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Editorial

Leading Through Crisis



“Just remember you are BRAVER than you believe, STRONGER than you seem and SMARTER than you think” Winnie the Pooh

These past 6 months have provided the steepest learning curve for most of us- certainly for me. And the learning continues as we learn to deal with crisis upon crisis. As I have talked with other nurse leaders about their experiences is clear that while they have been challenged and stretched beyond what many thought they could tolerate they have come through this first 6 months stronger than ever. So I thought I would pass on some of my observations shared by some.

What is a crisis? A crisis occurs when a situation/ event/ threat occurs that puts the individual and/or their organization at risk. The crisis threatens the usual operations and processes of the organization. and can arise from internal or external forces. This spring and summer the overwhelming majority of the leaders in the Academy were (are) faced with two crises- that associated with the pandemic and that associated with long overdue racial equity and justice. While each of these had different ‘roots’ and effects, they also had many similarities in what they required from nurse leaders. Those we work with were and are markedly affected by both crises- some to their core. In both cases, this time it became clear that individuals were faced with a choice: either open themselves and grow, or isolate, stay closed and wither as a leader.

A crisis feels different if the threat is internal versus external. It feels different if affects only a segment of our constituencies. And, finally, it feels different if the locus of decision-making above and below the leader is incongruent or misaligned. A crisis presents a leader with complex scenarios with no certain answers. The future is ambiguous and, in the cases of coronavirus, the available evidence kept changing. The consequences to one’s decisions can be high -risk and can include impacts on health, finances and emotional/ mental well-being. As a result, people, including members of one’s team, are often fearful of making a decision. Leaders who struggle with decision-making will not be able to make timely and effective decisions and interpersonal relationships can become strained within the organization. To the surprise of many effective leaders during stable times may not perform as well in crises, and in fact can make things worse.

So what are effective strategies for dealing with a crisis in one’s organization?

Communication. It is well known that in a crisis everyone seeks information. Every leader must know

the facts, as the facts present themselves and understand as new evidence comes in these ‘facts’ may change. Listening to others’ fears is crucial. That is, if they share them -often these fears just show up as ‘everyone is saying’ or rumors that run rampant throughout the informal networks in the organization. Yet knowing the facts, being in informed conversations at high levels and not sharing with others means people will fill the information void and make up explanations consistent with their fears.

Communication about the crisis situation can never be provided soon enough, regularly enough or be inclusive enough. Various media need to be used- written (weekly updates perhaps), verbal and visual (ie. town halls) and social media platforms. People want to know 1) what is the state of the crisis, 2) what is being thought about and planned for and 3) what they can do to take care of themselves, their patients, their community and/or their students. Providing time and space for questions/concerns is essential during any communication. And listening, taking feedback and then sharing later what was or wasn’t changed and why, is also key to keeping rumors and fears from escalating and maintaining trust.

Building a diverse team of core decision-makers. In our health systems during the early stages of covid was often called the “Incident Room”. Nurses were recognized as key leaders in this pandemic and care of those who were hospitalized and so critically ill and key members of these teams. The best of our profession brilliantly stood out for the American people as knowledgeable, caring professionals who were the heart and bedrock of the health care response. Sometimes in a crisis additional members need to be consulted. We now see the power of a diverse team which brings complementary expertise, strong and varied networks, credibility with various constituencies, and perhaps most importantly different perspectives on *same* problem. In this crisis this diversity allows the responsible leader to maximize potential scenarios when trying to decide what the best options and plans A, B, C+ could and should be. This diversity of networks, credibility and ideas of course only works if the team is all on the same page when the decision gets rolled out and every member of the teams is strong enough to defend the group decisions. Hence very frequent meetings between team members is needed.

Maintaining resilience. All of these leadership actions have added hours and hours of meetings, consultations with those who are others in higher levels in the organization, as well as those who are lateral.

People in each organization were hurting, isolated and stressed. Typical trust bonds were strained and sometimes broken. These various stressors mandated each leader find a way to regularly find some way to gain perspective, get away (mentally and emotionally if not physically), and refresh. For me checking frustrations every day at some point in the evening was essential. Some leaders chose yoga, meditation, connecting with families and friends unassociated with the work environment to be very useful to reduce stress and enhance resilience. And finally giving oneself grace when one does fall down, making a less than optimal decision, saying something hurtful to others, it is essential to those one leads (and oneself) to get 'back up' and move forward.

I am amazed how strong the nurse leaders I have been working with continue to be- day in, day out. I have always admired my nurse colleagues and it feeds my soul to see others in health care, academe, and the community realize how strong, knowledgeable and caring we are. No one knows with certainty when this will end and I for one hope the growth lessons learned stay with me.

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