PROFESSIONAL PRACTICE:
NURSING AS A CAREER, NOT A JOB

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Objective

At the end of this course, the participant will be inspired to think about his/her contribution to the field of nursing
Nursing Retention

Are the following statements True or False?

1. It is projected that by 2020, the U.S. will be in need of 800,000 additional nurses.

2. New nurses are leaving the profession at a staggering rate.

3. Nurses who leave the profession are usually ones we can afford to lose anyway.

4. The nursing shortage presents a significant stressor in the work environment.
American Nurses Association: Tenets Characteristic of Nursing Practice

1. Nursing practice is individualized.
2. Nurses coordinate care by establishing partnerships.
3. Caring is essential to the practice of the registered nurse.
4. Registered nurses use the nursing process to plan and provide individualized care to their healthcare consumers.
5. A strong link exists between the professional work environment and the registered nurse’s ability to provide quality healthcare and achieve optimal outcomes.

ANA, 2010.
Maslow’s Triangle

- Self-Actualization
- Esteem
- Love/Belonging
- Safety
- Physical
Sobering Statistics:

- In 2011, an **American Nurses Association Health and Safety Survey** reported an incidence of 34% of reported on-the-job assault. This demonstrated a 9% increase from 25% reported in 2001. (ANA, 2011)

- 30-54% of new-graduate nurses leave their positions (or sometimes the profession!) within the first year after graduation, in part due to a non-supportive work environment. (Moran, 2012)
Imbalance of Power

Organizational structure in healthcare organizations often provide for vertical structures with higher and lower levels—providing a foundation for the imbalance of power.
"It is contended that because nurses are dominated (and by implication, oppressed) by a patriarchal system headed by doctors, administrators and marginalized nurse managers, nurses lower down the hierarchy of power resort to aggression among themselves."

(Griffin, 2004, p. 257)
Why are new nurses more vulnerable?

- Work is more subject to micro-managing or scrutiny
- Known areas of knowledge need
- No past experience as registered nurses
STUDENT DRIVER
PLEASE BE PATIENT
“The public has a right to expect registered nurses to demonstrate professional competence throughout their careers. ANA believes the registered nurse is individually responsible and accountable for maintaining professional competence.” ANA, 2014.
What is lateral violence?

“Lateral violence refers to acts that occur between colleagues. Bullying is described as acts perpetrated by one in a higher level of authority and occur over time. These acts can be covert or overt acts of verbal or non-verbal aggression.” (ANA, 2013).

Also known as horizontal violence, incivility, workplace bullying, harassment, mobbing, aggression, and workplace violence, relational aggression or nurses “eating their young”…..
Overt and covert behaviors associated with lateral violence in the nursing workplace

- Gossip
- Passive-aggressive communication
- Innuendos
- Criticism
- Belittling
- Rolling eyes in disgust
- Sneering
- Threats
- Physical abuse
- Ostracism
- Isolation
- Sarcasm
- Undermining work
- Setting up to fail
- Withholding info
- Pressure to overwork
- Condescending communication
- Threats of repercussions for speaking out
Incidence of lateral violence in nursing

Between 44-85% of nurses are victims of lateral violence

Up to 93% of nurses report witnessing lateral violence

(Christie & Jones, 2013)
Right of Passage?

“Tolerance for lateral violence is seen historically in the context of a right of passage.” (Griffin, 2004, p. 258).
Literature search....WHY???

- Low self esteem
- Caretakers
- Saying "yes" when we mean "no"
- Female dominated profession
What is the impact?

- 40% of clinicians “kept quiet” due to an intimidating colleague
- Unmanaged anger contributes to hypertension, coronary artery disease, depression, psychological problems, and other health problems
- Low staff morale, increased absenteeism, attrition of staff, deterioration in the quality of patient care
- **Nurses stop asking questions, seeking validation or knowledge, and even building necessary knowledge base required!**
- Nurses leave the profession, contributing to the nursing shortage.
In July 2008, The Joint Commission issued a Sentinel Event Alert that discussed intimidating and disruptive behavior that undermines a culture of safety.

In January 2009, TJC issued leadership standards that require hospital leaders to create and maintain a culture of safety and quality, acknowledging that “behavior that intimidates others and affects morale or staff turnover can be harmful to patient care.”
What can we do?

- Zero tolerance towards violent or abusive behaviors
- Protection from retribution, if reported
- Utilize employee assistance program
- Interrupt violence
- Assess the nursing unit and raise awareness
- Brainstorm solutions and encourage dialogue
- Create unit specific guidelines
- Role model professional nursing behavior
Role Model: Individual who exemplifies through his or her behavior how a specific role is to be enacted

- Uses established practice standards and evaluates new hire RNs using same practice standards
- Demonstrates safe and correct operation of equipment used in job.
- Uses resources effectively, appropriately, and efficiently
- Models reflective practice, engaging others to gain new perspectives and insights!
- Maintains effective working relationships with all members of the healthcare team!
Responsibility of all nurses to shift the culture

“One preceptor acting in a welcoming way has the power to change the experience from negative to positive for one new hire. A new hire who is welcomed and supported will respond to others in the same way. Sustained acts of kindness can change the world.”

(Modic, 2012, p. 300).
How can I help myself to help others?

**Self-Awareness**
What am I doing/feeling? Am I avoiding? Re-experiencing? Is this stress, a type of grief, compassion fatigue or burnout?

**Set balanced boundaries**
Take a time out, know limits, regular vacations, Balance of ‘yes’ and ‘no’

**Self Care**
Rest, Health, Exercise, Play, Meditation/Mindfulness, Body work.

**Personal Growth**
Nurture curiosity, creativity, play, spirituality Learn a new way to manage stress
Back to Maslow
Professional Growth
The Future of Nursing, Leading Change, Advancing Health recommendations:

- Increase the proportion of nurses with a baccalaureate degree to 80% by 2020
- Double the number of nurses with a doctorate by 2020
- Ensure that nurses engage in lifelong learning
- Implement nurse residency programs
Evidence Based Practice (EBP) in oncology nursing

- Guide nursing interventions that are demonstrated to enhance the quality and outcome of care

- Putting Evidence into Practice (PEP) - ONS Resource
  - Provide evidence-based interventions for patient care and teaching on 20 cancer-related topics (ranks each intervention)
Life-long learning

- Evidence-based practice
- Continuing Education
- Certification
- Publication
- Higher education

- Advanced nursing degrees recognized by the National Council of State Boards of Nursing:
  - Advanced Practice Registered Nurse (APRN)
    - Nurse Anesthetist (CRNA)
    - Nurse Midwife (CNM)
    - Nurse Practitioner (NP)
    - Clinical Nurse Specialist (CNS)
Benefits of Certification

- Positive impact on patient and organizational outcomes
- Contributes to personal accomplishment and satisfaction
- Validation of specialized knowledge
- Enhances staff empowerment
- Decreases nursing turnover
- Increase in satisfaction of professional nursing workforce
“Certified oncology nurses scored higher than noncertified nurses related to knowledge of nausea and pain management in oncology patients”

What’s next for you?