

that's designed to engage, support, and inspire hospital leaders in their ongoing efforts to improve the patient experience and meet these aims while also achieving operational, clinical, and financial excellence. TCAB is an important component of the AHA's strategic plan because it allows the nursing workforce to be bedside decision makers, giving them the capacity to further the program's component goals, such as reducing hospital-acquired infection rates and falls.

As nurses gain skill and confidence in using rapid-cycle redesign to address quality improvement, they can transfer these skills to the larger issues of systemwide reform that will begin to reshape care delivery processes. How will we take waste out of the system? How will we create more effective and efficient processes? As we face greater financial constraints, how can we use our resources to their fullest extent?

As TCAB changes decision-making processes on the unit, it also has the potential to change decision making in the entire health care system. TCAB is creating a culture that respects the ability of those at the bedside to know what must be done to provide the care patients need. This is the culture that will lead to a new, transformative partnership between

management and staff. In this culture, "the leadership" includes everyone who is trying to design and deliver care. Redesigned, safe, high-quality care, delivered at a reduced cost to satisfied patients and families in work environments that are professionally challenging and rewarding for nurses—that is the future. ▼

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TCAB Fosters Leadership Skills

An AONE fellow and staff on her unit experience opportunities for growth.

In 2008 Amanda L. Stefanyk, MSN, MBA, RN, began a yearlong fellowship program with the American Organization of Nurse Executives (AONE). Stefanyk was one of 30 nurse managers or directors chosen to participate in the inaugural year of the fellowship. The fellows attended meetings throughout the year and kept in touch through e-mail and phone calls. Stefanyk says the fellowship enabled her to network with gifted managers and directors, some of whom had different experiences and faced different challenges. It was a supportive group, and they contributed to each other's learning.

As a separate initiative, the AONE is leading the current expansion phase of Transforming Care at the Bedside (TCAB), which involves 67 hospitals. Another AONE fellow, Amy Lussier, BSN, RN, of San Jacinto Methodist Hospital in Baytown, Texas, also is involved in the TCAB initiative.

Stefanyk feels that she has grown as a leader through both the AONE fellowship and her involvement with TCAB. The TCAB initiative is much bigger than anything she had done before. She's gained confidence that she can manage a project of this scope.

The underlying concept of TCAB is for front-line staff and unit-based leaders to become engaged in generating ideas for change

and in making the change happen. The TCAB process isn't just about a single change. It's about the process of change, the journey. TCAB is about empowering staff; Stefanyk has seen how her staff has become more confident as they have engaged in the TCAB process.

Many of the nurses on Stefanyk's unit have become champions for the TCAB initiative and have attended national conferences where they demonstrated their new skills. For example, a staff nurse went with Stefanyk to a national AONE meeting and made a storyboard presentation about how they moved supplies to the bedside. She explained the problem they were trying to address, how the change was made, and their evaluation of it. It was the first time this staff nurse had made such an important presentation, and Stefanyk says she was excellent.

A medical-surgical unit historically is thought of as a stepping-stone, a place to start before moving to a specialty. Stefanyk and her team are trying to emphasize that medical-surgical nursing is a specialty in itself, so that nurses see the unit as a place that can be continually challenging. Nurses on this unit are the experts who are going to be teaching other nurses in the hospital about TCAB. —Laurie Lewis, freelance medical writer, New York City ▼