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From Bedside to Boardroom: Inspiring Nurses Through Storytelling

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In her training to serve humanity and until she became the Vice President of Quality and Patient Safety at healthcare organizations, Nurse Kassab studied at renowned nursing schools for both her master's and doctorate degrees. Throughout this period, she was taught all the hard skills regarding how to care for patients and how to collaborate with nurses in hospital settings. What she did not learn was how to lead teams in times of severe stress or during disasters. She had to learn these skills the hard way. She had to develop solutions and then communicate those solutions to a myriad of nurses. The 24-hour care cycle never ends, and in one of her first assignments, the critical patients to whom her team had to attend were unlike anything she learned in her formal education. Beyond caring for the nursing needs of patients, Nurse Kassab realized that caring benefits not only the patients but also the staff as well. The nursing leadership team also needed to connect with their staff on a personal level beyond shallow attempts at familiarity. This meant nurse executives needed to communicate and then forge strong relationships with their teams. Through her experience, Nurse Kassab found a way to connect with groups and individuals: through storytelling.

Experiences such as those of Nurse Kassab are not uncommon, especially in a fast-paced, evolving profession like nursing. How did she find her way, and how does telling stories matter? To answer these questions, she decided to conduct a phenomenological study to investigate the experiences of Chief Nurse Executives at 10 hospitals in Southern California, specifically at how they utilize storytelling as a way to lead and connect with their nursing teams.

Review of the Literature

Over the years and especially since the COVID-19 pandemic, nurses have given their hearts and souls to provide excellent patient care. Despite the uncertainty of the pandemic, these nurses have continued to showcase their level of professionalism in caring for and saving lives. In a complex world, people need to reduce chaos and shape meaning of their world. According Coville et al. (2011), of the ways to verbalize and make sense of concerns is through storytelling, which conveys meaning, thus lessening ambiguity.

Stories also help inspire others. Furthermore, people can imagine what the future could look like. Different stories may be told to achieve deeper engagement in organizations (Hutchins, 2015). Springboard stories are narratives used to convey meaning, inspire people, generate new ideas, address fears, and spark transformational culture change, regardless of age, gender and ethnicity (Denning, 2004).

Leaders of organizations help set the tone of organizational culture (Baldoni, 2003). A key attribute of leaders is to create a culture of psychological safety and allow teams to execute tasks and celebrate wins. The role of the chief nursing executive is to model behaviors to allow staff to work at the top of their professional nursing license. Transformational chief nurse executives inspire, energize, and influence the nursing workforce to deliver high-quality patient care (Jeffs et al., 2018).

Transformational leadership refers to leaders' ability to change the world by presenting innovative solutions to solve challenges and mobilize shifts in people's values and thought processes (Denning, 2007). Leaders who exemplify transformational skills exhibit authenticity, positivity, and focus on changes in mindset, behavior, and culture (Anderson & Ackerman, 2010). Transformational leaders guide others on a journey of change in unknown territories (Bass & Riggio, 2006). This was especially true during the uncertainty of the pandemic. Nurses

should be the direct recipients and the prime beneficiaries of transformational leadership strategies to help them navigate through the different uncertainties of the healthcare setting.

In general, leadership is about how leaders envision the future and articulate tomorrow's possibilities. Leadership in healthcare should not be any different. Leaders help staff find meaning in their work, despite the challenges in the world around them. Their personal vision, along with organizational vision, serves as a springboard to share inspirational stories that encourage breakthrough action and change (Kouzes & Posner, 2006).

Inspirational stories must come from a place of authenticity. Leaders who are reflective, confident, and fully functioning provide clear pictures of the future. They exhibit genuine behaviors and form a foundation of trust (Conley, 2007; George & Sims, 2007). Authentic leadership suggests that followers who are hopeful will yield greater engagement and productivity (Konovsky & Pugh, 1994).

Denning (2011) suggested that interactive leadership is an approach to applying storytelling tools with authenticity. Interactive leadership theory considers employee perspectives, focusing on how leaders achieve outcomes while demonstrating a high concern for others. The intention of interactive leadership theory is to achieve change in the organization via transformational leaders who exhibit strong values and ethics (Burns, 1978).

In contrast, social learning theory suggests that people learn through observation. In a study on aggression, children watched adult models kick a life-sized inflated clown doll and receive punishment for kicking, whereas another group of children witnessed the same adult behavior being rewarded. Children who watched the adults getting punished for their behavior displayed fewer aggressive behaviors than those who watched adults being rewarded (Bandura, 1977). The study emphasizes how children learn and imitate behavior, indicating that observation alone will not lead to sustainable change. The same applies to nurses; they need to be shown how behaviors could affect their care for their patients, enabling them to improve their professional skills.

According to Denning (2011), stories are a way to use different narrative patterns to achieve specific objectives. In addition, imitating behaviors do not allow leaders to transmit values and envision an inspiring future. Stories need to come from the heart and are a way to motivate and engage staff and create meaning in the minds of listeners (Fairhurst, 2011).

Stories in healthcare have typically focused on patient care (Fancott, 2016), fostering health behaviors in vulnerable populations and simulating peer discussion for learning. Stories can also help patients make sense of their healthcare journey and build trust between caregivers and providers (Haigh & Hardy, 2011). Patient stories are powerful vehicles for staff to identify with vulnerable patients and enhance compassion while delivering care (Weller, 2016).

Engagement strategies in nursing to promote trust and foster collaboration have not been studied deeply. Kassab (2019) focused on the stories chief nurse executives tell to influence transformational change. Chief nurse executives have many responsibilities and the use of meaningful stories to engage and motivatenurses are critical competencies to lead organizations in the future.

Theoretical Framework

Theoretical frameworks guide the research, identify the variables, and orient the conceptual discussion. Leaders employ a variety of narrative patterns to achieve specific goals. Kassab (2019) employed Denning's (2011) framework and presented eight narrative patterns: ignite value/implement new ideas, build trust, build organizational brand, transmit organizational values, foster collaboration, share knowledge, neutralize rumor, and create and share visions. In

thinking about the pandemic and nursing challenges, four narrative patterns were identified to explore in depth: build trust, foster collaboration, create and share vision, and ignite action/implement new ideas (Kassab, 2019).

Trust is about connecting with others. According to Kaplan and Manchester (2018), leaders need to demonstrate vulnerability and authenticity to forge trust and credibility. Leaders who share personal stories of times when they were vulnerable, offer personal insight, and share humility tend to relate well with the staff and in turn gain their trust. Life stories put a human face on the storyteller as a person.

A second narrative pattern fosters collaboration. People working together in teams and communities with common objectives can perform at a high level. Furthermore, hierarchal relationships do not work within high performance teams. Rather, effective communication relies on shared values. As teams identify common goals, their own stories form, and transformation may occur (Denning, 2011).

A third narrative entails creating and sharing vision. It behooves leaders to help followers paint a hopeful picture of a promising future. Kouzes and Posner (2006) noted that people want to hear about how their individual dreams and hopes will come true. Powerful future stories are hard to convey because the future is unknown. However, leaders who bring people together to imagine a powerful future provide hope for them.

Finally, stories to ignite action and implement new ideas are used to motivate staff. These springboard stories describe the change idea and potential consequences if the change does not occur. It is told in a positive tone with the focus on examples where successful changes have been executed (Denning, 2011).

Methods

Kassab (2019) selected a qualitative and phenomenological method to identify and describe how exemplary chief nurse executives used stories to lead their organization. The qualitative research focused on the lived experiences of individuals from their perspective (Robert, 2010). The researcher was the instrument of inquiry, going into the field to get a deep understanding of the lived experiences. The personal encounters between the researcher and the participants helped illuminate the human experiences under investigation.

The population for the study was 415 chief nurse executives at 422 acute care hospitals in California (California Department of Public Health, 2018). The target population is the total group of individuals from the overall population from which the sample was drawn (McMillan and Schumacher, 2010). The target population was 17 exemplary chief nurse executives in 21 hospitals in one healthcare system in California. Finally, the sample is a group of participants in a study from which the researcher intends to generalize results. Purposeful sampling allowed the researcher to "select cases that will yield data to illuminate the inquiry question being investigated" (Patton, 2015, p. 264). The sample included 10 exemplary chief nurse executives who led frontline nurses in 10 acute care hospitals in California.

Interview questions were developed and designed to align with the purpose statement and research questions. A field test was performed to provide the researcher with confidence in the reliability and validity of the instrument (McMillan & Schumacher, 2010). Lastly, feedback from the field test helped improve the interview questions and data probes.

Instrument validity is essential in determining the extent to which the instrument measures what it is designed to measure (McMillan & Schumacher, 2010). Methods employed to

increase the validity of data in this study included triangulation, member checking, clarifying bias, spending time in the field, and using external auditors. Reliability refers to the degree to which the instruments consistently measure a phenomenon from one time to another (Roberts, 2010). Reliability for the phenomenological qualitative study was established via interviews, observations, and artifact examination.

Data Sources

The central research question for Kassab's (2019) study centered on how exemplary chief nurse executives lead their organizations through storytelling using Denning's (2011) eight narrative patterns. Exemplary nurse executives met at least four of six criteria: evidence of leading a successful organization, minimum of 5 years of nursing leadership experience, articles or papers published or presented at conferences, received recognition by peers, membership in professional nursing associations in their field, and received a recommendation by one or more recognized regional executive level leaders. For purposes of this article, four of the eight narrative patterns were the focus: build trust, foster collaboration, create and share vision, and ignite action/implement new ideas (Kassab, 2019).

The data for the phenomenological study were collected from 10 exemplary chief nurse executives through face-to-face interviews, observations, and artifacts. The interviews were conducted in the individual chief nurse executives' worksites. Recording devices were used to ensure accuracy of information along with handwritten notes to reflect non-verbal behaviors and body language. Observational data helped support the triangulation of the research findings, including meeting minutes, presentations, and conferences. Observational data included interactions with peers and colleagues. Finally, artifacts helped support the claims made by the participants. Examples of artifacts included organizational documents, individual reports, community documents, and social media excerpts. According to Patton (2015), artifacts help deepen the analysis of the interviews and observations.

Results and Findings

Chief nurse executives shared humbling stories about medical errors as they built trust with their followers. One of the participants shared about how she overdosed a patient on Dilaudid (narcotic) during her first year out of nursing school. The patient was resuscitated; however, the idea that the participant could have killed a patient was overwhelming. Another participant shared that while in the operating room, she gave the surgeon the wrong size implant. The implications included a potential delay in the surgical procedure, including extension of anesthesia to the patient. The chief nurse executives all articulated the need to integrate a preoccupation with failure, a key principle of high reliability in their processes. It is worthy to note that healthcare is a people's business with potential harm and risks. It is important to take necessary precautions and at the same time forgive ourselves and address systemic issues when harm occurs.

Collaboration is a collective intelligence that honors and respect the contribution of each member and contributes to group learning (Denning 2011). Of the chief nurse executives, 100% referred to the theme of teamwork when addressing collaboration (Kassab, 2019). One of the participants described a horrific fire in northern California in 2018 and how the teamwork fostered prior to the event with mock evacuations helped saved patients', families', and employees' lives. Another participant shared a story in which a critical transport ambulance broke down on the way to the hospital with a critically ill patient; the team brainstormed how to keep the lifesaving equipment going. They found a garage in the community and hooked up the equipment until help arrived.

Chief nurse executives created and shared inspirational stories and vision, contributing to group learning by listening to others' narratives (Denning, 2011). One chief nurse executive shared how two of her nursing leaders grew up as immigrant workers on the farm and were the first in their families to attend college. One of the nursing leaders now has a double master's degree after working in the fields beginning at age 6. The story demonstrated how sharing inspirational stories in the community helps motive young people who may be struggling, as well as nurses who have similar stories. Another chief nurse executive shared a story of a woman who was homeless until she found a job at the hospital as a transporter. She consistently exuded positivity. The organization created a video detailing how she envisioned a brighter future for her family.

When exemplary chief nurse executives use storytelling to ignite action and implement new ideas, they often refer to stories of celebrating successes and generating excitement (Kassab, 2019). Such stories also bring hope and motivation to staff who may have gone through difficult challenges and others who are experiencing similar issues. A chief nurse executive described how her hospital was failing financially, with poor census and community reputation. She was determined to turn the situation around and engaged the front-line staff and leaders in the process. Every day at 4:00pm they met to brainstorm strategies to improve census and reputation. They went from a net loss of over $900,000 to a gross profit of $2.7 million in 18 months. Another chief nurse executive talked about an infection called C-Difficile (often caused by resistance to antibiotics). She was determined to put a human face to every infection and personalize how nursing care can affect people individually. They now count the days between infections to celebrate their success.

Discussion

Chief nurse executives need to connect with their staff on a personal level; they must forge strong relationships with the teams they lead, and a key way to be successful is through storytelling. Kassab (2019) found that when chief nurse executives are authentic and share stories of personal humility, they get to know their staff personally, which helps to help build trust. Once trust has been established, they may engage these front-line staff in coming together to exchange ideas and foster teams with a common purpose. One method to foster ideas is for the chief nurse executive to vision a hopeful future. Inspirational and positive stories help evoke the nurses' imagination to ignite action and seek innovative ideas and solutions to improve the organization.

Significance and Conclusion

Research questions help guide decisions about the study methodology and identify objectives. The research questions in Kassab's (2019) study centered around how exemplary chief nurse executives lead their organizations through storytelling using Denning's (2011) eight narrative patterns. Heartfelt stories trigger emotions and engage members of the organization to have open conversations with peers and leaders. The significance of Kassab's research helps advance the field of storytelling narrative in nursing science.

Storytelling in healthcare is an emerging field. Typically, healthcare organizations and nurses use data-driven approaches to integrate evidenced-based science to improve quality, patient safety, and financial outcomes. Data is vitally important to drive patient care, yet it lacks the emotion and humanizing experiences from a personal perspective. Nurse leaders have a unique opportunity to demonstrate humility and vulnerability and model behaviors to build trust. The use of stories by chief nurse executives to create transformational change empowers and

fosters collaboration of front-line nurses. Everyone has life-changing stories, and sharing powerful narratives helps connect people on a personal level.

Recommendations for Future Research

Kassab (2019) focused on exemplary chief nurse executives who use storytelling to create transformational change. The following recommendations may be considered for future research:

1. It is recommended to conduct a phenomenological study separately on both male and female chief nurse executives. This would afford the research to elucidate the similarities and differences regarding the use of storytelling between males and females.
2. The phenomenological study was conducted in acute care facilities in California. It is recommended to conduct a similar study in subacute and skilled nursing facilities to determine how storytelling narratives are used by chief nurse executives in these settings.
3. This study should be replicated in acute care hospitals outside of California to assess geographic differences in narratives.
4. It is recommended to conduct a phenomenological study isolating generations in the selection of exemplary chief nurse executives. There may be variations in how different generations use stories to drive transformational change.
5. A phenomenological study should also be conducted replicating this study with physician leaders. The purpose would be to understand and describe how chief medical officers use storytelling to lead organizations.
6. A mixed-methods study should be conducted with bedside nurses to understand how they perceive their chief nurse executives who use storytelling to lead transformational change in their respective organizations.
7. Based on recommendations from Kassab (2019), future research should focus on front-line nursing staff to learn about the stories their nursing leaders told them during the pandemic and the stories' impact on their professional lives.

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