# NZNO Nurse Managers New Zealand section monthly news bulletin Friday 1 February 2018



# Nurse Managers NZ Educational Forum

Thursday 14 March 2019 6.00pm-8.30pm Distinction Palmerston North Hotel and Conference Centre 175 Cuba Street Palmerston North

Cost:

- Free for Nurse Managers Section members
- \$20.00 for NZNO Members
- \$30.00 for Non members

### **Click here to register**

# **Nurse Managers Leadership Coaching Workshops**

Led by Bev McClelland, Organisational Development Consultant - <u>download Bev's bio</u> <u>here.</u>

# Christchurch

Date: Friday 10 May 2019 Time: 9:00am - 3:00pm Venue: ARA Institute (next to Christchurch Hospital), Manawa Building, 276 Antigua Street, Christchurch

# Register here for the Christchurch workshop

### Auckland

Date: Friday 14 June 2019 Time: 9:00am - 3:00pm Venue: Eden Garden Cafe, Garden Room, 24 Omana Avenue, Epsom, Auckland

# Register here for the Auckland workshop

### For both workshops:

- Morning and afternoon tea will be provided
- Limited to 16 places at each workshop
- Subsidised registration fee: \$75.00

# **Consultation**

NZNO is presently consulting with members on a range of issues. The full outline can be found at: <u>http://www.nzno.org.nz/get\_involved/consultation</u>

#### **Therapeutic Products Regulatory Scheme - HIGH IMPORTANCE**

NZNO seeks your feedback on a new scheme for the regulation of medicines. The proposed Therapeutic Products Bill will replace the Medicines Act 1981. It will cover all therapeutic products and medical devices, and controls on clinical trials, product approvals, and prescribing procedures. NZNO welcomes the proposed alignment of medicines with health practitioner regulation. We anticipate this will remove outdated legislative barriers to nursing, reduce the use of standing orders, and lead to a more effective use of the health workforce.

The consultation document accompanying the draft Bill sets out clearly how the scheme will work in practice. Chapter C details what the new scheme would mean for different sectors and health practitioner groups e.g. C8 (p.116) describes 'controlled activities' such as prescribing, issuing standing orders. (Note that it is proposed to remove the category of delegated prescribers.)

These proposed, and long awaited changes to medicines regulation are of SINGULAR IMPORTANCE to the profession and practise of nurses, midwives and allied health workers. We strongly urge all NZNO members and member groups to read and discuss the proposed scheme carefully and provide feedback.

### **Consultation document**

### Draft Bill

(Note that low-risk natural health products, including rongoā Māori and dietary supplements will be regulated separately. <u>https://www.health.govt.nz/our-work/regulation-health-and-disability-system/natural-health-and-supplementary-products</u>).

Please send feedback to <a href="mailto:sue.gascoigne@nzno.org.nz">sue.gascoigne@nzno.org.nz</a> by 31 March 2019.

#### **Health and Disability System Review**

Phase one of the review is underway with the Review Committee seeking responses to a short list of questions on what people want from health and disability system. Nurses and the nursing support team are an integral part of the health and disability system, and NZNO seeks member feedback on the **questions which can be found** <u>here</u>:

Please send feedback to <a href="mailto:leanne.manson@nzno.org.nz">leanne.manson@nzno.org.nz</a> by 28 February 2019.

### Position statement: Violence and aggression towards nurses

A position statement on violence and aggression towards nurses that clearly states the unacceptability of this behavior in the work context of nurses has been requested.

This would be in addition to the other resources that NZNO provides on managing situations of conflict, de-escalation and health and safety in workplaces.

The draft attached has had input from NZNO staff members and was drafted using research about nurses and colleagues in other health professions who are subjected to verbal and physical violence and aggression at work.

### Please send feedback to <u>sue.gasquoine@nzno.org.nz</u> by 15 February 2019. Read or Download

<u>2018-12-07 Consultation v2</u> (355 KB)

# **Absenteeism**

Ticharwa M, Cope V, Murray M. <u>Nurse absenteeism: An analysis of trends and</u> <u>perceptions of nurse unit managers.</u> *J Nurs Manag.* 2019;27:109– 116. https://doi.org/10.1111/jonm.12654

To explore absenteeism trends and absenteeism management from the perspective of nurse unit managers.

Background

Unscheduled absenteeism among nurses appears to be a multi-factorial phenomenon and is a source of concern due to the effect absenteeism has on the daily management of human resources, ultimately affecting delivery of safe care. Identifying absenteeism trends among nurses may inform the development of targeted strategies to minimize unscheduled absenteeism.

# **Brainstorming**

### **Brainstorming**

Generating Many Radical, Creative Ideas How often have you used brainstorming to solve a problem? Chances are, you've used it at least once, even if you didn't realize it.

# Care models

Allen D. Care trajectory management: <u>A conceptual framework for formalizing</u> <u>emergent organisation in nursing practice.</u> *J Nurs Manag.* 2019;27:4– 9. https://doi.org/10.1111/jonm.12645

Much health and social care requires continuous oversight and adjustments in response to contingencies. Nurses have an important role in managing these relationships.

Change management

### Finding strength to learn and lead in tough times

Throughout one's leadership journey, there will be times when one can't see the horizon. These are times of despair in which a leader can feel that all hope is lost; that nothing matters anymore.

# **Coaching and teaching**

### To Coach or Not – How Do You Know if Coaching is Wanted or Needed?

Many coaches will tell you they do hybrid coaching that blends mentoring into the conversation. They say people pay us for our opinions and the benefits of our experiences. Coachees also want us to tell them what we would do to help them avoid making wrong decisions.

# <u>Communication (including workplace, team, and interprofessional)</u>

### For Success, Cultivate a Communication Style that Shows You Care

Our workday lives and workplaces are daily exercises in <u>challenging</u> <u>conversations</u>. From feedback and coaching discussions to interchanges with coworkers who can say, "Yes" or "No" to your requests for resources, process changes, budgetary allocations or fresh ideas, there's no end to the critical communication situations we encounter at work. While there are many tools, techniques, and approaches to use to gain support or get your way, I find that just a few common-sense, authentic communication tactics improve your success and strengthen your credibility as well.

### Tech-savvy millennial nurses want instant feedback

These RNs thrive on altruism and teamwork

It's no secret that generations tend to communicate differently. And nurses — from those at the bedside to leaders, managers and educators — will make greater professional impacts if they understand how to overcome potential generational communication barriers. Unlike the older Generation Xers who cherish independence, millennials want and need feedback. That feedback should be instant and technology based.

# **Compassion and empathy**

### Why having and utilizing empathy matters

Why are people making so much of this so-called soft skill called empathy? Why care about the feelings of others?

# **Conflict management**

### How to Collaborate with People You Don't Like

A few months ago, a former client — let's call her Kacie— called me to check in. I had supported her through her transition when she had joined a prestigious global financial services firm several months prior. Given how deliberately and thoughtfully she'd gone through the process, I expected that our conversation would be about her early wins.

Instead, Kacie confessed that she had a simple but serious problem: she wasn't getting along well with a peer-level executive — let's call her Marta. The two had gotten off on the wrong foot, and as time passed things weren't getting any better. Kacie told me that it was becoming painfully clear that her inability to get along with

Marta was going to impede her success, and possibly derail her career at the company.

### Surviving and Thriving With Conflict on the Job

By Debra Anscombe Wood, BS, RN

als and objectives: The goal of this continuing education program is to enhance nurses', medical assistants', laboratory professionals', and respiratory therapists' ability to effectively deal with conflict on the job. After studying the information presented here, you will be able to: • Identify various types of conflict • Analyze the dynamics of conflict in the workplace • Apply conflict resolution strategies to specific situations

# **Decision making**

### To Get More Done, Focus on Environment, Expectations, and Examples

Bosses have a lot of influence on how employees spend their time. That's why it's so important for them to consider the ripple effects their input can have. Think of your comments, suggestions, and questions as pebbles you're throwing into a stream: Each one can have an impact far larger than you may intend. So always recognize the weight your words carry, and speak with intention. During meetings with your team, try not to "think out loud," and avoid lobbing ideas at everyone. Be sure you're giving the team a clear, unified picture of projects and strategies; if you aren't ready to do that in a certain situation, hold off on saying anything until you are. And don't ask for updates unless you really need them. That kind of message appears urgent, even when it's not. Always specify what information you need, why, and when, so you don't create an unnecessary fire drill.

# Difficult people / conversations

### How to Deal with People Who Talk Too Much

Savvy Psychologist Dr. Ellen Hendriksen offers 5 tips for when Jeff from accounting stops by to give you the play-by-play of his morning

# **Handover**

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

Malfait, S., Eeckloo, K., Van Biesen, W. and Van Hecke, A. (2019), **'The** effectiveness of bedside handovers: A multilevel, longitudinal study of effects on nurses and patients'. J Adv Nurs. Accepted Author Manuscript. doi:10.1111/jan.13954

To investigate the effectiveness of bedside handovers. For nurses, effects on nurse-patient communication, individualized care, coordination of the care process, job satisfaction, intention to leave, patient participation and work interruptions was measured. For patients, effects on patient activation, individualized care and quality of care was measured.

# **Health economics**

### One plus one equals more than two for health expenditure in patients

Caring for patients with two or more chronic diseases costs the health system more than it would to treat each disease in isolation, a new study has shown. Researchers looked at health data for all adult New Zealanders and found 59 per cent of publicly funded health expenditure was attributable to non-communicable or chronic diseases.

# **Infection control / handwashing**

### Stethoscopes loaded with bacteria

When people think of stethoscopes, the image of a doctor or nurse wearing them around their neck, or asking a patient to 'take a deep breath', might come to mind. However, a new study suggests another association — that of bacteria and contamination.

# **Innovation**

### O'Connor's Seven Essential Innovation Questions (SEIQ)

How do you deal with the challenge of getting creative? After all, you can't just switch it on like a light.

O'Connor's Seven Essential Innovation Questions is a simple, fun and effective tool for brainstorming new ideas. You use it by working through a series of seven questions.

In this video, we'll take a closer look at each of these questions and explore how they can help you to get creative.

# **Interprofessional teams**

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

Baik D, Zierler B. **Clinical nurses' experiences and perceptions after the implementation of an interprofessional team intervention: A qualitative study**. *J Clin Nurs*. 2019;28:430–443. https://doi.org/10.1111/jocn.14605

Aims and objectives

To explore clinical nurses' experiences and perceptions following a purposeful interprofessional (IP) team intervention in practice.

Background

Despite increasing interest in IP collaborative practice to improve teamwork, nursing outcomes and quality of care, there has been little research that focused on nurses' perspectives of IP collaboration after a purposeful IP team intervention.

**Leadership** 

### Four ways to improve workplace relationships

The latest research shows that friendships increase employee satisfaction by 50% and people with a good friend at work are seven times more engaged than those without workplace friends. Most of us spend more time at work than at home, and that is why workplace drama can be detrimental to productivity, employee engagement, work-life satisfaction and talent retention.

Here are four ways to improve workplace relationships and reduce relationship drama.

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

Boamah SA. Emergence of informal clinical leadership as a catalyst for improving patient care quality and job satisfaction. J Adv Nurs. 2018;00:1–10. <u>https://doi.org/10.1111/jan.13895</u>

To analyse the critical attributes of clinical leadership and test a model linking clinical leadership behaviours of staff nurses to patient care quality and job satisfaction.

# **Management**

### Starting Strong as a New Manager

I have a particular soft spot for anyone and everyone stepping into the role of <u>manager for the first time</u>. I suspect this is carried over from my own less than outstanding start-up as a new manager earlier in my career. The overwhelming feeling of awkwardness and disorientation linger in my mind and gut to this day. Here's some guidance to help you move beyond that early feeling of disorientation and start strong as a new manager.

# **Medication / Pharmacy**

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

Bucknall, T., Fossum, M., Hutchinson, A. M., Botti, M., Considine, J., Dunning, T., Hughes, L., Weir-Phyland, J., Digby, R. and Manias, E. (2019), **Nurses' decision-making, practices and perceptions of patient involvement in medication administration in an acute hospital setting.** J Adv Nurs. Accepted Author Manuscript. doi:10.1111/jan.13963

To describe nurses' decision-making, practices and perceptions of patient involvement in medication administration in acute hospital settings. Background

Medication errors cause unintended harm to patients. Nurses have a major role in ensuring patient safety in medication administration practices in hospital settings. Investigating nurses' medication administration decision-making and practices and their perceptions of patient involvement, may assist in developing interventions by revealing how and when to involve patients during medication administration in hospital.

# **Mentoring**

Lavoie-Tremblay M, Sanzone L, Primeau G, Lavigne GL. <u>Group mentorship</u> programme for graduating nursing students to facilitate their transition: A pilot study. *J Nurs Manag.* 2019;27:66–74. https://doi.org/10.1111/jonm.12649 The present study aims to describe and evaluate a group mentorship programme for graduating nursing students following the first pilot testing. Background

A mentoring relationship has been found to be beneficial in easing the challenging transition from nursing student to nurse. However, very few mentoring programmes have been formally developed to pair students with clinical nurses before graduation.

# Patient centred care

### Hospital intervention seeks to reduce sleep deprivation

A study at a Chicago hospital found that a Sleep for Inpatients: Empowering Staff to Act, or SIESTA, unit was associated with reduced nighttime sleep interruptions, researchers reported in the Journal of Hospital Medicine. "This initiative is practical for patients that qualify -- meaning they are clinically stable and not in critical condition," said Seun Ross, ANA's director of nursing practice and work environment, who is familiar with the initiative but not involved in the study.

# **Patient safety**

# Hospitals with better nurse work environments have safer pediatric care, study finds

Hospitals that have better work environments for nurses provider safer care for the youngest — and often most vulnerable — patients, a study published in the <u>Journal</u> <u>of Patient Safety</u> found.

### Interventions to reduce patient identification errors in the hospital setting

a systematic review protocol

De Rezende, Helena Aparecida1,2; Melleiro, Marta Maria2; Shimoda, Gilceria Tochika3,4

JBI Database of Systematic Reviews and Implementation Reports: <u>January 2019 -</u> <u>Volume 17 - Issue 1 - p 37–42</u>

Patient identification is considered as an important initial part of the care process in health institutions, as well as an essential safety resource and, if correctly performed and used, it assists in the prevention of errors and serious harm to

patients.<u>1,2</u> Failures in patient identification have been recognized as the root cause of many problems. Moreover, misidentification can seriously affect the provision of health services, hence, additional efforts should be concentrated on reducing this significant source of preventable medical errors.<u>3</u> The Joint Commission on Accreditation of Healthcare Organisations (JCAHO)<u>4</u> has listed improved patient identity accuracy as the first of its national patient safetyobjectives, introduced in 2003, to ensure patient safety, quality of services and accreditation of the health unit.

Sahlström M, Partanen P, Azimirad M, Selander T, Turunen H. <u>Patient participation</u> <u>in patient safety—An exploration of promoting factors</u>. *J Nurs Manag.* 2019;27:84–92. https://doi.org/10.1111/jonm.12651

To study how internal medicine patients experienced patient safety during their recent periods of care and to identify explanatory factors for patient participation.

Background

Patient participation is recognized as one of the main factors promoting quality and safety and the identification of effective interventions that encourage safe care.

### 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

Gillespie Brigid M., Harbeck Emma, Kang Evelyn, Steel Catherine, Fairweather Nicole, Chaboyer Wendy (2017) Changes in surgical team performance and safety climate attitudes following expansion of perioperative services: a repeated-measures study. *Australian Health Review* **42**, 703-708

**Objective** The aim of the present study was to describe process changes in surgical team performance and team members' attitudes to safety culture following hospital relocation and expansion of perioperative services.

# **Population demographics**

Kagan, S. H. (2019), <u>Are You Ready to Manage Age-Friendly Care?</u>. J Nurs Manag. Accepted Author Manuscript. doi:10.1111/jonm.12749 Nurses around the world are aware that our world is aging. Our literature commonly anchors arguments for science, education, practice, and policy in aging populations demographics, citing the problems those demographics beget. However, grounding focal programs and specific initiatives in general claims about shifting age demographics misses two key points.

# **Problem solving**

Gemmel P, Van Beveren S, Landry S, Meijboom B. <u>Problem-solving behaviour of</u> <u>nurses in a lean environment.</u> *J Nurs Manag.* 2019;27:35– 41. https://doi.org/10.1111/jonm.12646

To investigate how the extensiveness of a lean implementation—that is, the extent to which lean as a new practice is adopted across nursing departments—relates to second-order problem solving behaviour of nurses.

# **Resilience**

### AORN: 3 ways to cultivate nurse resiliency

Nurses must handle an immense amount of emotional and physical stress on a daily basis that can threaten their resilience and well-being, Cheryl Connors, RN, a patient safety specialist at Baltimore-based Johns Hopkins Hospital, wrote in a <u>blog post</u> for the Association of periOperative Registered Nurses.

### Stress management

Positive thinking: Stop negative self-talk to reduce stress

Positive thinking helps with stress management and can even improve your health. Practice overcoming negative self-talk with examples provided.

### **Technology**

### New mobile app to assist with clinical decisions

New mobile app to assist with clinical decisions A new mobile app is helping ensure patients receive the antibiotics that will best meet their needs.

### **Wellbeing**

#### **Preventing Nurse Burnout**

Working as a nurse can be tough. Because they are so focused on patients, they may not see when they're experiencing burnout—and that can lead to problems with themselves or with being able to properly care for patients.

#### 10 ways to help your mental health in 2019

Currently one in five Australians experience mental ill health every year. Australian Psychological Society President Ros Knight says people who spend a lot of time caring for others need to make time to care for their own mental health.

### **Workflow**

Pottenger BC, Pronovost PJ, Kreif J, et al. <u>Towards improving hospital workflows:</u> <u>An evaluation of resources to mobilize patients.</u> *J Nurs Manag.* 2019;27:27–

34. https://doi.org/10.1111/jonm.12644

To characterize resources to safely mobilize different types of hospitalized patients. Background

Current approaches to determine nurse–patient ratios do not always include information regarding the specific demands of patients who require extra resources to mobilize. Workflows must be designed with knowledge of resource requirements to integrate patient mobility into the daily nursing team care plan.

# Health, safety and wellbeing

Sun Q, Ji X, Zhou W, Liu J. <u>Sleep problems in shift nurses: A brief review and</u> <u>recommendations at both individual and institutional levels</u>. *J Nurs Manag.* 2019;27:10–18. https://doi.org/10.1111/jonm.12656

The purposes of this article are (a) to review briefly the current literature on shift nurses' sleep patterns, sleep quality, and the existing interventions implemented in nursing settings; and (b) to propose solutions that target individual nurses, nurse managers, and health care organisations to improve sleep health in shift nurses.

Dall'Ora C, Ball J, Redfern O, et al. <u>Are long nursing shifts on hospital wards</u> associated with sickness absence? A longitudinal retrospective observational <u>study.</u> *J Nurs Manag.* 2019;27:19–26. https://doi.org/10.1111/jonm.12643 To investigate whether working 12 hr shifts is associated with increased sickness absence among registered nurses and health care assistants. Bragazzi NL, Dini G, Parodi V, et al

Protocol of a scoping review assessing injury rates and their determinants among healthcare workers in western countries

*BMJ Open* 2019;**9**:e023372. doi: 10.1136/bmjopen-2018-023372 **Introduction** Healthcare workers (HCWs) are exposed to various risk factors and risky behaviours that may seriously affect their health and ability to work. The aim of this protocol is to detail the steps to follow in order to carry out a scoping review to assess the prevalence/incidence of injuries among HCWs.

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

Havaei, F., Macphee, M. and Lee, S. E. (2019), **The effect of violence prevention** strategies on perceptions of workplace safety: A study of medical-surgical and mental health nurses. J Adv Nurs. Accepted Author Manuscript.

doi:<u>10.1111/jan.13950</u>

Aims

To explore associations between specific violence prevention strategies and nurses' perceptions of workplace safety in medical-surgical and mental health settings. Background

Workplace violence is on the rise globally. Nurses have the highest risk of violence due to the nature of their work. Violence rates are particularly high among US and Canadian nurses. Although multiple violence prevention strategies are currently in place in public healthcare organizations in British Columbia, Canada, it is unknown whether these approaches are associated with nurses' perceptions of workplace safety.

#### Design

This is an exploratory correlational design using secondary data.

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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: <u>DianaG@nzno.org.nz</u>

Where to find SNIPS





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