

Annotated Table of Contents for *Creative Nursing* 24 #2
Cornerstones of Healing: Advancing Quality and Safety

FROM THE EDITOR: A Caring, Contextualizing Nurse, by *Marty Lewis-Hunstiger, BSN, RN, MA, retired pediatric nurse and preceptor, editor of *Creative Nursing*, copy editor of the *Interdisciplinary Journal of Partnership Studies*, and affiliate faculty member at the University of Minnesota School of Nursing in Minneapolis, MN.*

The title of this editorial comes from our guest editor, nurse statistician John Nelson: “Predictive modeling shows that the most important factor in patient safety is a caring, contextualizing nurse interacting in kindness.” That word predict is an important part of several articles in this issue, with a very specific meaning in the statistical analysis that gives qualitative nursing research the rigor it deserves. Prediction is the middle ground between association and causation, and involves not just current findings but possible future connections. No causation is implied, but the numbers are strong enough that one can say, if x is present, we can predict that $y\%$ of the time, z will be present. This is important for bolstering support for decisions made by health-care organizations (for instance, about resources).

FROM THE GUEST EDITOR: Predictors of Caring in the Context of Relationship-Based Care, by *John Nelson, PhD, RN, President and Data Scientist at Healthcare Environment in St. Paul, MN, and Mary Ann Hozak, RN, MSN, NEA-BC, Director of Innovative Nursing Practice and Quality Outcomes at St. Joseph's University Medical Center in Paterson, NJ.*

Nelson and Hozak report that clarity of self, role, and system has been shown to predict job satisfaction of health-care workers, which in turn predicted their perceived ability to care for patients. Relationship-Based Care (RBC) uses caring for self and others as the central construct for care delivery. In Nelson's and Hozak's statistical analysis of data from more than 540 health-care workers, the strongest correlation with self-care was a healing environment, suggesting that leadership should focus resources on improving the work environment. The study demonstrated that constructs within the context of RBC do relate to creation of a caring connection between health-care staff members and patients, including caring for self, having a direct relationship with the patient using concepts of Primary Nursing, clarity of role, and being a direct care provider. Everyone can create a caring moment, and including those who connect with patients but in a more indirect way (for example, environmental services and nutrition services staff) in training and research may add to the caring connection for patient and staff members in all roles. The authors have observed that, when given the opportunity, those who provide indirect care have some of the most beautiful stories to tell about their interactions with patients.

ARTICLES AND ESSAYS

Comfort as a Multidimensional Construct for Pain Management, by *Tara Nichols, MS, APRN, CCRN, CCNS, AGCNS-BC, Clinical Nurse Specialist – Pain Management and a Relationship-Based Care Expert at Mercy Health in Grand Rapids, MI.*

In this article, the context of comfort on which Nichols based her model moves beyond immediate signs of discomfort to identify both internal (within the patient) and external (from the clinician and environment) predictors that could enhance or detract from comfort. Obtaining comfort and diminishing pain are not ‘all or nothing’ phenomena, but depend on multiple variables that influence a

patient's perception of pain. Nichols advocates using practice stories to inform our care; many practice stories contain valuable quality and safety information about patients, families, and clinicians; however, in the age of rapid-cycle process improvement, these stories are often disregarded. Authentic human connections between clinicians and patients should lead to the development of a comfort zone where caring and healing live; with the therapeutic use of self, clinicians move beyond comforting acts and interventions to the embodiment of comfort.

Concept Analysis of Unintended Consequences, by Mykin Higbee, PhD, RN, adjunct faculty member in the School of Nursing at Utah Valley University in Orem, Utah.

When predicted outcomes are accompanied by unpredicted ones, the impact can be positive, neutral, or negative (sometimes even dire). This analysis of the concept of unintended consequences reminds us that, while nursing professionals act with the intent to improve health outcomes for patients, with every action there are risks and consequences that may or may not be anticipated. Nurses are well placed to anticipate and mitigate unintended consequences; as clinicians and scientists, nurses' subjective impressions of quality directly correlate with actual measured quality outcomes. A Model Case about bedside report depicts the unintended (and likely adverse) effect on patient satisfaction of conducting shift-change handoffs at the bedside in hospitals with rigid schedules in which the only shift changes are at 6 a.m., when patients are asleep, and 6 p.m., when most decisions about the plan of care have been made and implemented hours ago. Higbee advocates for studying everyday habits or choices nurses make, to determine unintended consequences that either help or hinder their well-being and/or productivity.

Professional Nurse Advancement Programs: The Face of Leadership at the Bedside, by Deborah Sharp, BSN, RN-BC, CRRN, Registered nurse 4 on the Rehabilitation Unit; Elisa Haynes, BSN, RN, CPAN, Medical Staff Quality Coordinator; Helen Lee, BSN, RN, OCN, is Application Coordinator in Clinical Informatics; Cindy Bussey, BSN, RN, CNRN, Registered nurse 4 on the Neuro Medical Unit; Abba Afatsawo, MSN, RN, PCCN, Registered nurse in Flexible Resources; Sylvia Davis, BSN, RN, CAPA. Registered nurse 4 in the Surgery Center; Donna Owens, BSN, RN, PCCN, Registered nurse 4 on the Congestive Heart Failure/Telemetry Unit; and Marjorie Jenkins, PhD, RN, NEA-BC, FACHE, Director of Nursing Research - SW Nursing Research; all at Cone Health in Greensboro, NC.

Deborah Sharp and colleagues at Cone Health, a regional comprehensive health-care network in Greensboro, North Carolina, describe a program that embodies Patricia Benner's belief that recognition, reward, and retention of experienced nurses in positions of direct clinical practice is one of the first steps in improving the quality of patient care. Participants in Cone Health's program have implemented changes to policies and clinical practice, initiated multidisciplinary orientation programs for new employees, and enhanced staff education programs. Again citing Benner, these authors state that nurses develop and observe many ways to understand and cope with illness, and offer avenues of understanding, increased control, acceptance, and even triumph in the midst of what, for the patient, is a foreign, uncharted experience.

Advancing Soft Skills: Leadership Seminars for Clinical Nurse Leader Students, by Julie Bertram, RN, PMHCNS-BC, PhD, Assistant Professor of Nursing at University of Missouri – St. Louis; Kris L'Ecuyer, RN, MSN, CNL, PhD, Associate Professor of Nursing at St. Louis University School of Nursing; Bobbi Shatto,

RN, MSN, CNL, PhD, Assistant Professor of Nursing at St. Louis University School of Nursing; Samantha Marquard, RN, MSN/MPH, FNP-BC, Instructor at St. Louis University School of Nursing; and Kathleen Carril, RN, MSN, CNL Assistant Professor of Nursing at St. Louis University School of Nursing, all in St. Louis, MO.

Julie Bertram and nurse educator colleagues describe a seminar for students in a Masters in Nursing program, some of whom, even with previous college preparation, may be unprepared to assume the responsibilities or demonstrate the professional attitudes and behaviors essential to success in their careers. The seminar, based on Covey's *7 Habits of Highly Effective People*, challenged the students to demonstrate role behaviors that are aligned with the character attributes that faculty and employers seek. A key aspect of these soft skills is emotional intelligence – the ability to monitor one's own and others' feelings and emotions, discriminate among them, and use this information to guide one's thinking and actions.

PATIENT SAFETY

SBAR Tool Implementation to Advance Communication, Teamwork, and the Perception of Patient Safety Culture, by *Cmdr. Raymond L. Bonds, DNP, CRNA, NC, USN, assistant professor, Uniformed Services University, Graduate School of Nursing, Registered Nurse Anesthesia Program, and credentialed anesthesia provider at Naval Hospital in Jacksonville, FL.*

This article describes implementation of a tool and process based on the Situation, Background, Assessment, Recommendation (SBAR) safety protocol to advance communication and teamwork in a perioperative setting, a milieu with a particularly high risk for errors. Protocol-based communication as developed by the airline industry is being promoted in health care to address ineffective communication during the transfer of care between multiple disciplines that has resulted in delayed care, inefficiencies, increased length of stay, and patient safety breaches. Much too frequently, communication in health care is dependent on the personality traits of the individuals involved, and not on a standardized process. Bonds reminds us that an airline passenger now has a far better chance of surviving a flight than a patient has of surviving a hospital stay. One of the fundamental assets of SBAR is that it is an easy acronym to remember in maintaining structured, consistent handoff communication.

Development and Implementation of a Situation Awareness Workshop to Advance Safe Practice in Novice Nurses, by *Steven Kass, PhD, professor of psychology, senior consultant for the Center for Applied Psychology, and coordinator of the industrial-organizational psychology master's program; Christopher O. Downing, Jr., PhD, organizational development consultant at the Center for Applied Psychology; Kahla A. Davis, BA, graduate student in the industrial-organizational psychology master's program; Stephen J. Vodanovich, PhD, professor in industrial-organizational psychology; Cynthia Smith-Peters, DNP, clinical assistant professor of nursing and director of the undergraduate nursing program; and Jill J. Van Der Like, DNP, MSN, RNC, clinical assistant professor and director of the Nursing Skills & Simulation Learning Center for the School of Nursing; all at the University of West Florida in Pensacola, FL.*

Steven Kass and colleagues developed a workshop designed to provide novice nurses with tools to improve their situation awareness (SA), the accurate perception of relevant cues in the environment, integration of those cues to comprehend their meaning, and projection of situation status into the near future. Situation awareness is critical in dynamic, intense environments where errors in

perception, comprehension, and projection can be life-threatening. Nurses are in a unique position to detect medical errors early and initiate actions to prevent negative consequences. Educating nurses in SA techniques and strategies helps them filter environmental cues, focusing on relevant ones and ignoring distractors, leading to more accurate patient diagnoses through pattern matching and prevention of serious patient deterioration.

THE VOICE OF PATIENTS AND FAMILIES

Healing the Grieving Heart: A Journey toward Wholeness, by *Patti Williams, RNBC, BS, AAS, certified Pastoral Bereavement Counselor in the Roman Catholic Archdiocese of New York.*

Patti Williams recounts her personal experiences with the loss of loved ones, and her calling to share her wisdom in a seminar for people who have experienced losses of many kinds. In a moving section called “What I’ve Learned about Grief,” she says that grief is the protest of the body, mind, and spirit against the loss of something or someone that had meaning to us, which explains why we feel so profoundly its manifestations. In this article we learn about waves of grief, the detoxifying effect of tears, how new grieverers may need to build a new support system, and how the world needs to be educated that to those who are grieving, the words, “Get over it” should never be said. She is grateful for being called into the field of nursing, in which she can make a difference in people’s lives by helping them heal – not as she had originally envisioned, but where her talents and gifts have led her.