On the Challenges and Opportunities of Seeing Things Differently

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THE IMPORTANCE OF SEEING THINGS DIFFERENTLY
Nothing can be discovered in the world without attention; no intended change in the world can be effected without shifting attention to the thing to be acted upon.

[Cook and Woods, 1994]
THE PROJECTS
After Picasso! and after some time in America.
TECHNIQUES FOR SEEING DIFFERENTLY
Gertrude Stein asked the French artist Henri Matisse whether, when eating a tomato, he looked at it the way an artist would. Matisse replied: "No when I eat a tomato I look at it the way anyone else would. But when I paint a tomato, then I see it differently".

[Gertrude Stein, 1938]
### The Organising Work of Nurses

<table>
<thead>
<tr>
<th>Study Site</th>
<th>hospital (Wales)</th>
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<tbody>
<tr>
<td><strong>When</strong></td>
<td>March-August 2011</td>
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<tr>
<td><strong>Sample</strong></td>
<td>40 adult nurses in clinical roles</td>
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<tr>
<td><strong>Methods</strong></td>
<td>observations, interviews, documents, artefacts</td>
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<td><strong>Focus</strong></td>
<td>what do nurses do? what resources do they use? what do nurses know? what makes this work necessary?</td>
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<tr>
<td><strong>Data</strong></td>
<td>500k word ethnographic field diary</td>
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The intellectual life of man consists almost wholly in his substitution of a conceptual order for the perceptual order in which the experience originally comes.

[William James, 1996]
Negotiated order perspective (Strauss)
Ethnomethodology (Garfinkel)
Ecological approaches to work (Hughes)
Actor network theory (Latour)
Activity theory (Engestrom)
Sense-making (Weick)
practice: concrete and material activities through which social and organisational life is accomplished

ecological approach: dynamic system of work, inter-relationships in context

process view of organisation: structures accomplished by people pursuing strategies in response to an environment

mediated action: interaction with the social world mediated by artefacts

socio-materiality: activity distributed between human and non human actors

theoretical perspective
trajectory of care

the unfolding of a patient’s health and social care needs, the total organisation of work associated with meeting those needs, and the impact of this on all involved
nurses’ organising work

- **creating working knowledge**: practices that support information sharing to allow care to progress

- **articulation work**: practices that align in time and space the diverse actors (people, knowledge, materials) through which care is delivered

- **matching patients and ‘beds’**: practices that ensure patient needs are matched with available ‘beds’ and bed utilisation is maximised

- **transfers of care**: practices that bring about convergent understanding of an individual trajectory of care to enable handover to the new team
Healthcare work is not managed or coordinated around the patient as [...] portrayed in the rationalising myths beloved by managers and policy makers [...] Rather, it is the object of the patient in all its interpretative flexibility that enrols the work of actors into recognisable patterns of action – what service managers call pathways of care – and it is nurses who are central in bringing about the translations through which this is accomplished. [...] This is less a case of services being organised around the needs of the patient, and more a case of the ‘patient’ by dint of the work that nurses do, holding services together, however fragmented these might be.

[Allen 2015, 135]
the gestalt

1 High quality healthcare requires that all the elements necessary to meet patient needs are aligned in the right place at the right time
2 Rational planning methods are the dominant approach to achieving this aim
3 A significant proportion of healthcare organisation is ‘emergent’ rather than planned (i.e. it depends on on-going and flexible management in response to changing patient needs and organisational capacity)
4 Nurses’ organising work arises from the need to manage emergent trajectories of care in conditions of organisational turbulence
5 Nurses’ organising work activates the patient as the “boundary object” in coordinating healthcare provision
Formal organisations have a tendency to overestimate their orderliness and the degree to which their activities are governed by rational systems and processes. Yet in so far as healthcare exhibits any order, the findings of this study show, this must be understood as a nursing order.

[Allen, 2015: 150]
CHALLENGES OF SEEING NURSING DIFFERENTLY
1: cultivating a shared perspective
2: what if we don’t like what we see?
While reading this book my definition of what it means to be a nurse was broken down. I am mad at you for this. Before reading this book I viewed nursing in an idealistic view of care giving and building therapeutic relationships, not the invisible organizational work that nurses do. I want to find credible arguments against this notion but find that I cannot. Every part of my being wants to keep my idealistic view of nursing. This book broke down my view and I am now forced to rebuild what I believe it means to be a nurse.

[Danika, MN student, University of Alberta]
3: what if others don’t like what we see?
entanglements

• neoliberal views of healthcare organisations

• public perception of healthcare organisations
OPPORTUNITIES OF SEEING NURSING DIFFERENTLY
future opportunities

◆ ORION: Making nurses’ organising work count for workforce planning purposes
◆ Translational Mobilisation Theory
◆ Nurse education and curriculum
When the artist is alive in any person, whatever his kind of work may be, he becomes an inventive, searching, daring, self-expressive creature. He disturbs, upsets, enlightens, and opens ways for a better understanding. Where those who are not artists are trying to close the book, he opens it up and shows there are still more pages possible.

[Robert Henri, The Art Spirit 1923]