

## FROM THE EDITORS - Margaret McMillan and Jane Conway

### ADOPTING TRANSFORMATIVE BEHAVIOURS TO IMPROVE PRACTICE

In this *Australian Journal of Advanced Nursing* a number of the articles centre on the concept of transition.

Begley's guest editorial challenges us to engage value transition in a way that achieves transformation. Complex change agenda require that nurses and other health professionals direct their transactional leadership attributes and relationships to transformational outcomes.

It would seem that to be in transition is to be extended beyond one's routine, moving from that to which one has become accustomed to another stage in a process or a situation. Commonly in the nursing literature, transition encompasses situations nurses manage in collaboration with, or on behalf of, clients. For example, transition can be identified in situations that focus on movements within levels and across contexts of care, in the development of changes in protocols of care, in supporting adaptation to ongoing impairment and in responding to situations involving loss and grief. Nurses seem to approach the management of these situations with particular sensitivity, intuitiveness and use schemata that accommodate the unknown and the unexpected.

These situations always involve ideals and expressions of commitment even though the transition timeframe may be limited with respect to the nurse-client contact period.

Successful movement through a transition implies a new set of social conditions and one can expect to see some evidence of transformation. Transformation in nursing practice centres on paradigm shifts that often relate to models of care or education strategies. In order to maintain changed circumstances there needs to be:

- an appreciation of what proposed changes mean in terms of quality care;
- an ongoing sense of purpose backed by values which are congruent with goals for care;
- a reliance on the available human resources to realise potential; and,
- a capacity to rise above daily affairs.

However, accommodation of new ideas has to translate into the pragmatics of everyday situations. This requires negotiation through transactions which in turn require trade-offs and power brokerage. The focus in transactional styles remains on:

- getting the job done;
- preoccupation with power and position, politics and perks;
- being subsumed by daily happenings;
- short term goals and hard data;
- tactical issues; and,
- human relations which oil human interaction.

If we are to extend our vision for making the necessary transitions to transform approaches to care, there needs to be some energy directed towards activities that seek and chart improvements as an outcome of the transactions. Historically nurses have appeared to value transaction above transformation.

Aspects of health service and education that warrant particular consideration and evidence of transformation are highlighted in this edition.

Mooney and Boxer explore the transitions of people who live with chronic heart failure and identify the need for nurses to transform their thinking about what constitutes patients' needs in the community context.

Jackson et al examine the implications of the transition within an ageing process for a workforce that is itself acknowledging the challenges in determining skill mix appropriate for the care of older people.

Peck and Lillibridge discuss the experience of rural fathers undergoing transition as they cope with chronically ill children, while Goh and Watt describe the transition from student to registered nurse.

The paper by Hills and Wilkes focuses on the potential for protocols to enable the change in practice.

The implications of changing health care service delivery such as occurs in day surgery are identified and explored in the paper by Williams et al.

If we are to see profound improvements in our work experiences nurses need to build their capacity for adopting transformative behaviours that create the conditions and opportunities to collaborate on negotiating successful transitions for their clients, themselves as individuals and the profession.