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Staff Education Project to Train Charge Nurses on the Use of the TSAM framework to Improve Leadership Competencies

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Walden University

College of Nursing

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Natoya Langley

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Walden University
2025

Executive Summary: Staff Education Project to Train Charge Nurses on the Use of the TSAM framework to Improve Leadership Competencies

by

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Executive Summary Submitted in Partial Fulfillment

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Summary

The purpose of this doctoral project was to improve charge nurse leadership competencies through education on the tiered skills acquisition model (TSAM), addressing challenges of high turnover, limited orientation, and compromised care quality in an inpatient psychiatric facility. The background reveals a two-year financial loss of over $1.8 million tied to staff attrition, highlighting the urgent need for a structured training framework. TSAM, a progressive, competency-based model, offers a pathway for deliberate skill acquisition, leadership growth, and enhanced role clarity. A staff education program was implemented with ten charge nurses, incorporating a pretest, PowerPoint training, scenario-based roleplays, and a posttest. A paired *t* test revealed a statistically significant improvement in knowledge ($p = .02$), with an average score increase of 7 points and a mean percentage gain of 8.33%, despite a ceiling effect. Results suggest TSAM benefits nurses across experience levels and supports improved retention, confidence, and job satisfaction. This initiative demonstrates that standardized frameworks like TSAM can reduce orientation waste and financial loss while fostering safer, more consistent care. Limitations include a small sample size and high baseline pretest scores, which may limit generalizability. Nonetheless, the findings align with prior studies emphasizing TSAM's role in structured learning, identity formation, and role autonomy. The project indirectly addresses social justice by promoting equitable training access for all charge nurses, reducing disparities in role readiness, and improving patient care quality through competent leadership. Integration of TSAM into onboarding and continuing education is recommended to sustain impact and promote a more stable and inclusive workforce.

Background

Effective nursing leadership and clinical competence are essential to delivering safe, high-quality patient care in today's increasingly complex healthcare landscape. In psychiatric settings in particular, the consequences of poor charge nurse leadership can be especially severe. For instance, inadequate supervision and lack of coordination during patient crises may result in delayed interventions, increased risk of self-harm or harm to others, and higher rates of restraint use. A 2022 internal audit at a comparable inpatient psychiatric facility revealed that incidents of medication errors and patient aggression were significantly higher during shifts led by inadequately trained charge nurses. Such findings highlight the direct link between leadership preparedness and patient safety.

Therefore, building a competent, confident, and well-trained charge nurse workforce is not only a strategic imperative but also a moral responsibility for healthcare organizations in today's increasingly complex healthcare landscape. Charge nurses, who are often the pivotal link between frontline staff and administrative leadership, require robust, structured preparation to effectively guide clinical teams, support new staff, and model safe practices. Unfortunately, many facilities experience elevated turnover, inconsistent leadership, and operational inefficiencies stemming from insufficiently prepared leaders. The Tiered Skill Acquisition Model (TSAM) offers a developmental training framework that addresses these challenges by providing structured learning pathways from novice to expert.

The project addressed critical issues within a psychiatric inpatient facility, including not only systemic financial strain but also the downstream clinical impacts of limited orientation for contract nurses. These temporary staff members, often brought in

to address immediate shortages, were provided minimal training on unit procedures, psychiatric protocols, and crisis intervention techniques. As a result, permanent staff reported increased incidents of care fragmentation, communication breakdowns, and avoidable patient escalations. For example, internal tracking noted a 35% increase in incident reports during periods of high contract nurse utilization, many tied to unfamiliarity with facility-specific de-escalation protocols. This placed additional stress on charge nurses, lowered team morale, and contributed to burnout.

These findings made it clear that consistent, structured competency development, such as that provided through TSAM, was essential not only for leadership growth but for safeguarding patient outcomes and fostering a stable, cohesive care environment, including a 2-year cumulative budget deficit exceeding $1.8 million, primarily due to high staff turnover and inefficient onboarding processes. Additionally, unsafe practices and gaps in care continuity arose from inadequately trained contract nurses receiving limited orientation. These issues underscore the urgent need for competency-based education for charge nurses. TSAM, a framework grounded in deliberate, progressive skill-building, offers a clear and scalable model for developing clinical and leadership competencies. It supports varying levels of readiness and experience, allowing charge nurses to grow into their roles with clarity and confidence (Theaux et al., 2024).

Competency-based learning, as emphasized by Hategeka et al. (2024), leads to improved patient outcomes and confidence among healthcare providers. TSAM builds clinical capacity through structured simulation, reflective practice, and real-time role modeling. Joswiak et al. (2023) found that the model cultivates professional identity

formation and instills safe practice standards. These components collectively contribute to a resilient, responsive nursing workforce.

As charge nurses progress through TSAM's structured tiers, they gain increasing autonomy, leadership clarity, and accountability. These qualities are vital in fostering job satisfaction and reducing burnout. Studies by Beamer et al. (2019) confirm that TSAM enhances satisfaction with orientation, accelerates competency acquisition, and strengthens patient safety. The model's layered structure addresses inequities in role preparedness, ensuring equitable access to tools, training, and feedback regardless of tenure or background.

Standardized, structured training also improves retention. Compared to traditional orientation models that rely heavily on informal mentorship or trial-and-error learning, TSAM offers a tiered, intentional approach that has demonstrated superior outcomes in both confidence and staff longevity. For example, while general onboarding frameworks may provide basic policy reviews and shadowing experiences, TSAM integrates role-specific competencies, simulation-based learning, and structured feedback loops tailored to leadership development.

This contrasts with programs such as Nurse Residency Models, which often target entry-level bedside nurses rather than experienced or aspiring unit leaders. TSAM's emphasis on progressive skill mastery, supported by experienced preceptors, enables a smoother transition into complex leadership roles and fosters greater job satisfaction. As a result, TSAM has been associated with significantly lower turnover rates compared to generalized or non-structured models, making it an evidence-informed strategy for improving workforce retention and operational continuity in clinical environments.

Jubinville et al. (2023) demonstrated that charge nurse training increases role readiness and reduces practice variation. Their findings support the use of validated, transferable training that bridges theory and practice, particularly when supported by experienced preceptors. Similarly, Kjelland et al. (2021) illustrated how TSAM translates learning into clinical impact through a tiered approach with deliberate coaching, feedback loops, and competency checks.

The literature consistently supports TSAM's value in reducing orientation waste, boosting nurse confidence, and improving workforce stability. As reported in studies by Beamer et al. (2019) and Kjelland et al. (2021), the model significantly improves confidence and retention, especially among newer nurses. These outcomes help optimize budget efficiency by reducing turnover and shortening onboarding timelines. Further, the model alleviates role-related anxiety and increases professional fulfillment. A workforce that understands expectations and receives consistent, supportive feedback is more likely to remain engaged and invested.

Staff Education Project Development

The staff education initiative was developed to familiarize charge nurses at an inpatient psychiatric facility with TSAM and evaluate its effect on their understanding and readiness to lead. The sample included ten currently employed charge nurses. A pretest of eight multiple-choice questions measured baseline knowledge of TSAM, helping to identify conceptual gaps and guide the training.

The educational intervention consisted of a structured PowerPoint presentation detailing TSAM's tiered framework, its relevance to psychiatric nursing, and the responsibilities of charge nurses in applying it. Five scenario-based role plays were

embedded to reinforce concepts through experiential learning and reflective discussion. These scenarios were tailored to real-world challenges in psychiatric settings, such as managing new hire orientation, addressing communication breakdowns, and delegating responsibilities under stress. Following the intervention, participants completed the same 8-item test to assess knowledge gains. A paired t-test was employed to evaluate the statistical significance of score changes. Microsoft Excel, Word, and SPSS were used for data analysis. The project design emphasized adult learning principles, practical engagement, and real-time skill application.

Results

Ten charge nurses completed both the pre-test and post-test assessments, representing a 100% participation rate among eligible participants. The demographic profile revealed considerable variation in leadership experience, with participants averaging 11.2 years in leadership roles (SD = 5.87, range = 5-22 years). This diversity provided valuable insight into TSAM's effectiveness across different stages of professional development.

Table 1

Descriptive Statistics: Pre- and Posttest TSAM Results

Variable	M	SD	Min.	25th Percentile	50th Percentile	75th Percentile	Max.
Years in leadership	11.2	5.87	5	5.75	10	15.5	22
Pre-test scores	91	7.38	80	90	90	97.5	100
Post-test scores	98	4.22	90	100	95	100	100
Differences in scores	7	8.23	0	0	5	10	20
Percentage improvement	8.33	10.14	0.00	0	5.56	11.11	25.00

Baseline knowledge assessment demonstrated that participants possessed substantial foundational understanding, with pre-test scores averaging 91 out of 100 points (*SD* = 7.38, range = 80-100). The relatively high baseline scores suggested significant prior exposure to leadership concepts, though gaps in TSAM-specific knowledge were evident across all experience levels. Individual performance varied considerably, with 25% of participants scoring at or below 90 points, indicating room for targeted improvement.

Following the structured educational intervention, posttest scores demonstrated meaningful improvement, averaging 98 out of 100 points (*SD* = 4.22, range = 90-100). The reduction in standard deviation from pre-test to posttest (7.38 to 4.22) indicated not only overall improvement, but also greater consistency in knowledge levels across participants, suggesting the intervention successfully addressed knowledge gaps while reinforcing existing competencies.

Statistical analysis using a paired t-test revealed statistically significant improvement between pre-test and posttest scores ($p = 0.02$), despite initially high baseline performance. The mean score increase of 7 points represented an 8.33% average improvement ($SD = 10.14$), with individual gains ranging from 0% to 25%. The variation in improvement rates reflects diverse learning outcomes influenced by factors such as individual engagement levels, preferred learning styles, and potential ceiling effects among those with highest pre-test scores.

Correlation analysis revealed a weak negative relationship (-0.53) between years in leadership experience and percentage improvement, suggesting that tenure did not significantly predict learning gains. This finding indicates that TSAM's educational value extends across all experience levels, challenging assumptions that seasoned leaders may benefit less from structured training interventions.

Limitations

Several limitations must be acknowledged when interpreting these findings. The small sample size of ten participants limits statistical power and may not adequately represent the diversity of charge nurse experiences across different healthcare settings. The study's single-site design at one psychiatric facility constrains external validity, as organizational culture and patient populations may differ significantly across healthcare systems. The high baseline knowledge scores (mean = 91) suggest potential ceiling effects that may have constrained the magnitude of measurable improvement. Additionally, the study relied exclusively on quantitative knowledge assessment through multiple-choice testing, which may not fully capture the complexity of leadership competency development. The absence of behavioral observations, peer evaluations, or

patient outcome measures represents a significant gap in understanding TSAM's real-world effectiveness in improving charge nurse performance and care quality.

Conclusions

Implementing TSAM as a structured training model resulted in measurable gains in leadership knowledge among charge nurses. The statistically significant results ($p = 0.02$) and the practical improvement in scores validate the intervention's impact. The project demonstrated that TSAM is not only an effective educational tool but also a strategic response to workforce instability, rising orientation costs, and inequitable training experiences. The findings affirm that TSAM supports job satisfaction, retention, and skill progression. From a fiscal perspective, TSAM contributes to long-term cost containment through decreased turnover and reduced onboarding inefficiencies.

Moreover, the TSAM approach addresses social justice by promoting equitable access to leadership development opportunities across diverse nursing populations. In the context of nursing education, social justice involves removing systemic barriers to professional advancement and ensuring that all nurses—regardless of their background, experience level, or employment status—have the same opportunities to gain skills, grow professionally, and contribute meaningfully to patient care. TSAM helps achieve this by standardizing the training process, offering structured learning pathways that reduce disparities in orientation quality and mentorship availability. For example, travel or contract nurses, who often receive limited onboarding, can benefit from the same tiered framework used for full-time staff, improving their role clarity and confidence. Similarly, nurses from underrepresented groups or those new to leadership roles gain consistent access to high-quality preceptorship and performance feedback.

This commitment to equitable preparation directly supports patient safety, staff morale, and retention across the workforce by ensuring equitable access to structured leadership development for all charge nurses, regardless of their entry point. In a healthcare environment characterized by growing demands and limited resources, such a framework fosters inclusivity, professional identity, and improved patient outcomes. To sustain the gains achieved, it is recommended that TSAM be formally integrated into the onboarding and ongoing development of all charge nurses. The model may also serve as a leadership pipeline framework, preparing staff nurses for future roles and establishing metrics to evaluate outcomes such as retention, turnover, and cost savings.

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Appendices

Appendix 1: TSAM Education: Pre-/Post-Test Quiz

Educating Charge Nurses in a Psychiatric Facility About the Tiered Skills Acquisition Model (TSAM)

Please circle your answer:

Age: 30-35 36-40 41-45 46-50 51-55 over 56

Gender: M F

Please place a number in the check box below:

Years of experience in leadership: ☐

Instructions: Circle the best answer for each multiple-choice question. Choose only one answer per question.

1. Which of the following best describes the Tiered Skills Acquisition Model (TSAM)?

A. A model for managing psychiatric emergencies
B. A multi-step framework for assessing mental illness severity
C. A structured approach for developing clinical and leadership skills through competency levels
D. A standardized patient handoff process

2. Which are the three main tiers of the TSAM framework?

A. Beginner, Intermediate, Advanced
B. Assessment, Training, Evaluation
C. Foundational, Intermediate, Mastery
D. Orientation, Preceptorship, Autonomy

3. What is the primary purpose of TSAM in nursing education?

A. To reduce patient admissions through faster care
B. To provide a pathway for staff skill development and standardization
C. To eliminate the need for orientation
D. To assign staff based on years of service

4. Which of the following is a benefit of using TSAM in psychiatric nursing settings?

A. Promotes faster discharges
B. Reduces the need for ongoing training
C. Enhances standardized skill development and staff confidence
D. Focuses only on crisis response

5. What role does the charge nurse play in staff development, according to TSAM principles?

A. Independent decision-maker with no involvement in training
B. Enforcer of disciplinary policies
C. Supporter of staff learning, mentor, and role model for skill development
D. Evaluator of medication compliance

6. In TSAM, what is the purpose of assigning mentors and using competency checklists?

A. To track PTO requests
B. To document patient outcomes
C. To support structured learning and evaluate progress
D. To create annual schedules

7. A new nurse is struggling with de-escalation during behavioral codes. How would TSAM help conceptualize this nurse's needs?

A. By identifying the nurse as needing punishment
B. By classifying them into the 'mastery' tier
C. By recognizing their position in the foundational tier and developing basic skill support
D. By transferring them to a different unit

8. A senior nurse wants to take on leadership but lacks confidence. How might TSAM guide their development?

A. Suggest they remain in their current role
B. Skip training and promote them immediately
C. Provide tiered learning focused on leadership to move them toward the mastery tier
D. Assign them to night shift duties only

Appendix 2: Power point presentation on TSAM

Title: Educating Charge Nurses on the Tiered Skills Acquisition Model (TSAM)

Subtitle: Walden University | NURS8702 DNP |

Date: June 25, 2025

Slide 1: Introduction

- Purpose: To educate charge nurses on the theoretical framework of TSAM.

- Scope: This presentation is informational only—no practicum or implementation is included.

Slide 2: Measurable Learning Objectives

- Define the principles and structure of the Tiered Skills Acquisition Model (TSAM).

- Explain the purpose and benefits of TSAM in psychiatric nursing education.

- Identify the roles charge nurses could play in staff development using TSAM.

- Interpret scenario-based examples through the lens of TSAM principles.

Slide 3: What is TSAM?

- Definition: A structured, tiered framework for skill acquisition in clinical settings.

- Tiers: Foundational, Intermediate, Mastery.

- Focus: Promotes structured learning and competency development.

Slide 4: Purpose of TSAM

- Supports progressive learning and confidence-building.

- Clarifies expectations for clinical and leadership skills.

- Provides a roadmap for structured staff education.

Slide 5: Benefits of TSAM

- Enhances staff confidence and competence.

- Standardizes skill progression.

- Fosters leadership and mentorship roles.

- Promotes patient safety and quality care.

Slide 6: TSAM Structure Overview

- Step 1: Assess current skill level.

- Step 2: Develop tiered learning modules.

- Step 3: Assign mentoring relationships.

- Step 4: Monitor progress and provide feedback.

- Step 5: Evaluate and refine the learning approach.

Slide 7: Role of the Charge Nurse

- Facilitator of learning.
- Mentor and support resource.
- Promoter of a safe and structured work environment.
- Knowledgeable about models like TSAM to advocate for staff.

Slide 8: Scenario 1 – New Graduate on the Unit

- Situation: A new nurse is unsure of how to manage behavioral codes.
- Discussion:
  - Where does this nurse fall in TSAM?
  - What foundational knowledge might they need?
  - How could understanding TSAM help clarify a development path?

Slide 9: Scenario 2 – Burnout and Disengagement

- Situation: A seasoned nurse is showing signs of burnout and inconsistent care.
- Discussion:
  - Could TSAM help identify areas needing reinforcement?
  - How might a charge nurse use TSAM awareness to support staff wellbeing?

Slide 10: Scenario 3 – Aspiring Leader

- Situation: A clinically strong nurse lacks leadership confidence.
- Discussion:
  - What TSAM tier might they be in?
  - What learning goals might apply?
  - How could a charge nurse guide them using TSAM principles?

Slide 11: Scenario 4 – Inconsistent Staff Practices

- Situation: Variable approaches to assessing suicidal ideation.
- Discussion:
  - How can TSAM help standardize these skills?
  - How might the charge nurse advocate for structured education?

Slide 12: Scenario 5 – Confused Orientation Process

- Situation: New hires report unclear expectations.
- Discussion:
  - What does TSAM offer to make expectations clear?
  - How might a charge nurse contribute to improving this?

Slide 13: Challenges and Considerations

- Staff availability and shift coverage.
- Scheduling training during high-demand times.
- Need for leadership buy-in for future model use.

Slide 14: Summary

- TSAM provides a structured framework for staff development.
- Charge nurses' benefit from understanding TSAM to better support staff.
- No implementation is required—this is an educational overview.

Slide 15: Questions & Discussion

- Invite participants to reflect on the scenarios.
- Encourage sharing ideas about potential applications in their units.