

HAWAI'I – PACIFIC CHAPTER OF ACHE QUARTERLY NEWSLETTER

HAWAI'I PACIFIC CHAPTER OF ACHE
AN INDEPENDENT CHAPTER OF



American College of
Healthcare Executives
for leaders who care®

FALL 2024



KARA GORMONT, FACHE
REGENT HAWAI'I-PACIFIC

MESSAGE FROM THE REGENT

Kara Gormont, FACHE
Message from your ACHE Regent

Resilience in Healthcare: Building for the Future

A year ago, the fires in Lahaina, Maui, tested the resilience of our community and healthcare system like never before. While the immediate aftermath was marked by loss and challenges, the stories that emerged were about recovery and the extraordinary resilience that healthcare workers displayed. These experiences have provided valuable lessons for managing crises and strengthening our healthcare system for the future.

The Immediate Response: A Test of Strength

In the wake of the Lahaina fires, healthcare workers were thrust into crisis mode. All local to Maui and many others across the islands rallied to respond with the full force of our healthcare resources; the traumatic event overwhelmed our senses, selves, and resources. The demand for mental health services surged as people grappled with the loss and displacement of their family, friends, and history.

Community and connection became our cornerstone. "Maui Strong" became a rallying cry to unite our community during hardship and recovery (there are stickers, t-shirts, and many support groups called Maui Strong). Specifically, Maui Strong is also a Fund through the Hawai'i Community Foundation to support the immediate and long-term needs of people and places impacted by the fires:

<https://www.hawaiicomunityfoundation.org/strengthening/maui-strong-fund>

Yet, despite the chaos, our healthcare workers displayed extraordinary strength. Many were personally affected by the fires, yet they continued to serve their community with dedication and compassion. Their ability to maintain focus and deliver high-quality and compassionate care under such stress was a testament to their resiliency. Their personal and community strength are admirable and highlight the need for healthcare leaders to focus on the future and the needs we have to meet future events.

While resilience is essential for healthcare workers, it's increasingly clear that communities and healthcare systems must be responsible for building robust and supportive care systems. Studies like Fraye (2019) and Lovejoy et al. (2021) show that individual interventions like meditation have limited impact, emphasizing the need for systemic support. Strengthening healthcare systems and community support enables workers to function effectively without relying solely on personal strength. The responsibility for resiliency is collectively ours to prepare for.



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KARA GORMONT, FACHE
REGENT HAWAI'I-PACIFIC

REGENT MESSAGE CONTINUED

Strengthening Preparedness and Response

The fires in Lahaina and the COVID-19 pandemic have taught us that preparedness is crucial. As we advance, we must build on these lessons to ensure that our healthcare system is ready to respond to any future crisis—whether local or global. This involves emergency planning and investing in training, resources, and infrastructure that can withstand and adapt to unforeseen events.

Sustained Support for Healthcare Workers

Resilience is not a one-time effort. It requires continuous support for our healthcare workers, who are the backbone of our response efforts. Moving forward, it is essential to provide ongoing mental health services, professional development opportunities, and supportive work environments that enable our frontline workers to thrive. This sustained investment is key to ensuring that they can continue to serve our community with dedication and compassion, no matter what challenges lie ahead.

Advocating for Systemic Change

The challenges highlighted by the fires and the pandemic have underscored the need for systemic change in our healthcare system. As we look to the future, it is crucial to advocate for policies that address the pressures of scarce resources, an aging population, and the increasing costs of care. By focusing on systemic improvements, we can create a more resilient healthcare system that meets the needs of both patients and providers.

Looking Ahead: A Resilient Future

As we move forward, the resilience of our healthcare workers will continue to be tested by both anticipated and unexpected challenges. However, the lessons learned from recent crises provide us with a roadmap for building a stronger, more adaptable healthcare system. By fostering a culture of resilience, advocating for systemic changes, and ensuring continuous support for healthcare workers, we can build a future where our healthcare system remains strong and capable of meeting the needs of all who call Hawaii home.

Together, we can ensure that the resilience shown in the face of past challenges serves as a foundation for a stronger, more resilient future. With compassionate focus and realizing that we are all in this together, we can ensure that our healthcare system remains strong, adaptable, and capable of meeting the needs of all who call Hawaii home.



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SUZANNE ASARO, MPT, MBA,
FACHE
PRESIDENT
ACHE HAWAI'I-PACIFIC CHAPTER

PRESIDENT'S MESSAGE

Aloha Hawai'i-Pacific ACHE Members,

As we are entering the final quarter of the year, I want to take a moment to express my gratitude to our volunteer board and committees. They have been working through the summer, organizing a great annual meeting, launching a new website, and finalizing curriculum to offer more educational opportunities through the end of the year. I am excited that we will also be announcing a social before the end of the year with the opportunity to give back to our community, stay tuned as we finalize these details!!

Hawai'i-Pacific Chapter Annual Meeting

Our Annual Meeting was held on July 25, 2024, and we filled the room with our members! Our keynote speaker, Bill Santulli, ACHE Chair, presented on national updates from ACHE and their work to engage local chapters, increasing focus on DEI and how they can better engage and support members. We had a beneficial question and answer session and were able to provide our feedback and insights on the matters that are important to our chapter's members.

At our Annual Meeting, we honored two leaders who have contributed greatly to both our chapter as well as the healthcare provided to our community. Please join me in congratulating Darlena Chadwick, EVP, and COO of the Queen's Health Systems: Senior Level Healthcare Executive Award and Travis Clegg, COO at Straub Benioff Medical Center: Executive Leadership Performance Award.



FEATURED FROM LEFT TO RIGHT:
SUZANNE ASARO, BILL SANTULLI,
AND KARA GORMONT

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PRESIDENT'S MESSAGE CONTINUED

ANNUAL MEETING

Congratulations to our Regent Award Winners!



Regent Award: Kara Gormont, FACHE, Hawaii-Pacific Regent presented Darlena Chadwick, FACHE, COO and EVP of the Queens Health System, the award for Senior Level Healthcare Executive Award.



Regent Award: Travis Clegg, FACHE, COO at Straub Benioff Medical Center, was presented the Executive Leadership Performance Award by Kara Gormont, FACHE, Hawaii-Pacific Regent.

We also had the opportunity to recognize our first Mentorship Cohort that completed the program in June. We received such positive feedback from the first cohort and excited that our second Mentorship Cohort started in September. We are excited to continue and grow the program for the benefit of our members.



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PRESIDENT'S MESSAGE CONTINUED

ANNUAL CHAPTER LEADERS CONFERENCE

On September 29-30, 2024, I was honored to represent our Hawai'i-Pacific Chapter at our ACHE Annual Chapter Leaders Conference in Chicago, along with our President-Elect Claudia Crist and Regent Kara Gormont. Over 200 healthcare leaders gathered to share their Big Ideas to support health care leaders. We learned many best practices and will use this knowledge to provide offerings that are of value to our chapter members.

This past year our chapter received Chapter Distinction Awards in both Membership Growth and Advancement to Fellowship. Our Chapter was asked to present on Membership Engagement and Growth. It was a privilege to share the outstanding work that our chapter has accomplished and appreciate the work done by our board and committees to support our members. The feedback from the session was incredibly positive and it was also beneficial to learn what other chapters have done to engage their members!

Our chapter board has just completed their strategic planning session, and I appreciate the engaging discussion to set our goals and direction for the upcoming years. This is a wonderful time to volunteer your talents as there are many opportunities to be involved even with small time commitments. I am excited to connect with all of you at our upcoming events, both in person and virtually. Thank you for your ongoing support and I value your feedback as we continue to use your input to put together events that are of value to you!

Many thanks,
Suzanne Asaro, MPT, MBA, FACHE
President, Hawai'i-Pacific Chapter of ACHE



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SPONSORSHIP

THANK YOU TO OUR SPONSORS

We would like to extend our deep appreciation and heartfelt thank you to our incredible sponsors! Your generous support makes everything we do possible. Because of you, we can continue providing valuable opportunities to healthcare leaders in the islands at every career stage. Mahalo nui loa!

Mahalo to Our Amazing 2024 Sponsors!

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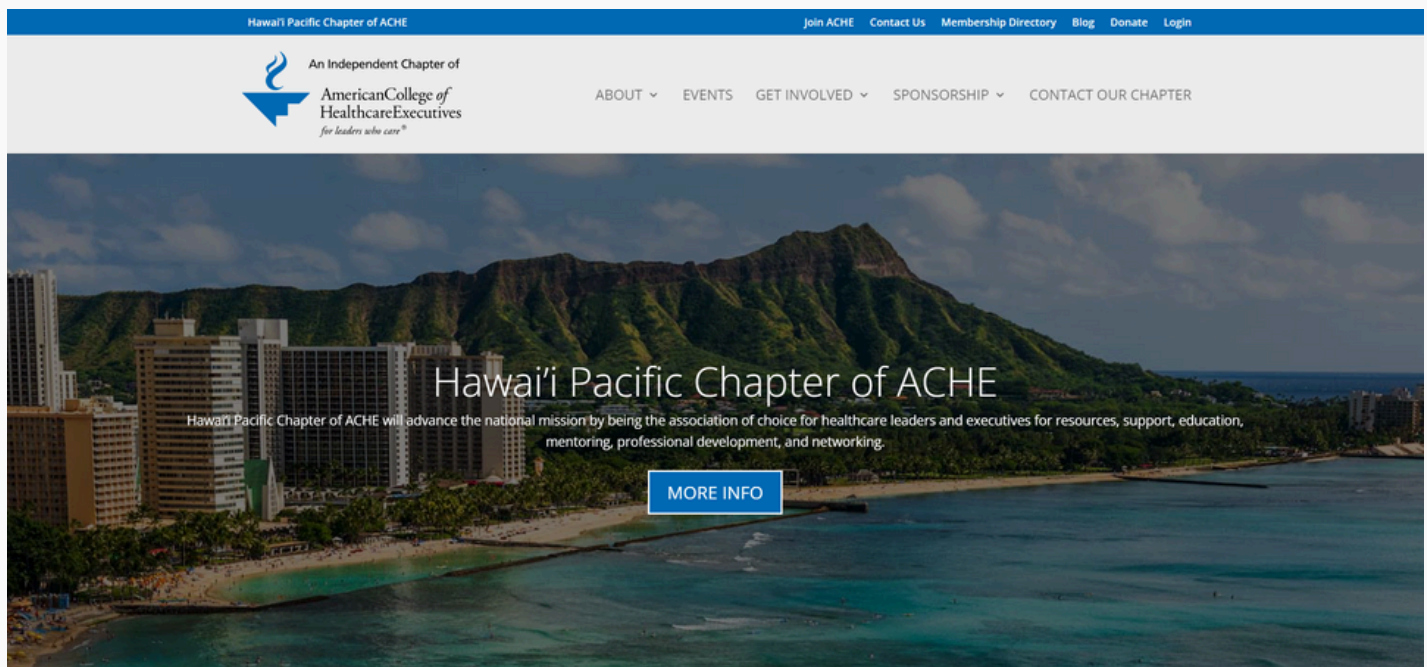
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EXCITING NEWS!

THE ACHE HAWAII PACIFIC CHAPTER WEBSITE IS NOW LIVE!



[CLICK HERE](#) to check out our new Website or scan the QR Code

The website migration team did a fantastic job updating and refreshing the website. You will find more information about our chapter, upcoming events, how to get involved, and so much more.

Special thanks to our National ACHE Team, Suzanne Asaro, Chapter President, Leilani Kinsey, Communications Chair, and our Communications Committee Members: Angela Simmons, Charness Lam, and Kailani Amine.



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COMMITTEE UPDATES

DIVERSITY, EQUITY & INCLUSION COMMITTEE

The DEI committee wanted to update our Diversity Equity and Inclusion Statement. The last one was created in 2014 and we wanted to ensure that it was still relevant to our community and our members. We want to invite our members to review this proposed statement below and provide your feedback before the board vote for approval. Your input is greatly appreciated and can be provided to Kristen at kcroom80@gmail.com by November 1, 2024.

Diversity, equity, and inclusion (DEI) are fundamental to the social, cultural, and economic fabric of ACHE Hawai'i-Pacific Chapter. As one of the most ethnically and culturally diverse places in the world, Hawai'i's strength lies in its ability to harmonize the many different cultures that coexist across the islands. DEI principles not only honor the unique identities and perspectives that contribute to this rich mosaic but also ensure that all individuals, regardless of background, have equitable access to opportunities and resources. In a place where values like aloha (love, compassion) and pono (righteousness, balance) hold deep meaning, DEI aligns with the long-standing traditions of respect and inclusivity.



By fostering inclusive environments ACHE Hawai'i-Pacific Chapter can create pathways for everyone to thrive and ensure that no one is left behind.

A community that embraces diverse viewpoints is better equipped to address challenges with creativity, empathy, and understanding, contributing to a stronger, more just society. In this way, DEI is essential to building a future that honors Hawai'i's past, while nurturing the collective potential of all its residents.



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EDUCATION COMMITTEE

Neighbor Island Event

Education and Networking: Please join us in person on Kaua'i for two engaging panel presentations followed by a social and networking with our colleagues on Kaua'i.

Location: Wilcox Medical Center, Lihue Kaua'i on

Date: Friday November 1st from 1:00–5:00 pm

Education Sessions: (1.5 hrs each, total of 3 hrs)

- Inclusive Leadership in Healthcare
- Sustainable Strategies to Support Well-being for Healthcare Professionals

We encourage our members to join us live, a virtual link will also be provided for those unable to attend in person.

[**CLICK HERE**](#) to register for this event.



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EVENTS

AONL/ACHE CONFERENCE NOVEMBER 14-15, 2024

2024 Hawai'i Annual Leadership in Action Conference entitled: REENGINEERING RESILIENCE

Announcing the 2024 Hawai'i Annual Leadership in Action Conference!

We are thrilled to announce the upcoming 2024 Hawai'i Annual Leadership in Action Conference, co-hosted by the American Organization of Nurse Leaders (AONL) Hawaii, the American College of Health Care Executives, and the Hawai'i State Center for Nursing. This premier event will take place on November 14 and 15, 2024, at The Prince Hotel & Resort in Honolulu.

Conference Theme: "Reengineering Resilience"

This year, our theme underscores the critical importance of fostering resilience and well-being among our nursing and healthcare leaders. The conference will provide a platform to explore innovative strategies, share best practices, and celebrate excellence in patient care and healthcare delivery.

Conference Highlights:

- Keynote Speakers: Hear from nationally and locally recognized leaders in healthcare.
- Panel Discussions: Engage in insightful discussions with top executives and experts in the field.
- Breakout Sessions: Participate in interactive sessions focused on resilience, innovation, and leadership.
- Awards Luncheon: Celebrate the achievements of outstanding healthcare professionals.

Networking Opportunities: Connect with peers, leaders, and decision-makers from across Hawai'i's healthcare community.

[**CLICK HERE**](#)
to register for this
event.



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COMING SOON

DETAILS COMING SOON FOR THE FOLLOWING EVENT

Student/Early Careerist Education Event

Attention all students and young professionals! Join us for Real-Life Scenarios and Professional Growth! This conference offers a unique opportunity to immerse yourself in real-life scenarios and receive valuable feedback from seasoned executives.

Tailored for individuals eager to expand their knowledge and skills by tackling practical challenges under the guidance of experienced professionals. It's the perfect setting to enhance your problem-solving abilities and gain insights that can propel your career forward.

Don't miss this chance to interact with industry leaders, refine your skills, and potentially pave the way for new opportunities. Be part of a dynamic learning experience that can shape your future success.



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BOARD MEMBER SPOTLIGHT

Why did you choose healthcare as your career path?

Growing up in Germany, various childhood experiences led me to feel very protective of those that are most vulnerable and filled me with a desire to help people. My first healthcare job and training were as a pediatric physician's assistant at the age of 16. From there, I re-entered the field within a year after immigrating to the United States, becoming a Registered Nurse working in urban and rural settings, and later clinical auditor and (private) healthcare and (state) public health administrator. My professional career in the field spanned from 1989 – 2022.

What is your role in your organization?

In 2022, after a successful and fulfilling 30+ career in healthcare and public health, I founded Kalaukia Enterprises LLC. We specialize in working with businesses and executive teams in the areas of leadership development, business performance consulting, change & transformation, and strategic & organizational alignment.

What are your primary areas of interest or concern as a healthcare leader?

At this point in my career, my biggest area of interest is to broaden my impact from one individual organization to using decades of experience, knowledge, and results to help lift up other leaders and organizations. This includes areas of overall dashboard/business performance, operations, strategy & alignment, or basics that are not so basic: leadership and organizational best practice bundles to ensure we best support, engage, and retain our employees.

Meet Claudia Crist, President-Elect



Is there anything else you would like to share with our ACHE members?

Yes! Please come join us at one of our events; bring a friend; 'try us out' by becoming a member on one of our active committees; or even consider nominating yourself to become a board member. I'd love to connect!

How long have you been a member of ACHE/active roles?

I have been an active member of ACHE since approx. 2003. Over the years, I have had a chance to speak at ACHE Congress about large healthcare system revenue cycle / shared services models and was a panelist in local chapter conferences on the topics of service line leadership and mentoring/coaching.

I joined our Hawaii-Pacific chapter in January 2023 and currently serve as president-elect.

How has ACHE benefited you in your professional career?

I have benefited from many of the development and networking opportunities ACHE has to offer, both at the national and local level. As someone who has to get continuing education for various licenses/certifications, I can honestly say that the ACHE functions have consistently delivered the most value for the money.

What role(s) would you like to see ACHE play in the local healthcare community?

- o Facilitate the growth and development of a diverse group of leaders, to make sure we collectively understand and meet the healthcare needs of our local communities.
- o Continuously assess and meet the needs of our members in this highly dynamic and challenging industry. Bring value to their daily work!
- o Foster membership and connections for individuals and organizations across the entire care continuum in the Hawaii-Pacific Region.

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BOARD MEMBER SPOTLIGHT

Why did you choose healthcare as your career path?

In high school, I wanted to be a Psychologist. When I applied for college, I ended up majoring in business. Ironically, during my Bachelor's Degree program I applied for a part-time job in Hospital Administration at Kaiser Permanente and was hired. It seems that healthcare would be in my career path after all albeit not as a licensed Psychologist. I spent 25 years in the healthcare industry and continue to work with healthcare leaders today. I am proud of the many opportunities that my healthcare career has paved for me, and it has been absolutely rewarding.

What is your role in your organization?

I am the Chief Executive Officer, Principal Consultant, and certified women-owned small business owner of The Kinsey Group LLC. The Kinsey Group is a Leadership Consulting firm helping individuals and organizations achieve their goals and fulfill their potential by specializing in:

- People – Organizational Leadership Development
- Systems & Processes – Operational Optimization
- Strategy – Sustainable Performance

What are your primary areas of interest or concern as a healthcare leader?

- I am passionate about developing, mentoring, and keeping the next generation of healthcare leaders in the islands. It is my way of giving back. As well as supporting the current workforce to do their jobs safely and effectively..
- My concern is the shortage of Nurses and of Primary Care and Specialty Care Physician in the islands. An additional concern, that directly relates to my interest, is watching potential future healthcare leaders leave the islands and not return.

Meet

Dr. Leilani L. Kinsey Communications Chair Mentorship Chair



Is there anything else you would like to share with our ACHE members?

Get involved, become an active member, and invite a friend. Your participation is invaluable to the success and growth of the Hawai'i Pacific Chapter. Taking the next step is just the beginning.

How long have you been a member of ACHE/active roles?

I became a member of ACHE in 2021. Currently, I serve as a Board Member and the Chair of the Communications Committee and Mentorship Committee which I find to be exciting and energizing.

How has ACHE benefited you in your professional career?

ACHE has offered wonderful opportunities for networking, collaboration, and partnerships with others in the healthcare industry. I also had the opportunity to sit on a panel with two other amazing women who are leaders in healthcare where we shared our experience and insight about Mentorship. Additionally, I talked about the significance of Home-Grown Leadership and succession planning in the islands. Because of this, I have been invited to talk more about Home-Grown leadership and I will be hosting a Talk Story session on Home-Grown leadership in the near future.

What role(s) would you like to see ACHE play in the local healthcare community?

- Continue building relationships and making connections with community leaders and healthcare organizations both large and small.
- Host more healthcare leadership development and networking events throughout the year.
- Partnerships with high schools, colleges, and early-careerists to discover and develop future healthcare leaders.

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CALL FOR NOMINATIONS

Dear Colleagues,

As we are nearing the last quarter of CY 2024, our Nominating Committee is gearing up for our chapter elections. Joining the board is an excellent opportunity for professional growth, networking, and to utilize your experience and leadership skills to impact the professional development of healthcare executives across Hawai'i and the Pacific Region. Becoming a board member also provides unique visibility for mid- and early careerists.

For those interested in getting more involved with the chapter, the following board positions are open for nominations for the term beginning January 1, 2025:

Hawaii-Pacific Chapter of ACHE Board Member and Officer Positions opening for 2025:

- Two Directors (2-year term)
- President-Elect (1-year term)
- Treasurer (1-year term)
- Military Representative (1-year term)
- Physician Executive Representative (1-year term)
- Student Representative (1-year term)

Please consider running yourself or nominating a colleague.

If you have interest in a board position listed above or would like to nominate a colleague, simply email ACHEHawaiiPacific@gmail.com with the following:

- The position or positions the nominee is interested in.
- A short professional biography listing the nominee's education, experience, credentials, and any ACHE experience (approximately 150 words).
- A brief summary explaining why the nominee wants to be involved with our board and your commitment to furthering Healthcare Leadership.

Please note: The nomination period is September 17, 2024 to October 31, 2024.

Additionally, we are looking for motivated members to join one of our Board Committees! Many Board and Committee members require no past board experience—simply being an ACHE member in good standing, having dedication to our chapter, and using your current leadership skills and strengths to assist our chapter. Committee positions do not require an election. Please submit your interest to ACHEHawaiiPacific@gmail.com

Board Committees with opportunity to participate:

- Communications Committee
- Membership Committee
- Education Committee
- Sponsorship Committee
- Diversity, Equity, Inclusion (DEI) Committee
- Scholarship Committee
- Mentorship Sub-Committee

Thank you for your continued support of ACHE. We look forward to receiving your application!

Your Hawaii-Pacific Chapter of ACHE Nominating Committee



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Using a boat analogy, Tresha Moreland, FACHE, illustrates that many healthcare organizations sailed into the COVID-19 pandemic in a weak vessel, beleaguered by workforce challenges.

“Think of being on a sailboat at sea,” says Moreland, human resources executive consultant, HR C-Suite LLC, Rapid City, S.D. “Suddenly, gale-force winds are testing your boat. The sails on your boat may bend and stretch, but if they don’t break, that’s what resiliency looks like. But if something breaks that’s stopping you from proceeding on your course, then there’s work to be done on organizational resilience.”

One of our core values is integrity. When we say we’re going to do something, it’s our role as leaders to ensure that it happens.

– Patrick L. Green, FACHE, Yale New Haven Health and Lawrence + Memorial Hospital

Moreland points to the wide-scale resignations occurring across healthcare as evidence that many ships are officially broken. A September 2021 poll of 1,000 healthcare workers found that one in five respondents had quit a job since the beginning of the pandemic, according to decision intelligence firm Morning Consult. Of those still employed, 19% had considered leaving their jobs as well as the healthcare field.

Further evidence of instability can be found in the results of ACHE’s Top Issues survey, in which personnel shortages ranked No. 1 on the list of hospital CEOs’ top concerns in 2021, replacing financial concerns—the top issue since 2004.

While COVID-19 has put a severe strain on healthcare leaders and staff, the virus is not entirely to blame. “The pandemic highlighted and accelerated existing issues, making them more intense,” Moreland says. “Staff shortages, burnout and other problems were already issues before the pandemic.”

To repair their organizations, healthcare leaders need to reevaluate and redesign their cultures, Moreland says. “Sometimes you have to take a step back and say, ‘We’ve got to start over. We’ve got to talk about how we can build a stronger more resilient boat.’”

What’s needed is a people-first mindset, which recognizes and prioritizes the needs of our patients, staff and leaders, says Patrick L. Green, FACHE, executive vice president, Yale New Haven Health, and president and CEO, Lawrence + Memorial Hospital, New London, Conn.

“Building a strong, resilient organization starts with the foundation of our teams,” Green says. “Just as we make investments in our capital infrastructures and our growth, we have to make investments in our people.”

Interviews with healthcare leaders provided a number of considerations and ideas for bolstering a people-first culture and building a resilient workforce.



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A Workforce Strategic Plan

It can be tempting for leaders to jump right into problem-solving when faced with workforce issues. But Moreland cautions against a finger-in-the-dam approach. "If you try to solve for one reason, you may plug a leak in the dam but you're not solving the underlying issues, and the dam will start sprouting leaks all over."

A more comprehensive and calculated approach is needed. With a view to the future, Cleveland Clinic launched a strategic workforce planning initiative last year focused on identifying workforce needs two to three years in the future. "Historically, this is not something the healthcare industry has done well," says Chad Minor, FACHE, chief of workforce strategies and associate chief caregiver officer. "We aim to get ahead of the needs that will arise in a few years, while also addressing today's challenges."

We aim to get ahead of the needs that will arise in a few years, while also addressing today's challenges.

- Chad Minor, FACHE, Cleveland Clinic

The team is working on analyzing staffing and growth forecasts (e.g., current openings, projected retirements, labor market dynamics) for every clinical and nonclinical area, as well as projecting the type of skills and knowledge that these positions will soon require. "We also know that we will need roles in the future that don't exist today," Minor says.

The team is also looking at the potential for certain technologies, such as artificial intelligence, to improve productivity by reducing the amount of time employees spend on routine tasks that can easily be automated or augmented.

At CommonSpirit Health, Kathleen Sanford, DBA, RN, FACHE, executive vice president and CNO, uses a basic formula for strategy-setting. "You come up with a vision for where you want to be five years from now, then you assess where you are and develop a year-by-year plan to get to the vision," she says.

A few months before the pandemic struck, Sanford gathered together the system's nursing leaders to forge a five-year nursing strategic plan, which builds off the health system's strategic journey. Focus groups were pulled together to get input from front-line nurses, representing all the various units and hospitals in CommonSpirit Health. "I'm extremely biased that you don't implement anything without the people who will be affected," she says.

Nurses voted for one of two possible visions. The winning vision that was selected cites human kindness as a guiding force when interacting with everyone, as well as the importance of advancing the science and art of nursing.



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The first-year plan of the vision began this spring. Two key components will provide for increased staffing coverage and flexibility via virtual care and an in-house staffing agency.

Flexibility and Coverage

One year into the pandemic, with administrative staff working from home, Cleveland Clinic leaders decided to make remote work a long-term strategy. “We realized that there is work that doesn’t need to occur within the walls of an organization,” Minor says.

Remote/hybrid work. All staff are now assigned to one of three work arrangements: on-site, remote or hybrid. For instance, patient care staff work on-site, while many administrative staff work remotely or hybrid. Staff in hybrid positions divide their time between on-site and remote, with most coming to the office two days a week. When hybrid staff are in the office, the goal is to make it purposeful so staff leave the day feeling like they couldn’t have had that experience in a remote setting. Most in-office time is spent ideating, collaborating and team building.

I’m extremely biased that you don’t implement anything without the people who will be affected.

– Kathleen Sanford, DBA, RN, FACHE, CommonSpirit Health

Quantitative metrics are used to track productivity and other outcomes to ensure staff meet goals and targets set by department leaders. “The goal has been to promote and create flexibility for employees,” Minor says. “In this labor market, job seekers are prioritizing and expect flexibility.”

An employee engagement survey conducted in 2021 suggests the remote/hybrid strategy is well liked. When asked “Would you recommend Cleveland Clinic as a place to work,” 90% of remote employees and 89% of hybrid employees responded “yes.”

Self-scheduling. Addressing flexibility demands from nurses and other patient care staff is considerably more challenging, especially on inpatient units that need 24/7 coverage.

To start addressing this problem, Cleveland Clinic instituted self-scheduling for nurses several years ago. “Allowing nurses to have some autonomy and flexibility in their scheduling has been critical,” Minor says.

Nurse managers create schedules for their units/departments based on projected patient census and patient-nurse ratios. Individual nurses can sign up for the shifts that best fit their schedules. The health system is looking at expanding self-scheduling to other clinical areas as a way to promote greater flexibility for employees who work on-site.



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In-house staffing agency. To help ensure adequate patient coverage, CommonSpirit Health will soon be launching an internal staffing agency with 500 nurses available to travel as needed to the system's 1,000 care sites and 140 hospitals in 21 states. Eventually, the agency will employ other clinicians as well such as respiratory therapists.

"It makes sense to have our own travel staff who understand our mission, vision and policies and procedures," Sanford says.

For the nurses who work for the in-house agency, it also offers the flexibility to travel and see different parts of the country.

Virtual care. Another way CommonSpirit Health is ensuring coverage is by integrating virtual care with face-to-face care. "If the prognosticians are correct, there aren't going to be enough nurses in the future," Sanford says. "We have to figure out new models that help our nurses and other team members work at the top of their licenses."

Sanford has been testing virtual nursing care models for more than 10 years. As a result, when COVID-19 struck, CommonSpirit Health was ready to rapidly roll out some of these models. For instance, at several system hospitals, virtual nurses are helping complete time-consuming, admission-discharge-transfer arrangements for inpatients, freeing up on-site nurses for direct patient care.

The exact way virtual care can be successfully deployed will vary from hospital to hospital and market to market, Sanford stresses. "The people on the front lines can tell you what will work best," she says.

For example, Iowa's MercyOne, which is co-owned by CommonSpirit Health and Trinity Health, is using virtual care to help rural hospitals. During pandemic surges, large referral hospitals were full to capacity and unable to accept transfer patients. To help rural clinicians manage complex patients, MercyOne expanded a telemedicine service that allows rural clinicians to consult with specialty physicians and nurses. Currently, four virtual teams of hospitalists, nurses and pharmacy technicians are managing 72 beds virtually from a command center in Des Moines with plans to expand.

For virtual nursing support, patient rooms are equipped with digital screens so on-site and virtual staff can interact with each other and the patient, beginning with the patient assessment. "The telemedicine team's role is to augment and support the caregiving team that is on the ground in-person and provide a better patient experience," says Bob Ritz, FACHE, president and CEO.



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In addition to helping ensure skilled coverage to patients, virtual care opens up an alternative work option for the nurses and other clinicians. “This remote role is very attractive to some nurses such as those who find the strenuous part of bedside nursing difficult,” Ritz says.

Recruitment and Development

Another key workforce strategy is securing and retaining a steady pipeline of new talent. To do so, healthcare organizations are providing education and development to potential and current staff. For example, applicants to MercyOne’s Patient Care Technicians Training Program receive free training at Mercy College of Health Sciences in exchange for agreeing to work at MercyOne for one year. The health system trains 15 techs every six weeks. The retention rate has exceeded 90% since last summer.

In another example, Yale New Haven Health has partnered with local nursing colleges to give students in their final semesters an opportunity to get preceptor-guided bedside experience on various specialty units. The goal of the program, called Bridge to Professional Practice, is to recruit these student nurses for paid positions after graduation.

“It’s an accelerated program that helps us improve our staffing situation while helping nursing students gain confidence in their roles as new nurses,” says Green.

Nursing turnover rates are highest among new graduates. Almost one-fourth (23.9%) of all first-year RNs left their jobs in 2020, according to an NSI Nursing Solutions survey. “New grads tell me that they are overwhelmed,” says Sanford. “What nurses learn in school is not enough to prepare them for what they actually have to do when caring for a group of patients.”

CommonSpirit Health’s new one-year nurse residency program, which launches this spring with its first cohort, aims to better prepare new graduates. In addition to on-the-job learning, the residency will include didactic courses on topics that are not typically taught in college such as critical thinking skills and how to deal with workplace bullies. In addition, residents will have ready access to coaching and mentoring from both in-person and virtual staff nurses when they have questions on how to handle specific situations with patients and fellow staff.

Peer-based coaching and mentoring is being used by numerous organizations as a way to help staff and leaders effectively solve problems and deal with various situations, while also combatting burnout. Cleveland Clinic has trained close to 2,000 people inside and outside the health system on their coaching approach, which encompasses active listening and empathy. Outcomes show increased engagement, resilience, academic productivity and retention of program participants.



The Path of Most Resilience
Maggie Van Dyke
Building a Strong and Fulfilled
Healthcare Workforce

HAWAI'I – PACIFIC
CHAPTER OF ACHE
QUARTERLY NEWSLETTER

FALL 2024

Recognition and Support

When the chief nursing executive at Yale New Haven Health was rounding on units during the first surge of the pandemic, she asked nurses what they needed and how leadership could help. One of the front-line nurses said, "Just don't forget about us."

That struck a chord with system leaders. In response, a Week of Gratitude for all front-line staff was launched, where leaders spend the week rounding on departments across the system to commend and show gratitude to managers and staff. In addition, during the first wave in spring of 2020, all staff were given a monetary award to demonstrate appreciation for their dedication and sacrifice while battling through the pandemic. "We wanted to go beyond words of gratitude and show them that we recognize their efforts," Green says.

Organizations are also strengthening their wellness programs and strategies to help ensure leaders and staff get the help they need. Yale New Haven Health started a buddy program, encouraging all staff and leaders to find a colleague who they can talk to openly and honestly through ups and downs. If staff can't find a buddy, then leaders will help assign them one.

At CommonSpirit Health, nurses are being trained to help spot fellow team members who seem burned out or are suffering from a mental health problem. The program, called Mental Health First Aid, will launch soon with the first cohort of trainees. The nurses are learning how to approach fellow employees and connect them to helpful resources.

A High Say-Do Ratio

When asked how to engage staff in building a more resilient organization, Moreland suggests being honest and vulnerable. "Instead of throwing up some new branding statements or those same old slide presentations on mission and values, be honest with them," Moreland says. "If the last two years were really rough, and tough decisions had to be made, then admit that you were learning as you went through this pandemic. Then stress that you want to work with them on building a stronger, more resilient boat."

Moreland also stresses the need to back up intentions with actions. "We hire smart people. When you give them what I call leadership by lip service, they see right through that," she says.

Green sets a high say-do ratio for himself and his fellow leaders at Yale New Haven Health. "One of our core values is integrity," he says. "When we say we're going to do something, it's our role as leaders to ensure that it happens."

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