Appreciative Inquiry Survey: Discovery and Dreams of Past Chapter Presidents

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r. David Cooperrider, the founder of the Appreciative Inquiry (AI) methodology, was the keynote speaker at the Organization of Nurse Leaders of Massachusetts and Rhode Island (ONL of MA & RI, formerly the Massachusetts Organization of Nurse Executives [MONE]) annual meeting in June 2014. This ONL organization has an affiliation agreement with the American Organization of Nurse Executives (AONE). I was

being inducted there as the incoming president of ONL of MA & RI. Back in the late 1990s, I had an opportunity to take a certification course in AI from Dr. Cooperrider and have been using this methodology in my nursing career for over a decade in various settings. Several months before this annual meeting, I decided to use the AI framework to conduct an informal survey of the past presidents of ONL/MONE to inform my presidential remarks.

WHAT IS APPRECIATIVE INQUIRY?

AI is a methodology for change, a conceptual framework, a philosophy, an organizational change process, and a narrative or relational model that seeks to uncover strengths, hopes, dreams in an organization or in people. The focus of AI is on the positive potential: the best of what has been, what is, and what might be in the future. It truly respects people,

acknowledges achievements, appreciates the best within the status quo, and yet encourages people to dream and build for a better future. ^{1–3}

The basic premise of AI is that human systems grow in the direction of what they persistently ask questions about, and this propensity is strongest and most sustainable when those questions are positively asked. Change begins at the

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Box 1. What Attracted You to Join ONL/MONE Before You Agreed to Serve as President of ONL/MONE?

- 1. Many stated that it was their CNO who encouraged them to join this organization as a new nurse leader.
- 2. Many sat on committees prior to running for board.
- 3. Opportunity to network!
- 4. Learn from leaders beyond my own walls.
- 5. Expand my leadership skills.
- 6. Being able to benchmark.
- 7. Professional growth/valuable resource.
- 8. Legislative and regulatory issues.
- 9. Mission of organization.
- 10. Working with amazing leaders.
- 11. Advance the nursing profession as a collective body.
- 12. Understanding nursing at the macro level.
- 13. Find ways to give back to the nursing profession.
- 14. Connected to an organization with so many diverse agenda was fascinating.
- 15. Sense of pride.
- 16. Collegial support.
- 17. Drawn in by other nursing leaders.

CNO, chief nursing officer.

moment we ask the question, and deep change starts with positive images (words and picture) of the future, resulting in greater and sustainable changes. AI consists of a 4D cycle or phases known as discovery, dream, design, or destiny (formerly known as delivery).

The *discovery* cycle is known as the appreciating phase whereby the questions asked are about the "best of what is," exploring strengths, assets, peak experiences, and successes. It searches for the root causes of success in a person or in an organization. It represents a phase that intentionally captures the smallest of victories and not the deficits.^{1–4}

The *dream* cycle inquires about a future filled with the positive aspects uncovered in the discovery phase that inspire hope and possibility for an individual, groups of people, or an organization. It is in the dream phase that one gets to imagine an ideal future, grounded in people's real experiences that make the dream more believable and achievable.^{1–4}

The *design* cycle questions are asked that will bring about changes in the way people are currently doing things in their personal life or in organizations. This phase outlines concrete action steps that are possible. The result of this phase are design principles that will inform the changes in structures, processes, or programs that need to take place so that the dream is achievable and thus realized. ^{1–4}

The last cycle *destiny* is where the person or organization moves to fulfill its vision and find ways to build on the momentum of shared visions and ideals. It is in this phase that people continue to improve upon, learn, adjust, and improvise on their successes to get more of them. This was formerly referred to as the "delivery" phase whereby the emphasis was on action planning and implementation but does not capture the unleashing of the creative energy

of the individual or organization to make further sustainable changes. 1-4

THE SURVEY

As the incoming president, I was very interested about what was valued or memorable to these past chapter presidents and to take the best of what was, to envision a preferred future for ONL of MA & RI. Therefore, I conducted an e-mail survey of 21 past presidents who had accurate e-mail accounts and who by virtue of completing the survey were giving informed consent. The survey consisted of 4 questions concerning the discovery and dream phases only. The request to participate via e-mail went out to these 21 past presidents with a 4-week deadline to participate. Sixteen past presidents returned the survey, with a response rate of 76%. Three of the 4 questions specifically asked were related to the discovery phase, and the fourth one inquired about the dream phase. They consisted of:

- 1. What attracted you to join ONL/MONE before you agreed to serve as president of ONL/MONE?
- 2. What was 1 of your more memorable experiences as president of ONL/MONE?
- 3. What did you value about being president of ONL/MONE?
- 4. Imagine that is 2020 and ONL is continuing to flourish as an organization of nurse leaders; what do you see that is new, different, or better?

RESULTS

One of the past presidents answered the first question (What attracted you to join ONL/MONE before you agreed to serve as president?) very differently from the other participants. She felt it was her "social responsibility and professional obligation as a professional nurse to volunteer." She even defined volunteerism as "the principle of devoting time and energy for the benefit of other people in the community as a social responsibility rather than for any financial reward." She also stated that it was important for her to "harness those voices into a tour deforce to compel change more effectively." The other 15 participants answered very consistently, and responses overlapped. The responses range from the most frequent response to those unique, which can be found in Box 1.

The response to question #2 about memorable experiences were mostly unique to each respondent as I expected, given each past president had varied challenges and milestones during their presidential year (*Box 2*). As an organization, ONL/MONE often engaged in developing strategic plans every 3 or so years. It was not surprising to see that those plans were memorable to 3 of the respondents. This organization has also been in opposition to any Massachusetts Nursing Association (MNA)-mandated staffing ratios bills introduced into the state legislature for over a decade. ONL leaders were often giving opposing testimony to the state legislature. Again, it was not too surprising for some of them to speak to successfully defeating the bills or debating an influential person from MNA with an opposing view. Three past presidents spoke about the 2010 report entitled *The Future of Nursing: Leading Change*,

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