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TITLE	Exploring Factors That Predict the Embedment of Nursing Evident- Based Practice Guidelines in Ontario Hospitals: A Pilot Study Sampling Senior Nursing Leaders
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OBJECTIVE	The purpose of this study is to explore factors that predict the embedment of nursing evidence-based practices (EBP) guidelines in

the hospital sector in Ontario (Canada).

## **METHODOLOGY**

The initial sampling frame consisted of 141 senior nursing leaders (SNL) working in hospitals in the province of Ontario, of which 76 completed and submitted the online survey (response rate = 54%). The majority of SNLs reported working in community hospital organizations: 43 percent were employed in small hospitals with less than 100 beds, 29 percent worked in mid-sized community hospitals with between 100 and 250 beds and 28 percent worked in large community hospitals with greater than 250 beds. The typical respondent was female (96%), between the age of 50 and 59 years (63%), reporting directly to the CEO (95%), with 6-10 years in a senior leadership role (31%), 2-5 years in their current position (41%), and over 74% held a graduate degree. Respondents completed the Leadership Practices Inventory and provided information about themselves and their organizations. The internal reliability coefficient for a composite score on the LPI was 0.96, with scale reliabilities of .78 for Model, .92 for Inspire, .86 for Challenge, .82 for Enable and .88 for Encourage.

## **KEY FINDINGS**

Enabling was the leadership practice most frequently reported engaged in by SNLs, followed by Model, Encourage, Challenge, and Inspire. Inspire a Shared Vision was related to EBP guidelines, accounting for nearly 16 percent of the explained variance. The implication for nursing leadership, according to the author:

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Developing and clearly articulating a nursing philosophy that explicitly emphasizes the value the organization places on evidence-based nursing practice to nursing colleagues and others at all levels of the organization can inspire momentum towards a common direction. It would be particularly useful if this philosophical commitment were to be consistently and meaningfully reinforced by nursing leaders at all levels of the organization. This has the potential to optimize organizational commitment to guideline implementation initiatives in particular and to the normalization of EBP in general (pp. 81-82).