

Nurse Leader Resilience

Career Defining Moments

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Resilience is an essential component of effective nursing leadership. It is defined as the ability to survive and thrive in the face of adversity. Resilience can be developed and internalized as a measure to improve retention and reduce burnout. Nurse leaders at all levels should develop these competencies to survive and thrive in an increasingly complex health care environment. Building positive relationships, maintaining positivity, developing emotional insight, creating work-life balance, and reflecting on successes and challenges are effective strategies for resilience building. Nurse leaders have a professional obligation to develop resilience in themselves, the teams they supervise, and the organization as a whole. Additional benefits include reduced turnover, reduced cost, and improved quality outcomes through organizational mindfulness. **Key words:** *authenticity, leadership, resilience, self-care*

NURSE LEADERS in the current health care environment must continuously work toward mastering complexity. They are expected to do more with less, maintain quality standards, and sustain a satisfied workforce.¹ Increased pressure at all levels, from the frontline manager to the nurse executive, requires a well-equipped leadership competency toolkit. Resilience is one of the most essential of these leadership competencies. A nurse leader's individual resilience, along with the ability to promote team and organizational resilience, significantly contributes to success and longevity in his or her role. While resilience is sometimes an innate character or personality trait, it can be proactively developed, mentored, and coached. In addition, resilience may be strengthened during a defining moment in a nurse leader's career. Unfortunately, some defining moments

become a breaking point for nurse leaders who choose to reject their roles.

WHAT IS RESILIENCE?

The American Psychological Association describes resilience as the process of adapting well to adversity, trauma, tragedy, threats, or significant sources of stress. It suggests that resilience is not a trait that you have or do not have. Rather, it is a pattern of behaviors, thoughts, and actions that can be learned and developed.² Jackson et al³ describe it as an individual's ability to adjust to adversity, maintain equilibrium and a sense of control, and continue to move forward in a positive manner. Hatler and Sturgeon assert that "resilience involves thriving despite adversity and not simply surviving a situation."^{4(p33)} Nurse leaders can leverage resilience as a proactive countenance in the face of economic challenges, complexity and change, and increased scrutiny on outcomes and performance.

WHY IS RESILIENCE IMPORTANT?

Resilience has been identified as an important attribute of authentic leadership and employee engagement. The literature suggests that employee engagement comprises vigor,

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dedication, and absorption; vigor is characterized by high levels of mental resilience in the face of adversity.⁵ McCarthy and Fitzpatrick⁶ have identified the combination of resilience and composure as 1 of 8 generic competencies that are foundations for effective performance at all levels of leadership. Nurse leaders who are intentional in cultivating and applying resilience will find that their collegial relationships and leadership capabilities are enhanced and strengthened during challenging times.

Resilience is a protective feature for nurse leaders' emotional and physical health and is enhanced by a supportive work environment. This is especially important for "type A" leaders who set excessively high standards for themselves and their teams; type A leaders experience negative health outcomes related to stress and anxiety.⁷ Resiliency practices, including realistic goal setting, planning responses to stressful situations, and generous self-acceptance, can support the health and longevity of nurse leaders. There is a gap in understanding proactive stress management strategies; this is an area of opportunity in the development of leadership competencies.⁸

Resilience impacts an organization's bottom line. The literature describes hardiness as an attribute that is synonymous with resilience. Nurse leaders who are recognized as being "hardy" possess control to help staff react creatively and energetically in a challenging situation. They impart positive energy to staff in the midst of change, creating a safe space for innovation. Finally, they are committed to creating positive futures with their teams. Judkins et al¹ found that nurse managers with high hardiness ratings used significantly less sick time than their counterparts with low hardiness ratings. Reduced absenteeism among managers promotes positive role modeling and continuity.

SCENARIOS OF RESILIENCE: DEFINING MOMENTS FOR NURSE LEADERS

Professional development and risk

Young nurses with a vision for future leadership roles will often seek professional de-

velopment activities from the very beginning of their careers. This is accomplished through formal education, clinical advancement, specialty certification, and participation in collaborative governance structures. Each of these endeavors represents a degree of risk for the registered nurse.

After 1 year of practice following RN residency, a young nurse joined his unit's clinical practice council and took over a major project. He also articulated his plan to apply for promotion through the organization's professional ladder. Senior staff members in the department openly ridiculed his enthusiasm. Not deterred, the young nurse successfully completed his project, excelled in his council role, and was successfully promoted soon after becoming eligible. The criticism of senior staff members was difficult to take, but he kept his head up and was true to his understanding of his professional role and the importance of lifelong learning.

Stepping outside of day-to-day patient care activities and taking on a visible role with a chance of failure require courage. Nurses willing to embrace these essential components of their professional role are best served by cultivating resilience in their early leadership practices. This is accomplished through individual strategic planning, identifying potential barriers to success, and active coaching and mentoring by supervisors and managers. A best practice to support early resilience is the expectation that senior staff members actively coach and mentor new staff members. One of the best predictors of future success as a nurse leader is the response to failure and adversity. What is the response of the nurse who is not successful in completing an advanced degree or passing a certification examination? How does the nurse handle the criticism (and likely the envy) of her peers as she takes on projects as part of the unit's shared governance structure? Does the nurse who is passed over for a lead or charge nurse role give up or incorporate constructive feedback as part of a plan to apply again? Risking exposure, including failure, is an effective way to exercise our resilience muscle. McAllister and McKinnon⁹ assert that collaborative practice, self-scheduling, and shared governance empower employees to act, enhancing their

hardiness and increasing their job satisfaction. Frontline nurse managers are ideally positioned to mentor and coach resilient responses as part of the professional development of bedside nurse leaders. These responses include incorporating feedback, self-reflection, acceptance of progress over perfection, and a willingness to acknowledge the lessons learned and try again. The importance of giving oneself a little grace cannot be overemphasized.

Promotion to a leadership role

Nurse leaders are frequently promoted from staff nurse positions within their own units or another unit in their organization. The transition from staff nurse to frontline manager is a catalyst for defining moments that require resilience.

A nurse manager was promoted from a staff nurse position in the unit where she started as a new graduate nurse and grew up under the tutelage of the senior staff. Now, the senior staff members who brought her up will be reporting to her. They are surprised to discover that they will be held accountable to policies and procedures, resulting in a flurry of negative feedback about the nurse manager's performance. Her response to this feedback will set the stage for her success as a future leader; her equanimity will be supported by the tools in her leadership toolbox.

Nurse managers who are willing to seek out feedback, receive it graciously, and incorporate suggestions in a visible way will gain the respect of the nurses they supervise. This resilient behavior is a skill that can be developed proactively with planned thought processes and responses to challenging situations such as this one. The likelihood of receiving negative feedback is high, and nurse managers can rehearse their reactions and responses through brainstorming possible scenarios, role-play, and collaboration with their peers. A nurse manager council that meets regularly is a powerful venue for this work. Formal programs should be developed and implemented to foster nurse manager expert-to-novice practice development and personal resilience.¹⁰

Early leadership challenges

A nurse director in a large academic medical center had high hopes for his professional development. He had completed a graduate degree in nursing administration and achieved certification as a nurse executive. He reported to a nurse executive who did not value coaching and mentorship of nurse leaders in her sphere of influence. Furthermore, this nurse executive was quick to assign blame without offering advice for the completion of a task. Early in the game, this nurse director realized that he would not receive the coaching and mentorship that he needed to become a successful leader. This was a defining moment; the nurse director accepted that he would be responsible for his leadership development and that he would need to develop strategies to manage this difficult reporting relationship. He met with the nurse executive to define his responsibilities, level of authority, and accountability.¹¹ He told her what he needed to be successful. Most importantly, he arranged for individual coaching and developed resilience strategies in support of his leadership development. These strategies included identifying his values and professional mission, choosing behaviors in support of his values system, and understanding his communication and leadership styles. He found that individual coaching helped him to cope gracefully during times of adversity and enhanced all of his professional relationships.

Manthey¹¹ supports clear messaging and understanding of responsibility, authority, and accountability as an imperative leadership behavior. This nurse leader took the initiative to clarify his supervisor's expectations and verbalize his needs for support. He took responsibility for his professional and personal development. Tenacity and vision in the face of adversity are a hallmark of a resilient leader.¹²

Innovative ideas, big projects

Nurse leaders at all levels will have opportunities to innovate. The project management of a new innovation requires that we set a container for success. This includes proposing the project to the executive team, developing the change or intervention, educating the team, and evaluating outcomes. A willingness to fail also bolsters resilience.

A nurse manager, in partnership with her nurse manager colleague, proposed a new process for transfer of care from the emergency department. The medical-surgical nurses from one unit would receive report at the bedside in the emergency department and transfer the patient to the floor. The goal for this project was to reduce the time from disposition to transfer. After 2 weeks, the time had not improved and a high level of animosity between the emergency department and medical-surgical nurses had evolved. The nurse managers urged them to stay the course and try to work out their differences for an additional 2 weeks. The situation devolved further, and the nurse managers decided to return to the previous transfer process. While disappointed in the outcome, the nurse managers congratulated their teams on their willingness to take a risk with a new process. They provided opportunities to discuss what worked well and what did not work and suggested that a combined work group from both units brainstorm what might improve the new process. The managers role-modeled resilience behaviors in hopes that they would be emulated by staff members in future change projects.

Transformational leaders envision positive outcomes in the most difficult situations, exercising humanity while making tough decisions, acting on them, and seeing them through.¹³

Leading through tragedy

A charge nurse called her nurse manager to let her know that a reliable long-term nurse had not reported to work. The nurse manager drove to the employee's home and discovered that she had passed away while sleeping at some point during the day. The days and hours that followed as she notified and supported her team were the single most pivotal moments in her career. Her team survived and thrived as the team members pulled together to grieve and to celebrate the life of this beloved nurse. This nurse manager supported the resilience of the team through authentic leadership, vulnerability, and support for the individual and communal needs of her staff.

Bamford et al⁵ suggest that when nurses work for managers who demonstrate higher levels of authentic leadership, they report greater work engagement, including in-

creased mental resilience in the face of adversity. Caring leader behaviors, including a hope-filled attitude, seeking to understand team member experiences, offering support, initiating action, and leading with integrity, support resilience and recovery.¹⁴ Authentic leaders know who they are and what they believe, and they allow the staff that they supervise to see them in this light.

Leading through health care reform

The challenges of health care reform have provided opportunities for resilience at all levels of leadership, and the pressure is arguably greatest for the nurse executive. The heightened focus on quality outcomes is represented in the triple aim: improving the patient experience, improving the health of populations, and reducing per capita costs. Nurse executives have been tasked with improving quality while reducing costs. The effects of this have been widely felt in reductions in staffing, which have been identified as a common barrier to nurse satisfaction. The chief nursing officer (CNO) is caught in the middle, with accountability for nurse satisfaction, patient satisfaction, nurse-sensitive quality outcomes, and the bottom line. The CNO is also under close scrutiny from the C-suite and the Board of Trustees. Resilience at this highest level of nursing leadership is a nonnegotiable competency. Surviving and thriving in a complex health care environment require that CNOs analyze potential barriers, take risks to create and innovate, and assertively advocate for nurses and the patients they serve.

Strategies for developing resilience

Today's nurse leaders need continually evolving leadership skills to effectively manage an evolving health care environment. Constant reinvention of one's professional platform increases exposure to vulnerability and risk. Individuals can learn to be optimistic through focused techniques that dispute pessimistic thinking and promote adaptation and resilience.⁹ Nurse leaders at all levels can build and enhance resilience through

self-awareness and strategic mental modeling. Hatler and Sturgeon⁴ assert that resilience building involves several steps: assessment, acceptance, adaptation, and advancement. *Assessment* includes evaluation of events, environment, and individuals. Nurse leaders should be aware of the relationship between feelings, thoughts, and behaviors to anticipate responses to adverse events. *Acceptance* involves a perspective that change, failures, and setbacks are expected events. This practice allows nurse leaders to develop contingency plans and identify resources. Acceptance of the possibility of failure opens nurse leaders to innovation and appropriate risk taking. *Adaptation* requires leaders to change their thinking, reframe the event, and look for creative ways to make it work. *Action* is the response to untoward events and should include mastering negative thinking, developing goals, and clarifying the alternative steps needed to succeed. Nurse leaders can develop these resilience-building practices individually or with their teams.

Empowering individual resilience

Nurse managers, directors, and executives can role model and coach resilience strategies in their teams. Jackson et al³ propose the following self-development practices for building personal resilience to workplace adversity:

- *Building positive, nurturing professional relationships and networks:* Nurses at all levels benefit from having warm relationships in the workplace. A best practice for nurse leaders is to make a habit of having lunch away from their offices, to join with peers and colleagues to talk about anything but work. Clinical nurses can foster relationships with their peers and colleagues both in and out of their departments. A concerted effort to invest in relationships will reward them with a support system during an adverse experience. Consistent support, including offers to provide help with patient care, and acceptance of the unique

attributes of the individual are good strategies.

- *Maintaining positivity:* Insist on a culture that demonstrates a positive attitude and looks for the lessons in adverse experiences. Just culture is an ideal strategy for reducing blame and evaluating structures and processes in addition to human behavior.¹⁵ Provide ongoing reward and recognition to individuals and the team.
- *Developing emotional insight:* Develop awareness of triggers for stress, anger, and impatience, as well as for joy. Use positive self-talk to encourage more effective responses to adversity. Prevent perfectionism by giving yourself and others grace.
- *Achieving life balance and spirituality:* Self-care is an essential component of resilience. Nurse leaders can role model resilience by balancing work with time for family, rest, and renewal. Nurses at all levels must “return to the well” to fill their cups in order to provide care and empathy to their patients.
- *Becoming more reflective:* Take time to review the events of the day. Consider what went well and what might have been done differently. Journaling is a valuable reflective practice. Discuss these thoughts with someone you trust and intentionally receive his or her feedback.

The authors conclude that using these practices to build personal resilience can help nurses survive and thrive in complex and adverse work environments.

Creating organizational resilience

Promoting a culture of resilience for leaders and staff members is a catalyst for organizational resilience. Consistent application of resilience-building practices across departments and divisions serves to move organizations to a state of collective mindfulness.¹⁶ These practices include identifying vulnerabilities and developing strategies that increase resistance to errors and adverse events. Collective mindfulness is accomplished through

3 cultural drivers: institutional commitment, competence, and cognizance.¹⁶ Nurse leaders, in partnership with clinical nurses and interprofessional partners, can advance their teams toward a state of organizational resilience and improved quality and safety.

Conclusion

Nurse leaders regularly face difficult situations and are called upon to navigate complexity, change, stress, crisis, and tragedy. Resilience-building practices have

been shown to increase longevity and satisfaction in leadership roles. Nurse leaders who draw on internal and external resources, understand their personal values, and develop professional networks are better equipped to manage organizational change. Transformational leaders persevere in times of adversity, and they are role models for behaviors that will increase their team members' ability to thrive.¹³ Resilience is an essential leadership competency and an effective tool for improving nurse retention, patient safety, and quality outcomes.

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