

EXPERIENCE EXCHANGE

Establishing a culture of camaraderie, congeniality, and cohesiveness among nursing educators and Chief Nurse Executives (CNEs)

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Abstract

This article utilizes reflective thinking combined with many varied opportunities in nursing education and clinical management for Deans of nursing schools and/or Chief Nursing Executives (CNE) to utilize techniques of strategic planning changing corporate culture in measurable ways.

Key words

Colleague camaraderie, Colleague cohesiveness, Pathways, STEPPS®

Introduction

Like business, manufacturing, and healthcare establishments, formal educational institutions espouse certain ‘cultures’ comprised of a set of beliefs that set them apart from other institutions. It is expected that all employed within that setting embrace the culture. All too often, however, the cultural ‘rules’ are not adequately communicated or course possessiveness takes over and very little sharing takes place.

Civility in nursing

The need for the establishment of camaraderie, congeniality and cohesiveness among nursing educators is tantamount to delivery of a successful nursing curricula and a successful clinical work environment^[1]. Incivil qualities, such as rude or ridiculing comments, unfounded gossip, and even professional /social exclusion often comprise the culture within which faculty members work^[1]. Fear of professional or social repercussions can even hinder reports of medication errors^[2].

In 2007, based on empirical research, Dr. Clark developed a conceptual model for fostering civility in nursing education. It was later revised in 2010 to merge two conceptual models- the model of the culture of incivility and the model of civility^[3]. She also developed three civility self-assessments, one of which is entitled: Clark Civility Index for Faculty^{© [3]}.

CNE as culture change initiator

Culture change, when it happens, is usually brought on and endorsed by the leadership of the Dean or Chief Nursing Executive (CNE). If all faculty members are occupied in directing, composing and teaching with in their own silos, the working culture will be cooperatively stifled. If, however, the faculty remain open to working more cooperatively as proposed by the CNE/Dean the door is open for culture change to take place ^[4].

Deans and CNEs who involve the whole faculty and staff in annual strategic planning have an opportunity to subtly introduce retreat agenda topics of camaraderie, congeniality and cohesiveness via small round-table discussions. From these respectful discussions a list can be extrapolated and put up on an easel for the other groups to see. The lists can then be distilled down to the five or six most promising items to hopefully work toward achieving. Now the hard part...in what *measurable* ways can each item be achieved?

Camaraderie

Academic

In order to achieve camaraderie among faculty members, what can be done? People can't make each other like each other. No, but the Dean/CNE can support sharing of educational materials from all members. A bank of course syllabi and online course delivery can be established that all faculty have a responsibility to contribute to and permission to take from. This technique can be measured by the ebb and flow of documents and printed materials from the bank. This does not mean that all faculty contribute to the development of each syllabus but rather that this sharing process provides opportunity for members who utilize the bank for specific courses to discuss those materials with the member who deposited the material because credit will always be given to the person who developed it originally.

To help identify how a positive work environment and civility enhance learning, a quasi-experimental observational study conducted by Block & Sredl, identified that nursing students who enjoyed a positive working and semi-social relationship with the professional and staff employees on the unit to which they are clinically assigned were more likely to become job applicants for that unit after graduation ^[5].

Clinical

On the clinical unit special selection preparation should be given to those who qualify as preceptors. Many may qualify for and wish to be selected for the enhanced job description of a preceptor, but the main qualifier should be a focus on wanting to help students and new professional staff develop and grow within the healthcare facility, not just the additional income differential the position will bring.

Congeniality

Congeniality is supported by the suggestions supporting camaraderie since all wish to establish solid relationships and to be on good speaking terms with educational- bank- deposit- members. Due to the potential future need to clarify certain points within the deposited material, requests for the originating member to be a guest speaker or function within a panel on a topic within their expertise, maintaining positive working relationships among faculty is a 'must'. These collegial relationships may also take exciting twists and turns-some of which are measurable. Here's how:

As relationships develop, admiration for others' knowledge and skills may develop also. Measurement can be effected by learning first-hand about some of our colleagues professional accomplishments as this may inspire a member to nominate him/her for an institutional or professional organization award. This will be easy to do since the nominator has more information about the nominee's professional accomplishments that could be incorporated in the nomination letter.

Another form this extra information may take is the composition of an article about a colleague highlighting his/her professional accomplishments through the years. I have done this three times and have enjoyed seeing the positive effect the resultant publication has had upon the careers of my colleagues^[6-8].

Cohesiveness

Strategic Planning motivators aimed toward developing cohesiveness among educators can be accomplished in a *measurable* way by team teaching. Team teaching involves identifying core course content that *could* be taught by others with expertise similar to yours. Setting aside one or two hours (or, one or two classes) to bring in a faculty member with a different perspective and different expertise can produce surprising results. A reciprocal relationship will result- you teach a little in your colleague's course and your colleague teaches a little in your course-everyone benefits.

Camaraderie, congeniality and cohesiveness will not happen overnight even with employing all of the above suggested techniques. But...the culture will change over time under the skilled tutelage of a sensitive, transformational CNE.

How to do it — the mentoring mindset

Academic

But... all of the above will never be accomplished without a strong *mentoring* mindset initiated and actively supported by the Dean or the CNE. Deans have the power to foster relationships in a number of ways. One way is to have a process in place that welcomes new faculty by introduction at the first faculty meeting of the academic year. This meeting can also be the place wherein the new faculty members are introduced, not only to the faculty body as a whole, but also to their "Big Sister"/ "Big Brother"- an established faculty member selected to show the new member 'the ropes'. There is so much to learn in adjusting to a new College of Nursing. The Big Sister/Big Brother can schedule times to meet one-on-one with the new faculty member to help them secure their ID, Learn how to navigate a course site, develop a syllabus, acquaint them with time demands, and show them the preferred places to lunch.

Next, a comprehensive new faculty orientation is paramount to success. All of the College, or university's resources should be included in both writing and in oral presentations. Some larger institutions even include a bus tour of campus so that the fledgling faculty member can tour buildings with resources that they might use at a later date, such as Faculty Resource Center that provides IT and graphic assistance one-on-one to instructors needing help with their projects.

The University of Missouri has a New Faculty Teaching Scholar Program open to faculty with from 1 to 4 years of experience at that university. It consists of a year- long program with once a month educational sessions on a variety of hoe-to-do-it topics. One month may feature a guest speaker on cultural considerations of students from international backgrounds; another may present a panel of published faculty members sharing tips on how to publish their material. I should also mention that these monthly meetings are also accompanied by wonderful lunches, always a welcome drawing tool to ensure high attendance. The four campuses that comprise the University of Missouri are represented by faculty who are invited to attend retreats held twice a year at a geographic location central to all four campuses. These retreats hold more intensive learning opportunities and involve overnight stays at the hotel which sponsors the educational offerings.

A relatively new initiative developed by the committee at the College of Nursing at the University of Missouri in St. Louis is aptly named PATHWAYS. This mentoring mindset is being proposed for inclusion as part of the new faculty orientation. This acronym stands for:

- P- Peer
- Assisted
- T-Training

- H-Helps
- W-Welcome
- And
- Y-Yields
- S-Success

With all faculty on board, this acronym serves as a template to guide new faculty through the orientation process and beyond.

Clinical

Orientation is just as important for the fledgling hiree on the clinical unit. But...due to rotating shifts the new hire may have multiple preceptors instead of just one as might be the case in academia. Some of the people entrusted with orienting the new hire may have no formal education in teaching. That could be a problem. For example an efficient unit secretary may be called upon to introduce newly hired nurses to the software programs that the hospital subscribes to. This could include patient care charting, medication rosters, email and other communication formats, etc. Problems with learning can occur if the unit secretary types at break-neck speed but does not allow the new hire time for absorbing what was 'taught'.

Nationally, a new initiative called the STEPPS 2.0 PROGRAM[®] has captured the attention of healthcare institutional providers across the country. Team STEPPS is team structure organized around four key skills: communication, leadership, situation monitoring and mutual support. Stay tuned for more about this at your own institution.

Community mindedness

A very welcome collateral consequence of changing corporate culture toward one of more camaraderie, congeniality and cohesiveness is that this change for the better will become noticed by leaders in the community. Community Outreach opportunities will become available to faculty who then become positioned to showcase the educational institution's many valuable assets. Potential students who learn more about the facility through Community Outreach Services may be more inclined to choose that school for their educational needs over another, lesser known, school.

Career development milestones

The opportunity for advancement is an innate desire within any corporate culture. Hospitals and other healthcare clinical institutions provide this is they offer employees the benefit of a CLINICAL LADDER. The clinical ladder system is in itself a measurement of rewards to employees who have chosen throughout the year to enhance their professionalism by taking upper level graduate courses in their profession, publish journal articles on professional topics, accept leadership positions in professional organizations, and/or join committees instrumental toward accomplishing the institution's mission. These professional endeavors initiated by the employee are also the employee's responsibility to bring to the attention of a supervisor who is in position to evaluate the employee on an annual basis. The resultant evaluation may lead to a tangible benefit in obtaining a higher pay raise.

Other measurement efforts can include incentives for announcement of length of service at an annual meeting of all employees. Some employers also provide a catalogue of modest gifts that the employee can choose from to solidify the celebration of their service to the facility or institution.

Caring at the global level

One of the most heart-warming examples of the implementation of all the above discussed techniques and principles was a global strategy initiated by a local Diploma School of Nursing. Lutheran School of Nursing in St. Louis working with adjoined Lutheran Medical Center set about to ease the nursing shortage experienced by inner city hospitals. In a novel move, the school and medical center secured the services of an international nurse recruiting firm. This firm selected 65 BSN applicants predominately from the Philippines and South Korea for admission to gain work permits within the US after passing NCLEX for licensure here. The school of nursing prepared a well-rounded though intensive refresher course and the foreign nurses were paid the benchmark nursing salary even though they were taking the refresher course. The stage was set for easing the hospital's nursing shortage.

Sixty-five foreign national nurses arrived at the St. Louis International airport in snowy mid- January. The nurses were brought to the school and provided with individual rooms in the nursing dormitory. The Director of the school and vice-president of the medical center thought all seemed to be going as planned—but was it?

The new nurses in their tropical cotton MuMus froze in the frigid midwestern winter. They had jet lag. They couldn't eat, not being accustomed to hamburgers & fries and longed for their traditional comfort foods. They had left family-parents, spouses and children- in the promise of a good job in the US and had signed a 3-year contract to stay and work here. A move they regretted intensely and were miserable. They were so homesick they could not think, and could not learn the material designed to acclimate them to Western culture nursing.

What to do?

The teaching faculty had not anticipated any of these things yet there was no denying teaching/learning and could not go on as planned (certainly not within the planned timeframe for completion) given the present circumstances.

The faculty came together and decided to befriend the foreign nurses! They brought in gently used sweaters, coats, wool scarves, and other items of clothing and gave it to the foreign nurses. They took some of the nurses to local markets that agreed to special order foods and meats that the foreign nurses were used to eating. Other faculty members drove some of the foreign nurses to local churches and temples that were close within the surrounding area.

The Medical Center helped also by providing kitchen facilities on the nurses' dormitory floors; allowing free international telephone calls to home; and giving each foreign nurse use of a laptop computer with SKYPE® capabilities.

It took a while to work through the homesickness, but once they did the foreign nurses demonstrated that they were ready—even eager to learn^[9-11].

Conclusion

The above options to foster camaraderie, congeniality and cohesiveness, while relying heavily on inclusiveness at the start of the new teaching faculty experience will also affect the faculty and the clinical unit as a whole. The faculty will experience the culture change for the better first-hand; the effort toward faculty inclusiveness will be enhanced, and the genuine kindness engendered in forming new relationships will enjoy long-lasting rewards. Faculty and students will all reap the rewards from these efforts.

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