Title:
Building the Healing Organization: Strategies for Successful Implementation, Cultural Transformation, and Sustaining High-Value Outcomes

Marie M. Shanahan, MA
Ann Marie Leichman, MSN²
Veda L. Andrus, EdD¹
¹The BirchTree Center for Healthcare Transformation, Florence, MA, USA
²Patient Care Services, The Valley Hospital, Ridgewood, NJ, USA

Session Title:
Workplace Cultures

Slot:
S 03: Monday, 31 July 2017: 11:45 AM-12:30 PM
Scheduled Time:
12:05 PM

Keywords:
alleviating nurse workplace stress, healing organization and sustaining cultural organization

References:


Abstract Summary:
Creating and maintaining a healing organization take a comprehensive vision and commitment to caring and compassionate principles. They require planning and executing with intention, creativity, and the boldness to lead a path that is still unfolding. Attendees will take away evidence-based, time-tested action steps to develop their organizations' plans.

Learning Activity:

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compare the stated obstacles and concerns related to nursing stress with obstacles or concerns that may exist within their own work setting</td>
<td>1) Identify the need to address nursing workforce stress and diminishment of compassion related to re-organization and task orientation a) Stakeholder (patients, nurses, physicians, management) voiced concern throughout the organization b) Decreased Patient satisfaction c) Increased nursing turnover 2) Engage nurse stakeholders around compelling vision that includes caring and compassion as organizational standard 3) Formulate a plan a) Plan meets multiple stakeholder objectives b) Plan for the short and long term success 4) Implement educational intervention a) Recognize value of identifying caring and compassion as integral with excellent patient care b) Use experts to create educational intervention c) Identify measurement tools and monitor metrics 5) Disseminate results internally and externally</td>
</tr>
<tr>
<td>Identify curricular components key to the success of the educational intervention</td>
<td>1) Key elements of curriculum: communication, healing presence, psychoneuroimmunology, caring theory, spirituality, personal renewal and resiliency skills 2) Development of Holistic Practice Council with autonomy to set standards and decide sequence of holistic clinical applications</td>
</tr>
<tr>
<td>Select one or more strategic application for use in their workplace</td>
<td>1) Briefly describe strategic applications and successful outcomes of the healing organization demonstrating applicability and sustainability for organizational impact a) Describe success and scope of intervention on professional growth, certification, mentoring and expertise b) Describe scope and outcomes of Holistic Birth Program c) Share renewal room study results d) Describe impact on patient experience metrics and cost savings</td>
</tr>
</tbody>
</table>

Abstract Text:
Purpose: Becoming a healing organization for patients, families, employees and providers was the long-term goal of nursing leadership at this facility, a 451-bed full service acute care metro area US hospital. Re-awakening the team to the art of nursing occurred by engaging frontline nurses in a personal-professional transformation facilitated through an educational collaboration with nurse experts. Over a period of 15 years, nursing at all levels and all specialties developed, evolved and evaluated the infrastructure and practices that would result in a seismic culture change across acute and outpatient services. Today, this award-winning and MagnetT™ designated organization is recognized as national resource for holistic and integrative patient care (Christianson, Finch, Findlay, Jonas & Choate, 2007). In this presentation, the speakers will outline the route to success of this nurse-led innovation in creating the healing organization.

Background: The executive nursing team realized that an emphasis on technology coupled with an aggressive re-organization had created workplace stress and depleted the caring and compassionate internal resources of the nurse managers and clinical nurses. Nurses’ ability to consistently deliver compassionate care is often impacted negatively by the stress they experience in the work environments (Dempsey, 2016). Patient satisfaction surveys bore this out and this in turn, captured the attention of several stakeholder groups within the organization. A call to action for re-infusing caring and empathy in nursing practice was answered by creating a partnership with experts in holistic nursing practice, integrative therapies and transformational leadership. Eliminating emotional exhaustion and burnout was a key objective within the nursing department in order to lower nurse stress levels, prevent widespread turnover and improve patient satisfaction (Van Bogaert, Clarke, Roelant, Meulemans & Van de Heyning, 2010). Holistic nursing was chosen as the foundation for the educational initiative due to its focus on nurse self-care and wellbeing and emphasis on caring-theory guided patient care.

Although holistic practice at this hospital began with a leadership vision, it quickly grew as a grassroots phenomenon that re-defined the usual methods employed to introduce organizational initiatives. The presentation will describe how nurse enthusiasm was nurtured while simultaneously providing the structure and practice standards needed to keep the vision growing, succeeding and measurable. A key to the organization’s success was ensuring an evidence based approach to planning, engaging, educating, evaluating and guiding practice.

Approach, Structure and Process: Acknowledging the problem was the first step to engaging a weary nursing team. Honest discussion around the aftermath of organizational re-engineering on the team’s nurse psyche and its effects on patient care opened the door to conceiving a plan to heal wounds and re-imagine a vibrant nursing workforce. What followed was house-wide development of a nursing vision calling for caring theory guided practice, nurse self-care and therapeutic healing environments that supported professional nurse growth and facilitated compassionate patient-nurse relationships.

With the nursing team energized around a holistic vision for practice, the nursing executives engaged nurse experts to deliver an educational platform that would transform nurse-to-nurse interactions, infuse greater caring in nurse-patient interactions and incorporate holistic and integrative therapies into patient care. (Shanahan, 2014). In addition, the educational methods had to support the shared governance process and have measurable outcomes. The nurse experts discussed the importance of nurse self-care as a key component to long-term engagement of nurses and a foundational component to the success of their vision. They included authentic communication, healing presence, psychoneuroimmunology, caring theory, and spirituality in the curriculum that was delivered in-house to 25 nurses per cohort. The nurses were also taught personal renewal and resiliency skills to foster on the job support for nurse self-care.

As nurse participants cycled through the 4-session 10 month educational process, a Holistic Practice Council (HPC), reporting directly to the Professional Nurse Practice Council, comprising of cohort members and guided by the executive and expert teams was formed. The HPC was charged with developing appropriate policies and clinical integration standards for holistic practice based on the Scope and Standards of Holistic Nursing Practice (American Holistic Nurses Association and American Nurses Association, 2013). As the HPC matured, developing specific competencies and evaluation of practices were added to its scope. Critical to the success of the project was allowing the sequence and introduction
of holistic practices to be determined by the HPC, to cultivate clinical nurse leadership through their shared governance model (Barden, Griffin, Donahue & Fitzpatrick, 2011).

Several interrelated components were responsible for the success of the project: a strong educational process that bridged leadership and frontline nursing concerns, expressed nursing leadership support, promoted grassroots enthusiasm and integration of holistic principles, and demonstrated significant achievement of organizational goals.

Outcomes and applications: Several outcomes of this culture change have occurred throughout the organization as a result of the initiative. A few of them are described in this abstract.

Professional Applications: Nurses are strongly encouraged to achieve certification and certified nurses are represented in all services area. There are now 75 (and growing) nationally board certified holistic nurses (HN-BC) and over 150 unit-based integrative healing resource nurses mentoring others in the organization. The holistic nursing certification rate is the highest of any organization nationally. The American Holistic Nurses Association recognized the organization in 2015 with its inaugural award for Institutional Excellence in Holistic Nursing. All nurses are taught the basics of holistic practice, beginning with interview screening and on-boarding orientation, and are required to attend a full day of education on holistic practice. To date, over 500 nurses have received the basic education and 260 have attended the in-depth 4 session program. Several nurses function in the role of full-time expert holistic practitioners promoting holistic practice throughout the organization. They are responsible for delivering integrative therapies to patients, families, nurses, providers and other employees. They meet with community groups and internal stakeholders. They keep abreast of current research in the field, updating practices, reporting to senior leadership and collecting data. Nurses in this organization apply evidence based integrative therapies in the treatment or promotion of patient surgical recovery, pain management, anxiety, sleeplessness, post-operative nausea, post chemotherapy nausea, maternal labor pain and anxiety, newborn restfulness and overall patient wellbeing. They combine therapeutic presence, holistic communication and assessment, guided imagery, clinical aromatherapy, music therapy, touch and energy therapies, medicinal harp melodies and pet therapies according to patient needs. They have presented their findings nationally and in publications.

Clinical application: Using the principle of holistic communication and leadership, the APRN leader of the Holistic Birth Program (HBP) sees pregnant women at several intervals prior to giving birth free of charge. Women and their significant others are introduced to multiple holistic interventions that are known to improve the birth experience, including relaxing hydrotherapy and aromatherapy. During the postpartum phase, the woman and her partner are provided with uninterrupted 2 hour bonding periods to encourage attachment. The HBP reported a C-section rate for spontaneous, term, vaginal, primipara, uncomplicated expected births of 14.2 percent compared to 36 percent for those not in the HBP.

Workforce application: A nurse PhD candidate studied the impact of nurse renewal room and reduction on nursing stress (Bodino, 2016). This organization has four nurse renewal rooms. Nurse renewal rooms are specifically designated spaces for nurses to rest and re-focus while they are on shift. Nurses are encouraged to use this space before, during and after their shift to avoid fatigue and enhance therapeutic presence. Nurses typically spend 15 minutes rejuvenating in these rooms in order to return to their patient care assignment relaxed and ready to re-engage with patients. There is a positive association between engaging in health promotion behaviors and the reduction of burnout (Neville & Cole, 2013).

Patient experience: The organization consistently surpasses state and national indices for the HCAHPS patient experience (most recently reported).

<table>
<thead>
<tr>
<th>HCAHPS Questions</th>
<th>Hospital</th>
<th>State Average</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients who reported their nurses &quot;Always&quot; communicated well</td>
<td>83%</td>
<td>76%</td>
<td>79%</td>
</tr>
</tbody>
</table>
Patients who reported their pain was "Always" well controlled

<table>
<thead>
<tr>
<th></th>
<th>73%</th>
<th>69%</th>
<th>71%</th>
</tr>
</thead>
</table>

Patient who gave their hospital a rating of 9 or 10 on a scale from 1 (lowest) to 10 (highest)

<table>
<thead>
<tr>
<th></th>
<th>76%</th>
<th>64%</th>
<th>71%</th>
</tr>
</thead>
</table>

Patients who reported YES they would definitely recommend the hospital

<table>
<thead>
<tr>
<th></th>
<th>80%</th>
<th>66%</th>
<th>71%</th>
</tr>
</thead>
</table>

**Organizational application:** Perhaps the most gratifying result of this healing initiative is the transformed culture. Nursing satisfaction is consistently high as is patient satisfaction. Especially telling is the impact on RN turnover and cost savings. In 2015, RN turnover rate stood at 9.0% in comparison to a national average of 17.1%. When compared to hospitals in the northeast region where the turnover rate stands at 14.6%, the cost avoidance for the organization is between $2.1 million and $3.2 million (as measured by the organization’s CFO) when compared to hospitals with 350-500 beds on the national level.

Creating and maintaining a healing organization over time takes a comprehensive vision and commitment to caring and compassionate principles. It requires planning and executing with intentionality, creativity and the boldness to lead a path that is still unfolding. The impact of this path on the initially unforeseen creation of a healing organization is now clearly evident.