

Nursing Leadership Competencies; A Concept Analysis

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Abstract: *An abstract summarizes the major aspects of a paper. It should state a short introduction of background study, problem statement, purpose of the research, briefing about the used method, principal results and major conclusions. Citation or references and non-standard or uncommon abbreviations should be avoided in the abstract. The number of words should not exceed Nursing leadership competencies are essential for effective healthcare delivery, workforce sustainability, and patient safety; however, the concept remains inconsistently defined across nursing literature. This study aimed to clarify the concept of nursing leadership competencies using Walker and Avant's concept analysis method. A systematic examination of nursing leadership literature was conducted to identify the uses of the concept and to determine its defining attributes, antecedents, consequences, and empirical referents. The analysis revealed that nursing leadership competencies constitute a multidimensional construct encompassing effective communication, relational and interpersonal competence, ethical and professional integrity, strategic and organizational capability, and leadership self-efficacy. Antecedents included leadership education, professional experience, organizational support, and individual motivation, while consequences were evident at individual, organizational, and patient-care levels, including leadership aspiration, improved work environments, and enhanced patient safety. Empirical referents comprised leadership competency frameworks, assessment instruments, and observable leadership behaviors. Clarifying this concept provides a coherent theoretical foundation to inform nursing leadership education, development, and future research.*

Keywords: nursing leadership; leadership competencies; concept analysis; Walker and Avant.

1. Introduction

Nursing leadership plays a pivotal role in shaping healthcare quality, workforce effectiveness, and patient safety within increasingly complex and demanding health systems. Contemporary nursing practice requires leaders who are capable of guiding teams, managing organizational change, and responding to emerging clinical and societal challenges. The importance of clearly defined leadership competencies has been highlighted in discussions on nursing leadership practice and education, particularly in relation to crisis responsiveness, workforce well-being, and future-oriented leadership development (Morse & Warshawsky, 2021). Although the significance of nursing leadership

competencies is widely acknowledged, the concept itself remains inconsistently defined in the literature. Research addressing nursing leadership often focuses on specific leadership roles, such as nurse managers or clinical leaders, or concentrates on particular leadership styles rather than articulating a coherent and unified concept of leadership competencies. A scoping review examining nurse managers' leadership competencies demonstrated substantial variation in how competencies are identified and described, reflecting a lack of conceptual consensus across studies (Perez-Gonzalez et al., 2024). This inconsistency presents challenges for leadership education, competency assessment, and the design of effective leadership development programs.

Methodological diversity further contributes to conceptual ambiguity. Empirical studies and reviews frequently examine leadership outcomes or intervention effectiveness without clearly delineating the defining attributes of leadership competencies themselves. A mixed-methods systematic review of leadership development interventions for nurse managers showed positive effects on competency development, yet also revealed difficulties in linking specific interventions to clearly articulated competency domains (Chen et al., 2022). Without conceptual clarity, leadership competencies risk being treated as broad or implicit constructs, limiting their usefulness for theory development and practical application. Concept analysis offers a rigorous approach to addressing such conceptual uncertainty by systematically examining how a concept is used, defined, and applied within the literature. The concept analysis method proposed by Walker and Avant provides a structured framework to identify defining attributes, antecedents, consequences, and empirical referents of complex nursing concepts. This approach has been successfully applied to leadership-related concepts in nursing, including clinical leadership and academic leadership, resulting in clearer conceptual boundaries and more operational definitions that support research and practice (Jack et al., 2022). A separate concept analysis focusing on academic leadership in nursing further demonstrated the value of this method in linking leadership attributes to professional outcomes such as job satisfaction and retention (Greenway & Acai, 2024).

The need for conceptual clarity is particularly pressing given current challenges facing the nursing workforce, including leadership succession, burnout, and increasing organizational demands. Leadership self-efficacy has been identified as a key factor influencing nurses' motivation to pursue leadership roles, underscoring the importance of clearly understanding the competencies that underpin effective nursing leadership (Lartey et al., 2023). Additionally, competencies such as emotional intelligence, ethical leadership, and relational skills have been repeatedly associated with positive leadership outcomes, yet are often examined in isolation rather than as components of an integrated conceptual framework (Lu & Shorey, 2021). Therefore, the aim of this study is to analyze the concept of nursing leadership competencies using Walker and Avant's concept analysis method. By systematically examining the uses of the concept in the literature and identifying its defining attributes, antecedents, consequences, and empirical referents, this study seeks to clarify the meaning of nursing leadership competencies and establish a theoretically grounded understanding of the concept. Such clarification is expected to support leadership education, inform leadership development initiatives, and strengthen future research in nursing leadership.

2. Methodology

This study employed a concept analysis methodology to clarify and refine the concept of nursing leadership competencies. Concept analysis is particularly appropriate when a concept is widely used in the literature but lacks conceptual consistency, clear boundaries, or an agreed operational definition. Given the diverse ways leadership competencies are described across nursing leadership,

management, and education studies, a structured analytical approach was required to enhance conceptual clarity and theoretical rigor. The methodological framework guiding this analysis was Walker and Avant's (2011) concept analysis approach. This method provides a systematic and transparent process for examining the uses of a concept, identifying its defining attributes, and distinguishing it from related constructs. Walker and Avant's approach has been widely applied in nursing research and has proven effective in clarifying complex leadership-related concepts, including clinical leadership and academic leadership in nursing. Its structured, stepwise design supports theoretical development while maintaining strong relevance to nursing practice and education.

2.1 Selection of the Concept

The concept selected for this analysis was nursing leadership competencies. This concept was chosen because it is repeatedly emphasized as fundamental to effective nursing leadership, yet remains inconsistently defined across the literature. Studies examining nurse leaders frequently reference competencies such as communication, decision-making, professionalism, and relational skills; however, these competencies are often described using varied terminology and grouped differently depending on the context or leadership role being examined (González-García et al., 2021). Recent scholarship highlights that leadership competencies are increasingly expected of nurses across all levels of practice, not solely those in formal management positions. Discussions on contemporary nursing leadership stress the need for adaptable, relational, and ethically grounded competencies to address workforce challenges and evolving healthcare demands (Morse & Warshawsky, 2021). Despite their importance, leadership competencies are frequently embedded implicitly within leadership models or outcome-focused studies rather than being examined as a distinct conceptual entity. This lack of conceptual precision justified the selection of nursing leadership competencies as the focus of the present analysis.

2.2 Determination of the Aim of Analysis

The aim of this concept analysis was to clarify and define the concept of nursing leadership competencies through a systematic examination of its use in the nursing literature. Specifically, the analysis sought to identify the defining attributes of nursing leadership competencies and to establish conceptual boundaries that differentiate the concept from related leadership constructs such as leadership styles or leadership behaviors. Clarifying this concept is essential to support leadership education, competency assessment, and leadership development initiatives. Evidence from nursing leadership research indicates that clearly articulated competencies are necessary to guide training programs and inform leadership evaluation frameworks (Perez-Gonzalez et al., 2024). By applying Walker and Avant's concept analysis method, this study aimed to generate a coherent and theoretically grounded understanding of nursing leadership competencies that can be consistently applied across research, education, and clinical practice.

2.3 Identification of All Uses of the Concept

The concept of nursing leadership competencies is used in the literature across multiple contexts, reflecting its broad relevance to nursing practice, education, management, and policy. One prominent use of the concept appears in studies examining leadership requirements for nurse managers and senior nursing leaders, where leadership competencies are described as the capabilities necessary to effectively manage teams, allocate resources, and achieve organizational goals. In this context,

competencies are often linked to strategic planning, communication, motivation, and human resource management (Rojko et al., 2025). Another major use of the concept is within nursing education, where leadership competencies are framed as learning outcomes that should be developed progressively from undergraduate training onward. Leadership competencies in educational contexts emphasize evaluation processes, curriculum design, and experiential learning strategies that prepare students for future leadership roles (Steffan, 2025). Similarly, leadership competencies are used to describe the capabilities required by nurses transitioning into leadership positions, highlighting the importance of role readiness, confidence, and relational skills during career progression (Ocho et al., 2021).

The concept is also used within competency models and frameworks, which aim to standardize leadership expectations in nursing. Scoping reviews mapping nurse manager competency models consistently describe leadership competencies as multidimensional constructs that integrate professional knowledge, leadership behaviors, and managerial skills (Manoppo et al., 2024). In addition, leadership competencies are frequently referenced as explanatory variables in studies examining the relationship between leadership and outcomes such as job satisfaction, staff retention, organizational performance, and patient safety (Hult et al., 2023). Finally, nursing leadership competencies are used in association with specific leadership-related constructs, such as emotional intelligence, ethical leadership, and leadership self-efficacy. These constructs are often presented as integral components or expressions of leadership competence that influence how leadership is enacted in practice (Lu & Shorey, 2021). Collectively, these diverse uses demonstrate that nursing leadership competencies function as descriptive, developmental, evaluative, and outcome-related constructs within the nursing literature.

2.4 Determination of Defining Attributes

Defining attributes represent the essential characteristics that consistently appear in the literature and distinguish nursing leadership competencies from related concepts. One central defining attribute identified across studies is effective communication, which encompasses clear information exchange, active listening, and the ability to influence and engage others. Communication competence is repeatedly highlighted as fundamental to leadership effectiveness in nursing (Rojko et al., 2025). A second defining attribute is relational and interpersonal competence, including the ability to build trust, foster teamwork, and support staff through empathy and emotional awareness. Emotional intelligence is frequently identified as a critical component of leadership competence that enhances collaboration and staff well-being (Lu & Shorey, 2021). Closely related to this attribute is ethical and professional integrity, which reflects leaders' commitment to fairness, accountability, and ethical decision-making in nursing practice (Kim et al., 2022). Strategic and organizational capability also emerged as a defining attribute of nursing leadership competencies. This attribute includes vision setting, resource management, and the ability to align nursing practice with organizational and system-level goals. Competency models for nurse managers consistently emphasize these strategic capabilities as essential for effective leadership (Manoppo et al., 2024). In addition, leadership self-efficacy was identified as a defining attribute influencing nurses' confidence in their leadership abilities and their motivation to pursue and sustain leadership roles (Lartey et al., 2023).

2.5 Identification of a Model Case

A model case is an example that demonstrates all defining attributes of the concept. Consider a nurse manager working in a large tertiary hospital who leads a multidisciplinary nursing team. This nurse manager communicates clearly and consistently with staff, encourages open dialogue, and actively listens to concerns, demonstrating effective communication competence. Through supportive

leadership behaviors and emotional awareness, the manager fosters trust, collaboration, and a positive work environment, reflecting strong relational and interpersonal competence. The nurse manager consistently demonstrates ethical integrity by making transparent decisions, advocating for staff, and upholding professional standards. Strategic competence is evident in the manager's ability to align unit goals with organizational priorities, efficiently allocate resources, and lead quality improvement initiatives. The manager also exhibits strong leadership self-efficacy, confidently guiding the team through organizational changes and motivating nurses to engage in professional development. This scenario exemplifies nursing leadership competencies by incorporating all defining attributes identified in the literature.

2.6 Identification of Borderline, Related, and Contrary Cases

A borderline case includes some, but not all, defining attributes of nursing leadership competencies. For example, a senior nurse who possesses strong clinical expertise and ethical commitment but struggles with communication and team engagement demonstrates partial leadership competence. While this nurse exhibits professionalism and integrity, the absence of relational and strategic competencies limits their overall leadership effectiveness (Ocho et al., 2021). A related case refers to a concept that is similar but not identical to nursing leadership competencies. An example is leadership style, such as transformational leadership. Leadership styles describe patterns of behavior, whereas nursing leadership competencies encompass the underlying capabilities that enable leaders to enact various styles effectively (Perez-Gonzalez et al., 2024). Although related, leadership style does not fully capture the multidimensional nature of leadership competencies. A contrary case is an example that clearly lacks the defining attributes of the concept. A nurse in a supervisory role who avoids decision-making, communicates poorly, disregards ethical standards, and fails to support staff represents a contrary case. Such behavior reflects an absence of leadership competence and is often associated with negative staff and organizational outcomes (Hult et al., 2023). These cases help clarify the boundaries of nursing leadership competencies and distinguish the concept from overlapping or opposing constructs.

2.7 Identification of Antecedents and Consequences

Antecedents of nursing leadership competencies are the conditions that support their development and expression. The literature consistently identifies leadership education and training as a primary antecedent, as structured learning experiences provide foundational leadership knowledge and skills (Steffan, 2025). Professional experience and role transition also precede leadership competence, particularly as nurses assume formal or informal leadership responsibilities in practice settings (Ocho et al., 2021). In addition, organizational support, including mentorship and supportive work environments, facilitates the development and application of leadership competencies (Lartey et al., 2023). Individual factors such as leadership self-efficacy, motivation, and emotional intelligence further act as antecedents influencing leadership capability (Lu & Shorey, 2021). The consequences of nursing leadership competencies occur at multiple levels. At the individual level, leadership competencies are associated with increased leadership aspiration, job satisfaction, and professional growth among nurses (Perez-Gonzalez et al., 2024). At the organizational level, competent nursing leadership contributes to improved work environments, staff engagement, and effective team functioning (Hult et al., 2023). At the patient-care level, leadership competencies indirectly support patient safety and quality of care through empowered nursing teams and positive care environments (Wang & Dewing, 2021).

2.8 Definition of Empirical Referents

Empirical referents of nursing leadership competencies include observable and measurable indicators that demonstrate the presence of the concept in practice. These referents are commonly reflected in leadership competency frameworks that specify expected leadership domains and behaviors for nurse leaders (Hughes et al., 2022). Assessment instruments are also used to measure leadership competencies such as communication, decision-making, and team management, enabling empirical evaluation of leadership capability (Facião et al., 2022). In practice, observable leadership behaviors including effective communication, ethical conduct, mentoring, and engagement in quality improvement activities serve as practical indicators of leadership competence (Tschannen et al., 2021). Together, these frameworks, tools, and behaviors provide concrete means for identifying and measuring nursing leadership competencies in research, education, and clinical settings. Figure 1 illustrates the systematic process used to identify, screen, and select studies for inclusion in this concept analysis. The PRISMA-style flow diagram outlines each stage of the literature search, including database identification, removal of duplicates, title and abstract screening, full-text eligibility assessment, and final study inclusion. This structured approach ensured transparency and methodological rigor in the selection of relevant literature examining nursing leadership competencies. The flow diagram provides a clear visual summary of the search and screening process, supporting the credibility and reproducibility of the evidence base used for the concept analysis.

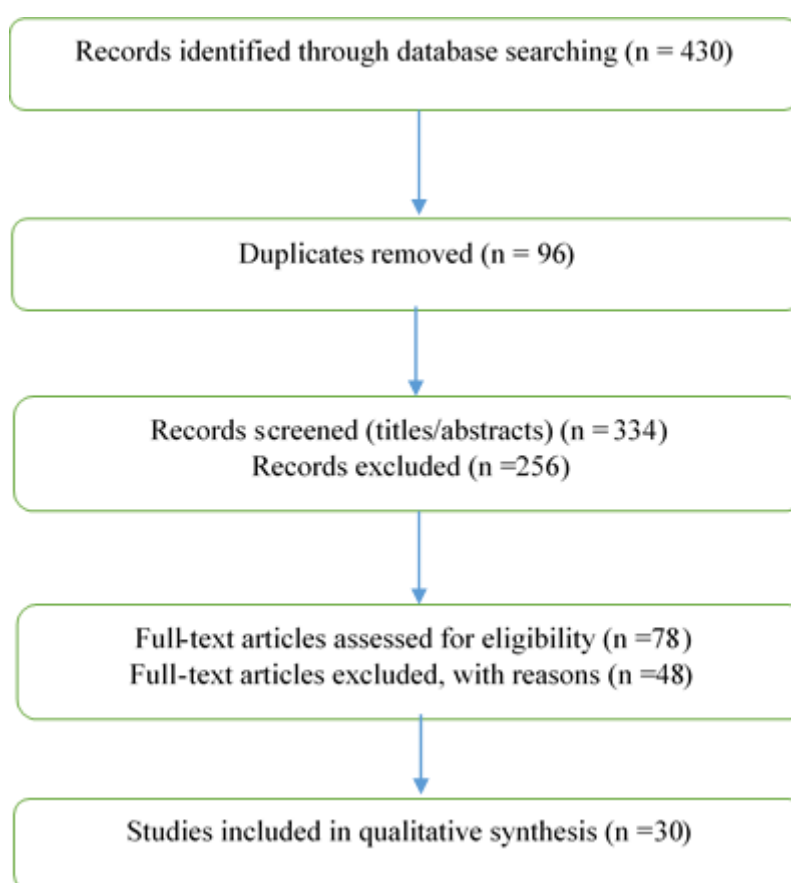


Figure 1. PRISMA-style flow diagram of article search, screening, and selection process

3. Results of Concept Analysis

3.1 Defining Attributes

Analysis of the literature revealed that nursing leadership competencies are characterized by a set of recurring attributes that consistently distinguish the concept across clinical, managerial, educational, and organizational contexts. These attributes represent the core features required for effective leadership enactment in nursing practice. Effective communication emerged as a central defining attribute. Leadership competence in nursing is consistently associated with clear information exchange, active listening, and the ability to influence and engage others within interprofessional teams. Communication competence enables coordination of care, conflict resolution, and shared decision-making, making it foundational to nursing leadership effectiveness (Rojko et al., 2025). Relational and interpersonal competence is another defining attribute. This includes the ability to build trust, foster collaboration, support staff, and demonstrate empathy. Leadership competence is closely linked to emotionally intelligent behaviors that enhance team cohesion and staff well-being, particularly in complex clinical environments (Lu & Shorey, 2021). Ethical and professional integrity was identified as a core attribute distinguishing competent nursing leadership. Ethical leadership involves fairness, accountability, transparency, and role modeling professional values. Leaders who demonstrate ethical competence positively influence staff perceptions, organizational trust, and professional standards in nursing practice (Kim et al., 2022). Strategic and organizational capability also defines nursing leadership competencies. This attribute encompasses vision setting, systems thinking, resource management, and the ability to align nursing practice with organizational and policy goals. Leadership competency models consistently emphasize these strategic capabilities as essential for sustaining effective nursing services and managing change (Manoppo et al., 2024). Finally, leadership self-efficacy and confidence emerged as a defining attribute influencing how leadership competencies are enacted. Nurses who possess confidence in their leadership abilities are more likely to assume leadership roles, apply leadership skills effectively, and sustain leadership engagement over time (Lartey et al., 2023).

Table 1 presents an overview of the research studies included in this concept analysis, summarizing their citations, settings, and key conceptual or methodological attributes. The studies span diverse domains, including nursing leadership practice, nursing education, nurse management, and healthcare organizational contexts, and employ a wide range of methodological approaches such as concept analyses, scoping reviews, systematic reviews, mixed-methods studies, and empirical investigations. Collectively, the studies illustrate how nursing leadership competencies have been examined from multiple perspectives, including competency identification, leadership development, measurement, and outcome evaluation. This diversity of settings and approaches provides a comprehensive foundation for identifying the defining attributes, antecedents, consequences, and empirical referents of nursing leadership competencies explored in the present analysis

Table 1. Descriptive data of the research studies

No.	Citation	Setting (Domain)	Key Attributes (Conceptual / Methodological)
1	Rojko, Kvas, & Stare (2025)	Public health nursing leadership	Scoping review identifying grouped leadership competency domains for nurse leaders.
2	Steffan (2025)	Undergraduate nursing education	JBI-guided scoping review examining leadership competency evaluation processes.
3	Ocho et al. (2021)	Caribbean healthcare organizations	Mixed-methods study identifying core leadership competencies and transition challenges.

No.	Citation	Setting (Domain)	Key Attributes (Conceptual / Methodological)
4	Manoppo et al. (2024)	Hospital nurse managers	Scoping review mapping nurse manager competency models across hospital settings.
5	Morse & Warshawsky (2021)	Nursing leadership practice and education	Conceptual discussion of nurse leader competencies in crisis and post-pandemic contexts.
6	Jack et al. (2022)	Undergraduate nursing education	Walker and Avant concept analysis; clinical leadership attributes.
7	Greenway & Acai (2024)	Academic nursing leadership	Walker and Avant concept analysis; academic leadership attributes and outcomes.
8	Patel & Metersky (2022)	Nursing practice and education	Rodgers' concept analysis; reflective practice attributes and consequences.
9	Kim (2021)	Nursing crisis leadership	Rodgers' evolutionary concept analysis; crisis leadership attributes.
10	Lartey et al. (2023)	Nursing leadership development	Rodgers' concept analysis; leadership self-efficacy attributes, antecedents, and outcomes.
11	Perez-Gonzalez et al. (2024)	Nurse managers in healthcare organizations	Scoping review; leadership competency characteristics and styles.
12	Hughes et al. (2022)	Nursing leadership practice	Professional framework defining core nurse leader competencies.
13	Lu & Shorey (2021)	Clinical nursing practice	Qualitative systematic review; emotional intelligence as leadership-related capability.
14	Kim, Jeong, & Seo (2022)	Nursing leadership and ethics	Systematic review and meta-analysis; ethical leadership outcomes.
15	Guibert-Lacasa & Vázquez-Calatayud (2022)	Hospital clinical nursing	Systematic review; clinical leadership interventions and competencies.
16	Goh, Hosier, & Zhang (2022)	Nursing workplace environments	Overview of reviews; leadership-related antecedents and consequences.
17	Zhao et al. (2025)	Nursing health leadership	Scoping review; concept, influencing factors, and interventions.
18	Costa et al. (2025)	Undergraduate nursing education	Scoping review; leadership development strategies and curricula.
19	Gab Allah (2021)	Nurse managers during COVID-19	Descriptive correlational study; leadership challenges and support.
20	Al-Thawabiya et al. (2023)	Nurse leaders in Qatar	Cross-sectional study; leadership styles and transformational skills.
21	Chen et al. (2022)	Nurse managers supervising nurses	Mixed-methods systematic review; leadership competency interventions.
22	Hult et al. (2023)	Nursing leadership and outcomes	Systematic review of reviews; leadership styles and outcomes.
23	Alsadaan et al. (2023)	Nursing leadership and staff performance	Systematic review; leadership behaviors and nurse performance.
24	Tschannen et al. (2021)	Frontline nurses and nurse leaders	Cross-sectional study; quality improvement competence.

No.	Citation	Setting (Domain)	Key Attributes (Conceptual / Methodological)
25	Wang & Dewing (2021)	Nursing leadership and patient safety	Literature review; mediating mechanisms and safety outcomes.
26	Facião et al. (2022)	Nursing leadership assessment	Integrative review; leadership competency measurement instruments.
27	González-García et al. (2021)	Nurse managers in healthcare organizations	Scoping review; core nurse manager competencies.
28	Kiwanuka et al. (2021)	Intensive care unit nursing leadership	Integrative review; leadership styles and quality outcomes.
29	Conner et al. (2025)	Undergraduate nursing education	Scale development study; leadership competence measurement.
30	Matsas et al. (2022)	Undergraduate medical education	Scoping review; leadership competency frameworks and curricula.

3.2 Antecedents

The concept analysis identified several key antecedents that consistently precede the development and enactment of nursing leadership competencies. One primary antecedent is formal education and leadership preparation, as leadership competencies begin to develop through structured learning experiences in undergraduate and postgraduate nursing programs. Educational exposure provides foundational leadership knowledge and introduces nurses to leadership roles early in their professional development (Steffan, 2025). Professional experience and role transition also emerged as essential antecedents. Leadership competencies tend to develop as nurses gain clinical experience and assume increasing responsibility, particularly during transitions into supervisory or managerial roles. Nurses moving into leadership positions often require time, experiential learning, and role socialization to develop competence (Ocho et al., 2021). Another important antecedent is organizational support, including mentorship, leadership opportunities, and supportive work environments. Organizational structures that encourage leadership development enable nurses to practice and strengthen leadership competencies in real-world settings (Lartey et al., 2023). Additionally, individual characteristics, such as motivation, self-confidence, and emotional intelligence, were identified as antecedents that influence leadership capability and readiness (Lu & Shorey, 2021).

3.3 Consequences

The consequences of nursing leadership competencies are evident at individual, organizational, and patient-care levels. At the individual level, effective leadership competencies are associated with increased leadership aspiration, professional growth, and job satisfaction among nurses. Competent leadership enhances nurses' confidence and willingness to pursue and sustain leadership roles (Lartey et al., 2023). At the organizational level, nursing leadership competencies contribute to improved work environments, stronger team functioning, and enhanced staff performance. Reviews of nursing leadership consistently demonstrate positive relationships between leadership competence and organizational outcomes such as staff engagement and effective collaboration (Hult et al., 2023). At the patient-care level, leadership competencies have indirect but significant effects on care quality and patient safety. Competent nursing leadership fosters empowering practice environments and effective leader–staff relationships, which in turn support safer and higher-quality patient care (Wang & Dewing, 2021).

3.4 Empirical Referents

Empirical referents of nursing leadership competencies are the observable and measurable indicators that demonstrate the presence of the concept in practice. The literature identifies leadership competency frameworks as key empirical referents, as they define expected leadership domains, behaviors, and capabilities for nurse leaders. Such frameworks provide structured guidance for leadership development and evaluation in nursing contexts (Hughes et al., 2022). Assessment instruments also function as important empirical referents by enabling the measurement of leadership competencies. Reviews of leadership assessment tools in nursing highlight the use of validated instruments that assess competencies such as communication, decision-making, emotional intelligence, and team management, allowing leadership competence to be operationalized in both research and practice (Facião et al., 2022). These tools support systematic evaluation of leadership capability across different nursing roles and settings. In addition, observable leadership behaviors serve as practical empirical referents. Behaviors such as effective communication, ethical decision-making, mentoring, and engagement in quality improvement activities provide tangible evidence of leadership competence in everyday nursing practice (Tschannen et al., 2021). Participation in leadership development programs and demonstrated improvement in leadership-related outcomes further indicate the presence of nursing leadership competencies (Chen et al., 2022).

3.5 Summary of Findings

The concept analysis revealed that nursing leadership competencies constitute a multidimensional construct encompassing communication, relational, ethical, strategic, and personal capability domains. Defining attributes such as effective communication, interpersonal competence, ethical integrity, strategic capability, and leadership self-efficacy consistently emerged across the literature. The development of these competencies is preceded by antecedents including leadership education, professional experience, organizational support, and individual motivation. The consequences of nursing leadership competencies extend across individual, organizational, and patient-care levels, contributing to leadership aspiration, improved work environments, and enhanced patient safety. Empirical referents identified in this analysis include competency frameworks, validated assessment instruments, and observable leadership behaviors, which collectively enable the concept to be identified and measured in nursing research and practice. These findings provide a clarified conceptual foundation for nursing leadership competencies that can inform leadership education, development initiatives, and future research.

4. Discussion

The purpose of this concept analysis was to clarify the meaning of nursing leadership competencies and establish clear conceptual boundaries using Walker and Avant's framework. The findings demonstrate that nursing leadership competencies represent a multidimensional construct encompassing communication, relational, ethical, strategic, and personal capability domains. This section discusses the theoretical and practical significance of these findings and their implications for nursing leadership theory, management, and policy.

4.1 Theoretical Implications

From a theoretical perspective, this concept analysis contributes to nursing leadership scholarship by addressing longstanding conceptual ambiguity surrounding leadership competencies. The findings

support the view that nursing leadership competencies are not limited to positional authority or leadership style but reflect an integrated set of capabilities that enable leadership across diverse nursing roles and contexts. This aligns with theoretical discussions emphasizing leadership as a dynamic and developmental process rather than a fixed role or trait (Morse & Warshawsky, 2021). Clarifying the defining attributes of nursing leadership competencies strengthens theoretical coherence by distinguishing the concept from related constructs such as leadership behaviors or leadership styles. While leadership styles describe patterns of interaction, this analysis demonstrates that competencies represent the underlying capacities that allow leaders to enact those styles effectively. Scoping reviews examining leadership competency characteristics among nurse managers reinforce the importance of conceptual clarity to advance theory development and enable meaningful comparison across studies (Perez-Gonzalez et al., 2024). The identification of antecedents and consequences further enhances theoretical understanding by situating nursing leadership competencies within a developmental and contextual framework. Leadership competencies emerge through education, experience, and organizational support, and they generate outcomes at individual, organizational, and patient-care levels. These relationships support theoretical models that link leadership capability to workforce motivation, organizational functioning, and care quality, thereby reinforcing the central role of leadership competencies within nursing leadership theory (Hult et al., 2023).

4.2 Management and Policy Implications

The findings of this concept analysis have important implications for nursing management and health policy. For nursing managers, the clarified attributes of leadership competencies provide a structured foundation for leadership development, performance evaluation, and succession planning. Leadership frameworks and competency models can be aligned with the defining attributes identified in this analysis to ensure that leadership development initiatives address core leadership capabilities rather than isolated skills (Hughes et al., 2022). At the organizational level, management strategies that prioritize leadership education, mentorship, and supportive work environments are likely to enhance leadership competence among nurses. Evidence from leadership development and intervention studies suggests that structured programs and organizational support are essential for translating leadership competencies into effective practice (Chen et al., 2022). Investing in leadership competency development may therefore contribute to improved staff engagement, retention, and organizational performance. From a policy perspective, clearly defined nursing leadership competencies can inform national and institutional leadership standards, accreditation requirements, and workforce planning strategies. Policymakers can use competency-based frameworks to guide leadership preparation and ensure consistency across educational and practice settings. Given the established links between nursing leadership, work environments, and patient safety, policies that support leadership competency development may indirectly improve care quality and patient outcomes (Wang & Dewing, 2021). Together, these management and policy implications underscore the value of conceptual clarity in strengthening nursing leadership practice and health system performance.

4.3 Practical Applications

The clarified concept of nursing leadership competencies has several practical applications for nursing education, leadership development, and clinical practice. In educational settings, the defining attributes identified in this analysis can inform curriculum design by embedding leadership competencies such as communication, ethical integrity, relational capability, and strategic thinking across undergraduate and postgraduate nursing programs. Integrating leadership development early

and progressively supports nurses' readiness to assume leadership roles throughout their careers (Steffan, 2025). In clinical and organizational contexts, the findings provide guidance for the design of leadership development programs and mentorship initiatives. Clearly articulated competencies allow nurse managers and organizations to align training activities with core leadership capabilities rather than focusing on isolated leadership behaviors. Competency-based frameworks can also be used to guide performance appraisal and leadership succession planning, ensuring that leadership potential is identified and nurtured systematically (Hughes et al., 2022). At the practice level, the use of validated leadership assessment instruments and observable leadership behaviors as empirical referents enables nurses and organizations to evaluate leadership competence objectively. Applying these tools can support reflective practice, targeted professional development, and continuous leadership improvement within nursing teams (Facião et al., 2022).

4.4 Future Research Directions

Future research should build on this concept analysis by empirically testing the relationships between the defining attributes of nursing leadership competencies and key nursing outcomes. Quantitative studies examining how specific competency domains influence staff performance, leadership aspiration, and organizational effectiveness would strengthen the evidence base (Hult et al., 2023). Longitudinal research designs are particularly needed to examine how leadership competencies develop over time and across career stages. Further research is also required to refine and validate measurement tools for nursing leadership competencies across diverse healthcare contexts. Although several instruments exist, additional work is needed to ensure their applicability across cultural, organizational, and clinical settings (Facião et al., 2022). Finally, future studies should explore the effectiveness of leadership development interventions that are explicitly grounded in clearly defined competency frameworks, enabling stronger alignment between leadership theory, practice, and outcomes (Chen et al., 2022).

5. Conclusion

This concept analysis clarified the meaning of nursing leadership competencies by systematically examining their uses, defining attributes, antecedents, consequences, and empirical referents. The findings demonstrate that nursing leadership competencies represent a multidimensional construct encompassing communication, relational and interpersonal capability, ethical and professional integrity, strategic and organizational competence, and leadership self-efficacy. Together, these attributes distinguish nursing leadership competencies from related leadership constructs and highlight their relevance across clinical, managerial, and educational nursing contexts. The analysis also revealed that nursing leadership competencies develop through a combination of education, professional experience, organizational support, and individual motivation, and that their presence generates important outcomes at individual, organizational, and patient-care levels. By providing conceptual clarity, this study offers a coherent foundation to support leadership education, competency-based leadership development, and consistent application in nursing practice.

5.1 Acknowledgement

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5.2 Conflict of Interest Statement

The authors declare that there is no conflict of interest regarding the publication of this study.

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