

# Inspiring Change: Thriving...not just surviving a hospital merger!

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“While changes in systems and processes are essential, leaders cannot hope to achieve success in implementing them without a broad base of support from their people.”



Oakley & Krug, (1991) *Enlightened Leadership*.  
New York: Fireside, p.52.

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# The RWJ- Barnabas Merger



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## Objectives

- Describe how hospital mergers affect the CNS/CNE in the three spheres of influence
- Identify challenges faced by the CNS/CNE in association with a hospital merger of two health systems looking specifically at the patient, the system and the staff influence post-merger
- Review practices that impacted collaboration across campuses after a hospital merger

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## Three Spheres of Influence

- **Client** – Clinical expert establishes practice standards
- **Staff** – Mentor to bedside nurses
- **Organization** - Leader of organizational change

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## Mergers

### Pros

- Capitol Access (gain market share)
- Expanding services (adding to operational scale)
- Access to shared personnel
- Greater collaboration among healthcare providers
- Redistributing cost

### Cons

- Change in culture, values, missions
- Loss of personnel (downsizing)
- Loss of trust in organization and leadership
- Feelings of isolation

<http://www.beckershospitalview.com/hospital-transactions-and-valuation/pros-and-cons-of-3-common-hospital-transaction-structures.html>

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## RWJ Hamilton Pre-Merger

- Three unit-based educators:
  - ED
  - ICU
  - OR
- Three educators located in the main education department

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## RWJ Hamilton Pre-Merger

- Three educators that were not unit based facilitated:
  - Nursing Orientation
  - Competency Skills Days
  - CPR Course
  - EKG Course
  - Basic Arrhythmia Course
  - Pharmacology Course
  - Preceptor Course

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## Challenges of the Merger

- Traveling distance amongst campuses
- Resistance to change
- Ambivalence of staff
- Learning curve and push to become involved in research and Evidenced Based Practice.
- Pressure to become more of a role model (i.e. becoming certified, obtaining advanced degrees).

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## Mergers between Big Bob and Lil Bob

- A retreat was held and all educators from New Brunswick, Hamilton and Somerset attended.
- Courses, seminars and classes amongst the campuses were discussed.
- Brain-storming, collaboration, networking and resource-sharing occurred.

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## RWJ Hamilton Post-Merger

- All educators now unit based, except for one left in Central Educator role.
- Two other educators that were originally in Central Education, moved to Telemetry Unit and Medical-Surgical Units.

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## RWJ- Hamilton Post Merger cont.

- Staff were originally not engaged about traveling to different campuses for classes.
- However, as time passed, staff became less resistant as more options were available to them.

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## Supporting Staff

- As a result of the merger, guidance was provided as Hamilton travels on the Magnet journey.
- The Professional Advancement System, a type of Clinical Ladder, was offered to the Hamilton campus modeled by the New Brunswick and Somerset campuses.
- In addition, educators at Hamilton gained access to the medical library as a means to further support staff.

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## RWJ Hamilton Post-Merger

- Ways that RWJ Hamilton Educators adjusted to the merger:
  - Increased flexibility
  - More open-minded; creative
  - Education base and skills-sets were broadened
  - More collaborative – working with a larger group

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## Support and Communication

- **Support:**
  - Unlimited resources, policy sharing & development
  - Periodic retreats grouped by specialty, each group to report out on ideas and progress.
- **Communication:**
  - Conference lines available for meetings across campuses
  - System shared drive for contributing lectures, protocols and other resources

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## “One Bob, One Family”

- Instead of “Big Bob vs Lil Bob,” we are now a family.
- CNE/CNS’s have a mutual collegial respect for one another.
- Staff from both campuses collaborate and benefit from shared resources as they benefit from what both campuses have to offer.

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# Questions??



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