Wendy S. Hill

Wendy Hill, RN, MN joined the BC Ministry of Health on May 2, 2006, as Assistant Deputy Minister of the Performance Management and Improvement Division.

The Performance Management and Improvement Division is the primary link between the Ministry of Health and the Health Authorities and is mandated to ensure the public has reasonable access to coordinated acute, specialized, continuing and community healthcare, provided at an affordable and sustainable cost. The Division achieves its mandate by establishing and articulating expectations, monitoring performance against those expectations and engaging in strategic intervention where appropriate.

Prior to her appointment in BC, Hill served as the Vice-President/ Chief Operating Officer for Community Hospitals, Suburban/ Rural Communities and Regional Support Services for Capital Health in Edmonton, Alberta. She also held the portfolio of Chief Nursing Officer.

Hill is a senior level health administrator with broad operational experience in acute and community care. She is experienced in the planning, implementation and evaluation of health services and programming in a large health region of 29,000 employees. In her capacity as Vice President/Chief

Operating Officer, Hill's portfolio

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included six community hospitals and several regional support services departments including regional pharmacy services, patient information, nutrition/food services and material management.

Her Chief Nursing Officer responsibilities included identifying and acting on strategic priorities, policy development, impact analysis, workforce planning, response to legislation and strengthening relationships with professional and educational nursing bodies. She is President of the Academy

of Canadian Executive Nurses, is co-investigator on several nursing research projects and sits on a number of national health related steering committees.

What do you consider to be the most important traits/characteristics of a good leader?

The most inspiring leaders I have known have demonstrated a shared vision, passion and commitment for their choices. They understood the difference between responsibility and accountability for their actions and delivered on those actions. Most have known the value of fostering and building relationships that are mutually beneficial. The most effective leaders have understood their obligation to share their knowledge with others and have strategically built the people coming behind them into leaders in their own right.

In your experience, do nurses bring a specific or unique set of leadership skills to senior positions?

Absolutely. Leaders with a nursing background bring a unique perspective because the nursing skills developed and honed in clinical decision-making are transferable to decision-making in the leadership or decision-making role. These skills and knowledge are evident in the breadth and depth of a nurse's capacity to view an organizational situation as a part of the whole environment, critically analyze what is observed, come to a conclusion but – most importantly – plan a strategy, act on it and evaluate the outcomes.

How would you describe your leadership style?

Understanding what people need at a particular point in time is the underpinning of determining and defining my approach to leadership. To describe my style as static would be hard, as I have learned to adapt to situational context: sometimes I find it necessary to be directive, sometimes consultative or collaborative and sometimes it's more important to let the group take the lead and for me to support the decision it generates. I think that the focused engagement of the leader in the work at hand reflects true leadership regardless of the leadership style.

Have there been specific experiences or opportunities in your career that enabled you to develop your leadership style?

I have been fortunate throughout my career to have been supported and mentored by people who have looked for the best in me and helped me to strengthen areas in which I can improve. These people have included not only supervisors, but also colleagues and staff as well as other health professionals with whom I have worked and learned my business. Some of the most important lessons have been those I have learned from people who do not necessarily share my beliefs, opinions or approaches. I have been challenged, allowed to explore innovative ideas and stretched my thinking beyond what is considered traditional, celebrated mutual successes and analyzed failures for lessons learned with many diverse and thoughtful people.

What key piece of advice do you have for aspiring leaders?

Learn your business all of your career – you will never know all the answers. Actively listen to others' views, opinions and ideas whether or not you share them. It will enrich your thinking. Value your staff – not just the clinical experts but also your support staff, and let them know it. Always be respectful

and treat everyone with whom you meet or work with dignity. Learn to be strategic in your work, always look forward and use your innate creativity. Take care of yourself and your family – work life balance is key to keeping the energy level where it needs to be and to have success follow you rather than having to pursue it.

Online Exclusive

Feasibility and Outcomes of Paid Undergraduate Student Nurse Positions

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Abstract

An Undergraduate Nurse Employment Demonstration Project (UNDP) was implemented in four Health Service Areas in British Columbia with a concurrent evaluation study. This demonstration project comprised the development and implementation of a new position in the BC healthcare system. The position enabled third- and fourth-year nursing students to be employed at their level of education. The purposes of the evaluation were to explore the feasibility and outcomes of this type of paid undergraduate student nurse employment. The three-year project and evaluation included both implementation and outcome analysis. The implementation evaluation design was descriptive and prospective, involving multiple data sources. The outcome evaluation design was quasi-experimental, with intervention and comparison groups. Learning outcomes for undergraduate nurses were increased confidence, organizational ability, competency and ability to work with a team. Workplace outcomes were increased unit morale, help with workload and improved patient care. New graduates with undergraduate nurse experience reported less time required for orientation and transition than other graduates who did not have this experience, and workplace nurses viewed these new graduates as more job-ready than other new graduates. After 21 months, new graduates with undergraduate nurse experience were less likely to move to other employment than other new graduates. Results from the four Health Service Areas indicated that the paid undergraduate nurse position was feasible and that outcomes benefited students, new graduates and workplaces. The undergraduate nurse position is now being implemented throughout all Health Service Areas in British Columbia.

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