

In This Issue

1. The Director's Desk
2. Dean's Message
3. Pearls & Poem
4. Reflections on Polarity Thinking
5. Student Involvement
6. Nurses Week & Giving
7. Save the Date
8. In Gratitude

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Kathy Wyngarden
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Thank you!!



Greetings Everyone! Behold a happy arrival to Spring! As the signs of winter depart, the signs of spring emerge. Our daylight hours grow longer and evening hours grow shorter. Isn't it interesting that in nature we are surrounded by opposites? Opposites can cause us to wonder which one is more important? The answer, of course, is both. For what seemingly appear to be opposites, are actually interrelated pairs! In this issue of the newsletter we focus on "polarity thinking".

In *Polarity Management: Identifying and Managing Unsolvable Problems* (1996), Barry Johnson suggested that people could benefit from learning to manage a polarity and leverage the energy within a polarity pair. Though many healthcare leaders are wizards with problem solving, they are less knowledgeable about how to use polarity thinking skills (Wesorick, 2014). Using problem solving skills that involve "**either-or thinking**" with a polarity lessens the effectiveness of our actions and can actually create greater problems. So what should we do? Use "**both-and thinking**", the central focus of managing polarities!

The Wesorick Center is very happy to announce an inaugural "**Interprofessional Summer Institute for Polarity Thinking in Healthcare**". Bonnie Wesorick, a certified Master Polarity Teacher, has dedicated her life's work to teaching healthcare organizations the skills of polarity thinking. Bonnie, along with her colleague, Laurie Levknecht, another Master Polarity Teacher, will lead the Summer Institute. Going forward, interprofessional students, faculty, and community leaders will have access to learning opportunities in polarity thinking in The Wesorick Center, which will establish The Wesorick Center as a center of excellence for polarity thinking in health care. Bonnie Wesorick (2014) explains that knowledge of polarity thinking will ultimately transform healthcare through development of successful interprofessional healthcare teams (Wesorick, 2014).

Managing a polarity requires us to first identify a polarity, which Johnson (1996) described as "sets of opposites that do not function well independently". Thus, choosing a "quick fix" solution common in problem solving, simply doesn't work because this way of thinking focuses solely on one side of the polarity and neglects the other side, or pole. With polarity thinking, we see that there is wisdom in respecting the two sides of a polarity. It turns out there are a vast number of polarities in healthcare and these become especially obvious to teams of healthcare providers who are educated in polarity thinking (Wesorick, 2014). Examples of common healthcare polarities include: individual and team; diplomacy and candor; confidence and humility; and of course, education and practice.

Interprofessional participants of the Summer Institute will learn to identify polarities and apply learning experiences to develop a Polarity Map™ that has four quadrants: positive characteristics, behaviors and outcomes associated with focusing on the upper quadrants, or upside of both poles; and the negative characteristics, behaviors and outcomes that focus on the lower quadrants, or downsides of the two poles (Wesorick, 2014). Participants will learn to capture the natural tension that exists between the two poles of a polarity and to move toward a higher goal or purpose that is not possible when we focus on solely one pole. Teams of providers receive immeasurable benefit, such as respectful dialogue, when they learn to shift their focus to the greater good or higher purpose. Polarity thinking will help all of us to save precious time, money and energy! Consider attending this life changing event! Please see our SAVE THE DATE flyer inside! I invite you to enjoy this issue of The Wesorick Center Newsletter and celebrate the center's inaugural polarity thinking event for interprofessional students, faculty and providers!

Evelyn Clingerman, PhD, CNE, RN, FNAP
Executive Director, The Bonnie Wesorick Center for Health Care Transformation

A Message from the Dean



It has been 15 years since the initial Institute of Medicine (IOM) *To Err is Human* (1999) was released, followed in 2001 by the IOM's *Crossing the Quality Chasm: A New Health System for the 21st Century*. And over the last 15 years, the woes of the health care system have been the source of much writing, debate, and dialogue. A top list of woes might include:

- The U.S.A spends more on healthcare than any other developed nation.
- Performance does not equate with quality or safe care.
- Care is not accessible, equitable, or efficient.
- Many do not have a medical home or regular provider.
- Most do not feel providers listen to them, know “their story” or care about their circumstances; and further they do not understand their own health care .
- We have high rates of chronic conditions and little focus on preventive care.
- We are frequent victims of medical, medication, and lab errors.
- Most American’s are dissatisfied with our current system.

This list is not comprehensive, but still adequate to remind us of the challenges and the work that we have to do. After 15 years participating in efforts to transform health care through redesign in education and practice, with only marginal progress, it is easy to be discouraged. Sometimes it feels like a lonely struggle. Often there is more talk than action. Change is slow. It definitely feels overwhelming – it is tempting to give up.

I recently read a book, “The Invention of Wings” by Sue Monk Kidd. The book is historical fiction of a young woman, Sarah, who was at the forefront of the abolitionist and women's rights movements, wound around the heart-wrenching story of a young slave, Hetty, who was given to Sarah as an 11th birthday present. Sarah despised slavery, even at that early age, and out of principle rejected the gift. As these two lives intertwined, Sarah struggled with living her privileged life, and when challenged and punished for affiliating with a slave, she lost sight of her convictions.

Physical abuse laid upon Hetty served as a powerful reminder and shocked Sarah into realizing, “There is a frightful muteness that dwells at the center of all things too unspeakable, and we find our way into it much too easily”.

While I certainly do not compare the challenges we face in healthcare to the atrocity of slavery, still this quote has stuck with me. We become very good at despising inequities across care delivery, the often egregious errors, the lack of humanness, and the hierarchical dominance that suppresses the spirit of a team -- but in the concrete urgency of just getting through each day, we lose the ability to act. We grow comfortable with excuses and assume others will protect our practice, our health care, our educational efforts.

“There is a frightful muteness that dwells at the center of all things too overwhelming or too challenging, and we find our way into it much too easily”.

The Bonnie Wesorick Center for Health Care Transformation is the place we as healers can come to be rejuvenated, to regain hope, to shed the “muteness” that threatens us into inactivity. We are promoting the knowledge, skills, and attitudes for successful teams to work together on the challenges we face. Indeed, we are in overwhelming times – with a team, you are never alone. I encourage you to visit the center, participate in our growing program opportunities, and most of all, to gain confidence in our collective voice to advocate for our patients and the care they deserve.

*Cynthia McCurren, PhD, RN, FNAP
Dean and Professor
Kirkhof College of Nursing*

THE VISION of The Bonnie Wesorick Center for Health Care Transformation is to provide scholarly leadership that unites interprofessional healers in the research and implementation work essential to transform practice at the point of care.

The work of The Wesorick Center has the potential to expand nationwide, preventing needless deaths and lowering the financial and human cost of healthcare. The Center will fill a leadership void and affect every aspect of healthcare where the hands of those who give and receive care meet.

Bonnie's Pearls of Wisdom

I have always sought to learn from those who have made a difference in the world and as a result, use quotes from many different people. I looked back at what great leaders were saying. I noticed many of my favorite quotes were referring to polarities. Often favorite quotes speak to the truths of either one or both poles within polarities. See if you recognize the skill of Polarity Thinking in the following:

- “The opposite of a deeply held truth is not a lie but another deeply held truth.” Niels Bohr, physicist
- “It is not how much you do, but how much love you put into the doing and sharing that matters.” Mother Teresa
- “We need to balance the wonders of technology with the spiritual dimension of humanity.” John Naisbett
- In matters of style, swim with the current; in matters of principles, stand firm like a rock.” Thomas Jefferson
- We can change the world if we have “The will to succeed and the grace to compromise.” Dee Hock
- “The issues that cross my desk are hard and complicated, and often times involve the clash not of right and wrong, but of two rights. And you’re having to balance and reconcile against competing values that are equally legitimate.” President Barack Obama.
- “How wonderful that we have met with a paradox! Now we have some hope of making progress.” Neils Bohr, Physicist
- “They do not understand how that which differs from itself is an agreement: Harmony consists of opposing tension.” Heraclitus c.535-c.475 BCE
- “It is easier to spend your life manipulating an institution than it is dealing with your own soul.” Parker Palmer
- “Everything that irritates us about others can lead us to an understanding of ourselves.” Carl Jung
- “Profit is like oxygen, essential for our survival, but not the purpose of our existence.” Lance Secretan
- “By ourselves we suffer serious limitations. Together we can be something wonderful.” Max Depree
- “The culture of the work place is every bit as important to self-development as the capacity of the individual.” Stephen Lewis
- “Medicine is not only a science, but also the art of letting our own individuality interact with the individuality of the patient.” Albert Schweitzer, MD
- The master in the art of living makes little distinction between his work and his play, his labor and his leisure, his mind and his body, his education and his recreation, his love and his religion. He hardly knows which is which. He simply pursues his vision of excellence in whatever he does, leaving others to decide whether he is working or playing. To him he is always doing both.” Zen
- "The challenge of leadership is to be strong, but not rude; be kind but not weak; be bold, but not bully; be thoughtful, but not lazy; be humble, but not timid; be proud, but not arrogant; have humor, but without folly." Jim Rohn

The skill of Polarity Thinking helps one to transform self and the world around.

Peace,

Bonnie



The Fear of Connection

The spirit within
connects us all,
But the thought of that scares me.
Because, if it is so, I can
no longer blame you
For the things that trouble me so.

It could almost imply
that I am a part
of the things that annoy me the most.
It could almost imply
that I am the cause
of those things you do, that upset me.

To think that you are a reflection of me
causes distress I cannot bear.
I do not do the things that you do;
I do not say the things you say;
How could all of us be connected?

But if it is so, then what should I do
to change the things around me?
It calls me to change the world that I see
By changing not you, but what's inside me.

-Bonnie Wesorick

RN, MSN, FAAN, DPNAP

Reflections on Polarity Thinking

Elaine Van Doren, PhD, RN, Associate Dean for Undergraduate Nursing Programs , GVSU
Karen Ozga PT, MMSc, Assistant Professor & Director of Clinical Education, Department of Physical Therapy, GVSU

Dr. Elaine Van Doren- “Working with three nursing programs which have great faculty and wonderful students can be a very exciting and satisfying job, but it also has its challenges. Recent changes in our curricula, mandated by national reports and changes in pedagogy have brought many such challenges. To be effective, faculty and students must work together in the learning environment within a system that encompasses many different perspectives and frameworks. Where once faculty could teach their own course or section as an isolated component, now they must consider how their content will be meaningfully integrated with all the courses that came before and the ones that follow. Different pedagogies, such as online teaching, simulations, flipped classrooms, case based learning and salient clinical experiences are common throughout the curriculum. Additionally, both faculty and students are multigenerational and diverse in ways of thinking that are new to many. In working with these issues as they intersect, I have found that some of our old patterns of problem solving and decision making are not as effective as they used to be. It seemed as if we frequently had issues where competing or opposite points of view made coming to any consensus difficult, if not impossible. So, what to do? Being an academic means knowing the answer to that question! Search the literature and find a framework with a better fit for today’s needs. Polarity Thinking, I believe, is just such a framework.

Recently, I was able to participate in the first level of polarity thinking training. The group was a mixed one with faculty from the Physician’s Assistant Program, Allied Health Sciences, Speech and Language, Physical Therapy, Public Health, Public Health Administration and Nursing. As we began to discuss the concepts that are part of polarity thinking I was really struck by several points. First, were our common experiences of polarities. We found that we all experienced those challenges where it seemed like the only decision was to choose one or the other solution while not being able to meet the real demands of either. For example, choosing efficiency rather than quality is not a good solution. On the other hand, can quality be chosen without any consideration of costs? Thinking through these issues helped to reinforce the principle of polarity that notes the interdependence of the complex factors we face. It also forced us to consider the upside and downside of each point of view. I became aware of how fear was often the deciding factor rather than the greater good we were trying to reach.

The second point that I realized in this foundations class was how much more potential there is for our

teaching teams using Polarity Thinking as a framework. First, focusing on defining the issues and the points of view could lead us to an understanding that I think we have easily missed. Looking at the downside of a view allows us to voice our deepest fears. When these can be acknowledged, we can work to minimize their potential to harm. Recognizing the upside gives us specific direction that we can strengthen. Lastly, I could see from this session that insuring a balanced view recognizes the both-and rather than either-or can help us to move beyond conflict and indecision to reasonable plan of action that all can support. Polarity Thinking is not a panacea, but it certainly speaks to me and my goals as a visionary educator and pragmatic administrator. “

Karen Ozga- “I became interested in the December Polarity Thinking Foundational Course after receiving an email invitation late in the Fall semester. As the semester was winding down I was attracted to the opportunity for inter-professional interaction about ways of thinking. I learned that for me Polarity Thinking is a different and challenging way of thinking. As a physical therapist, I am experienced in using a problem-solving approach to identify and solve movement-related problems. This course provided me with awareness of the distinction between problems to be solved and polarities to be managed. I realized that two issues may appear to be in opposition but could both be essential to maintain. My greatest challenge during the course was to shift my thinking from an either-or/right-wrong perspective, to consideration of how to keep both polarities strong.

In the present health care practice and health professions education environments, the polarity of “change” and “stability” and the polarity of “productivity” and “quality” stand out as challenges. The concept of individual preference for one side of a polarity was comforting to me as I acknowledged my preferences within these polarities. I value the recognition and acceptance of individual preferences while striving to expand my appreciation for and understanding of other preferences or polarities.

I am clearly a novice in polarity thinking but am intrigued to consider how I may assist my departmental colleagues to identify and manage polarities, and how to include polarity thinking in the preparation of our students. I look forward to opportunities for further inter-professional interaction to develop my skills in applying this way of thinking.”

Polarity Thinking Workshops

Upcoming Event:

**Interprofessional Summer Institute for
Polarity Thinking in Health Care
July 23-25, 2014**

Save-the-Date details on page 7



*Bonnie Wesorick and Faculty members at the
Polarity Thinking Foundations Workshop, December 2013*

Meet Our Students in the Wesorick Center

Kristy Skippergosh, a.k.a. “Skipper”, is an interesting young woman with bold aspirations to change the world. Kristy is a graduate student in not one, but two areas: Social Work and Public Administration at GVSU. She brings incredible talent and enthusiasm to the Wesorick Center. During the past year, Kristy has supported the work of The Wesorick Center through involvement in producing our newsletter, assistance with communication efforts, and contributing to branding and marketing material projects. Kristy’s generous and thoughtful attitude is reflected in “never seeing a project as too small”. We are most grateful Kristy is enriching the work of the Wesorick Center. Please join me in thanking her!

Evelyn Clingerman, PhD, CNE, RN, FNAP



“I have found Bonnie Wesorick’s three principles, Partnership, Dialogue, and Polarity to be directly related to my growing knowledge of social work. As I continue to develop through graduate school, my hope is to become a medical social worker in a children’s hospital. Working in The Wesorick Center and The Kirkhof College of Nursing has opened my eyes to the push for a higher quality of care for patients. Through social work I will be an advocate for my clients so that they will be treated with respect and equity and receive quality care. The Wesorick Center has illustrated for me what my clients, and all people, should receive from health care practitioners.

Through my work with The Wesorick Center, I have learned the importance of purposeful teamwork. In order to present families with holistic care, practitioners of all disciplines must recognize their role and opportunity to apply their professional knowledge and be a part of the entire healthcare team for each individual patient. Working as a team also provides patients and families comfort knowing everyone is briefed and on the same page throughout the duration of care.

*Kristy Skippergosh
Masters of Social Work and Public Administration student*

National Nurses Week



Bonnie Wesorick, 1964
"Nurse on a Mission"

Celebrate National Nurses Week 2014, May 6-12th. Through our *Honor a Nurse* initiative, you can recognize a nurse who has made a difference through leadership and dedication to the profession.

By visiting *The Bonnie Wesorick Center for Health Care Transformation* website, you can honor a nurse who you most respect or who has touched your life in a special, meaningful way. Each honored nurse can be recognized on our Wesorick Center website and sent a card recognizing his/her contributions. Please let us know if you would like your nurse's photo or words of honor to appear on our website @ gvsu.edu/Wesorick.

Reflections on Giving to Transform Healthcare

It occurred to me that people hold differing values about giving to higher education and are motivated to give to an academic setting for a multitude of reasons. Perhaps a certain teacher or a moving experience has touched a person. Or maybe, a person has come to see the value of a cumulative experience in their personal education. Others may value the prestige of belonging to a special group that supports a particular branded athletic team. Regardless of the motivation, most people have a value they hold dear and their value guides their decision(s) in giving.

Because my entire life has involved academic settings with a focus on healthcare and educating some of the brightest students in healthcare professions, I value donating to an academic setting that will lead to the best healthcare for all people in society. That is exactly what Bonnie Wesorick accomplished in nearly 400 practice settings for the past 30 years! Transformation work is needed and our students, faculty and community partners are the ones who will make this happen, but it involves developing an intentional plan and affirming a daily commitment to achieving goals that will change healthcare. The Wesorick Center was created for the purpose of transforming healthcare through scholarly work; one student, one teacher, one partner, one patient, one family or one community at a time. You may ask how can The Wesorick Center be this transformative change? The answer of course, is through your generous contributions. Investing in our future, through education and scholarly work, is the best way to reach the core of healthcare transformation today.

Academic settings obviously require buildings, so the

notion of a construction campaign is not a foreign concept. But, to donate to centers for a process such as transforming healthcare sounds more nebulous. After all, transforming healthcare is quite a lofty goal, to say the least. Yet, we all know our system needs transformation. Are buildings important to universities? Absolutely! Similarly, processes such as doing the scholarly work needed to transform healthcare are also significantly important. Using a polarity lens to examine giving allows me to recognize that choosing between either of these two important areas (i.e., construction and process) couldn't be solved with "either-or" thinking. Both types of giving are important and they depend on one another to achieve the best or greatest good in healthcare for our communities, for our families, and for all individuals in society; and to provide the best education for the best providers in the future. This way of thinking ensures our success and sustainable transformation..

Thinking about giving as a polarity has helped me to become more aware of my giving. Once I became aware, I was able to be more intentional in my giving and to transform my commitment to future giving.

Thank you for your generosity in donating to the Wesorick Center!

*Evelyn Clingerman, PhD, CNE, RN, FNAP
Executive Director, The Bonnie Wesorick Center for
Health Care Transformation*

Mail gifts to:

GVSU
Attn: University Development
P.O. Box 2005 Grand Rapids, MI
49501-2005

Give Online:

Select "give today"
www.gvsu.edu/kcon
Or search Wesorick Center
via online form

Contact Us:

The Bonnie Wesorick Center
301 Michigan St. NE, Suite 453
Grand Rapids, MI 49503
wesorickcenter@gvsu.edu
616.331.5767

SAVE THE DATE



Interprofessional Summer Institute for Polarity Thinking in Health Care

July 23 – 25, 2014

Eberhard Center – DeVos Campus
Grand Valley State University
Downtown Grand Rapids, Michigan

The legacy of today's interprofessional health care leaders will be the successful transformation of the health care system at the point of care. Most health care leaders and providers are masters of problem solving. However, the major issues haunting health care today are combinations of problems and polarities. When health care professionals are not clear about how to differentiate between problems and polarities, time, money and energy are wasted.

The summer institute brings the skill of Polarity Thinking to interprofessional teams in academia, research and practice. The sessions move from theory to daily realities within the care system. This focused time exploring both simple and complex applications of Polarity Thinking is intended for interprofessional clinicians, managers, executives, consultants, educators and researchers.

Facilitators:

Bonnie Wesorick, RN, MSN, DPNAP, FAAN
Laurie Levknecht, RN, BSN
Evelyn Clingerman, PhD, CNE, RN, DSNAP

*More information coming soon!
Visit gvsu.edu/Wesorick*

**The Bonnie Wesorick Center for Health Care Transformation:
Promoting Interprofessional Collaboration through
the Kirkhof College of Nursing at Grand Valley State University**

In Gratitude to Maria



People say “all good things come to an end”. For the past year, The Bonnie Wesorick Center for Health Care Transformation benefitted from the talent, knowledge and skills of Maria McCormick, Doctor of Nursing Practice student from the Kirkhof College of Nursing. Maria served as The Center’s graduate assistant, and organized efforts to ensure success of the Center of Distinction over the past year. Maria assisted with both quantitative and qualitative data analysis on several projects. Her leadership skills influenced undergraduate students. I recall meeting Maria for the first time and observing her smile and

intense passion for making a difference in nursing and healthcare for her patients, their families and all people. Interestingly, Maria’s wisdom has captured the tension of the Task and Relationship *polarity*. She has a remarkable system of organizing her semester’s work that many would envy. But she never loses sight of relationships, the opposite pole of this polarity. Maria will move from The Wesorick Center graduate assistant role in the coming year. We wish you the best Maria as your education moves to the next level!

Maria’s Story

"Not only has the Wesorick Center changed my Doctor of Nursing Practice (DNP) education experience, but it has also transformed my personal nursing practice. As Bonnie Wesorick says, “it is up to the individual to work collaboratively to transform healthcare, because if we don’t, who will?” Bonnie and my work at The Wesorick Center has also solidified my responsibility as a healthcare professional to provide individualized care that not only promotes but enhances wholeness of the body, mind, and spirit.

The impact that the Wesorick Center has had on me will not end when my formal education at Grand Valley State University ends. Rather, the values that The Center promotes will influence the way that I care for my patients as well as the way that I collaborate with my peers and the other disciplines that I have been given the opportunity to care for patients alongside for the rest of my nursing career."

Our greatest challenge is how to bring about the transformation of health care. True transformation is not a quick fix but requires hard work each day and comes from a strong framework driven approach, not a project driven approach AND real transformation take place one student, patient, family, provider or community at a time. It stands to reason then, that each day and each interaction is important.

Evelyn Clingerman, PhD, CNE, RN, FNAP