

AHNA Organizational Values: *Guiding Our “Way of Being”*

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In 1980, Charlotte (Charlie) McGuire, AHNA’s founder, brought together a small group of nurses who were angry, “disillusioned and disappointed with conventional healthcare” (AHNA, 2008).

This small group shared some basic personal values. These values provided a foundation for sharing a collective consciousness that formed a group structure and process – a guiding light for the development of AHNA. Over the years, the values resonated as a frequency that has attracted thousands of others to our organization.

Values of an organization are an extension of the personal values of its members. “Organisational values identify the principles and ethics by which the organisation and its members conduct themselves and their activities. Often, they’re the product of tradition and the attitudes and actions of founders and/or influential leaders, imitated and passed on” (McFarlane, 2013, p. 1). During our 2016 strategic planning process, the AHNA Board of Directors realized that we had a vision, mission, and goals, yet we found no reference to the personal values that inherently brought and bound AHNA’s founding nurses together. Thus, the board determined it was time to clearly identify and document the organizational values¹ that guide AHNA.

Jim Collins (2000), the author of *Good to Great*, indicates that “I’ve never encountered an organization...that could not identify a set of shared values. The key is to start with the individual and proceed to the organization” (para. 15). He explains that organizational values cannot be “set,” but instead must be discovered from within the members. People don’t “buy in” to these values, rather they “must be predisposed to holding them” (Collins, 2000, para. 14). Shared personal values have always existed among AHNA’s membership as “our way of being” (which can be seen in our growing

numbers). Still, to advance our growth, we must identify and describe these values that define and guide who we are as an organization. This in turn will continue to attract many more likeminded members and substantially increase holistic nursing’s influence throughout health care.

To begin to identify our current organizational values, an article was published in the February 2016 *Beginnings* magazine that sought informal feedback from members regarding personal values (Marcus, 2016). Those who responded summarized how important identifying and owning these values are to holistic nurses. Next, an educational PowerPoint describing the importance of organizational values was presented at AHNA’s 2016 annual conference during the general assembly Membership Meeting.

Conference attendees were given a copy of the personal core values printed in the *Beginnings* article and were asked to select three values from the list that answered the following four questions:

1. What core values do you bring to your work as a Holistic Nurse – values you hold to be so fundamental that you would hold them regardless of whether they are rewarded?
2. If you awoke tomorrow morning with enough money to retire for the rest of your life, would you continue to hold on to these values?
3. Can you envision these values being as valid 100 years from now as they are today?
4. If you were to start a new organization tomorrow in a different line of work, would you build the same values into the new organization regardless of its activities?

Immediately following the presentation, we all felt the powerful energy in the room, and it was clear that we needed to offer the entire membership an opportunity to submit their opinions using this same list of personal core values. Two different members suggested using the Delphi Method

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“Organisational values exist in the hands, minds, and hearts of [the members] or not at all. Organisational values drive the way we influence, how we interact with each other, and how we work together to achieve results.”
(Towerstone, 2016)

¹ The AHNA Organizational Values are different from and not to be confused with the Core Values of Holistic Nursing printed in the Scope and Standards of Practice.

1. COMPASSION

Definition: Conscious, intentional action that recognizes, acknowledges, and responds towards the alleviation of suffering.

Observable Behaviors

- Demonstrate active listening in all communication.
- Acknowledge views and feelings expressed by others through words, tone, and body language.
- Wait for others to fully express their thoughts and verify impressions before responding.
- Forgive self and others for past or current errors or hurts.
- Engage in self-reflection.
- Engage in reflective practice and language with self, individuals, and groups toward deeper understanding.
- Provide person-centered, holistic care.
- Advocate for the rights of vulnerable individuals and populations.
- Publicly advocate for the addition of holistic principles within the healthcare industry.

2. AUTHENTICITY

Definition: Courageously and consistently being transparent, honest, genuine, and present.

Observable Behaviors

- Demonstrates accountability by acknowledging mistakes and seeking to rectify the situation.
- Acknowledges and honors vulnerability as part of the human experience.

- Solicits feedback, contributions, viewpoints, and options openly with others.
- Promotes transparency by sharing rationale and intent for decisions and actions.
- Consistently aligns thoughts, words, and actions to build trusting relationships.
- Courageously stands up for beliefs.

3. INTEGRITY

Definition: The state of being whole and undivided; the congruent harmony of parts working together in a state of aligned action.

Observable Behaviors

- People do what they say they will.
- Values are reflected in policies, mission, and goals.
- Direct and immediate feedback is shared with another who has done something wrong, bothersome, or concerning.
- Opinions are requested and appreciated.
- Taking a stand even when it is a dissenting opinion.
- Offering authentic verbal appreciation.
- Owning mistakes.
- Following through on agreements.
- Resolving disagreements is a priority.
- Completing assignments and arriving at meetings on time.
- Individualized modeling “ways of being” as translation of Holistic Nursing Principles.

4. BALANCE

Definition: An ongoing, adaptive interaction of elements and forces resulting in the resilience and sustainability of a system.

Observable Behaviors

- Demonstrates open and non-judgmental interactions.
- Demonstrates ability to be responsive rather than reactive.
- Encourages innovation and creativity *through collaboration*.
- Negotiates a respectful compromise in the best interest of all.
- Promotes *and supports* self-care.

5. COMMUNICATION

Definition: A multifaceted process of connection in which messages are exchanged with the intention of fully conveying their meaning in an open and transparent manner.

Observable Behaviors

- Uses the CLEAR technique when receiving and delivering information: “Center, Listen Wholeheartedly, Empathize, Attend, Respect” (Thornton, 2008).
- Provides information and feedback through context, timeliness, cultural implications, and methods.
- Demonstrates presence through body language, vocal inflection, and silence.
- Initiates opportunities for dialogue.

This document was adopted by the AHNA Board of Directors in June 2018.

(Hsu & Sandford, 2007). After reviewing this method, it was selected as the framework for collecting data from the membership regarding values.

Framework

The Delphi Method “is designed as a group communication process which aims to achieve a convergence of opinion on a specific real-world issue” (Hsu & Sandford, 2007, p. 1). The method uses a feedback process as a series of rounds which allows each participant in the group to be aware of a range of opinions (Ludwig, 1994). Following the Delphi Model of utilizing “rounds,” the following question was added to the 2018-2022 strategic planning membership survey (which was distributed to all current AHNA members in August 2017):

What organizational values from the following list would you associate with and believe should guide the organizational function and direction of AHNA?

Participants were asked to choose and rank 10 organizational values from a list of 90. For the ranking, we used a scale of 1 to 10 with 1 being the most important and 10 being the least important.

A total of 1,049 members completed the survey, which constituted approximately 25% of the membership at that time. To determine the top organizational values based on rank and number of votes, we assigned points to the rankings in reverse order. First place rankings received 10 points per vote, second place rankings received nine points, and so on declining by ranking with 10th place receiving only one point per vote. The points were then tallied to calculate a total score for each of the 90 organizational values listed on the survey. Twenty-nine of the 90 values received a score between 900 and 2,574 points. Of those 29, seven values received a score of more than 1,800 points. The eighth highest value scored more than 150 points lower than the seventh highest value on the list. The Board of Directors determined that five values were to be chosen and that 1,800 points would be the cutoff for consideration.

It is interesting to note that the difference in total between the fourth (Balance) and fifth (Health) values was only eight points and between the sixth (Communication) and seventh (Collaboration) values was also eight points. It was determined that due to close similarity in ranking, the two sets of similar values would be combined. Data analysis resulted in the following ranking of organizational values.

1. Compassion
2. Authenticity
3. Integrity
4. Balance (Health)
5. Communication (Collaboration)

Forming the Task Force

After reviewing the survey data, it was clear that a task force was needed to perform the work of defining the top five values

AHNA Values Task Force Members

Thank you to our task force members for their commitment and dedication to this project: Jalma Marcus, Kim Holden, Barry Gallison, Liz Loeper, Padma Dyvine, Karen Wexell, Maggie King, Surita Chaudhry, Tina Cuellar.

and their corresponding observable behaviors. In September 2016, the chair of the task force contacted all the members presently serving on AHNA Committees (Board, Practice, Research, Education and Bylaws) as well as those who had expressed a direct interest in participating in the process, to determine interest and availability. Eight members volunteered to join the chair in creating a task force. The group was diverse and representative of the AHNA membership, comprised of certified holistic nurses, nurse board members, clinicians, academics, and nurse entrepreneurs from different regions across the country.

Holistic Group Dynamics

Our project workflow was enhanced by the energy and enthusiasm of the group. We selected a web-based platform for project management, and resource documents were uploaded, including the AHNA membership survey results and journal articles related to organizational values and observable behaviors. To start, the chair posted a first draft for the value of “Integrity” as a model template and invited the group to respond. Group members shared thoughts and remained open-minded about other ideas and views related to the value. Over a 19-day period, suggestions were considered and folded into the document until consensus was reached.

Subsequently, the chair formed the group into partners (referred to as “duets”) and identified which value each duet would work on. This was done through the expedient randomization technique of picking names from a hat. An intuitive strategy at this point was not to prescribe a specific methodology, but rather to honor the different ways of knowing that each partner would bring to the work. The duets used a variety of strategies and resources to describe the organizational values and hone them for a holistic perspective, including:

- ✓ tracing the root origin of the value,
- ✓ conducting literature searches,
- ✓ studying nursing theoretical frameworks, and
- ✓ reviewing sources from psychology, organizational science and social science, the media, visual diagrams, and concept maps.

As the work progressed, our project schedule was influenced by significant life events which included: hurricanes;

ice-storms; illness; and sadly, deaths of family members. These events occasionally resulted in some communication delays, but we maintained supportive relationships. Timelines were adjusted, and the communal nature of the group kept the work moving forward. We believe this to be due, in no small part, to the fact that each member of the task force displayed the holistic values and observable behaviors we were in the process of describing.

To finalize and approve the work, we scheduled conference calls. Each call began with a centering reflection offered by one of the task force members. The value definitions and observable behaviors were read aloud, followed by a period of silence as the group reflected on how the definitions resonated with their intuition, experience, and understanding. When consensus was reached, joy was expressed with each completed definition. Throughout the process, we supported and expressed gratitude for each other.

Outcomes

This important work completed by the values task force is a major step forward in defining and guiding who we are as an organization – the collective consciousness of AHNA. The task force collaboration on defining the values and observable behaviors took place over a four-month period, between November 8, 2017 and March 9, 2018. Following approval from the AHNA Board of Directors, these values were presented to the General Assembly at the 2018 AHNA conference in Niagara Falls, NY (see “AHNA Organizational Values” on p. 5).

Looking to the Future

Nearly four decades ago, our founding members shared the intent, vision, and mission to change the profession of nursing. As of the publication of this article, AHNA has 5,601 members who remain connected to this work. The values that were presented at the AHNA 2018 conference provide a clear framework of what we believe collectively. It is imperative that these values are implemented in the collective and individual actions of each AHNA member.

A banner with these organizational values now hangs in the entryway of the AHNA office in Topeka, Kansas. The values will be added to our website and utilized at all board meetings as guidelines for decision making. The possibilities are abundant and offer all of us another important opportunity to expand our reach and voice to energize organizational parts into an aligned whole.

The AHNA board is grateful and appreciative of the time, effort, and talent provided by each member of the Values Task Force. Their service has provided direct examples of holistic nursing’s unique “way of being.”

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