Establishing and Sustaining a Healthy Work Environments: A Journey to Clinical Excellence

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Plan of presentation

1. Key words
2. Introduction
3. Clinical realities
4. Domain of nursing education
5. Essential elements
6. Summary
7. References
Explanation of key words

1. **Establish**: To start or create something.

2. **Sustain**: To provide enough of what is needed in order to live or exist.

3. **Healthy**: Being successful and working well.

4. **Work environments**: An ENV that requires physical, mental effort to get results.

5. **Journey**: The act of traveling from one place to another, e.g., from unhealthy to healthy work ENV.

6. **Clinical excellence**: Examination and treatment of patients and their illnesses with satisfactory outcomes. Measured by practitioner (Nurses and co-workers), patient and financial outcomes.
Introduction

- Health is a continuum likewise relationship and working environment.
- It can be **created, nurtured, sustained and improved** at various levels of acceptance for optimal output and clinical excellence.
- It should be noted that **people often create and support unhealthy relationship and working environment** because they lack the will, knowledge, skills and experience to do otherwise.
- According to Napoleon Hill in his book “How to overcome failure and achieve success”, everything man creates (**voluntary**) or acquires (**involuntary**), it begins with the DESIRE.
Introduction continue

- In 2003, the AACN made a commitment to actively promote the creation of healthy work environments that support and foster excellence in patient care.

- Today there are mounting evidence that unhealthy work environments contribute to medical errors, ineffective delivery of care, and conflict and stress among health professionals.

- Should we continue to allow Negative, Demoralizing and Unsafe conditions in workplaces? I think the answer is No.

- The establishment and maintenance of healthy work environments is imperative to ensure patients safety, enhance staff recruitment and retention, and maintain an organization’s financial viability.
• **Atongno in 2016** is calling on Cameroonian Nurses through the platform of the Cameroon Nurses Association Affiliated to the Commonwealth to personally commit them to create a *new future* with healthy work environments that *benefit everyone*.

• Today we should joint our voices to call on Nurses to:
  1. Identify the most pressing challenges in their immediate work environment.
  2. Initiate discussions with their colleagues to find solutions to these challenges.
  3. Remain actively involved in the solutions until they are working.
Our wishes:

1- Work and care environments must be:
- Safe,
- Healing,
- Humane,
- Respectful of the rights, responsibilities, needs and contributions of patients, their families, nurses and all health professionals.

2- Excellence in clinical practice is driven by the needs of patients and their families and is achieved when nurses’ competencies are matched to those needs.
Clinical realities

1. A nurse chooses not to call a physician known to be verbally abusive. The nurse uses his/her judgment to clarify a prescribed medication and administers a fatal dose of the wrong medication. Collaboration?

2. Additional patients added to a nurse’s assignment during a busy weekend because on-call staff is not available and back up plans do not exist to cover variations in patient census. Patients are placed at risk for errors and injury and nurses are frustrated and angry. Staffing?

3. Nurses placed in leadership positions without adequate preparation and support for their role. The resulting environment creates dissatisfaction and low output for the nurse leaders and staff as well. Leadership?
Analysis of the clinical realities

- Each situation is characterized by poor and ineffective relationships.
- Attention to work relationships is often dismissed as unworthy of resource allocation in healthcare today, especially when those resources are aimed at supporting education and development of essential skills.
- Adequately addressing the reputedly “soft” issues that involve relationships is the key to halting the epidemic of treatment-related harm to patients and the continued erosion of the bottom line in healthcare organizations.
- Addressing these issues aligns with nurses’ ethical obligations, the obligations to establish, maintain and improve healthcare ENVs (see paragraph three of the nurses oath)
Domain of nursing education

1. Cognitive  Development of the head
2. Psychomotor  Development of the hands
3. Affective  Development of the heart
4. Interactive  Development of the body
   - Socialisation
   - Relationship  (B. Bloom, 1956)

The partway of a professional Nurse from novice to expert

1. Novice
2. Advance beginner
3. Competent
4. Proficient
Interdependence of Healthy Work Environment, Clinical Excellence and Optimal Clinical Outcomes.
The **essential standards** for establishing and sustaining healthy work environments are:

1. Skilled Communication
2. True Collaboration
3. Effective Decision Making
4. Appropriate Staffing
5. Meaningful Recognition
6. Authentic Leadership
1-Skilled communication

- Optimal care of patients mandates that the specialized knowledge and skills of nurses, physicians, administrators and other professionals be integrated.

- This integration will be accomplished only through frequent, respectful interaction and skilled communication.

- Skilled communication is more than the one-way delivery of information; it is a two-way dialogue in which people think and decide together.

- A culture of safety and excellence requires that individual nurses and healthcare organizations make it a priority to develop among professionals communication skills—including written, spoken and non-verbal (ISMP, 2004)

- Intimidating behaviour and deficient interpersonal relationships lead to mistrust, chronic stress and dissatisfaction among nurses. (Schaefer H.G, Helmreich R.L, & Scheidegger D., 1995)
Skilled communicators should:

- Focus on **finding solutions and achieving desirable outcomes**.
- Seek to **protect and advance collaborative** relationships among colleagues.
- Call upon **goodwill** and **mutual respect** to build consensus and arrive at **common understanding**.
- Have **access** to appropriate communication technologies and are **proficient in their use**.

The healthcare organization should establishes:

- **Zero-tolerance policies** to address and eliminate abuse and disrespectful behaviour in the workplace.
- **Formal structures and processes** that ensure effective information sharing among patients, families and the healthcare team.
“It is ethical to request, encourage and deliver feedback on all facets of individual and organizational performance. It is unethical to ignore, discourage or fail to give feedback.”

David Thomas
Ethicist, Ethics of Choice Training Program

“It is unethical to ignore information that could allow you and/or your organization to grow.”

David Thomas
Ethicist, Ethics of Choice Training Program
2-TRUE COLLABORATION

- True collaboration is a process, not an event.
- It must be ongoing and build over time.
- In true collaboration the unique **knowledge** and **abilities** of each professional are respected to achieve safe, quality care for patients.
- Skilled communication, trust, knowledge, shared responsibility, mutual respect, optimism and coordination are integral to successful collaboration.
- Collaboration requires **constant attention** and **nurturing**, supported by formal processes and structures that foster joint communication and decision making.
Every team member should:

- Embraces true collaboration as an ongoing process and invests in its development.
- Contributes to the achievement of common goals by giving power and respect to each person’s voice, integrating individual differences, resolving competing interests and safeguarding the essential contribution each must make in order to achieve optimal outcomes.

The healthcare organization provides:

- Team members with support for and access to education programs that develop collaboration skills.

“We are different so that we can know our need of one another, for no one is ultimately self-sufficient. A completely self-sufficient person would be sub-human.”

Archbishop Desmond Tutu

Civil rights activist, Nobel Laureate
3-EFFECTIVE DECISION MAKING

- In order to fulfill their role as advocates, nurses must be involved in making decisions about patient care. *(ANA, 2002)*

- A significant gap often exists between what nurses are accountable for and their ability to participate in decisions that affect those accountabilities.

- However, only 8% of physicians recognize nurses as part of the decision making team. *(Greene J., 2002)*

- Other research reports that a majority of nurses feel relatively powerless to change things they dislike in their work environment.
Failure to incorporate the experienced of nurses in clinical and operational decisions may result in costly errors, jeopardize patient safety and threaten the financial viability of healthcare organizations.

Nurses who do not have control over their practice become dissatisfied and are at risk for leaving an organization.

The healthcare organization should

- Provides team members with support for and access to ongoing education and development programs.

“People will not believe in [an organizational] change effort unless they have the opportunity to plan it, experience it, provide feedback, and own it. Involvement supports and sustains motivation, the essential ingredient for change.”

Robert F. Allen

Advocate for cultural change and wellness
4-APPROPRIATE STAFFING

- Inappropriate staffing is one of the most harmful threats to patient safety and to the well-being of nurses.
- Because nurses intercept 86% of all medication errors made by other professionals, an increase in these errors will likely occur when nurses are overworked, overstressed and in short supply. (*Bates DW, Cullen DJ, Laird N, et al. 1995)*
- Inadequate staffing leads to nurse dissatisfaction, burnout and turnover. (*Aiken L, Clarke S, Sloane DM, Sochalski J, & Silber J. 2002)*
- Nurse turnover jeopardizes the quality of care, increases patient costs and decreases hospital profitability.
- Staffing is a complex process with the goal of matching the needs of patients with the skills and competencies of nurses.
- All staffing models require methods for ongoing evaluation of staffing decisions in relation to patient and system outcomes. (*www.aacn.org, 2016)*
The healthcare organization should

- Have staffing policies in place that are solidly grounded in ethical principles and support the professional obligation of nurses to provide high quality care

“Nurses are a hospital’s most precious resource. The one that is in shortest supply. Would you expect a precious resource to go chasing after urinals and linen? Yet hospitals seem willing to spend hundreds of thousands of dollars recruiting new nurses, instead of addressing solvable system errors that will retain nurses in the first place.”

Dorrie Fontaine
Clinician, Educator, AACN Past President
5-MEANINGFUL RECOGNITION

- Meaningful recognition is a process, not an event.
- It must be ongoing and build over time, becoming a norm within the work culture.
- Recognition of the value and meaningfulness of one’s contribution to an organization’s work is a fundamental human need and an essential requisite to personal and professional development.
- People who are not recognized feel invisible, undervalued, unmotivated and disrespected.
- Lack or Inadequate of recognition leads to discontent, poor moral, reduced productivity, sub-optimal care outcomes and decreasing nurse satisfaction. (Cronin S.N,& Bechrerer D.1999).
The healthcare organization should

- Have a comprehensive system in place that includes formal processes and structured forums that ensure a sustainable focus on recognizing all team members for their contributions and the value they bring to the work of the organization.
- Regularly and comprehensively evaluates its recognition system, ensuring effective programs that help to move the organization toward a sustainable culture of excellence that values meaningful recognition.

“It is ethical to offer feedback to those from whom you or your organization receive services. It is unethical to allow outstanding performance to go unacknowledged just as it is unethical not to provide feedback to those whose performance or service threatens the optimal performance of you or your organization.”

David Thomas

*Ethicist, Ethics of Choice Training Program*
6-AUTHENTIC LEADERSHIP

- Inadequately positioned and prepared leaders in nursing is in rise and a strong call for effective measures to strengthen nursing leadership. (Kimball B, & O’Neil E, 2002)

- Nurse leaders must be skilled communicators, team builders, agents for positive change, committed to service, results oriented and role models for collaborative practice.

“Treat people as if they were what they ought to be, and you help them to become what they are capable of being.”

Johann Wolfgang von Goethe
Philosopher, Poet, Playwright
<table>
<thead>
<tr>
<th>Essential elements</th>
<th>Nurses and co-workers obligations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Skilled communication</td>
<td>Nurses must be as proficient in communication skills as they are in clinical skills.</td>
</tr>
<tr>
<td>2 True collaboration</td>
<td>Nurses must be relentless in pursuing and fostering true collaboration.</td>
</tr>
<tr>
<td>3 Effective decision making</td>
<td>Nurses must be valued and committed partners in making policy, directing and evaluating clinical care and leading organizational operations.</td>
</tr>
<tr>
<td>4 Appropriate staffing</td>
<td>Staffing must ensure the effective match between patient needs and nurse competencies.</td>
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<tr>
<td>5 Meaningful recognition</td>
<td>Nurses must be recognized and must recognize others for the value each brings to the work of the organization.</td>
</tr>
<tr>
<td>6 Authentic leadership</td>
<td>Nurse Leaders must fully embrace the imperative of a healthy work environment, authentically live it and engage others in its achievement</td>
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</tbody>
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References


• Greene J. The medical workplace. No abuse zone. *Hosp Health Netw.* March 2002;76:26,28


THANKS FOR YOUR KIND ATTENTION
Questions and Discussions

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REMEMBER THE INTERNATIONAL NURSES DAY