NZNO Nurse Managers New Zealand Section Monthly News Bulletin
Friday 2 March 2018

Consultation

NZNO is presently consulting with members on a range of issues. The full outline can be found at: http://www.nzno.org.nz/get_involved/consultation

Proposed changes to the Pharmaceutical Schedule Rules

NZNO is seeking feedback on proposed changes to the Pharmaceutical Schedule Rules, making them easier to find, use and apply, including:

- tidying and consolidating the existing hospital and community schedules, and

- developing practical resources to assist interpretation of key rules.

PHARMAC does not intend to change the meaning of any rules or review any restrictions. Details of the proposed new rules can be found here: https://www.pharmac.govt.nz/
Feedback due to policyanalysts@nzno.org.nz by **19 March 2018.**

Misuse of Drugs (Medicinal Cannabis) Amendment Bill

This Bill seeks to amend the Misuse of Drugs Act 1975 to:

- introduce an exception and a statutory defence for terminally ill people to possess and use illicit cannabis and to possess a cannabis utensil;
- provide a regulation-making power to enable the setting of standards that products manufactured, imported and supplied under licence must meet; and

- amend Schedule 2 of the Act so that cannabidiol (CBD) and CBD products are no longer classed as controlled drugs.(See WHO statement http://www.who.int/features/qa/cannabidiol/en/)

Note that the Bill is intended as an interim, compassionate measure until affordable quality products are available under a proposed medicinal cannabis scheme.
Member feedback is sought on both the narrowly focused bill, and what should be considered in developing the wider medicinal cannabis scheme. NZNO's position statement on cannabis Please link here to the bill

Link here to NZNO's Position Statement on Medical Marijuana (cannabis)

FEEDBACK DUE	Please send feedback to marilynh@nzno.org.nz by March 21, 2018.

Care models

This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

Bender M, Spiva L, Su W, Hites L. **Organising nursing practice into care models that catalyse quality: A clinical nurse leader case study**. J Nurs Manag. 2018;00:1–10. https://doi.org/10.1111/jonm.12596

Aims

To determine the power of a conceptual clinical nurse leader practice model to explain the care model's enactment and trajectory in real world settings.

Background

How nursing, organised into specific models of care, functions as an organisational strategy for quality is not well specified. Clinical nurse leader integrated care delivery is one emerging model with growing adoption. A recently validated clinical nurse leader practice model conceptualizes the care model's characteristics and hypothesizes their mechanisms of action.

Change management

How to Be Flexible in the Workplace
Responding to Change Quickly and Positively
When you're flexible, you're versatile, resilient and responsive to change.
Rapid technological advances, along with fast-paced changes in global markets and the political landscape, mean that today's workplaces are often unpredictable.
Read more here

Communication (including workplace, team, and interprofessional)

This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

van Belle E, Zwakhalen SMG, Caris J, Van Hecke A, Huisman-de Waal G, Heinen M. **Tailoring of the Tell-us Card communication tool for nurses to increase patient participation using Intervention Mapping**. J Clin Nurs. 2018;27:621–630. https://doi.org/10.1111/jocn.13968

Aims and objectives

To describe the tailoring of the Tell-us Card intervention for enhanced patient participation to the Dutch hospital setting using Intervention Mapping as a systematic approach.

Background

Even though patient participation is essential in any patient-to-nurse encounter, care plans often fail to take patients' preferences into account. The Tell-us Card intervention seems promising, but needs to be tailored and tested before implementation in a different setting or on large scale.

Compassion and empathy

Empathy at Work
Developing Skills to Understand Other People
Learn how to really connect with someone.
Tom is a great accountant, but his "people" skills hold him back. I can't see how he'll ever be promoted unless he does something about it.
Read more here

Conflict management

Conflict Resolution
Using the "Interest-Based Relational" Approach
Conflict is an inevitable part of work. We've all seen situations where people with different goals and needs have clashed, and we've all witnessed the often intense personal animosity that can result.
Read more here

When You Have to Carry Out a Decision You Disagree With (HBR)
One of the great frustrations of being a middle manager is that senior leaders make decisions that go against what you would have done had it been up to you. Sometimes you are part of the decision process, and other times the decision is simply handed down. Either way, you are now responsible for ensuring that the plan is carried out.
Read more here

To Change Someone's Mind, Stop Talking and Listen (HBR)
Samar Minallah Khan, the feminist Pakistani anthropologist and filmmaker, was enraged. Local tribal leaders were trading little girls as compensation for their male family members' crimes.
These leaders, responsible for settling legal disputes in their villages, act as local judges. A longstanding practice was to address major crimes by "compensating" a harmed family with a daughter of the family doing the harm. The guilty father or uncle was then considered "free" and the village was told this issue was "resolved." Samar thought this tradition, called swara, was horrendous — it forever changed a young girl's life, through no fault of her own. But although she was angry, she realized she'd never get to the outcome she wanted if she led with that anger.
Read more here

Decision making
This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

Assessing managerial information needs: Modification and evaluation of the Hospital Shift Leaders' Information Needs Questionnaire. Peltonen L-M, Lundgrén-Laine H, Siirala E, Löyttyniemi E, Aantaa R, Salanterä S.   J Nurs Manag. 2018;00:1–12. https://doi.org/10.1111/jonm.12515
Aims
The aims were (1) to evaluate the modified version of the Intensive Care Unit Information Need Questionnaire for the broader hospital setting, and (2) to describe the differences in respondents' managerial activities and information needs according to the position held by the respondent and the type of hospital unit.
Background
Information systems do not support managerial decision-making sufficiently and information needed in the day-to-day operations management in hospital units is unknown.

Difficult people / conversations

AM I AT WORK OR IN HIGH SCHOOL?

Dealing with the "mean girls" in the workplace.
Let's face it: Gossip is part of our everyday lives and usually has a negative connotation. What creates gossip are conversations about someone else that include facts that may not be true. Gossip also can be about an organization, not just a person. This is why it is so common to hear gossip in the workplace. Research has found that 66 percent of any conversation between two employees is some form of gossip, and 14 percent of what employees chat about during work breaks includes workplace gossip. And contrary to this article's deck, gossip can come from anybody in the workplace, regardless of gender, job title, or tenure.
[Read more here](#)

Intergenerational workplaces
This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

Christensen SS, Wilson BL, Edelman LS. **Can I relate? A review and guide for nurse managers in leading generations**. J Nurs Manag. 2018;00:1–
7. https://doi.org/10.1111/jonm.12601
Aims
The purpose of this review is to help the nurse leader develop an understanding of the five generations currently in the health care workforce by providing defining characteristics, general behaviours, and strategies for the nurse manager to employ for each generational cohort.
Background
Generations are groups of people born during the same 15–20 year time period who share similar experiences before adulthood, which shape long-term behaviours. Key descriptors and characteristics are provided.

Interprofessional teams

Older people and their families' perceptions about their experiences with interprofessional teams. Dahlke S, Steil K, Freund-Heritage R, Colborne M, Labonte S, Wagg A. Nursing Open. 2018;00:1–9. https://doi.org/10.1002/nop2.123
Aim
To examine older people and their families' perceptions about their experiences with interprofessional teams.
Design
Naturalistic inquiry using qualitative descriptive methods to provide a comprehensive summary of older people and their families' experiences with interprofessional teams.
[Read more here](#)

Leadership

This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

The impact of nurse managers' leadership styles on ward staff
Usama Saleh, Tom O'Connor, Hattan Al-Subhi, Rana Alkattan, Saad
Al-Harbi, and Declan Patton
British Journal of Nursing, Vol. 27, No. 4: 197-203.

Franks-Meeks S. **Clinical staff nurse leadership: Identifying gaps in competency development.** Nurs Forum. 2018;53:35–39. https://doi.org/10.1111/nuf.12217

Background

To date, there has been no development of a complete, applicable inventory of clinical staff nurse (CSN) leadership role competencies through a valid and reliable methodology. Further, the CSN has not been invited to engage in the identification, definition, or development of their own leadership competencies.

Objective

Compare existing leadership competencies to identify and highlight gaps in clinical staff nurse leadership role competency development and validation.

Management

So, you're the boss now

There is a lot to learn when you are newly promoted to a senior role. And a lot of that learning is learning about yourself.

Meetings

How to be more influential in meetings dominated by loud talkers

How can you speak up in meetings without being intimidated by loud talkers who dominate the discussion? Even in this age of technology, face-to-face meetings are still a vital and inevitable part of work life, so you need to make a good contribution in these settings. Click here to find out what you can do to become more influential in meetings dominated by loud talkers.

Patient safety

This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

Innovative Team Training for Patient Safety: Comparing Classroom Learning to Experiential Training

Fran Babiss, PhD, OTR/L; Lily Thomas, PhD, RN, FAAN; Madeline M. Fricke, RN, MPS

The Journal of Continuing Education in Nursing. 2017;48(12):563-569

This study compared two different means of retraining staff in TeamSTEPPS® in an effort to determine whether experiential training might be more effective than a classroom experience. A randomized, controlled pretest–posttest repeated measures design was used for the study. The hypothesis that experiential classes would result in improvements in attitude, perceptions, and knowledge of TeamSTEPPS was not borne out, but several important implications for further study were discovered.

Preceptorship and mentoring

This article is not freely available but may be located using the databases available to readers via a DHB or tertiary institute library or from the NZNO library

Boardman, G., Lawrence, K. and Polacsek, M. (2018), **Preceptors' perspectives of an integrated clinical learning model in a mental health environment**. Int J Mental Health Nurs. doi:10.1111/inm.12441
Supervised clinical practice is an essential component of undergraduate nursing students' learning and development. In the mental health setting, nursing students traditionally undertake four-week block placements. An integrated clinical learning model, where preceptors mentor students on an individual basis, has been used successfully in the clinical learning environment. This flexible model provides the opportunity for students to work across morning, afternoon, night and weekend shifts. There is a need to improve the evidence base for a flexible model for students undertaking a mental health placement. The aim of this study was to understand preceptors' experience of, and satisfaction with, a mental health integrated clinical learning model. Focus groups were used to elicit the views of preceptors from a mental health service. Findings highlight the advantages and disadvantages of an integrated clinical learning model in the mental health setting. Participants suggested that students may benefit from flexible work arrangements, a variety of experiences and a more realistic experience of working in a mental health service. However, they found it challenging to mentor and evaluate students under this model. Most also agreed that the model impeded students' ability to engage with consumers and develop rapport with staff. The findings indicate the need to develop a placement model that meets the unique needs of the mental health setting.

Professionalism

Code of Conduct refresher
The Code of Conduct guides nurses – and the people they care for – on the behaviour expected from the nursing profession. This article provides a refresher on the 2012 Code and its supporting documents. By Liz Manning.
Read more here

Resilience

How Resilient Are You?
Find Out How to Bounce Back From Problems
Resilience is the ability to bounce back from problems and setbacks.
Fall seven times, stand up eight.– Japanese proverb.
Imagine that you've been working on a report for several weeks. You're pleased with what you've produced, and you can't wait to hear what your boss thinks. However, the next day she meets with you to discuss your work, and she asks you to rewrite your report.
Read more here

Shift work

The night shift: Follow the evidence to survive and thrive
Nursing2018
December 2017, Volume :47 Number 12 , page 46 - 51 [Free]
ONE OF THE MOST IMPORTANT health threats to current and future nurses is the demand that shiftwork places upon nurses, especially those nurses who primarily work the night shift. Most nurses begin their professional careers in hospitals, and many will spend some time in a job where night-shift work is required. Night-shift work has some positive aspects,

such as the freedom to schedule activities during the daytime, a work environment generally free from distractions from administrative personnel and visitors, less concern with organizational imperatives and politics, and higher pay. But it also carries some potentially serious health risks. This article explores the possible physical and psychosocial consequences of working the night shift as well as strategies that may help nurses reduce the negative consequences of night-shift work.
Read more here

Technology

When staff members won't stop texting
Doucette, Jeffrey N. DNP, RN, LNHA, CENP, NEA-BC, FACHE
Nursing Management: February 2018 - Volume 49 - Issue 2 - p 56
Q I continue to struggle with nursing staff and physicians using text messaging on their personal devices to communicate information about patients and their families. I feel like I'm the only leader who enforces the no texting policy. What advice do you have to help?
Read more here

The above bulletin has been compiled by Linda Stopforth, SNIPS, on behalf of NZNO Nurse Managers New Zealand section.
It is provided on the first Friday of each month and contains an overview of news items, articles and research papers of interest to the Section members.
All links are current at the time of being compiled and distributed.

For feedback please contact your section administrator: DianaG@nzno.org.nz

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