

“Stay Strong For Us?
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Nurses stay strong
through the arts of
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- Kerri Wilhoite

2020 to Now... A CNO Reflects

by Kerri Wilhoite

January 2020 started out fresh with grand ideas of enhancing models for shared governance and strengthening our clinical nurse managers through intentional leadership development opportunities. Even in February 2020 we had our last unmasked large group engagement. Wow! I just wrote those words. It seems like a million years ago. Clinical nurse managers were invited to come to a two-day leadership development and strategic planning session. Dr. Rose Sherman started off the first day with developing the group into “coaches.” Then the next day we strategized about the Southern Arizona Healthcare System’s (SAVAHCS) shared governance model and we dreamed big about the future.

Rumors of a terrible virus emerged, and I began to research the spread and challenges in other countries. As I attended a noon briefing daily with our infection control staff and, while sitting in a rooftop conference room overlooking south Tucson and listening to Centers of Disease Control talk about no cures, social distancing and wearing masks to prevent the spread, I became deeply concerned. I knew that these concepts were not anything like our day-to-day life in America and I began to ponder the impact to our way of life.

My worst imagined fears materialized. The virus made it to the United States (US), and I watched as the greatest impact hit the northeast. It was horrifying to see teams of healthcare providers wearing less than adequate personal protective equipment (PPE) to fight an invisible foe. My team started to prepare even though the virus was not a huge threat to us in Arizona during the spring of 2020. We set up outdoor COVID 19 emergency room care rooms, trained staff to utilized skill sets that weren’t sharp presently, started screening all staff and Veterans who entered the buildings for temperature and symptoms. We started to use telehealth modalities of care whenever feasible to decrease patient volumes on campus. We mandated masks and closed areas where social distancing was not physically capable.

After the July 4th holiday, SAVAHCS and most of Arizona saw our first major influx patients with COVID 19 being hospitalized. Our Indian Healthcare System’s (IHS) were really affected and many of our staff were deployed to support in any way possible in these highly rural areas of Arizona. It was amazing to watch our

nursing leadership teams “coach” their teams into new models of care, stretching skills, staying safe with correct PPE adherence, and much more as we entered an uncharted territory. Nurses rose to the challenge every day to support our Veterans and one another.

After the July surge of hospitalized patients, I began to learn a new normal for healthcare that is more chaotic than I have ever experienced in my 24 years of nursing: surge, recovery, surge, recovery, then surge again. As the inpatient hospital volumes increased all non-emergent/urgent care was delayed keeping the healthy away from the sick and to utilize all staff for inpatient capacity. As soon as the inpatient surge started to decrease, we would quickly try to get all the routine healthcare back in que. This process started after our July 4th holiday surge and has continued even as I write this, in February 2021 – after our Thanksgiving/Christmas surge. Nursing is at the heart of healthcare operations and I can see the toll this rollercoaster is taking on my team.

But then I reflect... is there hope in all this madness? I propose that yes, there is. Hope in watching nurses grow and encourage each other. Hope as we find a way to provide routine care to Veterans in need. I have hope for a cure, a day of no masks, where are visitors allowed to be with loved ones and much more. Late December 2020... vaccines arrived and there is a palpable renewed energy around the campus. I can see it in the eyes of staff and Veterans alike.

Stay Strong For Us? That’s what nurses do. We stay up in the middle of the night and watch over the frail and sick. When everything around us screams, “Give up, because this is an endless battle,” nurse stand up and say, “Look closely at the little rays of sunshine streaming through the heartaches.” Like the first intubated COVID 19 patient who recovered and was celebrated as he left the hospital for home. These little rays of sunshine are everywhere if we just look closely. Nurses stay strong through the arts of healing, those same arts that brought us to this noble profession. That is our superpower.

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Kerri Wilhoite with masked members of her team

Proceed Until Apprehended

The three most important words in my book [*The Florence Prescription: From Accountability to Ownership*](#) are **Proceed Until Apprehended**.

When we worked with VISN 20 of the Veterans Health Administration (eight medical centers and associated CBOCs in Alaska, Washington, Oregon and Idaho) our Master Values Coaches would shout PUA! (rhymes with oorah! and hooah!).

Those three words capture the essence of a Culture of Ownership. If there is a problem, people fix it instead of just complaining about it. If they need help, they get it. They own their work and their outcomes – they don't just rent a spot on the organization chart.

Those three words also capture the essence of personal empowerment (The Self Empowerment Pledge is featured in chapter 10 of the book). You do not need permission from anyone else to pursue your most authentic goals. And no one can empower you but you.

Amidst the hardship and heartbreak of this confluence of crises will arise new opportunities, new relationships, new visions for the future. Cultivating a Proceed Until Apprehended (PUA!) mindset will help you Stay Strong for yourself.

PS: If you proceed fast enough, by the time they figure out what you're doing, it will be too late to stop you.



Proceed Until Apprehended banner at Doctors Hospital of Augusta

A Note from Joe

Values Coach has worked with more than a dozen Veterans Health Administration facilities, and I am consistently impressed with the spirit of ownership reflected by the professionals who work in these organizations, most of whom refer to the people they serve as “our Veterans” or “my Veterans,” and not just as “the veterans.” I also have noted how most people capitalize the first letter in the word Veteran when it refers to a specific individual or group – another way of honoring those they serve for their service to our nation.

*Excerpted from [*Building a Culture of Ownership in Healthcare*](#) (second edition)
by Joe Tye and Bob Dent*