KEEP CALM AND CARRY ON: LEARNING TO *THRIVE* IN CHALLENGING TIMES

Be the Future: Person-Directed Care is Happening. Be Part of It!

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The Impact of Leadership...

- Work environment characteristics linked to patient outcomes (adverse events and mortality).
- Study examined the contribution of hospital nursing leadership styles to 30-day mortality after controlling for patient demographics.
- Styles of leadership resonant versus dissonant
- Resonant leadership visionary, coaching, affiliative, and democratic.
- Dissonant pacesetting and commanding.
- High resonant leadership contributed to positive patient outcomes.

(Cummings, Midozi, Wong & Estabrooks, 2010)



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Nurse Competencies for Nursing Home Culture Change

"...10 competencies are those deemed most relevant and critical for nurses to be successful in creating and sustaining person-directed care."

(Pioneer Network and Hartford Institute for Geriatric Nursing, 2010)



Models, teaches and utilizes effective communication skills	
such as active listening, giving meaningful feedback,	
communicating ideas clearly, addressing emotional behaviors, resolving conflict and understanding the role of diversity in	
communication.	
2. Creates systems and adapts daily routines and "person-	
directed" care practices to accommodate resident preferences.	
3. Views self as part of team, not always as the leader.	
4. Evaluates the degree to which person-directed care practices	
exist in the care team and identify and addresses barriers to	
person directed care.	
Views the care setting as the residents' home and works to create attributes of home.	
create attributes of nome.	
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6. Creates a system to maintain consistency of caregivers for	
residents.	
7. Exhibits leadership characteristics/ abilities to promote	
person-directed care.	
8. Role models person-directed care.	
9. Problem solves complex medical/psychosocial situations	
related to resident choice and risk.	
10. Facilitates team members including residents and families, in	
shared problem-solving, decision-making, and planning.	
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"The profession of nursing as a whole is overwhelmed	
because there is a nursing shortage. Individual nurses are	
overloaded."	
"They are overloaded by the number of patients they oversee.	
They are overloaded by the number of tasks they perform. They	
work under cognitive overload, engaging in multitasking and	
encountering frequent interruptions.	

They work under perceptual and physical overload...In short, the nursing work system often exceeds the limits and capabilities of

(DeLucia, Ott & Palmieri, (2009)

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human performance."

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The Healthcare Profession Is Exhausted And Overwhelmed.

We need to STOP – assess and evaluate our own health status because if we are stressed, frustrated, dissatisfied, disillusioned or anxious, how can we promote person directed care for our elders?

(King, 2016)



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Burnout and Nurses...

- Nurses are a high risk group for burnout. Correlations have been identified between increased stress and patient mortality and morbidity.
- · Factors contributing to burnout:
- · excessive work hours
- · not being happy with superiors,
- not finding job suitable,
- $\boldsymbol{\cdot}$ feeling anxious about the future,
- problems with personal life and financial difficulties.
- Conclusion: Nurses having characteristics should be screened periodically for burnout.
- Focus on improved working conditions specifically relationships with peers.

(Ilhan, Durukan, Taner, Maral & Burnin, 2007)



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Resilience Is The Ability To...

- Bounce back from adversity
- · Work through challenges
- Overcome obstacles
- Fall down seven times...

....get up eight.



Are You Burned Out?

- · Consistently take work home
- Trouble sleeping at night
- Poor health habits overeating, not exercising, smoking, excessive drinking
- · Always thinking about work
- · Loss of enjoyment in daily activities
- · Persistent cynicism
- · Poor work performance

(King, 2016)



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Resilience Starts At The Top...

- · Lower intent to leave
- · Increased job satisfaction
- · Better quality of care
- · Two key factors:
- ${\scriptstyle \bullet}$ 1) increased collaboration nurse-nurse and nurse-provider and,
- 2) stronger nurse leadership nurses feel safe to share opinions, concerns, safety issues, ask for help, "manager has their back," competent to deliver care...

(Ma, Shang & Bott, 2015)



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Resilience as a Protective Factor

- Modeled after the basic philosophy of "helping each other live" (Neuman, 1995).
- Five interacting variables Physiological, psychological variables, sociocultural variables, developmental barriers, and spiritual variables.
- · Strategies for building resilience in nurses:
 - Primary identify risk factors, prevent stressors from occurring.
 - Secondary interventions for stressors
 - Tertiary resilience building post stressor and restoration of stability.



Systems Theory as a Framework for Resilience

- The nurse in constant interaction and interface with the nursing environment.
- The outcomes of a nurses encounter with a stressor is determined by both intrinsic and extrinsic protective resources.
- A state of optimal wellness occurs when all interacting variables interrelate and are in balance and harmony.
- Resilience can be conceptualized as a protective factor within Neuman Systems Model.
- If the nurse cannot withstand one or more stressors and the normal line of defense is penetrated, outcome can be manifestation of stress, illness, fatigue, emotional exhaustion, and burnout.

(Turner & Kaylor, 2015)



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Resilience Factors:

- · Being able to confront fears
- · Maintaining an optimistic but realistic outlook
- Seeking and accepting social support
- · Imitating sturdy role models
- · Relying on inner moral compass
- · Turning to religious or spiritual practices
- Accepting the unchangeable
- · Attending to our own health and well being
- · Actively solving problems and looking for meaning and growth
- · Accepting responsibility for own emotional well-being.
- · Using adversity for personal growth

(Southwick and Charney, 2012)



Resilience requires the use of strategies (consciously or unconsciously) through which caregivers meet and overcome challenges.

- Tested
- Hope
- Realistic
- · Insight
- · Vigor
- Excellence



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Tested – Learn from Life's Experience

- · Interventions:
- · A dose of self care.
- · See difficulties as temporary.
- · Learn from personal experiences as well as those of others.
- Don't be paralyzed by mistakes.
- · Focus on patient care.
- Develop a sense of self-efficacy "can do attitude."
- · Hold strong to values and beliefs.
- Know how to negotiate conflicts.
- · Measure successes versus failures.



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Tested: Journaling as a Resilience Building Practice

- · Take time for critical reflection of day.
- · What was successful?
- · What was learned about yourself?
- · What were the stressors?
- · Can stressors be modified/reduced/eliminated?
- Debrief as part of morning stand up, staff meetings and/or IDT.



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Hope – Shifting thoughts from hopelessness to a sense of gratitude

- Our brains are hardwired to remember the negative.
- Become intentional about recalling three positive things on a daily basis.
- Strengthens ones personal resiliency.
- This simple exercise worked better than Prozac in 80% of 350 participants.

(Leverence, 2015).



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Hope

- · Interventions:
 - · Positive thinking.
 - · Laugh at yourself.
 - Make work FUN!
 - Spend time with positive people.
 - · View change as opportunity.
 - · Show appreciation for the work of others.
 - Live the mission...



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"Nurses viewing their workplaces as not caring about them personally or not valuing their opinions were eventually depleted of their psychological reserves."

(Hart, Brannan & Chesnay, 2014)





Realistic – Bring the best of YOU!

- Interventions:
 - Feel self-confident and appreciate self. Have a healthy concept about who you are....and aren't.
 - · Look for opportunities for self-discovery.
 - · Identify what is unique about you.
 - In what areas do you excel?
 - Play to your strengths. (Gallup, 2016)
 - · Know what energizes you.
 - · Don't make decisions independently...
 - UBUNTU!



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Resilience in Nursing

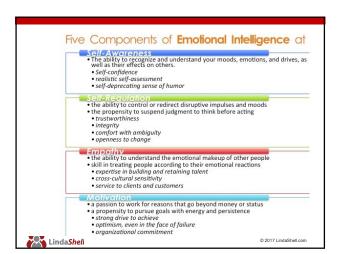
- Challenging workplaces, psychological emptiness, diminishing inner balance and a sense of dissonance are contributing factors for burnout.
- Examples of intrapersonal characteristics conducive to increased resilience include hope, self-efficacy and coping.
- Cognitive reframing, toughening up, grounding connections, work-life balance and reconciliation are resilience building strategies.
- Leaders need to be knowledgeable on how to educate and develop resilience in staff.

(Hodges, Keeley & Troyan, 2008)



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Portraiture of a Resilient Nurse...

- PICO Why do nurses stay in nursing in contrast to those who leave?
- Purpose: to understand why nurses remain in the workforce and to illuminate the qualities of resilience.
- Participants: Nine nurses from various settings including long term care, academia, and acute care.
- Findings: self control and management of personal response to challenge was success factor.
- Resilience limits the ability of adversity to impact the person, gain hold and cause long term damage.

(Cope, Jones, & Hendricks (2016)



Insight

- Interventions:
- · Be aware of your triggers.
- Take a pause before you speak.
- Reframe negative thoughts and ideas and see more positive outcomes for you and others.
- · Learn to be proactive versus reactive.
- Tackle the difficult conversations.
- · Control your self-talk fear, judgements, criticism.
- · Identify a framework for coaching others.



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- Hope
- Realistic
- Increased EQ
- Vigor
- Excellence





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Vigor – Physical strength and good health.

- Intervention:
 - · Focus on body-mind-spirit.
 - · Find balance between life and work.
 - Exercise on a regular basis.
 - Make sleep a priority.
 - · Drink plenty of water.
 - Take a mini vacation.
 - · Spend time doing things you love to do...



Health

- · Good nutrition
- · Physical exercise
- · Quality sleep
- Sunlight



Florence Nightingale 1820-1910



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- · Hope
- Realistic
- · Increased EQ
- Vigor
- Excellence



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Excellence

ANA defines a healthy nurse as someone who actively focuses on creating and maintaining a balance and synergy of physical, intellectual, emotional, social, spiritual, personal and professional wellbeing.

We feel that nurses are ideally positioned to be the best role models, educators, and advocates of health, safety, and wellness (*person centered care*).

(http://nursingworld.org/MainMenuCategories/The Practice of Professional Nursing/2017-Year-of-Healthy-Nurse)



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- · Let go of perfection.
- Fail fast.
- Think about your best possible self.
- · Focus on personal and professional goals.
- Phone a friend.
- Find a mentor.



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"Nurse leaders must enhance their own resilience and then recruit, hire, and retain resilient nurses within their own organizations. If we can help our nurses bounce, maybe fewer will roll away."

(Hudgins, 2015)



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Role of Nurse Leaders...

- · Be a good role model.
- Serve as a mentor/coach.
- · Offer education on building resilience.
- Case studies/role play difficult situations to assimilate nursing education into nursing practice.
- Provide opportunities for de-briefs.
- Encourage increased collaboration between nurses/providers.
- · Blameless autopsy approach.
- Stop bullying and horizontal violence.



Role of Leaders...

- · Ensure staff take breaks.
- Provide quiet break areas away from patient care (Zen Room)
- · Advocate on behalf of staff.
- · View each employee as an "up and coming leader."
- · Screen staff for burnout.
- · "What's on your mind?"
- · Send a note of gratitude.



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6 Steps to SurTHRIVE

- · Tested
- *H*ope
- Realistic
- · Insight
- Vigor
- Excellence





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Thank YOU!

For more information on SurTHRIVELeadership or TeamUp! visit LindaShell.com or email linda@lindashell.com

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