

Creating a Healthy Work Environment Is Every Nurses' Responsibility



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Introduction

Healthy work environments are important for the overall health of nurses for successful nurse recruitment and retention, and for the quality and safety of patient care. The North Carolina Board of Nursing's sole purpose is to protect the public by licensing nurses, practicing in NC. One way this is accomplished is by helping nurses understand the NC Nursing Practice Act and related Administrative Code Rules, especially 21 NCAC 36 .0224 the RN Components of Practice (RN Rules) and 21 NCAC 36 .0225 the LPN Components of Practice (LPN Rules).

In 2005, the American Association of Critical-Care Nurses (AACN) published a document entitled "AACN Standards for Establishing and Sustaining Healthy Work Environments" that was identified as insightful at the time and remains relevant today. In their statement, AACN listed six standards necessary to establish and sustain healthy work environments (HWE): Skilled Communication, True Collaboration, Effective Decision-making, Appropriate Staffing, Meaningful Recognition, and Authentic Leadership. This article correlates RN Rules and LPN Rules with the AACN six standards.

HWE are healing, not only for the patients being cared for, but also for the nurses and support staff who care for them. HWE are also empowering environments that support employee engagement and organizational commitment. These environments are characterized by a high level of trust between management and employees, employees who treat each other in a respectful manner, a culture that supports skilled communication and collaboration, and a place where employees feel emotionally and physically safe.



Current published research has identified that nursing is inseparably linked to patient safety. In exploring that realization we begin to become aware that everything that impacts a licensed nurse and those who assist them is directly linked to patient safety. Current nursing research focuses on fatigue, medication errors, staffing, consecutive hours

worked, and even the amount of adequate rest between assigned shifts. There has also been a plethora of articles regarding workplace violence and bullying as those issues relate to staff behavior and safety.

This article directly relates the six AACN standards to the RN Rules, especially those involving management and administration

of nursing practice. This article also recognizes the important role of the LPN in regards to communication, decision-making and true collaboration as defined in the LPN Rules. Further, this article relates how these concepts directly impact all those who provide direct patient care services under the direction and supervision of an RN, how the success or failure of these concepts impacts the nursing care provided, as well as, each individual's work environment and ultimately patient safety. A review of these components of nursing practice identifies the responsibility and accountability the licensed nurse has in establishing and maintaining HWE.

Skilled Communication

The first HWE element listed by AACN is Skilled Communication. Successful teams must have members who are able and willing to communicate honestly, with the intent of achieving team goals and not just those of the individual. No team wins a championship by seeking only to achieve their individual goals. That said, it is necessary to obtain feedback from all team members in order to identify a goal and to develop a successful plan to achieve the goal. In healthcare, the ultimate goal must always be safe patient care.

So how does communication fit into a safe work environment? The answer - when everyone feels their work has value. I recall a story told many years ago of the janitor who worked at a NASA site and when asked what his goal was he responded, "I am working to put a man on the moon." That articulate response indicates a person who clearly knows the team's goal and that he plays a part in the team achieving that goal. How many readers clearly understand their team's primary goal, can communicate it, and know their responsibilities to achieve the team goal?

NC LPN and RN Rules require that licensed nurses communicate and receive communication accurately and timely as fits the need of the patient. Knowing that productivity is tied to communication, leaders are required to commit to intentional actions and communication such as, inclusion, recognition, clear directions, meaningful interaction and constructive feedback when building a sense of connectedness in a team. Silence has the potential to indicate acceptance of current behavior and may result in failure to direct the future behavior of team members.

NC RN Rules addressing management require an RN manager to be continuously available, assess capabilities of personnel, delegate responsibilities and evaluate performance. All of these responsibilities require clear communication. When was the last time a nurse manager expressed their appreciation to you for some specific activity you contributed to the team? Were you thanked, personally, or in public? How did you respond? When was the last time you were asked for your opinion about a situation or for your feedback regarding a patient? Do you recognize when others are unclear in their communication to you? How do you respond? How do you encourage and support clear communication?

The RN nurse administrator is required to interpret nursing laws and rules and standards of practice through policy and procedure for their agency and to ensure those policies are followed. Communication is an essential part of informing staff as to what may be implemented, by whom, and in what manner.

When communication is open, honest and expresses the communicator's thoughts and feelings, it allows the other person to do the same. It creates an atmosphere for open dialogue, sharing ideas, listening to each other and problem solving together.

Skilled communication includes writing skills. Nursing rules require that both LPNs and RNs document accurately and timely all information relevant to and involving an assigned patient. Do you review your documentation for clarity? What method(s) do you use to improve your writing/communication skills?

Communication also involves how we interact with patients and those around them. Nursing communication often requires a firm yet compassionate and empathetic manner. This includes both verbal and non-verbal communication. Approximately 80% of our communication is non-verbal. Are you mindful of your communication, both verbal and non-verbal when caring for a patient or talking with others? Or, during your time with patients do you talk with a staff member about personal issues and ignore others in the room? A breakdown in communication can cause negative outcomes. Patients and their families' trust is an important part of providing effective



nursing care. If we are not trusted, then our communication will not be trusted or followed. Our patients and/or their family members may not remember our names, but they will remember how we treated and communicated with them.

Intimidating behavior creates a culture of silence with a break down in team communication and an inability to collaborate and achieve high-quality outcomes. In a study published by AACN (2005) entitled "Silence Kills: The Seven Crucial Conversations for Healthcare" it was identified that team member struggles contribute to patient harm and unacceptable error rates, which lead to an unhealthy work environment.

The seven topics to discuss are:

1. Broken rules (taking shortcuts, not following procedures or standards that can lead to harm)
2. Poor judgment (demonstrating poor clinical judgment, inadequate assessment of patients, missing critical symptoms)
3. Lack of support (refusing to answer a question or provide patient information, complaining when asked to help, refusal to assist others)
4. Incompetence
5. Poor teamwork (nonsupport, cliques, not being dependable)
6. Disrespect
7. Micromanagement (pull rank, threaten, or forcing point of view on others)

One must actively work to put skills into action in order to make a difference. It is all about safety. Always think "How will this impact the patient and those around them?"

We can only control ourselves. However, nurse managers and administrators role model acceptable behavior and are responsible for establishing and nourishing a supportive environment and practice culture.

True collaboration

When health care professionals are not

collaborating effectively patient safety is at risk. Lack of collaboration creates situations with a higher potential for medical errors to occur. Medical errors, especially those caused by a failure to communicate, are a pervasive problem in today's health care organizations. The Joint Commission has cited communication and collaboration failures as the leading root cause for medication errors, delays in treatment, and wrong-site surgeries.

Traditional nursing education emphasizes the importance of error-free practice, utilizing intense peer pressure to achieve perfection. Therefore, errors are perceived as failure. This atmosphere creates an environment that does not support fair, open discussion of mistakes.

The Just Culture concepts supported by the NC Board of Nursing recognize the importance for all team members to honestly communicate without fear of judgment concerning unplanned events. It is only with thorough and honest collaborative review that causes may be identified and system, as well as, individual plans for resolution may be developed and implemented. In true collaboration each party is always attempting to reach perfection, knowing that is not possible, and recognizing that when errors or near misses are identified it further strengthens that road to perfection.

Good communication encourages collaboration and helps prevent errors. When is a good time to use collaboration? Collaboration should be a daily part of patient care. Collaboration is particularly essential when solving difficult or complex problems.

True collaboration is a requirement for good outcomes. This is true of patient care as well as the care of each other and the teams within which nurses function. The goal of true collaboration should be great results, not just focusing on using collaboration itself. When teams make compromises with each other to diffuse conflict and to keep the team happy, this action is at the expense of not achieving great results. Although conflict can provide an opportunity to deepen agreement, in order for collaboration to be successful, effective communication (i.e. active listening, flexibility, developing trust) is important to create the foundation of true collaboration.

Effective Decision-making

Effective decision-making in nursing is



rooted in evidence based practice. Critical thinking is an essential element in decision-making, which involves recognizing choices, and requires analysis and problem-solving. It is an essential activity in the role of all licensed nurse; one in which patients are dependent on nurses speaking up and presenting their needs and requests.

The process of decision-making is the nursing process in action. It involves identifying a goal, often times based on a recognized problem. In relation to patients, a goal may involve resolving complaints of pain, changes in behavior or condition, or confusion. For the nurse manager it may involve staff performance, inefficiency, carelessness, communication styles, and outcomes of care.

Effective decision-making requires the RN to receive input from all individuals having

involvement with or impact on the care of any patient or family member. Once the RN identifies areas of patient need the nurse is responsible to prioritize those needs, consider options, establish interventions, implement plan and direct actions, and evaluate results.

Decision-making also involves brainstorming. This brainstorming can be done in isolation, by obtaining the perspective of others, or through research.

Managerial decision-making has a direct impact on individuals in the workplace and on the performance of the organization. It is a process of choosing the best alternative to achieve individual and organizational objectives.

Sometimes it is not recognized that clinical decision-making is a developed art and critical skill that takes knowledge and experience.

There is no quick fix or magic to decision-making. It is important for newly licensed nurses to recognize their level of ability in decision-making, identify resources and mentors to assist them in developing the skill, and recognize when it is imperative for the safety of their patient(s) to seek guidance from a higher level of expertise, especially when they are the only nurse practicing in their environment.

A nurse manager who knows her/his own weaknesses and strengths as well as the needs and wants of others and includes others in the decision-making process is more likely to make a decision that others will accept. When nurse managers surrender to others to make decisions for them (i.e. patient care, staffing) it is likely the manager will lose the respect and support of their healthcare team.

The basic educational standards for nurses provide a foundation for decision-making. It is important for nurses to recognize their limits and seek guidance when necessary. Clinical decision-making is about the health of patients, ethical solutions to problems, and the research that supports nurses' decisions.

Appropriate Staffing

Who in your practice environment determines the staffing ratio or mix? The Director of Nursing or Unit Manager/Charge Nurse? Or the Administrator or other non-direct care person? Is it a numbers issue, or are competencies, practice experience and familiarity with facility or unit considered? How often is the overall patient acuity and complexity and frequency of care considered in making or accepting an assignment? The RN and LPN Rules specifically state that the licensed nurse is expected to consider these factors each time they develop a nursing assignment, and each time they consider accepting an assignment.

The nursing literature indicates the inability to maintain a stable work force (i.e., high turnover rate), is directly related to the type of work environment provided for employees. Why do some employees remain in a position for several years, and others do not? Most report they are searching for that work environment that will provide them with job satisfaction. For the licensed nurse satisfaction is achieved when providing safe competent patient care and able to complete all their responsibilities in a realistic time frame, while

also achieving a successful balance between work and personal life.

The RN Rules state the nurse responsible for administering nursing services is responsible to allocate resources and maintain standards of practice. How does your nursing administration compare to others?

In the article, "The Pursuit of Happiness, Science, and Effective Staffing" (2015) Karlene M. Kerfoot, PhD, RN, CNAA, FAAN states that in the work environment "Happiness starts with an infrastructure that supports the employees to do the work they are inspired to do." She later states that "effective staffing is a foundational factor in creating happiness." And lastly she states, "Clearly, health care has much to learn about creating happiness that in turn creates a positive return on investment financially, as well as on patient outcomes and the well-being, growth, and productivity of staff."

Barbara Catherine Wallace, EdD, MPH, MSN, RNC, CNS (2013) reported "the success of a healthcare work environment is clearly focused on patient safety and preventable adverse outcomes. Safe staffing equals safe care."

Meaningful Recognition

Meaningful Recognition (MR) is communicating acknowledgement that what a person did made a difference. AACN, in 2005, suggested this type or level of communication often stays with a person for life. It is feedback that impacts motivation and productivity as well as individual, group, and organizational outcomes.

Sometimes MR is seen as a "soft skill" and its value is not appreciated. Many nursing practice areas focus on the science of nursing, MR focuses on the art of nursing; the compassion and caring (intangible soft skills), the whole of nursing. Soft skills are now being linked to reimbursement, especially through the use of patient satisfaction surveys. Previously noted in isolation, through increased public involvement, these "soft skills" are now identified as requirements needed in order to provide efficient and effective patient care, safety for patients and staff, and provide safe work environments. These skills, in total, strengthen the entire healthcare workforce.

Although nurses understand that the quality of patient care has a direct impact on



the wellness of patients, nurse managers and administrators sometimes fail to recognize that the quality of patient care can be jeopardized by unhealthy work environments. Toxic environments are directly related to staff turnover. Maintaining a skilled, competent workforce and providing an "appropriate allocation of resources" in a nursing work environment is required in the RN Rules for those in nursing administration roles.

Cindy Lefton, PhD, RN in 2012 felt that meaningfully recognizing the extraordinary contributions of nurses is a key element in creating and sustaining HWE. Publically honoring the work of nursing reinforces those actions and behaviors that patients, families, and colleagues truly value. In 2014, Dr. Lefton described "psychological capital" as self-efficacy, hope, and resilience, and the link to a person's well-being, job satisfaction, job performance, and positive emotions. These are important to establish and maintain HWE.

Authentic Leadership

Authentic leadership requires moral courage – knowing the right thing to do and stating it although individuals in an organization may not agree. Because nurses are often perceived to be the moral agents in a healthcare system, the patient, nurse, and organization all benefit from nurses' acts of moral courage. Moral courage is often seen as a managerial and administrative competency in nursing. However, all nurses are expected to demonstrate moral courage. These are leaders who consider more than rules and policies and who are self-directed toward good or what is right and routinely display acts of moral courage. Nursing leaders are responsible to create cultures that support acts of courage in nursing. The Board of Nursing several years ago embraced the concept of Just Culture. This concept encourages nurses to self-report practice errors or "near misses" rather than not revealing events as an attempt to protect themselves from disciplinary action. Reporting these events can be positively transformative; frequently leading to agency processes being

revised.

Healthcare HWE are supportive of the whole human being, are patient-focused, yet include the employee, and are joyful workplaces. A sense of “family” is commonly reported in HWE and satisfaction is evident within work teams.

Five key characteristics identify leaders: the ability to understand their own purpose, practice solid values, lead with heart, establish enduring relationships, and practice self-discipline.

Authentic leaders contribute to the growth and development of HWE by promoting patient safety and excellence in care, and by recruiting and retaining engaged and committed staff (Wong, Laschinger & Cummings, 2010). These leaders demonstrate relational transparency through open and honest communication (Wong) which leads others to being forthcoming with their ideas, challenges and perspectives. A nursing leader’s empowerment behaviors have the potential to influence individual staff members’ perceptions of empowerment.

Five ways to become more authentic nurse leaders include:

- Commit to personally becoming a more authentic leader
- Seek feedback from those you lead
- Find a mentor who is an authentic leader
- Have a strong connection between your values and your actions, and
- Work hard to build relationships.

Creating HWE in nursing practice settings is crucial to maintain an adequate nursing workforce. Leaders play a pivotal role in retention of nurses by shaping the health care practice environment to produce quality outcomes for staff nurses and patients. Authentic leadership has been described as the “glue” needed to hold together HWE (AACN, 2005). Additional characteristics of authentic leadership are: genuineness, trustworthiness, reliability, compassion, and believability. Healthy environments are created by engaging employees to promote positive behaviors.

The June 24, 2015, Harvard Business Review published the article “The Top Complaints from Employees About Their Leaders” by Lou Solomon, and reported these results:

- 63% - not recognizing employee achievements
- 57% - not giving clear directions
- 52% - not having time to meet with employees
- 51% - refusing to talk to subordinates, and
- 47% - taking credit for others’ ideas.

The RN Rules are specific for nurse managers and administrators, especially those who have 24/7 responsibility and accountability, and clearly define the responsibilities of authentic leaders. In part, those responsibilities are: continuous availability, assessing capabilities of personnel providing care, delegating and assigning patient care responsibilities, providing adequate staffing resources, and assuring that competencies are maintained.

Conclusion

The intent of this article is to support nurses licensed in NC to recognize the value of establishing and maintaining HWE, and the specific role(s) they have in achieving these outcomes. AACN’s 2005 publication “Standards for Establishing and Sustaining Healthy Work Environments” purpose was and continues to be patient safety and protection through the establishment of HWE. The document addresses the overall health of nurses and its importance for successful nurse recruitment and retention, and for the quality and safety of patient care. Six standards have been identified as being necessary to establish and sustain HWE: Skilled Communication, True Collaboration, Effective Decision-making, Appropriate Staffing, Meaningful Recognition, and Authentic Leadership.

The NC Board of Nursing’s sole purpose is to protect the public by licensing nurses practicing in NC. The NC Nursing Practice Act and related RN and LPN Rules correlate, in part, with the six standards identified by AACN. This article directly relates the six standards to the NC RN Rules, and especially those involved with management and administration of nursing practice. In addition, this article recognizes the important role of the LPN regarding communication, decision-making and true collaboration.

Further, this article relates how these concepts directly impact all who provide

direct patient care services under the direction and supervision of an RN, how the success or failure of these concepts impacts the nursing care provided, as well as, each individual’s work environment and ultimately patient safety. A review of these components of nursing practice identifies the responsibility and accountability the licensed nurse has in establishing and maintaining HWE.

HWE have been recognized as empowering environments that support employee engagement and organizational commitment. These environments are characterized by a high level of trust between management and employees, by employees who treat each other in a respectful manner, by a culture that supports skilled communication and collaboration, and where employees feel emotionally and physically safe.

Current nursing research focuses on fatigue, medication errors, staffing, consecutive hours worked, the amount of adequate rest between assigned shifts, and workplace violence and bullying. HWE provide the atmosphere for nurses and all healthcare workers, as well as patients, to thrive and succeed.

Hopefully, you have been able to recognize some of your current behaviors, and have identified options to explore. Creating HWE is an on-going developmental process and not an isolated act, and every nurses’ responsibility.

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