



Nurses: Leading Change and Transforming Care – Expert Opinion



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ABSTRACT

The Affordable Care Act represents the broadest changes to the United States' health care system since the 1965 creation of Medicare and Medicaid. This is one of the most pivotal moments in the history of nursing and we must act with deliberate and swift intention. Nurses can no longer be viewed as “just caregivers”. Nurses must be seen as leaders, influencers, advocates and change agents. To solidify this viewpoint, nurses must pursue these roles from the bedside to the boardroom, from the breakroom to the classroom. Transformation of nursing needs to occur and is intimately aligned in three broad areas: practice, leadership and education. Nurses as leaders must move beyond managing discrete parts of an organization to integrating the interrelationship of the parts through the utilization of systems thinking to achieve operational excellence. This “new view” provides the focus on healthcare transformation where it belongs—the design or redesign of systems and teams, reduction of waste and cost, and the improvement of outcomes.

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The Affordable Care Act (ACA) represents the broadest change to the United States' health care system since the creation of the Medicare and Medicaid programs in 1965.¹ From quality of care to cost, the ACA includes mandates for continued transformation of the health care system. The imperative to improve is not new, yet it is becoming increasingly urgent as challenges related to both quality and cost of care persist. Despite being the most expensive system among developed countries, the U.S. ranks lowest in key health outcomes including maternal health, infant mortality and many aspects of access to care. These and other safety and quality indicators have moved the conversation from “*We should improve our system.*” to “*We improve our system.*” Changes in reimbursement structures are also driving this shift as health care systems will no longer get paid for the quantity of care delivered, but rather the quality of care delivered. Rest assured, the transition from volume to value is already a tumultuous one as health care systems attempt the complex transformation necessary to achieve this imperative. (See [Tables 1 and 2.](#))

As much as the ACA provides an opportunity to advance improvement, it also serves as a call to action for nurses, with several sections of the legislation directly relevant to the profession of nursing. Nurses are being called to act and lead sweeping changes.^{2,3} Nurses need to assure care is safe, equitable, effective, efficient, timely and patient-centered with outcomes that are measurably better.^{4,5}

Call to Action

This is likely one of the most pivotal moments in the history of nursing and nurses must act with deliberate and swift intention. Indeed, achieving the needed change in our health care system rests upon the future of nursing, states Dr. Harvey V. Fineberg President, Institute of Medicine in the seminal Future of Nursing Report *Leading Change and Advancing Health* (FON report).² Nursing has long been recognized as the critical lever in the delivery of health care in the United States. Over three million strong, nursing is the most common vehicle and the healthcare role through which healthcare is delivered. In addition, research abounds that demonstrates an inseparable link between nursing care and patient care outcomes.^{6,7} As neonatal nurses who care for the nation's most vulnerable, what is the role of the nurse in managing and leading the cultural operational and system changes needed to realize a transformation of the health and care? The authors argue that nurses can no longer be viewed as “just caregivers”; nurses must be seen as leaders, influencers, advocates, system-thinkers and change agents. To solidify this viewpoint, nurses must pursue these roles from the bedside to the boardroom, from the breakroom to the classroom.

Culture and System Change

Nurses and other clinicians' are challenged in legacy hospital and health system cultures. Hospitals have functioned for hundreds of years within bureaucratic organizational structures that lay burden and impenetrable barriers to change and innovation. Many health care systems also rely on a limited workforce to manage clinical outcomes and enhance business profitability, while quality improvement models indicate the need for sufficient professionals to operationally support a team-based approach.⁸ Nursing roles have not yet fully evolved to

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Table 1

Offers the bedside clinician and the leader a framework for attainment of these new and critical tenants of practice and leadership skills for neonatal nurses.

	Clinical/Bedside Nurse	Nurse Leader
Lifelong learning	Recognize that this is every individual nurse's responsibility. Assess your formal educational status. If you don't have your BSN or higher levels of formal education NOW IS THE TIME.	Assess your formal educational status. If you don't have your BSN or higher levels of formal education NOW IS THE TIME. It is essential if you are in a formal leadership role for you to model the way for your teams. Know your unit's/department's data Associations are essential. Who is in your network? Are they of like mind? Are you involved in your profession outside of the walls of your hospital/organization? Nurses are stronger together. Develop your vision No matter where you are in your career or what role you are in the National Association of Neonatal Nurses has an education and peer to peer support that is as accessible as the click of a mouse. (www.NANN.org) Being a leader can be lonely and isolating. Participating in your professional association's leadership opportunities and offerings is essential and one that you will come to lean on. You will learn, stay current in your practice, develop a national network where sharing and supporting of each other are the rewards. In addition to NANN we recommend highly becoming a member of the ANA and AONE. The tools and opportunities for professional development are endless. You can then bring state of the profession information to your team and organization. You will be able to contribute more fully in your annual nursing strategic planning sessions. Partner with your Human Resources Colleagues to leverage existing hospital resources. Hospitals typically have courses available such as Crucial Conversations. Evaluate or develop the nursing workforces succession planning and align with FON report and other IOM reports that outline strategies for successful healthcare leaders and models to improve health of the nation.
Associations	Associations are essential. Who is in your network? Are they of like mind? Are you involved in your profession outside of the walls of your hospital/organization? Nurses are stronger together. No matter where you are in your career or what role you are in the National Association of many professional associations offer education and peer to peer support that is as accessible as the click of a mouse. (For additional examples see citation).	Accountability is key! We all need accountability partners. Team with others of like mind and values. Develop a communication plan for you and your peers to push this agenda forward. Use the FON report for an evidence based message. Develop a coalition or shared governance. Develop a communication plan for you and your team and the department as a whole. Use SMART goals in your action plan. Where will your team be in 3, 6, 9 months? How will you know your team is successful? Perform monthly self-evaluations. Are you meeting your goals? Do you need to re-evaluate? Don't stop learning. Life happens—reach out to your accountability partners for support.
Deliverables	Accountability is key! We all need accountability partners. Team with others of like mind and values. Develop a communication plan for you and your peers to push this agenda forward. Use the FON report for an evidence based message. Most importantly develop SMART goals. Where will you be in 3, 6, 9 months? What is the end goal?	Be transparent. Share progress toward unit goals with your medical colleagues. Partner with them to stay on target and achieve maximum success. Don't let declining scores languish. They will not improve unless you address them head on. Reach out to your peers to share best practices; we all can learn from each other. This will also strengthen your professional relationships. Use your professional associations and national organizations. If you are not a frequent visitor to the IHL.org website DO IT NOW. Incorporate regular reporting of outcomes to your staff in monthly meetings and daily huddles. Plan individual, unit wide and public celebrations. Your peers and your teams work wonders every day.
Evaluate	Data is an essential tool to bring transparency to practice. Perform monthly self-evaluations. Are you meeting your goals? Do you need to re-evaluate? Don't stop learning. Life happens—reach out to your accountability partners for support. Data is crucial; it creates information to determine implications for practice, and helps nurses and nurse leaders understand the impact and meaning of data to drive quality practices across the continuum.	Make recognition a part of your everyday—staff need to hear this from you. Start each meeting with a "reflection" of something that made a difference in the unit. Take time for you. You cannot give to your patients, their families and your staff if you don't take time to reflect, rejuvenate and dream.
Reflect	Celebrate accomplishments and recognize your peers and inter-professional partners for the difference that they make every day.	

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surmount these cultural and bureaucratic obstacles. And evolve they must if nursing is going to achieve the level of culture change that leads to sustainable improvements in care, quality and cost.

Hospital and health system organizational structures must adapt and place nurse leaders in positions of authority to augment the delivery of exemplary care, *while at the same time*, nurses must hone their leadership and advocacy skills. Sadly, nurses are often viewed as an expense line item and simple task providers. Nurses' salaries often represent the largest line item of a hospitals' budget, and when hospitals are looking at ways to improve efficiency and cost it takes a very informed and strategic CEO and CFO to resist the urge to cut the operational personnel at the point of care, where the patient, the family and the nurse interrelate. Nurses must be equipped to challenge these notions in a skilled and professional way. Nurses must translate the needs of our increasingly complex patients and strategically lead care transformation to influence health care across organizational settings

and infrastructures. To create and mold a new system, nurses must first change as individuals. In summary, the cultural change necessary to institute swift and lasting impact through the levels of the organizational system has not kept pace with the increasing demands on nurses. Nurses are required to assume more and more responsibility at the bedside and leading system change. However, the safety, quality and leadership expectations are not supported by the organizational culture or the health care system. This leads to shortchanging the advances in patient safety and outcome, and the experience of moral distress by nurses.

The number of nurses alone has the potential to evoke widespread changes in healthcare culture IF and ONLY IF nurses have the practice, education and leadership infrastructure in place. Transformation needs to occur in these three broad areas: practice, leadership and education given an emphasis on process change that is based on systems thinking.

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