

ALSN Continues the Conversation

Vol 45 Issue 2

Leading Through Chaos: Perspectives From Nurse Executives

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Nurs Adm Q. 2021 Apr-Jun 01;45(2):118-125. doi: 10.1097/NAQ.0000000000000456.

Abstract

The COVID-19 crisis created unique and interesting challenges for health care systems and changed how health care professionals delivered care. Evidence suggests that leadership skills remain of utmost importance during crises as it is the leader who often determines the response of the follower. A descriptive qualitative approach was used to ascertain the essence of nurse executive leadership and innovation during the COVID-19 crisis. Nurse executives were recruited via personal invitations to participate in the study. Participants were asked about their current challenges of COVID-19 on health care delivery, their leadership style, and what innovative processes their teams deployed. Using a thematic analysis approach, 3 themes emerged and resonated from the interviews: the importance of communication; the need for leadership presence; and mental toughness. With any health care crisis, leadership is essential to guide followers. As demonstrated by these findings, communication, leadership presence, and mental toughness are 3 key components to promoting and providing quality care in an austere, complex, and changing health care environment. Further understanding of the roles of these key concepts may add insight into nurse leaders and leadership development.

Discussion Questions

1. This study was completed during the COVID-19 pandemic. Do you think that the pandemic was a confounding variable on the results? Discuss how the results may be different or influenced in a non-pandemic environment.
2. Leadership is a well-researched concept, yet we continue to strive to understand this complex concept in nursing and care delivery. Reflect on how the findings of this study add to understanding this important concept and its influence on nursing and nursing practice.
3. Mental toughness is a term frequently used in sports and is rarely found used in nursing. In this study, we used the term “mental toughness” to describe the nurses’ response to the pandemic. What other terms could be used to describe the attributes found among the nurses? How do these terms relate to mental toughness?

POST Date: May 15, 2021

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Vol 45 Issue 2

Planning for the Pandemic: A Community Hospital Story

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Nurs Adm Q. 2021;45(2):85-93. Doi: 10.1097/NAQ.0000000000000459

Abstract

When the Covid 19 pandemic affected New York State, Federal and mostly State, mandates were given to hospitals to prepare for the expected influx of patients. This is a community hospital's planning journey that includes preparing for placing patients, educating caregivers, matching the abilities of the available caregivers with the needs of the patients, securing needed equipment and supplies, and caring for the caregivers. Planning for patient placement resulted in a phased-in guide, accommodating seriously and critically ill affected patients. Education and training were initial and ongoing, rapidly changing as new information became available. Effective care delivery models that focused on team were modified depending on the needs of patients and staff competence. Securing and maintaining equipment and supplies were challenging and caring for the caregivers was a priority. Working as a team, this community hospital developed a roadmap that was effective in planning for the surge and allowed the hospital to maintain a safe environment for staff and patients who received quality care in difficult time.

Discussion Questions:

1. The pandemic plan implemented by the author's organization focused on the following key areas: 1) preparing for patient placement, 2) educating caregivers, 3) matching caregiver abilities with the needs of the patient, 4) securing needed equipment and supplies, and 5) caring for the caregiver. Reflect on your organization's response to the pandemic. Which of these key areas exposed opportunities for improvement in your organization? What strategies could nurse leaders implement now to be better prepared for future incidents?
2. The author identifies several lessons learned as a result of the organization's response to the pandemic:
 - When expanding bed accommodations, keep staffing in the forefront.
 - Education changes as frequently as the research becomes public.
 - Find work for all staff who wish to contribute.
 - This is collaborative, inter- and interdisciplinary work.
 - There must be continual surveillance of equipment and supplies.
 - Caring for the caregiver cannot be underestimated.

What were the key lessons learned by your organization? What strategies could nurse leaders implement now in response to the key lessons learned?

3. Much of the planning and the lessons learned in this article focused on meeting the needs of patients and staff. What if any needs of nursing leaders were identified as a result of your organization's response to the pandemic? What actions need to be taken to ensure nurse leaders are supported in order to effectively respond to future incidents?

POST Date: June 15, 2021

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Vol 45 Issue 2

Has the COVID Pandemic Strengthened or Weakened Health Care Teams? A Field Guide to Healthy Workforce Best Practices.

Thompson, Renee, DNP, RN, CSP; Kusy, Mitchell, PhD

Nurs Adm Q. 2021;45(2):135-141. doi: 10.1097/NAQ.0000000000000461

Abstract

During the 2020 global pandemic crisis, some health care teams pulled together while others fell apart. The teams who pulled together put aside their differences and became stronger, putting their patients first and then each other. Those teams grew stronger, but some teams completely fell apart. They spent their days nitpicking, complaining, and arguing—making decisions based on what was best for themselves, not patients or their coworkers. The common denominator in determining how well teams performed was the leader. Employees looked to their leaders to successfully lead them through crisis, whether it was on a small or global scale. Depending on leader behaviors, the leader strengthened or weakened the team; trust was built or broken. That is a heavy burden to carry knowing that employees were so dependent on them and how they showed up every day. What lessons can leaders learn from the coronavirus-2019 (COVID-19) pandemic that can help them strengthen and sustain a healthy, professional, and supportive workforce culture during a crisis and beyond?

Discussion Questions:

1. The authors discuss an uptick in burnout and disruptive behaviors (including bullying) reported by many nurse leaders as a result of the pandemic and the resulting new norms. What individual and team behaviors emerged in your organization/unit during and following the pandemic? What was the impact of these behaviors on the team/unit performance?
2. Broken promises and ignoring disruptive behaviors were two common mistakes from frontline leaders identified by the authors that contributed to team dysfunction. What leadership actions observed within your organization contributed to team dysfunction? What leadership actions facilitated team dysfunction?
3. Moving forward, what key leadership behaviors will need to be strengthened within your organization to ensure a healthy, professional, and supporting workforce culture?