

Why timing is crucial in leadership

By Rose O. Sherman, EdD, RN, NEA-BC, FAAN

FOR THE LAST 2 YEARS, Karen, the manager of a critical care unit, has been laying the groundwork for her unit to apply for the Beacon Award for Excellence from the American Association of Critical-Care Nurses. Her staff has worked hard to meet the award criteria and are planning to start the formal application process.

But when Karen attends a hospital-wide department meeting, the chief executive officer reveals that their health system plans to develop electronic ICUs (E-ICUs) to support its smaller facilities. Karen learns from the chief nursing officer (CNO) that she will have a major role in planning this E-ICU initiative. She's disappointed to find out that due to the staff planning time needed and the expense of the new initiative, the organizational timing is no longer right to pursue the Beacon Award.

Lists of key leadership attributes rarely include the ability to carefully time one's initiatives and actions. Everyone acknowledges that time management—but not timing—in leadership is important. Yet, we know great ideas and initiatives, such as Karen's pursuit of the Beacon Award, can and do fail if leaders try to push for them at a time that's not right for the organization. As Karen found out, in today's healthcare environment, strategic priorities shift quickly. What mattered yesterday may be less important today. Tim Porter-O'Grady, DM, EdD, ScD(h), FAAN, a consultant, author, and associate professor and leadership scholar at Arizona State University College of Nursing and Health Innovation, stresses that leaders must become adept at "reading the signposts" to sense changes happening in their environments and organizations.

Patience and the ability to read the signposts are crucial for leaders.

Reading the signposts to improve the timing of your initiatives is critical for leaders. Some issues have a sense of urgency—and other people will see them as a high priority. But sometimes, challenges we seek to solve require patience and waiting until the time is right to initiate a plan. Often, the quality and success of decisions is based on choosing the right moment for implementation. This requires leaders to learn how to exercise emotional intelligence so they can regulate their emotions effectively and stay flexible when their organization puts their initiatives on hold. Good timing also requires the ability to sense intuitively when there's an opportunity that could add value to your organization. Author and speaker John Maxwell identified the law of timing in his book *The 21 Irrefutable Laws of Leadership: Follow Them and People Will Follow You*. He observed that timing often spells the difference between success and failure.



Five questions to ask yourself

To decide whether the timing is right for you to pursue an initiative in your organization, ask yourself the five questions below.

1. Do I have a good grasp on the organizational climate?

Although change can't be avoided, leaders have the power to influence its circumstances and consequences. Transformational leaders understand that aligning others to support their vision requires careful planning. Sometimes, the organizational climate in a setting may not be right to introduce a new initiative. Organizational climate refers to the extent that an organization is fo-

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cused on such issues as innovation, flexibility, employee well-being, staff development, quality, staff empowerment, and leadership. Climate has a major influence on the success of any initiative. A sense of urgency may need to be established to move others toward change. Establishing this groundwork can take time. I recently visited with a

new chief nursing officer (CNO) in a small rural hospital. She had identified many professional practice issues that needed to be corrected, but observed, “I have to pace what I do here. Change needs to be implemented more slowly than I would like, but that’s the culture.” Astute nurse leaders carefully study their organizational culture and aren’t tone deaf to what’s happening in their environment.

2. What are the competing factors that could influence success?

Sometimes great ideas can’t gain or sustain traction in organizations because of too many competing factors in the environment. Several years ago, I was part of a project team that launched a novice nurse leadership program in our community. The program was designed to help new graduates transition in their first year of practice. Initially, our clinical partners were enthusiastic, as new graduate retention was a significant problem. Over time, as the economy changed, many other competing priorities arose, and participation in the program declined. The program had excellent outcomes and was still clearly needed, but times had changed. Recruitment and retention were no longer high priorities as turnover decreased and hospitals focused on financial survival. Stopping the program was difficult, but the many competing factors had made the program unsustainable. Sometimes, saying no is important to achieve other organizational goals. Steve Jobs once made this observation about his work at Apple, Inc.: “I’m actually as proud of many of the things we haven’t done as the things I have done. Innovation is saying no to 1,000 things.”

3. Do I have the experience to launch this initiative and the confidence of those who will be affected?

It’s often said that the right action at the right time by the right leader can result in incredible success. Winston Churchill exhibited a classic example of this type of leadership during World War II. Describing his leadership during that time, he said, “There comes a special moment in everyone’s life, a moment for which that person was born...that special opportunity when

he seizes it, will fulfill his mission—a mission for which he is uniquely qualified. In that moment, he finds his greatness. It is his finest hour.”

There are times as a leader when you need to decide whether you are the right person to accept a certain leadership role, drive a change in an organization, or implement a new

project. The answer could be yes, but it may also be no. Some individuals have incredible adaptive capacity—the ability to change their style and approach to fit the culture, context, or condition of their organization. But not every leader is able to do this in every situation. Leaders need to have the wisdom to know when the time is right for their leadership.

4. Have I created the conditions for success?

Projects sometimes fail because of inadequate preparation. As a leader, you may need to delay an initiative until you’re sure you’ve set your team up for success. In his bestseller, *Five Dysfunctions of a Team: A Leadership Fable*, Patrick Lencioni noted that genuine teamwork is elusive in most organizations, yet lack of teamwork is a primary reason why initiatives fail. When teams fail to commit to a strategic direction or completion of a goal, ambiguity about team direction and priorities arises. Windows of opportunity can close because of excessive analysis or unnecessary delays. Some healthcare agencies experienced these failed starts with the introduction of electronic medical records over the past 5 years. They quickly learned about the importance of strong strategic planning and timing in rolling out their initiatives in a way that ensured success.

5. Have I carefully listened to my own intuition about timing?

Leaders often get excited about their initiatives but sometimes know in their gut there are problems. Seeking Magnet® designation presents an interesting dilemma for some nurse leaders. Being successful on the Magnet journey requires organizational readiness and demonstration of all five components of the Magnet Model. These standards are challenging and need to be met fully. I know several CNOs who have put the brakes on their Magnet applications because they felt that the organization just wasn’t ready from a timing standpoint and that an unsuccessful Magnet application would be more devastating than postponing the initiative. This required leadership courage—but wise leaders learn to listen to their intuition.

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been shown to improve survival significantly. Mr. Grant is receiving artificial nutrition and has a low BMI; caregivers should continue to evaluate him over time for progressive weight loss.

Pressure ulcers

Presence of at least one pressure ulcer suggests a poor prognosis. Mr. Grant has a stage 2 ulcer.

Comorbidities

Mr. Grant's medical history includes dementia and HF. A combination of chronic comorbid conditions increases symptom burden. A hospice nurse may conduct a formal evaluation to see if Mr. Grant meets hospice criteria for these chronic diseases based on Medicare guidelines. Given the combination of physical indicators, Mr. Grant most likely is appropriate for hospice care.

Previous hospital admissions for acute decompensation

This is Mr. Grant's third hospital admission in 6 months.

Framework for discussion

Because nurses spend more time with patients than other healthcare team members do, we may be more aware of the need to discuss advanced care planning

and hospice. We're often present to answer questions and help the patient and family fully understand the information the physician has provided.

If the patient has an advanced directive, it should be part of the health record so all healthcare team members can review it. If the patient doesn't have one, ask about his or her wishes regarding health care. If the patient can't participate in this discussion, as with Mr. Grant, urge the family to focus on what their loved one would want—not what they want for their loved one. (See *SPIKES: A framework for difficult discussions*.)

Nurses have the opportunity to evaluate their patients and promote hospice referral through thoughtful, planned interdisciplinary collaboration and, most important, by communicating with the patient and family. Many clinical indicators can point to the need for a hospice referral. Using these indicators as triggers for a discussion about a hospice referral can help prevent aggressive treatments that won't improve survival. Using the information in this article, you can help answer the all-important question, "Is it time?" ★

Visit www.AmericanNurseToday.com/Archives.aspx for a list of selected references.

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Know when to hold—and fold—they

John Maxwell observed that "the wrong action at the wrong time can lead to disaster. The right action at the wrong time can bring resistance. The wrong action at the right time is a mistake. The right action at the right time leads to success." Putting an initiative on hold, as Karen was forced to do with the Beacon Award initiative in the opening scenario, doesn't mean it can't be reintroduced at a time that will better fit the organization's strategic plans. In "The Gambler," a hit song of the 1970s, Kenny Rogers sang, "You've got to know when to hold 'em, know when to fold 'em." This is good advice in both gambling and life. Timing matters in our leadership practice—and it's a fine art.

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Two years later, the E-ICU initiative is completed. Karen now believes the time is ripe to return to the Beacon Award plan. She completes the formal application process and subsequently learns that her unit has received the Beacon Award. ★

Selected references

- Churchill W, Gilbert M. *Churchill: The Power of Words*. Cambridge, MA: Da Capo Press; 2012.
- Dyess S, Sherman RO. Developing the leadership skills of new graduates to influence practice environments: a novice nurse leadership program. *Nurs Adm Q*. 2011;35(4):312-22.
- Griggs B. (2012). 10 great quotes from Steve Jobs. www.cnn.com/2012/10/04/tech/innovation/steve-jobs-quotes. Accessed June 9, 2014.
- Kotter JP. *Leading Change*. Boston: Harvard Business Review Press; 2012.
- Lencioni P. *The Five Dysfunctions of a Team: A Leadership Fable*. San Francisco: Jossey-Bass; 2002.
- Maxwell JC. *The 21 Irrefutable Laws of Leadership: Follow Them and People Will Follow You*. 10th anniversary ed. Nashville: Thomas Nelson Publishers; 2007.
- Porter-O'Grady T, Malloch, K. *Quantum Leadership: Building Partnerships for Sustainable Health*. 4th ed. Burlington, MA: Jones and Bartlett Learning; 2015.

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