

# Adapting to Complexity: Leadership Approaches Embracing Agility

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**T**he COVID-19 pandemic response demanded that nurse leaders make decisions in a constantly changing landscape. This article outlines leadership approaches that can serve leaders faced with challenges and includes two examples from the field.

One quality leaders can explore is the capacity to forecast the future. Canton (2015) identifies this quality as “future smart,” which is developing an ability to pay attention to emergent signals, early warnings, news or consumer behaviors that precede and later shape trends. Future smart is about understanding and exploring the possible scenarios of the future, so one will be able to better prepare for it today.

Future smart leaders have a plan and are confident in rallying their teams to be willing to learn and adapt with a vision for the future. They inspire others to embrace, collaborate and contribute to making a reality. Canton also asserts every organization in the future must embrace a higher purpose to be agile and adaptable to the ever-changing health care landscape, with a focus on making a positive difference for patients and staff as the core value of one’s organization. Embracing a higher purpose, reflected in management practices, will foster more fulfilled, resilient and engaged employees who will lift themselves and the organization to new levels of energy, performance and innovation.

“Design thinking” is an approach that can enhance solving complex problems as well as adjusting to unexpected changes. The Design Thinking Cycle framework (Figure 1) integrates classic problem-solving with art and design methodologies (Naiman, 2018). Leaders can challenge organizations to think about how to spend more time doing collaborative, generative work producing a tangible outcome without more meetings. Design thinkers learn to navigate among the constraints through risk-taking and exploration, moving from problem to project focus.

## Responding to constant change

When information is changing by the hour, an ethical decision-making framework (Figure 2) can provide the structure and process that works in life-or-death decisions and operational decisions. This ethical decision-making process focuses on (1) adopting a moral stance, (2) consciously selecting an

**FIGURE 1: The Design Thinking Cycle**

- 1. Discovery**  
Choose an affirmative, strategic topic. Gather data. Understand and empathize with unmet needs.
- 2. (Re)frame opportunity**  
Look for patterns and insights. Question assumptions. Frame your point of view. Define your scope.
- 3. Incubate**  
Switch gears. Feed your brain with diverse stimuli. Meditate. Sleep on it.
- 4. Ideate/illuminate**  
Experiment. Explore possibilities. Envision a desired future. Co-create in diverse teams. Make your ideas visible.
- 5. Evaluate/refine ideas**  
What is desirable, feasible, and viable about your ideas? What are constraints?
- 6. Rapid prototype/test**  
Think big, act small, fail fast; learn from end-users and refine.
- 7. Deliver**  
Final testing, approval and launch.
- 8. Iterate and scale**  
Evaluate. Learn. Create. Innovate.

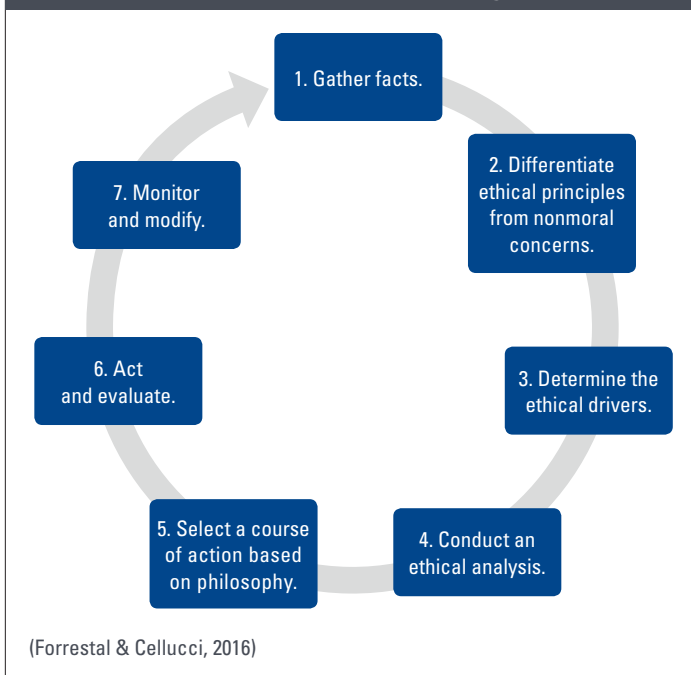
(Naiman, 2018)

ethical philosophy, and (3) making decisions using the steps of ethical decisions (Ciulla, 2014).

As the new normal is being defined, strategic and innovation thinking are ever more critical. Success is dependent on the integration of strategy and innovation. The crucial role of leadership is to make difficult decisions regarding constructing the right organization, structure and relationships and choosing the appropriate innovation strategy, understanding capabilities and strengths along with continuum of care.

Leaders can unite their staffs by explaining how their staff’s work and roles contribute to the higher objectives of the organization and help them align their priorities with those along the continuum. Once people understand their role and contribution, innovative leaders set clear and consistent expectations about the outcomes of the team’s work. Innovators embrace change as an opportunity to develop solutions and are willing to learn new things to create value. They also provide an

**FIGURE 2: Ethical Decision-Making Framework**



aspiration that challenges complacency and articulates a vision reflecting where the organization is going, commits resources, sets an innovation strategy and leads by example.

Strategic leaders lead innovation and change by making changes that progressively build on each other and represent an evolving enhancement of the organization's well-being. Strategic leaders have a learning orientation, and exhibit curiosity, inquiry, humility and collaboration with others. Strategic leaders can authentically navigate the landscape and be able to see and understand other perspectives. They are also able to be patient and persistent in continuing to influence as strategic initiatives unfold.

Organizational agility is a vital competency with profound performance impacts. Agility as a competency reflects the capacity to respond as well as the ability to envision strategic opportunities and proactively conduct vital small tests of change.

COVID-19 has created a common enemy, unifying health care in unprecedented ways. It has also allowed leaders

with future smart skills to remain agile, adapt and advance through this difficult time. Beckman (2020) states it best, "The transformations in care delivery and demonstrated agility during this time will be evidence supporting that, indeed, we can do things differently and more swiftly than we ever imagined." ♦

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## Leadership Insights From the Front Line

Leadership agility was summoned by the COVID-19 response, with nurse leaders often facing a quickly changing environment. Yale New Haven Health was impacted significantly by the pandemic, caring for more than 4,000 COVID-positive patients. Two chief nurse hospital executives from that system share their experiences and lessons learned.

Prior to the pandemic Ena Williams, MBA, RN, senior vice president and chief nursing officer, Yale New Haven Hospital, recognized the strong trusting relationship she had with her leadership team and the COVID-19 crisis strengthened that bond.

When the COVID-19 pandemic began, it became clear that the existing operational structures would not support the rapid pace and agility that would be needed for this virus. There was so much unknown; it was going to require a different approach from the way the hospital functioned during normal operations. Williams seized the opportunity to relay three key messages to her team: "trust each other, we will get through this and these times are going to be uncertain." These three messages proved to be critical along with the established trusting relationship. Williams often communicated with her team, providing a safe

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place to share concerns, increasing the ability to move forward together. These conversations were facilitated by sharing a white paper from Herrmann Global (2017) which outlines key success strategies for leadership agility through a volatile, uncertain, complex, ambiguous (VUCA) world.

### Valuable structures

In addition to trust and communication, throughout the crisis, Williams relied on the structures in place both within nursing and organizationally to facilitate rapid change and implementation. The system incident command structure (SIMS) established at Yale New Haven Health depicts a delineation of roles and responsibilities, with a clear chain of communication and decision-making back to each delivery network. The nursing structure established to support change focused on: (1) process, (2) practice and (3) people. Change was facilitated through frequent communication pathways such as town halls, leadership visibility, daily standardized updates, social media and the engaging of nursing professional governance leaders.

Planning, communication and structure helped Yale New Haven Hospital to remain agile through its COVID response. All levels of staff and leaders led projects, and titles became irrelevant. Responsibility was transitioned fully to the designated leader, which allowed for the established trust to grow stronger. Weekly nursing leadership meetings, open forums to allow attendees the opportunity to endorse, support or communicate various projects underway were part of the COVID response.

### Agility Leadership Lessons

- Trust your leaders
- Build strong relationships
- Have a clear structure in place
- Delegate, you cannot lead everything

Williams stressed when leading through these unprecedented times, to remain agile, it is important to not let “great” be the enemy of the “good.” She found deep satisfaction in the ability to have aspiring leaders or mid-level leaders garner success through projects and witness their leadership growth. In one example, nurse leaders quickly developed a care for the caregiver process to support clinicians during the COVID crisis. These leaders are being tapped to lead a similar initiative across the health system.

Moving forward, Williams shared that her “biggest focus is to ensure that I don’t fall back into thinking I have to be more involved in the details. Trusting leaders allowed them space to lead and be innovative.”

### Stages

When considering the pandemic, three stages emerge: (1) preparation or readiness, (2) patient care or surge and (3) future planning. Each of these stages are realized with unique opportunities for change and require leadership agility for implementation. Anna Cerra, DNP, RN, senior vice president

of patient care services and chief nursing officer for Yale New Haven Health’s Greenwich Hospital shared insights and keys to success through each of these distinct stages of the pandemic.

### Preparedness/readiness

Due to the proximity to New York, the leadership team at Greenwich Hospital understood the sense of urgency to take action. While readiness was noted to be a difficult phase, through swift action in opening the emergency incident command center, the organization was able to rapidly achieve success in establishment of a testing center for the staff and public in the parking garage, staff education and practice changes. Key factors to this action and success were communication through frequent calls, visibility of the senior leadership team and transparency at all levels. Understanding that the environment was changing rapidly, this group was able to adapt to those changes.

### Patient care/surge

While the variation in COVID-19 patients across the country created a hurry-up-and-wait scenario for many, Yale New Haven Health experienced a significant influx of COVID-19 patients. Somewhat surprisingly, this was noted to be an easier phase to manage, due to the agility gained through the readiness phase. Inpatient and ICU census increased but due to reallocation of resources from areas with less volume, surgery and ambulatory support systems were developed to increase capacity and staffing to meet the demand. While each day brought unique challenges through either staffing or bed allocation, preparedness, clear communication and again transparency, led the way for leadership agility.

### Future planning

Not surprisingly, the future state planning has come with its own challenges, such as assessing when and if the next peak of COVID-19 patients will come, assuring steps are in place to restart care safely, anticipating how many resources are needed through each phase and how to segment COVID-positive and -negative patients to maintain a safe environment for patients and staff. Cerra credits Yale New Haven Health’s success to its ability to work across the system to standardize protocols and through an enhanced partnership with physician colleagues. One thing is clear: leadership agility is needed in the future. Health care organizations are in two operational models: the first seeks to regain lost revenue and resume care provision care in a different way and the second must ensure staff and organizational readiness for a second COVID-19 patient surge. ♦

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