Perioperative nurse leaders from across the US and other countries packed the Gaylord National Resort & Convention Center at National Harbor, Maryland, to participate in the 26th annual OR Manager Conference held September 23 to 25.

Approximately 1,000 attendees heard a wide range of talks, met with poster presenters, networked with speakers and colleagues, and enjoyed a record number of exhibits displaying the latest in OR equipment and supplies. Educational programs offered by several exhibitors enhanced opportunities to obtain CE credits during the conference.

Attendees chose from a wide array of pre-conference seminars, general sessions, and breakout sessions. Three tracks—business management, new OR manager, and ambulatory surgery center—helped ensure participants could attend sessions that directly addressed their needs.

**Benefits of transparency**

Outstanding speakers, starting with keynoter Marty Makary, MD, on Monday afternoon, delivered thought-provoking messages about what’s going on in the field today and how to prepare for the future.

“There is no greater problem than the wide variations in American medicine”—variations that include quality, safety, behavior, and patient experience, said Dr Makary. However, he added, exciting developments are occurring in the spirit of transparency.

He noted a study of hospital CEOs that found 26% of nurses fear retribution. That’s because anonymity promotes disruption, he said, and it’s important to break that barrier. Using a surgical checklist is a way to break down barriers, he explained, because team members introduce themselves and thus become active participants.

Dr Makary recounted a time when he ordered a CT scan for the wrong patient, and the patient who was supposed to get the scan didn’t get it. He apologized to...
both patients for the mistake, and the patient who hadn’t gotten the scan ended up becoming a Facebook friend with Dr Makary. “Our relationship improved because of honesty,” he said.

On a broader scale, he shared a transparency success story about dramatically improved cardiac surgery outcomes at the Erie County Medical Center following release of a New York State report on mortality rates for coronary artery bypass grafting. Until the rates were measured, he said, Erie County didn’t know they were that bad. When hospital leaders asked staff what was needed to improve things, they learned that a dedicated cardiac ICU, a dedicated cardiac anesthesiologist, and a regular morbidity and mortality conference were needed—as well as a replacement for a poorly performing surgeon. “Mortality came down to the state average of 4%—the massive variations in quality were eliminated with a little transparency,” he said.

Golden opportunities

Nursing is ready to start a “golden age,” according to Kathleen Sanford, DBA, RN, CENP, FACHE, who spoke on Tuesday morning. Sanford, senior vice president and chief nursing officer for Catholic Health Initiatives (CHI), credited futurist Leland Kaiser, PhD, with coining the phrase several years ago and said, “I’m absolutely sure Leland Kaiser was right.”

Sanford acknowledged that, at first glance, the current age hardly seems to be golden. “Your span of control has gotten out of control,” she said, noting that she had spoken with some audience members who supervise more than 150 employees. Adding to that challenge, perioperative leaders are coping with retention and recruitment issues in a rapidly changing environment.

But Sanford said we are in the golden age of patients, which translates into the golden age for nurses. “It’s about the people we serve,” she said. One indication of how nursing is “coming into its own” is the number of new job titles that require a nursing degree. Examples from CHI include continuing network director, medical home quality director, and post-acute advanced practice RN.

Of course, change isn’t—and never has been—easy. Sanford cited the example of vitamin C and scurvy. Scottish physician James Lind first proved that citrus fruits prevented scurvy in 1753, but it wasn’t until 1795 that the British navy took action, and it wasn’t until 1907 that the link between vitamin C and scurvy became accepted.

Similarly, in healthcare, some problems haven’t changed in many years. Sanford said that around 1920, identified problems included high costs and infections. However, Sanford said, “We’re finally figuring out that there are ways of doing these things, and it’s going to depend on our profession to get them done.” Hospitals also need to understand that the number of inpatients is shrinking by about 3% each year, with the only growth in orthopedics, women’s services, and oncology.

Sanford cited an example of how education can empower nurses to speak out on behalf of patients, even in trying circumstances. A patient cut his thumb. The surgeon said it had to be amputated, but the nurse thought the thumb might be saved. Al-

Attendees packed the Exhibit Hall during the Welcoming Reception on Monday evening.

Pamela Smith, BSN, RN, CNOR, from Bon Secours St Francis Hospital in Charleston, South Carolina, received the OR Manager of the Year award.
though the surgeon argued with the nurse, she left the OR to find the chief of surgery. The other nurse refused to give the surgeon the scalpel. The outcome? The chief surgeon said the thumb could be saved.

What made this episode special was that the nurses said they felt comfortable speaking out because the organization had adopted a culture of safety. Before then, they would have said nothing. Sanford said praise goes not only to the nurses in the OR but “to the leader who said it’s OK to speak up; you will be celebrated.”

Safety and quality will be challenged by rising costs, with healthcare expected to soon reach 17% of the gross national product. “We must get costs down and keep quality up,” Sanford said.

Sanford noted that 3 ingredients will help leaders lead in this time of change: courage, a sense of humor, and love. Leaders need “courage to change [their] culture and courage to face the unknown,” she said. A sense of humor helps people to have fun at work. It helps to love yourself and those who work with you, understanding, as Sanford said, “There isn’t such a thing as a ‘jerk-free’ environment.”

OR leaders need to understand some hard facts. In the past, Sanford said, requests from the OR automatically “went to the top of the list” even when there wasn’t evidence to back up the need. From now on, “the OR will become more of a cost center than it’s ever been,” said Sanford.

Sanford is excited to move forward in this golden age of nursing and hopes OR leaders will stay in the field to enjoy this time. “You have so much wisdom,” she said. “I hope you plan to stick around for a while.”

That wisdom will be needed, she says, because “the stress of high-velocity change is here to stay.”

**Shift in attitude**

Attitudes and “comfort zones” can make or break the perioperative environment, and today’s leaders must understand the communication and learning styles of their staffs.

For the first time in history, we have 4 generations working together in perioperative services—Traditionalists or Veterans, Baby Boomers, Gen X, and Gen Y, said Rose Sherman, EdD, RN, NEA-BC, FAAN, associate professor and director, Nursing Leadership Institute, Christine E. Lynne College of Nursing, Florida Atlantic University, Boca Raton. She shared pearls for leading a multigenerational perioperative workforce during her presentation on Tuesday.

Each generation has different attitudes, beliefs, work habits, and expectations. Learning to understand each generation and how it approaches the world and work is crucial to avoiding conflict, she emphasized.

Managers can capitalize on their various nursing generations’ strengths. For example, Gen Y nurses are very comfortable with technology. They may be the best group to test-drive and evaluate new technology, and then they can coach older nurses in learning how to use it.

This will also be true for the Gen Z nurses who will be joining the workforce in the next few years. They are the first generation to be born with complete technology—PCs, mobile phones, gaming devices, MP3 players, and the Internet.

The Baby Boomers currently occupy many leadership positions. They will be retiring soon, and the transfer of their knowledge is a very critical issue.
Positive action

Anyone experiencing fatigue at the end of the conference was bound to feel reenergized from the interactive and engaging “Time Out!” presentation by closing speaker Vicki Hess. Drawing on personal experience, humor, and wisdom, Hess “empowered” everyone with a simple 5-step “SHIFT” checklist to use as a coping mechanism for the daily challenges all perioperative leaders face: Stop and breathe, Harness reactions, Identify emotions, Find new options, and Take one positive action.

To that end, mark your calendar now for next year’s OR Manager Annual Conference, which will be held September 17-19, 2014, at Long Beach Convention Center in Long Beach, California.

—Cynthia Saver, RN, MS

Cynthia Saver, a freelance writer, is president of CLS Development, Inc., in Columbia, Maryland.