



COMMUNICATION
KNOWLEDGE
LEADERSHIP
PROFESSIONALISM
BUSINESS SKILLS

Nurse Executive Competencies: Post-Acute Care



American Organization
for Nursing Leadership



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OVERVIEW

Beyond the hospital and physician's offices, patients are cared for in specialized settings based on their specific needs. Most modern hospitals and health care systems include a number of services or programs that fall into the category of post-acute care, including institutional-based programs such as inpatient rehabilitation facilities (IRFs), skilled-nursing facilities (SNFs) and long-term care hospitals, as well as home and community-based services, such as home health and hospice care. Additional specialized services span the acute and post-acute care continuum, such as palliative care, hospital case

management and discharge planning. The focus on population health and transitions of care require additional competencies for the nurse leader overseeing the wide array of services to manage acute episodes of care and chronic diseases.

These services are referred to as post-acute care (PAC). Transitions of care are essential elements in assuring safe quality care across the continuum. With the advent of health care reform, post-acute care is now an important partner in the continuum of care within an integrated delivery system.



ASSUMPTIONS

- Health care systems will consolidate and become a predominant model of integrated care delivery.
- The health care enterprise will be patient centric/driven.
- Nursing will continue to evolve as a profession.
- Enterprise-focused executive nursing leadership is vital to the success of community systems.
- Nursing practice should be 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.
- PAC is institution or community-based interprofessional care provided along the continuum. Between 2010-2011 PAC (long-term acute care hospitals (LTACH); inpatient rehabilitation facilities (IRF); skilled nursing facilities (SNF); home health agencies (HHA)) was approximately 40% of total Medicare spending for inpatient and outpatient PPS.
- Post-acute care nursing leadership is as much a specialty as any clinical specialty and requires proficiency and competent practice specific to the executive role.
- Competencies and competency models are well established in literature for use in leadership career development and performance management.
- Competency is defined as the knowledge, skill and abilities/attitudes required for successful managerial, leadership and organizational performance.
- Expectations for competencies and requisite educational preparation need to be the focus in PAC.

Reliability and validity for the AONL 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

- Conduct oral presentations to diverse audiences on nursing, health care, and population services.
- Produce cogent and persuasive written materials to address nursing, population health care and organizational issues to appropriate audience and community.
- Demonstrate the ability to recognize individual conflict management style.
- Demonstrate and promote collaborative conflict resolution strategies.
- Value the importance of active listening.
- Close the system gap by increasing communication within population care management. (i.e. close gap between service providers, hospitals, pharmacies, insurance companies, etc...).
- Utilize a multimedia approach to communicate services to organizations and local communities.

B. RELATIONSHIP MANAGEMENT

- Build trusting, collaborative relationships with all internal and external clients/ stakeholders. (staff, peers, other disciplines and ancillary services, physicians, vendors, community leaders, legislators, health care consumers and their significant others and families).
- Build trusting, collaborative relationships through interprofessional collaboration and teamwork across the continuum.
- Facilitate direct and honest interactions in such a way that is credible and supportive.
- Follow through on promises and concerns.
- Provide service recovery to dissatisfied stakeholders.

- Care about people as individuals and demonstrate empathy and concern while ensuring that organizational goals and objectives are met.
- Accomplish objectives through persuasion, celebrate successes and accomplishments and communicate a shared vision.
- Assert views in non-threatening, non-judgmental ways.
- Building bridges (relationships) with organizations and hospitals to provide smooth transitions throughout the continuum of care.

C. INFLUENCING BEHAVIORS

- Collaborate with stakeholders to create and communicate a shared vision.
- Reward appropriate behaviors and confront and manage inappropriate behaviors.
- Collaborate with stakeholders to develop, communicate and monitor behavior expectations.

D. DIVERSITY

- Create an environment which recognizes and values differences in staff, health care providers, patients, families and the community at large.
- Collaborate with labor, leadership and workforce development leaders, promoting diversity and inclusion.
- Assess the current environment and establish indicators of progress toward cultural competency.
- Define diversity in terms of gender, race, religion, ethnicity, sexual orientation, age, limitations, socioeconomic and immigration status, etc.
- Analyze population data to identify cultural clusters.

- Define cultural competency and permeate principles throughout the organization.
- Engage self and others to constructively manage inappropriate behaviors and attitudes toward diverse groups.
- Develop processes to incorporate cultural beliefs and alternative treatment options into care delivery.
- Promote diversity (and divergent thinking) as a mechanism that will drive innovative idea sharing and problem solving.

E. SHARED DECISION-MAKING

- Develop integrated structures of team empowerment matching expertise, scope and autonomy across disciplines and roles.
- Utilize the strategic plan to engage and partner internal and external resources in a structured partnership.

F. COMMUNITY INVOLVEMENT & SOCIAL/PROFESSIONAL

- Apply systems thinking to care communities and populations.
- Actively create opportunities to demonstrate nursing leadership in novel communities.

G. PROVIDER RELATIONSHIPS

- Build credibility with provider groups as a champion for health care consumers, quality outcomes and nursing professionalism.
- Confront and address inappropriate behavior towards health care consumers and their significant others/families and staff.
- Represent nursing at provider executive committees and other provider staff committees.
- Collaborate with provider staff leaders in determining needed health care consumer services.
- Collaborate with providers to develop health care protocols, policies and procedures.
- Collaborate with providers to determine health care consumer equipment and facility needs.

- Utilize provider/staff mechanisms to address provider clinical performance issues.
- Facilitate disputes involving providers and nurses or other disciplines.

H. WORKFORCE PLANNING

- Determine current and future supply and demand for nursing care.
- Identify educational needs of existing and potential nursing staff.
- Collaborate with labor, leadership and workforce development leaders to provide essential population focused resources.
- Collaborate with nursing programs in evaluating quality of graduating clinicians and develop mechanisms to enhance this quality.
- Serve on academic advisory councils.
- Collaborate with nursing faculty in nursing research and incorporate nursing research into practice.
- Establish relationships with nursing programs to provide directors and managers in nursing educational preparation in leadership and management.
- Provide the foundation that supports the continuum of learning and professional development by closing the gap between the post-acute care setting, academic institutions and health care organizations.
- Partner with academic institutions by offering clinical site placements as a method of recruitment.
- Acknowledge the need for interprofessional collaborative practice and education across the health care professions.

2 KNOWLEDGE OF THE HEALTH CARE ENVIRONMENT



A. CLINICAL PRACTICE KNOWLEDGE

- Maintain knowledge of current nursing practice and the roles and functions of patient care team members.
- Articulate patient care standards as published by The Joint Commission, CMS, and professional nursing literature.
- Understand, articulate and ensure compliance with the state nurse practice act, state board of nursing regulations, regulatory agency standards and policies of the organization.
- Ensure that written organization clinical policies and procedures are reviewed and updated in accordance with evidence-based practice.
- Role model lifelong learning, including in clinical subjects such as disease processes, pharmaceuticals and clinical technology.

B. DELIVERY MODELS/WORK DESIGN

- Maintain knowledge of current nursing practice and the roles and functions of patient care team members.
- Articulate various delivery systems and patient care models and the advantages/disadvantages of each.
- Serve as change agent when patient care work/workflow is redesigned.
- Determine when new delivery models are appropriate, and then envision and develop them.

C. HEALTH CARE ECONOMICS

- Articulate federal and state payment systems and regulations, as well as private insurance issues which affect organization's finances.
- Understand and articulate individual organization's payer mix, CMI and benchmark database.

D. HEALTH CARE POLICY

- Articulate federal and state laws and regulations that affect the provision of patient care, e.g. tort reform, malpractice, negligence, reimbursement.
- Participate in the legislative process concerning health care through membership in professional organizations and personal contact with public officials.
- Educate patient care team members on the legislative and regulatory processes and methods for influencing both.
- Interpret impact of state and federal legislation on nursing and health care organizations.

E. GOVERNANCE

- Articulate the role of the governing body of the organization in the following areas:
 - » Fiduciary responsibilities
 - » Credentialing
 - » Performance management
- Represent patient care issues to the governing body.
- Participate in strategic planning and quality initiatives with the governing body.
- Represent nursing at the organization's board meetings.

F. EVIDENCE-BASED PRACTICE/OUTCOME MEASUREMENT

- Interpret findings from research.
- Utilize research findings for the establishment of standards, practices and patient care models in the organization.
- Disseminate research findings to patient care team members.
- Participate in studies that provide outcome measurements.
- Allocate nursing resources based on measurement of patient acuity/care needed.

G. PATIENT SAFETY

- Support the development and implementation of an organization-wide patient safety program.
- Design safe clinical systems, processes, policies and procedures.
- Monitor clinical activities to identify both expected and unexpected risks.
- Support a non-punitive reporting environment and a reward system for reporting unsafe practices.
- Support safety surveys, responding and acting on safety recommendations.
- Ensure staff is clinically competent and trained on its role in patient safety.
- Articulate and take action to support The Joint Commission National Patient Safety Goals.

H. UTILIZATION/CASE MANAGEMENT

- Articulate organization decision-making for the criteria model adopted by the organization.
- Communicate key points of the model to a variety of audiences (nursing, finance, medical staff).
- Involve physicians in on-going utilization management practices.
- Design continuum of care options for managing patient throughput (long-term care units, urgent care centers, admission/discharge units, etc.).

I. QUALITY IMPROVEMENT/METRICS

- Articulate the organization's quality improvement program and goals.
- Determine patient care quality improvement goals and objectives.
- Define metrics as related to process improvement.
- Explain and utilize metrics as a unit of measure for any process.
- Articulate the link between metrics and goals.
- Articulate the link between organization metrics and national quality initiatives/metrics.
- Target outcomes that are evidence-based (comparison data benchmarking).
- Define quality metrics by:
 - » Identifying the problem/process
 - » Measuring success at improving specific areas of patient care
 - » Analyzing the root causes of variation from quality standards
 - » Improving the process with the evidence
 - » Controlling solutions and sustaining success

J. RISK MANAGEMENT

- Identify areas of risk/liability.
- Ensure staff is educated on risk management and compliance issues.
- Develop systems which encourage/require prompt reporting of potential liability by staff at all levels.
- Envision and take action to correct identified areas of potential liability.

3 LEADERSHIP



A. FOUNDATIONAL THINKING SKILLS

- Recognize one's own method of decision-making and the role of beliefs, values and inferences
- Critically analyze organizational issues after review of the evidence.
- Maintain curiosity and an eagerness to explore new knowledge and ideas.
- Promote nursing leadership as both a science and an art.
- Demonstrate reflective leadership and an understanding that all leadership begins from within.
- Provide visionary thinking on issues that impact the health care organization.
- Incorporate use of evidence-based care processes across disciplines and continuum of care into decision making and policy development.
- Develop roles and processes that facilitate nursing's focus on wellness, disease prevention, chronic care management, care coordination and follow up, end of life care.
- Use the full scope of knowledge, skills and abilities of available health care professionals and health care workers to provide care that is safe, timely, efficient, effective and equitable.

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.
- Seek and engage in formal executive leadership coaching.
- Forge interdependent relationships with other professions to improve care and advance learning.
- Engage in continuous professional and interprofessional development to enhance team performance.

C. SYSTEMS THINKING

- Value and promote systems thinking to design models around episodes of care that focus on care facilitation, education, outcomes management, illness preventions and health promotions.
- Consider the impact of nursing decisions on the health care system as a whole.
- Provide leadership in building loyalty and commitment throughout the organization.
- Synthesize and integrate divergent viewpoints for the good of the organization.
- Demonstrate an awareness of and responsiveness to the larger context of health care.
- Demonstrate an understanding of complexity involved in decision-making in health care relating to population management across an integrated system.
- Define roles for nurses as partners with consumers in maintaining healthy lifestyles and wellness.
- Engage academia in modifying clinical education sites to encompass post-acute care experiences.

D. SUCCESSION PLANNING

- Promote nursing leadership and management as desirable specialty roles.
- Conduct periodic organizational assessments to identify succession planning issues and establish action plans.
- Serve as a professional role model and mentor to future nursing leaders.
- Establish mechanisms that provide for early identification and mentoring of staff with leadership potential.
- Develop a succession plan for one's own position.
- Value the mentoring relationship for staff professional development.

E. CHANGE MANAGEMENT

- Utilize change theory to plan for the implementation of organizational changes.
- Serve as a change agent, assisting others in understanding the importance, necessity, impact and process of change.
- Support staff during times of difficult transitions.
- Recognize one's own reaction to change and strive to remain open to new ideas and approaches.
- Create an environment that encourages and rewards creative thinking and innovation.
- Adapt leadership style to situational needs.
- Develop policies and procedures that support the care transition process and provide opportunities for the post-acute executive to participate in change.



4 PROFESSIONALISM



A. PERSONAL AND PROFESSIONAL ACCOUNTABILITY

- Create an environment that facilitates the interprofessional team to initiate actions that produce results.
- Hold self and others accountable for actions and outcomes.
- Create an environment in which others are setting expectations and holding each other accountable.
- Answer for the results of one's own behaviors and actions.
- Give timely, sensitive, instructive feedback to others about their performance on the team, responding respectfully to feedback from others.

B. CAREER PLANNING

- Develop own career plan and measure progress according to that plan.
- Coach others in developing their own career plans.
- Create an environment in which professional and personal growth is an expectation.
- Develop and encourage strength-based leadership plans.

C. ETHICS

- Articulate the application of ethical principles to operations.
- Integrate high ethical standards and core values into everyday work activities.
- Create an environment that has a reputation for high ethical standards.
- Place the interests of patients and populations at the center of interprofessional health care delivery.

- Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team based care.
- Embrace the unique cultures, values, role/responsibilities and expertise of all health professions.
- Act with honesty and integrity in relationships with patients, families and other health care team members.
- Engage self and others to constructively manage disagreements about values, roles, goals, and actions that arise among health care professionals and with patients and families.

D. EVIDENCE-BASED CLINICAL AND MANAGEMENT PRACTICE

- Advocate use of documented best practices.
- Teach and mentor others to routinely utilize evidence-based data and research.
- Incorporate use of evidence-based care processes across disciplines and continuum of care.

E. ADVOCACY

- Role model the perspective that patient care is the core of the organization's work.
- Assure that the clinical perspective is included in organizational decisions.
- Ensure that nurses and all members of the interprofessional team are actively involved in decisions that affect their practice.

F. ACTIVE MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

- Participate in at least one professional organization.
- Support and encourage others to participate in a professional organization.

5 BUSINESS SKILLS



A. FINANCIAL MANAGEMENT

- Articulate business models for health care units and fundamental concepts of economics.
- Describe general accounting principles and define basic accounting terms.
- Analyze financial and billing statements.
- Manage financial resources by developing business plans.
- Establish procedures to assure accurate charging mechanisms.
- Educate patient care team members on financial implications of patient care decisions.
- Understand basic concepts regarding leasing versus renting/purchasing equipment, buildings, supplies.
- Stay abreast of demographic forecasts in the community.

B. HUMAN RESOURCE MANAGEMENT

- Participate in workforce planning and employment decisions.
- Champion a diverse workforce and understand cultural norms.
- 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 obviate.
- 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

- Connect with community leaders to collaborate on industry growth.
- Project health care needs in the communities being served.
- Collaborate with and inspire multidisciplinary teams to provide seamless and holistic care.
- Be open to and encourage innovative and creative ways to provide care.
- Measure and analyze performance from the learning and growth business process, customer, and financial perspectives to remain competitive.

D. MARKETING

- Create a formal marketing plan, including strategies, budget, communication plan and referral goals.
- Blend marketing skill sets between sales and clinical expertise.
- Ensure sales team is well versed on services and specialty programs.

E. INFORMATION MANAGEMENT AND TECHNOLOGY

- Competency in email.
- Recognize the relevance of data for improving practice.
- Use telecommunication devices.
- Utilize decision support and expert system's programs to access information and analyze data from disparate sources for use in planning for patient care processes and systems.
- Participate in system change processes and utility analysis.
- Participate in evaluation of information systems in practice settings.
- Evaluate and revise patient care processes and systems.
- Use applications for structured data entry (classification systems, acuity level, etc.).
- Recognize the utility of nursing involvement in the planning, design, choice and implementation of information systems in the practice environment.
- Demonstrate awareness of societal and technological trends, issues and new developments as they apply to nursing
- Demonstrate proficient awareness of legal and ethical issues related to client data, information and confidentiality
- Read and interpret benchmarking, financial and occupancy data.

