



**Healthcare Rx – Part II**  
**Creating Environments That Nurture Collaboration: Essential Responsibilities of**  
**Leadership and Staff**  
**By Marty Jacobs**  
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We are constantly bombarded these days with messages about how to survive during these difficult times – that somehow if we just hang in there and hunker down, we’ll recover and everything will return to normal. The hard reality, though, is that organizational life is evolving on multiple fronts – financially, technologically, environmentally, politically, to name a few – and the need to adapt to those changes is greater than ever. Those unable to adjust are left behind, or worse, become obsolete.

What can organizations do to avoid such a fate? Clearly an organization’s ability to learn and implement change quickly are key, but instituting organizational change is a whole systems endeavor – everyone must play a part – and nothing will happen if the organizational culture doesn’t truly support everyone in the effort. Organizational change involves taking risks, and most employees won’t take risks unless there is a certain level of safety to do so.

Creating a collaborative environment is a basic premise for establishing learning organizations, and it is sometimes the hardest hurdle to get over in the quest for becoming a learning organization. The organizational culture is what determines the level of safety employees’ experience, and underlying assumptions, which drive behavior, create that culture. Although managing culture is a leadership function, shifting the culture cannot happen without the effort of everyone involved. The following example will help us examine this process of creating a healthy environment from both the leadership and employee levels:

A nurse manager has found out that there have been two exit interviews with RNs who have left her unit because of bullying behavior. Several long-term and full-time RNs have been implicated. Some behaviors have included not helping, excluding, talking behind backs, rolling eyes, and muttering snide remarks, all aimed at newer staff. The manager is concerned about the bullying behaviors as well as the veil of silence surrounding incidents. She suspected that the nurses who quit were unhappy, but her efforts to find out why were unsuccessful. \*

**Leadership Responsibilities**

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Edgar Schein in *Organizational Culture and Leadership* defines culture as “a pattern of shared basic assumptions that was learned by a group as it solved problems...that has worked well enough to be considered valid and, therefore, to be taught to new members as the correct way to perceive, think, and feel in relation to those problems.” He goes on to say, “If leaders don’t manage culture, the culture will manage them – and everybody else.” Here are some ideas for how the nurse manager in our example can manage culture in order to create a safe environment:

- **Identify assumptions:** The nurse manager will need to approach this task delicately and, perhaps, indirectly, since a direct confrontation of those implicated may only serve to alienate them further. She will need to pose the situation from the perspective of improving patient outcomes, morale, and ultimately organizational productivity. Although identifying assumptions is typically accomplished with the whole group in dialogue, because of the sensitivity of the situation, she may want to first start by meeting with various staff individually. She can then use that information to develop a set of what she believes are underlying assumptions and present them to the whole group for their reaction and feedback.
- **Think systemically:** Rather than assigning blame, thinking systemically involves looking at the whole for patterns and trends over time to uncover systemic root causes. In the same meeting, the nurse manager could present data on turnover in the unit and ask staff to brainstorm why there is such high turnover. The question needs to be framed in such a way that it does not elicit a “blame the victim” mentality. For example, she could ask, “What does our unit and/or organization do to create higher than desired turnover?”
- **Determine the desired state:** At this point, it will be important for the nurse manager to guide her staff through a process of imagining what the unit might look like when everything is functioning well. It is critical for success that everyone who needs to implement the desired state be involved in its creation.
- **Encourage employees to challenge the status quo:** Challenging the status quo links back to identifying the underlying assumptions that drive behavior. Once the unit is able to identify those assumptions and has determined a vision for the desired state, they can then begin to figure out how they will think and act differently. Bystanders of bullying who do nothing will need to be challenged to step in, and perpetrators will need to be held accountable for their behavior and the ultimate impact it has on patient outcomes.
- **Model the desired behavior:** The nurse manager needs both to set clear expectations for acceptable behavior and model it. In addition, she needs to hold people accountable when they do not meet those expectations. The focus, however, should not be entirely defined by corrective action. Indeed, the center of attention should be on positive reinforcement when staff are making progress and working well together.
- **Make a commitment for the long haul:** Changing an environment that has tolerated bullying takes time. The nurse manager will need to be patient and engage in continual dialogue with her staff. It will also be important to set realistic benchmarks so the unit can celebrate success along the way.

## Staff Responsibilities

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Everyone in an organization is responsible for creating a safe environment that is free of bullying and harassment. Although front line employees may have limited formal authority for implementing change, their personal influence is only limited by their self-image. Here are some things individual staff members can do to create a more positive environment:

- **Examine your own behavior:** Each staff member needs to ask the questions, “What am I doing that contributes to the problem?” and “What can I do to make it better?” Moreover, staff members need to determine what level of support they need to make changes. For example, if staff have identified that they are contributing to the problem by ignoring bullying behavior, then they need to make an effort to expose that behavior without fear of reprisal. The nurse manager and the human resources department need to step up to the plate to support employees who out bullies.
- **Think systemically:** Like the manager, the staff needs to understand why things happen the way they do and not look to place blame. An organization’s culture is a reflection of the beliefs and behaviors that are accepted as valid, whether overtly or tacitly. Each staff person can influence the system either negatively or positively – the choice is his or hers.
- **Balance advocacy with inquiry:** Most of us are accustomed to entering into a discussion with our defenses securely in place. What this means is that we often do not hear what others are saying. By balancing advocacy with inquiry, we take as much time to understand the points of view of others as we do in explaining our own point of view. Staff can start this process with inquiry, sending the message that they want to comprehend why there is high turnover and/or why their peers engage in bullying behavior. The key outcome of balancing advocacy with inquiry is to develop a common understanding.
- **Set boundaries:** If the nurse manager has set clear expectations for acceptable behavior, then the staff can hold each other accountable for adhering to those expectations. They can also applaud each other in their accomplishments.
- **Be proactive:** In organizations that tend to be hierarchical in nature, becoming proactive can be very challenging. This is where shifting your mindset is critical. The staff in the unit does not need to wait for their manager to discover the problem and step in to fix it. They can take action when they are clear that patient outcomes may be compromised, and they need to know that their manager will back them up.

Creating a safe environment can be challenging work, and it requires the efforts of everyone involved. Understanding the underlying assumptions that created the current state, determining what the desired outcomes look like, and applying patience and an open mind will help this unit get back on track.

Next topic in the series: developing a shared vision.

*\*Thanks to Beth Boynton for developing this example.*

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Resources:

*The Fifth Discipline: The Art and Practice of The Learning Organization*, Peter M. Senge, 1990.

*Organizational Culture and Leadership*, Edgar Schein, 2004.

Society for Organizational Learning (SoL) (<http://www.solonline.org/>).

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