of project outcomes and experience

# Fellowship is Life Changing



**Gerontological Nursing Leadership Academy**

# An Exemplary Fellowship Leadership for a Lifetime



Presented By  
Karen Reynolds, DNP, CNS-BC, FGNLA

# Objectives

- Share the experience of the geriatric leadership fellowship
- Discuss how leadership development in geriatrics can improve outcomes for older adults
- Demonstrate the sustainability of the fellowship through expansion of your scope of influence



# Gerontological Nursing Leadership Fellowship



**Gerontological Nursing Leadership Academy**

# Individual Leadership Development

- Self Assessment
- Deep Dive into the Principles
- Individual Leadership Development Plan (ILDLP)
- Mentor – Dyad
- Mentor and Faculty Advisor – Triad
- Leadership Advisory Team

*Diversity  
became  
our  
strength!*

# Challenges and Opportunities in Developing a Leader

Becoming a new person in a familiar environment

- Overcoming internal perceptions of limits of one's abilities and 'making waves'
- Understanding influence of stakeholders that are affected
- Balancing mentoring recommendations with situation being experienced
- Development from the "Inside Out"

## Goals / Strategies

### Critical to My Success for Individual Leadership Development

1. Increased confident and assertive communication to generate and influence a shared vision

Strategy:

- *Introspection, self assessment, Leadership Practices Inventory (LPI), feedback from leadership advisors, mentoring*
- *Preparation and clarity of communication & affirmation of values*

2. Sustained relationships and establishment of new relationships with key influential stakeholders

Strategy:

- *ILDP, mentoring, networking*
- *Established relationship with CNO and Strategic Marketing Manager*

3. Increased involvement in opportunities to network and advocate for older adults

Strategy:

- *Introspection, Self Awareness*
- *Relationship building in the organization and in the community*

# Actualizing My Potential

Everyone has his or her own unique power. It is our responsibility to find that power and use it to the fullest capacity we can in the service of other people.

Toan Lam

# Interprofessional Team Project

Collaboration among professionals to improve the outcomes of care for older adults

- Brainstorming Delirium Project – Critical Care  
Delirium- acute iatrogenic effect in acute care
- Explicit Purpose: Implementation of an evidence based assessment and interventions for identification and treatment of delirium in critical care

# Challenges and Opportunities Leading a Team

- Developing skill set makes the processes easier
- Getting to the point of change activates the resistors
- Competing influencers
- Self-questioning effort versus the outcome

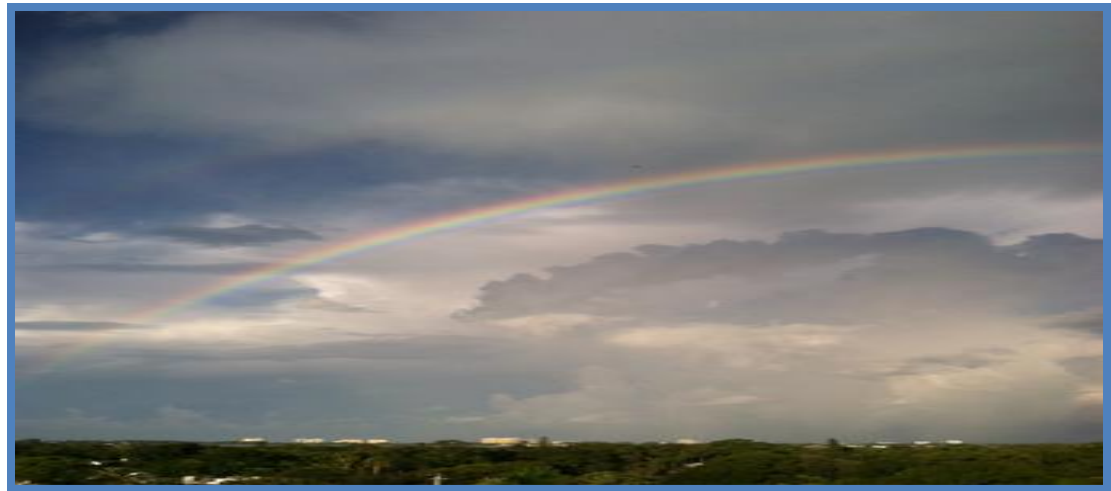


“Be you, go quietly and confidently about it, give others the chance to shine. The outcomes will guide the evaluation of you!”

Meredeth Rowe, 2013

# Exchanging Breadth for Depth

- Set the course for your future
- Career Mapping
- Branding
- Align actions and behaviors with your goals -  
Intentional



# Expanding Scope of Influence Fellowship

## **How I changed the organization – Sarasota Memorial Health Care System**

- Geriatric Advanced Practice Nurse – Expert Consultant/Leader
- Hospital Board Influence – Geriatric Specific Acute Care
- Initiating discussion and data analysis specific to outcomes and population health for older adults leading to interprofessional projects – PEACE Project (Patient Experience for Acute Care Elders)
- Integration of Acute Care of Older Adults in our established service lines

## **How I impacted the community/profession**

- STTI Delta Beta Chapter Chair of Research and Scholarship
- Acute Care/Advanced Practice Nurse Representative Community Stakeholders for Aging Consortium
- Facilitator for Local County Aging Network – Knowledge regarding Communicating with Older Adults in Acute Care & focus on advocacy and Health Literacy
- Adjunct Faculty for Gerontology Courses at State College of Florida
- Sarasota County Commissioners (Government) Geriatric Health Care Representative on Senior Advisory Council
- Many Community /State Presentations on Older Adults, Advocacy, & Delirium

# Expanding Scope of Influence

## Sustainability

### National/International Collaboration and Influence

- NICHE (Nurses Improving Health System Elders) Coordinator SMHCS  
Presented at NICHE Conference 2017
- Appointed to Florida State Elder Affairs Dementia Care and Cure Initiative – Dementia Friendly Communities
- On Governors Board for Friendship Centers – serving Older Adults in a large region in Florida
- Presented at STTI Research Congress Puerto Rico, 2015 & Ireland, 2017
- ICU Liberation National Collaborative – Lead for SMHCS (70 hospitals)
- Collaborated with National Press Ganey – PEACE Project for Improved Patient Experience for Older Adults – National Over 80 years old Initiatives
- Policy Institute – Hartford Change AGENTS – Influence to change national survey for older adults/caregivers for Medicare

# Social Media as an Influencer



Follow:  
Karen Reynolds  
@RaysNurseK

Sigma Theta Tau  
International  
@STTI #INRC2017

American Geriatrics  
Society  
@AmerGeriatrics

American Society of  
Aging - -@ASAgging

John A. Hartford  
Foundation  
@JHARTFOUND



WHY STTI?

CONNECT & ENGAGE

LEARN & GROW

ADVANCE & ELEVATE



*The GNLA experience was instrumental in actualizing my potential as a leader. With the supportive structured curriculum and intensive mentored experience, I garnered new skills, behaviors, and the confidence to expand my influence and to make an impact on improving outcomes for older adults.*

— KAREN REYNOLDS, DNP, CNS-BC, FGNA

## GERONTOLOGICAL NURSING LEADERSHIP ACADEMY

STTI Home Page / Learn & Grow / Leadership / International Leadership Institute / Gerontological Nursing Leadership Academy



We are not currently taking applications for this program. Applications for our next cohort will begin in 2017. If you would like receive a notification when we begin taking applications, please complete the [ILI Academies Interest Form](#).

Learn & Grow

GNLA STTI

<http://www.nursingsociety.org/learn-grow/leadership-new/international-leadership-institute/geriatric-academy>

# Gerontological Nursing Leadership Academy



# In appreciation:

My Mentors: Meredith Rowe & Deb Cleeter Bailey

My leadership advisory team: Sue Shkrab, Lisa Baumgardner, Jan Mauck, Jennifer Rheingans, Kathleen Houseweart

My family: John, Rachel and Rebekah

# Influence through Mentoring

**Deborah D'Avolio, Ph.D.**

**BC-ANCP, ANP**

**Associate Professor**

**Florida Atlantic University**





# Leadership Development GNLA fellow



- Accomplished through intense mentoring and guidance of the Fellow's leadership development
- Development & design of the Fellow's Gerontological project
- Perfect vehicle-hands on experience in implementing the interprofessional project

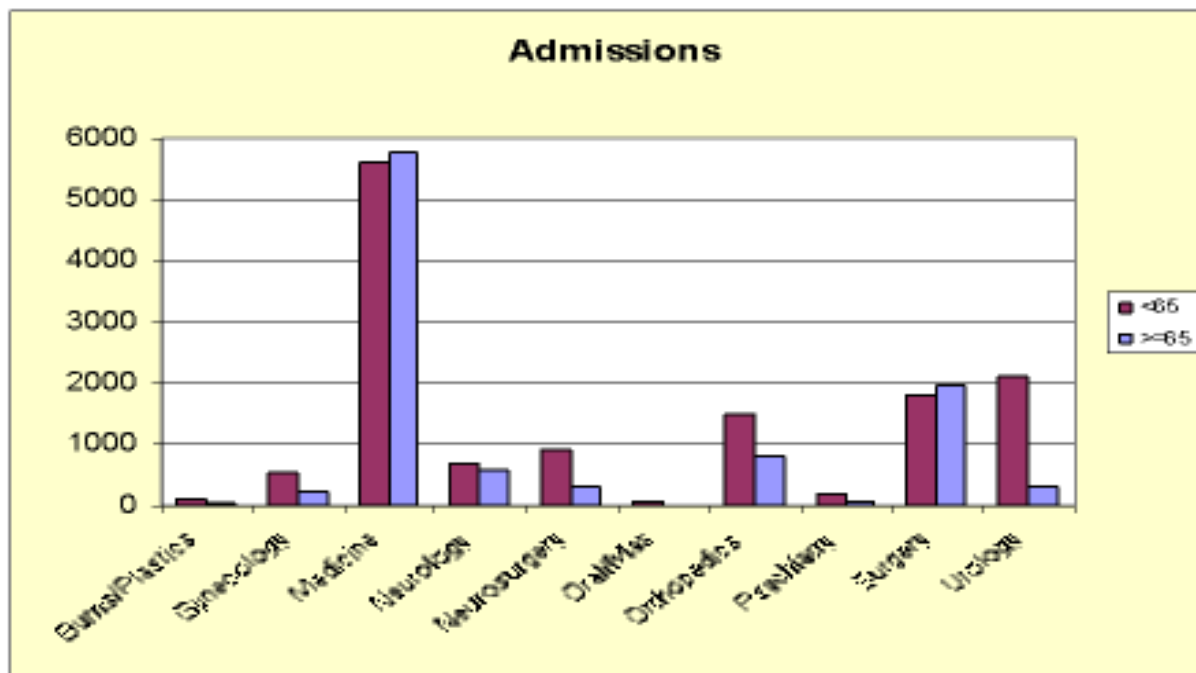
# Leadership Development GNLA fellow

- “Triad” relationship between Faculty Advisor, Fellow, and Leadership Mentor
- Integral in providing support and guidance during the fellow’s leadership journey
- Facilitating a Fellow in her development as an interprofessional leader
- One of the most rewarding experiences in my career

# Leadership Project

## Massachusetts General Hospital

Profile: Admissions  
43% of Adults 65



# MGH 65Plus NICHE



*"Tailoring healthcare for today's older adult"*

## MGH-Networking to Improve the Care of Hospitalized Elders

- Senior VP, Chief Nurse J. I. Erickson
  - Associate Chief Nurses, T. Gallivan, D. Burke.
  - First NICHE in MA.
- *65 Plus* Interdisciplinary Advisory Team.



*"Tailoring healthcare for today's older adult"*

# 65 Plus Program

- MGH-Networking to Improve the Care of Hospitalized Elders
- First NICHE in MA, Interprofessional
- Education
- Practice & Policy
- Consultation
- Research and Research Utilization
- Professional and Clinical Leadership

# **The G.R.E.A.T. Project: Geriatric Rounds to Educate, Assess, and Teach**

**Susan Gordon, ACNP-BC, GNP-BC**

STTI Geriatric Nursing Leadership Academy Fellow

**Deborah D'Avolio, PhD, BC-ACNP, ANP**

Nurse Scientist Yvonne L. Munn Center for Nursing Research

Massachusetts General Hospital

STTI Geriatric Nursing Leadership Academy Mentor

# GREAT Project: Aims

- Explore the incidence of geriatric syndromes among hospitalized older adults
- Pilot a geriatric syndrome assessment and intervention tool
- Provide unit based education
- Bedside geriatric nursing rounds







# GREAT Project Results

- **70%**    **S**    Sleep
- **74%**    **P**    Problems with eating
- **72%**    **I**    Incontinence
- **54%**    **C**    Confusion
- **80%**    **E**    Evidence of falls
- **68%**    **S**    Skin



Gordon, MS, RN  
Nursing Director  
Ellison

RN

D'Amico, Ph.D. RN  
Geriatric Specialist

RN

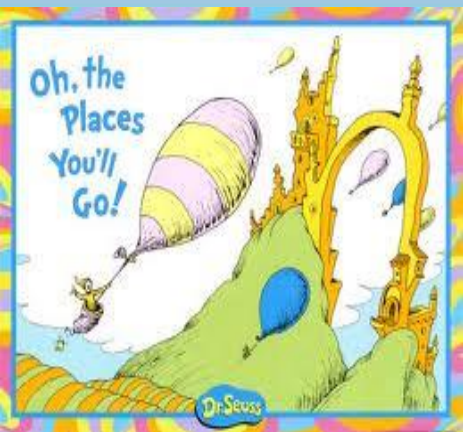
# GREAT Project Results

- 369 geriatric syndromes- 83patients
- 2,043 nursing interventions implemented
- Clusters of geriatric syndromes/risks.
- *Geriatric Nursing Knowledge and Skills* are needed to improve the outcomes of hospitalized older adults and ultimately reduce healthcare costs.
- Future research-continue to explore syndrome clusters and development of assessment tool.

“ Translational research transforms scientific findings or discoveries from basic lab, clinical, or population studies into new clinical tools, processes, or applications.”

Grady, P. , Translational Research and Nursing Science, NINR News  
*Nursing Outlook.*





# Oh, the Places You'll Go!

Adapted from Dr. Seuss

Congratulations! Today is your day.  
You're off to Great Places! You're off and away!  
You have brains in your head.  
You have feet in your shoes.  
You can steer yourself any direction you  
choose.  
You're on your own "but with your **GNLA**  
**mentor and faculty** along." And you know what  
you know. And **YOU** are the person who'll  
decide where to go.

# Acknowledgements



*"Tailoring healthcare for today's older adult"*

- Thank you:
  - GNLA
  - Mentee: Susan Gordon, DNP
  - Faculty: Deborah Cleeter Bailey, MSN, EdD
  - MGH 65 Plus Advisory Team and Leadership
  - Older Adult Participants
- McBride, Angela Baron (2011). *The growth and development of nurse leaders*. New York, N.Y.: Springer.

**Sometimes the Greatest  
Transformation Begins by Walking  
Through the Door  
Congratulations Susan Gordon, DNP!**



# Interprofessional Healthcare Leadership



Health care is dependent on strong teamwork: communication, quality, safety, satisfaction.



# Defining leadership

- At its heart, leadership is broadly accepted to be about influencing others to accomplish common goals. It is a complex and multi-faceted process which involves providing support, motivation, coordination, and resources to enable individuals and teams to achieve collective objectives. It is boundary spanning that creates limitless possibilities.



# Driving Forces

Demand for more efficient use of resources

Standardized processes  
that coordinate and  
distribute  
responsibilities

Vertical integration

Cost-containment measures  
aimed at reduction of  
clinical and administrative  
waste

# Interprofessional teamwork for health and social care integration

- Effective interdisciplinary teamwork starts with the leaders..with us !!!!
- This requires a high level of trust, respect, and willingness to focus on the big picture
- The goal is to achieve optimal outcomes in a complex, ever changing environment



# GNLA Fellows Influencing Advancements in Healthcare

- Transforming the Healthcare System on the front lines of care delivery to the Boardroom

Areas that have been affected:

patient and family experiences

financial outcomes

quality and safety



# Important Initiatives: Demonstrating Value, Driving Innovation

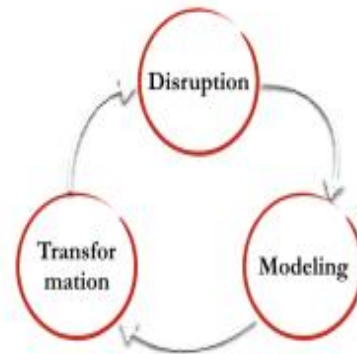
- Fall prevention
- Delirium prevention and treatment
- Medication reconciliation
- Transitional care
- Telemedicine/virtual care
- Convenient Care
- Patient/family centered care
- Preventive/personalized care

# Nurse Leadership

Organizational structures

Recruitment and retention

The Infinite Loop of Transformation



Improving health outcomes

Productivity and cost effectiveness

# Building a shared understanding: Meeting the demands of Many

- The key opportunities GNLA are maximizing
  1. Innovation: not diversification
  2. Integration – technology/digitally accelerated
  3. Redefine access
  4. Patient/family centeredness

# Nurses' policy influence

- Nurses' influence on health policy protects the quality of care by access to required resources and opportunities
- Nurses, as part of health systems need to influence the formulation of health policies rather than just implement them.
- Nurses have unique and valuable views toward health policies



# Drivers for Policy

- We live in an interconnected world: Policy is Global
- Health care costs are rising
- The world is graying
- The workforce is aging
- Life expectancy is increasing
- Communicable diseases are an ongoing threat
- Chronic diseases are on the rise

# Prolific Policy

- True health care reform can serve as a vehicle for movement or progress in practice. It can open doors for opportunity and provide methodology for solidarity in action.
- Policy must be seen as a tool to sharpen our practice to meet the needs of the consumer.
- Policy and advocacy are interconnected.



# Stages of Policy Development: opportunities exist in each stage

- Policy Agenda
  - Policy Formulation
  - Policy Adoption
  - Policy Implementation
  - Policy Evaluation
- 
- Policy is born our need for communal actions

# Nurse Leaders : Shifting Policy

- Scope of practice
- Results-oriented payment
- New models of delivery
  
- From Florence Nightingale to active leaders today



# Engage: Redesign: and Shift the Paradigm



**What questions do you have ?**