

# Big Challenges Meet Big Leadership in 2024

As we begin the year 2024, we do so with some very big challenges that have spilled over from 2023 and, indeed, many years before that. Every day, we are confronted with concerning experiential and research-based evidence about worsening access to healthcare, pervasive racism and widening disparities. Clearly, there is a great deal of work to be done in our healthcare system to support and improve the health of the diverse populations that we serve. Yet, along with the challenges come opportunities to reflect, collaborate, innovate, evaluate and learn. When I look at issues of the *Canadian Journal of Nursing Leadership (CJNL)* from the past 20 years, I am astounded at how some concerns have changed and some have remained the same. Can you believe that there was a time when nursing positions in practice and in education were actually being cut? Of course, many of the big issues we face today were emerging even then, and we have long since passed the tipping point that has put the country into a healthcare crisis.

Crisis is a fertile ground for innovation, and the windows of opportunity for nursing to contribute to addressing these big challenges are wide open. Nursing leadership matters, and the need for all nurses to lean into leadership roles has never been more imperative. At the *CJNL*, we have exciting plans to help contribute to the leadership tsunami that is vital to the present and the future, and I would like to share some of those plans with you.

In the year 2024, we are pleased to be working with a pan-Canadian advisory group of senior leaders chaired by Alexandra Harris. This will provide insights into regional challenges, as well as new strategies and solutions. We are also planning new columns from our chief nursing officer of Canada, Leigh Chapman, and the executive director of the Canadian Nurses Association, Tim Guest. In addition, we will also be partnering with a range of influential nurse leaders across Canada to tap into their insights and strategies. We are excited that our next issue will focus on strengths-based leadership – a topic that is important in our deficit-focused context.

## In This Issue

The research and commentary papers in this issue provide inspiring examples of leadership in action – they are innovative, provocative, relational and collaborative.

The issue begins with Butler et al.'s (2024) descriptive account of the development of a new baccalaureate degree offered as a dual degree between Canada's University of New Brunswick and India's Manipal Academy of Higher Education (MAHE). This program has been developed jointly by the two partners and results in a dual degree for graduates. It intends to increase the MAHE's nursing program capacity and

provide a smoother pathway for graduates who choose to immigrate to Canada. The authors provide an open and frank discussion of the model they have developed, the challenges they faced and the enablers that made it possible to achieve this innovative program model. There are important learnings from their experience for Canada's ever more globally mobile profession.

The next paper by Jeffs et al. (2024) describes the authors' application of the Consolidated Framework for Implementation Research to examine the contextual factors that impacted the collective and local implementation of the Canada-wide Safety Improvement Project Learning Collaborative. The purpose of the project was to improve patient outcomes in diverse healthcare settings across the country and topic areas, including Enhanced Recovery Canada, Measuring and Monitoring of Safety, Medication Safety at Transitions of Care, and Teamwork and Communications: Safety Improvement Project. Analysis of interview and document data from 30 healthcare organizations provides important insights into the implementation of the collaborative. The authors offer advice for healthcare leaders seeking guidance for the co-design, implementation and evaluation of similar improvement work.

Pozzobon and colleagues' (2024) paper discusses safety from the perspective of the response of an organization after a patient safety incident occurs. These authors present the concept of a "just culture," which they identify as an organizational culture that supports reporting and system learning from such occurrences (Pozzobon et al. 2024: 44). Their paper emphasizes the role of leaders and their challenges and opportunities in promoting such a culture at organizational and system levels. They advocate for a focus on learning rather than blaming because it leads to safety improvements.

In the fourth paper of this issue, Andersen et al. (2024) use the PEPPA (participatory, evidenced-based, patient-focused process for advanced practice nursing [APN] role development, implementation, and evaluation) framework (Bryant-Lukosius and Dicenso 2004: 531) to present two case studies that describe the implementation of two novel CNS roles – one in regional primary care and one in clinical capacity-building in serious illness conversations. Their paper illuminates novel roles for this APN position.

The leadership commentary written by Seymour et al. (2024) that closes this issue was originally published in *HealthcarePapers* (Volume 21, No. 2). We reprint it here because their reflections on the ongoing pervasive structural racism in nursing and the healthcare system are powerful and need to be heard and acted on by all nurse leaders. Their message is clear about what needs to be done and how. I encourage you to read their commentary and leave you with a quote:

Many nurses would agree that dismantling power systems (education, practice, policy and research) is the ideal approach to work toward decolonizing forces that maintain Indigenous health inequities. Nurses must acknowledge that our professional discipline exists as a key factor in perpetuating colonization and facilitating the subjugation and exploi-

tation of Indigenous Peoples' knowledge systems. From this point onward, nurses must make the commitment to act as liberating forces mediating suffering associated with the domination and oppression of Indigenous health knowledge. However, since epistemic violence embedded in colonial caring practices limits the possibilities of communicating and being heard, these systems of power must be critically examined through self-interrogation of one's assumptions, interests and biases. This includes challenging the continued exclusion of experiential knowledge of Indigenous People that profoundly impacts their health and longevity. (Seymour et al. 2024: 73)

The year 2024 will no doubt bring many challenges and opportunities, some of them unforeseen. I look forward to travelling the journey of strengthening our collective leadership together with this and the upcoming issues of the journal.

*Ruth Martin-Misener, NP, PhD, FAAN, FCAN*  
*Director and Professor, School of Nursing*  
*Assistant Dean, Research, Faculty of Health*  
*Dalhousie University*  
*Affiliate Scientist, Nova Scotia Health*  
*Affiliate Scientist, Maritime SPOR Support Unit*  
*Halifax, NS*  
*Co-Director, Canadian Centre for Advanced Practice Nursing Research*  
*Hamilton, ON*

## References

- Andersen, T., S. Paul-Jost, A. Thomas, S. Miyashita, V. Kennedy and A. Lavigne. 2024. A Compendium of Clinical Nurse Specialist Roles in a Canadian Health Authority. *Canadian Journal of Nursing Leadership* 36(3): 56–69. doi:10.12927/hcpap.2023.27288.
- Bryant-Lukosius, D. and A. Dicenso. 2004. A Framework for the Introduction and Evaluation of Advanced Practice Nursing Roles. *Journal of Advanced Nursing* 48(5): 530–40. doi:10.1111/j.1365-2648.2004.03235.x.
- Butler, L., K. Ursel, J.A. Noronha, J. Webster, L.S. George and S. VanSlyke. 2024. Creating A Dual Degree: Nursing Education Goes Global. *Canadian Journal of Nursing Leadership* 36(3): 8–27. doi:10.12927/hcpap.2023.27291.
- Jeffs, L., R.L. Zeng, F. Bruno, N. Schonewille, M. Oliveira, K. Kinder et al. 2024. Insights on a National Safety Improvement Learning Collaborative: Using the Consolidated Framework for Implementation Research. *Canadian Journal of Nursing Leadership* 36(3): 28–43. doi:10.12927/hcpap.2023.27290.
- Pozzobon, L.D., K. Sears and A. Zuk. 2024. Leaders' Role in Fostering a Just Culture. *Canadian Journal of Nursing Leadership* 36(3): 44–55. doi:10.12927/hcpap.2023.27789.
- Seymour, C., L. Bourque Bearskin, L. Wazni, R. Melnyk, N.R. Hunter Porter and M. Padley. 2023. Moving Beyond Ignorance and Epistemic Violence: Indigenous Health Nurses' Response to Systems Transformation. *Canadian Journal of Nursing Leadership* 36(3): 70–77. doi:10.12927/cjnl.2024.27287.