

# Succession Planning for Surgical Services Leaders

How and With Whom Will You Fill Those Shoes?

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### Introduction

After another long week, it's Friday afternoon and your Surgical Services Director has just given you notice that she is leaving in four weeks. Succession planning has been discussed among the members of the hospital's executive team and that group has developed and begun implementation of a plan to replace each of its members. Have you considered how you would replace your nursing department middle management level?

Much attention has been paid to the current nursing shortage, but not as much focus has been directed to the shortage of nurse managers and directors. One of the biggest contributors to turnover in hospitals is the lack of leadership development. When a nurse manager or director leaves unexpectedly, training the successor takes more than just promotion.

Succession planning is a process of identifying and preparing suitable individuals through training, coaching and mentoring to replace key organizational leaders. The success of surgical services departments depends largely on a competent leadership team. One of the greatest concerns in nursing and nursing leadership today is that there may be no successor to take control once the current leader or key person leaves. When succession planning is an integral component of an organization's culture, it cultivates predictability in finding potential leadership candidates.

The 17<sup>th</sup> annual OR Manager Salary/Career Survey reported that the typical profile of a surgical services manager is that he or she is 52 years old and plans to retire in 2017. The bulk of these managers work in community non-teaching hospitals with an average of 13-staffed operating rooms, manage 5.7 departments, oversee 96 clinical and 26.5 non-clinical FTEs, and are responsible for an operating budget of \$14.7 million.

Today's directors and managers are facilitators, coaches, providers of resources, and mentors. On top of that, they are leaders. Traditional managers are analytical, leaders are intuitive. The traditional manager made decisions and solved problems. The contemporary leader sets the direction and empowers the team to find the solutions. Surgical Services is no longer just about operating room management. The complexity of this arena includes pre,

intra and postoperative clinical and non-clinical areas. The scope and the list of skills necessary to manage this multifaceted and complicated environment can seem daunting to staff nurses who may be interested in leadership as a career path.

### Seeking Candidates

Many organizations begin their own external search for candidates utilizing the means available through their Human Resource department. If those resources are not successful, the hospital then turns to outside recruiters for assistance in finding candidates. The challenges are numerous; the right person, the right skill set, the right personality, the right cultural fit. Add to that, the current economic climate, the real estate market, and the impact each of these has on relocation. All of these components contribute to the difficulty in finding acceptable candidates. Waiting and expecting that a seasoned surgical services director will walk through your door and want to work in your organization is likely fruitless and wastes valuable time.

In many instances, new or emerging leaders are going to have to be selected from within the organization, mentored, coached and trained. There are those nurses who may accept the position on an interim basis while a search is conducted. This individual may prove to be successful and be asked to stay in the role permanently if the hospital is unable to recruit a qualified outside candidate to take the helm.

With the flattening of organizational structures, there are fewer levels of leadership in healthcare organizations. Study after study in nurse manager retention describes the first line nurse manager as the glue that holds hospitals together. Savvy surgical services directors surround themselves with smart managers who are experts in their clinical areas and provide day-to-day operational leadership, successfully managing their resources and customers. Without a qualified leader in place, quality, service, satisfaction, and financial performance suffer. A good starting point in succession planning is to examine your current surgical services organizational and leadership structure for potential candidates.

## Examining The Current Organizational Structure

1. Is the design supportive of succession planning?
2. Is it multi-layered enough to promote upward mobility for your team members and supportive of leadership development?
3. Have you surrounded yourself with experts who make your job easier?
4. Who is a star or someone that you depend upon, is a good communicator, and who has good follow through?

Ideally, the surgical services organizational structure has, at a minimum, two levels of leadership. The director level oversees each area of professional specialization. Those areas of specialization, under the direction of a manager, usually include Perioperative, Perianesthesia, Sterile Processing, and Endoscopy. Each of these areas of specialization is represented by a professional organization that establishes standards of care and guidelines for performance.

In some instances, creating an interim intermediate layer can be a successful succession planning strategy to prepare an individual to fill an upcoming vacancy at a manager level. This may be as simple as converting a non-exempt charge nurse role into an exempt supervisor to be exposed to the leadership skill set and gain access to hospital or organizational-based leadership development programs.

Surgical services directors need to keep their eyes open for emerging leaders. A director who sees the vision of the department, looks to build a strong group of direct reports and selects nurses who demonstrate career ambition – individuals who know what they want from a career and are actively pursuing it. These nurses are career-focused and self-motivated, taking the initiative to seek opportunities without waiting for others to open doors. They exhibit some level of skill in problem solving, communication, organization, customer management, decision making, and are able to establish priorities. Staff nurses who can see the big picture and display leadership behaviors by developing others and understanding accountability along with the application of the standards of their clinical practice specialty are good candidates.

## Development Planning

Your organization or department should have a development planning process in place to help people grow. A desire to grow and develop is a common trait in many nurses, along with an aspiration to be successful and rewarded. These individuals tend to be ambitious and need a mentor and coach who will be an active partner in their development. Employees will not grow if the organization shows no interest or does not offer support. Clinical ladders provide a mechanism, coupled with a measurable set of metrics, allowing nurses to demonstrate their ability to practice progressive nursing and leadership skills.

Many organizations have formal training programs for new managers. Having a professional development plan in place that provides progressive instruction and skill development opportunities, coupled with challenging tasks, encourages new ways of thinking and provides innovative assignments to practice them. Directors can begin to delegate tasks that are no longer challenging to them to new managers. Offering a staff nurse the opportunity to shadow the director or one of the managers is a strategy that affords emerging nurse leaders a view of what the role looks and feels like.

An investment of time is required to develop others and development is stifled without appraisal. Use the annual appraisal process to identify the individual's current strengths, weaknesses and the competencies that the person needs to develop to move on to the next level. Allocate other time to discuss career goals and the development of the plan to achieve them. Providing guidance and direction are necessary to further develop promising new leaders.

Feedback and communicating expectations to the emerging leader needs to be continuous and balanced for growth. Having meaningful dialogues is essential to advancing their careers in leadership. Identifying key performance indicators to assist them in measuring their progress reinforces the new skills that they have acquired. Simply taking some of the appraisal time to rediscover the new skills that the individual did not have a year ago provides positive feedback. Asking the associates of this individual to comment on what they should start, stop and keep doing to be more successful is a useful feedback strategy. A network of coaches and mentors at the department level provides new managers with a forum for continuous feedback and a place for support.

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## The Necessary Skill Set

What are the necessary competencies to be an effective Surgical Services Director? In 1996 Billie Fernsebner, RN, MSN developed a resource specific to surgical services, Competencies for Management of the Operating Room. This publication, in its 3rd edition, outlines 18 competencies with measurable criteria, learning options and relevant resources articles. The competencies are divided into 5 domains: **managerial, financial, clinical, interpersonal, and technological**.

**Managerial** – In this domain, competencies include systems thinking, performance improvement, information systems, governance, legal requirements, ethical care and project management. With the emergence of pay for performance and core measures, the complexity and systems thinking required to achieve these competencies has greatly expanded. Numerous regulatory agencies, such as CMS, JCAHO, OSHA, AAMI, the state Board of Nursing and Department of Health Services, establish requirements that cross over each of the departments and areas of clinical practice in Surgical Services.

New leaders want and need to have their progress and that of their area of responsibility measured and reported. Clear expectations and feedback are essential to leadership development and satisfaction. By establishing monitoring tools that regularly measure performance, new managers are able to build confidence, ensure improvement, practice accountability and use the data to support new initiatives and skill development.

### Perioperative Services Key Performance Metrics

1. Suite & Block Utilization
2. Patients Seen by PAT
3. Day of Procedure Cancellations and Add-ons
4. First Case On-Time Starts
5. Turnover and Downtime
6. PACU Length of Stay
7. Overtime as a % of Total Paid Hrs
8. Worked Hours per Unit of Service

**Financial** – Understanding the costs of resources is the essence of this domain. Budgetary training is one of the most intimidating of all skill sets for nurse managers

and directors. The key concepts include the budgeting process, the types of budgets and variance analysis. The cost of resources can simply be broken down into salary and non-salary expense. Competency in fiscal and materials resources include the development of the department budget, the analysis of data for variances and identifying the aspects of cost. Determining indicators and measuring fiscal performance are means to examine resource consumption.

Since the introduction of diagnosis related groups and the subsequent changes in hospital and physician reimbursement, the administrative focus on surgical services has been redirected from it being the highest revenue generating department to one of the highest cost centers in hospitals. The focus on productivity and managing the resources of time and capacity are a constant challenge with advances in technology, competition in the market, and a shift from inpatient to outpatient procedures. Efficient use of everyone's time – nursing, anesthesia, and surgeons – can be a difficult balancing act. Examining the hours of operation and measuring utilization of key time elements while matching that to block utilization is a challenging numbers game. Managing surgeon downtime by examining each of the time periods between the end of one surgery and the beginning of the next and reviewing the work of each of the team members is a necessary exercise for individuals who aspire to lead these processes.

**Clinical** – Surgical Services managers and directors are responsible for establishing and maintaining the framework for professional clinical practice. Perioperative, Perianesthesia, Endoscopy and Sterile Processing areas each have definitive written structure and process standards of professional practice that must be in place. Additionally, management of the environment of care, a risk management program, and a culture of patient safety are included in this set of clinical competencies.

Evidence-based practice has its origin in research. Each of the professional groups under the umbrella of surgical services explores evidence-based practice in developing and revising their respective standards of practice. Directors and managers need to keep abreast of trends in each of these areas and establish the necessary staff competencies in order to provide the best and safest

clinical environment for their patients and employees. Ideally, a collaborative approach between managers and educators should exist to explore trends, review current process and structure standards, make revisions as necessary, and to engage the staff in educational offerings to ensure that their practice is reflective of written policy.

**Interpersonal** – Leading takes presence. It is important to look and to sound like a leader. New managers and directors will require coaching to develop confidence and presentation skills that include establishing and maintaining eye contact and a strong voice. Practicing these skills in a variety of settings that include one-on-one, small and large groups, with peers, direct reports and supervisors builds self-assurance.

Listening to others to better understand is often more important than talking. Identifying and understanding the customers of surgical services, coupled with the use of process and negotiation skills, are additional components of this domain. Today's hospitals are centered on the satisfaction of their patient, physician and employee customers. Patient satisfaction should be regularly measured and reported to each department by either internal or external third parties. Key measures of success, along with a willingness to recommend or return, quantify the patient's experience providing directors and managers with information and ideas to improve the patient experience.

In Surgical Services, the most common patient complaint is about wait time. Interestingly enough, wait time is also the most common physician complaint as it relates to patient readiness, start time, turnover and downtime. Addressing the surgeon as a customer by reducing some of their issues assists in building collegial relationships with that important customer group. Utilizing the data collected from key performance indicators to improve surgical throughput can have a tremendous impact on physician productivity and improved satisfaction.

Reporting and managing nurse retention is an important indicator of nursing engagement and satisfaction. Working with nurses to determine what they can let go of assists in establishing their role and making the most of this limited resource. Examining the work of nursing for value verses non-value, streamlining processes, and adding unlicensed assistive personnel can extend the labor resource budget while improving nursing satisfaction

and retention. Understanding the difference between full time equivalents and wage and benefits is an essential concept. Hospitals tend to look at worked and paid hours versus cost per hour of care. Examining the cost of care rather than the hours of care allows for more creative management of care delivery.

**Technological** – A solid technology management program involves an assessment process and management program. The assessment process includes acquisition and related costs as well as the ability to calculate the return on investment. In today's competitive market, surgical services departments are an integral part of the hospitals strategic growth plan. Directors need to understand and be aware of new technology trends and whether or not those trends fit into the strategic plan for the development of new or the maintenance of existing key hospital programs.

## Conclusion

Every perioperative nurse has the ability to demonstrate their leadership potential every day. Even the most reluctant of nurses find themselves in charge of something each day. It may be a patient being admitted for surgery, a block of time in the operating room with a specified amount of planned work, or a postoperative patient transfer from the PACU to an inpatient unit. Recognizing talent and fostering an environment where developing it is a core value is critical in creating pools of individuals with high leadership potential. By better preparing the emerging leader to meet the challenges of leadership, the more readily they will progress to success and have the confidence to assume the role. Each occasion that a nurse has to lead a process provides valuable practice and produces an increased sense of accomplishment.

Leadership at all levels requires stamina, commitment and skills. Allowing new and emerging leaders to practice in their role is crucial. To develop the surgical services leadership team members, the director and managers need to commit to being people builders. It is essential to set aside time to build relationships with direct reports. These meetings provide an opportunity for mentoring, coaching and providing feedback on performance. Providing a safe harbor that allows individuals to discover and rehearse their ideas is essential. Giving a developing leader permission to make mistakes establishes an environment where they are more comfortable with risk and will attempt new ideas

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and concepts. In turn, this leadership style in a director sets an example for these individuals for modeling the same behavior to those who report to them.

Leaders can be the most effective retention tools for any organization. People who are motivated will stay in an organization that promotes from within. Your employees need to know their career options, be recognized for their accomplishments, and have opportunities to advance.

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