

Preparing Navy Nurses and Other Junior Officer Health Professionals in the U.S. Navy Reserve to be Ready Now, Anytime, Anywhere

A Leadership Development Project

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Abstract

The U.S. Navy has historically developed leadership competencies as cornerstones for officer training curriculums. As the Navy revamped the training requirements for personnel at the end of 2012, it indicated that all officers, regardless of rank, specialty, or community, were to attend a Navy leadership course every five years (Henson, 2013). In keeping with Navy tradition, a strong emphasis has been placed on leadership development within the Navy Nurse Corps.

Consequently, to strengthen and sustain the Navy Nurse Corps, a group of Navy nurse executives developed a 10-year strategic plan to address eight competencies that Navy Nurse Corps officers should possess at all levels of leadership. To address these competencies and ensure Navy nurses effectively developed these skills, a leadership development pilot project was conducted with 24 Navy nurses and other junior officer health professionals (JOHPs) in two Navy Reserve medical detachments. The purpose of the project was to increase confidence in three recommended leadership skills among the JOHPs by using in-tandem,

online leadership development training resources, and monthly face-to-face group coaching sessions. The project had two goals: (a) provide and evaluate the impact on developing leadership skills through the use of face-to-face group coaching sessions and (b) increase utilization of online military leadership development resources.

A self-assessment survey given to the JOHPs pre- and post-project displayed an improvement in two of the three competencies and an increase in the utilization of online leadership development training resources. The implementation process and outcomes of this pilot project provides insight for future leadership trainings being developed for JOHPs in the Navy Reserve.

The U.S. Navy Reserve Nurse Corps (USNR-NC) provides strategic depth and operational readiness as supplemental manpower in the execution of the U.S. Department of the Navy missions and requirements. Composed of an estimated 1,278 nurses, the USNR-NC accounts for nearly 31% of the total Navy nursing force (U.S. Navy Nurse Corps, 2018). While a wealth of research exists exploring nursing leadership traits, there is little empirical research examining this phenomenon in the U.S. Navy as it relates to nurses who are junior officers in the Navy Reserve.

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As commissioned officers, nurses in the USNR-NC are expected to possess strong leadership skills and proficiency in core competencies that enable them to serve in management and leadership roles in complex Navy environments. Evidence suggests that an absence of leadership competence could prove detrimental to Navy missions (Palarca, Johnson, Mangelsdorff, & Finstuen, 2008). Historically, weak leadership skills have been shown to have a direct impact on the retention and recruitment of the Navy workforce as well as morale and safety (Gahol, 2005; Swearingen, 2009). As such, it is vital that junior officers in the USNR-NC be adequately prepared to lead and train other emerging leaders and that they are confident in core leadership competencies utilized while being deployed to a variety of operational environments.

A strong emphasis has been placed on leadership development within the USNR-NC (Palarca et al., 2008). To strengthen and sustain the Navy Nurse Corps and to align the corps' goals with the overall Navy goal of leadership competence, a group of Navy nurse executives developed a 10-year strategic plan, addressing eight core competencies that Navy Nurse Corps officers, both active duty and Navy Reserve, should possess at all levels of leadership (Swearingen, 2009). These competencies included communication skills, leadership abilities, professional development, clinical proficiency, personal growth, knowledge of regulatory guidelines, management abilities, and operational and deployment readiness (Swearingen, 2009).

During an informal roundtable discussion on a monthly training weekend, junior officers from a unit in the USNR-NC and other health professionals reported a lack of confidence in several recommended leadership competencies and expressed interest in increasing leadership proficiencies. Additionally, when asked if they were aware of recommended Navy leadership competencies, 29% ($n = 7$) of the junior officer health professionals (JOHPs) reported they were aware, and 71% ($n = 17$) reported they were unaware of the recommended competencies. A lack of awareness of essential leadership competencies could limit motivation to develop and strengthen these necessary skills. The officers also reported the Navy Knowledge Online (NKO) website, which holds a wealth of leadership development resources, to be somewhat useful (40%; $n = 8$) or not useful (55%; $n = 11$) in helping to develop their leadership skills.

To address these deficiencies, a five-month leadership development training program was piloted for a small group of USNR-NC nurses and other JOHPs. The training focused on three recommended competencies: communication skills, leadership abilities, and professional development. The project purpose was to increase confidence among USNR-NC nurses and other JOHPs in the above-mentioned leadership competencies, using monthly coaching sessions and online learning resources. The project had two goals: (a) provide and evaluate the impact on developing leadership skills through the use of face-to-face group coaching sessions and (b) increase utilization of online military leadership development re-



sources. This article discusses the implementation process and key findings of the leadership training undertaken by this piloted group.

Review of the Literature

To determine best strategies to promote leadership competence, a comprehensive literature review on leadership development was completed. Evidence from the review supports the use of formal strategies such as having structured educational courses and career pathways in place within an organization, as it is not enough to assume that years of experience equates to competent leadership (Gahol, 2005; Huston, 2008; Raimondo, Pierce, & Bruzek-Kohler, 2008). In addition, the literature suggests that within the constructs of a training framework or a structured program, learned leadership skills must then be applied using real-time situations, role-playing, case studies, or simulations to provide opportunities to practice these new skills (MacPhee, Skelt-on-Green, Bouthillette, & Suruaprakash, 2012; Patterson, Henderson, & Trivella, 2010; Patton et al., 2013). Evidence also supports access to role models, coaching, and mentoring to help nurses navigate through their career choices (Patterson et al., 2010). The aforementioned strategies have been found to be effective in increasing competence and developing leadership skills (Liu, 2010).

In addition, online learning was found to be another effective strategy to build leadership knowledge and skills. (Liu, 2010). A key benefit of the online learning platform is it allows for frequent collaboration with peers within a course compared to face-to-face courses, provides additional opportunities to communicate outside of a classroom setting, increases flexibility, and presents opportunities for self-paced review of content (Liu, Chang Chen, Sun, Wible, & Kuo, 2010).

Social media outlets such as YouTube, blogs, Facebook, wikis, and bulletin boards have also become popular avenues to disseminate information because they provide opportunities for social engagement, rapid feedback, direct communication, and relationship building (Liu, 2010). These platforms also provide flexible learning and visual aids to better understand content and addresses different learning styles (Liu, 2010). Incorporating the use of technology and social media into leadership development can promote a more resourceful and enriched learning experience.

Overall, the evidence recommended leadership development includes systematic, reliable, lifelong strategies that are engaging and provide participants with an opportunity to interact with their peers and leaders and apply lessons learned to real-life experiences (Gahol, 2005; Liu et al., 2010; MacPhee et al., 2012). Using this evidence as a guide, a bundled approach was created for project implementation utilizing face-to-face group coaching sessions and online learning through the learning management system Blackboard Learn by Blackboard Inc.



This pilot project evaluated how face-to-face group coaching sessions and online learning impacted confidence in leadership development among JOHPs in the Navy Reserve. The project addressed three leadership competencies: communication skills, leadership abilities, and professional development. The three competencies of focus for this project, selected in collaboration with both active and reserve senior nurse executives, are defined below:

Communication skills are the abilities to communicate in all forms and at all levels within the organization; to actively listen; and to effectively use writing, conflict resolution, presentation, and interpersonal communication skills (Palarca et al., 2008).

Leadership abilities are the competencies to “lead and mentor junior personnel, build teams, identify a mission and the best way to meet that mission, maintain the utmost integrity, and achieve the trust of all members inside and outside of the organization” (Palarca et al., 2008, p. 224).

Professional development is learning to influence people, processes, and structures to bring about change; gaining morale-building, motivational, staff development, counseling, coaching, and educator skills; pursuing lifelong continuing education; creating an individual development plan; and obtaining advanced degrees/certifications (Palarca et al., 2008).

Setting/Sample

The project was implemented over a five-month period during fiscal years 2015 and 2016 at Joint Base Andrews, Maryland, where two Navy Reserve medical detachments trained monthly. To make the project statistically significant, a sample size of 50 participants was needed; however, the small number of nurses and junior officers in the two units precluded achieving this sample size. Invitations were sent via email or in person to all 30 junior officers assigned to the two units, and 24 JOHPs agreed to participate. The participants in this project were U.S. Navy junior officers in health professions attached to Expeditionary Medical Facility Bethesda. More specifically, the participants were connected to Detachment P or Detachment Y.

Method and Design

Prior to the start of the project, the Department of Research Programs at Walter Reed National Medical Center determined that the project was Institutional Review Board exempt and approval was given to begin implementation. Additional permissions were obtained from the senior nurse executive (SNE) from the Navy Reserve medical units and officers in charge from both of the medical detach-



ments. An SNE has a rank of captain, or O6 (pay grade officer 6), in the Navy and possesses extensive military and nursing leadership experience. SNEs oversee multiple nursing detachments within a Navy region. An officer in charge typically has a rank of lieutenant (O3) or higher and is responsible for one detachment within a designated Navy region.

The original project was designed for Navy Reserve nurses, but due to a small sample size of available nurses and the relevance of leadership competencies to all naval officers (as it relates to the overall Navy mission of leadership development), all junior officers working in a health profession were invited to participate in the training. Junior officers comprise ranks of ensign (O1), lieutenant junior grade (O2), lieutenant (O3), and lieutenant commander (O4).

The project was a mixed method of both quantitative and qualitative analyses of a pilot project, which used a convenience sample of 24 JOHPs. A paired *t*-test was used to compare the means from the preintervention and postintervention questionnaires for both the face-to-face group-coaching sessions and online learning modules. The group-coaching session questionnaires consisted of 20 self-assessment questions and the online-learning module questionnaires consisted of 15 self-assessment questions. Questionnaires were completed by the JOHPs during the first coaching session, collecting demographic information such as age, military rank, and years of military and leadership experience. JOHPs were also asked to appraise their leadership skills, knowledge, and abilities based on the three competencies: communication skills, leadership abilities, and professional development prior to the first coaching session (see Appendix A for the pre-coaching self-assessment questionnaire).

Questions for the self-assessment surveys were derived from the 2008 Navy Nurse Leadership Development Research Study (Palarca et al., 2008). To protect individual participants' confidentiality, information obtained from questionnaires and self-assessments were disidentified. During the first coaching session, JOHPs selected a self-generated identification code, which they used throughout the training. All surveys were administered online via computer or smartphone, and the data collected via Qualtrics Survey Software was placed on a secured database.

Face-to-face group-coaching sessions. The project consisted of five monthly, face-to-face, group-coaching sessions. Each session focused on a different competency. The first session provided an overview of the project and oriented JOHPs to the online training modules and resources. Prior to attending the four remaining face-to-face group-coaching sessions, JOHPs were asked to complete the online training module correlating to the competency being addressed during the session. The second through fourth sessions included group coaching/training sessions with subject-matter experts who provided short lectures and integrated case studies and role-playing into the training, addressing one of the three leadership competencies. At the end of each online module and coaching session, the JOHPs



had the opportunity to evaluate the session and its impact on their leadership competence. The fifth and final session was the wrap-up session, which brought all of the competencies together in a final project summary. To ensure consistency for each session, coaches were given learning objectives and key content to address during their respective sessions. A more detailed framework for each coaching session is listed in Appendix B.

A postintervention survey contained questions that assessed the JOHPs' level of confidence in communication skills, leadership abilities, and professional development. Pre- and postintervention survey questions are listed in Appendix A and Appendix C. To determine the impact of the coaching sessions on leadership development, a paired *t*-test was used to compare mean scores between each pre- and post-coaching session survey.

Online leadership development course. Prior to the start of the project, an online leadership development course was constructed through Blackboard Learn. The course consisted of five modules that coincided with each of the five face-to-face group-coaching sessions. To prepare for the coaching sessions, JOHPs were requested to read and review the content in the corresponding online module. JOHPs had continuous access to the Navy Leadership Development website including times they were not completing their monthly on base training weekend. The website was a secured course site, exclusive to participants in the project. Participants could access the site remotely through internet access with their username and password. Content for each module on the website provided JOHPs with leadership information specifically chosen from military and leadership resources and relevant to the competency being addressed during the monthly coaching sessions. JOHPs were required to use their military-issued Common Access Card for links directed to restricted military sites such as NKO and Army Knowledge Online (AKO). Website modules were composed of military leadership tools and activities that focused on communication skills, leadership abilities, and professional development. The leadership training was presented in a variety of modalities including stories, interactive videos, and simulations from the NKO and AKO websites, as well as leadership development content from YouTube, Ted Talks, blog posts, scholarly articles, and discussion boards.

In addition to evaluating the effectiveness of the coaching sessions, which addressed the three leadership competencies, JOHPs were also asked to evaluate the effectiveness of the online-training modules to improve their communication skills, leadership abilities, and professional development. The online modules were designed to work in tandem with the coaching sessions to increase confidence in leadership development for the specified competencies. Five questions were asked for each online module using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Each survey had a total score of 25 possible points. Sample questions for each post-module online survey are included in Appendix D.



Measurements and Data Analysis

Several techniques were used to evaluate the effectiveness of the pilot project's ability to increase utilization of online leadership training resources including (a) comparing differences in mean percentages of participants' pre- and post-coaching sessions through a paired *t*-test, (b) using Blackboard Learn web analytics software to track frequency of usage for the leadership website, and (c) collecting postmodule surveys and project evaluations from online using the Qualtrics Survey software by Qualtrics LLC. In total, there were eight surveys distributed to JOHPs, five in-person surveys and three online postmodule surveys.

Results

Overall, as shown in Table 1 (on page 38–39), 24 junior officers participated in the project with the majority being Navy nurses ($n = 18$). Approximately 25% of the sample population were non-nurse health professionals, including medical doctors ($n = 2$), a physician assistant ($n = 1$), health care administrators ($n = 2$), and a psychologist ($n = 1$). Table 1 displays baseline demographic data for participants in the project. The majority of the sample had less than six years of experience as commissioned officers (75%) and more than half of the participants were lieutenants, who made up 54% of the sample population.

Coaching sessions. There was no significant difference in the mean scores in pre-versus post-self-assessment surveys after the communication skills coaching session ($p = .829$). However, results for both the leadership ($p = .007$) and professional development ($p = 0.20$) coaching sessions did have an increase in mean scores after the two trainings with $p < .05$. Table 2 (on page 40) displays the results of the preintervention and postintervention scores.

Online leadership development modules through Blackboard. Utilization of the online website varied throughout the project. Module one had 100% participation with all 24 JOHPs accessing the Navy leadership resources. Usage for modules two through four had a total of 15 participants, or 63% of the sample. The most common site visited was the discussion forum, which had a total of 18 JOHPs (75%) posting a combined total of 57 posts in the forum during the five-month project implementation.

Response rates for each of the modules were based on the 14 JOHPs who accessed the modules consistently throughout the project and completed the online postmodule surveys. Table 3 (on page 41) shows the response rates for each of the surveys and Table 4 (on page 41) provides the mean scores for each of the modules. Overall, more than 85% of the selected survey answers by JOHPs were “agree” or “strongly agree” when asked if content provided within the modules was effective leadership development resources.



Table 1.
Junior Officer Health Professionals Participant Demographics

Variables	Percentages %
Age (years)	<i>n</i> = 24
18-29	6(25)
30-40	14(58)
41+	4(16)
Gender	
M (5)	5(21)
F (19)	19(79)
Current rank	
Ensign (01)	1(4)
Lieutenant Junior Grade (02)	7(29)
Lieutenant (03)	13(54)
Lieutenant Commander (04)	3(13)
Commissioned officer experience (years)	
1-3	13(54)
4-6	5(21)
7-10	3(13)
11-15	1(4)
16+	2(8)
Health care experience (years)	
1-5	8(33)
6-10	10(42)
11-15	2(8)
16-20	2(8)
21+	2(8)

* *n* = sample size of project participants

** Others included: clinical psychologists, health care administrators, medical doctors, and physician assistants

Weekends were the most common time for JOHPs to access the website with 88% of utilization occurring during reserve weekends on Saturday (45.24%) and Sunday (42.86%). Table 5 (on page 42) describes the number of JOHPs who participated in each of the modules and forums. Monthly participation online ranged from 100%

Table 1.*Junior Officer Health Professionals Participant Demographics (continued)*

Variables	Percentages %
Current nursing specialty	
Medical/surgical	6(25)
Obstetrics and gynecology	1(4)
Critical care	7(29)
Midwifery	1(4)
Perioperative	1(4)
Emergency	2(8)
**Others	6(25)
Frequency accessing Navy Knowledge Online website (NKO)	
Weekly	1(4)
Monthly	6(25)
Several times a year	5(21)
Rarely	6(25)
Never	6(25)
Usefulness of NKO website	
Extremely useful	1(5)
Somewhat useful	8(40)
Not useful	11(55)

* *n* = sample size of project participants

** Others included: clinical psychologists, health care administrators, medical doctors, and physician assistants

during the first session to 25% during the last session. Blackboard statistics tracking collected the number of resources used in the online modules. Month one had 62 hits on the training website (17%), month two had 12 hits (3%), month three had 109 hits (42%), month four had 214 hits (58%), and month five had 39 hits (11%). A “hit” is tracked each time a request is sent to Blackboard Learn to access content or resources on the website. In total, the five-month training had 369 hits from the 24 JOHPs for the online content and training resources.

Final session (session five). During the fifth month and final session of the training, JOHPs were asked open-ended questions to evaluate the overall training. One prompt was, “Please rate how the overall 5-month leadership training has helped to increase your confidence in the areas of communication skills, professional development and leadership abilities.” The JOHPs reported the following results: Very Effective—2 (33%), Effective—3 (50%), Somewhat Effective—0 (0%), Neutral—0 (0%), Somewhat



Table 2.*Junior Officer Health Professionals Leadership Development Project Self-Assessment Outcomes*

Competency coaching sessions	Pre-scores mean	<i>n</i>	Post-scores mean	<i>n</i>	* <i>p</i> -value (<i>t</i>)
Communication skills	29.42	12	29.92	12	.829
Leadership abilities	22.50	14	29.29	14	.007*
Professional development	22.13	8	27.25	8	.020*

Total points possible: communication = 40, leadership = 30, professional development = 30,

(*t*) = paired *t*-test

* *p* < .05

Ineffective—1 (17%), Ineffective-0 (0%), and Very Ineffective—0 (0%). Out of a total of one to seven choices on a Likert scale, the mean score for this prompt was 5.83 *SD* (1.47). These results suggest that for those who responded to the prompt, most believed the training was effective in increasing leadership competence.

JOHPs also reported that through the leadership training, they gained more specific ideas they can utilize in their professional civilian/military roles. Two (33%) JOHPs reported they learned a new or advanced skill to utilize in their civilian/military role. Three (50%) JOHPs stated the training may help them do a better job in their civilian and military roles. Four (67%) JOHPs reported being able to update their military skills, and zero participants reported they did not see the impact of the training course on their job.

In addition to the multiple-choice questions, JOHPs were asked open-ended questions, and given the opportunity to provide written feedback on the overall leadership development training project. Written answers provided additional insight and supplemented multiple-choice responses. See Appendix E for responses.

Analysis and Discussion

The purpose of this leadership development pilot project was to increase confidence in developing three leadership competencies among JOHPs in the Navy Reserve. The

Table 3.
Online Response Rate

Competency	Included <i>n</i> %	Excluded* <i>n</i> %
Professional development	11 78.6%	3 21.4%
Communication	9 64.3%	5 35.7%
Leadership	8 57.1%	6 42.9%

* Excluded cases were junior officer health professionals who did not answer the online surveys based on a sample size of 14 participants

Table 4.
Online Blackboard Module Scores

Communication	Mean	<i>SD</i>	<i>n</i>
Professional development	21.3 6	11	2.69
Communication	21.3 3	9	2.45
Leadership	21.7 5	8	2.44

Total points possible in module survey score = 25 points

five-month training addressed three out of eight recommended leadership competencies: (a) communication skills, (b) leadership abilities, and (c) professional development.

Findings from this pilot project suggest the use of coaching sessions coupled with online learning can positively contribute to improving JOHP's competence in professional development and leadership skills. The sessions did not seem to positively contribute to increasing competence in communication skills. This may be attributed to the higher number of skills and content addressed during the two-hour session for communication, which had eight skills, in comparison to the other two competencies, which



both had six skills. The communication subject-matter expert reported it was difficult to cover all eight of the skills in detail within the two-hour time frame.

JOHPs who accessed the online modules and completed the surveys reported they found the online leadership resources useful. They also believed the content in the online modules could help improve their confidence in the three competencies addressed during the project. During the initial self-assessment survey, 29% of JOHPs reported they accessed the NKO site weekly or monthly. The remaining 71% of JOHPs reported they accessed leadership resources on the NKO training site several times a year, rarely, or never. At the completion of the project, 56% of the JOHPs were found to have accessed the website on average at least once a month. The discussion forum was frequently used on the site, which may indicate that JOHPs appreciated the opportunity to engage in thoughtful discussions online.

Over the course of the training, participation fluctuated as JOHPs transitioned in and out of the two medical detachments. Consequently, this impacted mean scores for both goals of the project. There were numerous reasons for the recidivism including

Table 5.
Online Leadership Development Resource Utilization

Session participation		
Monthly coaching	<i>n</i>	%*
Project overview (Module 1)	24	100
Communication (Module 2)	13	54
Leadership (Module 3)	11	46
Professional development (Module 4)	13	54
Wrap-up session (Module 5)	6	25
Discussion forum	<i>n</i>	%
Project overview (Module 1)	7	29
Communication (Module 2)	13	54
Leadership (Module 3)	13	54
Professional development (Module 4)	18	75
Wrap-up session (Module 5)	6	25

* All percentages were based on the initial sample size of 24 junior officers



mobilizing for deployment ($n = 2$), transferring to other units ($n = 2$), relocating out of state due to career or family obligations ($n = 3$), and transitioning into the Inactive Ready Reserve ($n = 3$). Attendance also fluctuated as JOHPs completed their two-week annual training requirements, which overlapped with monthly training sessions.

Despite the small sample size preventing generalizability to the entire JOHPs, important lessons can be learned from this leadership development project. One important observation was that providing designated time for USNR-NC and other JOHPs to access and review the online leadership resources, during the reserve training weekend, increased the level of participation in comparison to the participants accessing the content outside of the training weekend. The original intent of the training was for JOHPs to review the online content prior to training weekends, in preparation for the coaching sessions. During the second session for both units, there was a noticeable decline in website utilization despite several email reminders requesting that JOHPs review the modules. The JOHPs reported difficulty accessing the site due to forgotten user identifications or passwords and time constraints from other civilian and military obligations, which impacted the use of online resources. Some officers requested additional time be given during the reserve weekend to allow them to review the content.

The remaining sessions were adjusted to allow time prior to the coaching sessions for JOHPs to review online content during the training weekend. After this adjustment, the most frequent time the online content was accessed was on drill weekends during the designated training time frames. Additionally, the fourth month had the highest number of hits on the website. One probable reason for this was that more time was dedicated during that month to the coaching sessions in comparison to other months. Additionally, providing time during the reserve weekend to access the online material allowed the project facilitator to troubleshoot and resolve online access issues for JOHPs.

Recommendations

Based on results of this project, there are several key recommendations that could help improve participation in and results of future training programs for reservists. They include the following:

- ◆ Designate time for the majority of training to occur during the monthly drill weekends including any online coursework that is required.
- ◆ Allow ample, uninterrupted time during the training day for JOHPs to complete coaching sessions.
- ◆ Offer coaching sessions several times throughout the project to adjust for absences.
- ◆ Record coaching sessions and place them on the leadership development website for JOHPs to access on demand at a later time; this may be an effective strategy to ensure important content is available for JOHPs who are unable to attend the face-to-face sessions.



- ◆ Allow flexibility in the training schedule. Roles and responsibilities in the Navy are continuously evolving, and it is essential for naval officers to embrace the changing dynamics. The anticipated completion time frame for the training may need to be adjusted as military demands and operational requirements fluctuate.
- ◆ In addition to self-assessments, a 360-feedback evaluation would be an insightful strategy to evaluate leadership competencies.

Limitations

Due to time constraints, this training addressed three of the eight recommended leadership competencies for the pilot project. Further research is recommended to address the other five competencies and how best to develop leadership skills due to the transient nature of JOHP reservists. It may also be beneficial to perform a similar project with a larger sample size and include more Navy Reserve medical units to allow for more generalizability of the results. In addition, it could also prove useful to provide the training over a longer time frame to allow adjustments for the influx of junior officers and more participation in Navy leadership training courses.

Summary and Conclusion

The purpose of this project was to increase confidence among JOHPs in developing three recommended leadership skills using monthly face-to-face group coaching sessions and online learning resources. Based on the pre- and postintervention self-assessment questionnaires, the results from this pilot project showed improved confidence in two of the three competencies and increased utilization of online Navy leadership training resources.

Consequently, these project results suggest that coaching sessions and online learning using a collaborative approach may positively impact leadership competency development among junior officer health professionals in the U.S. Navy Reserve. The results also support the premise that it is beneficial to allocate time during training weekends for junior officers to prepare, learn, and practice leadership skills in collaboration with their peers. JOHPs also appreciate the ability to interact with senior officers through organized mentoring opportunities during training sessions.

Evidence from studies on leadership development found that effective strategies included mentoring, coaching, teaching, role playing, case studies, and e-learning (MacPhee et al., 2012; Patterson et al., 2010; Patton et al., 2013). The evidence also proposed that strategies be systematic, reliable, and lifelong; consequently, many of the suggested strategies were incorporated into this pilot project (Liu et



al., 2010; Palarca et al., 2008; Patterson et al., 2010; Raimondo, Pierce, & Bruzek-Kohler, 2008). The Navy Reserve prides itself on developing exceptional leaders. Continued support and research on innovative leadership development strategies is an important way to ensure junior officer health professionals in the Navy Reserve are “Ready Now. Anytime. Anywhere.” ❧

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Appendix A.

Pre-Coaching Self-Assessment Questionnaire

Instrument 1. Pre-coaching session self-assessment questions

**Please describe your level of confidence in the following *skills* using the ratings below.
Circle your selection:**

1. Strongly agree 2. Agree 3. Neutral 4. Disagree 5. Strongly disagree

Communication

1. I am confident in my ability to communicate through writing. [1 2 3 4 5]
2. I am confident in my ability to communicate through speaking. [1 2 3 4 5]
3. I am confident in my ability to communicate through presentation. [1 2 3 4 5]
4. I am confident in my ability to communicate with junior personnel in the Navy. [1 2 3 4 5]
5. I am confident in my ability to communicate with peers in the Navy. [1 2 3 4 5]
6. I am confident in my ability to communicate with senior officers in the Navy. [1 2 3 4 5]
7. I am confident in my ability to actively listen. [1 2 3 4 5]
8. I am confident in my ability to manage conflict. [1 2 3 4 5]

Leadership

1. I am confident in my ability to lead junior personnel. [1 2 3 4 5]
2. I am confident in my ability to build and work within a team. [1 2 3 4 5]
3. I am confident in my ability to communicate the mission to others effectively. [1 2 3 4 5]
4. I am confident in my ability to meet the mission. [1 2 3 4 5]
5. I am confident in my ability to maintain the utmost integrity: has trust of all members inside the U.S. Navy.
[1 2 3 4 5]
6. I am confident in my ability to maintain the utmost integrity: has trust of entities outside of the U.S. Navy.
[1 2 3 4 5]

Professional development

1. I am confident in my ability to influence people, processes, and structures to bring about change.
[1 2 3 4 5]
2. I am confident in my ability to build morale and motivate others. [1 2 3 4 5]
3. I am confident in my ability to develop individual staff. [1 2 3 4 5]
4. I am confident in my ability to educate staff. [1 2 3 4 5]
5. I am confident in my ability to pursue lifelong continuing education. [1 2 3 4 5]
6. I am confident in my ability to create an individualized development plan. [1 2 3 4 5]



Appendix B.
Monthly Coaching Session Framework

Coaching session	Coaching session activities
<p>Month #1 <i>Project Introduction</i> Presented by project manager (PM)</p>	<ul style="list-style-type: none"> A. JOHPs will be introduced to the leadership development project (15 min) B. Informed consent will be obtained (10 min) C. Leadership self-assessments will be completed during the session by JOHPs and results discussed (20 min) D. Instruction: content will discuss 8 Navy JOHPs competencies (30 minutes) E. Activity: roundtable discussion on JOHPs concerns and leadership needs (30–45 minutes) F. Demonstration of how to use and access leadership development website, electronic training modules and leadership toolkit will be discussed (20 min) G. JOHPs will be instructed to complete the online training module on leadership prior to the next coaching session H. One week prior to next coaching session an email will be sent to all participants reminding them to complete the online module for leadership
<p>Month#2 <i>Communication</i> Presented by subject matter expert (SME)</p>	<ul style="list-style-type: none"> A. JOHPs will complete online training module on leadership and access pertinent tools in electronic toolkit prior to session B. Coaching session will be facilitated by expert in leadership development C. Activities: <ul style="list-style-type: none"> • 30–45 minute presentation by leadership development subject matter expert • 30-minute role play/case based problem solving activity • Self-reflection activity JOHPs will create leadership development goals D. Peer networking post coaching session through online discussion forum on website E. Discussion question related to leadership will be posted on website for JOHPs to answer and discuss after session F. JOHPs will be instructed to complete the online training module on communication prior to the next coaching session G. One week prior to next coaching session an email will be sent to all participants reminding them to complete the online module for communication



Appendix B.

Monthly Coaching Session Framework (continued)

Coaching session	Coaching session activities
<p>Month #3 <i>Leadership</i> Presented by SME</p>	<p>A. JOHPs will complete online training module on communication and access pertinent tools in electronic toolkit prior to session</p> <p>B. Coaching session will be facilitated by subject matter expert in communication development</p> <p>C. Activities:</p> <ul style="list-style-type: none"> • 30-45 minute presentation by communications coach • 30-minute role play/case-based problem-solving activity on communication • Creation of communication goals <p>D. Peer networking post coaching session through online discussion forum</p> <p>E. Discussion questions related to communication skills will be placed on website for JOHPs to answer and discuss after session</p> <p>F. JOHPs will be instructed to complete the online training module on personal growth and professional development prior to the next coaching session</p> <p>G. One week prior to next coaching session an email will be sent to all participants reminding them to complete the online module for professional development</p>
<p>Month #4 <i>Professional Development</i> Presented by SME</p>	<p>A. JOHPs will complete an online training module on professional development and access pertinent tools in the electronic toolkit prior to the coaching session</p> <p>B. Coaching session will be facilitated by subject matter expert in professional development</p> <p>C. Activities: 30-45 minute presentation by professional development coach subject matter expert</p> <ul style="list-style-type: none"> • 30-minute role play/scenario facilitated by coach and co-investigator • Creation of professional goals <p>D. Peer networking post coaching session through online discussion forum</p> <p>E. Discussion question related to professional development will be placed on website for JOHPs to answer and discuss after session</p>



Appendix B.*Monthly Coaching Session Framework (continued)*

Coaching session	Coaching session activities
<p>Month #5 <i>Wrap-up session</i> Facilitated by PM</p>	<ul style="list-style-type: none"> A. Question and answer panel discussion with senior nursing officers and chief petty officers facilitated by co-investigator B. Review of competencies discussed over past 4 months and brief overview of the additional competencies C. Introduction to additional leadership development resources will be provided (i.e., mentoring program, leadership training opportunities, additional leadership development website) D. Conduct postintervention self-assessment evaluation E. Distribute post-project evaluation to all participants



Appendix C.

Post-Coaching Self-Assessment Questionnaire

Instrument 2. Post-coaching session self-assessment questions

Please describe your level of confidence in the following *skills* using the ratings below.

Circle your selection:

1. Strongly agree 2. Agree 3. Neutral 4. Disagree 5. Strongly disagree

Communication

1. This coaching session increased my confidence in my ability to communicate through writing.
[1 2 3 4 5]
2. This coaching session increased my confidence in my ability to communicate through speaking.
[1 2 3 4 5]
3. This coaching session increased my confidence in my ability to communicate through presentation.
[1 2 3 4 5]
4. This coaching session increased my confidence in my ability to communicate with junior personnel in the Navy.
[1 2 3 4 5]
5. This coaching session increased my confidence in my ability to communicate with peers in the Navy.
[1 2 3 4 5]
6. This coaching session increased my confidence in my ability to communicate with senior officers in the Navy.
[1 2 3 4 5]
7. This coaching session increased my confidence in my ability to actively listen. [1 2 3 4 5]
8. This coaching session increased my confidence in my ability to manage conflict. [1 2 3 4 5]
9. This coaching/training experience will be useful in my work. [1 2 3 4 5]
10. The topics covered in this coaching session were relevant to me. [1 2 3 4 5]

Leadership

1. This coaching session increased my confidence in my ability to lead junior personnel.
[1 2 3 4 5]
2. This coaching session increased my confidence in my ability to build and work within a team.
[1 2 3 4 5]
3. This coaching session increased my confidence in my ability to communicate the mission effectively.
[1 2 3 4 5]
4. This coaching session increased my confidence in my ability to meet the mission. [1 2 3 4 5]
5. This coaching session increased my confidence in my ability to maintain the utmost integrity: has trust of all members inside of the U.S. Navy. [1 2 3 4 5]
6. This coaching session increased my confidence in my ability to maintain the utmost integrity: has trust of all members outside of the U.S. Navy. [1 2 3 4 5]
7. This coaching/training experience will be useful in my work. [1 2 3 4 5]
8. The topics covered in this coaching session were relevant to me. [1 2 3 4 5]



Appendix C.*Post-Coaching Self-Assessment Questionnaire (continued)*

Instrument 2. Post-coaching session self-assessment questions
<p>Please describe your level of confidence in the following <i>skills</i> using the ratings below. Circle your selection:</p> <p>1. Strongly agree 2. Agree 3. Neutral 4. Disagree 5. Strongly disagree</p>
<p>Professional development</p> <ol style="list-style-type: none"> 1. This coaching session increased my confidence in my ability to influence people, processes, and structures to bring about change. [1 2 3 4 5] 2. This coaching session increased my confidence in my ability to build morale and motivate others. [1 2 3 4 5] 3. This coaching session increased my confidence in my ability to develop individual staff. [1 2 3 4 5] 4. This coaching session increased my confidence in my ability to educate individual staff. [1 2 3 4 5] 5. This coaching session increased my confidence in my ability to pursue life-long continuing education. [1 2 3 4 5] 6. This coaching session increased my confidence in my ability to create an individualized development plan. [1 2 3 4 5] 7. This coaching/training experience will be useful in my work. [1 2 3 4 5] 8. The topics covered in this coaching/training session were relevant to me. [1 2 3 4 5]



Appendix D.
Online Module Questionnaire

<p>Instrument 3. Online module evaluation questions</p>
<p>Please describe your level of confidence in the following <i>skills</i> using the ratings below. Circle your selection:</p> <p>1. Strongly agree 2. Agree 3. Neutral 4. Disagree 5. Strongly disagree</p>
<p>Communication</p> <p>1. I am confident that I have identified content on communication skills through the online module. [1 2 3 4 5]</p> <p>2. I am confident that this online module covered critical content necessary for the mastery of communication skills. [1 2 3 4 5]</p> <p>3. I am confident that I am developing the skills and obtaining the required knowledge from this online module to effectively communicate as an officer in the U.S. Navy. [1 2 3 4 5]</p> <p>4. The materials presented through this online module will be useful in my work. [1 2 3 4 5]</p> <p>5. The materials presented through this online module were relevant to me. [1 2 3 4 5]</p>
<p>Leadership</p> <p>1. I am confident that I have identified content on leadership abilities through the online module. [1 2 3 4 5]</p> <p>2. I am confident that this online module covered critical content necessary for the mastery of leadership abilities. [1 2 3 4 5]</p> <p>3. I am confident that I am developing the skills and obtaining the required knowledge from this online module to effectively lead as an officer in the U.S. Navy. [1 2 3 4 5]</p> <p>4. The materials presented through this online module will be useful in my work. [1 2 3 4 5]</p> <p>5. The materials presented through this online module were relevant to me. [1 2 3 4 5]</p>
<p>Professional development</p> <p>1. I am confident that I have identified content on professional development through the online module. [1 2 3 4 5]</p> <p>2. I am confident that this online module covered critical content necessary for the mastery of professional development. [1 2 3 4 5]</p> <p>3. I am confident that I am developing the skills and obtaining the required knowledge from this online module to effectively develop professionally as an officer in the U.S. Navy. [1 2 3 4 5]</p> <p>4. The materials presented through this online module will be useful in my work. [1 2 3 4 5]</p> <p>5. The materials presented through this online module were relevant to me. [1 2 3 4 5]</p>



Appendix E.

*Project Evaluation Open-Ended Questions and Responses***Wrap-up session project evaluation open-ended responses****What did you like most about the leadership development coaching sessions?**

Response #1 "I enjoyed the interaction with other junior officers as well as leadership. The advice and words of wisdom were very helpful. I also liked the different coaches and experience and expertise they brought."

Response #2 "Real life experience from people in the field."

Response #3 "Gave me better perspective and guidance on moving on with my military life, civilian life as well."

Response #4 "I like the interaction with senior leadership."

Response #5 "Learning from senior officer mentors."

What did you like least about the leadership development coaching sessions?

Response #1 "Find me a mentor!"

Response #2 "The emails I get when I am not at drill to complete something. I prefer to be able to do them during drill than to do it on my personal time."

Response #3 "The limited offerings, I was unable to finish the course when I was transferred to a different unit that met at a different location."

Response #4 "Timing."

Please provide any additional suggestions or comments on how to improve this leadership development training if offered in the future.

Response #1 "Amazing training!"

Response #2 "Awesome opportunity to learn and lead. Can't wait to deploy."

Response #3 "Set aside more time for people to complete questions/surveys during class time so participants don't need to do them at home. Bring snacks if possible or tell people to bring snacks."

