

# Point-of-Care Leadership Tips and Tools for Nurses

## Purpose:

This Tips and Tools guide is designed to assist you in identifying and better understanding the concept of leadership at the point-of-care. The information is based on the **Healthy Work Environment Best Practice Guideline: *Developing and Sustaining Nursing Leadership, Second Edition.***

## Why is this important?:

Nurses providing leadership at the point-of-care are a critical part of safe patient care now and of effective nursing leadership in the future. Point-of-care leadership can have a positive impact on clinical practice and work environments by increasing quality, safe patient care, job satisfaction and nurse retention (Abraham 2011), as well as introducing all nurses to leadership behaviours that are important in all roles.

## The facts

- Point-of-care leadership is differentiated from other types of leadership in that the leadership activities relate directly or indirectly to the care process, and are carried out by point-of-care nurses who are not in a formal administrative role.
- Leadership at the point-of-care includes direct clinical work wherein nurses play a key role in clinical decision making and use evidence-based interventions in the development and implementation of care plans.
- Leadership at the point-of-care also refers to additional activities taken on by clinical nurses who engage others in clinical practice change, practice research, quality improvement or evaluation.
- Point-of-care leadership includes modeling, leading and advocating for quality, safe patient care based on the best evidence.



## What does this mean for you?

- It is important to know that leadership behaviours are expected of all nurses regardless of their title or position.
- A first step in point-of-care leadership development is gaining awareness of what point-of-care leadership is, and its requirement as a College of Nurses of Ontario (CNO) Practice Standard (CNO, 2002).
- Point-of-care leadership skills can be developed by taking advantage of organizational supports that may be in place, or that nurses may seek out, such as education, peer support, mentoring and feedback. Identify potential leadership opportunities and take steps to gain support to engage in them.
- Point-of-care leadership can also be developed through specific activities that offer the opportunity to grow and develop as a leader. Some examples: leading a guideline implementation team; leading adoption of a new process in care; presenting at nursing rounds; presenting at a team meeting; acting as a champion for a new practice; or working on a special project.

## How can I demonstrate point-of-care leadership in my role?

Effective point-of-care leaders incorporate specific behavioural competencies that are learned over time (Doran et al., 2012). Examples of such behaviours used within a normal working day include

- Effectively communicating patient assessment data.
- Articulating the patient's perspectives to other members of the health-care team.
- Clarifying information for patients and their families.
- Ensuring patients are empowered to make informed decisions about their care (Patrick et al., 2011).
- Using knowledge, clinical expertise, and patient perspectives to offer alternate points of view, seek clarification for current practices, and/or explore changes in practice.
- Engaging in project implementation, change management, interprofessional collaboration, and research analysis and improving processes of care.
- Acting as an interprofessional liaison to facilitate assimilation of information by all care providers.

Leadership at the point-of-care is evident in the following five practices, central to RNAO's Healthy Work Environment BPG. These are a part of leadership in all roles:

- 1. Building relationships and trust.**
- 2. Empowering others.**
- 3. Contributing to an environment that supports knowledge integration.**
- 4. Leading, supporting and sustaining change.**
- 5. Balancing complexities of the system and managing competing priorities (e.g. work-life balance).**

# Point-of-Care Leadership

The following specific behaviours are examples of point-of-care leadership in each of the five practices.

## 1. Building Relationships and Trust

- Ensuring that patients and their family's needs are assessed and effectively communicated, and that interventions are coordinated.
- Truly acting as advocates for patients, families, other point-of-care providers, and navigators of health-care delivery.
- Routinely interacting and communicating with patients to monitor, assess and prioritize patient needs.
- Providing evidence-based and client centered discharge education, ensuring appropriate follow-up to improve clinical outcomes and decrease re-admissions.
- Communicating patient findings based on clinical assessment and evidence based best practice.
- Communicating with the patient, family and interprofessional team to determine needs and changes that are not based solely on the patient's medical diagnosis, but broader health needs including social determinants of health.
- Developing and utilizing communication skills targeted to teams, integrating safe patient care.
- Empowering patients to partner in their care by providing information and support and ensuring that their voice and information is understood.
- Utilizing evidenced-based practices and organizational resources to address conflict.
- Advocating for patient and other point-of-care providers using conflict resolution skills and knowledge dissemination.
- Participating as leaders for nursing on interprofessional teams.
- Advocating for patients within the interprofessional team.
- Working collaboratively on nursing and interprofessional teams
- Assuming responsibility for specific patients based on scope of practice for the nursing profession.
- Understanding the influence the nurse has on patients and delivering care in a professional, respectful manner.
- Actively participating in professional activities including peer and other feedback to enhance skills and acquire new knowledge.
- Applying evidenced-based practices at the point-of-care while assessing, implementing and evaluating care.

## 2. Empowering others

- Seeking out and advocating for continual learning opportunities for point-of-care staff.
- Critically reflecting on personal use of empowering behaviours.
- Seeking feedback on empowering behaviours.
- Sharing power with others.
- Leading education for patients through the use of appropriate teaching resources.
- Using experience as a learning opportunity.
- Coaching, mentoring and guiding.
- Providing both negative and positive feedback constructively.

# Point-of-Care Leadership (cont.)

## 2. Empowering others (cont.)

- Utilizing systems and technology at the point-of-care to facilitate evidenced-based care and improved outcomes for patients/clients.
- Monitoring and collecting indicators to assess the safety and quality of patient/client care.
- Acting as liaison between interprofessional team members and consultant for other nurses.
- Identifying ways to save costs at the point-of-care, and bringing these to the attention of management.
- Implementing system-wide initiatives that improve quality, effectiveness and efficiency.
- Delegating and using resources appropriately at the point-of-care.
- Promoting the contribution of nursing to patient/client and organizational outcomes.
- Providing and acquiring appropriate information for decisions relevant to the patient/client.
- Acting as an advocate for patients and their families in the hospital and when accessing other community based services.

## 3. Contributing to an environment that supports knowledge integration

- Applying nursing process in leading the care of the patient/client.
- Providing opportunities to share knowledge on patient/client progress.
- Leading and sharing interventions for patients and clients through patient-care conferences.
- Managing personal growth by objectively challenging behaviour and beliefs.
- Assessing reports, lab results, to evaluate patient/client status, and sharing knowledge with other team members.
- Taking initiative to consult with experts to support the patient/client in achieving optimal care and outcomes.
- Engaging with other health-care professionals to improve efficiency in existing organizational processes.
- Providing open, timely communication to patient/client, family and the interprofessional team.
- Recognizing patient/client family cultural differences in communication and the influence perceptions of hierarchy may have on communication.
- Encouraging collaborative problem solving.
- Facilitating problem solving, decision making and improvement of patient flow.
- Providing effective feedback and seeking same.
- Engaging interprofessional team in improving quality of care and ensuring effective allocation of resources.
- Demonstrating a strong sense of individual responsibility for quality monitoring at point-of-care.
- Providing time for patient/family to discuss plan of care and involving the interprofessional team.
- Using reflective practice to generate and validate knowledge.
- Participating in benchmarking and implementing best practices.

# Point-of-Care Leadership (cont.)

## 4. Leading, supporting and sustaining change

- Acting as an advocate and assessor for patients, clients and staff.
  - Effecting change through advocacy for patients and clients.
  - Challenging assumptions to reflect patient-centered care.
  - Reflecting on personal attitudes and skills regarding change and change management.
  - Critically applying evidence to change initiatives.
- Facilitating communication with health-care service providers outside the hospital.
  - Demonstrating commitment to the change.
- Participating in strategic planning for the ward or specialty area.
  - Respecting and recognizes the expertise and individual talents that have contributed to the change.
- Providing expert advice and connecting with health services.
  - Providing regular communication to patients, clients and families on changes that may influence/impact? care.
- Soliciting feedback using approved methods (i.e. patient/client survey).
  - Working with interprofessional team to provide feedback on changes.
- Engaging with new staff and assisting as they learn to anticipate patient needs related to the change.
  - Becoming familiar with change theories and championing necessary change.

## 5. Balancing complexities of the system and managing competing priorities

- Using values clarification to identify personal values, values of others and the values of the organization.
  - Separating personal values from professional responsibilities.
- Seeking confirmation of professional decisions by consulting peers.
- Providing advice on appropriate care.
  - Developing flexibility in nursing practices responding to changing patient/client and organizational needs while providing safe evidence-based care.
- Sharing expertise and providing insight on new care techniques.
  - Leading patient care by setting priorities and adjusting care to reflect them.
- Facilitating debriefing sessions for staff and contributing to their knowledge.
  - Collecting data to advocate for resources.
  - Identifying equipment and staffing needs.
- Monitoring the effects of decisions on patients and clients.

**ica**BPG

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**RNAO**

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Link to the full version of this guideline

Developing and Sustaining Nursing Leadership, Second Edition BPG  
[www.RNAO.ca/bpg/nursingleadership](http://www.RNAO.ca/bpg/nursingleadership)

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