

The Tipping Point

In 2002, Malcolm Gladwell wrote an influential book called *The Tipping Point* that detailed how new ideas can spread like wildfire through a society and become accepted as part of the fabric of the culture. Gladwell (2002) postulated that ideas can spread like viruses and follow three characteristics of viruses, namely some ideas are contagious, little changes can have big effects, and change can happen very quickly because some changes have exponential effects. The tipping point refers to the point at which the change achieves critical mass: It boils over, so to speak. Once the tipping point is reached, the culture reinvents itself and begins to express itself in new ways, and new cultural phenomena emerge almost overnight.

What if we were to apply these ideas to changing the culture of nursing units that may be hostile to newly hired nurses so that they change themselves from within into cultures of welcome and support? As educators, we have the power to create the kind of subtle influence that can precipitate cultural change.

Some ideas are contagious: Gather data from recently hired nurses—those who have stayed and those who have left the organization. Ask them to describe their experiences. In what ways did they feel supported on the unit? What behaviors, attitudes, or practices caused problems for them? What was their experience being precepted like?

Also, gather retention data by unit and shift (if available) for the past several years. Compare that to national or system data. Now that you have hard data (retention and turnover rates) and soft data (quotes excerpted from the interviews), share these data with the nurse executive and nurse manager team. If you share these data with the full team, share only the aggregate data and ensure that the individual unit data are anonymous.

Be sure to describe what is being done well as well as what needs improvement. These data should be for the leaders' information only. You are not requiring or request-

ing the leaders to change; however, you might present any changes you plan to make in educational programming to address the concerns you discovered.

Follow up at the unit level as needed and appropriate. In our experience, some managers will follow up immediately and begin making changes on the units. For instance, one nurse manager left the data sharing meeting and went directly to the unit where she called the entire nursing team to the desk and told them she had learned that staff on the unit were not acknowledging new people when they came onto the unit and that, from now on, she expected that everyone would look up and smile at individuals arriving on the unit and welcome them to the unit. Setting that new expectation was a quick and easy way to change behavior on that unit and had a dramatically positive effect on the next group of newly hired nurses.

Through ongoing data collection, we were able to show the effect that this simple intervention had on turnover and unit culture. Other nurse managers asked for more specific unit data, and still, others chose not to deal with the concerns at all.

We recommend that you start with those who are interested and let the late adaptors watch and think. As the early adaptors reap positive rewards from making small changes, the later adaptors may then choose to come along. The positive changes are contagious and spread on their own through the organization.

Some changes have exponential effects: Share the data and talk about the problem with existing preceptors and preceptors in training. Reinforce the truism that 90% of why individuals stay in a particular job is because they have integrated with the work team. Typically, new hires do not stay because their job is close to home or the organization provides them with great educational programs. They may stay in nursing because the job is challenging and fulfilling, but they stay in the organization because they like those with whom they work; preceptors are their first and best introduction to the team. The preceptor role includes welcoming, introducing, and including new hires into the work team, and sometimes, it means standing up for the preceptee and being a little protective if other team members are unfriendly or unsupportive.

One preceptor acting in a welcoming way has the power to change the experience from negative to positive for one new hire. A new hire who is welcomed and supported will

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respond to others in the same way. Now, you have a preceptor–new hire pair acting in a positive way. The new hire will soon become a preceptor, and one pair will become two pairs, then four pairs, then eight, until a tipping point is reached. Sustained acts of kindness can change the world.

Small changes can have big effects: Talk about unit and organizational culture with newly hired nurses. Acknowledge what the educators want the culture to be, what we hope they will experience, and how we are growing into that culture over time. Discuss how these new hires can be agents for change by building on the positive behaviors and planning respectful ways to respond to negative ones. Share Griffin's (2004) work on cognitive rehearsal as a response strategy. Check up on new hires and offer support throughout the orientation period and beyond as needed.

Keep these ideas alive in the organization: Keep the data coming. Track changes (positive and negative). Evaluate your

own and the educational department staffs' behavior and make changes to improve your own welcoming practices.

Be open about why you are making these changes to show that you are taking your own advice. Lead by example and admit your failures. Failing well and learning from failure is a great way to improve. Always hold the course. You will reach the tipping point in the organization suddenly, and seemingly overnight, the organization will reflect the welcoming culture you wanted—and worked to achieve!

References

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- Griffin, M. (2004). Teaching cognitive rehearsal as a shield for lateral violence: An intervention for newly licensed nurses. *The Journal for Continuing Education in Nursing*, 35(6), 257–263.