In a busy and stressful hospital environment, the role of the Charge Nurse as your frontline leader is very important. Not only are Charge Nurses responsible for providing the same quality care as other nurses, they are also tasked with ensuring that all procedures are running smoothly, that everyone is working together for the best outcome, and that they’re doing so as efficiently and cost effectively as possible. Clinical knowledge alone is not enough to allow a nurse to sufficiently fulfill this leadership role. Effective Charge Nurse leadership is dependent on many internal and external factors.

There are barriers, both personal and organizational, that can hinder the success of these frontline nurse leaders. Removing as many of these barriers as possible will ensure your Charge Nurses will have the best chance of success possible.
9 LEADERSHIP BARRIERS
THAT CHARGE NURSES FACE

PERSONAL BARRIERS

1. Inability to see the big picture:

Having an understanding of the big picture and the common goal allows Charge Nurses to keep staff motivated and keep all situations in perspective. A Charge Nurse with a good eye for the big picture might be able to encourage his or her staff. It could be as simple as reminding staff that their shift is almost over. A Charge Nurse who can’t see the big picture could burn out just as quickly as everyone else.

2. Abusing the role:

An ineffective Charge Nurse may see the role as an opportunity to delegate all tasks to other nurses instead of carrying an equal part of the load. This may be an issue particularly in facilities where the Charge Nurse role rotates regularly. Assigning an unsafe patient load to other nurses could be an example of abusing the role, or assigning belligerent or most infectious patients.

3. Inability to delegate:

On the other hand, it’s important that a Charge Nurse doesn’t try to do too much all on their own. The best leaders understand how to divide work equally for the best outcome. Charge Nurses need to be able to utilize staff, not take advantage of them.

4. Lack of self-confidence:

Charge Nurses need to be able to make decisions quickly and confidently. If the Charge Nurse in a unit isn’t confident in her leadership ability, how can the rest of the unit be confident in her leadership? As a Charge Nurse, keeping calm and projecting self-confidence will help to calm the nerves of other nurses as well as the patients and families.

5. Inability to handle stress or stay organized:

This is a bucket that could include many things! It could be from fear of having 5 admissions in an hour and not being able to deal with it. Or stress could arise if a nurse doesn’t feel respected from staff or physicians. Make sure to create an environment where Charge Nurses feel support from top down, and bottom up.

6. Lack of interest in job:

The nurses in a unit take their cues from the person in charge. If a Charge Nurse acts bored and disinterested, there will be nothing to prevent everyone else from doing the same. Interest enhances engagement and engaged nurses are better for patient care than passive nurses. It’s up to Charge Nurses to keep everyone engaged by setting a positive example. Lack of interest in the job could also be due to not wanting liabilities to provide care to patients one does not directly care for, or having possible allegations of negligence of supervision. If this is a concern, remind your staff that a Charge Nurse duty is not a higher duty of care in comparison with the staff nurses. Rather it is a different form of liability, with different duties.
9 LEADERSHIP BARRIERS
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ORGANIZATIONAL BARRIERS

7. Lack of ancillary and clerical support:

Though often outside of the Charge Nurse's control, lack of clerical support means that the Charge Nurse has to spend excess time dealing with documentation and paperwork and other admin issues. It adds to their already busy schedule and throws off the efficiency of procedures in the unit.

8. Lack of Standard Operating Procedure:

One challenge that may be facing many Charge Nurses is lack of a comprehensive and accurate job description. It’s impossible for a Charge Nurse to effectively complete tasks if she doesn’t know what those tasks are. If possible, it would be beneficial for Charge Nurses to meet with administrative leadership to quickly draft a common list of responsibilities.

9. Staffing issue:

Staffing has been an issue in hospitals for a long time. Maybe a supervisor is pulling staff that the Charge Nurse feels that the unit can’t afford to lose or maybe not enough nurses apply to begin with. Regardless, staffing is a factor completely outside of the Charge Nurse’s control that can cause countless problems in any unit.

Being aware of the barriers that Charge Nurse's face is the first step in removing or managing these barriers, and help your staff be successful. Effective supervisors teach the Charge Nurse about the larger organizational issues that are involved in their decisions. And don’t forget the power of encouragement, to get staff to apply for Charge Nurse roles. Yes, the duties, delegation, and even liability are different. But the role is a challenging and interesting one that can bring satisfaction from delivering great care to patients in a unit.

DO YOU DEVELOP CHARGE NURSES?

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