

THE CHANGING CNO ROLE

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TODAY'S CNO

B.E. Smith has closely tracked the creation of new leadership roles and the rapid evolution of existing ones in response to healthcare's transformation to value-based care. One senior position undergoing change is the Chief Nursing Officer. We have had a front-row seat on this development, having placed over 60 CNOs in the past 18 months. My vantage point stems from 20 years as a nurse leader. This Practice Perspective overviews the changes and strategies related to this new breed of nursing executive.

THE NATURE OF THE EVOLUTION

Four fundamental transitions characterize the emerging CNO role:

FROM OPERATIONS TO STRATEGIC FOCUS

The traditional concentration on staffing, scheduling, and workflows has given way to a far greater strategic orientation. The CNO view is now enterprise-level. Today's CNO has a "seat at the table" in institutional decision-making, not only as leader of the largest workforce in most hospitals, but also as the best person to help construct strategies that align with nursing resources.

FROM LIMITED TO BROAD SERVICE LINE RESPONSIBILITY

Management responsibility has expanded dramatically from nursing services to direct and indirect involvement with pharmacy, nutrition, supply, and other ancillary areas. With this wider mandate, the CNO can make two major contributions: help break down silos and systematize workflow/procedures across a matrixed organization to reduce costly variation.

FROM MAINLY CLINICAL TO WIDE ORGANIZATIONAL INFLUENCE

Nursing leadership is expected to make an impact not only on clinical outcomes, but on financial performance, safety, and patient experience. It is a wide influence portfolio, and CNOs can no longer be micromanagers. Working with CMOs, CNOs must set the tone and expectations necessary to attain strategic clinical objectives. With acute care's diminishing role, CNO scope is expanding "outside the hospital four walls" to include influence on care coordination, community partnering, and population health management.

FROM CONSUMER TO DRIVER OF TECHNOLOGY

Today's CNO is a key player in healthcare's "digital transformation." From planning to implementation, CNO involvement is essential. The highest imperative is to drive optimization, ensuring technology supports better care rather than being an obstacle.

REQUIRED SKILLS AND COMPETENCIES

The new CNO expectations carry corresponding competency requirements. The ideal profile represents a complex blend of skills, personal attributes, and knowledge. Based on B.E. Smith's experience and the leadership frameworks of groups such as AONL and CNO Academy, the most desirable competencies include:

- **Innovation.** Being a change agent, leading new delivery models, and continuous process improvements.
- **Learning.** Continuing education for oneself and the staff breeds high performance and future readiness. Learning is no longer just about nursing subject matter. Strategic CNOs must stay knowledgeable about industry dynamics regarding regulation, reimbursement, and consumerism.
- **Relationship-building.** Creating a collaborative, patient-focused culture through extensive relationship and trust-building. Communication, community outreach, and partnering skills are favored.
- **Data management.** Building a plan for nursing capture and use of structured data to extract maximum clinical insight and value.
- **Business-focus.** Understanding not just the financial situation of the CNO's own institution, but also new industry payment models and the financial implications of clinical outcomes.

THE EMERGING CNO: RECRUITMENT AND DEVELOPMENT

HIRING STRATEGIES

The recruiting landscape for the CNO position has been altered in tandem with the changed role. Candidate evaluation for all nursing leadership has become more nuanced. Core credentials are important, and we are seeing more candidates presenting an MBA or MHA - a trend we encourage. However, deeper investigation of qualities, attributes, and experiences is now the norm. I'll focus on three areas I believe are among the most crucial, along with typical questions for each that reflect the behavioral interviewing approach we emphasize at B.E. Smith.

Collaboration and influence

- Describe a situation where you had to manage a team to fulfill a mission. What barriers did you face? What actions demonstrate your collaborative approach to driving a solution?

Results orientation

- Provide an example of the biggest professional obstacle you faced? Describe the difficulties and what you were able to achieve? Other examples of consistent results you have impacted?

Strategic vision

- Describe a strategic initiative you helped devise. What do you see as your current organization's most pressing strategic concerns?

LEADERSHIP DEVELOPMENT

Recruiting is only the first step in building nursing leadership for the future. Commitment to ongoing leadership development is vital. Consider these strategies:

- Start with front line leaders.
- Delineate and communicate clear advancement tracks.
- Provide specific training and mentoring for the CNO role and its emerging requirements. Too often, we see leaders elevated with minimal support.
- Train in "soft skills."
- Focus on work-life balance and coping with the CNO's "24/7 role" mindset.
- Use advisors for independent perspectives on individual leadership potential.

KEEP INTERIM LEADERSHIP IN MIND

As one who helps organizations utilize interim leadership, I can attest to the role it can play in finding the right CNO for today's evolving scenario. Taking time to recruit outside or develop an ideal internal candidate is optimal, and an interim CNO enables that. Far from just caretakers, these interims have demonstrated success in executing strategies such as integrating acquired hospitals into an organization and systematizing operations. Interims have also proven valuable in mentoring incoming CNOs. In some cases, the interim has been asked to become permanent.

FOUR KEY CNO TRANSITIONS



CONCLUSION

The four CNO role evolutions described here are significant. Navigating these transitions to derive maximum benefit will take commitment and creativity in implementing the right mix of recruitment, leadership development, and interim leadership.

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