

# Courageous leadership for a culture of emotional safety

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“As we transition towards recovery, we have a moral obligation to address the long-standing crisis of burnout, exhaustion, and moral distress across the health community.”<sup>1</sup>

—US Surgeon General Vice Admiral Vivek Murthy, MD, MBA

**T**he genesis for this article was the 29th National Evidence-Based Conference hosted by University of Iowa Hospitals & Clinics on April 20, 2022. In the opening keynote, author Joe Tye shared evidence-based practice (EBP) strategies for “courageous leadership in an age of anxiety.” We’ve adapted and expanded upon this theme to address the leadership imperative to create a culture of emotional safety in healthcare organizations. In this article, we distinguish emotional safety from

psychological safety, share leadership strategies to promote emotional safety by building a culture of ownership, and suggest areas needed for further research.

The need for this work is immediate and urgent. A survey of 1,119 healthcare workers by Mental Health America found that 93% of healthcare workers were experiencing stress, 86% reported experiencing anxiety, 77% reported frustration, 76% reported exhaustion and burn-out, and 75% said they were overwhelmed.<sup>2</sup> In a longitudinal survey of nurse managers by the American Organization for Nursing Leadership, 75% of nurse leaders reported the emotional health and well-being of staff as their number one challenge, a 53% increase between July 2020 and August 2021.<sup>3</sup> Especially in this environment, healthcare leaders need to complement psychological safety with a commitment to assuring a climate of emotional safety for all staff. It's important to understand the distinction.

Psychological safety is the assurance that people can identify problems and mistakes, including their own, without fear of punishment, retribution, or humiliation.<sup>4</sup> Psychological safety is a vital quality for just culture, which seeks to ascribe responsibility for mistakes and errors to organizational processes and cultures rather than to blame individuals. The primary focus of psychological safety is on the organization and its success at improving quality and safety outcomes.

We define emotional safety as the assurance that an organization's leadership is committed to protecting the emotional health

and well-being of staff from internal and external threats, and to assuring that care is available for emotional stress or trauma without shame or stigma. The primary focus of emotional safety is on helping individuals feel protected against threats to their physical and emotional well-being. It builds upon and complements psychological safety.

### **A pervasive sense of dread**

We live during a time when contempt, rudeness, incivility, bullying, and even violence have become normalized, resulting in a pervasive sense of dread. In the introduction for Gallup's 2022 report on global emotions, company CEO Jon Clifton wrote, "In 2021, negative emotions—the aggregate of the stress, sadness, anger, worry, and physical pain that people feel every day—reached a new record in the history of Gallup's tracking."<sup>5</sup> Ongoing fallout from the pandemic, the national epidemic of gun violence (including against healthcare workers), and deepening societal polarization have surely added to the emotional toll over the past year.

Because these negative emotions can have a deleterious impact on patient-care outcomes, morale, turnover, and virtually every other dimension of a healthcare organization's operations, leaders have an obligation to provide a culture of emotional safety. As Tye and colleagues wrote in their article on caring for COVID's emotional long haulers, "The pandemic will leave behind a long tail of personal grief, emotional trauma, career and financial dislocation, anger and anxiety... We must be

there for the caregivers who were there for us as they cope with the likely second pandemic of post-trauma moral and emotional injury."<sup>6</sup>

Most healthcare workers don't think enough is being done to assure their emotional safety. Two surveys conducted for members of the Association of California Nurse Leaders and for participants in the 2022 National Evidence-Based Practice Conference included the question, "Do you think that your staff believes the organization is doing enough for their mental and emotional well-being?" Nearly half of respondents chose "not at all" and less than 10% chose "absolutely yes."<sup>7</sup> In a survey of front-line nurses by Trusted Health, 67% responded that the healthcare industry doesn't prioritize and provide resources for nurses' mental health and emotional well-being.<sup>8</sup>

### **Why this matters**

A 2017 white paper from the Institute for Healthcare Improvement stated, "Joy in work—or the lack thereof—not only impacts individual staff engagement and satisfaction, but also patient experience, quality of care, patient safety, and organizational performance."<sup>9</sup> The feeling of being emotionally unsafe is the ultimate killjoy; it's almost impossible to experience joy when shrouded in a fog of anxiety.

Considering the critical nature and complexity of the healthcare system, as well as clinicians' cognitive workload, the potential for errors and threats to safety are enormous. Things that can go wrong vastly outweigh the perfect experience. This is why we

have processes, structures, functions, and regulations related to safety to prevent potentially harmful situations. For example, we repeatedly ask patients to state their name and birth date, take time out to verify procedures, and obsessively clean equipment. Yet, despite these precautions, estimates of preventable hospital deaths range from 22,000 to 160,000 per year.<sup>10,11</sup>

Though more research is needed, it's possible that a number of these deaths resulted from caregivers struggling with the negative emotions cited in the Gallup study. In his seminal study on the psychology of military incompetence, Norman Dixon concluded that the primary distinction between competent and incompetent commanders was their ability, or inability, to manage anxiety.<sup>12</sup> Uncontrolled anxiety, he wrote, provoked either panic or paralysis, both of which could result in catastrophic consequences on the battlefield.

High anxiety can also cause caregivers to panic or freeze, such as when an OR nurse or technician is afraid to call a time-out during a surgical procedure. It's antithetical to psychological safety. As Amy Edmonson wrote in *The Fearless Organization*, "Fear... impairs analytic thinking, creative insight, and problem-solving."<sup>4</sup> The higher the collective level of anxiety in an organization, the more certain it is that decisions will be made, and actions taken, in response to fear rather than rational thinking. In his study of why companies fail, Jim Collins described the consequences of unbridled leadership anxiety by saying, "The very moment when we need to take calm, deliberate action, we run the risk of doing the exact opposite and bringing about the very outcomes we most fear."<sup>13</sup>

#### Creating a positive culture

Retired Admiral Eric Olson said, "Culture [must not] be sacrificed in a crisis. A culture left untended will go someplace the

leader does not want it to go, and once it does, it's impossible to get back."<sup>14</sup> Especially with the staffing and financial challenges faced by most healthcare organizations today, investing in culture-building is more difficult than ever. It's also more important than ever.

Accountability has been a predominant buzzword in recent years. Accountability is extrinsically imposed motivation. It's fueled by the incentives of reward and punishment, of carrot and stick. The metaphor we use for accountability is "holding your feet to the fire," a form of torture that has been outlawed since the Middle Ages.

Ownership is intrinsically inspired motivation. It's fueled by an inner sense of pride, commitment, and loyalty. The metaphor we use for ownership is "walking across hot coals." When someone is willing to walk across hot coals on their own, they don't need their feet held to the fire.

A culture focused on accountability rather than ownership has significant downsides, including:

1) Accountability is always perceived as a negative. No one is held accountable for having done something well, only for having done something wrong. The threat of being held accountable is demotivating, impairs creative thinking and risk-taking, and at the extreme creates perverse incentives to cheat. As Farson and Keyes wrote in *The Innovation Paradox*, "In the long run... accountability encourages a culture of evasion, denial, and finger pointing."<sup>15</sup>

2) Accountability can undermine the principles of just culture. Systems can't be held

**Table 1: What leaders can and can't hold staff accountable for**

You can hold people accountable for...	But not for...
Complying with your rules	Living your values
Showing up on time	Being emotionally present
Discipline	Loyalty
Giving the right answers	Asking the right questions
Meeting budgets	Thinking entrepreneurially
Meeting deadlines	Working with passion
Results	Dreams
Competence	Caring
What they say at work	What they say at home
Appearance	Pride
Treating people with respect	Respecting people's dignity
Saluting	Laughing
Their job descriptions	Their life decisions

accountable, only individuals. Accountability for failures or errors will inevitably fall upon the shoulders of a human being, even if it's the culture or system that's at fault.

3) Accountability establishes a low bar for performance expectations. People can only be held accountable for what's in their job description or for what they've been instructed to do, not for going above and beyond those basics. No one ever won a DAISY Award by being held accountable.

4) Especially in healthcare, people can't be held accountable for things that really matter, as shown in *Table 1*.

The conviction and sentencing of nurse RaDonna Vaught for having made a fatal medication error has added an exclamation point to this imperative. In a statement released following Vaught's sentencing, the Institute for Healthcare Improvement said that criminalization of medical errors will make patients less safe because caregivers will be less likely to report errors.<sup>16</sup> On the day of Vaught's sentencing, a nursing school affiliated with Covenant Health in Tennessee had three accepted students withdraw out of concern that making a medical error could not only cost them their license but also their freedom.<sup>17</sup> In this environment, it's essential that healthcare leaders show caregivers that they'll support them first and "hold them accountable" as a last resort.

Many nurse leaders have embraced the "proceed until apprehended" philosophy.<sup>18</sup> Briefly stated, this means that if something needs to be done, you do it; if you need to get help doing

## Table 2: Questions to ask about your organization's core values

- Why were these values chosen and others left out?
- Do these values reflect who we are as an organization today and who we want to be in the future?
- Are our organization's values operationally relevant?
- Are our organization's values socially relevant?
- Would we keep these values if our organization were punished for following them?
- Are our organization's values worded in such a way that they inspire employees to take ownership for those values because they resonate with their own personal values?
- Do staff recognize and embrace the organizational values?
- Are values embedded in our performance appraisal process?
- If someone from another organization copied our statement of values verbatim and posted it in their organization's lobby, would anyone know that it had been lifted?
- How would a space alien see our organization's values reflected (or not) in our employees' attitudes and behaviors?
- When should we next revisit and, if appropriate, revise our statement of core values?

Adapted from: Tye J, Dent B. *Building a Culture of Ownership in Healthcare*. 2nd ed. Indianapolis, IN: Sigma; 2020.

it, then ask for it. A nonnegotiable corollary to this mindset is that no one will be punished for proceeding in good faith, even if it results in undesirable outcomes.

### Strategies for promoting ownership and emotional safety

Here are nine practical strategies nurse leaders can use to build a culture of ownership that promotes emotional safety.

#### 1. Revisit and reinforce your statement of core values.

In a survey conducted by the author, only 2 in 10 respondents strongly agreed with statements that "senior leaders don't just talk about our values, they set high expectations through their examples" and that the organization's values "are reflected in the way difficult decisions, including those about budgets and resource allocation, are made."<sup>19</sup>

Over the past several years, healthcare organizations have faced unprecedented challenges

and values have been tested like never before. At the same time, positive values, such as courage, fellowship, innovation, and teamwork have emerged, often in unexpected ways. Now is a great time to pull the old statement of values off the wall and see if it needs to be updated. Engaging your entire team in a dialogue about values is a critical first step to building a culture of ownership. Answering the questions in *Table 2* is a great way to start.

At University of Iowa Hospitals & Clinics, for example, values are part of the annual appraisal process with specific behavioral expectations. As such, staff are expected to know and repeat the concisely stated acronym, ICARE (Innovation, Collaboration, Accountability, Respect, Excellence). Recently, these values were updated to WE CARE (Welcoming, Excellence, Collaboration, Accountability, Respect, and Equity) to better reflect diversity and inclusion.

**2. Connect personal values with organizational values.**

The more clearly people understand and act upon their own personal values, the more committed they'll be to the values of the organization where they work.<sup>20</sup> Marshall Goldsmith, one of the nation's top executive coaches, wrote, "The only natural law I've witnessed in three decades of observing successful people's efforts to become more successful is this: People will do something—including changing their behavior—only if it can be demonstrated that doing so is in their own best interests as defined by their own values."<sup>21</sup>

Although most people, especially those in the healing professions, intuitively have good values, it's the rare individual who has thought about what those values are and the personal expectations they create. Very few of us have written out a statement of personal values or thought about how we'd make a decision when we could honor one value or another but not

both, a common cause of moral distress. *The Twelve Core Action Values* is a 60-module course on values-based life and leadership skills that Values Coach uses to help people crystallize and act upon their values (see *Figure 1*). Whether a structured course like this is used or a more informal process, helping people solidify and act upon their own personal values provides a bulwark against threats to emotional safety.

**3. Turn complaints into contributions.**

Chronic complaining can be insidious, focusing on the negative and marginalizing people who are trying to be positive and optimistic. No one ever solved a problem by complaining about it. Find ways to channel complaints into positive feedback or opportunities for change.

In his book *A Complaint Free World*, Will Bowen says, "We complain to get sympathy, attention, and to avoid stepping up to something we're afraid of doing."<sup>22</sup> He challenges people to go 21 days

without complaining by switching a purple bracelet from one wrist to the other each time they catch themselves doing it.<sup>22</sup>

The Pickle Challenge for Charity is designed to be a fun yet effective cultural intervention to eradicate toxic emotional negativity by raising awareness of and intolerance for bullying, disrespect and incivility, gossip and rumor-mongering, and chronic complaining. Participating hospitals select a charity to support and then engage staff in activities such as pickle jar decorating contests, pickle parades, pickle cake bakeoffs, and declaring workplaces to be Pickle Free Zones.<sup>23</sup>

By turning complaints into contributions, The Pickle Challenge supports an important cause while making people aware of their own negative attitudes and behaviors as well as those of people around them. It promotes emotional safety by giving them a gentle and nonthreatening tool for confronting toxic emotional negativity (see *Figure 2*).

**4. Use rituals to establish behavioral expectations.**

Lee Ann Kaskutas, a senior scientist at the Alcohol Research Group, said, "There's something really powerful about groups and shared experiences. People might be skeptical about their ability to change if they're by themselves, but a group will convince them to suspend their disbelief. A community creates belief."<sup>24</sup> Among the earliest signs of human civilization are artifacts related to rituals. Across all cultures, rituals have helped to define a shared sense of identity and enforce mutual expectations. Simple rituals can be used to promote a

**Figure 1: The Twelve Core Action Values**

Master Values Coach Lori Forbus in the Culture of Ownership Classroom at Midland Memorial Hospital where *The Twelve Core Action Values* course outline is displayed.



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greater sense of emotional safety. Group rituals can be a counterweight to the complaining and commiserating that rarely make things better and usually contribute to greater anxiety and depression. Use rituals to reinforce positive attitudes and behaviors and to create positive peer support.

At each morning and afternoon staff huddle, the environmental services staff at Children's Hospital New Orleans performs The Pickle Pledge. They all know the words by heart and their positive example has had an impact on culture throughout the organization. According to Joe Ward, Director of Environmental Services and Guest Services, "I have heard from my team members that including the Pickle Pledge in our daily huddles has helped them to be happier and more positive in their personal and home lives, not just at work."

### 5. Complement data with case studies.

Case studies can play an important role in supporting EBP. They can "engage learners in reflection and brainstorming, [identify] priorities and barriers to practice change, and [determine] the timing of implementation."<sup>25</sup> But as the marketing aphorism states, data tells but story sells. "Stories are data with a soul," Brené Brown says.

Bob Dent, former CNO at Midland Memorial Hospital in Midland Texas, recounted a story of how a manager told a nurse that he had to join in reciting each daily promise of The Self-Empowerment Pledge in staff huddles.<sup>26</sup> (See Figure 3.) He refused, calling it childish, but his manager insisted.

Figure 2: The Pickle Pledge



**I've Taken  
The Pickle Pledge**

**"I will turn every complaint  
into either a blessing or  
constructive suggestion."**

By taking **The Pickle Pledge**, I am promising myself that I will no longer waste my time and energy on blaming, complaining, and gossiping, nor will I commiserate with those who steal my energy with their blaming, complaining, and gossiping.

\*So called because chronic complainers look like they were born with a dill pickle stuck in their mouths.  
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At the time, no one knew that this nurse had a substance use disorder and was stealing opioids from the medication room for his personal use. The cognitive dissonance created by reciting each day's promise, knowing that he'd break that promise before the end of his shift, finally became too much for him to bear. He admitted that he had a problem, and the hospital helped him go through a treatment program. Following rehabilitation, he returned to his work as a nurse. The courage of his manager to insist that he participate, and his own humility in acknowledging that he needed help, doubtless kept him from negative outcomes. Seven simple promises helped changed the trajectory of this nurse's life.

### 6. Communicate and enforce zero tolerance behaviors to protect staff.

Violence against healthcare workers is an ever-present threat that has been increasing over the

past several years. Many physicians and nurses report that they've personally been victims of workplace violence at least once throughout their careers. Cape Coral Hospital uses visual indicators to help healthcare workers identify and flag potentially violent and combative patients. They're flagged with standard signage posted on the patient's doorframe and wear an orange wristband.

Scripps Health in San Diego has prominently visible posters throughout that read: "There is **zero tolerance** for all forms of aggression. Incidents may result in removal from this facility and prosecution. Administration supports staff in pressing charges for aggressive behavior they encounter while caring for patients."<sup>27</sup>

### 7. Reduce stigma related to mental health.

One of the most important steps to promote a culture of emotional

**Figure 3: The Self-Empowerment Pledge**

## THE SELF EMPOWERMENT PLEDGE

### Seven Simple Promises That Will Change Your Life

<p><b>Monday's Promise: Responsibility</b> I will take complete responsibility for my health, my happiness, my success, and my life, and will not blame others for my problems or predicaments.</p>	<p><b>Tuesday's Promise: Accountability</b> I will not allow low self-esteem, self-limiting beliefs, or the negativity of others to prevent me from achieving my authentic goals and from becoming the person I am meant to be.</p>	<p><b>Wednesday's Promise: Determination</b> I will do the things I'm afraid to do, but which I know should be done. Sometimes this will mean asking for help to do that which I cannot do by myself.</p>
<p><b>Thursday's Promise: Contribution</b> I will earn the help I need in advance by helping other people now, and repay the help I receive by serving others later.</p>	<p><b>Friday's Promise: Resilience</b> I will face rejection and failure with courage, awareness, and perseverance, making these experiences the platform for future acceptance and success.</p>	<p><b>Saturday's Promise: Perspective</b> Though I might not understand why adversity happens, by my conscious choice I will find strength, compassion, and grace through my trials.</p>
<p><b>Sunday's Promise: Faith</b> My faith and my gratitude for all that I have been blessed with will shine through in my attitudes and in my actions.</p>		

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safety is to overcome the stigma associated with asking for help for mental health and emotional well-being. The Nedlog Rule is an antidote to this stigma. Nedlog is the word *golden* spelled backwards (it's not in the dictionary—yet). The Nedlog Rule is the Golden Rule in reverse: Anything you'd be willing to do for others if they asked (the Golden Rule), be willing to ask for that same help yourself when you need it. Embedding The Nedlog Rule into the fabric of your cultural DNA can help reduce the stigma associated with asking for help, especially when it comes to mental health and emotional well-being.

When it becomes part of the organization's vernacular, some-

one can simply say to a colleague, chaplain, or counselor, "I need a Nedlog moment" or call Human Resources or the employee-assistance program and say, "I need a Nedlog appointment."

**8. Use peer-to-peer mechanisms for support and recognition.**

One of the most important things we've learned during the pandemic is the importance of having real-time support for employees struggling with emotional turmoil or crises. In these situations, people need support immediately, not when they can get an appointment with a counselor or the employee health program. Helping Healers Heal and similar programs teach frontline staff basic principles for

supporting colleagues who are struggling emotionally.<sup>28</sup>

**9. Embrace hope and courage.**

One occasionally hears leaders say that "hope isn't a strategy." True enough, but without hope even the most brilliant strategy is doomed to fail. In *The True Believer*, Eric Hoffer wrote that anyone who'd change the world, or a corner of the world, must have the ability to "spark and fan an extravagant hope."<sup>29</sup> For healthcare leaders today, creating a strategy to spark and fan extravagant hope should be one of the highest priorities. Hope is the ultimate bulwark against threats to emotional safety.

The Stockdale Paradox, popularized by Jim Collins, is based

upon the philosophy that Vice Admiral James Stockdale used to sustain the hope and courage of his comrades being held in a North Vietnamese prisoner of war camp.<sup>30</sup> It entails simultaneously facing the reality of the current situation no matter how difficult while sustaining unflinching faith in a positive outcome no matter how long that will take.<sup>30</sup>

Many of the challenges in healthcare today have no quick or easy solutions. Leaders must be transparent in acknowledging those problems and their limitations in quickly fixing those problems while “sparking and fanning an extravagant hope” that they’ll be resolved. Think of it as taking off rose-colored glasses and replacing them with rose-colored binoculars for seeing and creating a brighter future. **NM**

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The authors have disclosed no financial relationships related to this article.

DOI-10.1097/01.NUMA.0000891468.54597.90