Title:
Transcending the Scarcity Narrative: Understanding and Leveraging Nursing's Strengths to Create a Healthier Work Environment

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Slot:
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11:15 AM

References:
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Retrieved from http://www.aacn.nche.edu/media-relations/NrsgShortageFS.pdf

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10.	Reina, A Trust Building® Consultancy (2016). Assessments - Team Trust Assessments. Retrieved from http://reinatrustbuilding.com/assessments/team-trust-assessment/

Abstract Summary:

Could nursing leaders' commitment to understanding and addressing the causes and consequences of unhealthy work environments be compromising their success? This presentation describes the impact of a scarcity/deficits lens, the rationale for adopting a strengths-focus, and a series of strengths-focused initiatives at a large academic medical institution.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to describe how a risks-focused approach to improving work environments may unintentionally compromise the potential for success.	Describe why a risks-focus is associated with stress, fear and lower job enjoyment, as well as compromised collaboration and solution-finding. Briefly introduce how the brain responds to perceived risk and why we are predisposed to see the negative. Illustrate this with examples from the baseline qualitative research conducted in the institution.
The learner will discover how adopting a strengths-focused approach can transform nurses' belief that they can influence their work environment.	Introduce the concept of a strengths-focused approach to building healthier work environments. Explain the importance of creating structured opportunities to practice strengths-focused thinking and conversations.
The learner will be able to explain why nurse leaders must assure consistency of strengths-focused messaging to avoid dissonance.	Explain the importance of avoiding conflicting risks-focused messaging. Describe the development and implementation of an integrated, strengths-focused process that was used to debrief trust, safety, nurse satisfaction and engagement surveys.

Abstract Text:

Today's nurses are asked to provide safe, expert, compassionate, person-centered care in the midst of a complex and rapidly changing healthcare environment. Many are stressed, tired, and disengaging. Nursing turnover rates are high (averaging 17.1% in 2015)[1] which, with medically complex patients, may result in nursing concerns about staffing shortages, skillsdeficits and threats to patient safety[2-3]. The American Association of Colleges of Nursing's *Nursing Shortage Fact Sheet* [3]cites the stress associated with inadequate staffing and patient safety concerns as factors that impact nurses' decisions to leave the profession. Although nurse leaders should be concerned about recruitment and retention, appropriate staffing is only one of AACN's six essential standards for establishing a healthy work environment[4] Nurse leaders, who play an important role in creating healthy work environments,[2,4] must understand more than

the impact of change and uncertainty on the work environment and nurses' job enjoyment; they must discover how to mitigate it by leveraging strengths in all six essential standard areas. The critical question is how?

Since 2006, our nurse-led healthy work environment research team at a large academic medical center has studied the impact of disruptive behavior on the work environment and, specifically nurses and patients[5-7]. After several years of focusing on the causes and negative consequences of disruptive behavior, and evaluating the impact of a positive-psychology intervention in nursing units, the team had a transformative insight: the lens through which we view the issues profoundly alters not only what we learn, but our capacity to respond. What we see is determined by where and how we look. When focusing attention and conversations on challenges, problems and egregious behaviors, we are choosing a scarcity (or deficits) lens. This choice impacts what we discover. Albeit unintentionally, when we focus on identifying, understanding and reducing the factors that negatively impact our work environment we reinforce four incorrect perceptions: (1) these negative factors are normative/usual; (2) there is more wrong with us than right with us, (3) the problems are beyond our control, and (4) most nurses are not senior/powerful/respected enough to influence positive change. In 2013, focus groups about job enjoyment with frontline registered nurses and nurse managers throughout the institution revealed pervasive narratives about perceived lack of power and influence to improve their work environment. These fell into two groups: "nurses *are not* (fill in an adjective) *enough*" and "nurses *do not have enough* (fill in a noun)" to influence the work environment. Concerned, the team committed to learning the reasons for these perceptions.

Even though focus group discussions identified most of the negative factors described in the job satisfaction literature,[8]without exception the greatest threat to nurses' job enjoyment was perceived or real harm to patients and families. Qualitative analysis also revealed discordance between nurses' clinical confidence and ability to problem-solve on behalf of their patients, and their perceived helplessness to change their own work environment. Specifically, the team noted that although nurses knew what needed to change, they could not describe how it would happen; often resorting to comments such as: "that's above my pay grade", negative non-verbal expressions or silence. This led us to look at what was not being said, and revealed that the foundational issue underlying job enjoyment was the presence or absence of specific trust-building behaviors in their work environments. Although nurses seldom used the word trust, the stories they told clearly described the impact of trust behaviors on the work environment. Specifically, we learned what is possible when trust building behaviors are present in the work environment, and what is compromised when they are not.

Given that trust is a complex construct, often difficult to understand and describe, the team's major recommendation was that nursing leadership adopt a trust framework to engage nursing staff in conversations about trust and trust building in the work environment. Nursing leadership committed to using the Reina Dimensions of Trust: The Three Cs model®,[9] and deployed the Reina Team Trust Scale®[10] throughout nursing. To facilitate the Reina's strengths-focused survey debriefing process, we trained a cohort of volunteer *Trust Ambassadors*, who reminded us how challenging it is to keep work environment-related conversations focused on strengths.

Together, we identified five reasons for adopting a strengths-focused approach: (1) Humans are biologically programmed to identify and remember threats and scarcity, (2) nurses are trained to be vigilant for errors and threats to patient safety, (3) institutional leadership's response to surveys is to focus on areas of weakness, (4) we initiate root cause analyses when things go wrong – not when they go well, with the result that (5) our comfort and skill with strengths-focused conversations and root cause analyses is limited.

The survey debriefing experience taught us that although nurses responded favorably to the strengths-focused debriefings and found conversations about their strengths encouraging; overcoming the scarcity-focus bias will require clear direction, tools and practice. Leadership must be vigilant for the presence of conflicting messaging to avoid reinforcing the negative narratives.

In this presentation, we will describe both completed and ongoing work to build a strengths-focused culture including: development of a strengths-focused integrated debriefing process that has been used to debrief all institutional surveys involving nurses since 2015; developing nurse leaders' self-mastery to notice and mitigate physiological response to stress, fear and scarcity; and training in inquiry to build trust and support generative conversations about nursing's strengths and resilience.

Adopting a strengths-focus does not discount the many real challenges nurses face, but changes the way we understand and respond to these. Developing a strengths-focused culture is not quick or easy, but it is an important investment in creating and sustaining healthier work environments.