2007 Positive Work Environments

Oklahoma Nurses Association Position on Promoting Healthy Work Environments

In 2000, the Oklahoma Nurses Association (ONA) adopted workplace and workforce advocacy as our framework for addressing work environment issues and promoting a positive image of nursing. In 2007, the ONA House of Delegates adopted a resolution in support of the professional nurse's role in promoting healthy work environments.

Healthy Work Environments

Healthy work environments support and foster excellence in patient care. Unhealthy work environments contribute to medical errors, ineffective delivery of care, conflict and stress among health professionals (AACN).   Nurses play an important role in working together in the health care setting to facilitate healthy work environments. The ONA Committee on Professional Practice has addressed issues related to promoting healthy work environments, recommending the association work to eliminate horizontal violence through education and promotion of the forces of magnetism.

Over the past few years, a growing number of professional organizations have adopted positions in support of healthy work environments, which include:

- The American Nurses Association (ANA) resolves to promote healthy work environments for all nurses that include the right of all nurses to work in environments free of hostility and abusive behavior.
- The ANA Scope and Standards of Nursing Practice mandates that the registered nurse provide leadership in the professional practice setting, which includes responsibility for engaging in teamwork, being a team builder, and working to create and maintain healthy work environments.
- The American Nurses Association Code of Ethics with Interpretative Statements clearly articulates the obligation of professional nurses to develop and maintain respectful relationships with colleagues.
- The Center for American Nurses in 2008 adopted a position statement against lateral violence and bullying in the workplace.
- The International Council of Nurses (ICN) defines abuse as behavior that humiliates, degrades or otherwise indicates a lack of respect for the dignity and worth and of an individual.
- The American Association of Critical Care Nurses (AACN) states that abuse can take the form of intimidating behaviors such as condescending language, impatience, angry outbursts, reluctance or refusal to answer questions, threatening body language, and physical contact. The emotional impact of abusiveness demoralizes people and can leave the victim feeling personally and/or professionally attacked, devalued, or humiliated.

- The Joint Commission issued a Sentinel Event Alert "Behaviors that Undermine a Culture of Safety" in July 2008 identifying intimidating and/or disruptive behavior as contributing to errors and poor staff and patient satisfaction in health care organizations.

Promoting Healthy Work Environments

Many nurses have not been challenged to assume their personal and professional responsibility for promoting a healthy work environment. Many have not been educated on the detrimental effects of horizontal violence on working relationships, nurse retention and patient safety. Accountability for conflict resolution and leadership skills has been shown to promote healthy work environments.

ONA Position Statement

The Oklahoma Nurses Association challenges each professional nurse to assure they fully understand the positive benefits to themselves, as professionals, and to their patients of a healthy work environment. It is urgent that each professional nurse recognizes the harmful impact of horizontal violence and that nurses in all practice settings work together to reduce the harmful effects and prevent ongoing and future occurrences of horizontal violence.

The Oklahoma Nurses Association endorses the right of every nurse to work in a healthy work environment free from horizontal violence. This includes each professional nurse's responsibility to:

a. Monitor their personal communication patterns to ensure respectful communication, confront hostility, verbal abuse or other forms of horizontal violence
b. Advocate for students and nurses new to the profession
c. Provide leadership among team members in modeling appropriate communication
d. Educate colleagues and students about healthy work environments, positive team behavior and communication skills.

The Oklahoma Nurses Association endeavors to work collaboratively with other nursing associations to disseminate information to practicing nurses, nurse managers, hospital administrators and other stakeholders related to:

a. Promoting the principles of a healthy work environment
b. Educating nurses on communication strategies, conflict resolution and workforce advocacy
c. The detrimental effects of horizontal violence in the workplace
d. Benefits of leadership development education for professional nurses at all levels and in all roles
e. Promoting the ANCC Forces of Magnetism and the Magnet Designation; and
f. Utilizing the ONA Excellence in the Workplace Environment and other awards to recognize leaders that are promoting positive work environments.

g. Promote the availability of the ONA consultation service for individuals seeking assistance in addressing horizontal violence or other workplace issues
h. Provide understanding of resources available to nurses in the workplace including human resources departments, grievances, mediation, or EEOC complaints to address workplace concerns
i. Promote leadership and communication among nurses at all levels, including LEAD ON: Leadership Enhancement and Development for Oklahoma Nurses.

References/Resources

American Association of Critical Care Nurses. (2004). AACN Standards for establishing and sustaining healthy work environments: A journey to excellence. Available at: http://classic.aacn.org/aacn/pubpolcy.nsf/vwdoc/workenv.

American Association of Critical Care Nurses. (2004). Zero tolerance for abuse. Retrieved October 21, 2008 at http://www.aacn.org/WD/Practice/Docs/Zero_Tolerance_for_Abuse.pdf

American Nurses Association. (2001). Code of ethics for nurses with interpretive statements. Washington DC: American Nurses Association.

American Nurses Association. (2004). Nursing: Scope and standards of practice. Silver Spring: Nursebooks.org.

Bartholomew, K. (2006). *Ending nurse to nurse hostility: Why nurses eat their young and each other*. Marblehead, MA: HCPro.

Bully Busters www.bullyinstitute.org

Center for American Nurses (2008). Lateral violence and bullying in the workplace. Available at: http://centerforamericannurses.com/associations/9102/files/Position%20StatementLateral%20Violence%20and%20Bullying.pdf

Center for American Nurses (2007). Bullying in the workplace: Reversing a culture. Silver Spring, MD: Center for American Nurses.

Cohen, S., Bartholomew, K. (2008). *Our Image, Our Choice: Perspectives on shaping, empowering and elevating the nursing profession*. Marblehead, MA: HCPro, Inc.

Hall, L.M. (2005). *Quality work environments for nurse and patient safety*. Sudbury MA: Jones and Bartlett.

Heath, J. et al (2004) Healthy work environments: A validation of the literature. Journal of Nursing Administration. 34 (11); 524 - 530

Institute of Safe Medication Practice (2003). Survey on workplace intimidation, available online at http://ismp.org/survey/surveyresults/survey0311.asp.

International Council of Nurses (2008). Workplace Bullying in the Health Care Sector.

Joint Commission (2008). Behaviors that undermine a culture of safety. Sentinel Event Alert, Issue 40, July 9.

Manion, J. (2005). *Create a positive health care workplace*. Chicago: AHA Press.

McClure, M., Hinshaw, A.S (2002). Magnet Hospitals Revisited: Attraction and retention of professional nurses. Washington D.C.: American Nurses Publishing.

Namie, G., Namie, R. (2003). *Bully at Work*. Naperville, IL: Sourcebook, Inc.

National Student Nurses Association. (2006). Resolution in support of professional workplace culture and decreasing horizontal violence. Retrieved July 10, 2007, from http://www.nsna.org/pubs/pdf/Resolution%202006.pdf

Patterson, K., Grenny, J., McMillan, R., Switzer, A. (2002). *Crucial Conversations: Tools for talking with the stakes are high*. New York: McGraw-Hill.

Patterson, K., Grenny, J., McMillan, R., Switzer, A. (2004). Crucial *Confrontations*. New York: McGraw-Hill Crucial Confrontations

Pinkerton, Sue Ellen (2005) AACN Standards for Establishing and Sustaining Healthy Work Environments. Nursing Economic$ 33 (3); 139-140.

Rowell, P.A. Rowell (2008). Lateral Violence: Nurses Against Nurse. ANA Continuing Education. Retrieved October 15, 2008 at: http://www.nursingworld.org/mods/mod440/lateralfull.htm

VitalSmarts. (2005). Silence Kills: The seven crucial conversations for healthcare. Available   at www.silencekills.com

Workplace Bullying Institute www.bullyinstitete.org