Moral Leadership in Nursing

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Objectives

- Examine the history of the professionalization of nursing

- Learn five characteristics of a profession

- Review styles and elements of leadership

- Identify key concepts that promote ethical environments

Moral Leaders in Nursing

Understanding the qualities that create positive practice milieus and therefore produce an ethical environment where safe, high quality and effective care occurs is a duty and responsibility regardless of the nurses' role

Therefore, educators, administrators, clinicians and scholars – all must join together to address opportunities for improvement in all healthcare settings

Professionalization of Nursing

Remarkable progress in just over 125 years

19th Century

- Thankless work, provided by tough, socially marginal women (Kalisch & Kalisch, 1978)

- Considered menial, badly paid occupation that required no training (Cook, 1942)

1854

- Florence Nightingale in the Crimea (Shaw, 1993)

1873

- First Nightingale inspired schools
- Disease prevention
- Beginning of professional nursing (Cook, 1942)

1893

- The Florence Nightingale Pledge is written (Calhoun, 1993)

![Harris Health System logo]

End of the 19th century

- Proliferation in nursing schools
  - Hospitals staffed with "nurses in training" (Reverby, 1987)

1920 – 1930

- Increasing self assessment
  - Focus on education as opposed to providing student labor for the hospital (Kalisch & Kalisch, 1978)

WW II

- Significant changes
  - Army nurses, flight nurses, public health (Kalisch & Kalisch, 1978)

1950 – 1960

- Formal separation of nursing from medicine
  - Developing emphasis on nurse patient relationship
  - Development of nursing theory (Shaw, 1993)
  - Scholarly development (AJN - Nursing Research 1951) (Wuest,1994)

1960 – 1980

- Second major wave of feminist advocacy raised social consciousness by further exposing the sexism in policies and practices that discriminated on the basis of sex (Bem,1993)

- Increasing autonomy

1980 – 2000

- Exploding opportunities
- Challenges of increasing technology

2000's

- "Knowledge workers"
- Increasing understanding of the positive effect of registered nurses on patient care
- Internships/residency programs
- Differentiated practice

Characteristics of a Profession

- Education and training
- Skill based on theoretical knowledge
- Professional organizations
- Service to society
- A code of ethics (Miller, et al, 1993)

Education and Training

- Diploma

- Associates degree

- Baccalaureate preparation

- Graduate preparation

- Doctoral nursing

Theoretical Knowledge

The knowledge base for nursing includes:

Nursing science, philosophy and ethics

- Nightingale, Benner, Leininger, Watson
- Ethical principles
- The ethic of care

Physical, economic, biomedical, behavioral and social sciences

- Bandura, Erikson, Freud

(American Nurses Association, 2010)

Professional Organizations

- State and National Boards

- State and National Organizations

  - Texas Nurses Association

  - American Nurses Association

- There are as many professional nursing organizations as there are nursing specialties

  - ARIN, AANN, ARRN, AACN, AORN, AWHONN, ONS, AMSN, AONE…

Service to Society

- Legislative
  - Nurses Day at the Texas Legislature
    - Support for Children's Health Insurance
    - Increased funding to deal with nursing shortage
- Health Care Reform
- Nurse Practice Act, whistle blower protection, safe harbor, needle safety, ergonomics

Volunteerism

- Health fairs (blood glucose, cholesterol levels, blood pressure)

- Participation in humanitarian and charitable programs (e.g.: Habitat for Humanity, American Red Cross, Doctors Without Borders)

- Professional organizations

A Code of Ethics

- First code of ethics (the Florence Nightingale Pledge) written in 1893

- Since then the code has undergone 9 revisions, most recently the 2001 Code of Ethics for Nurses with Interpretive Statements

On Leadership

Common Core of Meaning

"To lead"

- Old English "leden" or "loedan"

  - To make go

  - To guide

  - To show the way

- Latin "ducere"

  - To draw, drag, pull, guide or conduct

    (Rost, 1991)

Transformational Leadership

Demonstrated by idealized influence and charisma (Nielsen, et al, 2008)

Inspires autonomy and desired behavior

Motivates employees to engage in problem solving, shared decision-making, and their own professional development through coaching, mentoring, and being present

Communicates organizational mission, vision, and goals and incorporate shared values in their actions and institutional policies (Leach, 2005)

Authentic Leadership

Authentic leaders are committed to:

- Personal core values
- Self-discipline
- Leading with compassion
- Forming lasting relationships, and
- Understanding their own sense of purpose

Authentic leaders are perceived as real, trustworthy, sincere, dependable, and possessing integrity

(Shirey, 2006)

Servant Leadership

Attributes include:

- Listening
- Awareness
- Persuasion
- Stewardship
- Commitment to developing others, and
- Building community

Think in terms of team success and recognition as opposed to their own

Vision is to enable team members to complete their work and become stronger individually and collectively in the process

Advocates a group-oriented approach to analysis and decision-making as a means of strengthening institutions and improving society   (Thorne, 2006)

Evidence-Based Leadership

Replaces compartmentalization and fragmentation with new ways of collaborating and reaching consensus

Builds infrastructure and embraces behavior that supports implementation of goals to advance clinical care and professional practice

Characteristics include:

- Innovation thinking
- Planning, and
- Implementation

(Porter-O'Grady & Malloch, 2008)

Defining Terms

Confusion between terminology

- Moral

- Ethical

Ethics

- Greek word "ethikos"
  - Pertaining to custom
- And "ethos"
  - Referring to character

Morality

- Latin word "mores"
  - Refers to character, or custom and habit

(Rhode, 2006)

Ethical and Moral Terms

Ethical

- Refers to reasons for decisions about how one ought to act:

    - Using ethical theories (humanist, feminist, social ethics)
    - Adhering to principles (autonomy, justice, beneficence)

Moral

- Overlaps with ethical but is more aligned with:

    - Personal beliefs
    - Cultural values

Regardless, in popular usage

Moral or ethical understood to be a:

- Commitment to right action
- Involves:
    - Honesty
    - Fair dealing
    - Social responsibility

Moral Leadership

Work environments where nurse leaders empower nursing staff to control and effect positive change while maintaining an atmosphere of mutual trust, respect, and openness are places where true leadership is present (LaSala, 2010)

Moral leaders embrace key concepts that promote ethical environments, creating a nursing milieu that enhances the quality and safety of patient care

Ethical Environments

Key Concepts

- Structural Empowerment

- Positive Practice Milieus
  - Mission, vision, values and philosophy
  - Model of care
  - Shared governance

- Professional Competence
  - Nursing
  - Cultural

- Effective Communication
  - Assertiveness
  - Chain of command
  - Just culture
  - Moral courage

Structural Empowerment

Four structural factors within organizations that lead to empowerment:

- Access to information
- Support from organizational leadership, subordinates, and peers
- Adequate resources to do the work, and
- Opportunities for personal and professional development

Formal and informal power facilitates access to structural factors that promote empowerment

(Kanter, 1993)

Positive Practice Milieus

Mission, vision, values and philosophy

- Sets the tone for the work of nursing in the organization
- Creates a future state that implies a commitment to organizational improvement, and
- Suggests the types of activities that will ensure that the organization reaches those goals
- Allows the organization to define itself to its internal and external community

Model of care

"The driving force of nursing care; a schematic description of a theory, phenomenon or system that depicts how nurses practice, collaborate, communicate and develop professionally to provide the highest quality of care for those served by the organization."

(American Nurses Credentialing Center, 2008)

Shared Governance

Participatory management encourages shared decision-making, shared responsibility, and taking ownership of one's practice at the point of care (LaSala, 2010)

Promotes more control over the practice environment, autonomy in practice, and positive relationships (Laschinger, et al, 2003)

Increased nurse satisfaction, increased nursing recruitment and retention, and a more motivated, engaged nursing staff (Bretschneider, et al, 2010)

Professional Competence

Nursing Competence

Goals of nursing as articulated by Nightingale, including autonomous nursing practice, a framework for preparation, and standards for ethical conduct and character (Maraldo, 1992)

Nurses create care environments through collaboration, education, and high moral standards.

Ongoing nursing values support human compassion, knowledge base, reasoning, and understanding

Cultural Competence

Understanding and appreciating inherent differences and similarities not only locally, but regionally, nationally, and worldwide as well (Leininger, 1991)

Valuing, incorporating, and examining personal health-related values and beliefs, as well as those of health care organizations – for it is only then that nurses can support the principle of respect for persons and the ideal of transcultural care (Bjarnason, et al, 2009)

Effective Communication

Assertiveness

Inadequate communication responsible for nearly 70 percent of reported sentinel events, surpassing other issues such as:

- Staff orientation and training
- Patient assessment
- Staffing (Robert Wood Johnson, n.d.)

Assertive communication is the act of stating a position with assurance, and is an honest, direct and appropriate means of communicating that focuses on solving a problem (The Joint Commission, 2009)

Critical element of patient safety and quality care

Chain of Command

Engaging the chain of command ensures that the appropriate people know what is occurring and is respectful in that communication starts at the level closest to the event and moves up as the situation warrants

Using the chain of command is critical when a problem has escalated beyond the problem-solving ability and/or scope of those involved

Just Culture

Seeks to create environments that incentivize rather than punish error reporting.
Individuals are not held accountable for system problems over which they have no control
Recognizes that patient care safety and quality is based on teamwork, communication, and a collaborative work environment (ANA, 2010)

Moral Courage

Moral Foundation

- Having the necessary knowledge and skills
- Knowing the appropriate action(s) to take
- Possessing a willingness to act
- Taking the right actions (Packard & Ferrara, 1988)

Courage

- People think courage is a lack of fear, however, I have come to understand that courage is action in spite of fear...that is courage (P. Waters, personal communication, April 14, 2010).

Embracing Moral Leadership

Raising the bar
- Accountability
- Responsibility
- Professionalism

Raising expectations
- Of ourselves
- Of others

Communicating
- Honestly
- Openly

Being fair and trustworthy

Being proactive, not reactive

Putting patients first

On Leadership

What is our needful thing? To have high principles at the bottom of all. Without this, without having laid our foundation, there is small use in building up our details. This is as if you were to try to nurse without eyes or hands…If your foundation is laid in shifting sand, you may build your house, but it will tumble down.

Florence Nightingale, 1875

One Last Thought

Imagine a world without nurses. Think of a world without persons who know what nurses know; who believe as nurses believe; who do what nurses do; who have the effect that nurses have on the health of individuals, families, and the nation; who enjoy the trust that nurses enjoy from the American people. Imagine a world like that, a world without nurses.

Margretta Madden Styles, 2006

References

American Nurses Association (2001). *Code of ethics for nurses with interpretive statements*. Silver Spring, MD: Nursebooks.org.

American Nurses Association (2010). *Just culture.* Retrieved March 31, 2010, from http://www.nursingworld.org/FunctionalMenuCategories/MediaResources/PressReleases/2010-PR/ANA-Statements-Affecting-Nursing-Practice.aspx

American Nurses Association. (2010). *Nursing's social policy statement: The essence of the profession.* Silver Spring, MD: Nursebooks.org.

American Nurses Association. (2010). *Nursing scope and standards of practice* (2nd ed.). Silver Spring, MD: Nursebooks.org.

American Nurses Credentialing Center. *A new model for ANCC's magnet recognition program*. Retrieved March 17, 2010, from: www.nursecredentialing.org

Bem, S.L. (1993). *The lenses of gender: Transforming the debate on sexual inequality*. New Haven: Yale University.

Bjarnason, D., Mick, J., Thompson, J. A., & Cloyd, E. (2009). Perspectives on transcultural care. In D. Bjarnason and M. A. Carter (Eds.), *Nursing Clinics of North America: Legal and Ethical Issues: To Know, To Reason, To Act* (pp. 495-503). Philadelphia: W.B. Saunders.

Bretschneider, J., Glenn-West, R., Green-Smolenski, J. & Richardson, C. (2010). Strengthening the voice of the clinical nurse: The design and implementation of a shared governance model. *Nursing Administration Quarterly*, *34*(1), 41-48.

Calhoun, J. (1993). The Nightingale pledge: A commitment that survives the passage of time. *Nursing & Health Care 14*(3), 130-36.

Cook, E. (1942). *The life of Florence Nightingale*. New York: MacMillan.

Joint Commission Resources (n.d.). Robert Wood Johnson Foundation. Retrieved March 31, 2010, from http://dev.icps.jcrinc.com/Products-and-Services/Conferences-and-Seminars/Robert-Wood-Johnson-Foundation-Communication/

Kalisch, P.A. & Kalisch, B.A. (1978). *The advance of American nursing.* Boston: Little, Brown.

Kanter, R. M. (1977). *Men and women of the corporation*. New York: Basic Books.

LaSala, C.A., Bjarnason, D. (2010). Creating workplace environments that support moral courage. *OJIN: The Online Journal of Issues in Nursing* Vol. 15, No. 3, Manuscript 4. DOI: 10.3912/OJIN.Vol15No03Man04.

Laschinger, H. K. S., Sabiston, J. A., & Kutzscher, L. (1997) Empowerment and staff nurse decision involvement in nursing work environments: Testing Kanter's theory of structural power in organizations. *Research in Nursing & Health 20*, 341-352.

Leach, L. S. (2005). Nurse executive transformational leadership and organizational commitment. *Journal of Nursing Administration*, *35*(5), 228-237.

Leininger, M. (1991). Transcultural nursing: the study and practice field. *Imprint, 38,* 55-66.

Maraldo, P. J. (1992). NLN's first century, *Nursing & Health Care, 13*(5), 227-228.

Miller, B. K., Adams, D., & Beck, L. (1993). A behavioral inventory for professionalism in nursing. *Journal of Professional Nursing*, 9(5), 290-295.

Nielsen, K., Yarker, J., Brenner, S.O., Randall, R., & Borg, V. (2008). The importance of transformational leadership style for the well-being of employees working with older people. *Journal of Advanced Nursing, 63*(5), 465-475. doi:10.1111/j.13652648.2008.04701.x

Nightingale, F. (1859). *Notes on nursing: What it is, and what it is not*. London: Harrison, 59, Pall Mall.

Nightingale, F. (1915). *Florence Nightingale to her nurses.* London: MacMillan & Co.

Packard, J. S. & Ferrara, M. (1988). In search of the moral foundation of nursing. *Advances in Nursing Science*, *10*(4), 60-71.

Porter-O'Grady, T. & Malloch, K. (2008). Beyond myth and magic: The future of evidence-based leadership. *Nursing Administration Quarterly*, *32*(3), 176-187.

Reverby, S. (1987). *Ordered to care: The dilemma of American nursing 1850-1945*. Cambridge, Mass.: Cambridge University Press.

Rhode, D. L. (2006). Introduction: Where is the leadership in moral leadership? In D. L. Rhode (Ed.), Moral leadership: The theory and practice of power, judgment, and policy. San Francisco: John Wiley & Sons.

Rost, J. C. (1991). *Leadership for the 21st century*. Westport, Conn: Quorum Books.

Shaw, M. (1993). The discipline of nursing: Historical roots, current perspectives, future directions. *Journal of Advanced Nursing 18,* 1651-56.

Shirey, M. R. (2006). Authentic leaders creating health work environments for nursing practice. *American Journal of Critical Care, 15*(3), 256-267.

Styles, M. M. (2003). *Presentation to the American Nurses Association House of Delegates annual meeting*. Retrieved April 16, 2010, from http://www.grettafoundation.org/images/attachments/TGFflyer.pdf

The Joint Commission (2009). The Joint Commission 2009 requirements that support effective communication. Retrieved March 31, 2010, from http://www.jointcommission.org/NR/rdonlyres/B48B39E3-107D-495A-9032-24C3EBD96176/0/PDF32009HAPSupportingStds.pdf

Thorne, M. (2006). What kind of leader are you? *Topics in Emergency Medicine, 28*(2), 104-109.

Wuest, J. (1994). Professionalism and the evolution of nursing as a discipline: A feminist perspective. *Journal of Professional Nursing 10*(6), 357-67.