Releasing our attachments to the past

By Rose O. Sherman, EdD, RN, NEA-BC, FAAN

JAKE, a critical care nursing director, works for a large healthcare system that has invested

beavily in testing the use of robots to support operational tasks and provide new ways for physicians to interact with patients. During his monthly staff meeting, Jake presents an overview of the robotic products and what they're designed to do. He's surprised at how some of the senior nurses react; they immediately criticize the initiative as just another attempt to reduce staffing costs and dehumanize health

The meeting quickly lapses into a discussion of the "good old days" in nursing. Jake explains that the robotics venture is exploratory and the jury is still out on this cutting-edge technology. Although he supports his organization's willingness to be an early adopter, some of his staff clearly feel otherwise. He realizes part of his role as a leader is to help them release their attachments to the past and embrace innovative changes.

Over the past decade, the pace of change in healthcare delivery has been relentless. Leaders like Jake have been challenged to help staff adapt to these changes. Tim Porter-O'Grady, an expert on organizational innovation, conflict, and change, observed that part of nurse leaders' work is to "close the door on old models of health delivery and clinical work...and face the future viewing the entire landscape to develop a workable vision."

Helping staff release their attachments to the past and embrace new innovations can be hard work, as Jake will learn. When we're attached to something—be it a person, situation, or practice—we want circumstances to be a certain way and tend to resist changes in our expecta-

Surrendering your attachments and embracing innovation can be difficult but liberating.

> tions. Change can be quite emotional for some people. Often, it means letting go of something you've valued in the

Why we attach to the past

Life can be a delicate balance of holding on and letting go. Changing our viewpoints on issues or abandoning old behaviors involves both a loss of what was and a leap into the unknown. This can make us feel insecure about our workand it can be exhausting. There's safety in what we know and risk in what we don't know.

For some people, it's a challenge to think positively about the creative possibili-

ties that accompany innovation. That's why the reaction to any change can be so emotional. Nursing staff may worry that introducing robots into health care could mean fewer jobs. Older nurses may feel insecure about their technological skills and lack confidence in their ability to master new products or processes. In contrast, younger nurses who grew up in the digital age view technology as an integral part of their work and may react differently.

Five strategies to help staff let go

Jake needs to understand that as a leader, he plays a key role in framing the context of change for his staff. His support of his organization's new initiative is important in gaining staff buy-in and can help his staff release their attachments to old ways of delivering care.

(continued on page 40)

(continued from page 38)

Introducing robotic products into the workplace involves what management educator Barbara Mackoff describes as an adaptive change. This type of change requires us to let go of old ideas and experience some uncertainty and loss in what's comfortable. To help staff let go, use these five leadership strategies.

Meet staff where they are in the acceptance and transition process.

Not everyone accepts change in the same way or on the same timeline. Leadership expert Kerry Bunker sug-

gests that to avoid frustration, we must meet people wherever they are in the change process. Accept that some people won't be as far along as you might want them to be. Where they are depends on their comfort with change (ability to take on new learning) and capacity for change (ability to learn what's required). As a leader, you need to accept where people are in the acceptance process.

Frame the issues in easily understood language.

With the changes stemming from healthcare reform and declining reimbursements, organizations have good reason to look for new and different ways to in-

novate their care delivery. Jake should frame the robotics initiative as an innovative way to help his staff see the need for new technologies. Staff depend on their leaders to help them understand the meaning of innovations. How leaders use language to frame people, situations, and events has important consequences for how staff make sense of the world and their actions.

3 Recognize people have different responses to change.

Bunker proposes that a person's response to change can occur in four distinct patterns—entrenched, overwhelmed, poser, and learner. (See Four responses to change.)

Help people identify where and how they can fit into the change.

In most situations where we're asked to change, we're replacing the old with the new and unfamiliar. But



Four responses to change

When confronted with the need to make a major change, people fall into one of four distinct patterns.

- Entrenched staff hope to wait out the change. ("Maybe it won't happen until after I retire.")
- Overwhelmed staff have high anxiety levels and may feel depressed or
- Posers show a high level of confidence in their ability to deal with change but may lack the self-awareness and competence they need.
- Learners feel challenged and stretched but are determined to move forward. They seek learning opportunities to expand their skills in response to the change. They can be their leader's best allies in helping other staff transition during changes.

change can lead to a new, brighter future—and leaders need to convey this. For instance, Jake can cite recent changes in the hospital environment, such as introduction of electronic health records and medication barcoding, to demonstrate to staff how they've been able to incorporate these innovations into their current practice successfully. Leaders who stay calm, truthful, and optimistic in their communications help prevent the spread of misinformation and reduce staff anxiety.

5 Give people hope.

Every situation has a silver lining, and leaders need to be the first to help everyone see what it is. An optimistic attitude can be energizing and conta-

> gious, motivating your staff to do their best. To achieve success, you need to expect success.

Focusing on the future

For many nurses with long careers, the chaos and complexity of today's environment challenges the sense of order. When we feel fearful, clinging to what worked in the past can be comforting.

Leaders should be skilled in working in the present with an eye toward the future. When you think about the past, it's good to reminisce but important to keep in mind the phrase, "That was then. This is now." Here are three

key ways to stay future focused.

• Track trends. Major trends in our environment—work, home, or the world—almost always are preceded by many signs, large and small. If you've been paying attention to healthcare trends, such as use of robotic technology in manufacturing and operating rooms, applying this technology to other areas of health care

shouldn't be a surprise.

• Look for opportunities to reinvent.

Management guru Peter Drucker
said, "The best way to predict the
future is to create it." This is great
advice. If things clearly are changing
and innovation is needed, why not
embrace the change and develop an
innovator's mindset? Just because you've been
doing things a certain way doesn't mean that's the
best way to do it now. When you're passive about

Talk to younger nurses. Investing in relationships with younger team members helps you understand today's environment. The pace of change in health care doesn't seem to frustrate younger nurses. In their short careers, they've learned to adapt quickly to a rapidly changing environment. They're full of optimism and can give you great hope for the future.

change, it's easy to feel like a victim of what's hap-

pening. You'll be much more willing to embrace

The future belongs to those who create it

When talking to his staff about their attachment to the past, Jake could use the metaphor of a ship: When the ship has left the dock, you're either on board or not. The ship won't head back to port to pick you up.

Sometimes, life and work events match our desires; other times, they don't. Surrendering our attachments to the past is a choice, but an important—and potentially liberating—one. Whenever you find yourself talking about the good old days of nursing, reflect on what's to be gained by doing that and whether anyone's listening. The future belongs to those who create it.

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(continued from page 35)

Donning and doffing isolation gear properly takes time. In some cases, the nurse or a family member will be in the patient's room only for a few moments, so it may seem wasteful to use so many disposable products for such a brief time. Nonetheless, CRE infection can be deadly. The cost of disposable gowns and gloves—and the time it takes to use them—is trivial compared to the cost of treating a patient with CRE infection or containing an outbreak. (See Educating family members about contact precautions.)

What's more, staff members must model appropriate behavior 100% of the time. If visitors see some workers aren't complying fully with isolation requirements, they may think they don't need to comply, either. On the other hand, if staff members are complying with isolation guidelines but some family members aren't, upper-level

management may need to get involved in visitor compliance.

Don't be afraid to speak up to help protect your patients.

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