



MALAHAYATI INTERNATIONAL JOURNAL
OF NURSING AND HEALTH SCIENCE
ISSN 2620-9152 (Print)
ISSN 2621-4083 (Online)
DOI: 10.33024



ARTICLE INFORMATION

Received: February, 6, 2026

Revised: February, 25, 2026

Available online: February, 28, 2026

at : <https://e-jurnal.iphorr.com/index.php/minh>

Nursing leadership training: A scoping review

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹,
Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

Abstract

Background: Nursing leadership training is essential for preparing nurses to lead teams, make strategic decisions, and adapt to rapidly evolving healthcare environments. Despite its critical role, the effectiveness of leadership programs is often undermined by various challenges, including limited institutional support, high workload demands, resource constraints, and cultural or psychological barriers. These issues can impact program outcomes and the long-term development of nursing leadership capacity.

Purpose: To explore the design and implementation challenges of nursing leadership training programs.

Method: This scoping review followed the Joanna Briggs Institute (JBI) guideline. Searching was conducted using three databases including Medline (Ebsco), ScienceDirect (Elsevier), and PubMed. Inclusion and exclusion criteria guided study selection. Data from 14 peer-reviewed articles published between 2021 and 2024 were extracted and synthesized using content analysis and descriptive statistics.

Results: Four major themes were identified organizational barriers, individual barriers, non-interventional programs, and interventional programs each with sub-themes. Effective leadership interventions have emerged across several forms: mentorship, simulation, empowerment programs, and structured curricula.

Conclusion: Nursing leadership training must shift from conceptual frameworks to evidence-based, context-specific interventions. Strengthening organizational infrastructure, promoting inclusivity, and enhancing program clarity and evaluation are critical for building effective, scalable, and sustainable leadership pathways in nursing.

Keywords: Charge Nurse; Hospitals; Leadership Training Program.

INTRODUCTION

Leadership in nursing is a key element in ensuring the effectiveness of healthcare services and the well-being of nursing personnel. The evolving complexity of healthcare systems has expanded the roles and responsibilities of nurses beyond clinical competence. Today, nurses are expected to manage teams, make strategic decisions, and navigate the rapidly changing clinical environment with leadership acumen (Qtait, 2023). These shifts have raised the urgency for structured training programs aimed at strengthening leadership capabilities among nurses at all levels of service.

In response, various leadership training initiatives have emerged, many of which incorporate modules on emotional intelligence, critical reflection, and interpersonal skills to enhance leadership effectiveness in daily practice (Nascimento, Ribeiro, Marinho, Azevedo, Moreira, & Azevedo, 2023). The integration of innovative learning strategies, including case-based simulations and structured mentoring, has helped bridge the gap between theory and practice in leadership education. Moreover, the Covid-19 pandemic accelerated the transition toward flexible delivery models such as distance and hybrid

learning, enabling broader access to training without sacrificing content quality or interactivity (Nascimento et al., 2023).

Despite these innovations, significant challenges persist in the implementation of leadership training in nursing. Limited institutional support, resource constraints, and psychological barriers such as stress and anxiety among participants often inhibit the full potential of training outcomes (Chubaci, da Silva Costa, dos Santos Neto, Dos Santos, Torres, dos Santos Costa, & André, 2024). These barriers underline the need for adaptive, context-sensitive training approaches that not only impart skills but also address environmental and personal factors affecting learning readiness and performance. Current literature has attempted to address this through systematic reviews of interventions such as simulation-based training and shared leadership models, which show promising results in improving confidence, leadership skills, and team collaboration. However, these interventions are not without limitations. Variations in healthcare systems, frequent changes in team dynamics, and inconsistent evaluation methodologies continue to pose barriers to generalizing success across settings (Beccia, Gualano, Fevola, Capogna, Scarfagna, Bonacquisti, & Ricciardi, 2025). Theory-driven programs have demonstrated particular promise by targeting cognitive, emotional, and psychological empowerment factors considered crucial in developing sustainable leadership behavior in nursing practice.

For example, a previous review examined 97 studies but identified only eight that met the inclusion criteria for experimental or quasi-experimental designs conducted between 2012 and 2023. This study emphasized the effectiveness of a multi-component intervention using a mixed format and a theory-based approach. The findings highlighted the importance of developing cognitive empowerment, interpersonal skills, and emotional intelligence as core leadership competencies. Furthermore, critical reflection emerged as a core element in developing reflective and adaptive nurse leaders (Qtait, 2023).

These findings reveal a critical research gap. While evidence demonstrates the benefits of leadership training, there is a lack of comprehensive understanding of training design and the contextual

challenges faced during implementation. The novelty of this study lies in its aim to map the landscape of nursing leadership training by systematically analyzing the structure, content, and barriers to implementation in the hospital setting, where leadership is most tested and needed.

RESEARCH METHOD

This study uses a scoping review methodology to systematically map the existing literature on nursing leadership training and identify research gaps in this area. A literature search will be conducted in several major databases, including PubMed, MEDLINE with Full Text (EBSCO), and ScienceDirect (Elsevier). A structured search strategy will be used, incorporating Medical Subject Headings (MeSH) and relevant keywords.

Search terms will be organized into three categories: population, concept, and context. For population, terms such as "Nursing, Supervision," "Charge Nurse," "Charge Nurse," "Nurse, In Charge," and "Nurse, In Charge" will be used. Conceptual focus will include terms such as "Leadership," "Leadership Training," "Education," "Training Program," "Program, Training," and "Program, Training." Contextual terms will include "Hospital," "Healthcare Facility," and "Healthcare Service." Boolean operators (AND, OR) will be used to combine terms to ensure a comprehensive and systematic search across the selected databases.

Inclusion criteria included studies published between 2020 and 2025 to reflect the latest developments in nursing leadership training. Only full-text peer-reviewed articles written in English were considered. Articles published before 2020, articles not available in full text, non-English publications, and studies unrelated to nursing leadership training were excluded. Furthermore, only empirical studies using quantitative or qualitative methodologies were included; literature reviews or articles lacking original data were excluded to maintain a focus on primary research.

Data extraction and synthesis were conducted descriptively using thematic mapping and charting techniques. Studies were categorized by year, country, study objectives, sample characteristics, materials and methods, type and duration of intervention (if any), program design, implementation

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

challenges, key findings, conclusions, and limitations. To ensure rigor and reliability, study screening and selection were conducted independently by two reviewers. Any disagreements were resolved through discussion or by consulting a third reviewer.

This protocol is registered with the Open Science Framework (<https://osf.io/>) (<https://doi.org/10.17605/OSF.IO/ER7VB>) and uses Covidence as a management tool for the extraction process. The search began in March 2025 and yielded 377 articles. After screening titles, abstracts, and full texts based on inclusion and exclusion

criteria, we determined that 14 articles met the research objectives.

Journal selection was facilitated using Covidence.org, resulting in fourteen eligible articles covering a variety of study designs, including qualitative studies, cross-sectional studies, case-control studies, and randomized controlled trials (RCTs). The selected articles were analyzed using basic qualitative content analysis. Additionally, the Joanna Briggs Institute (JBI) critical appraisal tool was applied to assess the quality and relevance of each study.

RESEARCH RESULTS

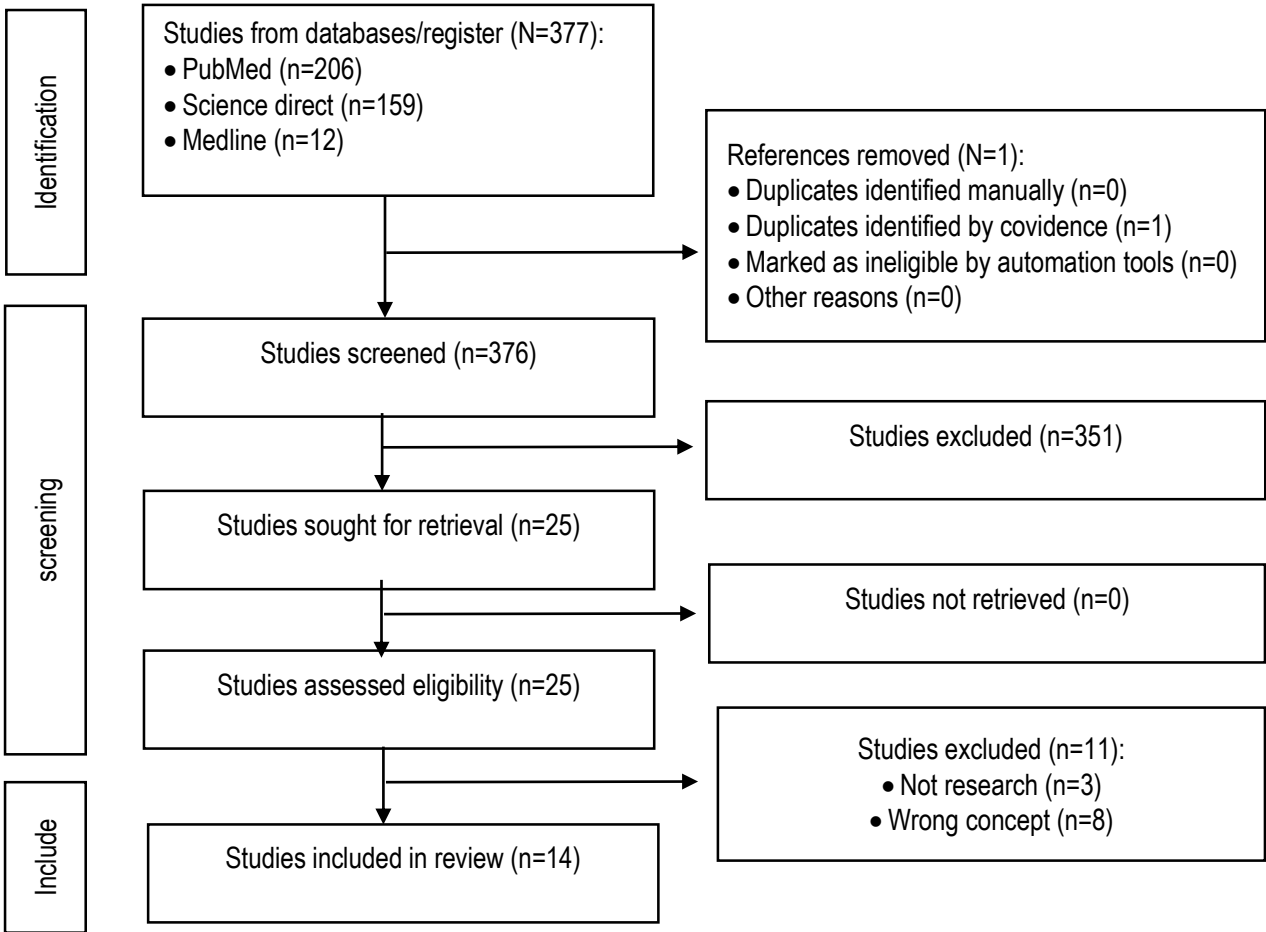


Figure PRISMA Flowchart

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan
²Adjunct Research Fellow, La Trobe University, Australia
Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

Table Article Data Mapping Results

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
(Wang et al., 2022) (China)	To build a scientific and practical nurse manager competency model, which can be used as a tool by hospitals to select nurse managers.	A literature review and behavioral interview study were conducted. The Delphi method was used twice, using the full score ratio method, the average, and the coefficient of variation to determine the number, name, and definition of competencies. In this study, the survey sample was selected through two-stage sampling. In the first stage, this study selected Beijing, Jilin, and Hainan based on economic competitiveness through consideration sampling.	Factor analysis results indicate that 22 competency elements are grouped into four dimensions: leadership and management skills, personal traits, professional qualities, and professional abilities. Cronbach's alpha coefficients for these four dimensions ranged from 0.745 to 0.885, indicating a high level of reliability. Factor analysis results indicate high structural validity and fit effects.	The competency model of nurse managers in tertiary general hospitals is an instrument with fairly good reliability and validity, and fully reflects the characteristics of nurses in Chinese general hospitals.	• Data are not publicly available due to privacy concerns of participants • The study is limited to nurse managers from tertiary hospitals in specific regions in China • Cultural and systemic differences may limit direct application of foreign competency models, hence the focus on a localized model, but this may also limit the comparison with international standards	13/13
(Holmgren et al., 2022) (Sweden)	To examine how charge nurses view their role in managing daily work and major incidents in the emergency department.	A qualitative study based on focus group discussions using semi-structured interviews. Participants were 12 nurses in charge of four emergency departments in Sweden.	For data analysis, a systematic text condensation method was used. Data analysis resulted in four categories: (1) Coping with chaos; (2) Need for further training; (3) Feelings of inadequacy; and (4) Lack of strategy.	Emergency department nurses have diverse, multifaceted frontline duties, requiring strong leadership qualities, and lacking detailed job descriptions. They face numerous challenges in their daily work, often with little training or opportunities for professional development.	• This study was conducted during the COVID-19 pandemic, which meant that the methodology had to be modified. • Each focus group was planned to consist of five participants. However, the research team struggled to achieve this due to the pandemic. • No men chose to participate in the study.	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
(Ting et al., 2024) (Canada)	To explore the experiences of registered nurses (RNs) early in their careers in performing the role of shift nurse in a hospital setting.	This study used a descriptive interpretive (ID) approach. Semi-structured in-depth interviews were conducted with 14 registered nurses (RNs) across Ontario, each with up to three years of experience and serving as shift nurses in hospital settings. Recruitment and data collection took place from January to May 2021 during the COVID-19 pandemic. Interviews were audio-recorded, transcribed, and analyzed following content analysis principles.	Content analysis of 14 participant interviews revealed four main themes: being nominated and forced into leadership, diverse and demanding responsibilities, factors that help and hinder, and leadership as an impactful experience.	Greater support for nurses involved in this role can be achieved by promoting a collaborative unit and organizational culture, prioritizing leadership training programs, and strengthening policies to provide greater clarity regarding the responsibilities of the charge nurse role.	• Participants were recruited exclusively from hospitals in Ontario using a self-reported sample that met the inclusion criteria. • It has limited applicability to other regions and clinical contexts. • Heterogeneity in participants' clinical environments may impact the relevance of study findings to specific clinical settings.	12/13
(Yu et al., 2021) (China)	To examine the predictive value of intrinsic capacity on the incidence of adverse outcomes over one year among community-dwelling older adults.	Cognitive decline, mobility limitations, visual impairment, and depressive symptoms predict disability. Visual impairment predicts recurrent falls. Cognitive decline and mobility limitations predict emergency department visits. Mobility limitations predict poor quality of life.	Cognitive decline, limited mobility, visual impairment and depressive symptoms predicted incident disability. Visual impairment predicted recurrent falls. Cognitive decline and limited mobility predicted emergency department visits. Limited mobility predicted poor quality of life.	Intrinsic capacity can predict adverse outcomes among community-dwelling older adults. Assessing intrinsic capacity will facilitate early identification of older adults at high risk of adverse outcomes and encourage targeted interventions.	• This study use cross-sectional data • Due to the impact of the Covid-19 Pandemic as well as time and financial constraints, the 12 LTCFs surveyed were located in only two cities in East, and most of the LTCFs were privately run and located in urban area, so there was a certain degree of selection bias	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
(Iheduru-Anderson et al., 2022) (United State)	To examine how race and gender influence how Black women, nursing academics, and leaders function in leadership positions.	This study utilized Critical Race Theory (CRT). Participants were Black or African-American women, reported having graduate-level education, and currently held a position, degree, or leadership role in academic nursing. Demographic data were analyzed using descriptive statistics.	Implications for nursing education include institutional training for faculty in anti-racist pedagogy and requiring nursing programs to meet inclusivity metrics for approval and accreditation.	Through the participants' unique perceptions as Black women academic nursing leaders, they revealed how because the structures, organizations, and leadership positions in academic nursing are dominated by White men, increasing inclusivity in academic nursing leadership is crucial to how Black women academic nursing leaders perceive their roles and are able to perform as leaders.	• The need for representation of diverse and historically marginalized voices in nursing leadership is not a challenge unique to the U.S. or academic nursing. • Black nurses are also underrepresented in clinical nursing leadership.	12/13
(Kennedy et al., 2021) (United State)	To explore the experiences of new nurse graduates and experienced nurses after participating in a mentoring program.	In this exploratory-descriptive study, five experienced nurses were paired with five new graduate nurses. After four months, the new graduate nurses were interviewed, and the expert nurses participated in focus groups.	Several themes emerged for new nursing graduates: 1) the importance of a charge nurse, 2) differences in practice areas, and 3) a supportive healthcare team. Focus groups revealed three themes: 1) remembering what it felt like, 2) wanting to help, and 3) having confidence in their preparation as mentors.	Newly graduated nurses rely on their charge nurses for support. Therefore, it is crucial that charge nurses receive adequate support.	• Small sample size limiting generalizability • Exploratory descriptive design without a control group • Conducted only in medical-surgical and critical care units, limiting wider applicability • Relatively short duration of 4 month for observing mentoring effects	13/13
(Önal & Seren İntepeler, 2024) (Turkey)	To compare nurses' self-assessment of competency and their managers'	The study design used was a cross-sectional study, and reporting followed the Strengthening the Reporting of	Nurses' self-assessments and the nurse-in-charge's assessments of clinical nurses evaluated the level of	Lower ratings of nurse competency by charge nurses may be due to their ability to observe nurses in their team in	• The study results cannot be generalized to all nurses. • The nurses answered the	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JBIScore
	assessment of nurses' competency.	Observational Studies in Epidemiology (STROBE) guidelines. The sample size was based on a 5% significance level, an effect size of 0.54, and 95% statistical power. A total of 162 nurses volunteered to participate in this study. Data were analyzed using SPSS 24 software.	competency as excellent in both groups. Nurses' self-assessments of competency were higher than those of the nurse-in-charge.	general and that they have more experience in evaluation.	questions in the data collection instrument themselves, which could potentially introduce bias into the study results.	
(Wolf et al., 2022) (United State)	To describe the experiences of emergency nurses regarding training, preparation, and CN role functions.	This mixed methods study used an exploratory sequential design to examine the perspectives of charge nurses and staff nurses regarding the training, practice, and lived experiences of clinical nurses (CNs) in the United States.	The final quantitative sample consisted of 2,579 emergency department nurses, with 685 identifying their primary role as staff, and the remainder identifying as full-time or casual nurses (Figure). Qualitative focus group participants consisted of 49 participants, evenly distributed between charge nurses (44.9%) and staff nurses (55.1%). Twenty of the 49 participants (41%) responded to member-check requests and verified the interpretation of the qualitative data.	The role of the Clinical Nurse (CN) in the ED is crucial to the smooth functioning of a chaotic, clinically challenging, and resource-constrained care environment. Findings from this study indicate that perceptions of the role differ from the perspectives of CNs and the staff nurses who work with them.	• The use of random sampling has the potential to introduce selection bias. • Voluntary participants may have different thoughts and feelings. • Large and diverse survey samples	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
(Wolf et al., 2024) (United State)	To evaluate the content and process of core competency training and identify evaluation and implementation strategies needed to improve nurse performance.	A modified Delphi technique was used in phase 1 to establish competency elements, and a qualitative content analysis method was used in phase 2 to establish competency training mechanisms.	The top five competencies identified were patient flow management, communication, situational awareness, clinical decision-making, and nurse-patient assignment, with the understanding that each competency significantly overlaps with the others.	These findings have the potential to support a standardized approach to the training and evaluation of emergency department charge nurses that focuses on communication skills, clinical decision-making, and situational awareness to facilitate safe and effective nurse-patient assignment and smooth emergency department workflow.	• There are some limitations of this study that need to be addressed • Even with a large and demographically representative sample, the data are self-reported • Participants were a convenience sample drawn from ENA members, leading to potential for selection bias.	13/13
(Sisk et al., 2021) (United State)	To measure structural empowerment (SE) and capture short-term changes in perceptions for senior nurse leaders before and after formal development experiences.	The Advanced Leadership Program (ALP) was designed in collaboration with the American Nurses Association to support personal and professional development for senior nurse leaders. The sample included 28 participants from the United States and the United Kingdom over a 6-month period.	The impact of the intervention was evident in the post-intervention survey, including increased Self-Efficacy (SE) ratings in 5 of 7 domains compared to the pre-intervention survey, a reduction in overall employee turnover, and improved patient experience scores. Furthermore, participants rated the program in the top categories, with particularly positive comments regarding coworker support, improved work relationships, and hope.	The ALP has shown promise in strengthening SE for senior nurse leaders by supporting leadership skill development, follow-up training, and peer network development.	• The ALP was developed to improve corporate support and empower senior nurse leaders within limits generalizability of the findings • Because of anonymity, it is not possible to match respondents a cross pre0test and post-tests measurements • Creating unique identification codes would have provided a means to assess individual change and in-depth detailing of the degree of impact for domains and subscales	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
(Dols et al., 2021) (United State)	To analyze the impact of an evidence-based charge nurse (CN) education program on novice and experienced charge nurses' self-confidence and satisfaction with their nursing roles, skill competencies, and metrics.	University faculty working with nurse leaders developed an evidence-based CN education program that included a series of classes, skills training and role responsibilities by nurse leaders, and skills competency evaluations before and after the CN education program.	The CN program was associated with significant positive changes in CN performance, nurse-specific metrics, hospital-acquired events, and patient satisfaction.	Interventions targeting frontline leaders have a positive impact on CN performance.	• The Hawthorne effect, CN modification of their behavior as a result of their awareness of being observed, may have initially impacted study results • To reduce the transitory impact of the Hawthorne effect, the study was extended over 12 months to ensure that significant change had occurred and been maintained.	13/13
(Julnes et al., 2022) (Norwegia)	To develop and implement a group-based acceptance and commitment therapy program to assist clinical nurses with mental health issues during the sporadic COVID-19 outbreak period.	Qualitative analysis was conducted between February and April 2019 using semi-structured interview data from 12 nurse leaders in surgical and medical wards at three Norwegian hospitals.	Four key themes were identified: difficulties in achieving nursing staff competency; a focus on operational and budgetary requirements rather than professional development; demands for managing sick leave and vacation periods; and challenges in facilitating professional development.	Nurse leaders find their responsibilities demanding and challenging. Furthermore, unclear work instructions from employers provide few opportunities for professional development.	The data used was only collected from 12 participants from a regional hospital, these findings cannot be generalized across regions and organizations.	13/13
(Shehab et al., 2023) (Yordania)	To examine the moderating role of self-efficacy in the relationship between four selected	Data were obtained using a self-report survey of 283 head nurses in 22 private hospitals in Jordan. Moderated regression analysis using a structural equation	Knowledge self-efficacy moderates the relationship between three individual factors (i.e., Trust, Reciprocity, and Reputation)	This study focused on knowledge self-efficacy and reflection on individual factors and knowledge-sharing behavior. Head nurses with high	• The generalizability of this study's findings is limited in two aspects. Specifically, the study involved only one representative head nurse in each hospital	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

Nursing leadership training: A scoping review

(Author, Year) (Country)	Purpose	Method	Results	Conclusion	Study Limitation	JB Score
	individual factors of head nurses	modeling approach (i.e., Smart PLS-SEM, Version 3) was used to evaluate the study's measurement and structural models.	and knowledge sharing behavior. However, self-efficacy does not moderate the relationship between ability to share and knowledge sharing behavior.	knowledge self-efficacy were able to increase their knowledge-sharing behavior. Knowledge self-efficacy moderated trust, reciprocity, and reputation with knowledge-sharing behavior, while the ability to share did not.	department. However, other staff were not considered in the sample development. • Data collection was limited to private hospitals in Amman due to limited data access.	
(Xie et al., 2021) (China)	To evaluate the impact of a patient safety leadership program on head nurses and clinical nurses in the same nursing unit.	A pre-post quasi-experimental study involving 60 head nurses and 240 clinical nurses was conducted. Only head nurses received a 12-month patient safety leadership training program. Before and after the training, the General Self-Efficacy Scale was completed by head nurses, and the General Self-Efficacy Scale, the Hospital Leadership Behavior Assessment Scale, the Safety Behavior Scale, and the Maslach Burnout Inventory were completed by clinical nurses.	The self-efficacy of head nurses and clinical nurses increased significantly ($p < 0.01$) after the training. The leadership behaviors of head nurses and the safety behaviors of clinical nurses also increased significantly ($p < 0.05$). We observed a statistically significant decrease in "emotional exhaustion" and an increase in "personal accomplishment" among clinical nurses ($p < 0.001$).	The patient safety leadership program had a positive impact on the self-efficacy and leadership behaviors of head nurses, as well as the self-efficacy, safety behaviors, and work burnout of clinical nurses.	• The sample size was small and only one hospital was involved • The lack of a control group made it impossible to compare the effect of the PSLP with that of the traditional training program	13/13

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>

DISCUSSION

Leadership development in nursing is increasingly recognized as a vital strategy to address workforce retention, quality of care, and organizational sustainability. However, the effective implementation of such training programs remains challenged by multifaceted barriers and inconsistencies in program design. This study categorized the findings into four interrelated themes to highlight the current gaps and opportunities in nursing leadership development.

Organizational barriers remain the most prominent obstacle to the adoption and scale-up of leadership training. Logistical and administrative issues, such as the lack of a leadership policy framework, poor managerial support, and inadequate allocation of training resources, significantly hamper training effectiveness. Structural issues, such as the lack of standardized job descriptions or inconsistent clinical expectations, also prevent clarity and consistency in leadership roles, complicating nurse leader preparedness (Shaban, Shaban, Mohammed, Alanazi, & Elkest, 2025). Organizational factors such as lack of resources, unsupportive leadership, and inadequate infrastructure often hinder leadership training in nursing. A systematic review found that while educational interventions generally improve leadership, variability in organizational support and the policy environment undermines consistent results (Cummings, Lee, Tate, Pencone, Micaroni, Paananen, & Chatterjee, 2021). Similarly, other studies describe challenges in maintaining research and leadership capacity due to persistent structural barriers, despite individual enthusiasm (Oulton, K., Wray, Kelly, Khair, Sell, & Gibson, 2022). These findings reinforce the subthemes of policy deficits and logistical constraints, including staff shortages, limited funding, and procedural barriers such as ethics approval. In addition to organizational barriers, individual-level challenges significantly impact program participation and effectiveness. These include cultural and social barriers such as perceived discrimination, lack of inclusivity, and pressure to conform to dominant leadership styles. Minority nurse leaders frequently report excessive visibility and tokenism, which diminish the psychological safety necessary for leadership development. One study emphasized that diversity issues in leadership

were not adequately addressed in program content, limiting their reach and relevance (Duxbury, Haines-Delmont, Baker, Baker, Bourlet, Craig, & Lantta, 2025).

Another crucial factor is the clarity of communication within training programs. Unclear competency benchmarks and undefined learning outcomes create confusion among trainees, reducing engagement and hindering self-efficacy (Qian, Wu, Li, Wang, & Li, 2025). Furthermore, evaluation mechanisms often rely heavily on self-reported outcomes and lack longitudinal follow-up, making it difficult to measure the true impact of leadership development initiatives.

At the personal level, leadership program implementation is often hampered by cultural, communication, and evaluative challenges. Individual empowerment is closely linked to evidence-based leadership, but cultural and organizational misalignments limit this potential (Teixeira, Nogueira, & Barbieri-Figueiredo, 2023). Furthermore, other research emphasizes that a lack of clear communication and participatory leadership are key barriers, echoing your subtheme on Clarity of Communication (Dozier, 2021). Evaluation limitations also persist; many studies report difficulties in measuring training effectiveness due to short duration, self-report bias, and varying contexts (Cummings et al., 2020). Much of the reviewed literature involves exploratory or observational studies that propose models for leadership development without practical implementation. Some theoretically valid frameworks, such as qualitative interview approaches or simulation designs, have not been tested in clinical settings. These studies, while providing insights for conceptual development, fail to provide empirical evidence regarding outcomes, feasibility, or scalability (Feldmeier, Zutz, Höck, Wollny, Kropp, Altiner, & Löffler, 2025). This indicates a research gap in translating theory into actionable interventions.

Many studies focus on leadership theory or competency identification without implementing actual training, contributing to the literature gap. Most nursing student leadership programs lack intervention-level implementation, instead relying on conceptual or observational data (Akdeniz &

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

Duygulu, 2023). This aligns with the observed subtheme highlighting the dominance of theoretical models over practical applications. Without real-world trials, the scalability and impact of leadership designs remain speculative.

Effective leadership interventions have emerged in several forms: mentoring, simulation, empowerment programs, and structured curricula. Mentoring and simulation are among the most effective interventions for retaining Early Career Nurses (ECNs), especially when paired with a structured competency framework and mentor training (White, Goldsworthy, Bateup, & Meigh, 2024). Furthermore, Advanced Leadership Programs (ALPs) demonstrate measurable improvements in leadership perceptions, retention, and patient outcomes through structured leadership development (Sisk, Mosier, Williams, Coppin, & Robinson, 2021). This supports the subthemes of Coaching and Simulation, Mentoring and Mentoring, and Leadership Empowerment as viable and impactful approaches.

A scoping review is a research methodology used to obtain a broad understanding of a topic. However, its limitations can be minimized by refining the research keywords to be more specific while remaining relevant to the topic and aligned with the JBI guidelines. In this study, the researchers utilized only three databases, as these were the ones recommended by their university. For future research, it is suggested to explore and incorporate additional databases to enhance the comprehensiveness of the review. This approach would provide stronger evidence and deeper insights into the challenges faced during the implementation of leadership training and the evaluation of program designs used.

CONCLUSION

Four key themes were identified in this study: Organizational Barriers, Individual Barriers, Non-Intervention Programs, and Intervention Programs. Each theme encompasses distinct subthemes that comprehensively map the current leadership development landscape in nursing. By discussing implementation barriers and program design typologies, this review identifies best practices (e.g., integration of mentoring, simulated experiences, and

culturally responsive training), uncovers limitations in current evaluation approaches, and emphasizes the urgent need to shift from conceptual models to proven, evidence-based interventions. These insights can guide educators, administrators, and policymakers in developing more robust, scalable, and inclusive leadership development initiatives for the nursing workforce.

ACKNOWLEDGMENT

This research is supported by the Center for Research and Community Development (CRCD), Universitas Pelita Harapan, under grant number: 248/LPPM-UPH/VII/2025.

REFERENCES

- Akdeniz, C., & Duygulu, S. (2024). Systematic review on characteristics and effects of leadership development interventions for nursing students. *Nurse educator*, 49(3), E147-E152.
- Beccia, F., Gualano, M. R., Fevola, G., Capogna, E., Scarfagna, C., Bonacquisti, M., & Ricciardi, W. (2025). The impact of leadership interventions on neonatal care: a systematic review of current literature. *European journal of pediatrics*, 184(2), 126.
- Chubaci, E. F., da Silva Costa, C. D., dos Santos Neto, M. F., Dos Santos, E. R., Torres, A. M. R. P. V., dos Santos Costa, A. C., & André, J. C. (2024). Development of leadership skills in medical education: Protocol for a scoping review. *JMIR Research Protocols*, 13(1), e62810.
- Cummings, G. G., Lee, S., Tate, K., Penconek, T., Micaroni, S. P., Paananen, T., & Chatterjee, G. E. (2021). The essentials of nursing leadership: A systematic review of factors and educational interventions influencing nursing leadership. *International journal of nursing studies*, 115, 103842.
- Dols, J. D., Ramirez, M. N., Hernandez, A. D., Allen, D., Kloewer, T., & Aguilon, V. (2021). Impact of evidence-based charge nurse education on charge nurse skills and nurse-specific

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

- metrics. *JONA: The Journal of Nursing Administration*, 51(12), 630-637.
- Dozier, M. (2021). We need to communicate better. *International Psychogeriatrics*, 33, 851 - 852.
- Duxbury, J., Haines-Delmont, A., Baker, J., Baker, P., Bourlet, G., Craig, E., & Lantta, T. (2025). Approaches used to prevent and reduce the use of restrictive practices on adults with learning disabilities: a realist review. *Health and Social Care Delivery Research*, 13(14).
- Feldmeier, G., Zutz, S., Höck, J., Wollny, A., Kropp, P., Altiner, A., & Löffler, C. (2025). Cognitive behavioural therapy in practice-nurse led behaviour-intervention for low back pain in German primary care—qualitative process evaluation of a feasibility study. *BMC nursing*, 24(1), 593.
- Holmgren, C., Jussèn, S., Hagiwara, M. A., & Rådestad, M. (2022). Charge nurses' perceived experience in managing daily work and major incidents in emergency departments: A qualitative study. *Australasian emergency care*, 25(4), 296-301.
- Iheduru-Anderson, K., Okoro, F. O., & Moore, S. S. (2022). Diversity and inclusion or tokens? A qualitative study of Black women academic nurse leaders in the United States. *Global Qualitative Nursing Research*, 9, 23333936211073116.
- Julnes, S. G., Myrvang, T., Reitan, L. S., Rønning, G., & Vatne, S. (2022). Nurse leaders' experiences of professional responsibility towards developing nursing competence in general wards: A qualitative study. *Journal of Nursing Management*, 30(7), 2743-2750.
- Kennedy, J., Astroth, K. M., Woith, W. M., Novotny, N. L., & Jenkins, S. H. (2021). New nurse graduates and rapidly changing clinical situations: the role of expert critical care nurse mentors. *International Journal of Nursing Education Scholarship*, 18(1), 20200131.
- Nascimento, A. A. D. A., Ribeiro, S. E. A., Marinho, A. C. L., Azevedo, V. D. D., Moreira, M. E. M., & Azevedo, I. C. D. (2023). Repercussions of the COVID-19 pandemic on Nursing training: A Scoping Review. *Revista Latino-Americana de Enfermagem*, 31, e3911.
- Önal, A., & Seren İntepeler, Ş. (2024). Comparison of self-competency and executive (charge) nurse competency assessments of clinical nurses. *International nursing review*, 71(4), 1015-1022.
- Oulton, K., Wray, J., Kelly, P., Khair, K., Sell, D., & Gibson, F. (2022). Culture, cognisance, capacity and capability: The interrelationship of individual and organisational factors in developing a research hospital. *Journal of Clinical Nursing*, 31(3-4), 362-377.
- Qian, D., Wu, Y., Li, Y., Wang, L., & Li, Y. (2025). Negative experiences of undergraduate nursing students in simulation training: A meta-synthesis of qualitative studies. *Journal of Professional Nursing*, 58, 147-156.
- Qtait, M. (2023). Nurses' leadership in the work: A systematic review. *Africa Journal of Nursing and Midwifery*, 25(1), 15-pages.
- Shaban, M., Shaban, M. M., Mohammed, H. H., Alanazi, M. A., & Elkest, H. R. A. (2025). Analyzing the correlation between psychological capital in community nurses and their stress management and job satisfaction. *BMC nursing*, 24(1), 488.
- Shehab, S., Al-Bsheish, M., Meri, A., Dauwed, M., Aldhmadi, B. K., Kareem, H. M., & Jarrar, M. T. (2023). Knowledge sharing behaviour among head nurses in online health communities: The moderating role of knowledge self-efficacy. *PLoS One*, 18(1), e0278721.
- Sisk, B. W., Mosier, S. S., Williams, M. D., Coppin, J. D., & Robinson, D. (2021). Developing effective senior nurse leaders: The impact of an advanced

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

Nursing leadership training: A scoping review

- leadership initiative. *JONA: The Journal of Nursing Administration*, 51(5), 271-278.
- Teixeira, A. C., Nogueira, A., & Barbieri-Figueiredo, M. D. C. (2023). Professional empowerment and evidence-based nursing: A mixed-method systematic review. *Journal of clinical nursing*, 32(13-14), 3046-3057.
- Ting, J. J., Babenko-Mould, Y., & Garnett, A. (2024). Early career nurses' experiences of engaging in a leadership role in hospital settings. *Canadian Journal of Nursing Research*, 56(3), 257-268.
- Wang, S., Tong, J., Wang, Y., & Zhang, D. (2022). A study on nurse manager competency model of tertiary general hospitals in China. *International Journal of Environmental Research and Public Health*, 19(14), 8513.
- White, K., Goldsworthy, A., Bateup, S., & Meigh, N. (2024). Characteristics of effective interventions to optimise retention for early career nurses: a scoping review. *medRxiv*, 2024-12.
- Wolf, L., Delao, A., Simon, C., Clark, P., & Burchill, C. N. (2024). Ensuring throughput: development and validation of charge nurse competencies for United States emergency care settings. *Journal of Emergency Nursing*, 50(4), 523-536.
- Wolf, L., Perhats, C., Delao, A., Burchill, C. N., Clark, P., Callihan, M., & Strout, T. (2022). Role and training of emergency department charge nurses: a mixed methods analysis of processes, needs, and expectations. *Journal of Emergency Nursing*, 48(4), 390-405.
- Xie, J., Ding, S., Zhang, X., & Li, X. (2021). Impact of a patient safety leadership program on head nurses and clinical nurses: a quasi-experimental study. *Revista Latino-Americana de Enfermagem*, 29, e3478.
- Yu, J., Si, H., Qiao, X., Jin, Y., Ji, L., Liu, Q., & Wang, C. (2021). Predictive value of intrinsic capacity on adverse outcomes among community-dwelling older adults. *Geriatric nursing*, 42(6), 1257-1263.

Kadek Ayu Purnama Yanthi^{1*}, Ni Gusti Ayu Eka^{1,2}, Enjelika Putri Manalu¹, Erica Dorelia Paiuk¹, Kyela Friska Br Sinurat¹

¹Fakultas Keperawatan, Universitas Pelita Harapan

²Adjunct Research Fellow, La Trobe University, Australia

Corresponding author: E-mail: ayu.purnamayanthi@gmail.com

DOI: <https://doi.org/10.33024/minh.v8i12.1630>