It is a truism that “the only constant in today’s world is change.” Indeed, many of us would say that the amount and speed of change we all experience in our personal and work lives could best be described as living in a state of organized chaos. Moreover, for most individuals and organizations, change usually happens only when the status quo becomes unsustainable or a challenge or problem arises that cannot be ignored. As a result, we do not always see change as beneficial. Nevertheless, it is a necessary part of life for individuals and organizations. It is also beneficial in that the process of change offers the opportunity to reflect on where we are and how we got there, as well as to consider different options and take advantage of new possibilities.

Like many organizations in healthcare today, the Academy of Canadian Executive Nurses (ACEN) is facing many challenges. Two major issues are the impact of constant health system change on the workload of nurse executives and the aging of the nursing population – including nurse leaders. The first challenge affects members’ availability to take on the “extra” work required to ensure that ACEN is a key participant in healthcare policy initiatives. The second challenge means that a significant number of current members will retire in the next five to 10 years. If new members do not replace them, ACEN’s viability is threatened. Clearly, the organization needs to address these issues.

Change is not a new experience for ACEN; the organization has changed and evolved a good deal since its inception 30 years ago. It began through the efforts of a small group of nurse leaders working in the major teaching hospitals affiliated with the Association of Canadian Academic Healthcare Organizations (ACAHO). ACEN’s original mandate was to act as a support network and forum for execu-
tive nurse leaders in major teaching hospitals to share perspectives and consider options in addressing common issues and challenges. As many long-time members will attest, this initial iteration of the organization met the needs of its members well, and these functions continue to be key among ACEN’s activities today.

Over time, however, nursing leaders realized that their collective knowledge and experience could (and should) be strategically leveraged to influence federal policies on health-related subjects in the interest of better healthcare for Canadians. They further understood the benefit of working in partnership with other national groups and associations to accomplish common goals and objectives. These realizations gave rise to the questions: “Should we expand our mandate and membership?” and “Which other organizations should we seek out to work with ACEN?”

At the same time, in several provinces, traditional governance models for academic healthcare facilities were changing. For example, in the past 10 years several provinces have moved away from supporting the freestanding academic teaching hospital or healthcare facility aligned with an academic institution and having its own board of governors. Instead, academic facilities have been moved under the jurisdiction of regional health authority structures. As a result, many ACEN members found themselves providing executive nurse leadership beyond the walls of the traditional academic hospital setting. As they worked in these broader systems, it became apparent that nursing leaders in so-called “non-academic” organizations and facilities would benefit from membership in ACEN – and that ACEN would benefit from their knowledge and energy.

As these issues emerged, members were drawn to reconsider ACEN’s purposes, mandate and future. As a result of this “reconsideration of purpose,” the organization has made significant changes over the past 10 years. Membership categories have been broadened to include all nurses in executive and leadership positions in healthcare, education, research and government, as well as chief executive officers of health and nursing associations. Today, ACEN has more than 150 members and member organizations, representing nursing leadership from across the domains of practice and from across Canada. Indeed, it is the only organization in the country that offers such broad access to the unique perspectives of executive nursing leadership. Because of its numbers, and because of the vast knowledge and connections vested in its current membership, ACEN is increasingly seen by decision-makers and other nursing and professional groups as the “go to” organization for input on nursing, nursing leadership and health system issues.

Not satisfied to rest on this change, last spring members identified three strategic directions to pursue in coming years:
• Continue to influence and participate in setting directions for nursing, health policy and healthcare delivery to improve the health of Canadians;
• Serve as a community of practice for the discussion and sharing of ideas that advance nursing practice, education, research and administration; and
• Support the development of current and emerging executive nursing leaders.

These are large goals. Further changes to ACEN will be required if they are to be accomplished. As in the past, the organization has no shortage of excellent leaders to guide this process; however, they are already balancing extremely complex workloads in their executive nurse roles. Therefore, ACEN will need a well-functioning administrative infrastructure and resources to support its members in this work. With the opening left by the resignation of Michael Villeneuve, the Executive Committee has decided to contract an interim Executive Director while it uses the opportunity of change to review and re-imagine the current administrative structure. The goal of this review is to develop and implement a structure that will ensure ACEN has the wherewithal to meet its goals and is well positioned to actively pursue these and other new and exciting strategic directions.

In the re-imagining process, the Executive is first considering the vision and contributions of the many people who were instrumental in the journey that has led to ACEN’s becoming what it is today. In particular, two key individuals provided their perspectives and administrative leadership to ACEN as it broadened its mandate over the past five years. Working closely with the Executive Committee, first Mary Ellen Jeans and then Michael Villeneuve were instrumental in creating the connections and developing the systems that were essential to achieving the organization’s objectives. Mary Ellen began as the Secretary General for ACEN in 2004. During her tenure she successfully promoted ACEN as an organization with expertise in nursing, leadership and healthcare. She also facilitated the creation of an administrative and committee structure to support the organization’s work. Through her efforts, ACEN evolved into more than a network and forum for sharing ideas. It began to be viewed by policy makers and others as an organization with important perspectives to offer in regard to health and nursing policy, and as “the voice” of senior nursing leadership.

Michael Villeneuve took up the administrative leadership reins in 2007 as the organization’s first Executive Director. Although his tenure in the role was shorter than we would have liked, he further enhanced ACEN’s position and its reputation as a key organization that must be included in all dialogues, forums and initiatives related to setting directions for healthcare policy in Canada. By leveraging his impressive network and his considerable political skills, Michael helped the Executive Committee and members forge many important connections. His wise
counsel and the expert facilitation skills he brought to strategic planning also helped members identify new possibilities and set new goals.

I have been a member of ACEN for more than 10 years, and I know that the organization has much wisdom and great solutions to offer to the healthcare system and to planners and decision-makers in what can best be described as these “interesting” and often “disruptive” times. I have now agreed to take on the role of Interim Executive Director for ACEN. I am grateful to the Executive Committee for inviting me to assume this exciting role at this point in the re-imaging process. It is a privilege to be able to take an active part in helping this terrific organization to create the structure and position itself to continue bringing the expertise of senior nursing leadership to the forums where important decisions about healthcare will be made.

In closing, the Executive Committee and I want to thank both Mary Ellen and Michael for their efforts on behalf of ACEN. We are grateful for their offers of continuing support and commitment to help with designing the future. We also welcome ideas from you about how ACEN might move forward. We will be reporting on our progress in this column over the coming months, so stay tuned.
ACEN Scholarship

Beginning in 2008, the Academy of Canadian Executive Nurses is pleased to offer two scholarships, each valued at $2,500, to be awarded annually to nurses pursuing graduate studies in nursing at the master's or doctoral level. One scholarship is directed to a candidate studying at the master's level, the other to a doctoral candidate. These scholarships are designed to provide support for graduate students preparing for nursing leadership positions in Canada.

Scholarships are awarded each summer for study beginning in the fall term.

Completed scholarship applications must be received by July 18, 2008.

Criteria for Eligibility and Selection
1. Demonstrated interest in and aptitude for nursing leadership based upon prior nursing experience.
2. Demonstrated commitment to the nursing profession based upon interest and involvement in associations or groups to promote high standards of client care or projects to promote “best practices” in client care.
3. Confirmed admission to a graduate program.
4. If already registered in a program with partial completion of studies, provision of evidence of sound performance in the completed course work within that program.
5. Demonstrated interest in, and commitment to, advancing nursing leadership in Canada.

The completed application should be addressed to:
Academy of Canadian Executive Nurses
ACEN Scholarship
136 Lewis St., Suite 1
Ottawa, ON K2P 0S7

The application should include the following:
1. A covering letter (no more than two pages) that describes:
   • The candidate's career goals/aspirations.
   • The significance of nursing leadership.
2. A detailed curriculum vitae that includes the following information:
   • Applicant's name, address, phone numbers and e-mail address.
   • All post-secondary education.
   • All work experience within and outside nursing. Include information on all clinical, teaching, research and administrative experience, as well as publications, presentations and workshops given.
3. Academic transcripts:
   • If the candidate is undertaking a master's degree, submit undergraduate transcript.
   • If undertaking a doctorate, submit master's transcript.
4. Two recent letters of reference from healthcare employers or supervisors.
   • Please select individuals who can evaluate your job performance, educational aptitude, personal strengths and leadership potential. One letter should be from a nurse in a leadership position.

The completed application must be received no later than July 18, 2008.