

# ANA/AONE Principles

## for Collaborative Relationships between Clinical Nurses and Nurse Managers





## Introduction

What exemplifies ideal collaboration? Images of sports teams, musical orchestras, and even airports may come to mind. The essence of these collaborative arrangements is people working together in a prescribed role with a shared end goal in mind, whether it's winning a game, creating beautiful music, and getting passengers from one place to another.

Clinical nurses and nurse managers, like athletes or artists, work together with the shared goal of high quality patient care. The shared goal is clear to nurses, and most of them might say they would not be in nursing practice without that endpoint in mind.

However, even with that shared goal, nurses could identify practice environments where the relationship between clinical nurses and nurse managers is exceptional, adequate, or suboptimal. The elements of a highly effective practice environment go beyond the surface of shared goals, to something deeper and more humanistic around what people need to work together.

To illustrate a highly effective practice environment, the American Nurses Association and the American Organization of Nurse Executives convened a group of clinical nurses and nurse managers to develop Principles of Collaboration. These principles guide clinical nurses and nurse managers on their synergistic role in creating, enhancing, and sustaining collaborative relationships. When working relationships are strong and effective, nurses at all levels function as a team, and they deliver on their shared goal of high value care.



## The Principles of Collaborative Relationships

### I. Effective Communication

One of the most basic elements of human interaction is the ability to communicate. Communication, particularly in high-intensity environments such as health care, is not merely the transaction of words. Effective communication requires an understanding of the underlying context of the situation, an appreciation for the tone and emotions of a conversation, and the accurate information. When implemented consistently, the principles relating to effective communication can bridge the figurative divide of "you vs. me", and ensure a reliable and dynamic means of relaying information and feedback.

#### Principles

1. *Engage in active listening to fully understand and contemplate what is being relayed.*
2. *Know the intent of a message, and what is the purpose and expectations of that message.*
3. *Foster an open, safe environment.*
4. *Whether giving or receiving information, be sure it is accurate.*
5. *Have people speak to the person they need to speak to, so the right person gets the right information.*

### II. Authentic Relationships

Professional nurses cultivate caring relationships with their patients, supporting them in meeting their physical, mental, and spiritual needs related to health. To bolster the profession and the quality of care patients receive, nurses must reciprocate that kind of relationship with each other. And, as professionals, nurses engage in the art and science of caring, and by their very nature, nurses thrive when they experience caring from their colleagues. The principles relating to authentic relationships give nurses a guide for developing these types of interactions with one another, and cultivate the nurse's sense of being cared for that promotes their ability to do the same for patients.

#### Principles

1. *Be true to yourself – be sure actions match words, and those around you are confident that what they see is what they get.*
2. *Empower others to have ideas, to share those ideas, and to participate in projects that leverage or enact those ideas.*
3. *Recognize and leverage each others' strengths.*
4. *Be honest 100% of the time – with yourself, and with others.*
5. *Respect others' personalities, needs, and wants.*
6. *Ask for what you want, but stay open to negotiating the difference.*
7. *Assume good intent from others' words and actions, and assume they are doing their best.*



### III. Learning Environment and Culture

A well-developed practice environment supports great nursing care, and gives nurses the satisfaction of knowing that their work is valuable and meaningful. The attributes of a learning environment are both objective and subjective; whereas some aspects are clear and visible, some are just a sensation or feeling. However, contrary to what it seems, creation of a learning environment is not a top-down phenomenon. Nurses at all levels contribute to a learning environment by demonstrating trust, support, and representation. The principles pertaining to learning environment allow nurses and others to thrive and succeed at their work because they are not afraid of failure.

#### Principles

1. *Inspire innovative and creative thinking.*
2. *Commit to a cycle of evaluating, improving, and celebrating, and value what is going well.*
3. *Create a culture of safety, both physically and psychologically.*
4. *Share knowledge, and learn from mistakes.*
5. *Question the status quo – ask “what if”, not “no way.”*



## Implementation Guidelines

### Acting on the Principles is Easy

Simple and sustained changes to the way nurses communicate, relate, and cultivate their environment can make tremendous impacts towards ideal collaboration.

There are key factors that facilitate the implementation of the Principles. First, nurses are united in their shared goal of excellent patient care, and in their sense of “beneficence”, which means doing things the greater good. The Principles help encourage or even celebrate nurses’ ability to translate patient beneficence into coworker beneficence. A second factor is timing. Healthcare is rapidly transforming, and the profession of nursing increasingly being elevated, thus, the time is optimal for encouraging or enhancing ideal collaboration through these principles. Finally, there is positive momentum from champions of collaboration, and an emphasis on looking past the problems that are known, and concentrating more energy on creating the best work environment possible.

### Avoid barriers

The barriers that could hamper implementation of the Principles are more intimidating than they are real. Insufficient time, cost concerns, resistance to change, horizontal or vertical distrust, or structured improvement program “fatigue”, are all surmountable. Changes in attitude, behavior, and work environment can be simple, sustained, and virtually costless.

### Start doing what works, and stop doing what doesn’t

Implementing the Principles requires nurses at all levels to start taking positive steps towards improving relationships, and cease the things that impede them. Blame, doubt, cynicism, reluctance hamper relationships, and cause the divides between clinical nurse and nurse managers to fester. To cleanse and renew these relationships, and ultimately build to something bigger and greater, nurses at all levels must take proactive, positive approaches toward implementing the Principles. Acting on the Principles is most likely is not an overnight process, therefore, it requires prioritization and sustainment to ensure buy-in and dedication from all nurses at all levels.

## Conclusion

The essence of teamwork is that it is not a sum of the parts, but how those parts perceive their contributions toward the goal, work together, and exhibit fidelity to one another. When clinical nurses and nurse managers dedicate themselves to collaborative relationships, the harmony that ensues is palpable. Nurses’ can then excel at their work, and they can deliver on the ultimate and most important goal of high value patient care.

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