

Supporting well-being during a pandemic



■ COVID-19 vaccine ■ Informed consent ■ RN Initiative

A critical Pathway to Excellence® standard

Initiatives promote nurses' well-being during the pandemic.

By Susan Trossman, RN

Ensuring nurses' well-being isn't just a concept for healthcare systems and organizations that have—or want to gain—the Pathway to Excellence® designation. Rather, it's a standard that must be met and one that's taking on even more importance as COVID-19 continues to plague communities throughout the nation.

Currently, 196 acute, long-term care, and other healthcare settings have demonstrated their commitment to positive practice environments for nurses by meeting the American Nurses Credentialing Center Pathway to Excellence Program's six standards. The Pathway well-being standard, which was added to the 2016 application manual and strengthened in 2020, requires organizations to proactively safeguard and provide resources to support the mental and physical health of nurses and other staff, as well as recognize nurses' contributions. It also specifies that organizations must address issues such as compassion fatigue, the well-being of those who've faced adverse events, and resilience.

The following interviews took place while COVID-19 was blanketing the country, including communities experiencing a second surge.

Offering support through tough times

Nursing leaders and staff at WellSpan Good Samaritan Hospital in Lebanon, Pennsylvania, found themselves in a challenging position in 2020.

"We've been on this incredible Pathway journey right in the middle of the pandemic," said Patricia Donley, MSN, RN, NEA-BC, vice president of patient care services and chief nursing officer. Going through the application process at that time, however, allowed nurse leaders to identify gaps that existed in nurses' work environments and then collaborate with staff to determine how to fill them. It also showcased strategies and activities to promote staff well-being and other positive practices that already existed in certain practice areas and expand them more widely throughout the system.



Patricia Donley

"We also wanted to show the awesome work nurses do every day and have them be recognized for their efforts," Donley said. The pandemic did indeed strengthen community support for nurses and other frontline workers in Pennsylvania and nationwide.

Donley noted that within a couple of weeks of New



York City being flooded with COVID-19 cases, Central Pennsylvania began its own surge. "Our hospital was one of the first within our health system to see a surge," Donley said. "When our ICU began nearing capacity, we created a COVID-19 unit. It took a huge amount of energy [to get everything up and running]."

And while the entire community initially rallied around healthcare workers and first responders—putting up posters and billboards thanking them—as cases lessened regionally in late spring into summer so did public displays of support.

"But nurses still had to put on PPE [personal protective equipment], they still were facing stressors, and they were just exhausted," Donley said. "That's when we [nurse leadership] felt we needed to step in with more support and resources to address nurses' well-being beyond what was put in place during the first wave."

Nurse leaders asked nursing staff to express their concerns on Post-it notes that subsequently filled the walls of a designated room. Among the most significant were workload, the drop-off of recognition for their efforts, and how they were feeling—the mental and physical toll the pandemic had taken on them.

"It really illustrated what they went through," Donley said. And it formed a basis for actions that have been helping all staff, and particularly those providing care to COVID-19 patients, as the hospital began experiencing the second surge of cases.

One of the first actions involved creating a high-impact response team composed of counselors who nurses and other staff could talk with about their feelings. "Our nurses have so many stressors beyond those that are work-related," Donley said. "They have kids, wives, husbands—and are concerned about their families' well-being."

Bonnie Pietruch, MSN, RN, NEA-BC, director of clinical services and the Pathway coordinator, added, "It's been really challenging for nurses who've been seeing the same acuity of patients on the COVID-19 unit since spring, and now we are in the second wave." Unlike the first time, this wave is occurring as normal hospital operations continue in surgical and interventional care areas. During the spring, staff from those care areas were redeployed to assist with patient volume and acuity.



Bonnie Pietruch

However, they're now using non-nurse staff to serve as runners who can remain out in the hallways and re-stock supplies and engage in other supportive tasks. The facility also is using trained sitters who can provide needed relief to nurses, and it has boosted its use of video monitoring of patients, according to Pietruch.

After a survey by one nurse manager revealed that many nurses weren't getting 7 hours of uninterrupted sleep each night, the hospital instituted and promoted a napping protocol for night staff and identified a space where exhausted nurses could rest before driving home.

To address the drop-off in nurse recognition, Pietruch and Donley are finalizing plans for an initiative to ensure nurses' contributions are acknowledged and honored.

Although some health and well-being efforts were already in place before the pandemic, including many health promotion activities initiated by staff on various units and departments, WellSpan Good Samaritan, which earned the Pathway designation, has promoted more healthy food choices and offered individual grab-and-go bags. The organization also has increased nurse leadership rounds to gain feedback from staff and are trying to increase "stoplight reports" to keep staff informed about the status of their suggestions and concerns.

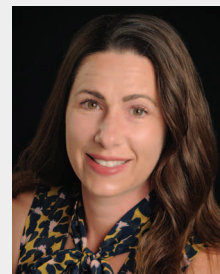
All that said, the nurses acknowledge they still face challenges, including scheduling and supporting nurse managers who also are feeling the stress of not being able to fully accommodate their staff.

"Our priority needs to be the team members who are all doing such incredible work and who need to be supported," Donley said. Added Pietruch, "One of the most important things [nurse leaders] can do is to listen, acknowledge nurses' needs, and take action whenever we can."

Addressing compassion fatigue

Meanwhile, in the Tampa Bay, Florida area, the number of discharges and admissions of COVID-19 pa-

tients has remained generally steady, according to Sarah Perron, PhD, RN, NPD-BC, CMSRN, CNML, who serves as manager of clinical professional practice for six hospitals and works with the Pathway liaison at eight others within the BayCare Health System. All of BayCare's hospitals have earned the Pathway designation and have bedside nurse representatives from each facility on a wellness champion committee that addresses health and well-being initiatives.



Sarah Perron

Shortly after the first surge of COVID-19 patients, Perron said nurse leaders began thinking about ways to address compassion fatigue and burnout. As a first step, nurses were surveyed through Voices for Extraordinary Care, an online community group of all BayCare nurses.



"Their responses validated our concerns, so we began putting together an action plan," Perron said. "We already had a robust employee assistance program (EAP) that we were promoting through our intranet at the beginning of the pandemic, along with other wellness initiatives, some of them new. We wanted our nurses to know it's okay to seek help."

Since then, the EAP, which also is available to employees' family members, has expanded its hours, and facilities have engaged their missions (pastoral care) teams to quickly respond to staff experiencing compassion fatigue and related issues. BayCare also has critical incident teams to assist team members who've gone through adverse events, as well as behavioral health department staff who provide expertise.

Limitations on visitors for COVID-19 patients added to nurses' roles and stress during this pandemic. "Nurses normally rely on family support for many of our patients, especially in critical care areas," Perron said. "Many nurses have voiced that they've never

taken care of such complex patients and having to update family members using cell phones and FaceTime adds another layer of complexity, especially when patients are dying. It's very emotional."

Rocky Hauch, DNP, RN, PCCN, said he's seen more nurses speaking with chaplains and also using wellness (quiet) rooms to momentarily get away from the stress of taking care of critically ill patients. Additionally, nursing leaders have made a point to be on the floor more to gain nurses' direct input on their ongoing needs, said Hauch, a former long-time floor nurse and charge nurse on cardiac and med-surg telemetry units who now works per diem shifts at BayCare St. Joseph's Hospital in Tampa.



Rocky Hauch

Perron noted outside resources—such as the American Nurses Association (ANA) webinar on compassion fatigue and the ANA Enterprise's Healthy Nurse, Healthy Nation™ initiative—also can be used to support nurses' well-being at this time. "As leaders, we're trying to figure out how we can bring ANA resources to bedside nurses—some who might not be aware that they are experiencing compassion fatigue. We've integrated them into team meetings when possible," she said. "We really want our nurses to know we value their health and well-being."

BayCare facilities also have shifted employees in certain departments to serve as runners for nurses working with COVID-19 patients, and have hired more travelers to address staffing needs, according to Perron.

In addition, BayCare has continued to recognize its nurses and staff through its own Clinical Excellence Awards and the national Daisy Awards, as well as showing support for staff through public displays of support.

A recent recipient of a Clinical Excellence Award, Hauch emphasized the critical link between nurses' health and patient care. "Nurses' health and well-being are paramount to providing quality care," said Hauch, a member of the Florida Nurses Association and the Commission on Pathway to Excellence. "During this pandemic, it is even more important. This is when our patients are the sickest and resources are being stretched to the maximum and sometimes beyond. Speaking more broadly, without adequate health, rest, and personal well-being, nurses will not be able to provide the high-quality, compassionate care that our patients deserve."

— At the time this article was written, Susan Trossman was a writer-editor at ANA.

Supporting nurses' mental health and well-being resources

To address nurses' health and well-being now and in the long-term, the ANA Enterprise offers a range of free, on-demand educational resources. A few are listed below.

ANA COVID-19 Video Education Series (bit.ly/34PmYCg)

"Effective Tools for Practicing Self-Compassion and Self Care in the Time of COVID-19", part of the ANA COVID-19 webinar series, provides important tools that all nurses can use to help maintain mental well-being while facing the ongoing challenges presented by caring for COVID-19 patients.

Mental health support webinars (tinyurl.com/ya4buejw)

"Mental Health Support: How to Survive the Pandemic with an Unbroken Spirit" offers ways to successfully manage your mental health needs while caring for COVID-19 patients. Watch the full 60-minute webinar or select from shorter, 15-minute quick videos.

ANA's Self-Care Package for Nurses (tinyurl.com/y7nvyxke)

"A Nurse's Guide to Preventing Compassion Fatigue, Moral Distress, and Burnout" (tinyurl.com/yaw7y5yw) is one of several handpicked offerings in ANA's Self-Care Package for Nurses to help RNs during and after this crisis.

To register for these free, on-demand courses, visit nursingworld.org/coronavirus.

Well-Being Initiative

In partnership with other leading nurse organizations, the American Nurses Foundation launched the Well-Being Initiative, which offers tools and apps to support the mental health and resilience of all nurses, go to nursingworld.org/thewellbeing-initiative.

Thank you

We at the American Nurses Association (ANA) wish to express our sincere appreciation to Susan Trossman, RN, for her contributions as a writer and editor for more than 23 years. With originality, dedication, and passion, Susan chronicled the challenges and triumphs of RNs, the nursing profession, and ANA for our readers. She has been an esteemed colleague who will be missed. We wish her a happy, healthy retirement.

Trust in nation's nurses rises during pandemic

Recognized as most honest and ethical professionals for 19th consecutive year

The American public once again recognized nurses as the most honest and ethical professionals in Gallup's annual poll for the 19th consecutive year. This consistent status directly reflects the trust the public has in nurses and underscores the urgent need to continue to support and protect the nursing workforce. In addition to practicing the precautions that prevent the spread of COVID-19, the American Nurses Association (ANA) calls on nurses and the public to seek out reliable sources of information to increase our confidence in COVID-19 vaccines as they're made available.

This notable achievement in Gallup's annual poll takes on even more significance this year as nurses respond courageously to the COVID-19 pandemic.

"I am extremely proud of my fellow nurses," said ANA President Ernest Grant, PhD, RN, FAAN. "Nurses have been tested in every way imaginable during 2020." Grant noted the challenges nurses face caring for and losing numerous patients and colleagues to a highly communicable, deadly virus while striving to protect and preserve their communities with limited resources and support.

"Nevertheless, through it all, nurses have consistently proven they are resilient, selfless, and compassionate, risking their health and safety for the common good. Nurses are undoubtedly deserving of the public's unwavering trust," Grant said.



The American public rated nurses the highest among a host of professionals, including physicians, pharmacists, and grade-school teachers. According to the poll, 89% of Americans rated nurses' honesty and ethical standards as "very high" or "high," which is four percentage points greater than their prior high in 2019.

"As we congratulate nurses, we must remember their tremendous sacrifices as they continue to serve on the frontlines of this pandemic, which has taken a heavy toll," Grant said. "ANA's top priority will remain ensuring that the nursing workforce is prepared, protected, and supported. Doing so is vital to the nation's ability to effectively respond to this virus, so we can all successfully recover better, faster, and stronger."

ANA Enterprise leaders among 100 most influential in healthcare

American Nurses Association President Ernest Grant, PhD, RN, FAAN, and ANA Enterprise Chief Executive Officer Loressa Cole, DNP, MBA, RN, FACHE, NEA-BC, FAAN, have been named to *Modern Healthcare's* "100 Most Influential People in Healthcare - 2020." This prestigious recognition program honors individuals who are deemed by their peers and the senior editors of *Modern Healthcare* to be the most influential individuals in healthcare, in terms of leadership and impact.

This year, *Modern Healthcare* awarded the top spot on its annual list to the "Frontline Worker." This recognition

of the nation's healthcare workers, who risk their health and safety to care for their patients and loved ones, honors them as the "true heroes of this pandemic."

The "100 Most Influential People in Healthcare" honorees

come from all sectors of healthcare, including hospitals, health systems, insurance, government, vendors and suppliers, policy, trade, and professional organizations. Grant, Cole, and fellow honorees are highlighted in the December 7 print edition of *Modern Healthcare* and online at ModernHealthcare.com.



Nurses critical to successful COVID-19 vaccination efforts

The approval, dissemination, and administration of two—and potentially more—COVID-19 vaccines mark a turning point in the nation's fight to protect people from this devastating virus. RNs play a crucial role in the success of mass vaccination campaigns.

The American Nurses Association (ANA) hailed the Food and Drug Administration's Emergency Use Authorization of the first COVID-19 vaccine in December 2020 and commended the innovative public-private partnership and scientific rigor that produced swift results. In addition, ANA emphasized that nurses, ranked for the 19th year in a row as the most trusted professionals in an annual Gallup poll, are key to building public confidence in vaccines.

To guide nurses' and other healthcare professionals' considerations for COVID-19 vaccines, ANA established key principles that provide recommendations for access, transparency, equity, efficacy, and safety of COVID-19 vaccines.

ANA shared this message broadly in a joint letter with the American Medical Association and the American Hospital Association to healthcare professionals. They wrote: "As frontline caregivers, our essential role in protecting the health and wellbeing of our communities goes beyond the care we provide. As a valued and trusted voice, our example is perhaps the strongest health resource we have."

In addition to thanking healthcare professionals for the skillful and brave care they've been providing, the organizations urged healthcare professionals to get the COVID-19 vaccine and to share their experiences with others.

Numbering more than 4.2 million strong, nurses are the largest group of healthcare professionals and practice in all settings, from acute care hospitals to long-term care settings, primary care practices, clinics, schools, and other community settings. Additionally, nurses have a long history of educating consumers on the importance of vaccines to prevent illness.



Keeping nurses and the public informed

To be effective patient educators and vaccine administrators, ANA called for nurses to have access to resources and early involvement in the mass vaccination process. ANA will continue to develop core education for the nation's nurses as a vital first step in building their understanding and confidence in newly approved vaccines. And the association has and continues to

strongly advocate that the public follow public health measures, including mask wearing, physical distancing, and hand hygiene.

Building vaccine confidence

ANA President Ernest J. Grant, PhD, RN, FAAN, who participated in a COVID-19 vaccine clinical trial, emphasized the many ways that nurses can build the public's confidence. "Nurses are everywhere that healthcare is provided and have a strong understanding of science and the role of vaccines in public health, as well as the skills to educate consumers and address their questions and concerns," Grant said.

"Given nurses' experience on the frontlines of the pandemic, they can communicate how vaccination can blunt the terrible suffering that can result from COVID-19 disease," Grant added. "Importantly, by getting vaccinated themselves, nurses can role model the behavior that will set us on a path to attain widespread vaccination and achieve herd immunity that is needed to return to normal activities."

Vaccine distribution

ANA also supports the Centers for Disease Control and Prevention's recommendations that guide the tiered prioritization of populations to receive vaccines. This includes prioritizing vaccination of nurses and other frontline healthcare workers. ANA has consistently advocated that the federal government provide state and local public health agencies and jurisdictions with sufficient resources and funding to support mass distribution and administration as COVID-19 vaccines are approved and available.

To access ANA's information on COVID-19 vaccines, visit the ANA Enterprise COVID-19 Resource Center's vaccine page at nursingworld.org/covid19vaccines.

Informed consent for nursing care

To: Ethics Advisory Board

From: Nurse from Milan, Italy

Subject: Professional responsibilities with informed consent

I recently was asked to obtain a signed informed nursing consent before delivering prescribed care to a patient in an outpatient chemotherapy center. Is this form required in the United States? How do the principles of informed consent apply to routine nursing practice?



From: ANA Center for Ethics and Human Rights

To answer this question, we completed an informal query of several nursing colleagues across the country. Although the concept of an informed nursing consent piqued their interest, none have ever used or heard of a stand-alone informed consent for routine nursing care. A cursory view of the literature doesn't find this to be routine practice.

Nurses may be involved in formal informed consent processes that address operative and other invasive procedures, blood product administration, research or clinical trials, and protocol implementation designed to ensure safe administration of high-risk medications such as chemotherapy. The nurse's role in structured informed consent processes has technical and professional components. Technically, the nurse serves as a witness to the patient (or proxy) signing the form, but nurses don't abdicate their professional responsibility or commitment to the patient in those moments. Nurses have agency and ought to question and advocate as needed. Our professional responsibilities to ensure quality informed consent extend well beyond witnessing. A permission-to-treat form in admission packets or electronic health records may address general consent and financial responsibilities.

There is a mutual (frequently unspoken) understanding that the nurse intends to do no harm while delivering quality, safe, person-centered, evidence-based care. This involves partnering with patients to design the plan of care, providing teaching, and engaging in simple consent processes. For example, nurses use anywhere from five to 12 rights of medication administration and seamlessly integrate education and consent into these moments. Nurses preemptively assuage fears and articulate the rationale for and range of possible discomforts associated with painful nursing procedures, such as nasogastric tube insertion, and support and reinforce teaching throughout the procedure. We review the potential risks and benefits of specific wound care products, highlighting the directions, discussing practical alternatives, and reviewing the risks of refusing treatment. Nurses talk to their patients who are intubated and sedated, walking them through the steps associated with mouth care or turning to prepare them for the sensations they may experience. We also provide information, gauge capacity and understanding, and secure consent with individuals who are at their most vulnerable. It is simply our professional duty.

When delivering routine nursing care, nurses provide information, support, and guidance while considering any emergency or individual circumstances. Consent may be implied or explicitly communicated verbally, nonverbally, or in electronic or written form. Nurses ought to include documentation of these interactions in their charting. A blanket consent statement simply couldn't cover every instance of independent nursing care or implementation of medical orders and prescriptions based on standards of care and sound clinical judgment.

The *Code of Ethics for Nurses with Interpretive Statements* (Code) (nursingworld.org/coe-view-only/) addresses consent in its discussion of privacy and confidentiality protection (Provision 3.1), research participants (Provision 3.2), and autonomy. Provision 1.4, the right to self-determination, seamlessly integrates human dignity, moral and legal rights, patient values and processes, autonomy, support via the nurse-patient (proxy) relationship, and informed decision-making. Thus, the Code provides support for nurses in both the formal informed consent and simple consent processes.

— Response by Jennifer L. Bartlett, PhD, RN-BC, CNE, CHSE,
member of the ANA Ethics and Human Rights
Advisory Board.

Do you have a question for the Ethics Inbox?
Submit at ethics@ana.org.

RN Initiative: A catalyst for nursing's future

Nurses worked heroically in 2020 as the tragic spread of the novel coronavirus took on pandemic proportions and forced innovation in the U.S. healthcare system. Before the pandemic and various stay-at-home orders began, the American Nurses Foundation launched its RN Initiative to Reimagine Nursing, which will begin in 2021, to elicit and assess practical, actionable ideas to transform nursing practice to improve healthcare access and outcomes for all Americans.

"We are working to ensure that this horrible, historic event will serve as a catalyst for the nursing profession to become more flexible, responsive, and nimble," said Tim Porter-O'Grady, DM, EdD, ScD(h), APRN, FAAN, FACCWS, Foundation trustee and past-president, and senior partner in an international healthcare consulting firm. "What makes the RN Initiative significant is that this will fund pilot projects beginning in 2021 for 3 years, to evaluate ways to accelerate change in nursing education, regulation, and practice that would be workable on a larger scale."

A grant from Kaiser Permanente supported the planning phase of the RN initiative and a crucial January 2020 Foundation gathering with 18 leaders in nursing, healthcare delivery, regulation, academia, and technology. Participants exchanged ideas, challenged assumptions, and integrated diverse priorities for shaping nursing's future. Their goals include developing evidence-based, predictive, preventive, and personal solutions to equip nurses with the knowledge, tools, environments, and systems needed to deliver exemplary care.

"In retrospect, that gathering was perfectly timed," noted Kate Judge, American Nurses Foundation Executive Director. "It was like the universe was tapping our shoulders, saying 'get ready.'"

Solutions to current barriers

Linda J. Knodel, MSN, MHA, NE-BC, CPHQ, FAAN, FACHE, senior vice president and chief nurse executive for Kaiser Permanente, editorial board member for *American Nurse Journal*, and a participant in the January 2020 meeting, said, "As our partners in every aspect of nursing develop and test solutions to current barriers to nursing practice, this will open new possibilities for the future. Nurses are the natural catalytic force to transform delivery, especially now as they are on the front lines of the pandemic. I am proud of our Kaiser Permanente nurses, who have continued to provide excellent patient- and family-centered care during the most challenging of circumstances."

"This crucial work is long overdue," added Knodel, an ANA/California member, who oversees nearly a third of Kaiser Permanente's workforce, 63,000 nurse employees who work in virtually every sector of healthcare. "We cannot stay at the status quo with the U.S. healthcare system as an illness-care system. Kaiser Permanente's goal is to keep our members [patients] healthy and out of the hospital. We are bold and innovative and see the need to reimagine how nurses could serve in different roles to provide higher quality care, better safety, and better outcomes at a lower cost for [patients]."

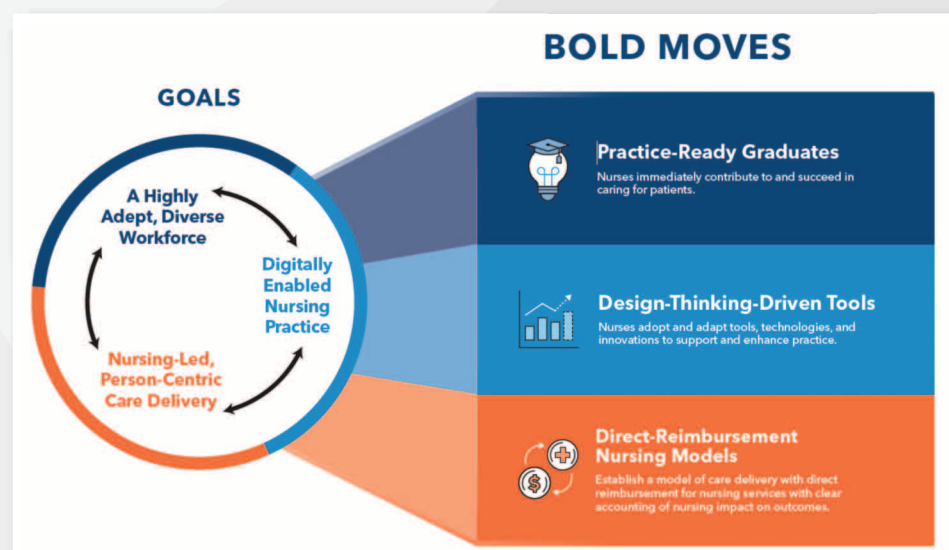
Kaiser Permanente will provide up to \$14.5 million to support the RN Initiative's next phase.

Invest in a reset moment

"We've engaged in the formative work needed for this reset moment for essential change," Judge said.

"Now we're convening the resources to develop ideas to take the nursing profession to the next level and rebuild our broken healthcare system."

"I'm confident in this vision to accelerate and fund visionary change to support a more adept, diverse workforce and digitally enable nursing practice, and new nursing-led, person-centric care delivery models," Porter-O'Grady said. "As we commit our creativity, inspiration, effort, and resources, we will advance the nursing profession's most important era of intentional change to improve health outcomes for all."



Nurse leaders identified priorities and goals for the RN Initiative to Reimagine Nursing.