Title:
ICU Healthy Word Environments: A Concept Analysis

Sharon A. Little-Stoetzel, PhD
School of Nursing, Graceland University, Independence, MO, USA

Session Title:
Poster Presentations

Slot (superslotted):
PST: Saturday, 18 March 2017: 7:30 AM-8:00 AM
Slot (superslotted):
PST: Saturday, 18 March 2017: 9:45 AM-10:15 AM
Slot (superslotted):
PST: Saturday, 18 March 2017: 1:30 PM-2:00 PM
Slot (superslotted):
PST: Saturday, 18 March 2017: 3:45 PM-4:15 PM

Keywords:
Evolutionary Concept Analysis, Healthy work environments and Intensive Care Units

References:


Abstract Summary:
The evolutionary concept analysis model was used to define a healthy work environment from the ICU nurse perspective. Participants will learn the methodology used to determine the empirically based definition. Results of the study are framed with AACN’s Healthy Work Environment standards.

Learning Activity:

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<tr>
<td>Describe the evolutionary model for concept analysis.</td>
<td>The methodology will be delineated on the poster presentation. In particular, the two phases of data collection.</td>
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</table>
Define the concept of an ICU Healthy Work Environment.

The definition will be presented on the poster. A healthy work environment in ICU is one that is individually perceived to include positive work-group relationships and effective teamwork and that supports a nurse holistically by nurturing his or her physical, psychosocial, professional, and spiritual components of health.

Describe the attributes of a healthy work environment.

The attributes of the concept will be described on the poster. Individual perception, teamwork, and one that supports nurses holistically.

Abstract Text:

Background: Nurses’ healthy work environments are defined inconsistently in the nursing literature. Clarifying the concept of a healthy work environment would benefit employees, patients, leaders, and organizations as well as provide an empirical definition for future research.

Objective: The purpose of this research was to develop an empirically based definition of a healthy work environment in the intensive care unit using Rodgers’ and Knafl’s (2000) evolutionary concept analysis method.

Methods: This evolutionary concept analysis method included data collection and analysis in two phases. Phase 1 data collection and analysis included a random sample of 20% of the literature, as recommended by Rodgers and Knafl, published between 2008 and 2012 from the sociology, psychology, nursing, and business databases regarding healthy work environments. Phase 2 data collection included interviews with 11 ICU staff nurses and 10 ICU nurse managers using an interview guide developed from the themes that emerged from the literature sample.

Results: An empirically based definition of an ICU healthy work environment was developed: a healthy work environment in ICU is one that is individually perceived to include positive work-group relationships and effective teamwork and that supports a nurse holistically by nurturing his or her physical, psychosocial, professional, and spiritual components of health. Antecedent themes included: adequate staff and supplies, effective leadership, participation in decision-making and professional standards. Consequence themes included: quality product/outcome, organizational sustainability, and decreased turnover. Themes from the interviews were framed with AACN’s standards of a healthy work environment and Watson’s Human Caring Theory.

Conclusions/Recommendations: As a result of the study, recommendations for leaders include to work toward creating and supporting an environment where ICU staff nurses have positive work-group relationships and effective teamwork. Researchers at the AACN (2005) noted true collaboration among all members of the team requires “constant attention and nurturing” (p. 21) by leadership. Nurse leaders must ensure formal processes and structures are in place that facilitate effective teamwork, including unit council structures and effective communication avenues. As suggested in the study, healthy intensive care work environments should also provide physical, psychosocial, professional, and spiritual support for nurses.