

Personal Leadership Development Plan

By Crystal S. Graening

University of Mary

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One of the definitions of leadership is how people behave and engage with others, and a good leader is one that others want to follow (Ellis and Abbott, 2013). Leadership is a skill that one develops. The development of leadership per Hunter (1998) is based on three phases, the foundation, feedback, and friction. Throughout experiences, we gain a foundation, or knowledge, about leadership, what it is and what it means. This class has further established my foundation of leadership, and through the use of a 360-degree feedback tool, I have been able to identify areas that need strengthening to improve myself as a leader in the future. After exploring the competencies a leader in a nurse educator role should have, this paper will focus on my personal 360-degree feedback results and how I will use them to develop and carry out a personal leadership development plan concluding with my personal leadership philosophy.

Leadership Competencies

The American Association of Colleges of Nursing defined nine essentials in the publication the *Essentials of Master's Education in Nursing*. Of those nine, the second essential is titled "Organizational and Systems Leadership", specifically addressing the importance leadership has in promoting quality and safety in patient care (AACN, 2011). Furthermore, it described that to be effective in this role, a leader must be able to both create and maintain effective relationships in the workplace that allows for respective communication and collaboration among interdisciplinary teams (AACN, 2011). It is also important that the master's prepared nurse is able to navigate the healthcare system to help patients do so (AACN, 2011). To carry out those roles, the leadership skills that are necessary include being able to collaborate, communicate, negotiate, delegate, and coordinate (AACN, 2011). Specific examples that the AACN (2011) provided included having an understanding of leadership (the

foundation), possessing excellent communication skills, being able to manage conflict, building effective teams while nurturing them and promoting teamwork, and understanding relationships between the healthcare systems and organizational framework, such as finances, structure, and the mission and values.

Likewise, according to the National League for Nursing (2005), one of the competencies a nurse educator must possess is the ability to function as a change agent and leader. Various components go into what will make a nurse educator effective in that role. The NLN (2005) indicated that a nurse educator needs to take on a long-term perspective that is both innovative and creative as part of the role (NLN, 2005). It is important, per the NLN (2005), that the nurse educator is a participant in interdisciplinary efforts that focus on addressing both healthcare needs and educational needs at the local, regional, national, or international levels. Additionally, the nurse educator promotes practices that are innovative within the learning environment and helps develop leadership skills that will shape and implement change (NLN, 2005).

Evaluation

After learning about leadership and having a foundation, it is important to obtain feedback in order to recognize what strengths and weaknesses a leader has to further grow in the role. The feedback obtained from others should include a person's peers, superiors, and subordinates. The following section describes how a 360-degree feedback tool was used to gather an assessment of my current leadership skills, what results came from the survey, including my own self-assessment, and a reflection on those results.

Leadership Evaluation Tool

The tool used to evaluate my leadership abilities was based on the 360-degree feedback concept. Using this type of assessment allows for those who observe a person and are affected

by the performance of the individual to give feedback about both achievements and failures of that person (Chopra, 2017). The individuals who give the feedback should come from a variety of people the person works with including subordinates, peers, and supervisors as well as a self-assessment by the person (Chopra, 2017). Chopra (2017) further explained that using a mix of superiors, subordinates, and peers can allow for more accurate results as the feedback from varying levels will allow for balance. The benefits of using a 360-degree feedback tool include the opinions of others persuading the person being rated to make changes, motivating the person to work harder based on feedback, and can improve self-worth and self-esteem (Chopra, 2017).

The tool selected to evaluate my current leadership abilities and to gain feedback on developing my leadership plan was the survey provided in the syllabus for NUR 614 Resilient Nursing Leadership. It included 17 components in which the surveyor was asked to provide a rating on a 1-5 scale, one being never, 2 as seldom, 3 indicative of sometimes, 4 signifying usually, and 5 pertaining to always. The option of selecting N/A was also given if the person answering felt that they could not answer with certainty or if they felt the function was not performed by myself. These 17 questions focused on various areas pertaining to leadership in order to assess my personal and current leadership skills. Three additional questions were asked that included what more I can do, what I can do less of, and any additional comments the person being surveyed may have. A copy of this survey is included in Appendix A.

The survey was sent by email to four individuals, two peers and two supervisors, who work directly with me on a daily basis. The individuals were given the purpose of the survey, which was to help me identify my strengths and weaknesses as an effective leader so that I may develop a leadership plan as part of my graduate studies. The individuals were asked to provide honest answers in order to obtain the best information to develop my plan.

Method of Confidentiality

To maintain confidentiality, a separate individual was chosen to which the results were emailed back to so that they could be tallied in an Excel document and sent back to me so that I would not have any knowledge of the responses given by anyone. It was stressed to those taking the survey that I would not know who provided what answer and that all information would be kept confidential by the third person party. All responses were emailed to that person, and I did not see the replies until they were tabulated and unidentifiable.

The person chosen was an employee from another department within the hospital who has a reputation of not ever saying another word about any other individual. She also has never repeated anything she has been told in confidence and is viewed as a trustworthy and honest person. The only discussion she and I had about the survey results were when it was completed. No other information was shared either between her and myself or others who participated.

Leadership Evaluation

In tabulating the results from the leadership survey tool that was given to four individuals, my strongest area with an average score of 5, almost always, was my ability to analyze problems in a systematic, logical, and timely manner (question 4). Other areas of strengths, scoring an average of 4.75, were setting and enforcing high standards on the unit to ensure the quality of care delivered to patients, holding myself and others accountable for meeting both commitments and objectives, and striving to ensure that the staff has the supplies, information, and resources needed to work effectively. I also scored high, 4.5, on having an ability to have a longer-term, 3-6 months and beyond, perspective on problems, and opportunities that will face the department.

There were also several areas in which I scored an average of 4, indicating usually, and these included acting promptly and decisively to address issues that arise within the unit, expressing ideas clearly and effectively as well as responding to issues raised by others so that individuals have the information and feedback needed to perform their jobs, and encouraging cooperation, teamwork and identification with the unit.

In looking at areas in which I could approve upon, my lowest average was a 3.25 in taking accountability to improve the performance of the department, including quality improvement, patient satisfaction, staff morale, and clinical outcomes. Other areas of improvement noted by an average score of 3.5 included closely monitoring ongoing department indicators such as staffing that affect the financial performance of the unit, listening carefully to and soliciting input from others, being considerate, patient, and helpful while demonstrating sympathy and support to someone when they are upset, anxious or presents a personal or work-related issue, facilitating resolution of conflict constructively, and using techniques that include reason and value while generating enthusiasm for work, commitment to the task, and compliance to requests.

Three categories were not scored as they were not applicable to my current job description. They included being able to demonstrate a knowledge of the principle drivers of department revenues and reimbursements, expenses, and profits, the selection and hiring of staff, and the prevention of high-impact staff departures. All four individuals surveyed scored N/A for those.

Lastly, in response to the additional comments, one individual indicated that I am “great at teamwork” and to “keep it up!” A second comment noted was that I am “always willing to help others.” A table of these results may be found in Appendix B.

Leadership Evaluation Reflection

Overall, I agree with the scores resulted from this survey. It helped identify areas of improvement that I felt I was aware of, which will be helpful in developing a plan to better my leadership skills in those areas. I personally would have given myself a lower score in the area of managing conflict as I feel like I do not do that well nor have ever been given the tools in how to learn to do so. Oftentimes, when conflict arises, I need to step back to take time to analyze it, which I have been chastised for doing. In discussing conflict with my leader during my clinical hours this semester, she helped me recognize that it is not necessarily a bad thing to do so, but that I need to communicate that I am doing it to consider the situation and not backing away from it.

I feel this also related to the other areas I scored lower in as I believe my body language and reactions to situations give the receiver the wrong impression. This correlates to the responses of sometimes to being viewed as considerate, patient and helpful while demonstrating sympathy and support to someone who is upset or anxious or dealing with an issue. At work, I am a very focused individual, which I know can give off the wrong impression, especially if I am dealing with a situation or carrying out a task. I also have always lived under the philosophy that when I am at work, I am there to work and not necessarily work through other issues that are not work-related. This was also evidenced by the Personal Values Assessment completed prior in the semester, as I did not identify any categories within the relationship component. While I have relationships outside of work, I have always tried to separate them, which as a leader needs to be altered somewhat. People feel more valued when leaders know about their personal lives and ask questions or are concerned with personal issues arise. While I have not been that type of

person, I recognize that not doing so is viewed as impersonal and is an area that I need to especially work on as a leader because a leader is one that views the whole picture and how any aspect, work-related or not, is affecting someone.

As I read through *The Servant* for this course, I also identified that I do not listen carefully and would actually score myself less on listening carefully. Examples were given in *The Servant* that made me recognize that while I am looking as if I am listening to others, I am actually thinking about the next task I have to do or distracted overall. In keeping with the question and what I believe helped me score higher is that I do solicit the input of others, but I need to be more proactive at doing so. Feedback from those around you will help leadership skills improve as it will help identify weaknesses that you may not have been fully aware of prior.

I also agree with scoring lower on needing to take accountability to improve department performance, quality improvement, patient satisfaction, staff morale, and clinical outcomes. Our unit has faced many struggles over the last few months, and while I feel everyone in the unit including myself have not let it affect patient satisfaction and outcomes, morale is low among staff as is the performance of the department. One of my lower scoring categories on the VIA Survey was self-regulation, which is the art of being disciplined and regulating one's thoughts and actions. It is easy to fall into the negativity of those that surround you, and I want to include ways to overcome negativity and rise above in my leadership plan by being a more disciplined person.

Finding positivity and doing away with the negativism can also help me to work on the area of using techniques that can help generate enthusiasm for work, committing to task objectives, and having myself and others comply with requests while applying both reason and

value to those techniques. Stress can overtake me sometimes, and while I feel I handle it well, it can overshadow keeping enthusiasm at work and also lead to burnout. Burnout can make it more difficult to ensure all tasks and requests are being done in a timely, thorough manner. It is important to find ways both at work and outside of work to balance the stress to ensure burnout is overcome or avoided, which I will incorporate into my plan.

Self-Assessment

Along with those I surveyed, I took the same survey assessing myself in the areas that others had. Overall, I had similar results in most areas, though I gave myself lower scores for a few questions and slightly higher ones in others. My personal assessment and a comparison to those who evaluated me may be found in Appendix B.

First, I felt my areas of strength are setting and enforcing high standards and quality for patients and the care delivered, holding myself and others accountable, working to ensure the staff on the unit has the proper resources and tools needed to carry out the work, and analyzing problems in a timely, systematic manner that is logical. As those who evaluated me included and I would agree, I am an excellent team player and always help others out whenever I can. I am often the last one to leave after a shift, ensuring that everyone else has completed their tasks and do not have any further questions or issues that I could assist with.

The areas I assessed myself less than my evaluators included taking accountability to improve the performance of the department and staff morale, though within the question I would assess myself higher for maintaining high patient satisfaction and outcomes. I also gave myself a lower score of a 3 for acting promptly and decisively on issues that arise on the unit. While I agree that I usually or always do when it comes to an issue I have the resources to do so, it is when there is an issue that goes beyond my role as a charge nurse that I am only sometimes able

to do so. I will certainly try to resolve it, but oftentimes feel as if I cannot or that I do not have the authority to do, which is why I gave myself a lower score than those who evaluated me.

Likewise, I scored myself lower in resolving conflict, which I feel ties to not feeling as if I have the power to resolve in some situations. My approach to conflict sometimes appears as avoidance, which I do not intend. Based on my results from the Leadership Diamond assessment, the area I could improve upon was indicated as courage. Various ways were suggested in how I could strengthen my courage, which included to advocate more and to stand for something while being willing to stand alone (Koestenbaum, 2000). The results also stated to experience anxiety constructively and to take responsibility for choices while accepting the concept of being free (Koestenbaum, 2000). Furthermore, I do not feel I have been able to observe examples of leaders dealing with conflict effectively. I also feel doing research on ways to best do so would also be beneficial. Additionally, I need to seek out better techniques to help generate enthusiasm about work in others as I scored myself less in that area than those who evaluated me. I feel I could do better as a leader in including the values of an organization within myself and the interactions I have with others.

I also scored myself less on listening carefully and soliciting help and input from others. I have recognized that I do not listen actively at times, as my mind is pre-occupied with other tasks I need to complete. I have already taken steps to listen better to my patients, and I want to continue developing this skill with others I interact with daily, especially those to whom I can provide guidance to and help lead.

Improving my active listening skills will also aid me in being more supportive of others when they present issues to me. While those I surveyed gave me an average score of 3.5, I rated myself a 3 in the area of being considerate, patient, and helpful while showing sympathy and

support to individuals who come to me with either a work issue or personal problem. In taking the VIA Institute on Character assessment, an area that scored less for me was social intelligence. This was described as having an awareness of the motives and feelings of others and knowing what makes others tick (VIA Institute, 2019). Again, I feel I carry out this quite well with patient interactions, and I want to build on that and use it with peers and those I am in the leadership role among.

Four areas of the evaluation tool were indicated as not applicable, which matched those who evaluated me except for the area of closing monitoring ongoing department indicators which affect unit financial performance. In considering the question on a whole, I do not have the authority to manage some factors. However, I do believe I meet the objective from a staffing standpoint when I am in the role of the charge nurse. I monitor staffing closely throughout the shift and ensure that staff is being used in a manner that promotes stewardship to my unit as well as others within the hospital. Beyond staffing and monitoring good use of resources on the unit, I do not have control over other factors that can contribute to the budget. Areas that were scored as not applicable by my evaluators and me included being able to demonstrate a knowledge of principle drivers of department revenues and reimbursements, expenses, and profits, the selection and hiring of staff, and the prevention of high-impact staff departures.

Professional Development Plan

The following plan evolved from taking into consideration the results from the 360-degree feedback tool and the three other self-assessments completed. It includes strategies that will help me focus on areas in which I need to grow as a leader. The activities I chose to accomplish those tasks have been included along with the reasoning behind each explaining how they will be beneficial to achieving growth as a leader. A discussion of how others see me now

as a leader and how I will be seen as a leader in five years is also included along with my own philosophy of leadership.

Planned Activities

The first area for growth within leadership I will address is constructively managing conflict. Over the last few weeks of following a leader in her role, I have been taking notes on how she handles conflict. I also discussed the handling of conflict with her, explaining that I feel the approach I use sometimes is taken wrongly by others, and I want to improve upon that. She suggested that I read the book *Crucial Conversations* as a strategy to help me better understand and handle conflict. It will not only help me learn how to better address topics and conflicts with others but also how to find the courage to do so, which is another area of weakness identified to me in the Leadership Diamond.

Another area that I feel addresses a lot of the areas of the 360-degree feedback tool results I received is to build better relationships at work, being more mindful of others. This will include listening more actively, generating enthusiasm among myself and coworkers for the work we do, while also increasing the morale of others around me while being more supportive of others. To achieve this, I will research ways to build better relationships at work and determine which of those I want to carry out each day. From the list, I will develop a contract that I make with myself to ensure that I abide by the guidelines I set forth in it each and every day. For instance, the individual I asked to collect and collaborate the surveys for me for this assignment never says a bad word about anyone and never participates in gossip or conversations that involve others in a negative light. I want to reflect this in myself, especially at work, as it is not only an important aspect for a leader to have but also a way for people to trust and respect

you more. Including other ways to build and improve relationships in the contract will make me more approachable to others.

Additionally, I will take on two tasks to help manage stress and reduce this risk of burnout. These will include getting back to a regular running schedule with the goal of running a 10K in May and to meditate at least 10 minutes every day. I took up running about three years ago, and in starting grad school, I have not been able to fit it into my schedule. I have already mapped out a running schedule based on my work and school schedule and am signed up to run a 10K on May 18th, 2019.

I have also been interested in beginning the practice of meditation to both help manage my stress and anxiety, so I feel this is an opportune time to apply it as part of my leadership development plan. Meditation helps promote mindfulness. In workplaces with mindfulness training, there is evidence of how it contributes to improving attention, control, and efficiency, while also having positive impacts to the cognitive, emotional, behavioral, and psychological domains (Bostock, Crosswell, Prather, & Steptoe, 2019). Ultimately, as explained by Bostock et al. (2019), this will also improve performances on the job, relationships within the workplace, and overall well-being. This addresses areas in which I need to improve based on my 360-degree feedback results. An outline of this action plan may be found in Table 1.

Table 1. Leadership Development Action Plan

Focused Action Area	Planned Activity	Comments or Specifics on Activity	Anticipated Timeline: Start/Completion	Measurement of Achievement
Handling Conflict	Reading and studying	Read the book <i>Crucial Conversations</i>	Start: April 27 th , 2019 Complete: August 31 st , 2019	Be able to give five examples of ways to manage conflict after reading the book.
Improving Workplace Relationships	Researching and developing a personal contract.	I will research ways to be more mindful of others and how to improve relationships in the workplace. From this research, I will write a personal contract of ways that I will approach mindfulness each day.	Start: April 27 th , 2019 Completion of contract: May 10 th , 2019	A signed contract of at least 10 ways I will approach mindfulness in each of my encounters with others in the workplace.
Physical (Body) Wellness	Return to a routine exercise plan	I have scheduled three runs each week in my planner to train for the 10K I signed up to run on May 18 th , 2019.	Start: April 7, 2019 Complete: May 18 th , 2019 (with the intent to continue running on a regular basis)	Participate in and finish a 10K.
Spirit/Soul Wellness	Meditation	I will research and download an app on my phone that will encourage me to meditate at least 10 minutes per day.	Start: April 7 th , 2019 Complete: August 19 th , 2019 (with intent to continue)	I will evaluate how much time I have been able to spend on meditation biweekly, and if my plan to meditate daily needs to be adjusted.

Future Leader Description

Currently, others view me as a team player, who is always willing to go the extra mile for coworkers. I hold myself and others accountable while encouraging others to cooperate with one another and work together. I also analyze issues in a logical and timely manner. I strive to ensure that the staff I work with each day has the resources and supplies necessary to provide optimal patient care while working efficiently and effectively. I also focus on the goals for the unit in using a long-term perspective, knowing what is done today will impact the future. I want the unit I work in and the individuals I work with to be seen in a positive light by others in the organization as well as those we care for each day.

Unfortunately, while being focused on high standards, positive outcomes, and the stress that comes with nursing, I am viewed by others as sometimes being unapproachable or avoiding an issue. I also do not listen as well as I should and focus on work instead of being supportive to those who may have another need. I struggle at times with keeping a positive attitude and can fall into negativity which does not help generate enthusiasm and promoting staff morale. I also sometimes appear to shy away from conflict as I feel I need to think about it before I address it, which comes off as using avoidance tactics instead.

The leader I will be described as in five years will still encompass the team player who makes decisive decisions regarding issues and still working hard to promote a positive view of the team and department. However, I will manage conflict constructively and be viewed as someone who has the courage and will stand alone if necessary. I will also be more approachable because I will be trusted and respected by not falling into gossip and other drama that oftentimes occurs in a workplace. I will also be described as a very good listener, taking the time with people to actively listen and not think about tasks I have to do or the response I am

going to give to the conversation I am having until I have listened to the individual fully. I will also be seen as the person who helps others grow and achieve whatever goals they have in mind by being encouraging, helpful, and supportive in whatever path they may be on in their career.

Philosophy of Leadership

My biggest takeaway from *The Servant* and the foundation for my philosophy on leadership is living by the Golden Rule. As Hunter (1998) wrote, servant leadership is based on the Golden Rule, and you should treat people the way you want to be treated. Being in the role of a leader, I want to use this approach and consider how if I were not the leader, how would I want to be treated and what would I want my leader to do for me if the roles were reversed.

Furthermore, leadership is the person you are and the influence and impact you have on people (Hunter, 1998). That influence should not be taken advantage of in any way and instead be used to do good for others and meet their needs while allowing them to grow. One of the greatest leaders I have had focused on that with the members of her team. She came to mind when Hunter (1998) discussed how the authority of leadership should be built on service and sacrifice, or the Law of the Harvest. Hunter (1998) described this as reaping what you sow, you serve me, I serve you, and if you go to the wall for me, I'll go to the wall for you. I miss having her support and drive to better her employees and seeking out the best for everyone, but I want to build who I am as a leader on that example. It encompasses what Hunter (1998) wrote in that serving and extending ourselves for others will force us out of being self-centered.

Another important component to me within servant leadership is honesty. A leader that can be trusted is much easier to follow and others will want to follow someone who is honest with them. Hunter (1998) described honesty as the quality that most people have at the top of their list in what they want from someone who leads them. Honesty includes clarifying

expectations and holding others accountable, giving positive and constructive feedback as needed, being consistent so that it is viewed as predictable and fair, and to dedicate oneself to the truth without any implication of deception (Hunter, 1998). This reflects back again to the Golden Rule, treating others as you would want to be treated, so being honest with others as you would want them to do with you.

In assessing my current leadership abilities, an area I want to include in my leadership philosophy is courage. While I feel I have already grown over the years in this area, being once very shy, I recognize I have more to do. I also realize how important courage is along with the ability to stand alone as a leader. Situations and issues will arise in which this is important. Hunter (1998) demonstrated that having courage to stand alone is an important skill to have, because “if we don’t stand for something, we will fall for anything” (p. 174). As a leader, I want to stand for something. It will strengthen my ability to advocate for necessary changes.

Being a change agent within healthcare is a key concept to transformational leadership. These changes should not be rearranging what is already present, but instead developing a new and improved system that will allow others to make contributions in order to deliver effective healthcare (Porter-O’Grady & Malloch, 2018). It takes courage to make such big changes as well as a knowledge of the system, the patients being cared for and the organization. It will also require that a leader is an innovator, a role model, and a team player who can not only work together with others but also encourage others to develop new ideas and implement the change that comes with them. Together with the Golden Rule, the Law of the Harvest, honesty, and courage, people will follow me as a leader, and I will help them grow and succeed while also accomplishing change together to improve healthcare and the role nursing plays within it.

Conclusion

In order to create my leadership plan, I assessed feedback others provided to me along with my own self-assessments of my leadership skills acquired using various tools. I was able to identify areas in which improvement is needed, which included conflict management, developing better relationships that are meaningful among others, increasing enthusiasm for work and staff morale, and continuing to build and strengthen my own self-courage. Based off of those results, a professional leadership plan was developed that focused on activities that would help me grow both professionally and personally that also took into consideration the mind-body-spirit perspective. In conclusion, this paper looked at who I am as a leader today, where others will see me as a leader in five years and my own personal philosophy on leadership. One main concept that Hunter (1998) identified in *The Servant* is the foundation I will use going forth in becoming a better leader, which is that “the key to leadership is accomplishing the tasks at hand while building relationships” (p. 41).

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Appendix A

NURSING LEADERSHIP EVALUATION TOOL

Name of Person Being Surveyed: _____ Title: _____ Dept: _____ Individual completing survey is: (circle one) Staff Member Self Peer Director Other _____
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The purpose of this survey is to provide feedback to the person named above. This will be helpful to his / her continuing development as an effective leader. Please read each question and circle only one response. Please feel free to select "Don't know or not applicable" if you cannot answer an item with confidence or if the person does not perform that function; these responses are preferable to assumptions or guesses based on limited direct experience. **Please send the completed survey to the person who has asked you to complete the survey:** _____

	Almost <u>always</u>	Usually	Sometimes	Seldom	Never	Don't know or not applicable
1. Sets and enforces high standards for the quality of patient care delivered in their department.	5	4	3	2	1	N/A
2. Holds self and others accountable for meeting objectives and commitments.	5	4	3	2	1	N/A
3. Strives to ensure that department staff has the supplies, information, and resources needed to work effectively (e.g., suitable and functional equipment and systems).	5	4	3	2	1	N/A
4. Analyzes problems in a systematic, logical, and timely manner.	5	4	3	2	1	N/A
5. Takes accountability to improve department performance: quality improvement, patient satisfaction, staff morale, clinical outcomes, etc.	5	4	3	2	1	N/A
6. Acts promptly and decisively to address problems that arise in the department.	5	4	3	2	1	N/A
7. Demonstrates knowledge of the principal drivers of departmental revenues and reimbursement, expenses, and profits when making decisions affecting the department or project.	5	4	3	2	1	N/A
8. Closely monitors ongoing department indicators (ex: HPPD, staffing, etc.) which affect unit financial performance.	5	4	3	2	1	N/A
9. Listens carefully to and actively solicits input from others.	5	4	3	2	1	N/A
10. Expresses ideas clearly and effectively and responds to issues raised by others. Ensures that people get the information they need to do their jobs and provides feedback that enhances performance.	5	4	3	2	1	N/A
11. Selects and hires effective people for department staff (if applicable: assists with selection and hiring	5	4	3	2	1	N/A

effective people). Markets unit job openings to attract highly skilled staff members.

	<u>Almost always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Seldom</u>	<u>Never</u>	<u>Don=t know or not applicable</u>
12. Prevents high-impact staff departures when possible.	5	4	3	2	1	N/A
13. Is considerate, patient, and helpful; showing sympathy and support when someone is upset or anxious, or presents a personal or work-related problem.	5	4	3	2	1	N/A
14. Encourages cooperation, teamwork, and identification with the department.	5	4	3	2	1	N/A
15. Facilitates the constructive resolution of conflict.	5	4	3	2	1	N/A
16. Uses techniques that appeal to reason and values. Generates enthusiasm for work, commitment to task objectives, and compliance with requests.	5	4	3	2	1	N/A
17. Takes a longer-term perspective on problems and opportunities facing the department (considers implications 3 to 6 months in the future and beyond).	5	4	3	2	1	N/A

18. This person can do more of:

19. This person can do less of:

20. Additional comments (indicate question comments are related to, if applicable, and use back of form).

Thank you for participating in this survey.

Name (Optional):

(Form adapted from and permission received from St. Alexius Medical Center Division of Nursing)

Appendix B

Question	Average Score from Evaluators	Personal Score
<i>Scoring: 5-almost always, 4-usually, 3-sometimes, 2-seldom, 1-never, N/A-not applicable</i>		
Sets and enforces high standards for the quality of patient care delivered in their department.	4.75	5
Holds self and others accountable for meeting objectives and commitments.	4.75	5
Strives to ensure that department staff has the supplies, information, and resources needed to work effectively (e.g., suitable and functional equipment and systems).	4.74	5
Analyzes problems in a systematic, logical, and timely manner.	5	5
Takes accountability to improve department performance: quality improvement, patient satisfaction, staff morale, clinical outcomes, etc.	3.25	3
Acts promptly and decisively to address problems that arise in the department.	4	3
Demonstrates knowledge of the principal drivers of departmental revenues and reimbursement, expenses, and profits when making decisions affecting the department or project.	N/A	N/A
Closely monitors ongoing Department indicators (ex: HPPD, staffing, etc.) which affect unit financial performance.	3.5	N/A
Listens carefully to and actively solicits input from others	3.5	3

Question	Average Score from Evaluators	Personal Score
<i>Scoring: 5-almost always, 4-usually, 3-sometimes, 2-seldom, 1-never, N/A-not applicable</i>		
Selects and hires effective people for department staff (if applicable: Assists with the selection and hiring effective people). Markets unit job openings to attract highly skilled staff members.	N/A	N/A
Prevents high-impact staff departures when possible.	N/A	N/A
Is considerate, patient, and helpful; showing sympathy and support when someone is upset or anxious or presents a personal or work-related problem.	3.5	3
Encourages cooperation, teamwork, and identification with the department.	4	4
Facilitates the constructive resolution of conflict.	3.5	3
Uses techniques that appeal to reason and values. Generates enthusiasm for work, commitment to task objectives, and compliance with requests.	3.5	3
Takes a longer-term perspective on problems and opportunities facing the department (considers implications 3 to 6 months in the future and beyond).	4.5	4
This person can do more of:	No responses given	N/A
This person can do less of:	No responses given	N/A
Additional comments (indicate question-related to if applicable):	“Great at teamwork.” “Always willing to help others.”	N/A