Executive Summary

- Meaningfully recognizing the extraordinary contributions of nurses is a key element in creating and sustaining healthy work environments.
- Publically honoring the work of nursing reinforces those actions and behaviors that patients, families, and colleagues truly value.
- A multi-site research study provided a 360-degree perspective of the impact this type of acknowledgment had on strengthening the nursing workforce at 20 health care organizations who use The DAISY Award to recognize extraordinary nurses.
- Data analysis of 2,195 DAISY Award nominations from patients, families, and colleagues at 20 hospitals identified 22 behavioral themes associated with extraordinary nursing.

There is no bonus for nurses who achieve an objective like a stockbroker or salesman might when hitting their objective. With nurses it is much quieter; there is usually no direct praise. With this meaningful recognition you know how what you did made a difference.

– Staff Nurse, Children’s Memorial Hospital, Chicago, IL

The concept of meaningful recognition in the form of feedback has been an integral part of our workplaces since the turn of the century when psychologists began exploring the impact motivation had on productivity (Schultz & Schultz, 2008). Recognition feedback has ranged from the traditional behaviorist stimulus response approach to a humanistic perspective that included the perceptions one experiences upon receiving this type of information. Moving from a hard science approach of measuring a pigeon’s response to a morsel of food to assessing links between feelings, experiences, and behaviors created perceptions in the scientific community that these humanistic attributes were merely “soft skills” and therefore of lesser value in the workplace (Hall & Lindzey, 1978; Schultz & Schultz, 2008). A variety of cultural influences along with the advancement of scientific inquiry and evidence demonstrating the power of feedback, communication, and collaboration, have converted these perceived “soft skills” into powerful strategies linked to saving lives and strengthening our workforces (Alspach, 2007; Coburn & Gage-Croll, 2011; DeChurch & Mesmer-Magnus, 2010; Nahrgang, Morgeson, & Hofmann, 2011; Van Bogaert, Meulemans, Vermeyen, & Van de Heyning, 2009).

Recognizing the impact acknowledgment, communication, and collaboration had in health care organizations, the American Association of Critical-Care Nurses (AACN) identified six elements associated with healthy work environments, and meaningful recognition is one of these standards (AACN, 2005). Meaningful recognition is often perceived as a simple form of feedback that involves saying thanks, complimenting another, or providing a pat on the back. While these actions are important, the core of feedback associated with meaningful recognition involves acknowledging one’s behaviors and the impact these actions had on others, ensuring the feedback is relevant to the recognized situation, and is equal to the person’s contribution (AACN, 2005). These qualities differentiate meaningful recognition from positive feedback as this type of acknowledgment often stays with a person for life.

Meaningful recognition impacts individual, group, and organizational outcomes. For the indi-
individual, meaningful recognition has been associated with elevating one’s self-esteem (Blegen et al., 1992; Froman, 2010). Positive self-esteem serves to fuel psychological capital factors (self-efficacy, optimism, and resiliency), which can in turn impact job performance; how we communicate with patients, families, and peers; and improve safety efforts (Froman, 2010; Nahrgang et al., 2011). Meaningful recognition from one’s workplace can lead to perceived organizational support where people feel personally valued by their employer (Kalisch, Lee, & Rochman, 2010; O’Driscol & Randall, 1999; Tourangeau, Cummings, Cranley, Ferron, & Harvey, 2010). The relationship between meaningful recognition, retention, and engagement indicates that when people are recognized for their contributions and feel valued by their organization, they tend to feel satisfied and engaged, increasing the odds they will stay in their current role (Carter & Tourangeau, 2012; Chan & Morrison, 2000).

Job embeddedness (one’s perceived connection with his or her team and organization; the assessment of fit between his or her skill set and the job; and perceptions of the sacrifice he or she would make upon leaving a job) has also been linked to meaningful recognition and strengthening one’s workplace commitment (Bargagliotti, 2012, Hayes et al., 2006; Lu, White, & Barriball, 2005). Work group cohesion – the degree of connection one feels toward his or her colleagues and motivation to keep these relationships – has also been shown to be a by-product of meaningful recognition (Cowden & Cummings, 2012; Tourangeau & Cranley, 2006). While it’s no surprise that self-esteem, perceived organizational support, retention, organizational commitment, job embeddedness, and work group cohesion impact job satisfaction (Armstrong, Laschinger, & Wong, 2009; Bargagliotti, 2012; Qassem, Shea, Connor, & Casarett, 2007; Wong, Laschinger, & Cummings, 2010), these relationships appear to contain a degree of reciprocity (American Psychological Association, 2012).

Although the evidence identified multiple links between meaningful recognition and individual and organizational outcomes, the impact of this type of acknowledgement is often coupled with other variables under study. Our review of the literature did not yield any study focusing solely on the impact of meaningful recognition. The purpose of this research was to capture the impact of meaningful recognition by illustrating nursing actions that patients, family members, and colleagues valued, describing nurses’ experiences associated with being formally and publically recognized for their work, and identifying nurse leader observations of how this type of acknowledgment strengthened their workforce.

The DAISY Foundation

Operationalizing meaningful recognition, our research team partnered with The DAISY Foundation, a not-for-profit organization that formally recognizes the contributions of nurses. After the loss of their 33-year-old son Patrick, co-founders Bonnie and Mark Barnes explained that during the 8 weeks Pat was hospitalized, “We were so awestruck by Pat’s nurses and the way they cared for us,” they created The DAISY Award to thank nurses for the extraordinary work they do every day. Now utilized in over 1,300 health care facilities across the globe, patients, families, and/or colleagues recognize extraordinary nurses by nominating them for The DAISY Award. Emphasizing the art of nursing, each hospital designates the criteria they deem “extraordinary.” A committee of staff nurses reviews the nominations to determine which nurses receive The DAISY Awards.

Methods

Both convenience and random-sampling techniques were utilized to recruit health care organizations for this research. For the convenience sample, The DAISY Foundation identified 16 health care facilities that had successfully integrated meaningful recognition into the fabric of their organization’s culture. These 16 facilities received a letter from The DAISY Foundation describing the study and inviting them to contact the research team if they were interested in participating. All 16 facilities contacted the research team and 11 agreed to participate in this study.

For the random sample, 19 facilities were randomly selected from the pool of 800 health care organizations utilizing The DAISY Award at the time of this research. The same invitation was sent to these 19 sites. Each site contacted the research team and nine agreed to participate in this study. A total of 20 health care organizations from 14 states participated in this research (see Figure 1) and site demographics are presented in Table 1.

Institutional review board (IRB) approval was obtained although one IRB determined that the nature of the research did not require human studies approval. In two other facilities, senior hospital and human resources leadership reviewed the research protocol and approved their organization’s participation.

Collecting the Data

Our study encompassed three data collection phases: (a) content analyzing 2,195 blinded DAISY Award nominations to identify patient, family member, and peer perceptions of the behavioral patterns associated with extraordinary nursing; (b) interviewing 42 randomly selected DAISY Award Honorees to gain insight about the impact this kind of meaningful recognition had on them; and (c)
interviewing 21 CNOs (a leadership change at one hospital occurred during the study and both CNOs were interviewed) to assess the cultural influences associated with recognizing the work of extraordinary nurses.

**Phase One: Meaningful Recognition**

Identifying the behavioral patterns associated with extraordinary nursing. A coordinator designated by the CNO at each organization collected and copied the facility’s DAISY Award nominations from 2006 to 2010, labeled each nomination as Honoree (DAISY Award recipient) or Nominee (not chosen to receive the award), and blinded all patient, Honoree, and Nominee identifiers. The research team received a total of 2,195 nominations (see Table 2).

Upon receiving the nominations, each one was individually numbered and coded by hospital and as Nominee or Honoree status by our research team. Each paper nomination was transcribed in its entirety into a database. Random sampling of nominations to ensure accuracy occurred throughout the data-entry process. Electronic nominations were coded as described previously and entered into the database. Since a part of the research design involved a computer-generated content analysis, misspelled words were corrected and abbreviations were spelled out so they would not be misinterpreted. The software was not sensitive to grammatical errors so no corrections occurred.

### Table 1.
**Site Demographics**

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic medical center</td>
<td>6</td>
</tr>
<tr>
<td>Community hospital</td>
<td>12</td>
</tr>
<tr>
<td>Rural facility</td>
<td>1</td>
</tr>
<tr>
<td>Stand-alone hospice</td>
<td>1</td>
</tr>
<tr>
<td>Pediatric facility</td>
<td>4</td>
</tr>
<tr>
<td>Adult facility</td>
<td>16</td>
</tr>
<tr>
<td>Unionized nurses</td>
<td>3</td>
</tr>
<tr>
<td>Designated Magnet</td>
<td>4</td>
</tr>
<tr>
<td>On the Magnet journey</td>
<td>11</td>
</tr>
<tr>
<td>Not pursuing Magnet at this time</td>
<td>5</td>
</tr>
<tr>
<td>Beacon Award</td>
<td>3</td>
</tr>
<tr>
<td>Number of licensed beds/facility</td>
<td></td>
</tr>
<tr>
<td>50-99:</td>
<td>3</td>
</tr>
<tr>
<td>100-199:</td>
<td>4</td>
</tr>
<tr>
<td>200-299:</td>
<td>3</td>
</tr>
<tr>
<td>400-499:</td>
<td>4</td>
</tr>
<tr>
<td>500+:</td>
<td>6</td>
</tr>
<tr>
<td>Years utilizing The DAISY Award</td>
<td></td>
</tr>
<tr>
<td>1-7 years Mean = 4 years</td>
<td></td>
</tr>
<tr>
<td>Monthly DAISY Awards</td>
<td>11</td>
</tr>
<tr>
<td>Quarterly DAISY Awards</td>
<td>8</td>
</tr>
<tr>
<td>Every other month DAISY Awards</td>
<td>1</td>
</tr>
</tbody>
</table>

### Table 2.
**Nomination Characteristics**

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Handwritten/paper</td>
<td>1,525</td>
</tr>
<tr>
<td>Electronic</td>
<td>670</td>
</tr>
<tr>
<td>Honorees</td>
<td>650</td>
</tr>
<tr>
<td>Nominees</td>
<td>1,545</td>
</tr>
<tr>
<td>From patients or family members</td>
<td>45%</td>
</tr>
<tr>
<td>From peers</td>
<td>55%</td>
</tr>
</tbody>
</table>

### Figure 1.
**Participating Facilities**

- Aurora Lakeland Medical Center (Elkhorn, WI)
- Aurora Medical Center - Kenosha (Kenosha, WI)
- Aurora Memorial Hospital of Burlington (Burlington, WI)
- Baptist Memorial Hospital - Collierville (Collierville, TN)
- Baptist Memorial Hospital - Memphis (Memphis, TN)
- Children’s Hospital and Medical Center (Omaha, NE)
- Children’s Hospital Los Angeles (Los Angeles, CA)
- Children’s Hospital of Philadelphia (Philadelphia, PA)
- Children’s Memorial Hospital (Chicago, IL)
- Exempla Good Samaritan Medical Center (Lafayette, CO)
- Exempla Lutheran Medical Center (Wheat Ridge, CO)
- Kalispell Regional Medical Center (Kalispell, MT)
- St. Joseph East - Lexington (Lexington, KY)
- St. Joseph Mercy Oakland Hospital (Pontiac, MI)
- St. Joseph’s Hospital and Medical Center (Phoenix, AZ)
- TriHealth - Bethesda North Hospital (Cincinnati, OH)
- TriHealth - Good Samaritan Hospital (Cincinnati, OH)
- TriHealth - Hospice of Cincinnati (Cincinnati, OH)
- University of California - Davis Medical Center (Sacramento, CA)
- Westchester Medical Center (Valhalla, NY)
A pilot content analysis utilizing 50 randomly selected nominations initially yielded 27 behavioral themes associated with patient, family, and colleague perceptions that lead to recognizing an extraordinary nurse. The literature review and computerized content analysis of the 50 nominations supported these and provided an objective convergent approach to identifying the emerging behavioral themes. The pilot analysis also explored the feasibility of conducting both qualitative and quantitative analyses. The team concluded that attempting to quantify nursing behaviors patients, families, and peers deemed recognition-worthy reduced the art of nursing gestalt conveyed through the nominations. The pilot revealed most of the nominators told stories by describing patterns of behaviors associated with care delivery and/or collegial work. Each nomination was coded for general impressions of these behavioral patterns. Coding did not encompass word/frequency counts or “picking apart phrases.”

Following the pilot study, two content analyses were performed on the data. The first explored 710 randomly selected nominations obtained from our nomination pool representing 18 hospitals (two facilities provided interview data only). The second encompassed a computerized content analysis of all 2,195 nominations.

The randomization process for the first analysis was designed so the selection reflected the percentage of nominations received by each hospital which allowed equal representation of each facility in our sample. Research team members individually coded in batches 50-100 nominations. After individually coding a “batch,” research team members met as a group to discuss and reach consensus on each assigned code.

The second content analysis involved entering all 2,195 nominations into Diction® version 5, a text analytic software based on the rules of linguistics. Diction compared the data to its normative database consisting of 20,000 documents (newspaper articles, corporate reports, scripts, and a sundry of modern-day communication). This analysis identified trends in relation to predetermined Diction variables associated with success and assessed the nomination text uniqueness.

Phase Two: The Individual Impact of Meaningful Recognition

Interviews with 42 Daisy Award Honorees. Each coordinator randomly selected 10 DAISY Award Honorees from his or her “pool” of recipients. The coordinator sent each selected Honoree a letter created by the research team describing the study and inviting him or her to participate in a phone interview. Honorees choosing to participate contacted the research team. Two hundred letters were sent (2 waves of 100 each), and 42 Honorees from 20 hospitals participated in a 20-30 minute phone interview with a research team member. Ten open-ended questions were utilized to identify the individual impact of receiving meaningful recognition. The research team utilized a thematic content-analysis approach to explore the Honoree interview data.

Phase Three: The Cultural Influences of Meaningful Recognition

Interviews with 21 nurse leaders utilizing The DAISY Award in their facilities. Nine open-ended questions were utilized during a 30-minute phone interview with each CNO to assess the cultural impact associated with acknowledging extraordinary nurses. Content analysis was also utilized to explore CNO perceptions.

Results

Four key findings emerged from our data analyses:

1. The meaningful recognition process can elevate the value of nursing by providing patients, family members, and colleagues with a vehicle to recognize the extraordinary work of nurses.

2. Through a formalized meaningful recognition process, patients, family members, and colleagues can provide in their own words real-time feedback describing what mattered to them during their hospitalization and identify how behaviors of an extraordinary nurse made a difference.

3. Providing patients, families, and peers with a process to recognize nurses in a meaningful manner augments patient satisfaction data by illuminating the “detail” associated with these scores.

4. Formally recognizing extraordinary nursing through celebration can assist in shaping and driving an organization’s culture and strengthening one’s workforce.

Elevating the Value of Nursing by Catching Nurses Doing Something Extraordinary

As a meaningful recognition process, The DAISY Award provided the facilities in our study with the tools to spotlight the extraordinary nursing occurring in their organizations. This type of meaningful recognition process provided patients, families, and peers with a vehicle to express gratitude and convey their perceptions regarding the impact of extraordinary nursing. As one patient wrote, “I refer to her as the person who saved my husband’s life and we are both ever so grateful to her.”

Family and patient nominations tended to describe the emotions they experienced during their extraordinary nurse encounter while peer nominations were equally powerful. Nominations from colleagues reflected observations of outstanding care delivery and the impact the nominee’s action had on their team and
work environment. Regardless whether it was patients, families, or peers recognizing extraordinary nurses, this type of data allowed CNOs to acknowledge “all the right” going on in their organizations and showcase the collective value of nursing. Or, as one CNO described, “The DAISY is a moment to stop and reflect. We know as leaders these wonderful moments happen every day.”

What Matters and How Extraordinary Nurses Make a Difference

The voice of 2,195 patients, family members, and nurse colleagues. The nominations contained thousands of behavioral descriptors describing how extraordinary nurses inspired others, instilled feelings of hope and safety, conveyed knowledge, and diminished fears in a multitude of situations. The content analyses of 710 randomly selected nominations yielded 22 behavioral themes (27 pilot study themes were revised) associated with extraordinary nursing (see Table 3) and are rank-ordered. Using the nominator’s words to describe extraordinary nursing behaviors, on average, each nomination contained actions representing three behavioral themes.

Behaviors demonstrating “genuine compassion and caring” were present in the majority of the nominations analyzed. Nominators were also astute in calling out the “professionalism” exhibited by their extraordinary nurses. Regardless of one’s nominator status, how the nurse carried him or herself influenced the patient, family member, and peer perceptions of extraordinary. A contagious positive attitude was the third most recognized attribute as peers, patients, and families recounted how a nurse setting the work environment tone helped them cope with the enormity of the situations they were facing. “Accomplishes more than ever expected” encompassed those behaviors described as going beyond “above and beyond” and these acts conveyed to the patients, families, and/or colleagues that they mattered and had been heard. While “teaching others” impacted one’s work environment, patients and their families also recognized a multitude of situations where the nurse as a teacher made a difference during their encounter.

According to patients, family members, and peers in our study, extraordinary nursing involved two key components. The first encompassed the nurse’s assessment skills and his or her ability to sense the clinical and psychological needs of patients, families, and/or peers. The second component revolved around the nurse’s ability to meet these needs in a way that was meaningful to patients, families, and colleagues.

Our analyses revealed that extraordinary nursing was not defined in terms of tasks but, instead, a series of behaviors used to provide care in a way that was meaningful to a patient, peer, or family member. Focusing on these behavioral elements of care delivery, our data set indicates that “extraordinary,” like beauty, is in the eyes of the beholder – each patient, family member, and peer. How nurses provide clinical expertise – the series of behaviors used to deliver care – appears to be a key factor influencing percep-

### Table 3. Behaviors Associated with Extraordinary Nursing

<table>
<thead>
<tr>
<th>Rank</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Demonstrates genuine compassion and caring</td>
</tr>
<tr>
<td>2</td>
<td>Reeks of professionalism</td>
</tr>
<tr>
<td>3</td>
<td>Contagious positive attitude</td>
</tr>
<tr>
<td>4</td>
<td>Accomplishes more than ever expected</td>
</tr>
<tr>
<td>5</td>
<td>Teaches others</td>
</tr>
<tr>
<td>6</td>
<td>Helpful</td>
</tr>
<tr>
<td>7</td>
<td>Calming/patience</td>
</tr>
<tr>
<td>8</td>
<td>Connects with family</td>
</tr>
<tr>
<td>9</td>
<td>Exalted by co-worker</td>
</tr>
<tr>
<td>10</td>
<td>Intentionally present</td>
</tr>
<tr>
<td>11</td>
<td>Tireless advocate for patients</td>
</tr>
<tr>
<td>12</td>
<td>Teamwork</td>
</tr>
<tr>
<td>13</td>
<td>Exalted by patients</td>
</tr>
<tr>
<td>14</td>
<td>Keeps patients informed</td>
</tr>
<tr>
<td>15</td>
<td>Puts patient first</td>
</tr>
<tr>
<td>16</td>
<td>Provides inspiration</td>
</tr>
<tr>
<td>17</td>
<td>Demonstrates tenacity</td>
</tr>
<tr>
<td>18</td>
<td>Calm</td>
</tr>
<tr>
<td>19</td>
<td>Relentless commitment</td>
</tr>
<tr>
<td>20</td>
<td>Communication</td>
</tr>
<tr>
<td>21</td>
<td>Nurse-Doctor collaboration</td>
</tr>
<tr>
<td>22</td>
<td>Praises others</td>
</tr>
</tbody>
</table>

Tied
tions associated with receiving extraordinary nursing and serves to define what one experiences as meaningful.

Further support of the connection between nurse care delivery behaviors and perceptions of extraordinary nursing came from our computerized content analyses of all 2,195 nominations. Providing ranges and scores on a series of pre-determined variables, Diction identifies factors that are one standard deviation or more above or below the normative range (Diction does not provide either the number of standard deviations above/below the norm or statistical significance). While our data was within the range for the majority of factors assessed by Diction, the variable Optimism was above the norm. Defined as endorsing some person, group, concept, or event, or highlighting their positive entailments, Optimism (see Table 4) linguistically equals (Praise + Satisfaction + Inspiration) – (Blame + Hardship + Denial).

While the nominators in our study were often dealing with health issues or challenging work environments, their experiences with an extraordinary nurse were more optimistic than the norm.

**Augmenting and Enriching Patient Satisfaction Scores**

The nominations provided multiple explanations of “end-user” experiences to supplement satisfaction surveys. The qualitative nature of the nominations provides the emotional detail that numeric scales are unable to capture. In addition, the nurse leaders in our study used these explicit descriptions to reinforce the behavioral elements associated with patient satisfaction.

**Utilizing Meaningful Recognition to Drive and Shape an Organization’s Culture**

Focusing on both the individual and cultural influences of meaningful recognition, we conducted separate content analyses with the Honoree and CNO interview data. During these analyses, it became apparent that combining themes from both data sets served to best represent the impact of meaningful recognition. Similar to the approach used with the nomination data, the interviewees’ words were used to describe behavioral themes associated with giving and receiving meaningful recognition. Five themes emerged from each set of interviews (see Figure 2).

The encircling “Extraordinary Is Ordinary” represents how the behaviors associated with delivering care in a meaningful way are “routine” to nursing. The theme pairing of “Extraordinary Is Ordinary” and “Recognition that Reaffirms My ‘Ordinary’ Is Extraordinary” represents CNOs acknowledging these regularly occurring extraordinary acts and the Honorees’ perspectives of how receiving this recognition validated the importance of their work.

“Nourishes Teamwork” and “Builds Team Spirit” signify the group dynamics associated with meaningful recognition. From the CNO’s perspective, this kind of acknowledgment “strengthened bonds across disciplines” as staff from all departments participated in the celebrations. While nurse leaders’ observations revolved around big picture perspectives, Honoree responses reflected the “local” impact receiving meaningful recognition had with peers.

“Inspires and Motivates Extraordinary Nursing” and “Motivation Through Self-Awareness” signify the interpersonal growth that can occur from meaningful recognition. CNOs described their big picture perspective of the short- and long-term changes they

---

**Table 4. Optimism**

<table>
<thead>
<tr>
<th>CNO Themes</th>
<th>Honoree Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extraordinary is Ordinary</td>
<td>Recognition that Reaffirms My “Ordinary” is Extraordinary</td>
</tr>
<tr>
<td>Nourishes Teamwork</td>
<td>Builds Team Spirit</td>
</tr>
<tr>
<td>Inspires and Motivates Extraordinary Nursing</td>
<td>Motivation Through Self-Awareness</td>
</tr>
<tr>
<td>Reinforces a Culture that Values Nursing</td>
<td>Reaffirms the Ministry of Nursing</td>
</tr>
<tr>
<td>Promotes Pride</td>
<td>Shock and Awe</td>
</tr>
</tbody>
</table>

**Figure 2. Themes**

- Extraordinary Is Ordinary
- Recognition that Reaffirms My “Ordinary” Is Extraordinary
- Nourishes Teamwork
- Builds Team Spirit
- Inspires and Motivates Extraordinary Nursing
- Motivation Through Self-Awareness
- Reinforces a Culture that Values Nursing
- Reaffirms the Ministry of Nursing
- Promotes Pride
- Shock and Awe
observed in the Honorees’ self-awareness as they experienced the empowerment that accompanied their actions. Honorees explaining the feelings associated with receiving meaningful recognition recounted how this acknowledgment reminded them of the difference they made and could make in the lives of others.

“Reinforces a Culture that Values Nursing” and “Reaffirms the Ministry of Nursing” represent how the symbolism associated with The DAISY Award and meaningful recognition reinforce and elevate the art of nursing within an organization. Articulating this symbolism, CNOs described how acknowledging extraordinary nurses allowed their organizations to celebrate the meaning of nursing and refocus them on “why we are here.” From an Honoree perspective, The DAISY Award’s symbolism reaffirmed the ministry of nursing by signifying the fulfillment nurses experience when they connect at a visceral level with patients, families, or colleagues. In our study, CNOs used the Honorees’ fulfillment to reinforce a culture that valued nursing.

“Promotes Pride” and “Shock and Awe,” represented CNO observations associated with providing meaningful recognition and recipient descriptions of what they experienced upon realizing they were the Honoree. Almost every CNO in our sample used the words “pride/proud” to describe reactions they observed in recipients during the award celebrations. While the CNOs observed the personal pride, “Shock and Awe” represents what the Honorees recalled upon realizing they were receiving meaningful recognition or, as these recipients described, “I was really surprised, completely surprised,” “I was shocked – like what, huh, me, who?” These reactions occurred regardless whether recognition came from a patient, family member, or colleague.

### Discussion

Whether it’s shock and awe, demonstrating pride in one’s work, nourishing a team, reaffirming the ministry of nursing, realizing the value of one’s contributions, or reigniting a person’s career, this research provides the evidence that meaningful recognition can indeed strengthen a workforce.

Acknowledging the art along with the science of nursing; reinforcing the behaviors valued by patients, family members, and colleagues; and increasing nurses’ self-awareness regarding how they make a difference in the lives of those they serve are outcomes of meaningful recognition. Each of these outcomes plays a role in creating and sustaining healthy work environments which ultimately leads to strengthening the workforce (American Association of Critical-Care Nurses, 2005; Burston & Stichler, 2010; Ulrich et al., 2009).

While it may be tempting to focus on strengthening one’s workforce by designing strategies aimed at creating extraordinary nursing, according to the patients, families, peers, and CNOs in our study, this kind of nursing already exists. The challenge of strengthening our workforce lies in implementing recognition processes which encourage and allow “all the right going on” to bubble up to the surface so employees from the bedside to the boardroom can readily identify and celebrate the extraordinary nursing occurring 24/7. Our research demonstrates that capturing these moments and providing staff with feedback reinforces the behaviors patients, families, and colleagues find meaningful and helps nurses recognize the importance of their contributions. Instituting meaningful recognition practices like The DAISY Award empowers nurses to shift our “I was just doing my job” mentality to embracing the extraordinary nature of nursing’s work and profession.

The limitations of our research are related to sampling practices that included only health care organizations utilizing The DAISY Award. These facilities have made a commitment to recognizing extraordinary nurses, and potential differences could exist between the study participants and those employees and organizations not utilizing The DAISY Award.

### Conclusion

“We spend a lot of time talking about the science of nursing. Now we can talk about the art of nursing, the compassion and caring, so now we are talking about the whole package.”

– CNO, Baptist Memorial Hospital Memphis, TN

The importance of focusing on the tangibles of patient care – the clinical aspect and science of nursing – is well documented (Coburn & Gage-Croll, 2011; Kalisch et al., 2010; Nahrgang et al., 2011). In the past 2-plus decades, research from the Institute of Medicine and AACN has demonstrated the intangible soft skills – the art of nursing – belong alongside the science of nursing. With the Hospital Consumer Assessment of Healthcare Providers and Systems rollout, “soft skill outcomes” are now linked to reimbursement, and organizations are accountable for ensuring that both tangible and intangible needs are met. Creating this accountability has shed another beam of light on the tremendous impact health care provider behaviors have on patient satisfaction, safety, work environments, and strengthening the workforce (Armstrong et al., 2009; Kalisch et al., 2010; Kupperschmidt, Kientz, Ward, & Reinholz, 2010; Schaufeli, Leiter, & Maslach, 2009; Vallerand, 2012).

Our research demonstrates meaningful recognition can link the science and art of nursing by celebrating outcomes that occur when clinical expertise is deliv-
ered in a way that is meaningful to the “end user.” Meaningful recognition processes like The DAISY Award provide data enabling nurse leaders to publicize real-time examples of nurses enhancing the patient, family, and peer experiences. The power of meaningful recognition is evident in the proliferation of hospitals using The DAISY Award and professional organizations such as the AACN, American Assembly of Men in Nursing, ANCC, American Organization of Nurse Executives, Association of Pediatric Hematology Oncology Nurses, Emergency Nurses Association, National League of Nursing, and Sigma Theta Tau recognizing the extraordinary “gold medal” efforts of The DAISY Foundation in helping nurses realize the difference they make in the lives of others.

Through meaningful recognition, nurses are empowered to acknowledge the lives they touch and reconnect with, as one nurse leader stated, “the reason we all became nurses.” Reconnecting with our profession through the feedback from patients, families, and colleagues regarding those moments when a nurse masters the art and science of nursing and celebrating these successes will increase the strength of our workforce and make our work environments healthier.

REFERENCES


Armstrong, K., Laschinger, H., & Wong, C. (2009). Workplace empowerment and Magnet hospital characteristics as predictors of patient safety cli-


DICTION 5.0. (2000). The text analytics program [user’s manual]. Austin, TX: Digitext.


continued on page 355
Strengthening the Workforce
continued from page 338

ADDITIONAL READINGS

Reprinted from Nursing Economic$, 2012, Volume 30, Number 6, pp. 331-335, 355. Reprinted with permission of the publisher, Jannetti Publications, Inc., East Holly Avenue, Box 56, Pitman, NJ 08071-0056; (856) 256-2300; FAX (856) 589-7463; Web site: www.nursingeconomics.net ; For a sample copy of the journal, please contact the publisher.