

Leader to Watch

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Mary Beth Kingston, MSN, RN, NEA-BC, is chief nursing officer at Advocate Aurora Health in Downer's Grove, Illinois, and Milwaukee, Wisconsin, and is AONE president.



DM: Tell me about the integration of Advocate and Aurora, which I am certain posed great transition. What insights have you gained from that experience?

MBK: Getting sleep is critical, it is a busy time! This merger was interesting as it involved 2 very strong organizations coming together. It was not a situation where one was much larger or positioned better strategically or financially. We challenged our integration teams to seek the best processes, rather than simply adopting one organization's approach. Every merger is vastly different, but communication is the one constant that cannot be overlooked. Communicating authentically and transparently about the benefits of the merger and creating a shared vision for the future is essential. We used a variety of vehicles, including video conferences, open forums, newsletters, and leader interviews.

Another key learning is not to underestimate the impact of the change that occurs during the merger process. We were acutely aware that team members were waiting to hear if their roles, reporting relationships, and scope would change. Recognizing that delays in this process produce anxiety, we worked very hard to make decisions thoughtfully, but quickly. I think we all instinctively know that culture differences in organizations are one of the most significant challenges in a merger. We identified more similarities than differences, but organizations each have their own unique culture. Assuming good intent and listening were 2 of our guiding principles during the transition. As we moved out of the early phases, the hard work of actually bringing the organizational functions and processes together began, and appreciation of cultural differences was critical to the integration process. Together, Advocate Aurora Health defined shared values to include excellence, compassion, and respect. As we approach the



1-year mark of coming together, focus on these values ensures we are doing the right thing for our patients, communities, and each other.

DM: This merger has been such a rich experience. How did you go about selecting system leaders who could maintain the assumption of good intent, to be authentic?

MBK: I had a distinct advantage in this area. Leaders from Advocate Health Care and I had the opportunity to collaborate and plan months before the merger was finalized. We initially identified the enterprise roles that we needed moving forward in this larger nursing organization and then focused on the potential candidate characteristics and experiences. Fortunately, we had excellent nursing leaders in both organizations and little overlap due to differences in our enterprise structure. I looked at current team composition and discussed possible opportunities/changes with each team member assessing their interest and aptitudes for the proposed roles.

After identifying the required roles and selecting the enterprise nursing leaders, came the work of solidifying the team. We found that face-to-face communication was essential in developing a cohesive, united team. Adding 1 new person creates a new team, and this is greatly magnified during a merger process.

DM: You mentioned maybe the merger is close to the end of the honeymoon period, so what are the priorities now?

MBK: As the 10th largest not-for-profit, integrated health system in the United States, transforming and strengthening our core business and focusing on our purpose of “helping people live well” is our first priority. While integration continues, we are engaged in enhancing our commitment to safety, diversity and inclusivity, growth, and patient/consumer-centric care. Both organizations already had a strong focus on population health and on improving quality outcomes, while reducing the cost of care. At the same time, we’re examining what changes will be needed in the future health care environment through our strategic planning process.

Advocate Aurora’s 22,000 nurses represent one-third of our workforce and are on the front lines supporting these goals. Our initial priorities have been geared toward enhancing shared governance at the enterprise level, unifying our practice and professional development models, engaging nurses in all settings, and actively participating in the development of innovative care models.

DM: You talked about the pace of things. You are involved at the national level with AONE as a board member and now as the president. As leaders, we have to remain energetic. How do you face the challenge of remaining energetic, despite demands, and what advice do you have for our readers?

MBK: I think we have to be able to share the work and allow all team members to contribute. That is one reason

we join organizations. It allows you to work with committed individuals focused on a common mission and goals. Finding time to refresh and re-energize is also essential. Everyone has their own way of doing this. I am an avid reader and love to get lost in a good novel, movie, or occasional cable series “binge.” Time with my family, particularly my 5 grandchildren, is very important to me, and I make a conscious effort to disconnect from work demands as much as possible when I’m with them.

DM: I am reading a new book by Margaret Wheatley, *Who Do We Chose to Be?*, and she talks about islands.

MBK: “Islands of sanity” is a great way to frame this. I think it’s very difficult to consistently find the balance we seek in work and our personal lives. At times, one or the other seems to occupy more of our time, but carving out time to care for yourself, family, and others, and to engage in other enjoyable activities is so important. We all know that it is difficult to care for others if we don’t invest in ourselves, so I try to be intentional about that.

DM: The concept of disconnecting or islands of sanity are also important for your teams. How do you help them deal with the ambiguity and multiple priorities that come out of a complex organization?

MBK: Having a clear direction and strategic plan helps to guide priority activities. However, at the same time, you have to be flexible enough to address the unexpected, accelerate plans, and respond to changes in the environment. So direction and clarity of objectives helps, but it’s also important to socialize and have fun as a team. We had our first combined retreat at the Milwaukee Zoo with time to explore and get to know each other. These types of professional and social activities also help to build trust, so that team members can take time away from work knowing their colleagues can assist with issues that arise.

DM: Switching gears, can you talk about key moments in your career that you consider fundamental in your evolution as a leader?

MBK: There are many! As a senior in nursing school, I had the opportunity to participate in a 6-week clinical rotation at the National Cancer Institute. I witnessed nursing leadership in action and decided then that I was going to pursue my education after graduation. In graduate school at the University of Pennsylvania, I was greatly influenced by nursing leaders who were changing practice through their research and professional activities. During this time, I also began my involvement in professional organizations, further developing my leadership skills. More recently, the Robert Wood Johnson Executive Nurse Fellows program



Name:

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Hometown:

Philadelphia, Pennsylvania

Current job:

Chief nursing officer at Advocate Aurora

Education:

MSN in Adult Health (University of Pennsylvania), BSN (West Chester University)

First job in nursing:

I was a clinical nurse on an inpatient surgical unit at a local community hospital.

Being in a leadership position gives me the opportunity to:

Empower the nurses I work with

Most people don’t know that I:

Finished a half marathon 2 years ago, but very slowly, I might add. It may be the one and the only!

My best advice to inspiring leaders:

Know yourself and by that, I mean know what interests and drives you. You do not have to know everything or where you will be in 30 years, but recognize what excites and energizes you and pursue that.

One thing I want to do or learn:

To be a better cook!

One word to describe me:

Persistent



encouraged me to “think big” and was instrumental in my decision to accept a position in the Midwest, leading nursing functions within a larger health care system. Along the way, my peers have challenged and encouraged me to seek opportunities and provided great feedback and support. I’ve also been fortunate to have wonderful mentors, including Joanne Disch, PhD, RN, FAAN, who now serves as the inaugural board chair of Advocate Aurora.

DM: Let’s talk about the passion for serving the profession at the national level, as an AONE board member, and the next president of the organization. Where do you think that passion came from?

MBK: In my early experience in professional organizations, I saw the impact that engagement had on leadership development and professional practice, including developing the skills of new and experienced nurses, and the power of influencing others to improve patient care. I was a member of AONE, having participated in my state affiliate, and responded to a call for the strategic planning committee. I was so impressed with the thoughtfulness of the process, including the environmental assessment and laser focus on the potential of nurse leadership to impact health care broadly. I walked away wanting to participate in AONE on a national level. I believe nurses can lead and play a major role in improving health care in our country. Engaging in professional organizations

is one way to approach this goal. It requires collaboration across disciplines and with other organizations, but we can achieve so much with our collective efforts.

DM: You described some of the best parts of AONE, what are some of the challenges?

MBK: The work is very exciting, but balancing many demands and priorities is not an easy task. Fortunately, we have a dynamic board and a talented staff who provide great support for the many initiatives and activities. Another challenge relates to AONE membership, though I prefer to see this as an opportunity! Increasing membership diversity, in all ways, is crucial. We want to continue to engage nurse leaders at all phases of the career, as well as to communicate the benefits of AONE membership and participation to nurses practicing in a variety of settings—ambulatory, home care, skilled facilities, industry community.... We need all of these voices to make a difference.

DM: As a leader, what do you think is the best investment you have made in your own professional development in the past 5 years?

MBK: Hopefully, by the time this article is published, I will have completed my PhD program. (That’s where the persistence trait comes in!) My degree is health policy focused—an area where nurses can truly make a difference. I’ve mentioned the Robert Wood Johnson Executive Nurse Fellows program, which helped

me to identify personal and professional growth areas, as well as how to maximize my strengths. Serving on the board on AONE has been personally rewarding and also a great leadership opportunity. All of these “investments” have helped me to develop a national network of colleagues who are all very generous with their time and advice.

DM: You have talked a lot about strategies and priorities. What are your priorities as AONE’s next president?

MBK: Each president has priorities that are important to them, and we highlight that during the election process, but it would be very disruptive to completely change priorities every January! The AONE board and staff have just completed our strategic plan and identified the following priorities: advocacy, workforce issues, leadership competencies, value-based care, and membership diversity and engagement. I do believe that a number of issues in health care today that I am passionate about—opioid addiction, behavioral health care, and workplace safety—are topics that align with our priorities.

DM: Off the beaten path question, what did you notice about your last health care experience, when you were on the receiving end as a patient or family member of a patient?

MBK: This was some time ago, but my sister-in law died of colon cancer at the age of 55. She worked in a hospital and had a number of family members in the health care field. Even with these connections and support, there was a definite lack of coordination during her 2-year illness. The transition from surgery to chemotherapy and then to experimental treatments was very fragmented, and palliative and hospice care were broached very late in the process. This experience preceded the work we see today in care transitions and helped me to recognize the importance of nurses in care coordination. One of my priorities in the work setting is to ensure that nurses in all care settings are included in planning and leadership activities to promote cross-continuum communication. Another general observation comes from a number of close family members and friends living with mental illness. Overall, they have had difficulty accessing services and experienced stigma in many aspects of their lives. I believe this is one of the most important issues we face in health care nationally.

DM: What is the one thing we have not discussed, that you have the readers of *Nurse Leader* to know?

MBK: For all of us to recognize the power we have in the almost 4 million nurses across the United States. We

can tap into this resource on many levels to improve health care throughout our country.

About Advocate Aurora Health

Advocate Aurora Health is among the largest nonprofit, integrated health system in the United States and a leading employer in the Midwest with more than 70,000 employees, including more than 22,000 nurses and the region’s largest employed medical staff and home health organization. A national leader in clinical innovation, health outcomes, consumer experience, and value-based care, the system serves nearly 3 million patients annually in Illinois and Wisconsin across more than 500 sites of care. Advocate Aurora is engaged in hundreds of clinical trials and research studies, and is nationally recognized for its expertise in cardiology, neurosciences, oncology, and pediatrics. The organization also contributed \$2 billion in charitable care and services to its communities in 2016.

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