Leadership — Advocacy, Change Agents, Succession Planning

The nursing leadership teams at Froedtert Menomonee Falls Hospital and Froedtert West Bend Hospital are advocates in supporting nursing excellence and building a collaborative interdisciplinary team while striving to meet the needs of the patients by providing safe and compassionate care. Shared leadership fosters a culture rooted in team member engagement, collaboration and trust. This relationship provides an environment that promotes nursing excellence at all levels of practice. Performance excellence is attainable through a consistent and thoughtful focus on caregiver wellness, coupled with an emphasis on the appropriate allocation of resources and support to achieve both clinical and financial objectives.

When news of the COVID-19 pandemic emerged in early March 2020, Shelly Waala, RN, MSHA, was appointed enterprise hospital operations section chief on the health system's senior leadership team. In this role, Shelly, along with Michael Stadler, MD, operations section deputy, and Douglas Marx, DO, operations section deputy, oversaw the ability of all hospital personnel to meet workload demands, resource requirements, documentation practices and personnel health and safety. The challenge was to adjust to the daily operational changes, manage capacity and ensure safety while providing the best possible care to patients. The goal was to continue delivering safe, high-quality care while managing resources and costs — a triple aim. In addition, Shelly empowered leaders to take roles for daily operations and assigned the directors to specific roles responsible for daily leadership and operational planning. Directors, utilized as subject matter experts, leveraged department leaders, nurse managers and assistant nurse managers to lead project needs as well as assess financial matters.

Shelly communicated with incident command about the enterprise's operational state on a daily basis. This included information related to provider, nursing and general staff needs, practice and equipment. Shelly would use this information to strategize the necessary organizational changes to create a safe environment for staff and patients. A dashboard and increased leader rounding were used to support staff and patients. Huddles, run by leadership, included a “Care Cart” (pictured on page 9) containing donations from the community and across the nation to thank staff during the pandemic. The leaders shared cards from the community as well as treats and meals to express appreciation and thankfulness for staff.

In November 2020, the second COVID-19 surge impacted our health system and Shelly resumed her role as enterprise hospital operations section chief as part of a Clinical Decision Team that included leaders across the enterprise. Her focus during the second surge was the increase in patient census and the available staff and resources to care for these patients. Shelly was grateful for her leadership team who once again mobilized to step out of their primary responsibilities and act as subject matter experts to execute necessary organizational changes to create a safe environment. Shelly provided her leadership team various daily updates. The empowered leaders navigated and contacted key stakeholders to address the surge, redeployed staff to the inpatient hospital setting from other units, clinics and non-clinical areas, and continued to promote and use the resources available.
As the pandemic influenced health care, the most significant change was the level of communication with patients, families and each other. With Enterprise Incident Command support, we were able to move to a virtual platform through the use of iPads. The iPads allowed families to have visual interaction and be actively involved in the care of their loved ones. Being able to provide patients with iPads is a new standard of care that allows staff, patients and families to connect and provide the most patient-centered care possible. Leadership innovation supported staff with the purchase of new respirators, which minimized the use of disposable N95s. Support of the change in nursing practice related to COVID-19 care, hospital-provided scrubs, access to vaccine clinics and many offerings also supported staff wellness.

Emily Byrnes, RN, MSN, Nursing Administration, with the Care Cart