

How to Lead with Confidence through Healthcare Challenges without Wavering from our Moral Compass

Miriam Dobson, DNP, RN, CPH, CHW-C, NHDP-BC; Rachael Farrell EdD, MSN, RN, CNE; Dawanya Lewis, MSN, RN, CCM, NEA-BC; Cheryll Mack MPA, BSN, RN

Introduction

Healthcare challenges are more prominent now in the COVID pandemic that are requiring nurse leaders to be creative in the way they lead. However, there is controversy about whether nurse leaders are equipped to lead and advocate for patients and front line staff in a way that does not cause moral distress.

Moral distress: Defined as experiencing difficulty or imbalance due to an inability to follow the morally correct action (Dalmolin et al., 2012; Smith, 2017).

Leading with confidence during these challenging times can lead to inconsistencies as we struggle not to waver from our moral compass.

A moral compass: The inner voice telling us **right from wrong** (Moore & Gino, 2013; Smith, 2017). Equally important, the evolving complexity of COVID-19 strongly encourages leaders to develop models to strengthen moral compass for direct care providers, nurse leaders, and those in academia.

Literature Review

Nurses need to **understand barriers to moral issues** and **have available tools** to reduce those barriers (Dalmolin et al., 2012).

Nurse leaders must focus on understanding their moral compass. Emotional symptoms of moral distress include: frustration, anxiety, anger, and guilt. Physical symptoms of moral distress include sweating, headaches, diarrhea, crying, low self-esteem, and loss of integrity (Dalmolin et al., 2012).

According to Dalmolin et al., **job dissatisfaction** is an issue as people are challenged with emotional exhaustion, depersonalization, and reduced personal fulfillment at work as a result of moral distress (2012, pg 201).

Job dissatisfaction can lead to horizontal violence, bullying, and high turnover rates (Edmondson, 2015.) Therefore, nurse leaders must change their practices to become role models by motivating and **encouraging staff** to take necessary measures to **both identify moral distress and report conditions that can challenge the success of the work environment** (Dalmolin et al., 2012).

Recommendations from the Evidence

- **Develop** a strong moral compass and **demonstrate** this through practice
- Create a **moral compass tool** for moral guidance
- Use **self-reflection** to look closely at the dilemma and attempt to determine what about the situation is causing the moral distress (Hartmann et al., 2018.)
- When nurse leaders were **instructed on and provided** a moral courage model to follow the leaders felt better able to act in a **morally courageous manner** (Edmondson, 2015).
- **SBAR communication tool** has won acclaim in healthcare circles from organizations such as The Joint Commission (Stewart & Hand, 2017).

Personal Reflections



Miriam Dobson Cheryll Mack Dawanya Lewis Rachael Farrell

Conclusion: Moral Compass

- Will be **refined over time**
- An **essential component of leadership**
- A method to **compare actual life with ideal life** is a nursing leadership imperative
- Ability to **self-reflect** and **self-examine** is also a **strength for leaders** to have and hone
- This skill can begin as early as **the beginning of nursing school** and can help guide the moral course of a nurse up to and including **the lifespan of an entire career.**
- For every level and step of the nursing profession, having the **objective moral compass tool** can help **develop strong nurse leaders** who can be seen as the **present and future of the nursing profession.**

SBAR How to Lead with Confidence through Healthcare Challenges without Wavering from our Moral Compass	
<p>S</p> <p>SITUATION</p> <p>Purpose: This is an evaluation tool designed to assist you with identifying your moral compass and aligning your practice to your moral compass during healthcare challenges. This can be applied to any nursing setting and any stage of a nurse's career (Student, Novice, Profound Clinician, Executive or Academician).</p> <p>Moral Compass: is defined as delineating one's vision, mission, values and ethics.</p> <p>Challenges</p> <p>Moral Distress: The knowledge of what is right to do but the absence of being able to do what one knows is right.</p> <p>Moral Dilemma: A feeling of frustration and angst associated with one's own practice or perception of practice being wrong.</p> <p>Assess</p> <p>Moral Courage: Action in times of crisis within the boundaries of ethical and moral clarity. It is not brain surgery. It is carefully contemplated and thought through.</p>	<p>BEGINNING THE PROCESS</p> <p>Before you:</p> <ul style="list-style-type: none"> • Wishes (True North) - What is the ultimate goal you wish to achieve with your current position, project or healthcare challenge? • Mission: How do you plan to get you to your true north? • Values: What staple concepts and actions are important to you? Examples: Accurate nursing service delivery, evidence based care. • Ethics: What specific practice actions will you use to transfer your values into action? (Example: The value of transparency is demonstrated by the ethics of being honest with your patients).
<p>BACKGROUND - Create your moral compass using brief concept statements.</p> <p>Your Vision:</p> <p>Your Mission:</p> <p>Your Values:</p> <p>Your Ethics:</p>	
<p>A</p> <p>ASSESSMENT: Using self-reflection ask yourself:</p> <p>Does your practice and environment align with your moral compass?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes, it does. Your comments: <input type="checkbox"/> No, it does not. Reflect on which area is causing you to diverge from your compass? Identify if the situation matches the concepts listed below: <input type="checkbox"/> Moral Distress <input type="checkbox"/> Moral Dilemma <input type="checkbox"/> Moral Courage <input type="checkbox"/> Organizational Environment 	
<p>R</p> <p>RECOMMENDATION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> If yes, continue to evaluate moral compass adherence by using self-reflection <input type="checkbox"/> If no: <ul style="list-style-type: none"> Ask, acknowledge the issue and explore why and where the dilemma is Assess: The veracity of the issue Assess: identify what steps can be taken to rectify the situation Act on those steps and re-evaluate 	

References

- Edmondson C (2015) Strengthening moral courage among nurse leaders. *Online Journal of Issues in Nursing*, 20(2),9. doi: 10.3912/OJIN.Vol20No02PPT01
- Hartman, L.A., Metselaar, S., Molewijk, A.C., Edelbroek, H.M., & Widdershoven, G.A.M. (2018). Developing an ethics support tool for dealing with dilemmas around client autonomy based on moral case deliberations. *BMC Medical Ethics*, 19(2018), doi:10.1186/s12910-018-0335-9
- Johnstone, M.J. (2017). Setting nursing's moral compass. *Australian Nursing & Midwifery Journal* (25)1, 16.
- Lima Dalmolin, G., Lunardi, V., Barlem, E. & Silveira, R. (2012). Implications of moral distress on nurses and its similarities with burnout. *Text Context Nursing*, 21(1), 200-208.
- Moore, C., and Gino, F. (2013). Ethically adrift: How others pull our moral compass from true north, and how we can fix it. *Research in Organizational Behavior*, 33(2013), 53-77. doi:10.1016/j.riob.2013.08.001
- Smith, M. (2017). The ethics advocacy connection. *Nursing Management* 48(8), 18-23. Doi: 10.1097/01.NUMA.0000521571.43055.38
- Stewart, K., & Hand, K. (2017). CNE Series. SBAR, communication, and patient safety: An integrated literature Review. 26(5), 297-305.