Crisis Management:
The Nurse Leader's Role

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Crisis situations are not new. As a result of increased globalization, population and technology crises can quickly escalate in scale or scope beyond their origins. This nature of catastrophic and emergency events increasingly pushes health care leadership teams into crisis mode. The most common crises arise from natural disasters such as hurricanes and earthquakes.[1] However, manmade crises, many international in nature, such as the ongoing fighting in Syria, terrorist attacks, and attacks against critical infrastructure, can lead to population displacement and the need for rapid and large-scale humanitarian services. Public health crises, such as the H1N1/09 influenza pandemic (2009), the Ebola virus disease epidemic in West Africa (2014), the Zika virus outbreak (2015), and water contamination in Flint, Michigan (2016), can lead to great loss of life and have significant, long-term impact on community health and economic welfare.

Crisis management planning is particularly important now because demographic and societal changes are increasing risk factors. Growing population density in or near disaster-prone areas, including earthquake faults, coastal zones, and floodplains, means more people and infrastructure are at risk.[2] In the United States, the population of those over age 65 with chronic diseases and disabilities will more than double to about 71 million by 2030,[3] presenting specific disaster-response challenges such as providing medical necessities and mobility assistance. Emerging infectious diseases and antibiotic resistance remain an ongoing concern, whereas increased international travel plays a significant role in the rapid spread of diseases.[1] Terrorist attacks and fighting in conflict zones, not only affect initial or intended targets, but also expose first responders and crisis managers to harm.

GUIDING PRINCIPLES DEVELOPMENT

In June 2015, AONE convened a Day of Dialogue to discuss lessons learned from the Ebola virus disease and other emergencies. The group (see Box 1), comprising communications professionals and nurse leaders with experience managing crises, ranging from natural disasters, terrorism, and treating infectious disease, identified the skills and behaviors nurse leaders need to effectively manage a crisis.

Nurses start as leaders within their homes and communities by ensuring their families and neighbors have disaster plans and supply kits.[4] As the nation's largest group of health care professionals, nurses are the clinical backbone and safety net of the health care system, providing leadership for staff and clinical care for disaster victims during emergencies. Given this role, the AONE Crisis Management Task Force, with input from members of the American Hospital Association's Society for Healthcare Strategy & Market Development, developed guiding principles (see *Figure 1*) to assist nurse leaders in expanding their roles, knowledge, and responsibilities in managing a crisis. With their experience, nurse leaders can help bring order to chaos utilizing leadership behaviors. They provide vision and influence in order to provide strategic decision making and guidance through the phases of a crisis.[5]

Through facilitated dialogue, task force participants combined their knowledge of leadership and chaos theories, as well as historical context, to evaluate specific examples of nursing leadership in different crises locations and scopes in order to glean the best practices for nurse leaders.

GUIDING PRINCIPLE TOPICS

Below, some of the topics from the Guiding Principles are highlighted.

Communication—Understanding the tenets of good communication is essential to leading through a crisis. The ability to handle the human dimension of a crisis is important. Nurse leaders remind people of their strengths, in spite of the fear and anxiety triggered by an incident.[6] Nurse leaders are empathetic to how people react to loss, challenges, and uncertainty. Nurse leaders maintain a calm demeanor, which in turn, has a calming effect on others. They display compassion, courage, assurance, and endurance while managing crises. Nurse leaders provide direction, implement a plan, and inspire people, but also

understand any illness, injury, or death is a tragedy and has mental, physical, and emotional costs.[4]

Communicating in a timely manner is critical to circulating facts and dispelling rumors. In an emergency, the content of official messages, the speed of the communication, the perception of the messenger's credibility and truthfulness are important.[1,4] By offering simplified, transparent information sufficient to make decisions, nurse leaders can inspire people to help themselves. Disasters, increased stress levels, situational chaos, and other distractions can create barriers to good communication.

Critical thinking—Leaders must be skilled critical thinkers, collaborative and able to manage ambiguity. Nurse leaders have the ability to interpret, analyze, and explain situations, including the importance of relationships based on their knowledge of systems theory and holistic education. They add clarity and perspective to factual information so it can be fully understood by anyone. Nurse leaders should coordinate with other credible sources, build bridges, and maintain partnerships with other organizations. The nurse leader's central mission is to maintain safety and meet the basic needs of the patients and health care staff.

CNO influence—The chief nursing officer (CNO) is a member of the senior leadership team who advocates for the nursing staff, patients, and families through his or her experience as a clinical nurse or nurse leader, education, and advanced leadership training. Because they are highly visible and accessible throughout an institution, CNOs are well positioned to provide strategic insight and influence during crises and organizational challenges. They display a combination of situational, transformational, and crisis leadership styles suited for a critical situation. It is crucial the nurse leader be a recognized member of the crisis management team—the group who directs the organization's response to an incident.

ORGANIZATIONAL READINESS PLANS

Leadership in health care organizations utilizes crisis management tools, competencies, and skill sets to develop organizational readiness plans. These plans require an interprofessional response and a clear chain of command. The written plan details policies, procedures, job responsibilities, and guidelines related to dealing with various types of crises an organization may experience.

Leadership's responsibility is to identify the nature of the crisis, activate a plan, implement actions, intervene to minimize damage, and guide the organization through recovery efforts. An organization's internal and external communication strategy should be clear-

Box 1. Nurse Leader's Role in Crisis Management Day of Dialogue

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Figure 1. Guiding Principles on the Role of the Nurse Leader in Managing a Crisis

- Nurse leaders are trained in media relations and understand the tenets of good communication.
- Leaders are skilled critical thinkers, collaborative and able to manage ambiguity.
- Nurse leaders project calm, confidence and authority in all situations. They are also empathetic to how people react to loss, challenges, and uncertainty.
- Nurse leaders are prepared to review and practice the organization's crisis readiness plan with nursing staff.
- The chief nursing officer is a member of the senior leadership team, whose role is clearly defined and sought by colleagues, particularly during a crisis.

ly delineated in the organizational readiness plan. The strategy should include designations such as the plan initiator, director, public face, and the liaison between the organization and government agencies.

Nurse leaders, along with other leaders in the organization, should practice disaster deployment activities yearly and continually develop core competencies to prepare staff to safely deploy in support of disaster operations. Although it is important to continually train personnel through drills, simulation, and discussions, nurse leaders must also practice communicating with health care staff, patients, and families.

PREPARING NURSE LEADERS

The process of preparing nurses for their role in managing a crisis takes place in classroom and workplace settings. Undergraduate courses teach basic concepts related to the staff nurse's role in various crises. Leadership competencies, communication, and incident command principles, along with ethical decision making, are incorporated into graduate-level curriculum for nurse leaders.

The process of preparing nurses continues in the workplace under the leadership of nursing administration and executive teams. All members of the organization must know the components of the organization's crisis plan. In addition, all staff must know how to function in the event of a crisis, whether internal or external. Organizational leaders are responsible for preparing the organization for the inevitable crisis. Drills, mock scenarios, and simulation are strategies to create a state of readiness. Additionally, the individual nurse or employee shares the responsibility to be prepared and ready for potential disasters through continued learning and education. Nurses should complete the Federal Emergency Management Agency free online education modules on incident command, workplace violence, and emergency management principles. These modules are valuable resources in creating a common framework and language for disaster management, known as the National Incident Management System and Hospital Incident Command System.

The Guiding Principles on the Role of the Nurse Leader in Managing a Crisis and tools are available at AONE.org.

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