Enhancing Nurses' Professional Well-Being: The Impact of Clinical Inquiry on Healthy Work Environments

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Background

The literature is replete with citations espousing the impact of the work environment on key performance indicators (Buhlman, 2016). Nurses’ personal and professional well-being, recruitment, knowledge evolution and retention; patient satisfaction and outcomes; and fiscal sustainability of the organization can all be influenced by the health of the workplace. Composition of the workforce, power, and opportunity has an impact on what nurses can do and how they utilize available resources to meet patients’ needs (Barnes & Lefton, 2013). Innovative, multi-faceted, and patient-centered care delivery should ideally be derived from a confluence of evidence-based data (primarily from formal research studies), experiential knowledge of professional nurses, and the incorporation of patient preferences. Creating an environment that imbues nurses with a thirst for evidence-based knowledge, and equips them with the skills, confidence and opportunities to pursue the discovery, creation and translation of data-supported exemplars is essential in building and fostering a culture of nursing excellence.

The expectation that nurses should integrate evidence into clinical and operational processes is not particularly new; this notion dates back to Nightingale’s work in the 1850s (Karimi & Masoudi Alavi, 2015). “Healthcare organizations can no longer afford for [evidence-based practice] EBP to remain an abstract concept or an idealized competency” (Black, Balneaves, Garrossino, Puyat & Qian, 2015, p. 19). Nurses, particularly those working in direct patient care, are well-positioned to pose questions for clinical inquiry; however, there are often myriad competing priorities that may interfere with their availability to participate in scholarship (Scala, Price & Day, 2016). Deficient knowledge, lack of time and leadership support (inadequate provision of dedicated, protected time to participate in scholarship), or insufficient coaching in research and evidence-based practice principles have all been denoted as potential roadblocks (Dunning, 2013; Hagan & Walden, 2015; Sanjari, Baradaran, Aalaa & Mehrdad, 2015).

Purpose

A comprehensive strategic vision was created to provide the structures, processes and resources to facilitate nurse-driven clinical inquiry across a multi-site healthcare system. Involving the right people with optimal skill sets (or interest in acquiring them) was essential. Although the organization has a full-time, doctorally-prepared director of nursing research, it was evident that early involvement of both direct-care providers and nurse leaders was critical in successfully implementing the plan.

Implementation
A key strategy included the creation of pavilion INSPIRE (an acronym for Innovations in Nursing Scholarship, Performance Improvement, Research and Evidence-based practice) teams. These teams are comprised of nurse clinicians and leaders across nursing. While there had been a research committee for several years, nurses across the organization engage in many more types of scholarship than just research and it was essential to expand the scope of support to meet the wide-ranging needs related to clinical inquiry. The pavilion-based INSPIRE Teams (representing the three hospitals and healthcare clinics across a large metropolitan area) were intentional in developing goal statements that interface with the overall system-wide and nursing scholarship strategic visions, and align with the strategic direction for the Center for Nursing Scholarship (CNS).

The teams have been instrumental in: 1) identifying priorities for clinical inquiry issues requiring scholarship-driven solutions; 2) promoting the use of science to improve healthcare and patient outcomes; 3) generating and sustaining influence, excitement and support for nurse-led scholarship; 4) providing a systematic approach for integrating newly created or validated evidence into clinical practice; 5) increasing intra-disciplinary, interprofessional and multi-institutional collaboration; and 6) facilitating dissemination of generalizable results, both internally and externally.

**Results**

Team meetings have consistently included an educational component. Members are acutely aware of the value of self-evaluation of expertise and additional educational needs to ensure their effectiveness as peer coaches. It is important that all team members have a common knowledge and skill set. INSPIRE leaders proposed engaging members in conducting EBP projects as an ideal way to evaluate and refine their competencies. This has been accomplished by reviewing the steps of EBP (writing the PICO question, retrieving and appraising salient literature, and making informed decisions about what information to translate into practice). One of the projects is geared to exploring the impact of breastfeeding versus formula feeding on pH of stool among neonates with diaper dermatitis. Another EBP team is examining how working with nurse preceptors who migrated from countries where English is not the primary language may impact onboarding and team enculturation among recent nurse graduates.

The INSPIRE Teams have been instrumental in the comprehensive roll-out of EBP principles. This effort has already been completed by virtually all nurse leaders; the upcoming educational initiatives will be directed primarily to nurses working at the point-of-care. Since the majority of INSPIRE members are nurse clinicians, they are well-positioned to coach their peers. They have both current clinical expertise and an understanding of the steps inherent in the EBP process.

The CNS and INSPIRE Teams partner in producing an 8-page monthly newsletter to showcase scholarship in which nurses and their professional partners engage. Thirty-four issues have been produced and included over 50 evidence-based topics important to nurses, including: 1) therapeutic use of reminiscing in older patients; 2) assessing risks and failures in suicide prevention; 3) moral courage amid moral distress; 4) compassion fatigue and nurse burnout; 5) basics of designing a research study; 6) nurse leaders’ roles in peer review; and 7) impact of patients’ deaths on nurses. Many of the editorial features have been written by INSPIRE Team members. It provides them with opportunities to hone their writing skills before moving on to abstract and manuscript development for national dissemination.

The teams demonstrate excellence in clinical inquiry skills by leading or participating in several nurse-led research studies and performance improvement projects (in addition to the previously ascribed EBP projects), and publishing. Internal dissemination occurs via poster displays during Nurses Week and throughout the year to showcase nurse-led scholarship to the general public, interprofessional partners and other nurses. In the past three years alone, members have authored or co-authored 15 peer-reviewed articles, and contributed to 60 podium or poster presentations at regional, national and international conferences.

**Implications for Practice**
Establishing and sustaining healthy work environments is dependent upon true collaboration, effective decision making, authentic leadership, and meaningful recognition. The creation of pavilion INSPIRE Teams has strengthened the resolve to provide nurses with the tools to make evidence-based clinical decisions, evaluate and improve clinical care, and lead organizational initiatives. Our teams have clearly embraced the imperative of a healthy work environment through self-reflection and modeling the behavior to others. The INSPIRE Teams have been recognized several times in local newspaper editorials and a number of members have received prestigious awards from local and national organizations in recognition of their scholarship. Perhaps, more importantly, the mission of INSPIRE is now appreciated by nurses across the healthcare system. As recently as four years ago, nurses would have traditionally answered the question, “Where do you get information to enhance patient care?” with “…rely on traditions and experiences of nurses.” The INSPIRE Teams have partnered with the CNS to advance nurses’ perspectives and it is more common now to hear that professional nurses incorporate experiential knowledge with data-based information from top-tier journals or refereed conferences. The principles used for the INSPIRE program certainly have applicability for other institutions who are embarking upon creating or strengthening their workplace environment by equipping staff with tools for success in nurse-led scholarship.

Title:
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References:


**Abstract Summary:**
This presentation offers proven strategies for creating an environment that imbues nurses with a thirst for evidence-based knowledge, and equips them with the skills, confidence and opportunities to pursue the discovery, creation and translation of data-supported exemplars to build and foster a culture of nursing excellence.

**Content Outline:**
1) Delineate structures, processes and resources necessary to enculturate clinical inquiry into the work environment
   a) Structures - infrastructure (people and financial resources)
   b) Processes - INSPIRE Team goals
2) Identify practical strategies for generating and sustaining influence, excitement and support for nurse-led scholarship
   a) Education
   b) Peer coaching
3) Describe how the discovery, creation and translation of data-based evidence can enhance nurses’ professional well-being.
   a) Skills and pride associated with dissemination activities
   b) Adding to the body of nursing knowledge
   c) Enhancing nurse satisfaction and patient outcomes

**First Primary Presenting Author**

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**Professional Experience:** Dr. Kirksey held faculty and leadership positions in academia for over 25 years; most recently as tenured professor at California State University. Kenn’s clinical expertise is in critical care; his research has focused on symptom management in persons living with HIV. He has published extensively and presented research findings at conferences on five continents. He has reviewed for 13 peer-reviewed journals and held editorial board positions with Critical Care Nurse, AACN Clinical Issues: Advanced Practice in Acute and Critical Care, and the Journal of the Association of
Nurses in AIDS Care. Dr. Kirksey served as chair of the Board on Certification for Advanced Practice and commissioner for the American Nurses Credentialing Center’s Commission on Certification. He was elected chapter secretary, vice-president, and president of Sigma Theta Tau International (STTI). He served the organization at the international level as Distinguished Lecturer and elected member of the Research Advisory Committee.

Author Summary: Dr. Kirksey has served as director for two multi-hospital research enterprises for 13 years. He earned baccalaureate, master and doctoral degrees, and completed a post-doctoral fellowship at the University of California. Kenn has been a member of STTI since 1988, a member of the International HIV Nursing Research Network, board certified as an Adult Health Clinical Nurse Specialist, and is one of approximately 2600 nurses across the globe elected to the American Academy of Nursing.

Second Author
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Professional Experience: Loida Bautista is a registered nurse with over 40 years of experience in medical-surgical, OB-GYN, drug and alcohol, and psychiatric units. She has been a psychiatric nurse for the past 33 years. She joined Ben Taub Mental Health Services 16 years ago and has been actively involved in various hospital committees including shared governance and research. She is currently the chairperson of the Ben Taub/Quentin Mease INSPIRE Team, and unit representative for the Pavilion Nurse Clinician Leadership Team and Pavilion Nurse Clinician Council. She has been the recipient of several prestigious internal and external awards.

Author Summary: Loida Bautista graduated Cum Laude with a Bachelor of Science in Nursing from Far Eastern University in Manila. She received national certification as a Psychiatric and Mental Health Nurse and completed the Electroconvulsive Therapy Program Nursing Fellowship at Duke Medical Center. She is the first Nurse Clinician IV at Harris Health System and was selected as one of Houston’s most outstanding nurses by the Houston Chronicle as part of its 2016 Salute to Nurses.

Third Author
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Professional Experience: Dr. Chacko has 25 years of experience as a nursing instructor responsible for planning, developing and implementing educational programs. She has taught licensed and unlicensed nursing orientation, facilitated a program for the perioperative nurses, developed and implemented the online competency program, and provided system-wide competency programs for licensed and unlicensed staff. She has also coordinated LVN workshops, and Trauma, HIV, Laser workshop, & Oncology certification review classes. She was the primary Nurse Planner for the Texas Nurses Association-approved provider unit for 14 years and received commendations three times from TNA. She had presented three posters at the National Nursing Staff Development Organization (NNSDO - currently known as ANPD) and INSPIRE Nursing Symposium regional conference.

Author Summary: Dr. Chacko is a certified nursing professional development practitioner, working as a
nursing instructor, and responsible for facilitating and teaching onboarding licensed nursing orientation program in collaboration with other departments. She is also responsible for coordinating new equipment/product in-services for the organization. She is a member of different professional organizations, such as Association for Nursing Professional Development (ANPD), International Association of Healthcare Central Service Material Management (IAHCSMM), and Oncology Nursing Society (ONS).

Fourth Author
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**Professional Experience:** Katie Kerbow has been a registered nurse for four years and brings 10 years of management and leadership experience that have contributed to establishing shared governance within the ambulatory care setting. She currently serves as elected chairperson for the Ambulatory Care Services INSPIRE Team.

**Author Summary:** Katie Kerbow has held the position as the Ambulatory Care Services Program Coordinator for Nursing Integration for 1.5 years. She has served on various system-wide committees as a voice for the nursing staff. She worked as a RN within one of the primary care clinics, focused on improving patient satisfaction and improving patient outcomes, and has been a member of STTI since 2015.

Fifth Author
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**Professional Experience:** Michelle Lincoln is a neonatal RN with 35 years of experience working with neonates and preterm infants in both Level II nursery and Neonatal Intensive Care Unit settings. She has functioned in differing capacities (charge nurse, unit preceptor, etc) and participated as an integral part of various pavilion and system-level committees (Community of Practice, INSPIRE Team, LBJ Baby Friendly Initiative).

**Author Summary:** Mrs. Lincoln currently serves as elected chairperson of the Lyndon B. Johnson Hospital INSPIRE Team. She and her team have been instrumental in serving as champions for nurse-led scholarship initiatives.

Sixth Author
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**Professional Experience:** Monica Mendoza-Moore RN has been a registered nurse for 14 years, and has experience as a Certified Emergency Room Nurse at a Memorial Herman Hospital – Texas Medical Center as a Charge Nurse along with leadership experience. Additionally, she has six years of service as a Senior Research Nurse with The University of Texas Health Science Center at Houston – McGovern campus where she worked with the Emergency Medicine Department.

**Author Summary:** Monica Mendoza-Moore has held the position as the Ambulatory Care Services Clinician II Program Coordinator for two years. She holds leadership positions on various system-wide committees serving as a voice for the nursing staff. She also holds the elected position as co-chair of the ACS INSPIRE Team.

Seventh Author

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Case Management  
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**Professional Experience:** Rose Suico has been a staff nurse, charge nurse or team leader in Labor & Delivery, Obstetrics, and Perioperative Nursing. She has also functioned as a Clinical Instructor for nursing, preceptor and mentor. She is presently Clinical Nurse Case Manager in Women's Services (OB/GYN, L&D, Antepartum, and Postpartum) at Ben Taub Hospital and an adjunct Clinical Instructor/Professor at San Jacinto College of Nursing in Houston. Mrs. Suico has also been co-author of “Workforce Development to Integrate Nurse-Driven Clinical Inquiry” (International Podium Presentation), co-author of “Patient-centered Care: Implementations of the Discharge Readiness Transition Pathway” at American Case Management Association 2017 National Conference (National Poster Presentation), author of “Patients with Multiple Chronic Conditions” for the Center for Nursing Scholarship INSPIRE Newsletter, and co-investigator on the “Delphi Study to Determine Nursing Research Priorities” (IRB-sanctioned research study).

**Author Summary:** Rose Suico is currently Clinical Nurse Case Manager at Ben Taub Hospital, where she serves as elected communications specialist for the INSPIRE Team. Mrs. Suico has been an active member of the INSPIRE Team (and its predecessor “research council”) for many years.