Executive Summary

- Do health care leaders worship at the altar of efficiency to the point that the effectiveness of what we do is impaired?
- Busyness and stress physiologically increase health risks and bad outcomes.
- Unless we have slack time in our organizations, we will lack agility, retention of key personnel, or an ability to invest in the future by rethinking present processes.
- Nurse leaders must be the architects of participation and allow staff to unleash their genius, reinvent health care, and fix health care from the inside out.

Busyness and the Outcomes

Health Care is Challenged! We are told continually that we cannot deliver the kind of care that our patients and their families want. Yet we spin our wheels and essentially run our organizations in the same way they have operated for years. In nursing and patient care, we cannot take credit for very many revolutionary ideas that have created significant change in care delivery. We added technology and complexity on top of higher acuity, but ask why the quality of the patient care has not changed appreciably. Could the problem be that we are committed to busyness, but not to innovation and effectiveness? Could it be that we can’t reinvent ourselves because we are too busy? Change doesn’t happen without thought. If we asked staff nurses how much time they have for thinking and collaborating about developing significant change on their unit and in their facility, what would their answer be? If we asked the same question of managers and directors, how would they answer? Could it be that we worship at the altar of efficiency to the point that the effectiveness of what we do is impaired?

Beyond Busyness: Creating Slack in the Organization

It is a common experience to enter an ambulatory care setting or an inpatient unit and immediately be confronted with a culture of busyness. The turbulence of the unit can be felt immediately and experienced physiologically as one’s stress level increases. The physiological sequella of chronic stress on staff, patients, and patient safety is well documented. But the busyness goes on in spite of extensive evidence of the harm it produces.

We are also challenged by authors such as Spear (2005) who tell us that we need to heal health care from the inside out. This author documents success in health care organizations where transformation of the workplace created dramatically better outcomes. Unfortunately, in many settings, managers and staff do not have the time to think and analyze and build new models and interventions. They consider themselves lucky if they have a meal break. We know the journey to Magnet and Baldrige, and the quest for excellence in patient care outcomes can transform an organization. But the roadmap to these outcomes can’t happen in a culture of busyness. Knowledge workers need space in their workday to balance the need to complete tasks and to also invent more efficient ways to complete those tasks.

Busyness and stress physiologically increase health risks and bad outcomes. For example, nurses in a University of Michigan study were 70% to 80% more likely to deliver premature and underweight babies if they worked more than 40 hours per week and experienced high stress (Fraser, 2001). Rates for cancer and other chronic illness are also related to stress and long work hours. The human body is not a machine.

The effect of busyness on managers is also a problem. Bruch and Ghoshal (2002) warn to “beware the busy manager.” Their thesis is that managers are not paid to make the inevitable happen. Maintaining the status quo is not their job. The role of the manager is to move the organization into innovative and surprising ways and to make difficult and impossible things happen. These managers and leaders are the ones who truly make a difference but they are not necessarily the busy managers. Successful managers are the thoughtful, introspective ones who think! They involve their staff, present them with meaningful challenges and real choices about how they can meet the challenges, and solicit ideas and solutions from their staff. These managers are the ones who can fix health care.
from the inside out. But they need slack in their schedule to make this happen.

We are challenged to transform health care from the inside out, prevent the physiological sequelae of stress in our staff from overly aggressive schedules and levels of productivity, create a healing environment for our staff and patients, and create enough think time in the organization that managers, leaders, and staff can address these very important issues. In the Japanese systems of improving quality, an important principle is seeking ideas and processes to improve quality and outcomes directly from the front line. Without time built into the schedule for this very important work, the organization will stagnate. If we fail to meet this challenge, we are doomed to repeat our work processes while expecting different outcomes, which is the definition of insanity!

So where does one find think time in the schedule in the over-stressed arenas of health care? The issue might be summed up in the quote, “Pay me now or pay me later.” If we can’t provide opportunities for growth of staff and transition our work into new and more effective ways of delivering health care, we will continue to create the cycle of burnout, resignations, turnover, vacancies, and disengaged staff. We truly pay a high price for operating an organization in this manner. We pay on the downstream side in the extreme costs of errors, and the cost of the turbulence it creates in our systems. Without think time in the organization, we lack the agility for the organization to quickly evaluate the need for new technologies, or cost-effective staffing when the census changes suddenly. We need the think and creative time now to build the desired future and avoid the costs of having to pay later. Think time provides the soil in which creativity and professional practice can grow and should be an important concept in organization culture.

Creating Slack in Organizations

DeMarco (2001) introduces the concept that unless we have slack time in our organizations, we will lack agility, retention of key personnel, or an ability to invest in the future by rethinking present processes. His thesis is that 100% plus productivity will cripple an organization because it stops the rebirthing processes that are needed for future success. The harm this does to people and to safety and quality outcomes make that goal expensive rather than cost effective. So what does that tell us for staffing?

We know the best organizations have Magnet® status. And the Beacon Awards from the American Association of Critical-Care Nurses, which recognize individual critical care units, are also difficult designations to earn. The basis for these awards is the empowerment of the staff to take accountability for their practice and to support them to determine innovative ways of delivering care. The process of thinking, collaborating with physicians and other professionals, reviewing and improving the quality data, and mentoring new people effectively is very cost effective, but won’t happen unless there is some slack in the organization. Consequently the Magnet and Beacon awards will not be achievable. Magnet hospitals and Beacon units are stellar because they have many good minds involved in making things better.

Utilizing Slack

Taylor (2006) reports on companies where the culture believes the most brilliant ideas come from the staff and not the senior managers. The concept of an “architecture of participation” rather than the ideas of visionary executives is the infrastructure that allows the quiet genius of the organization to unfold and build major changes and innovations.

Health care leaders cannot meet the challenge of transformation unless the “architecture of participation” is the culture of health care. Knowledge workers are seen as people who have the ability to use their minds and not just their hands to change the workplace. Spear (2005) notes that what sets companies apart is the ability of managers to develop and encourage their subordinates to design improvements that create operational excellence. In these companies, managers transform themselves from the role of a rescuer into a problem solver. Nurses and health care workers cannot do this work when their work assignments consist of only delivering the care and not having the slack time to develop new insights to fix health care.

When people only perform tasks and have no input into the opportunities to improve the work, the best and brightest will leave for opportunities to utilize their expertise more effectively (DeMarco, 2001). We know that many nurses leave hospitals and other health care settings because they are not treated as knowledge workers who can design and experiment with process and innovations. They leave because the productivity targets leave them with no time to consider, experiment, and grow. Rather, DeMarco (2001) tells us that the paradox of leadership is that in order to achieve great outcomes, you must give up control. He uses the analogy of a gifted helmsman who can steer with the lightest touch because he knows that the use of the rudder causes drag. By sensibly designing in slack time, great things happen in organizations.

Financing Slack

How do you pay for slack in your organization? Slack is an investment in the staff and in the future of the organization. You can’t afford not to have think time. The investment must include education in improving the process and outcomes (Spear, 2005). This includes helping managers learn about the necessity of recognizing the genius in the staff and creating the situations for them to excel. Staff are not only knowledge workers who are brilliant in assessing and intervening in clinical situations with patients and families, but also as knowledge workers who know how to rethink processes and outcomes.

The next challenge is to tell the story. Documenting the improvements staff make such as reducing complexity, simplifying processes, intro-
dicing high-reliability principles, and reducing expenses are all important to demonstrating how slack can create a huge return on investment. DeMarco (2001) reminds us that the culture of high pressure, hurry up, busyness, and fear destroys productivity, people, and organizations.

Summary

Human beings are not machines. The patient safety literature documents the price we pay for excessive overtime, long hours, and no breaks. Disengaged staff, high vacancy rates, and turnover are the products of cultures that do not support a professional environment where nurses are seen as knowledge workers.

At his retirement dinner, a factory worker accepted accolades for his years of dedicated service. In his farewell speech, he noted that for 40 years the factory used his hands but never his brains. His expertise and knowledge were never acknowledged or solicited. Consequently he watched in silence for years as directives came down from managers and leaders that were totally unrealistic and bore no relevance to the reality in which he worked. And he watched the initiatives fail.

Unfortunately we in health care can create that exact situation if we do not incorporate time (slack) into the schedules of our knowledge workers so they can unleash their genius, reinvent health care, and fix health care from the inside out. Nurse leaders must be the architects of participation and allow this to happen.

REFERENCES


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