
**Abstract**
Many nurse managers transition from proficient bedside nurses to leadership roles without formal leadership training. Their new role moves beyond the bedside of affecting an individual patient outcome to a position where their leadership behaviors, decisions, and actions impact the staff, patients, and families on a unit and organizational level. While new nurse managers are coached and mentored by their director, there is still an opportunity to provide a more standardized and structured approach to ensure optimal development and outcomes. A Nurse Manager Residency program supports the new leader by providing a forum for education, leadership development and mentorship to demonstrate the critical components of a successful leader that promote staff engagement, patient experience, and excellence in nursing.

**Discussion Questions:**

1. The authors proposed overarching goals for a Nurse Manager Residency program designed to support new nurse managers through education and mentorship after orientation: 1) create a structure of required learning opportunities/interactions in order to build competency, 2) create a safe environment to discuss challenges of being a new nurse manager in a “just-in-time” manner, 3) allow nurse managers to develop a professional peer network and validate their experiences/challenges through hearing from others experiencing similar challenges or obstacles, 4) ensure available resources are identified and explained to the group, including the central staffing office, lean management facilitators, and off-shift supervisors, and 5) provide direct support and mentorship on the patient care unit to validate competencies and remove barriers impacting new nurse manager success. Reflect on the challenges faced by new nurse managers in your organization during their first year of practice. Develop three goals that could be used to guide a program of support during the first year following nurse manager orientation.

2. The author’s highlight five strategies identified by the Advisory Board (2017) for addressing nurse manager overload (Table 2), including 1) elevating the manager’s role to sign off work, 2) leveraging available in-house support, 3) filtering strategic initiatives from senior executives, 4) spotlight and control lateral seepage, and 5) buffer against 24/7 demands. Reflect on the nurse manager practice environment in your organization. Which five of these strategies would best address nurse manager overload in your organization? What structures and processes would be necessary to implement the identified strategies?