

EVERYDAY LEADERSHIP FOR NURSES

MAY 13, 2024



LOLLIPOP MOMENT

LEADERSHIP

EVERYDAY CONVERSATIONS

- FORMAL OR INFORMAL
- ADVOCATE
- BUILD & SHARE KNOWLEDGE
- ACCOUNTABILITY
- SELF-GROWTH



OUR UNDERSTANDING OF THE WORLD

STANDARDS of PRACTICE

ACCOUNTABILITY
REFLECT VALUES

LPN



- INDIVIDUAL LEADERSHIP
- SELF-REGULATION
- LEAD & CONTRIBUTE
- SAFE & INCLUSIVE CULTURE
- ETHICAL VALUES
- INTEGRITY OF THE PROFESSION

REFLECTION

COMMUNICATE

LOOK BACK

SHOW UP

STEP IN

STEP UP

ENACT A PLAN

TAKE ACTION

PRECEPTORSHIP

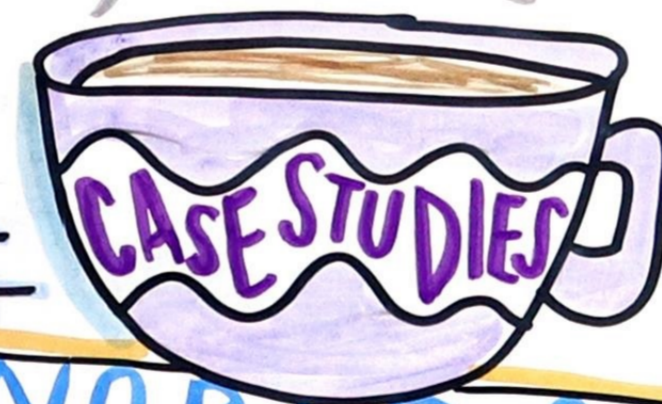
- TEACH
- COUNSEL
- SERVE

MENTORSHIP

- GUIDE
- COUNSEL
- TEACH LEARNERS

TIME LIMIT

CLARIFY
ARTICULATE
REQUEST
EMPHASIZE
ENCOURAGE



WORLD CAFE

REMINDE THEM ABOUT SOPs

WHAT WAS THE INTENTION OF THE VISIT

ENCOURAGE THEM ABOUT RELATIONSHIP FOR QUALITY OF CARE FOR ALL

RESEARCH POTENTIAL OUTDATED PRACTICES

RN

PROFESSIONAL RELATIONSHIPS GROWTH

NP

- ADVOCACY & LEADERSHIP
- DEVELOP & IMPLEMENT INITIATIVES



-BRENE BROWN

TRANSITION TO PRACTICE

MAY 13, 2024



MUST CONTINUE TO EVOLVE

SUPPORTIVE ENVIRONMENTS

IMPACT

↑ SAFETY ISSUES
↑ STRESS
↑ TURNOVER

NURSING RETENTION TOOLKIT

PROFESSIONALLY SUPPORTED & FULFILLED NURSE

AUTHENTIC LEADERS ARE ENABLED OR DISABLED

TRANSITION TO PRACTICE PROGRAM
CUSTOM

ENTERING & REENTERING THE WORKFORCE

HOW DID YOU FEEL?

ACCEPTED HEARD TRUSTED
EMPOWERED PATIENCE
VALIDATED SAFE

LICENCE FOR NEW NURSES

CONDITIONS
4 MONTHS
RENEWED TWICE

- ORIENTATION
- FLEXIBILITY
- MENTOR OR PRECEPTOR
- WELL DESIGNED ADDITIONAL SUPPORTS
- EDUCATION SESSIONS
- PRECEPTORS
- TIME TO REFLECT
- CLASSROOM

SELF-ASSESSMENT



PROFESSIONAL GROWTH PLAN (PGP)



REVIEW SOPs
ASSIST & IDENTIFY

ENACT THE PGP



- PEER SUPPORT
- ACCESS TO TEAM
- FORMAL & INFORMAL
- SYSTEM PARTNER SUPPORT

SURVEY AMERICAN NURSES FOUNDATION



IEN MENTORSHIP PROGRAM (IENMP)

RISK
IDENTIFY & MINIMIZE
LEARNING GAPS
EXPECTATIONS
STRATEGY TO MINIMIZE
THREE-FACTOR FRAMEWORK

ACCOUNTABILITIES

- RESPECT
- ENABLE
- EMPOWER
- DIFFICULT CONVERSATIONS
- TRUST
- REFLECTIVE PRACTICE
- SAFE TO ASK QUESTIONS
- RECOGNIZE UNIQUE NEEDS

REVIEW THE POLICY

EVALUATING THE PGP



- REFLECTIVE
- CHECK-INS
- TIME TO LEARN & APPLY

NSCN SUPPORTS

- JURISPRUDENCE INFORMATION
- NEW GRAD ONLINE RESOURCES
- CONDITIONAL LICENCE Q&A
- PRACTICE GUIDELINES
- PRACTICE SCENARIOS

SEXUAL MISCONDUCT STANDARDS FOR NURSES

MAY 13, 2024

WHY THE STANDARD?

OUR COMMITMENT TO PUBLIC PROTECTION

PROVIDE CLEAR EXPECTATIONS

APPLIES TO ALL DESIGNATION OF NURSES

CARRIES SAME REGULATORY WEIGHTS

COMBINED WITH ETHICS & SOPs



CURRENT CLIENT

NURSE-CLIENT RELATIONSHIP FORMED OR ONGOING

FORMER CLIENT

WHAT'S THE RISK TO THE CLIENT? POWER IMBALANCE

VULNERABLE FORMER CLIENT

THE TYPE & INTENSITY OF CARE = MANY FACTORS
PSYCHOTHERAPEUTIC CARE

2 PHASES OF CONSULTATION TO CREATE THE STANDARD

PHYSICAL • VERBAL • NON-VERBAL • CURRENT / FORMER CLIENTS AND/OR COLLEAGUE IN-PERSON OR NOT

IS TOUCHING BENEFITING THE CLIENT OR THE NURSE?

WHO IS RESPONSIBLE? INHERENT VULNERABILITY

CONSENT

STANDARD 1

NURSES MUST NOT ENGAGE IN SEXUAL MISCONDUCT

STANDARD 2
NURSES ARE REQUIRED TO REPORT (INCLUDING IF A NURSE SUSPECTS MISCONDUCT)

NURSES • EMPLOYERS • INDIVIDUALS

CASE STUDIES

WHAT INDICATORS WHAT YOU USE / REFLECT ON / SHARE

DETERMINE VULNERABILITY

DO NOT DELETE & DO NOT SHARE

REPORT TO EMPLOYER & COLLEGE

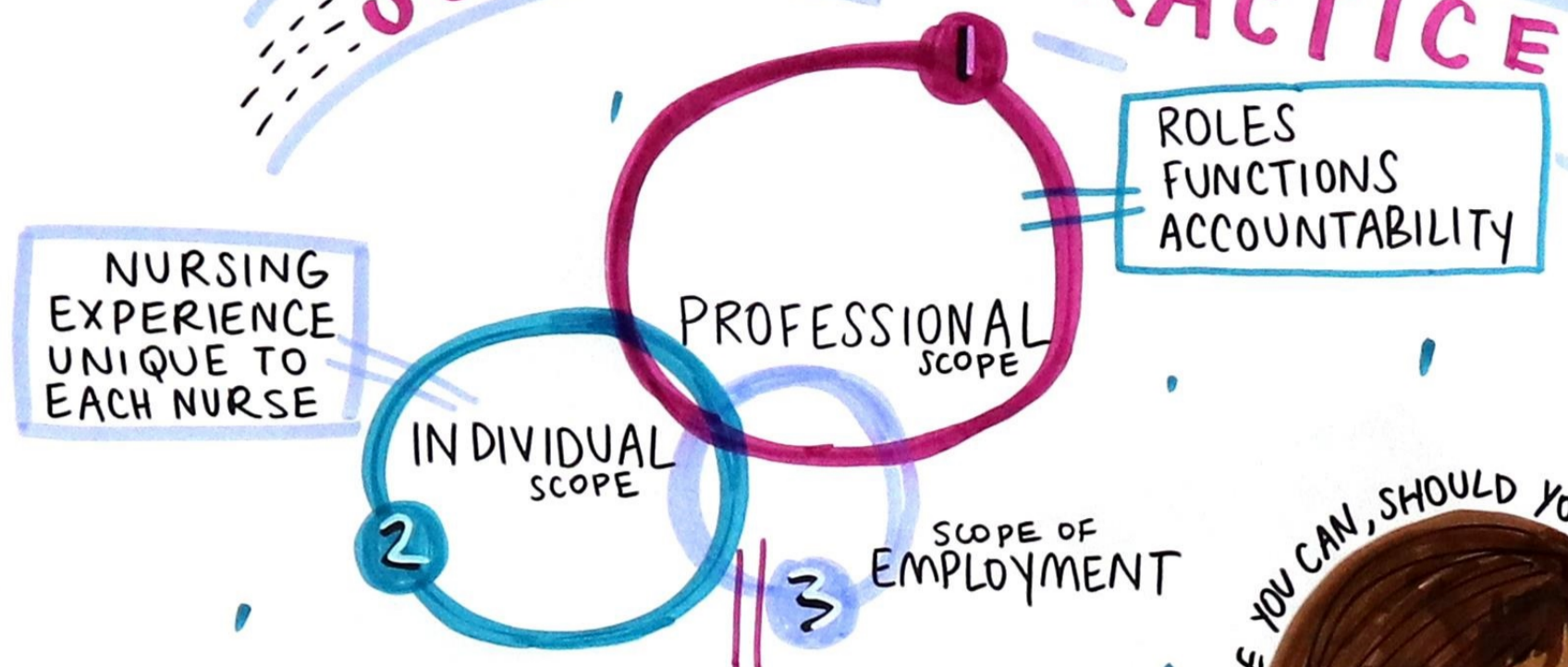
EXPLICIT PICTURE

INVESTIGATIVE

NURSING SCOPE OF PRACTICE AND THE 3-FACTOR FRAMEWORK

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SCOPE OF PRACTICE



- ✓ KNOWLEDGE
- ✓ SKILL
- ✓ JUDGEMENT



NOT JUST A SKILLS LIST

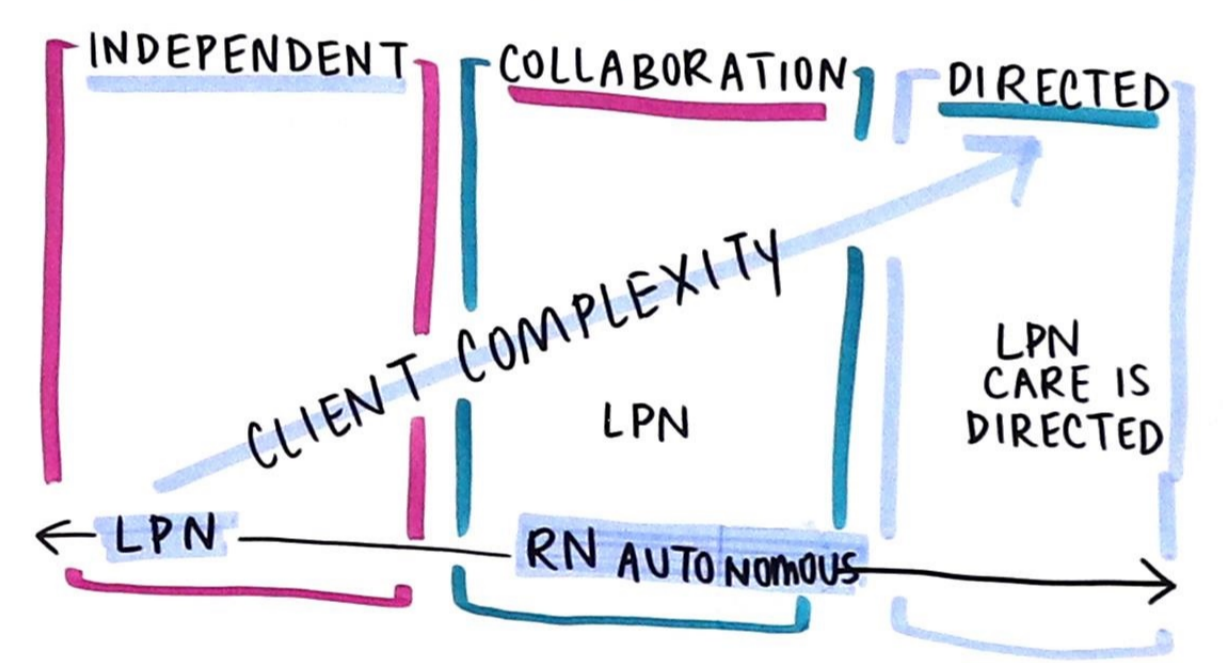
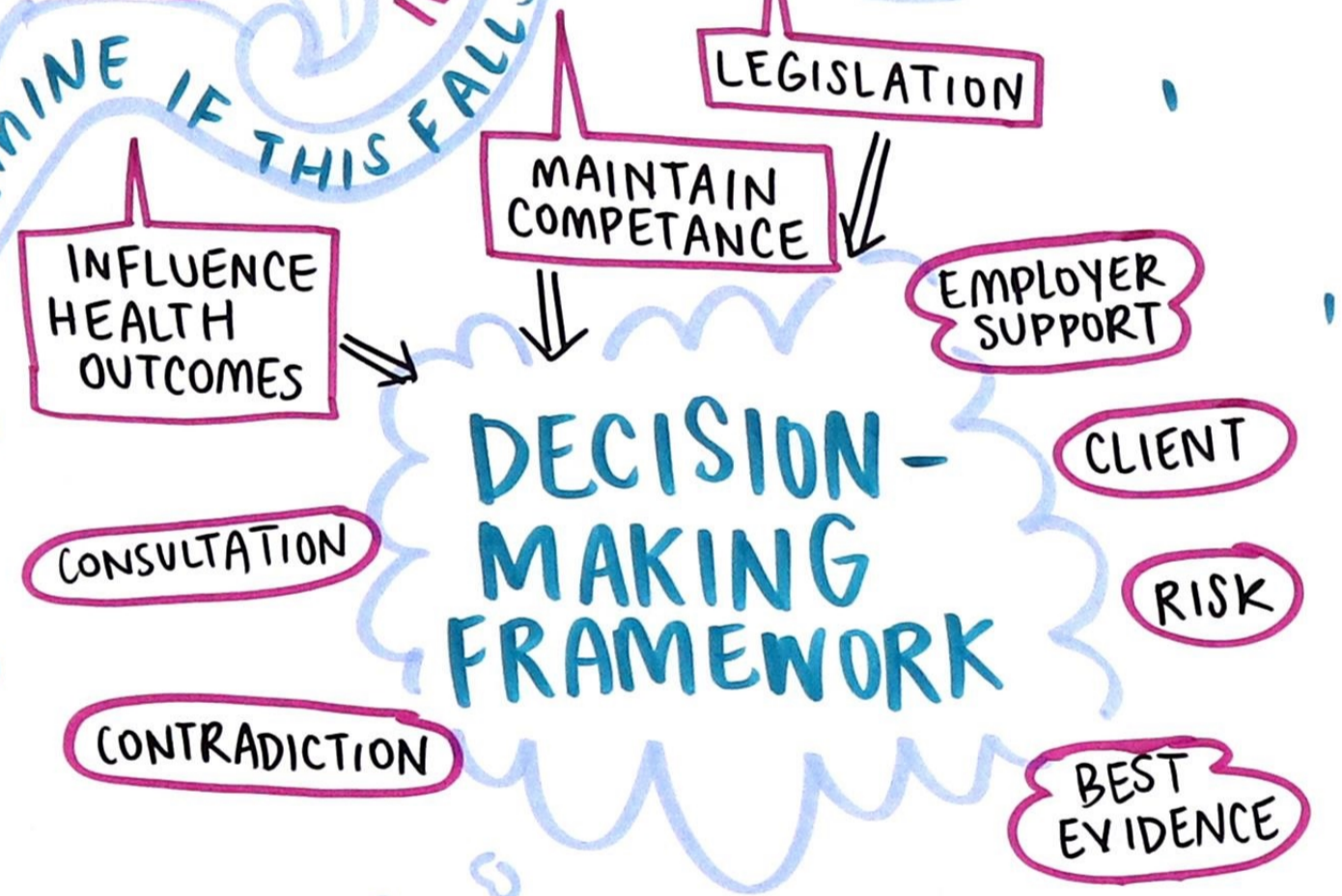
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AS YOUR CAREER CHANGES, SO DOES YOUR SCOPE OF PRACTICE

INTERVENTION WITHIN THE SCOPE?

DETERMINE IF THIS FALLS WITHIN THE SCOPE?



3 FACTOR FRAMEWORK



GIVE AND TAKE EDUCATION & SUPPORT



WHAT IS THE RISK TO THE CLIENT

JUST IN TIME COLLABORATION

DO WE NEED TO LOOK AT THAT POLICY?