Title of the tool:

Beyond the fear

Principles and values relevant to the tool

Courage is a virtue that is necessary to the dutiful practice of all healthcare providers; particularly courage supports the nurses in the daily practice of their profession. Characteristics that promote moral courage in nursing are: self-awareness and interpersonal awareness, emotional self-control, danger management, moral integrity, compassion, respect,

Overall aim for the tool

To strengthen the self-awareness, self-control and fear and anger management
To enforce ethical-deontological competence and relational competence
To enhance ethical attitude-behaviour based on courage

Learning outcomes

Participants will able to:

- identify and describe professional dangerous situation and contingency;
- describe own experience in dangerous situation;
- report about self and other people’s awareness;
- identify and describe ethical obligation appropriated to the dangerous situation;
- identify, describe and simulate technical skill of cognitive reframing and self-soothing;
- identify, describe and simulate technical skill of improvement of the risk tolerance;
- report about conflict between daily professional life and ethical obligation;
- identify, describe and simulate technical skill of assertiveness communication and negotiation;

Relevant definitions and terms

Moral courage: individual’s capacity to overcome fear and stand up for his/her core values (Lachman VD. (2007). Moral courage: A virtue in need of development? MedSurg Nursing Journal, 16(2), 131-133)
Moral integrity: to feel good about oneself in a fundamental way, to perceive oneself as both a professional who does good work and as a person of character who strives to live a moral life (Laabs CA. (2007). Primary care nurse practitioners’ integrity when faced with a moral conflict. Nursing Ethics, 14(6), 795-809)


Abstract: courage is understood from a philosophical viewpoint and how it is expressed in nursing actions. Four aspects were identified as relevant to a deeper understanding of courage in nursing practice: courage as an ontological concept, a moral virtue, a property of an ethical act, and a creative capacity. The information review shed light on the complexity of the concept of courage and revealed some lack of clarity in its use. Consequently, if courage is to be used consciously to influence nurses’ ethical actions it seems important to recognize its specific features. The results suggest it is imperative to foster courage among nurses and student nurses to prepare them for ethical, creative action and further the development of professional nursing practices.


Abstract: moral courage involves the willingness to speak out and do that which is right in the face of forces that would lead a person to act in some other way. In this article the author discusses the CODE acronym she has created to help nurses remember key components for actualizing moral courage. After introducing the virtue of moral courage, the author presents strategies to operationalize moral courage, organizing the discussion around the CODE acronym. “C” represents the courage (moral courage), the willingness to overcome fear and stand up for core values. The “O” reminds nurses of their obligation to adhere to the American Nurses Association Code of Ethics for Nurses, which delineates nurses’ ethical responsibilities in a variety of circumstances. The “D” is for danger management, with a focus on developing cognitive strategies and overcoming risk aversion. Because moral courage is essentially an act, the “E” reflects the expression and action component. Assertiveness and negotiation strategies are presented along with clinical examples.


Abstract: examples of unethical behaviours are seen today in academia, politics, sports, entertainment, banking, and the legal system. Healthcare professionals working in clinical practice, education, research, and administration are not immune to these unethical behaviours. They face ethical dilemmas on a regular basis. Shortages in the numbers of clinicians to deliver patient care, inadequate staffing levels, cost containment measures, consolidation of healthcare organizations, and ineffective leadership have resulted in the escalation of ethical dilemmas nurses face today in healthcare environments. How individuals respond to these ethical dilemmas depends on their previous experiences with unethical behaviour, their individual personality traits, and their ethical values, as well as their knowledge of ethical principles.


Abstract: today’s nurse leaders practice in very complex environments. This complexity leads to value conflicts and creates the potential for moral distress. Jameton’s sentinel work framed the concept of moral distress as arising when one knows the morally right thing to do, but cannot do so because of organizational constraints. In this article the author reviews sources of moral distress among nurse leaders, discusses the nurse leader’s responsibility for demonstrating and supporting moral courage, identifies threats to moral courage among nurse leaders, offers strategies to promote moral courage, and makes recommendations for the continuing development of moral courage.

Abstract: In this article the author examines the concepts of moral distress and moral courage within the context of nursing practice. Examples of challenging healthcare situations from the United Kingdom and Ireland are discussed in the light of the examination of these two concepts. The examples illuminate features of healthcare situations that need to be considered in relation to different organisational and cultural contexts. This requires an understanding of the complexity of clinical contexts and an appreciation of the fallibility and vulnerability of nurses and other practitioners. The goal of this article is to encourage healthcare organisations to create supportive structures and sensitive leadership that will enhance moral courage in the work setting.

What the legislation/treaties/conventions says on the topic

Decreto Ministeriale 14 settembre 1994, n°739

Codice Deontologico dell'Infermiere.
Approved by Comitato Centrale della Federazione IPASVI by resolution n.1/09, January 10, 2009 and from Consiglio Nazionale dei Collegi IPASVI in the meeting of January 17, 2009.
In: http://www.ipasvi.it/norme-e-codici/deontologia/il-codice-deontologico.htm

Commentario al codice deontologico dell'Infermiere.
Edited by Federazione Nazionale dei Collegi degli Infermieri IPASVI.
In: http://www.ipasvi.it/norme-e-codici/deontologia/deontologia/commentario.htm

The international code of ethics for nursing by the International Council of Nurses (ICN)
In: http://www.cnai.info/index.php/estero/icn/codice-deontologico

Code of Ethics for Nurses – American Nurses Association (ANA)
The Code of Ethics for Nurses was developed as a guide for carrying out nursing responsibilities in a manner consistent with quality in nursing care and the ethical obligations of the profession. In: http://www.nursingworld.org/codeofethics

ANA Position Statements on Ethics and Human Rights
The position statements from ANA regarding Ethics and Human Rights. In: http://www.nursingworld.org/MainMenuCategories/EthicsStandards/Ethics-Position-Statements. Of particular interest: Cultural Diversity in Nursing Practice. This statement describes the features of an operational definition of cultural diversity as it is expressed in nursing practice, education, administration and research.
In: http://www.nursingworld.org/MainMenuCategories/EthicsStandards/Ethics-Position-Statements/prtetcdv14444.html

International Council of Nursing Fact Sheet: ICN on Health and Human Rights

What local policies say

Delibera n° 697 del 14 luglio 2003 della Giunta Regionale della Regione Toscana. Il Patto con il cittadino: repertorio di impegni per la Carta dei servizi sanitari con relativi indicatori e standard.

Carta dei Servizi - Azienda Ospedaliera Universitaria Senese: carta dei diritti e dei doveri degli utenti
In: http://www.ao-siena.toscana.it/carta_diritti_utenti.htm

PRACTICAL ASPECTS OF THE TOOL

Classroom activities

Theoretical approach, individual definitions of courage, group discussion on different point of view, framework of cognitive aspects. Recall of professional deontology.

Activities in practice

Analysis of risk situations and identification of practical solutions based on brave behaviors. Discussion on different approaches.

Management strategies of the danger: cognitive reframing, self-soothing techniques, risk tolerance.

Relational techniques: assertiveness and dialogue.

Analysis of the different behaviors in critical situations through a problem-based learning approach.

Watching short videos on several critical topics: look after non-EU aggressive patients, communication of unexpected and ‘negative’ events, managing conflicts among nurses-patients and nurses-nurses.

TOOL ASSESSMENT

Theoretical assessment.

Teachers: anthropologist, clinical educationalist, tutors (nurses, obstetricians and representation of foreign associations) will create a questionnaire (open-ended questions) to identify what has been learned. Participants, 20 nurses working in different wards, will answer individually and later they will discuss together on the various responses.

Participants will be divided into two groups and elaborate two projects on how nurses can show courage and deliver compassionate care to patients. The components of the groups will be trainers for the next courses on the basis of the developed projects. 20 groups of 15 health-care workers from wards that are more impacted by foreigners (emergency, urgent medicine, gynaecology, orthopaedics, paediatrics, and later all other wards) and 5 students from the three-year degree programme in nursing will participate in the following editions of the course.

Practical assessment.

Evaluation through systematic observation (low degree of structure) carried out directly by the teachers for the full duration of the toolkit. The survey for the exploration of learning outcomes produces a true and complete description of the conditions in which it occurs.

EVALUATION

The evaluation of the toolkit is carried out by the learners, teachers and patients (in the following courses). The evaluation is oriented to the recognition of the originality
of the techniques and new contents learned in relation to estimates the effects in the employment context.

Effective achievement of learning goals (theoretical and practical)
Quality of the theoretical content
Quality of teaching activities and facilitation
Relevance and quality of materials used
Time Management

A questionnaire will be carry out in order to understand if the tool allow students to do a self-evaluation on what they have learned and to show how to be courageous.

During group works participants will discuss on their knowledge about courage and how show their courage in different situations.
Teachers will observe the behaviours of nurses during the demonstrations.

Satisfaction questionnaire administered at the end of the toolkit will be fill in by patients. At a distance of two months will be conducted a re-valuation of effective achievement of learning goals. (theoretical and practical)

A report on the evaluation will be created by teachers and the results will be useful to make changes to the tools, if needed.
Reassessment of contents, methods and materials used in the toolkit.

**AUTHORSHIP**

Names of the people who led the development and those who assisted in any of the many ways that colleagues do.

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