



UMC Utrecht

# Leadership and Mentoring in Nursing Research

**Thóra B. Hafsteinsdóttir RN, PhD**

Senior Researcher Nursing Science, Julius Centre, University Medical Center  
Utrecht & University of Applied Science



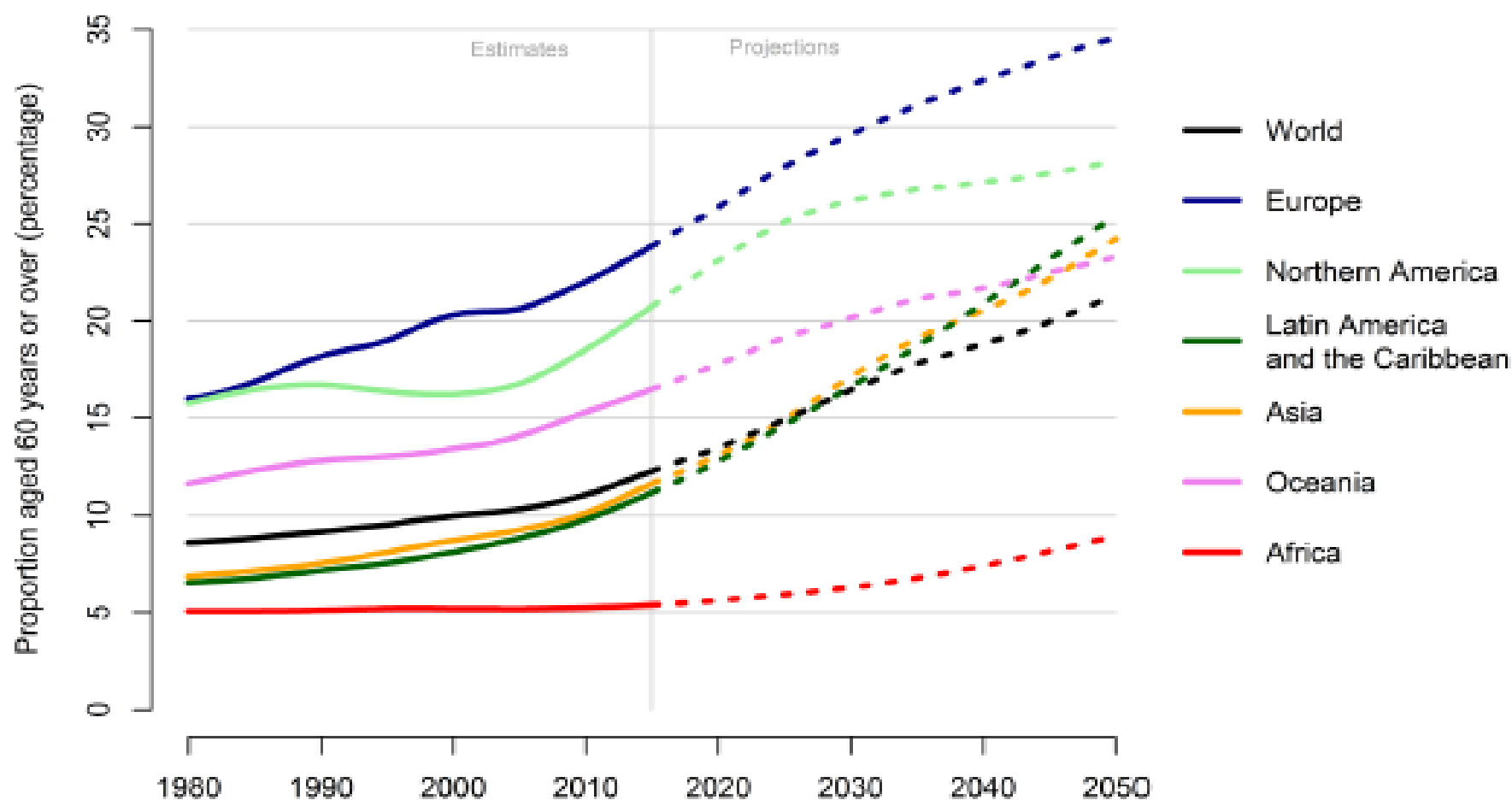
University Medical Center Utrecht

# **Global Challenges Impacting Health Care & Nursing**



# Growing number of older adults

Percentage of population aged 60 years or over by region, from 1980 to 2050



# Ukraine



(The Guardian 2022)



(The Guardian 2022)



# Gaza & Israel



(The NY Times 2023)



(Thenation.com 2023)



# The Challenges

- ***The war situation in two regions in Europe cause a multitude of healthcare issues, from a resurgence of polio cases to crowded conditions at medical facilities.***
  - Horrifying situation & ***huge death toll of citizens***
  - ***Refugees' health care physical and mental problems***
  - Covid-19 situation in combination with huge numbers of refugees.
  - The number of refugees > ***36.4 million*** (UNHCR 05.11.2023).
  - ***The situation as the fastest-growing refugee crisis in Europe since the Second World War.***
- *“War suddenly and dramatically changes the pandemic landscape as forced migration from armed conflict prioritizes safety, shelter, food, water, and basic healthcare needs,”* [Dr. Jan K. Carney](#), MPH, an associate dean for public health and health policy at the Larner College of Medicine at the University of Vermont



# The Challenges

- *The war situation in two regions in Europe cause a multitude of healthcare issues, from a resurgence of polio cases to crowded conditions at medical facilities.*

- Horrifying situation

- Resurgence of polio

- Crowded conditions

These challenges → IMPACT  
Global Health Care & Nursing

ce the

- *“War suddenly and dramatically changes the health care landscape as forced migration from armed conflict prioritizes safety, shelter, food, water, and basic healthcare needs,” [Dr. Jan K. Carney](#), MPH, an associate dean for public health and health policy at the Larner College of Medicine at the University of Vermont*



# Global Nursing Workforce



# Nurses are the largest group of professionals in the health care workforce

The global nursing workforce was estimated to be 27.9 million nurses in 2020.

Approximately 50% of the health care workforce.

Before the pandemic → shortage of 5,9 million nurses

Now → Global shortage of 13 million nurses (WEF, 2022).





# The state of nursing



DISCURSIVE PAPER

## Basic nursing care: The most provided, the least evidence based – A discussion paper

Sandra M.G. Zwakhalen PhD, RN , Jan P.H. Hamers PhD, RN, Silke F. Metzelthin PhD, Roelof Ettema PhD, RN, Maud Heinen PhD, RN ... [See all authors](#) 

First published: 04 February 2018 | <https://doi.org/10.1111/jocn.14296> | Citations: 40



SYSTEMATIC REVIEW |  Open Access |    

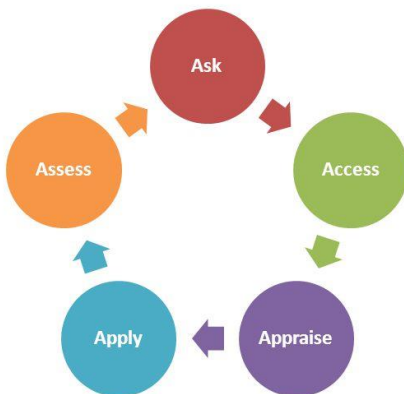
## Nurses' motivations to leave the nursing profession: A qualitative meta-aggregation

Wilmieke Bahlman-van Ooijen , Simon Malfait, Getty Huisman-de Waal, Thóra B. Hafsteinsdóttir

First published: 20 May 2023 | <https://doi.org/10.1111/jan.15696>

## The 5 Step EBP Process

1. **ASK:** Formulate an answerable clinical question
2. **ACCESS:** Track down the best Evidence
3. **APPRAISE:** Appraise the evidence for its validity and usefulness
4. **APPLY:** Integrate the results with your clinical expertise and your patient values/local conditions
5. **ASSESS:** Evaluate the effectiveness of the process



## Nurse staffing and education and hospital mortality in nine European countries: a retrospective observational study

Linda H Aiken, Douglas M Sloane, Luk Bruyneel, Koen Van den Heede, Peter Griffiths, Reinhard Busse, Marianna Diomidous, Juha Kinnunen, Maria Kózka, Emmanuel Lesaffre, Matthew D McHugh, M T Moreno-Casbas, Anne Marie Rafferty, Rene Schwendimann, P Anne Scott, Carol Tishelman, Theo van Achterberg, Walter Sermeus, for the RN4CAST consortium\*

### Summary

*Lancet* 2014; 383: 1824-30  
Published Online  
February 26, 2014  
[http://dx.doi.org/10.1016/S0140-6736\(13\)62631-8](http://dx.doi.org/10.1016/S0140-6736(13)62631-8)  
See [Comment](#) page 1789

**Background** Austerity measures and health-system redesign to minimise hospital expenditures risk adversely affecting patient outcomes. The RN4CAST study was designed to inform decision making about nursing, one of the largest components of hospital operating expenses. We aimed to assess whether differences in patient to nurse ratios and nurses' educational qualifications in nine of the 12 RN4CAST countries with similar patient discharge data were associated with variation in hospital mortality after common surgical procedures.



# Nurses

## **Provide high quality care to patients – if they have appropriate level of education**

With increasing consistency, research demonstrates that the safety and quality of care delivery is enhanced when nurses have an appropriate level of education, the resources and the support to enable them to provide high quality of care (*Squires et al. 2015*).



# **Why do we NEED Doctorally Prepared Nurses?**



***TODAY*** in the current turbulent and rapidly changing health care environment ***there is a clear need for PhD prepared nurses:***

- To advance ***nursing and health care and nursing science*** by conducting research and quality improvement projects
- To ***prepare the next generation of nurses and nurse scientists***

(Broome & Fairman, 2018; de Lange et al., 2019)

## ***Academic leaders of the Nursing Discipline***

A strong and well established doctorally prepared workforce is imperative ***to ensure the strong foundation for nursing and health care as they are experts in conducting research and implementing research findings into clinical practice and education.***

## *Academic leaders of the Nursing Discipline*

A strong and well-  
imperativ  
*experts in*  
*findings into clinical p*

force is  
*are*

**There is a clear NEED for  
Doctorally Prepared nurses!!**



# GLOBAL REPORTS ON NURSING



## Health and care workforce in Europe: time to act



## STATE OF THE WORLD'S NURSING 2020



Investing in education, jobs and leadership

## Sustain and Retain in 2022 and Beyond



### THE GLOBAL NURSING WORKFORCE AND THE COVID-19 PANDEMIC

January 2022

Authors  
James Buchan, Adjunct Professor, University of Technology, Sydney  
Howard Catton, CEO, International Council of Nurses  
Franklin A. Shaffer, President and CEO, CGFNS International, Inc.  
and ICNM Secretariat

www.intnursemigration.org



3600 Market Street, Suite 400  
Philadelphia, PA 19104 USA



Convened by  
The Honor Society of Nursing,  
Sigma Theta Tau International

2014-2017

## REPORT OF THE POLICY DIALOGUE MEETING ON THE NURSING WORKFORCE

6-7 APRIL, 2017, GENEVA

## Global strategy on human resources for health: Workforce 2030

## ROLES AND RESPONSIBILITIES OF GOVERNMENT CHIEF NURSING AND MIDWIFERY OFFICERS: A CAPACITY-BUILDING MANUAL

## Triple Impact

How developing nursing will improve health, promote gender equality and support economic growth.





Health and care  
workforce in Europe:  
time to act



International Council of Nurses  
The global voice of nursing

CGFNS  
INTERNATIONAL  
Global Credibility

Sustain and Retain  
in 2022 and Beyond

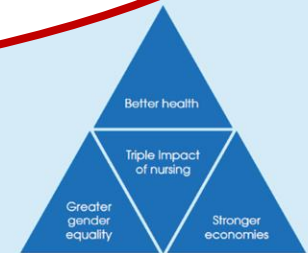


GAPFON  
Global Advisory Panel  
on Nursing & Midwifery  
for Health

**NURSES**  
**- Not Visible**  
**- Not at the Policy Table**  
**- Not showing Leadership**

human resources  
for health  
Workforce 2030

GOVERNMENT  
CHIEF NURSING AND  
MIDWIFERY OFFICERS:  
A CAPACITY-BUILDING MANUAL



October 2016



Health and care  
workforce in Europe:  
time to act

STATE OF THE  
WORLD'S  
NURSING 2020



International Council of Nurses  
The global voice of nursing

CGFNS  
INTERNATIONAL  
Global Credibility

Sustain and Retain  
in 2022 and Beyond

# NURSES Stronger LEADERSHIP Nursing & Health Care

Global  
human  
Workforce

APFON  
Advisory Panel  
Midwifery  
Health



# Priority Area's for Policy Makers

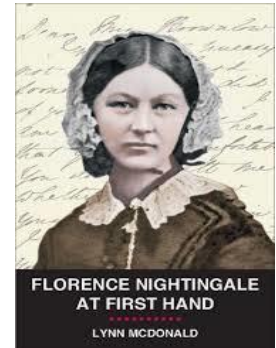
## *To Invest in*

- *Nursing education,*
- *Leadership & Mentoring*
- *Career development opportunities*
- *Working conditions & salaries, to strengthen nursing around the world and improve health for all*

*(Sustain and Retain 2022; WHO 2022).*



# Leadership & Mentoring



# Leadership

- *"is **a process whereby an individual influences a group of individuals to achieve a common goal**" (Norhtouse 2004). "entails **influence, occurs within a group** setting & involves achieving goals that reflect **common vision**" (Norhtouse 2004).*

*To practice **leadership Masters and Doctorally prepared nurses** need to develop diverse competences across the full spectrum of **research, clinical practice and education** to be able to seek innovative solutions for the challenges of health care.*

***These nurses often are not exposed to develop leadership skills.***

# Mentoring

- "a relationship in which **a mentor supports the professional and personal development of another by sharing his/her experiences, influence or expertise**" (Zellers et al. 2008, Driscoll 2009).
- "as a relationship between a **more experienced mentor** and a **less experienced mentee** for the purpose of supporting the mentee's career" (Ragins & Kam, 2007)

Mentoring has various forms like

- **formal mentoring** where mentors are assigned to mentees, **peer mentoring** and **group mentoring** where more than one mentor support the mentee.

# *Mentoring in Nursing through Narrative Stories Across the Globe*



Nancy Rollins Gantz & Thóra B. Hafsteinsdóttir

More than 300 authors from countries across all global continents

Section 1. Mentoring of Early-Stage Nurses,

Section 2. Mentoring in Diversity, Inclusion and Equity,

Section 3. Mentoring in Clinical Practice of Health Care,

Section 4. Mentoring in Nursing Education,

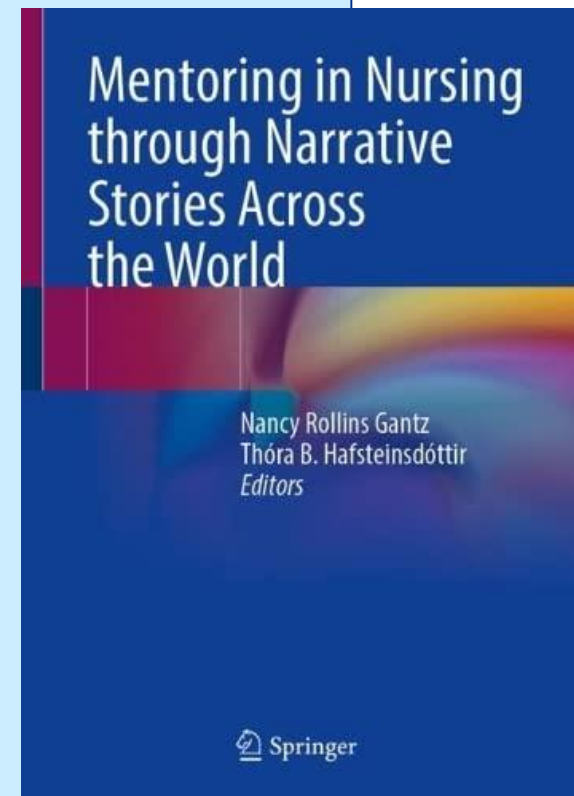
Section 5. Mentoring in Leadership,

Section 6. Mentoring in Research and Academia,

Section 7. Mentoring in the times of Covid-1,

Section 8. Mentoring in Policy

Section 9. Mentoring in Politics.







# Leadership & Mentoring Programs

**The Leadership Mentoring in Nursing Research (LMNR)**

**and**

**The Leadership & Mentoring Educational Program for Doctoral  
Nursing Students and Doctorally Prepared Nurses (the Nurse-Lead)**





# The Leadership Mentoring in Nursing Research LMNR

## The Leadership Mentoring in Nursing Research Program for Postdoctoral Nurses: A Development Paper

Thóra B. Hafsteinsdóttir, PhD, RN<sup>1\*</sup> , Lisette Schoonhoven, PhD, RN<sup>2</sup> , Jan Hamers, PhD, RN<sup>3</sup>, &  
Marieke J. Schuurmans, PhD, RN<sup>4</sup> 



### Leadership Mentoring In Nursing Research

In the Netherlands, all university nursing science departments collaborate with national and international partners in the Leadership Mentoring in Nursing Research. This program focuses on mentoring and mentorship to generate the future generation of nurse leaders in nursing research. The Leadership Program offers a two-year program through which post-doctoral nurses extend knowledge in their research areas, conduct successful interdisciplinary research projects, enhance their leadership skills as well as writing and communication skills and establish new networks (national and international).

***Overall purpose:*** to increase the cadre of nurse scientists, strengthen nursing research within universities & improve career development of postdoctoral nurses.

***AT THE MOMENT 3 PROFSSORS IN NURSING IN THE NL***

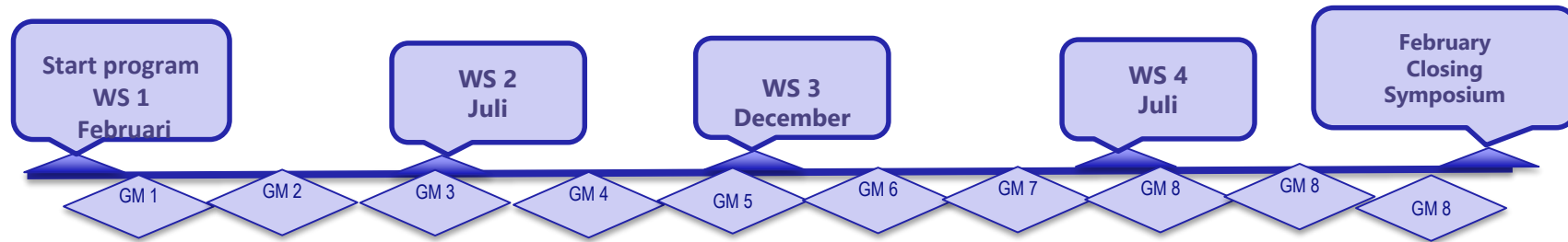
# LMNR



Year 1

Year 2

## Workshops & General Meetings



## Mentoring



### Mentoring

Each fellow had 2 mentors  
Research mentor and  
Nursing leadership mentor  
Regular meetings

### Leadership Development Plan;

Leadership assessment;  
Leadership Practices Inventory;  
(Kouzes & Posner, 2010)

### Visits Abroad – internships

Each fellow visits Research institute  
abroad for internship

# LMNR 1.0 Cohort 2016-2018

## Demographic characteristics

**12 fellows**

**43 years of age (range 30-54 years)**

**Time from PhD: 3 years (range 1-7 y)**

**Function fte 0.9 (0,7-1.0 fte)**

**Research position 0,6 fte (0,2-1,0)**

**12 worked in research;**

**9 education &        4 clinical practice**



# The Leadership development

Leadership practice	2016 (Med. IQR)	2018 (Med. IQR)	Sign.
Model the way	46.5 (42.7– 49.5)	48.5 (46.2– 52)	
Inspire a shared vision	43.5 (38.2–49.0)	48.5 (45.2– 51.75)	$p=0.050$
Challenge the process	42 (38.2– 48.5)	49.50 (47.2– 51.5)	$p=0.047$
Enable others to act	48 (46.2– 51.7)	52 (48.5 – 55.5)	
Encourage the heart	47.5 (43.7–49.7)	51.50 (46.2–53.2)	

(Van Dongen et al. 2021)

Improvement  
in all  
leadership  
practices

Leadership Practices Inventory  
30 item 365°questionnaire;  
fellows self assessment and observer  
assessment (colleagues)

(Kouzes & Posner, 2010)

## Developing leadership in postdoctoral nurses: A longitudinal mixed-methods study

Lisa van Dongen, MSc<sup>a</sup>, Shaun Cardiff, PhD<sup>b</sup>, Manon Kluijtmans, PhD<sup>c</sup>,  
Lisette Schoonhoven, PhD<sup>a,d</sup>, Jan P.H. Hamers, PhD<sup>e</sup>, Marieke J. Schuurmans, PhD<sup>c</sup>,  
Thóra B. Hafsteinsdóttir, PhD<sup>a,\*</sup>

<sup>a</sup>Nursing Science Department, Julius Center for Health Sciences and Primary Care, University Medical Center Utrecht, Utrecht, The Netherlands

<sup>b</sup>Fontys University of Applied Sciences, Eindhoven, The Netherlands

<sup>c</sup>Education Center, University Medical Center Utrecht, Utrecht, The Netherlands

<sup>d</sup>School of Health Sciences, Faculty of Environmental and Life Sciences, University of Southampton, Southampton, United Kingdom

<sup>e</sup>Living Lab in Aging and Long-Term Care, School Caphri, Maastricht University, Maastricht, The Netherlands

### ARTICLE INFO

#### Article history:

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Available online March 7, 2021.

### ABSTRACT

**Background:** Postdoctoral nurses have an important role in advancing nursing by generating knowledge and building networks in research, practice, and education which requires effective leadership. Therefore, the Leadership Mentoring in Nursing Research programme for postdoctoral nurses was developed.

**Purpose:** This study was to evaluate expectations, experiences, and perceived influence of the leadership mentoring programme on leadership and professional development, professional identity, and research productivity of postdoctoral nurses.



# LMNR 2.0 Cohort 2019-2021

**19 fellows,**  
**universities (n=9)**  
**UAS (n=6)**  
**clinical health care facilities (n=4).**



	Leadership practice Self-reported scores	T1. 2019 Median(range)	T2 2021 Median (range)	Difference T2-T1
1	Model the Way	41.0 (29-49)	46.0 (30-53)	5.0
2	Inspire Shared Vision	38.0 (28-52)	47.0 (36-54)	9.0
3	Challenge the Process	42.5 (32-48)	47.0 (37-52)	4.5
4	Enable Others to Act	47.0(38-51)	51.0 (33-57)	4.0
5	Encourage the Heart	45.0 (35-51)	45.0 (36-58)	0



# LMNR 3.0 Cohort 2023-2025

LMNR 3.0 started in

February 2023

Early stage career

Doctorally prepared nurses.

10 fellows

Universities &

University Medical Centers.





Funded by the  
Erasmus+ Programme  
of the European Union



# Nurse-Lead for Doctoral Nursing Students (DNS) & Doctorally Prepared Nurses (PN) Online leadership and mentoring program

NurseLead

[HOME](#) [PROJECT DESCRIPTION](#) [OUTPUT](#) [CONSORTIUM](#) [FELLOWS](#) [NEWS](#) [CONTACT](#)



**Overall purpose:** to strengthen the fellows, DNS and DPNs, leadership skills, professional development support them in research programme development and the establishment of transnational networks.

# Nurse Lead



18 Months

Year 1

Year 2

**Fellows followed modules online with different learning Units**

Programme start Sept 2018

Workshop 2-days face-to-face in Utrecht

Closing Symposium held online

LU1

LU 2

LU 3

LU 4

LU 5

LU 6

LU 7

LU 8

LU 8

LU 9

LU 10

**Mentoring**

1

2

3

4

5

6

7

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10

11

12

## Fellows,

Doctoral Nursing Students and Doctorally Prepared nurses, followed online modules on leadership and professional development;  
One Face-to-Face 2 days Workshop;

## Mentoring

Each fellow had 1-2 mentors  
Regular meetings

## Leadership Development Plan;

Leadership assessment;  
Leadership Practices Inventory; (Kouzes & Posner, 2010)

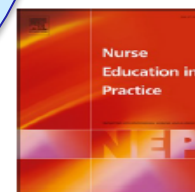


# Mentoring in Nurse Lead, experiences of fellows: Focus Group study

Five themes:

- "Preferred characteristics of
- "Developing trusting
- "Engagement of
- "Becoming a empowered

**Conclusion:**  
*Mentoring supported the leadership and professional development of doctorally prepared nurses and doctoral nursing students in their leadership and professional development.*



The experiences of doctorally prepared nurses and doctoral nursing students with being mentored in the Nurse-Lead programme: A focus group study

L.J.C. van Dongen<sup>a,b,c,\*</sup>, H. Leino-Kilpi<sup>a,d</sup>, H. Jónsdóttir<sup>e,f</sup>, G. Meyer<sup>g</sup>, M.A. Henriques<sup>h,i</sup>, L. Schoonhoven<sup>b,j</sup>, R. Suhonen<sup>a,d,k</sup>, T.B. Hafsteinsdóttir<sup>b,l</sup>

<sup>a</sup> Department of Nursing Science, University of Turku, Finland

# The Nurse-Lead studies

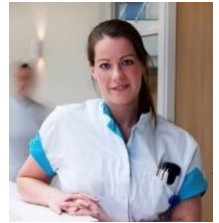
**Aim:** To evaluate if following the Nurse-Lead program influenced leadership practices & professional competencies of PNs & DNSs following the program.

**Design:** Pretest-posttest Study, Survey (*October, 2018 – June, 2020*)

**Postdoctoral Nurses (PN) & Doctoral Nursing Students (DNSs) N=41**

***Leadership Practices:*** Leadership Practices Inventory (*Kouzes & Posner 2010*)

***Professional Competencies:*** Competency questionnaire (*Numminen et al. 2019*)



**Aim:** To explore Nurse-Lead fellows experiences with following the program.

**Design:** Generic Qualitative Study Design

**Semi-structured online interviews**

**12 Postdoctoral nurses - Semi structured interviews**

**Data collection March – May 2020**



# The Nurse-Lead Survey Study - The findings

		Pretest	Posttest	Difference scores pre- vs. posttest	Pre- vs. posttest
		Mean (SD) or Median (IQR)		Change in scores	Significance
<b>Leadership practices</b>					
1	<i>Model the way</i>	41.7 (7.2)	49.9 (4.9)	+8.2	p < .00001**
2	<i>Inspire a shared vision</i>	39.7 (9.7)	48.0 (6.6)	+8.3	p < .001**
3	<i>Challenge the process</i>	42.1 (8.0)	48.8 (6.5)	+6.7	p = .001**
4	<i>Enable others to act*</i>	48.0 (8.0)	54.0 (4.0)	+6.0	p = .001**
5	<i>Encourage the heart*</i>	43.0 (12.0)	51.5 (4.0)	+8.5	p = .001**
<b>Professional competencies</b>					
1	<i>Research field management</i>	6.5 (1.8)	7.4 (1.0)	+0.1	p = .001**
2	<i>Research skill management*</i>	7.0 (2.6)	7.7 (1.6)	+0.7	p = .003**
3	<i>Research ethics management</i>	<b>7.6 (1.5)***</b>	<b>8.4 (1.0)</b>	+0.7	p = .001**
4	<i>Cognitive management</i>	<b>7.4 (1.2)</b>	<b>8.1 (0.9)</b>	+0.8	p = .001**
5	<i>Self-management*</i>	<b>7.5 (1.9)</b>	7.8 (2.0)	+0.3	p = .016**
6	<i>Research communication management</i>	7.1 (1.7)	7.8 (0.9)	+0.6	p = .042**
7	<i>Team working management</i>	<b>7.5 (1.4)</b>	<b>8.4 (0.8)</b>	+0.9	p = .001**
8	<i>Team leadership management*</i>	6.5 (2.5)	8.0 (1.2)	+1.5	p < .0001**
9	<i>Resource management*</i>	6.4 (2.5)	7.8 (1.2)	+1.4	p < .0001**
10	<i>Career management</i>	6.7 (1.6)	7.7 (1.0)	+1.0	p = .001**
11	<i>Pedagogy management*</i>	<b>7.5 (1.9)</b>	<b>8.5 (1.2)</b>	+1.0	p = .013**
12	<i>Implementation management</i>	6.4 (1.8)	7.6 (1.0)	+1.2	p = .001**
13	<i>Future vision management</i>	6.5 (1.8)	7.9 (0.9)	+1.4	p < .0001**
14	<i>Intercultural management</i>	7.2 (2.0)	<b>8.2 (0.9)</b>	+1.0	p = .017**
15	<i>Technology management</i>	6.4 (2.3)	7.7 (1.1)	+1.3	p = .001**
Total score		101.7 (18.7)	116.3 (24.2)	+14.6	p < .0001**

Improvement in all  
Leadership practices

Improvement in all  
Professional  
Competencies



# The Nurse-Lead Qualitative Study - The findings

## Three main themes and 10 subthemes

### Improvement in Leadership

- **Change in views on leadership** – what it is and how they see it.
- **Leading teams** - more effective in leading teams
- **Leading research programs**
- **Leading collaborations**

### Improvement in Professional Development

- Take steps in **professional development**
- Become **more confident**
- Become more strategic
- Find better balance in private life and work

### Satisfaction with the Nurse Lead program

- ***Value of mentoring***
- Value an online program & international perspective

# Nurse-Lead Doctoral Nursing Students & Postdoctoral Nurses



# CONCLUSIONS



# Conclusions

Due to the Global Challenges of Health Care and Nursing, - we need an ***increased pool of transnational nurse leaders who are well educated with strong leadership for the range positions and different of fields in clinical practice of Health Care, Education and Research*** which will improve patient outcomes, quality of patient care and patient safety.





# Conclusions

## Leadership and Mentoring programs

### The Fellows:

- Experiences matched with the program aims and content.
- Showed improvement in own leadership & career development
- Improved the focus of their research programs
- Showed strong personal & professional development as individuals and as a group.
- Report on positive experiences of mentoring – both the face-to-face and online
- Developed trusting relationships with mentors
- Report that mentoring contributed to their leadership and career development
- And supported them in developing own research programme.



# Conclusions

## Leadership and Mentoring programs

- Lead to increase in the number of nurses able to conduct strong national and international research collaborations and
- Strengthen collaborations with professional nursing organisations like INDEN, EANS, FINE, ENDA & SIGMA
- Increase and strengthen nursing research capacity in the participating countries & in Europe.
- ***TODAY WE HAVE 20 PROFESSORS IN NURSING IN THE NL.***



## *Today ...*

- Global Challenges Impacting Health Care & Nursing
- The Nursing Workforce
- Why do we need Doctorally Prepared Nurses?
- Global Reports on Nursing
- Leadership & Mentoring
- Leadership and Mentoring Programs
- Conclusions



# Questions





# THANK YOU

Thóra B. Hafsteinsdóttir RN, PhD  
[t.hafsteinsdottir@umcutrecht.nl](mailto:t.hafsteinsdottir@umcutrecht.nl)

