



Diane Andrews, PhD, RN

1. How has your involvement in ALSN changed, improved, or otherwise served an interesting role in your career trajectory?

Being a member of ALSN has provided me with tremendous networking opportunities that have allowed me to more closely connect with nursing leaders in both academic and industry at a level that would not be possible in a larger organization.

While our membership is not as large as many nursing organizations, is a virtual Who's Who in terms of nurse leaders who are not only members but engaged. Our meetings are well attended, and networking opportunities are abundant.

2. What doors have opened to you (if any) as a result of your involvement in ALSN?

Being a part of ALSN has helped me develop an appreciation of nursing leadership at the national level and broadened my view of research as I experienced the integration of teams from academia and industry. Serving as Secretary and Bylaws Chair for the last four years has provided me the opportunity to work with an amazing cadre of nurse leaders from across the country.

3. What would you say to nurse leaders in academia or practice who are considering joining ALSN right now?

Join as if your career depended on it! Not only is it an incredible bargain (\$180 which includes your subscription to JONA), but you will join other nurse leaders at the forefront of addressing the challenges we are facing in both academia and practice. There are plenty of opportunities to volunteer to serve on committees addressing these vital issues. There is also competitive research funding for members as well as a peer review process for poster and podium presentation at the ASLN International Conference.

4. How did you become interested in the study of nursing leadership and how has ALSN influenced this interest?

My interest in nursing leadership can be traced back to my early professional practice as a leader in cardio-vascular and post-anesthesia care. I have always had an interest in health care work environments and the role of the nurse leader. The focus of my master's degree was leadership and management, focusing on the experience of role conflict in differing care delivery structures (primary vs. team nursing). I also had the distinct privilege, as Director of my MS program, to be taught by Barbara Stevens Barnum, one of the early leaders of ALSN, then known as CGEAN, who also influenced my career pursuits. My interest in joining ALSN was a direct result of intentionally becoming part of an organization with a mission which reflected my interests.

5. Specific to nursing leadership, how can we create a better balance between academic and practice partners?

This is going to take some work. We need to start collaborating beyond feel-good meet and greets fostered by the need of practice to hire and academia to place students. There needs to be an intentional partnership based on a mutual understanding of needs and constraints in both environments.

6. How can ALSN assist with this partnership?

Last year ALSN amended its Bylaws to state that practice was a critical component of the mission of the organization. In addition, it amended the membership qualifications to include those other than nurses who advance the mission of the organization. ALSN is an ideal platform to bring leaders from academia and practice together to address this needed interface.

7. What is one thing you would like ALSN members to know?

ALSN is not a new organization. The founding members first met in 1970 in conjunction with the ANA. The purpose of the meeting was to bring together graduate faculty in nursing administration programs to develop an agenda for nursing administration curriculum. At that time there were only 27 nursing programs with an identified administration major or minor. Often the faculty associated with those programs consisted of a single individual. As a result of this collaboration, CGEAN was formally organized in 1971 and its initial 22 members began a sustained effort to address the quality of nursing leadership and management education. Beginning in 1985, CGEAN broadened the agenda of the general meeting to incorporate the presentation of administration research.

Today there are over 400 programs which offer a nursing leadership curriculum at either the masters or doctoral level. Increasingly practice organizations require advanced education in leadership and management. Previous generations of nurse leaders initiated a robust effort to guide leadership curriculum and research development. The onus for today's nurse leaders is to take up that mantel and develop a collaboration between academia and practice which will sustain the specialty practice of nursing leadership.

Bio

Dr. Diane Andrews, PhD, RN is an Associate Professor Emerita at the University of Central Florida located in Orlando, Florida. She received her BSN from the University of Iowa, her MS from the University of Illinois, and her PhD from the University of Central Florida. Diane began her career at Rush Presbyterian St. Luke's Medical Center in Chicago where her passion for leadership led her to serve in leadership roles in both the post anesthesia and cardiovascular care units. During her 14-year tenure with the University of Central Florida, she served as Director of both the Executive DNP program, a program which she founded, and the MSN Leadership and Management program. Diane's research interests are focused on the work environment of direct care nurses. In additional to her service to ALSN, Diane is an onsite evaluator for CCNE and a Trustee for Advent Health University.

