

# Following Miss B's Lead

Opportunities for leadership abound—and we need to step up.

One of my first managers, the head nurse of Bellevue's premature nursery (what we now call a NICU), left a lasting impression on me. She was in her thirties then, a "career woman" (a '70s euphemism for unmarried) out of the mold of traditional head nurses: hair up and off the collar, spotless white uniform and shoes. No one ever called her by her first name—she was always "Miss B." Efficient and self-assured, she had high expectations and set exacting standards for her staff. She was encouraging and supportive, but did not suffer fools. During "situations," she exuded calm; I never heard her raise her voice. She guarded her tiny, fragile charges with tenacity.

She believed that the infants in the NICU were doing all they could to survive and that it was up to the rest of us to make sure they did; she expected everyone to feel the same way. When the patient census was high, it wasn't uncommon to see pediatric residents feeding and rocking babies and then reporting to Miss B. She made rounds with the physicians, participating actively in discussions of patients' progress and plans of care. Leading by example, she taught us that, as nurses, we knew things about patients that physicians did not—and that to ensure correct care for our patients, we needed to make sure the physicians heard us. During the summer I worked on her unit (and make no mistake, it was *her* unit), not one infant died, and I'm sure it was because Miss B just wouldn't allow it. You could see her through the large glass windows of the nursery rooms, constantly moving among the Isolettes. She anticipated worst-case scenarios and monitored the patients closely. Indeed, she was a stickler for details—she believed that if we paid attention to the small, not-so-important ones, we wouldn't miss the big ones. It was all about being committed to the patients.

We need more leaders like Miss B, nurses who can set priorities, address both the large issues and the small ones, and make things happen to further the best interests of patients. The Institute of Medicine's 2010 report, *The Future of Nursing: Leading Change, Advancing Health*, calls for more

nurses in leadership positions, as part of ensuring the much-needed transformation of our health care system. Yes, nurses are needed in the boardrooms where policies are made and money is allocated—but that's not enough. Nurses must be leaders in every venue where people receive health care, and at every level of care. In this issue, we bring you some examples of nurses doing just that.

In our original research article, Lisa Carney Anderson and Kathleen Fagerlund present findings from their qualitative study investigating the perioperative experiences of patients with Parkinson's disease, especially with regard to perioperative medication withholding and symptom exacerbation. Last month these authors (with Olga Gurvich) presented results from a quantitative companion study, which showed how detrimental

the common practice of such withholding can be for people with Parkinson's disease, whose drug regimens are extremely time sensitive. Taken together, their findings lay the groundwork for supporting needed system change for managing patients with Parkinson's disease.

An *In Our Community* article details how Arkansas nurse Rebecca Matthews teamed up with Andrea Moore, a mother whose child died of sudden infant death syndrome (SIDS), to initiate a public health campaign on the importance of placing infants on their backs for sleep. Their efforts and testimony helped to pass state legislation mandating safe sleep practices in child-care facilities.

And this month we launch a new series, *Perspectives on Leadership*, coordinated by the American Organization of Nurse Executives (AONE), and an outgrowth of the AONE's Care Innovation and Transformation initiative, highlighting how nurses are leading change efforts in hospitals.

Miss B's model leadership remains timely. As nurses, we have countless opportunities, big and small, to demonstrate leadership. Who knows more than we do about the ways that health care systems and processes break down? Don't pass up your chance to make a difference. ▼



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