



Guiding Principles for Relationships among Nursing and Support Services In the Clinical Setting

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Background and Purpose

Today, many nurses rely on their clinical skills and an “I’ll just do it myself” mindset as they work to deliver patient-centered, evidence-based care. Nurses can do almost anything, but the question is should they?

- As high patient acuity, shortened length of stay, and the complexities of patient needs are further exacerbated by staffing shortages and burnout, what are the consequences of expending increasingly limited nursing resources on non-nursing activities?
- How are patients, nurses, and clinical support services staff alike negatively impacted by the lack of collaboration within the patient care environment?

Fundamentally, nursing must continue to focus on clinical care functions. But in an ever-changing and increasingly resource-constrained environment, the clinical and critical thinking skills of nurses must be supported by stronger collaboration with support services in the clinical setting.

Under the guidance of AONE and ARAMARK Healthcare, 50 Nursing Executives from across the US and Canada were asked to provide input on what a successful partnership between Nursing and Support Services in the clinical setting – such as food services, environmental services, patient transport, and clinical technology services - will look like in the healthcare institution of the future.

Their input led to the development of the *Guiding Principles for Relationships among Nursing and Support Services in the Clinical Setting*. These guiding principles provide a roadmap for the creation of a stronger, more meaningful partnership between nursing and support services – a partnership that is ultimately focused on caring for patients and their families.

Future patient care demands will require new models of care -- and collaborative relationships that are dramatically different from those that exist today. In addition, these new models must be developed within organization structures and cultures that are agile enough to continuously adapt to an ever-changing environment.

As leaders within their organization, Nurse Executives must serve as the catalyst for change by advocating for and nurturing stronger relationships among nursing and support services in the clinical setting. Meaningful change will require significant effort at all levels of the organization, but as one Nurse Executive described it, “This is a labor of love for the ultimate benefit of the patient.”



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Guiding Principles

Guiding Principle 1: Chief Nursing Officer as the Catalyst for Change

- Engage the senior executive team and Board to achieve partnership and leadership consensus in pursuit of new models
- Set clear expectations for a culture of inclusion and collaboration
- Exhibit leadership skills aligned with the *AONE Nurse Executive Competencies*
- Be visible and model collaborative behaviors such as structured rounding and appreciative inquiry

Guiding Principle 2: Inclusive Shared Governance

- Create models of care that promote collaboration and participation by nursing and support services groups
- Shift current paradigms to include support services as members of the patient care team that supports the environment.
- Establish flexible organization structures that break down silos and create alignment
- Promote shared-decision making, ownership, initiative, and follow-through

Guiding Principle 3: Clear Scope of Practice

- Establish clear responsibilities, accountabilities, and applicable education for all team members - nursing and support services.
- Focus nursing resources on clinical care functions; articulating what nurses *can* do against the perception of what they *should* do
- Facilitate professional development and talent management across the collaborative team

Guiding Principle 4: Shared Ownership of Patient Needs

- Develop realistic, mutually agreed upon goals that are measurable
- Align expectations across collaborative teams through a performance management system that rewards the relationship between nursing and support services
- Ensure that the patient experience is the focus of all services
- Help all staff, both nursing and support services, to find a sense of meaning and purpose in their work through patient-focused goals



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Guiding Principle 5: Culture of Mutual Respect and Recognition

- Bridge gaps and barriers created by professional, cultural, and generational differences
- Cultivate sincere, authentic relationships that are grounded in trust and respect
- Encourage a sense of equity and facilitate shared appreciation of nursing and support service jobs
- Reward and recognize all members of the team for their impact on the patient experience

Guiding Principle 6: Safer, Less Stressful Physical Environment

- Provide a healing environment that is suited to the shared purpose of caring for patients and their families
- Enable nurses to spend more time with patients by keeping supplies and equipment at hand and bringing services to the patient
- Create a work environment that addresses the physical and emotional needs of staff
- Optimize technology to enable collaboration, communication, service provision, and culture change

Guiding Principle 7: Continuous, Open Communication

- Develop a common, patient-focused language that can be used by both nursing and clinical support services groups
- Establish a communication plan that disseminates key messages and decisions to all levels – in both nursing and support services
- Implement mechanisms to measure and act on interdepartmental satisfaction and feedback
- Communicate in ways that are culturally and linguistically appropriate



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Crosswalk to Other AONE Guiding Principles

The *Guiding Principles for Relationships among Nursing and Support Services in the Clinical Setting* complement several other AONE guiding principles and provide additional definition of the patient care delivery and hospital work environment needs of the future.

All of the *Guiding Principles for Relationships among Nursing and Support Services in the Clinical Setting* map directly to the *Principles & Elements of a Healthful Practice/Work Environment* that have been developed and endorsed by the Nursing Organizations Alliance.

| Healthful Practice/Work Environment | Relationships among Nursing and Clinical Support Services |
|--|---|
| 1. Collaborative Practice Culture | Guiding Principle 5: Culture of Mutual Respect & Recognition |
| 2. Communication Rich Culture | Guiding Principle 7: Continuous, Open Communication |
| 3. A Culture of Accountability | Guiding Principle 3: Clear Scope of Practice Guiding Principle 4: Shared Ownership of Patient-Focused Goals |
| 4. The Presence of Adequate Numbers of Qualified Nurses | Guiding Principle 3: Clear Scope of Practice Guiding Principle 6: Safer, Less Stressful Physical Environment |
| 5. The Presence of Expert, Competent, Credible, Visible Leadership | Guiding Principle 1: CNO as the Catalyst for Change |
| 6. Shared Decision-Making at All Levels | Guiding Principle 2: Inclusive Shared Governance |
| 7. The Encouragement of Professional Practice & Continued Growth/Development | Guiding Principle 3: Clear Scope of Practice |
| 8. Recognition of the Value of Nursing's Contribution | Guiding Principle 5: Culture of Mutual Respect & Recognition |
| 9. Recognition by Nurses for Meaningful Contribution to Practice | Guiding Principle 5: Culture of Mutual Respect & Recognition |

While the *Guiding Principles for Relationships among Nursing and Support Service in the Clinical Settings* may not map as clearly to the *Guiding Principles for Future Patient Care Delivery*, they are certainly grounded in the same key assumptions, including:

- In 2010, we will not have enough healthcare workers to deliver care using the same models we use today.
- We must first define the work of the future, then the roles needed to do that work, and then the education that is required to create the role to do the work.
- We cannot wait until we have all the answers. We must begin to experiment and act now.
- Dramatic change and revolutionary thinking are imperative.
- The delivery models for the future will require that we work collaboratively in multidisciplinary teams.



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