



COMMUNICATION
KNOWLEDGE
LEADERSHIP
PROFESSIONALISM
BUSINESS SKILLS

Nurse Executive Competencies: System CNE





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OVERVIEW

The system CNO role is primarily accountable for systemwide leadership. This role has expertise in professional nursing practice, clinical operations, care management, quality and safety, the patient experience, performance improvement and workforce planning. In addition this role has business and financial expertise.

The role of the system chief nurse executive (CNE) is a sub specialty of nursing leadership and requires its own set of competencies. Guided by the AONE Nurse Executive Competencies' domains—communication and relationship building, knowledge of the health care environment, leadership, professionalism, business skills—the following competencies describe the skills, knowledge, and attributes of nurse leaders in the role of the system chief nurse executive. They are presented as information for both system nurse leaders and those who employ or work with them. They can be used as a guideline for job description development, role expectations, evaluation criteria, and a self assessment tool in the identification of possible areas for growth and career planning. Additionally, the competencies show how nurse executive practice is evolving.

ASSUMPTIONS

- Health care will consolidate and systems will become a predominant model of integrated care delivery.
- The health care system will be patient centric/driven.
- Nursing will continue to evolve as a profession.
- System-focused executive nursing leadership is vital to success of health care systems.
- There are functions within nursing practice that are not aligned to the future state of nursing and a consolidated model for care delivery.
- Academic practice partnerships are critical to future workforce development
- “Hospital” will not be centric to delivery model and the health care continuum will be the focus.
- Interprofessional interdependence collaboration is critical to future state.
- Policy development, implementation and analysis and regulatory guidance should be aligned with creating effective delivery systems.
- The shift to a population health focus will continue.
- Managing variability equates in higher efficiency and effectiveness and lower cost; supporting the move to value-based purchasing
- The pressure for standardization based on sound evidence-based practice will continue.
- System transformation will continue to evolve.

Reliability and validity for the AONE Nurse Executive competencies is established by periodic job analysis/role delineation studies. These competencies are based on *A National Practice Analysis Study of the Nurse Executive* (2014).

1 COMMUNICATION AND RELATIONSHIP BUILDING



A. EFFECTIVE COMMUNICATION

- Effectively represents patient care/nursing perspective to governing bodies, and external audiences on behalf of the system organization.
- Ensure a consistent, principle-driven brand for clinical nursing practice across the system.

B. RELATIONSHIP MANAGEMENT

- Develop credibility and trust throughout the corporate nursing enterprise including but not limited to individual system hospital CNEs, CEOs, clinical staff, boards, medical staffs, corporate peers, and corporate boards through a variety of communication strategies.

C. INFLUENCING BEHAVIORS

- Provide the voice of the nursing/patient care enterprise at the system governing body level.

D. DIVERSITY

- Create an environment which recognizes and values differences in staff, physicians, patients and communities.
- Assess current environment and establish indicators of progress toward cultural competency.
- Define diversity in terms of gender, race, religion, ethnicity, sexual orientation, age, etc.
- Analyze population data to identify cultural clusters.
- Define cultural competency and permeate principles throughout the organization.
- Confront inappropriate behaviors and attitudes toward diverse groups.
- Develop processes to incorporate cultural beliefs into care.
- Implement a proactive plan for diversity initiatives in workforce planning.

E. SHARED DECISION-MAKING

- Align and ensure input is received from stakeholders across the system.

F. COMMUNITY INVOLVEMENT

- Participate in external activities regionally and nationally to give visibility and representation to the system's role in the profession and the broader health care industry.
- Represent the system in appropriate advocacy efforts/activities at a regional and national level.

G. MEDICAL/STAFF RELATIONSHIPS

- Implement a system strategy for the continuing development of the interprofessional relationship of medicine, nursing and other disciplines.
- In collaboration with other system leaders, design future functions and roles to facilitate care in the future health care delivery system.
- Support the development and implementation of systemwide standards and practices for care of patients/populations.

H. ACADEMIC RELATIONSHIPS

- Lead and or contribute to a comprehensive long-term workforce development plan with academic partners to meet the future needs of the system and its health care delivery model.
- Cultivate a strategic partnership network with nursing academic organizations that aligns with the system's workforce plan and future needs.

2 KNOWLEDGE OF THE HEALTH CARE ENVIRONMENT



A. CLINICAL PRACTICE KNOWLEDGE

- Apply knowledge to the formation/revision of practice policies and procedures that are evidenced-based.
- Transfer acquired knowledge to entity-based CNEs.
- Ensure consistency of policies and procedures across the continuum.
- Hold entity-based CNEs accountable for patient care standards.
- Implement a consistent monitoring process across all entities to ensure compliance with standards.
- Maintain current knowledge regarding the state nurse practice act in all states under scope of responsibility.
- Establish a consistent process to mitigate issues of non-compliance.
- Ensure consistency of clinical policies and procedures with respect to care setting and patient population.
- Standardize patient care policies and procedures as appropriate to care setting and patient population.
- Provide learning opportunities for leadership and staff across care settings and patient populations.
- Partner with academic colleagues to create life learning opportunities for self, nursing leaders and staff.
- Advocate, acquire and allocate resources for learning opportunities.

B. DELIVERY MODELS/WORK DESIGN

- Determine when new delivery models are appropriate, and then envision and develop them across system entities.
- Engage in discussions with colleagues internal and external to the system for benchmarking.
- Articulate current literature findings and facilitate discussion on best practices.
- Share systemwide best practices with colleagues internal and external to the organization.
- Engage in discussions with system level nursing and non-nursing leadership regarding new models and best practices.
- Lead initiatives to explore alternative care delivery models learning opportunities.
- Partner with academic and other colleagues to explore new and innovative multi-site care delivery models.
- Lead redesign efforts at the system level.
- Lead initiatives in the development, implementation and evaluation of delivery models.
- Synthesize and integrate divergent viewpoints for the good of the organization/ system.

C. HEALTH CARE ECONOMICS

- Engage entity-based CNOs in discussions regarding payment systems and regulations, and private payers.
- Create a learning environment around health care economics and set strategies as indicated.

D. HEALTH CARE POLICY

- Create a learning environment around health care policy.
- Create an expectation that entity-based CNEs and other nursing leaders will actively engage in these processes and professional organizations.
- Take systemwide action as indicated to implement or mitigate legislative directives.
- Drive a systemwide policy agenda at the local, state and national level.

E. GOVERNANCE

- Educate entity-based CNEs on the function and reporting of the system governance process; provide learning opportunities that inform the entity-based CNE.
- Participate at the system level and entity level as indicated by the governing structure.
- Partner with physician colleagues to articulate patient care issues and acquire needed support and resources.
- Partner with physician and other colleagues to develop a strategic plan and quality initiatives that are patient centered.
- Seek appointment to board committees, task forces and work groups; nominate and encourage entity CNEs to do the same.

F. EVIDENCE-BASED PRACTICE/ OUTCOME MEASUREMENT

- Build system capacity to evaluate, adopt and translate valid research into practice.
- Create the expectation that entity-based CNEs and other nursing leaders will engage in evidence-based/outcome measurement practices and establish a process to monitor and hold leaders accountable.
- Ensure that these standards are consistent across entities with respect to care setting and patient population.
- Partner with colleagues in finance to determine the appropriate methodology for allocation of resources.

- Publish research findings in peer-reviewed journals.
- Present research findings at national/international forums.
- Ensure that journal clubs, conferences and other forums are convened to disseminate research findings.

G. PATIENT SAFETY

- Engage interprofessional content experts at each entity to develop a systemwide patient safety program and develop a process to evaluate the program.
- Create a process to monitor and hold entity CNEs accountable for all aspects of the patient safety program.
- Standardize processes, policies and procedures as indicated for the care setting and patient population across the system.
- Employ evidence-based practices in the monitoring process.
- Work in interprofessional teams to monitor and evaluate clinical activities
- Create a culture of safety across all entities.
- Collaborate with entity-based CNEs to develop an effective approach to engage staff in these processes.
- Establish a process of continued regulatory readiness across all entities.

H. UTILIZATION/CASE MANAGEMENT

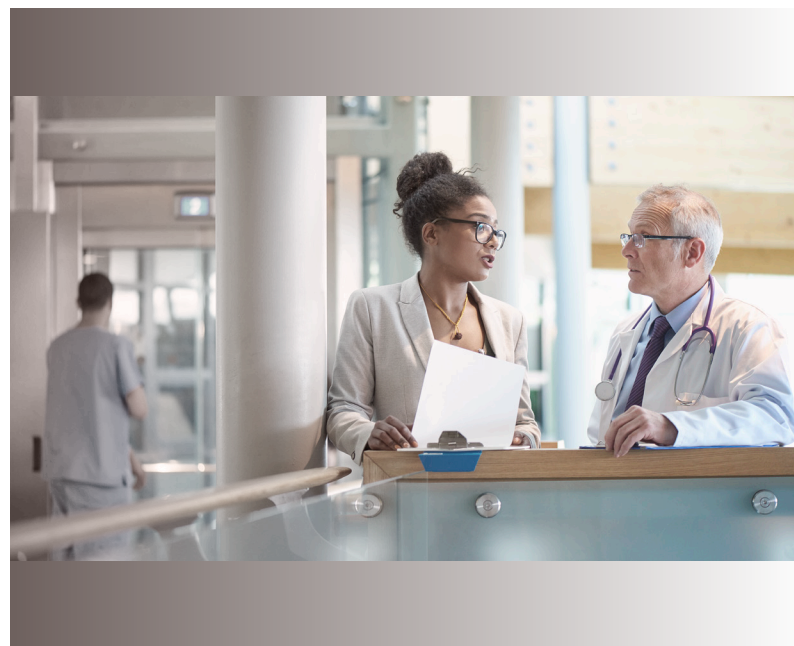
- Work in interprofessional teams to ensure that patient care needs are met across the continuum. Take a leadership role in efforts to create an integrated health care system.
- Lead communication efforts of key points.
- Partner with system CMOs and other leaders to create and implement an effective utilization management practices model.
- Establish expectations of entity-based CNEs to partner with physicians.

I. QUALITY IMPROVEMENT/METRICS

- Lead QI program and goals at system level.
- Cascade patient care quality improvement goals and objectives to entity level leadership.
- Establish a scorecard for each entity to track and monitor progress.
- Employ Six Sigma, Lean or other strategies to improve processes at the entity level.
- Develop and implement communication plan to inform and educate leaders regarding the linkages.
- Define outcomes that are care setting and patient population specific.
- Create a culture of interprofessional team work to identify appropriate national quality initiatives, metrics and goals.
- Recognize and reward success in achieving goals.

J. RISK MANAGEMENT

- Lead systemwide actions to correct identified areas of potential liability.
- Disseminate results of mitigated actions to leaders at all entities.
- Educate entity-based CNEs regarding the importance of prompt reporting of potential liability issues.
- Articulate clear expectations related to risk management and compliance issues.
- Hold entity-based CNEs accountable for compliance with policies, procedures and regulatory requirements.



3 LEADERSHIP



A. FOUNDATIONAL THINKING SKILLS

- Establish a vision of patient care for the system, implement and align system entities.
- Create and align a system vision for nursing in support of the organizational strategic vision.

B. PERSONAL JOURNEY DISCIPLINES

- Value and act on feedback that is provided about one's own strengths and weaknesses.
- Demonstrate the value of lifelong learning through one's own example.
- Learn from setbacks and failures as well as successes.
- Assess one's personal, professional and career goals and undertake career planning.
- Seek mentorship from respected colleagues.

C. SYSTEMS THINKING

- Provide leadership and challenge the status quo in building loyalty and commitment throughout the system.

D. SUCCESSION PLANNING

- Establish effective process for career growth and development of emerging leaders across the system.

E. CHANGE MANAGEMENT

- Encourage and support systemwide boundary spanning while valuing and promoting risk taking.
- Establish a model and/or governance structure for diffusion and spread of knowledge and best practices across the system.



4 PROFESSIONALISM



A. PERSONAL AND PROFESSIONAL ACCOUNTABILITY

- Establish standards for setting measurable, realistic outcomes with timelines and accountabilities systemwide.
- Design and deploy standardized processes and structures for holding self and others accountable systemwide.
- Work with facility leadership to ensure processes and structures are deployed consistently across the system to guarantee expectations for performance are established and accountability is maintained.
- Establish and maintain mechanisms for holding facility leadership accountable for outcomes.

B. CAREER PLANNING

- Network with other system CNEs to adjust or advise personal career plans.
- Work with CNEs and other facility executives to develop their career plans.
- Work with CNEs and other facility executives to develop and to build the pipeline for their own replacements.
- Design and implement standardized processes for monitoring career goal establishment, identifying resources and opportunities to support goal achievement and accountabilities for assessing individual progress toward goals.
- Allocate appropriate resources, human, experiential, informational and financial, to support goal achievement.

C. ETHICS

- Engage in discussions with entity and system leaders which advance familiarity with ethical principles and incorporates values as guardrails for ethical decision-making.
- Implement communication strategies to inform the system on ethical issues and resources.
- Facilitate standardized approaches to competency development on ethics, and monitor regularly, for all members of the system.
- Role model principled, values-based, ethical thinking to the system.
- Establish mechanisms to ensure the values and ethics of the system are infused into all policies and practices.

D. EVIDENCE-BASED CLINICAL AND MANAGEMENT PRACTICE

- Establish resources for support of utilization of evidence based practice and research in determining practice.
- Establish standards for competency in evidence-based practices and ensure they are incorporated into essential functions of all clinical positions systemwide.
- Ensure the incorporation of evidence into all policies and practices systemwide.
- Establish mechanisms for sharing of best practices, based on evidence, across the systemwide.

E. ADVOCACY

- Represent patient-focused perspectives at the system governance and executive level.
- Establish and communicate a framework for professional clinical practice which demonstrates a balance among conflicting priorities and which is patient centered.
- Demonstrate moral courage in expressions of clinical priorities, values, and perspectives at all system levels effectively.
- Develop communication strategies to inform staff of expectations for their engagement in professional activities and decision-making and provide models for including nurses in decisions affecting their practice.

F. ACTIVE MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

- Encourage and facilitate entity CNE participation in AONE.
- System CNE is a personal member of AONE and is visible at the national level.



5 BUSINESS SKILLS



A. FINANCIAL MANAGEMENT

- Participate in allocation of resources; deciding among competing needs of system entities.
- Articulate financial health of the system, particularly as it is influenced by nursing and other clinical decisions and outcomes.
- Mentor entity leaders in their growth as financial leaders and experts.
- Participate in system activities related to system bond ratings, investing and attainment of operating margins.
- Consider the financial impact of nursing decisions on the organization/health system and align strategic priorities with system.
- Energetically pursue new system ventures.

B. HUMAN RESOURCE MANAGEMENT

- Participate in workforce planning and employment decisions.
- Champion a diverse workforce.
- Use corrective discipline to mitigate workplace behavior problems.
- Interpret and evaluate employee satisfaction/quality of work surveys.
- Create opportunities for employees to be involved in decision-making.
- Reward and recognize exemplary performance.
- Formulate programs to enhance work-life balance.
- Interpret legal and regulatory guidelines.
- Manage collective bargaining environments or implement programs to avoid the need.
- Identify and eliminate sexual harassment, workplace violence, verbal and physical abuse.

- Implement ergonomically sound work environments to prevent worker injury and fatigue.
- Develop and implement bioterrorist, biohazard and disaster readiness plans.
- Identify clinical and leadership skills necessary for performing job related tasks.
- Provide mentorship and career counseling to aspiring clinicians and leaders to develop required skill sets (Succession planning).
- Identify future skill sets needed to remain competitive.
- Analyze market data in relation to supply and demand and manage resources to ensure appropriate compensation.
- Develop and implement recruitment and retention strategies.

C. STRATEGIC MANAGEMENT

- Is the voice of patients and caregivers in system strategic planning.
- Balance needs of individual entities with overall system success. (i.e. capital allocation decisions, growth decisions, systemwide product or service line decisions, centralization decisions).
- Illuminate rationale for system strategies to multiple stakeholders.
- Envision and implement a preferred future for the system and clearly articulate the vision.

D. MARKETING

- Identify and establish a systemwide nursing brand.

E. INFORMATION MANAGEMENT AND TECHNOLOGY

- Define and develop the use of new technology for clinical integration of the electronic health record.
- Incorporate “human factors” concepts related to technology.
- Implement, evaluate and lead the activities of a systemwide nursing informatics plan the system the CNIO role.

F. BUSINESS RESEARCH

- Leads or supports systemwide or regional research to increase science of nursing management and evolution of value-added health care systems.

