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WITH CONFIDENCE

A dear friend of mine is a critical care director. She usually beams when she talks about her nurse colleagues. They're intelligent and caring. They truly want what is best for their patients, no matter what it takes. I saw her recently and she looked very, very unhappy. Let me tell you about it.

She told me they had just introduced new monitoring technology. A nurse was carefully calibrating the new equipment. Her physician colleague was in a hurry and became frustrated. So much so that he stood in the hallway and yelled, "Get me someone who knows how to do this. This nurse is an idiot." You guessed it. The nurse stayed silent and everyone scattered. No one came to support her.

It's true that the physician's behavior was entirely off the mark, although I'm happy to report that in many places this kind of behavior is quickly becoming a thing of the past. But this isn't about the physician.

Who do you think told the director about the incident? Was it another staff member? Was it the nurse herself? Was it the physician who felt guilty and 'fessed up? It wasn't any of them. It was a patient who called her and pleaded, "Please tell me that your doctors don't treat nurses like this."

Silence Kills

You've probably heard about Silence Kills, the title of a study done 3 years ago by VitalSmarts and AACN. We all know from Joint Commission data that ineffective communication has been identified as a root cause in nearly two out of three sentinel events. The Silence Kills study confirmed a paradox that we also know: Most healthcare workers see colleagues who fail to offer support and break rules. Sometimes those colleagues make mistakes or they're downright incompetent. Yet fewer than one in 10 healthcare workers dares to say anything about it.

Somewhere along the way, the nurses in my friend's unit chose silence as their response to this situation and other situations like it. I know the same thing happens in units where many of us work. The nurses in my friend's unit lost the confidence that they could positively influence the situation. It's what often happens after years of blame, isolation, avoidance, and lack of respect from professional colleagues. From each other. Sometimes from patients and families. And often from broken systems.

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Those nurses lost the confidence to stand up for themselves and for each other. They still wanted what was best for their patients and they intuitively knew that silence does kill. But they still responded with silence. As a clinician I know all about paradoxical responses. This one stumped me because it's a response that is entirely within our control.

With Confidence

My instincts told me this was the direction for the coming year's theme. Everything must carry confidence. Think with confidence. Plan with confidence. Act with confidence. Apologize with confidence. Mourn with confidence. Celebrate with confidence. Reclaim priorities with confidence. The list is endless. So our theme for the coming year is "With Confidence."

This year's theme art paints a bold picture of everything that confidence involves. Confidence requires nurturing and cultivation. Many times the seeds of confidence must be planted in rocky terrain that may be windswept, either because a storm just passed or because one is brewing. Confidence requires leadership, vision and collaboration. It especially requires preparing for the future while learning and gaining strength from the past, which is represented by the weathered oak tree.

The Dog Whisperer

Confidence isn't accidental. It's intentional. So how do we create or increase our confidence? I think we can learn something from the dog whisperer. Have you heard about Cesar Millan? His cable TV show is a kind of Super Nanny for humans and their dogs that are out of control.

The dog whisperer comes into the lives of people when their dogs have taken over. He says that he rehabilitates dogs and trains humans to take control of the situation so they can reestablish who leads and who follows. The stories are fascinating and the transformations are amazing. They're funny, too. Picture humans maneuvering around a houseful of gates they installed to contain their dog.

Cesar explains to the humans that their job is to be calm and assertive. He shows them how to be confident so they can rightfully claim their domain. "You must feel the confidence within," he says. "Because your dog will sense when you don't." He shows the physical stance of confidence. Shoulders back. Head up. Snap your fingers. You're in charge.

People with confidence have great expectations. They are accountable and committed to improving themselves. They invite feedback and communicate more often. People with confidence are collaborators. They seek other confident people as partners and develop strong bonds with them. People with confidence possess initiative to do the things that matter. They believe they can make a difference and set high expectations of success in absolutely everything they do.

Doom Loops

Being accountable, being collaborative and having initiative are central to confidence. But did you ever hear about doom loops? Rosabeth Moss Kanter at Harvard came up with the term to describe the behaviors of sports teams with incredibly long losing streaks.

The players start to feel powerless and out of control. Their confidence erodes so they fall back on primitive self-protective behaviors. They turn silent and will do anything except evaluate themselves and their own need to change. They end up as a loser's club where whining, avoidance and negativity become the norm.

Doesn't that sound like the story about my friend's unit? I am convinced that constant criticism

helped to create a loser's club that undermined the cornerstone of confidence for the nurses in my friend's unit. They embraced doom loop behaviors and did anything except look inward and admit the need for change.

The Sweet Spot

Confidence is an attitude that allows us to have a positive view of ourselves that is still realistic. Confident people trust their abilities. They have a sense of control over their lives. And they believe, within reason, they can do what they wish, plan and expect. Rosabeth Kanter says it well: "Confidence is the sweet spot between arrogance and despair." Arrogance is the habit of seeing no flaws. Despair is the ability of seeing only flaws. It leads to self-deprecating behaviors and failure.

Confidence motivates us to act. Why would we want to continue the same old actions? Remember this saying: "If you always do what you always did, you'll always get what you always got." Confidence gives us the power to stop doing what we always did and try something new. Be successful just once and that seedling in this year's theme art will start to flourish. The more we succeed, the more confident we will become.



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People Are Like Tea Bags

Rita Mae Brown wrote that people are like tea bags. You never know how strong they'll be until they're in hot water. Think back to a time when you might have been in hot water and found yourself doing something you never thought you could. It reminds me of Dr. Lewis.

He was a cardiologist that everyone was afraid of. He was also our medical director, so I figured we'd better find a way to get along. First, I recognized that I needed to appear confident even when I didn't feel like it. I also knew that, as a physician, Dr. Lewis could relate if I talked about patients' needs in a factual way. It worked. It got so he would walk into the unit and come right to me. I was never on the receiving end of his legendary disrespect. Until one day. He summoned me into a patient's room and pointed to the 12-lead ECG marks we routinely make on a patient's chest. He was on a tear. "Can't you see those marks are in the wrong place? Don't these nurses know anything? What are you going to do about it?" He was pointing to the X's we marked for consistent placement of chest leads. I felt my face flush and my heart rate probably doubled. Besides, he was right. The marks were in the wrong place.

It was all I could do to quietly say, "Dr. Lewis, let's talk about this at the nurses' station." Then I led the way out of the room. He followed. Right away I told him that he was right and I understood his concern. We couldn't prevent errors in 12-lead ECG interpretation without proper lead placement. I assured him I would speak with the other nurses. It wasn't the right time to talk about why he brought up the issue in front of a patient. But he did follow my lead. Later on we talked about what he did that day.

Moving Forward

I am sure there are as many Dr. Lewis stories as there are people in this room. So how do we move forward? We start by agreeing that confidence is never lost. It only gets misplaced.

Let's consider some steps we can take to find our misplaced confidence. By the way, MindTools.com is a gold mine of resources for developing essential skills like self-confidence.

First, prepare yourself. What is really important to you? What have you already achieved? What do you really want to achieve? Do a SWOT analysis of yourself. With Dr. Lewis, my SWOT analysis would look something like this:

My Strength: I'm passionate and have a heart. I can relate to my patients and families. And you know what? I can drop an NG tube in one hot hurry.

My Weakness: I get nervous when I have to confront someone about a sticky issue.

My Opportunity: To beef up my crucial conversation skills and then practice.

The Threat: Will I gain confidence? What if I entirely lose it?

Reflect on your strengths and weaknesses. Recognize where opportunities and threats exist. Think about where you want to go. Set goals that use your strengths. Manage your mind. Imagine success and confidence. Positive self-talk is crucial. Find someone in your professional life with gaps opposite yours. Then make a commitment to sharing each other's journey.

Second, step out. Focus on the basics and set small goals that you can reasonably attain. For example, set a goal to physically portray confidence. Remember: Shoulders back. Head high. Mood positive. This is a small goal, but it's essential.

Build the knowledge you need to succeed. Do you need assertiveness education? Or the ability to have a crucial conversation or confrontation? Get a partner and practice. Imagine your success by managing the self-talk. Dream the success by seeing it in your mind. Then live your success. When mistakes happen, recognize they are learning opportunities for how you can do it differently next time.

Third, accelerate your confidence. Set larger goals. Have the crucial conversation. Create an environment that is best for you and therefore the one that is best for your patients and their families.

Having the Power

What will your newfound confidence look like? An article in *Trustee* magazine, "25 Simple Steps to Save Patients' Lives," caught my eye for two reasons. First, because it was in a magazine for hospital board members. I thought that was a good sign. The second was because one of the 25 steps is giving nurses and other clinicians the power to halt unsafe practices when doing so improves patient safety. You probably recognize that as a vital part of the central line bundle of care.

Using that power requires confidence and Allison Morgan is a good example for us. She's a recent graduate who works as a staff nurse in Indiana. Even if her hospital had not empowered her to halt unsafe practices, Allison showed the confidence of believing she had the power to halt unsafe practices. Here's what happened.

One day two physicians played out their petty feud right on her patient's chart. After the first physician scribbled out the other one's orders, the second one retaliated by writing an order for "no new orders." This was ridiculous and potentially dangerous. So Allison paged both of them to the unit saying there was an urgent problem with the patient. When they arrived, she showed them the chart. Calmly she pointed out the danger and confidently told them their behavior was unacceptable. She then asked if they would commit to collaborating. They did and a similar incident hasn't happened again.

The Language We Use

What a difference each one of us can make one confident act at a time.

You might hear that annoying little voice inside you whispering, “Sounds good. But don’t forget, you’re just a nurse.” Have you noticed that we create our own reality because of the language we use? Let me tell you a story.

British Petroleum opened some auto service centers and surveyed their customers a year later. They found that 95% were completely satisfied. That wasn’t good enough so they asked the other 5% why they were dissatisfied. BP posted vivid descriptions of the reasons for dissatisfaction so employees in every station could read them. Next thing you know, customer satisfaction ratings plummeted right along with employee retention and morale. Someone suggested that BP talk with satisfied customers. They did and posted vivid descriptions about what satisfied customers wanted. What do you think happened? You guessed it. Employees learned what worked and how to repeat it. Customer satisfaction, employee retention and morale all came back up.

So instead of “I’m just a nurse,” let’s make that “I am a good nurse. A confident nurse responsible for my patient’s care.” Sometimes you may feel like you’re just a drop in the ocean. But as that drop in the ocean, you are also the ocean. Same thing as a nurse. Sometimes you may feel like you’re just a nurse. But as a nurse, you are also nursing. You reflect on yourself and others every strength, every weakness, every good and every bad aspect of nursing. So when you transform into your confident self, you transform nursing.

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When we meet in New Orleans next May, how will we know if our confidence quotient increased? Each of us will need to measure change according to what we set out to accomplish. And the researcher in me wants to see dozens of NTI posters with evidence of our success.

Every month during the coming year I’ll explore another slice of our theme in my *AACN News* column. I know that many of you already have stories of things you have done with confidence. Many more of you will have them as the year goes on. We need to hear your stories. And I want to tell them. The place to send them is, confidence@aacn.org. I’m even confident that you won’t wait for my first column. In fact, I’m sure that you’ll be writing to me by the time I get home from this meeting.

I came across some timely words in a book by Marianne Williamson and adapted them to us. Listen carefully.

“Our deepest fear is not that we are inadequate. Our deepest fear is that we are powerful beyond measure. It is our light, not our darkness that most frightens us. We ask ourselves, who am I to be brilliant, gorgeous, talented, fabulous? Actually, who are you not to be?”

Life shrinks or expands in proportion to one’s courage.

— Anaïs Nin

I believe that life shrinks or expands in proportion to our confidence. So let’s go forward with great confidence to expand our lives and those of our patients and their families.

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Video of this speech is available online at www.aacn.org/confidence

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