IMPLEMENTATION RESOURCE

How to Reconnect Nurses Through Storytelling

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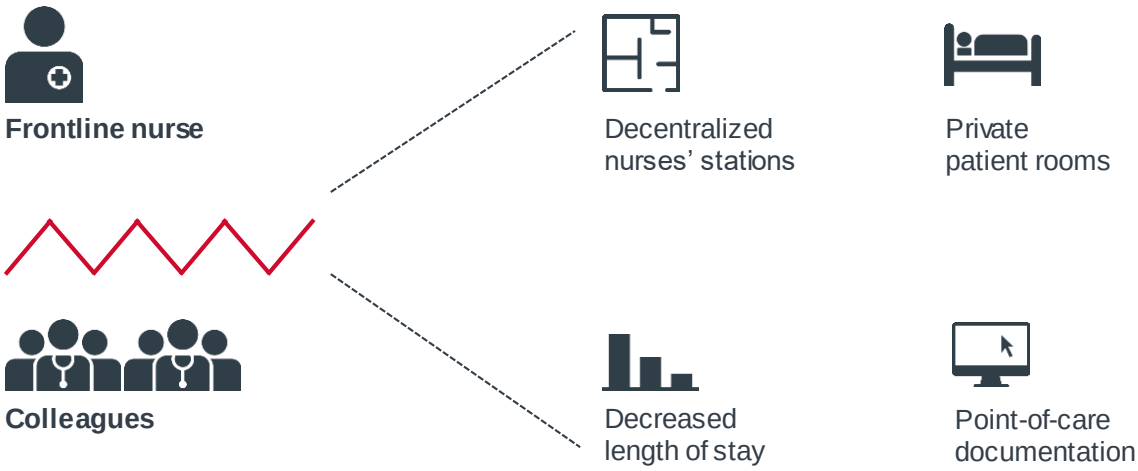
Why Nurses Need More Opportunities to Connect with Their Peers

New technology, responsibilities, and care protocols often cause nurses to feel "isolated in a crowd." Put another way, nurses often feel they are working alone, even though they are surrounded by people during their shifts. Changes in care delivery processes have led to more isolated work streams. For example, nurses are increasingly expected to document care at the bedside, rather than at a central nurses' station. And as facility design strategies evolve to improve patient satisfaction, prevent spread of infection, and reduce costs, more hospitals are building single-occupancy patient rooms. As a result, nurses report feeling more isolated than part of a team.

Key Factors Contributing to Nurse Isolation



Leaders must continue to strive for care processes that improve efficiency, care quality, and patient experience, even if they lead to more isolated work streams. But there is a solvable challenge, which is described on the next page.

Source: Nursing Executive Center interviews and analysis.

Nurses Have Few Opportunities to Connect with Peers

Nurses have limited opportunities to connect meaningfully with their nursing peers, but this is a challenge that leaders can address.

The perspectives shown here highlight a few examples of testimonials shared by frontline nurses during focus groups conducted by the Nursing Executive Center.

Representative Frontline Perspectives

> "I have spent several shifts where it feels like I haven't talked to anyone except my patients and the care team when we're rounding. But during rounds, we're only talking about the patient's care plan and what's on deck for the day."
>
> *Frontline Nurse*

> "I remember, just the other day, walking down the hall and not seeing anyone. I had a funny story to share, but I couldn't find anyone to tell it to!"
>
> *Frontline Nurse*

> "If I see a nurse struggling, I'll jump in and help them. If I do, we focus on the job—but I don't always have a chance to ask her how she is doing after we take care of the situation."
>
> *Charge Nurse*

> "We have to make sure we care about our coworkers as humans first. But we're so busy with admissions and discharges, and everything else in between, that we don't get to connect as people, as friends."
>
> *Frontline Nurse*

Source: Nursing Executive Center interviews and analysis.

Reconnect Nurses Through Storytelling

Shown here are top-level insights from recent studies that describe the positive impact of storytelling on interpersonal connections. For example, a 2014 article from *Forbes* reports that when individuals share their own real-life stories or the stories of others, they are more likely to be perceived as authentic people, and that storytelling is one of the most effective ways to build human connections.

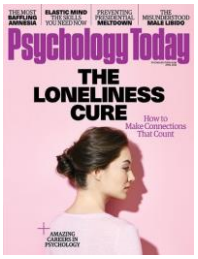
The resources shared on the following pages can help leaders reconnect nurses to each other through storytelling.

Sample Articles Acknowledging the Power of Storytelling

Tap the Power of Storytelling

Real-life stories authentically *connect* the listeners to the storyteller. Struggles and successes are shared, and the audience can empathize with the storyteller.

Forbes, 2014



The Psychological Power of Storytelling

Stories encourage collaboration and connection, through which we share meaning and purpose with others. They help us find commonalities with others.

Psychology Today, 2011

The Irresistible Power of Storytelling as a Strategic Business Tool

Successful stories focus listeners' minds on a single important idea. It takes only a few seconds to make an emotional connection between the storyteller and listeners.

Harvard Business Review, 2014

Source: Duncan RD, "Tap the Power of Storytelling," *Forbes*, 2014 https://www.forbes.com/sites/rodgerdeanduncan/2014/01/04/tap-the-power-of-storytelling/#144563356144a; Rutledge PB The Psychological Power of Storytelling. *Psychology Today*, 2011 https://www.psychologytoday.com/us/blog/positively-media/201101/the-psychological-power-storytelling; Monarth H The Irresistible Power of Storytelling as a Strategic Tool, *Harvard Business Review*, 2014 https://hbr.org/2014/03/the-irresistible-power-of-storytelling-as-a-strategic-business-tool; Nursing Executive Center interviews and analysis.

How to Implement 90-Second Storytelling

Why implement 90-second storytelling?

An unintended consequence of electronic documentation and efficient care delivery is that nurses spend more time working in isolation, with limited opportunities to meaningfully connect with their nursing peers.

By dedicating the first few minutes of each meeting or huddle to a brief nursing-related story, you can build opportunities for nurses to share their personal experiences on a routine basis and build connection with colleagues.

We recommend 90-second storytelling for all organizations because it is easy to implement and sustain. It is a straightforward and simple way to reconnect nurses to each other and their common organizational core values.

How do I get started?

Step 1: Begin every meeting or huddle with a 90-second story

Dedicate the first 90 seconds of every meeting or huddle to a brief, personal story. The volunteer storyteller describes a work experience that relates to the organization's mission or core values. The goal is to hardwire opportunities for nurses to connect with each other through personal stories.

Step 2: Provide clear guidance to keep stories brief

Provide clear guidance to ensure stories include personal details but remain brief and do not overtake the meeting's agenda. Identify a volunteer in advance who will follow a standard structure for the stories. Offer coaching as needed to keep the stories short.

Source: Nursing Executive Center interviews and analysis.

Tell a High-Impact Story in Under Two Minutes

Step 1: Begin every meeting or huddle with a 90-second story

The first component of this practice is to begin every meeting or huddle with a brief, personal story.

The American Nurses Association (ANA), the professional organization for registered nurses in the United States, introduced the 90-second story as a standing agenda item to begin every executive meeting. The purpose was to encourage attendees to acknowledge and reconnect with their purpose in health care.

ANA leaders recommend the process shown below. First, state the core value that the story illustrates. Second, share the experience succinctly but include important details. Third, explain how the experience links to the organizational mission.

ANA's Process for Effective 90-Second Storytelling

State your value	Share your experience	Connect with mission
Select a specific value that your story represents	Include the setting, who was involved, and what happened	Share how the experience supports the organizational mission

Sample core values referenced during 90-second storytelling at the ANA are shown here. You may decide to use your organizational values instead.

Sample Core Values

Source: American Nurses Association, Silver Spring, MD; Nursing Executive Center interviews and analysis.

Keep Stories Brief to Ensure Sustainability

Step 2: Provide clear guidance to keep stories brief

The second component is to provide clear guidance to ensure storytelling takes no more than two minutes.

ANA leaders shared tips on how to keep stories brief. First, follow a structured format, like the process described on the previous page. Second, select a volunteer to share a story prior to the meeting. Third, offer coaching to ensure the storyteller highlights the important points.

Tips for Keeping Stories Brief

Follow a structured format to ensure stories are concise

Select a storyteller ahead of time to allow individual to formulate their story

Coach storytellers to stay within 90 seconds by reminding them to share high-impact elements

Examples of high-impact story topics are listed here.

Sample 90-Second Story Topics

Achieving a practice-specific goal	Lending a helping hand in a time of need	Persevering through a critical incident	A patient's positive recovery

Source: American Nurses Association, Silver Spring, MD; Nursing Executive Center interviews and analysis.

How to Establish Routine Clinical Reflections

Why establish routine clinical reflections?

Holding weekly sessions for nurses to share stories and reflect on their experiences can help create regular opportunities for nurses to make meaningful, professional connections with each other.

How do I get started?

Step 1: Establish weekly nurse reflections on the unit

Schedule a weekly opportunity for nurses to share personally meaningful work experiences with colleagues and reflect on those experiences as a group. Make sure to consider collective bargaining agreements and staff mix before implementing this practice.

Step 2: Recruit frontline volunteers to organize and lead each session

Select two to three staff nurse volunteers to coordinate Routine Clinical Reflections. Before each meeting, the volunteers should identify nurses willing to share their experiences, coach them to create succinct stories, and develop discussion prompts as needed. They should also ensure Routine Clinical Reflections focus on personal experience rather than technical skills or education.

Step 3: Develop a patient coverage plan that enables wide attendance

Schedule two 30-minute sessions consecutively so all nurses on a given shift can attend the reflections. Before each meeting, divide the staff into two groups, relatively equal in experience and skill mix. While the first group attends the first session, the other half covers patient care. After the first session, the two groups switch. The unit manager serves as the emergency contact for any patient care issues that arise during both sessions.

Step 4: Share reflections through additional communication channels

To scale the impact of Routine Clinical Reflections, share summaries of the weekly stories via newsletter or another communication channel. Remove sensitive information (e.g., patient names, demographics, etc.) to maintain confidentiality.

Source: Nursing Executive Center interviews and analysis.

Give Nurses a Platform to Share Stories

Step 1: Establish weekly nurse reflections on the unit

The first step to implementing Routine Clinical Reflections is to establish a routine, staff-led, group reflection in which nurses can share stories and make meaningful connections with their frontline peers.

Leaders at Sykehuset Østfold, a 633-bed public hospital in the southeastern region of Norway, established Routine Clinical Reflections that provide a forum for staff to share stories and reflect on their clinical experiences as a group. During each weekly 30-minute session, a volunteer shares a personal story about a clinical or professional experience. Nurses participating in the reflection ask questions, offer their perspectives, and discuss how the story relates to their own experience.

Core Elements for Establishing Formalized Nurse Storytelling

Embed a regular process for sharing stories; make it routine

Tell stories from the nurse perspective

Give nurse an audience of their peers for a common perspective

Source: Sykehuset Østfold, Fredrikstad, Norway; Nursing Executive Center interviews and analysis.

Tap Frontline Volunteers to Organize Reflections

Step 2: Recruit frontline volunteers to organize and lead each session

The second step is to recruit frontline nurse volunteers to coordinate and direct the weekly reflections. Reflection coordinators have two main responsibilities each week. First, they find and coach a nurse who is willing to share a succinct story during each session. Second, they facilitate the reflections, keeping them focused on the clinical experiences rather than technical skill building or education.

Lead Nurses' Weekly Responsibilities for Unit Reflections at Sykehuset Østfold

Oversee volunteer selection and story preparation

Select volunteers to share a specific clinical experience; provide guidance on effective storytelling to speakers

Facilitate reflections to maintain focus on experience

Facilitate discussion to focus on experience; redirect if group shifts to discuss clinical competencies or education

At Sykehuset Østfold, three volunteer nurses on each unit share responsibilities for coordinating Routine Clinical Reflections. The combined time commitment for all three frontline reflection coordinators is about one hour per week.

3–4 RNs

Number of volunteer nurses who organize unit reflections

1 hour

Estimated total staff time dedicated to weekly prep for unit reflections

Source: Sykehuset Østfold, Fredrikstad, Norway; Nursing Executive Center interviews and analysis.

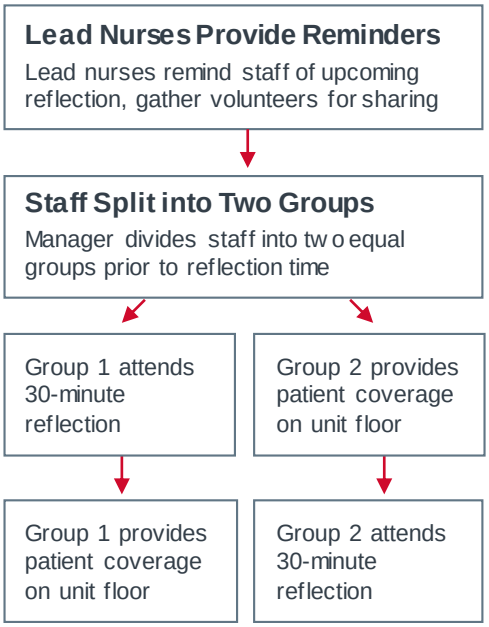
Enable Wide Participation

Step 3: Develop a patient coverage plan that enables wide attendance

The third step is to develop a plan that covers patient care safely during reflections and enables all staff to participate in the reflections at least once per month.

At Sykehuset Østfold, weekly reflections are scheduled as two consecutive 30-minute sessions. On the morning of the reflections, the unit manager divides the staff into two groups. One group attends the first reflection while the second group covers patient care on the unit. Then the two groups switch. To ensure appropriate care coverage, the unit manager makes the groups as balanced as possible, considering staff skill mix and experience. The manager also provides additional support to the group providing care, by rounding on patients and responding to urgent patient needs when staff need assistance.

Sykehuset Østfold's Unit Coverage Plan



Nurse Unit Manager's Role

Staff rounding

Rounds on staff prior to unit reflection to assess patient load for reassignment during reflections

Patient reassignment

Creates roster for patient coverage for each 30-minute meeting, based on nurses' skills and patient acuity

Emergency contact

Covers urgent patient care situations, protecting time for nurses in the session

Additionally, leaders at Sykehuset Østfold recommend keeping two things in mind when scheduling Routine Clinical Reflections. First, schedule reflections in a way that allows all staff to participate at least once per month. Since staff at Sykehuset Østfold rotate shifts, leaders scheduled Routine Clinical Reflections at a consistent time each week. Second, use census data and knowledge of care activities on each unit to schedule reflections at times when demands on staff tend to be lighter.

Source: Sykehuset Østfold, Fredrikstad, Norway; Nursing Executive Center interviews and analysis.

Scale the Impact of Routine Reflections

Step 4: Share reflections through additional communication channels

The final step is to scale the impact of reflections by sharing them through additional channels to ensure a wide audience.

Staff coordinators at Sykehuset Østfold summarize the stories shared in Routine Clinical Reflections, removing patient and staff identifiers, as well as any other protected health information. Leaders share the blinded stories in a weekly unit newsletter. This ensures all staff can benefit from Routine Clinical Reflections, even if they cannot participate in a live session that week.

Representative Weekly Unit Newsletter

Weekly News

Reminders

All RNs need to submit CEs by May 15

Upcoming Events

Sarah – birthday May 1
Nurses' Day – May 12

The Power of Sharing Our Stories

Each week, we share one story told by a nurse during our weekly reflections. This week's story is about the challenge of helping a patient struggling with her personal dilemma about taking pain medications.

I had been working with a patient for about two weeks. One evening, just after my shift began, I walked into her room to find her in tears. I sat down on the edge of her bed and she began to describe what these last two weeks had been like for her. She explained that her pain felt unbearable at times, and she'd had some hard nights. And even though the opiates we were giving her helped the pain, it felt wrong to her to be dependent on the drugs and she didn't like taking them so often. Plus, they made her feel off, tired, and not like herself. She told me she wanted to stop taking the pain medicine, but the idea of handling the intense pain again was daunting. She didn't know what to do and I wasn't sure how I could help.

Short summary of the reflection shared weekly in the unit newsletter

Summary removes patient information to protect confidentiality

Source: Sykehuset Østfold, Fredrikstad, Norway; Nursing Executive Center interviews and analysis.

Regular Reflections Strengthen Sense of Team

At Sykehuset Østfold, both frontline nurses and leaders feel Routine Clinical Reflections have had a positive impact. Here is some of the feedback received from participating staff at Sykehuset Østfold.

Sample Feedback from Frontline Staff and Leaders at Sykehuset Østfold

"In such a specialized department, we are all experienced and very knowledgeable. When we gather to reflect, we meet each other on the same terms, under one story. I think that reflecting helps us strengthen the feelings of being a team."

Frontline Nurse

"I believe that being able to reflect upon your practice as a nurse is most important. As the reflections often have a strong emphasis on both a patient case and how our staff handled the situation, these reflections offer an opportunity to learn and grow on so many levels."

Anne Karine Østbye Roos,
Deputy Departmental Advisor, Intensive Care

"This is very positive for me as a manager. I now have a stronger sense of how people are dealing with sensitive cases and can better understand how difficult things can be."

Cecilie Kruse-Nilsen,
Sectional Leader Intensive/ Post-Operational Unit

Source: Sykehuset Østfold, Fredrikstad, Norway; Nursing Executive Center interviews and analysis.

Resources available with membership

Implementation resource: Nurse Manager Time Audit

Use this set of tools to accurately assess how nurse managers are using their time, allowing for delegation and support when necessary.

Research report: Create Care Standards your Frontline Nurses will Embrace

Get 12 tactics for care standard prioritization, design, and rollout.

Infographic: Four foundational cracks undermining nurse resilience

Download our infographic to learn how you can improve nurse resilience and reduce burnout.

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Advisors to Our Work

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