Leader to Watch
Interview With Cathleen Wheatley, DNP, RN, CENP

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There are interviews with colleagues that are intriguing. Then there are interviews that raise the level of nursing’s collective consciousness. Cathleen Wheatley, DNP, RN, CENP, does both. As president of Wake Forest Baptist Medical Center and system chief nurse executive of Wake Forest Baptist Health System, her impact and influence not only benefit those in her care, but those nursing professionals aspiring to effect lasting change. She humbly shares her thoughts and ideas about the changing health care milieu, never realizing how relevant they truly are.

ASP: Congratulations on your promotion to the position of president at Wake Forest Baptist Medical Center in April of 2019. What a great accomplishment! Now you have 2 very important roles. You are both the president and system chief nurse executive. Do you have separate priorities for each role or are they integrated?

CAW: Thank you, Angela. If we consider that the overarching goal is to provide the best quality patient care, although the roles’ responsibilities are different,
they are ultimately integrated. The role of the president requires a priority focus which drives the financial viability of the medical center in order to be able to fulfill our mission. Areas that require my concentration include; driving profitability, assuring access and operational efficiencies, understanding consumer preferences and payer mix nuances, and recruiting and retaining top talent. A targeted area has been our growth as a regional academic medical center and understanding the variabilities of our “front-end” experiences and how they impact our customers. This is an essential aspect of growing our market share.

The patient care departments, of which nursing is key, must be in alignment with these strategies to assure our quality brand is accessible to all of our patients. This is why the role of the system chief nurse is crucial to the success of our health system. Strategies to achieve this goal have been in the areas of recruitment, retention, governance, and integration. These are interdependent. I have influenced a change from shared governance to professional practice governance. Staff-led committees develop and drive nursing strategies to assure clinical care and evidence-based practice are applied correctly throughout the health system with nursing functioning as 1 team with 1 voice. Improvements have been made in the areas of competencies and related patient outcomes. This helps us recruit the best and the brightest as they select their employer of choice.

**ASP**: What have you accomplished at Wake Forest that you are most proud of?

**CAW**: As we speak, I have been the president for only a short time, so I will draw from my longer tenure as chief nurse executive for a source of pride. I do believe that the integration of nursing, the “hard-wiring” of nursing processes across the health system, has been my biggest achievement to date. Our geographic footprint extends outside of our flagship medical center and includes our network community hospitals, urgent care centers, and primary and specialty ambulatory practices. I have worked diligently to assure nursing standards and employment practices are implemented equally throughout Wake Forest Baptist Health System. Some examples of this include nursing strategic goals, labor standards, performance metrics, and pay practices. I can honestly say that nursing has lead the way in our health system to operationalize our system strategies as 1 profession regardless of practice location or specialty.
ASP: I was so curious to learn about your move across the ocean to Abu Dhabi, United Arab Emirates. I imagine that this took a huge leap of faith. Can you share with the readers what the deciding factor in accepting this position was, what was the most difficult, and most memorable experiences, and how this time prepared you for future leadership challenges?

CAW: Someone well known in the nursing community who happened to be a colleague of mine, called to inform and encourage me to apply for the position. Working in the Middle East could not have been further from my mind. However, the opportunity to be the system chief nursing officer responsible for a 12-hospital government system on the other side of the world with 7000 nurses from 72 countries was so intriguing to me. After a lengthy discussion with the Abu Dhabi government’s chief medical officer, extensive interviews, and a thorough evaluation of the opportunity with my 2 sons, I decided that I wanted the challenge. This was an opportunity for me to get out of my comfort zone and to truly evaluate if my leadership skills were transcendent, or situational. Could I be an effective leader within an entirely different culture?

My journey was transformational. I grew and changed both as a person and as a professional nurse leader. I was forced to examine my unconscious biases and to embrace diversity in a way I had never before been faced with. The majority of the nursing workforce was composed of foreign nationals largely coming from the Philippines and India. Only 1.9% were Emiratis. I met dedicated, caring, professional nurses who hungered for western nursing knowledge. My most memorable experience was in working with the native Emirati nurses and mentoring them to develop the skills, competencies, and confidence to assume nurse leader positions.

I know the readership will find it incredulous that I actually missed regulatory governmental agencies that guide workplace safety and clinical practice standards. Yes, that’s right, I actually missed the requirements outlined by agencies like the Occupational Safety and Health Administration (OSHA) and the Centers for Medicare & Medicaid Services (CMS). These are things we take for granted that help make our work environments and patient care safer. Most importantly though, I did miss my sons. Thank goodness for Skype!

My future leadership benefitted tremendously from the introspection and reflection that occurred on a daily basis as a foreign national myself. It forced me to listen more intently, question more deeply, and to not make assumptions. This is something I continue to work at every day to assimilate into practice and my person.
ASP: It certainly sounds as if this experience was life altering. Thank you for sharing it with us. What wisdom would you offer aspiring nurse leaders who have become discouraged because they do not get a promotion or the coveted job they had hoped for?

CAW: My advice is to trust the process. Sometimes that is difficult to do, but truly the decision could have nothing to do with your skills and competencies. Please do not look at this event in your life as rejection, instead turn it into “projection,” and propel yourself forward. Have faith that the right opportunity for your growth and advancement exists. Use the time in your current role to hone your skills and garner different experiences.

ASP: How do you stay relevant to the generation of millennials that you employ?

CAW: I try to stay relevant by listening to what it is they have to say, their unique perspectives and messages; and intentionally encourage their appointment to our professional practice cabinets and professional advancement opportunities. I try to engage nursing leaders of older generations in what I call “reverse mentoring conversations.” There is much to be learned from millennials regarding staying healthy, balancing work and leisure, conserving the planet, and the many other humanitarian causes they are into. I consider them “whisperers,” helping to shape the future of health care from an inpatient to an outpatient axis that fully leverages technology and artificial intelligence.

ASP: What are you doing differently than other organizations that has been successful in improving patient satisfaction scores?

CAW: I have worked to leverage nursing-centric technology to assist the staff in meeting the changing demographics and needs of the patients we serve. I do believe that automation has helped us gain some ground in improving our patient experience scores. Technology can provide data in real time, which enables us to quickly respond to customer service or patient care concerns. When properly interpreted, this information can improve patient engagement, as well as save lives. Some examples include the implementation of automated discharge phone calls, interactive patient education programming, and communication from the operating room directly to patient families to inform them of their loved-one’s progress. Additionally, our team has embraced a technological platform that monitors post-operative patients’ vital signs and can detect early signs of deterioration. This early warning system has improved patient outcomes and extended nursing’s ability to have “eyes on the patient.”

ASP: Well, Dr. Wheatley, it seems as if you have done a tremendous amount to influence adaptations to care delivery at Wake Forest Baptist Health. What goals do you have for yourself that you may not have accomplished as yet?

CAW: Having spent parts of my career working in the US Virgin Islands and in Abu Dhabi, I do have a calling for a continued international impact. Global health is ever present on my mind. I believe I have much to offer our profession and patients the world over, and can see myself working with a nongovernmental agency (NGO) advocating for better health care in second and third world countries.

ASP: In the series Bouillon de Culture, journalist Bernard Pivot asks the question, “If heaven exists, what would you like to hear God say when you arrive at the Pearly Gates?” So, Dr. Wheatley, what would you like to hear?

CAW: Well, I thought about this one a lot. I definitely want God to say, “Make a U-turn, your work is not yet finished!!” When you think about our big world, and the people everywhere in need of health care, it is impossible not to realize that there is much good work still to be done. The profession of nursing has influenced, and can continue to impact, world health. I want to be a part of that. I still have so much energy in me.

We are so fortunate to live in the United States of America where nursing has developed as a profession, through education, research, and evidence-based practice. The world of nurses looks to us, and we have the responsibility to connect and share our deep and rich knowledge.

ASP: Dr. Wheatley, thank you so much for your time today. I know our readership will find this interview a call to action for themselves and our profession.

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