Nursing Faculty P.R.E.P. (Personal Resilience Enhancement Plan)

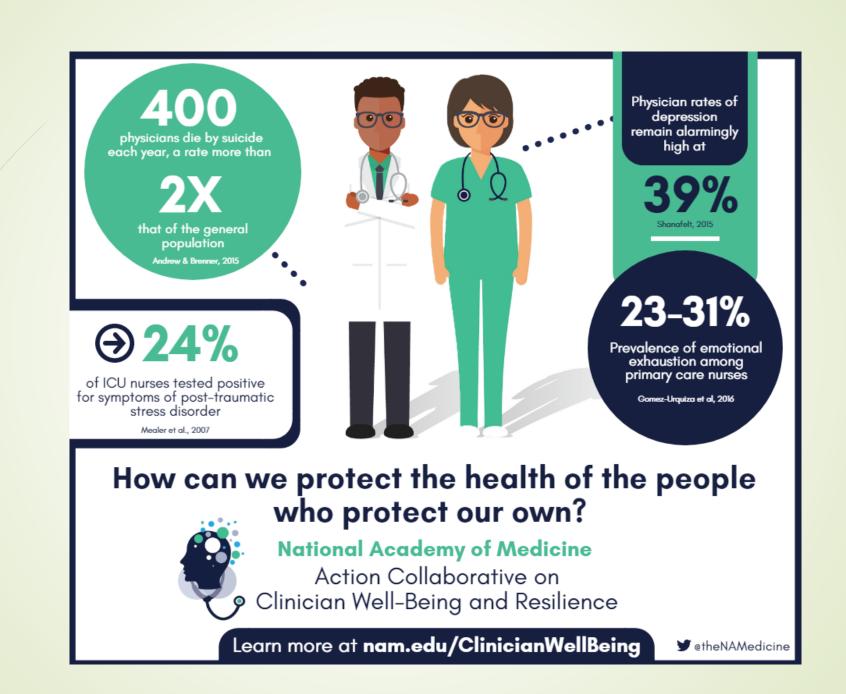
Teresa M. Stephens, PHD, MSN, RN, CNE Associate Professor, RNBSN Lead Faculty Medical University of South Carolina

Why Resilience?

Personal Resilience

Resilient Culture Resilient Teams





Nurse Suicide: Breaking the Silence

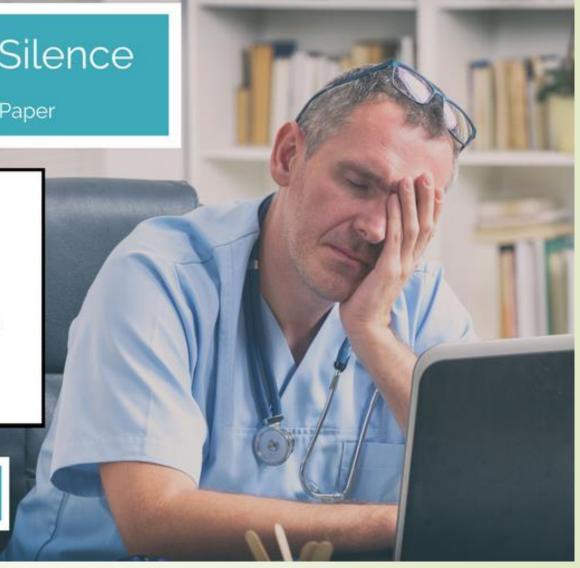
A National Academy of Medicine Discussion Paper

"Nurse suicide has been a hidden phenomenon in the profession and has not been adequately measured or studied in the U.S. The time for a culture change is now."

Davidson et al., 2017

nam.edu/perspectives

atheNAMedicine



FACTORS AFFECTING CLINICIAN WELL-BEING AND RESILIENCE

EXTERNAL FACTORS

SOCIO-CULTURAL FACTORS

- · Alignment of societal expectations and clinician's role
- · Culture of safety and transparency
- · Discrimination and overt and unconscious bias
- Media portraval
- · Patient behaviors and expectations
- · Political and economic climates
- · Social determinants of health
- Stigmatization of mental illness

REGULATORY, BUSINESS. & PAYER ENVIRONMENT

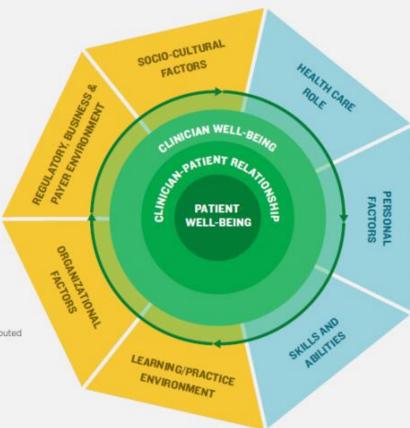
- · Accreditation, high-stakes assessments, and publicized quality ratings
- · Documentation and reporting requirements
- HR policies and compensation issues
- · Initial licensure and certification
- Insurance company policies Litigation risk
- · Maintenance of licensure and certification
- · National and state policies and practices
- · Reimbursement structure
- · Shifting systems of care and administrative requirements

ORGANIZATIONAL FACTORS

- Bureaucracy
- Congruent organizational mission and values
- · Culture, leadership, and staff engagement.
- · Data collection requirements
- · Diversity and Inclusion
- · Level of support for all healthcare team members
- · Professional development opportunities
- · Scope of practice
- · Workload, performance, compensation, and value attributed to work elements

LEARNING/PRACTICE ENVIRONMENT

- Autonomy
- · Collaborative vs. competitive environment
- Curriculum
- · Health IT interoperability and usability/Electronic health records
- · Learning and practice setting
- Mentorship
- Physical learning and practice conditions
 Professional relationships
- Student affairs policies
- · Student-centered and patient-centered focus
- · Team structures and functionality
- · Workplace safety and violence



INDIVIDUAL FACTORS

HEALTH CARE ROLE

- Administrative responsibilities
- · Alignment of responsibility and authority
- Clinical responsibilities
- · Learning/career stage
- · Patient population
- · Specialty related issues
- Student/trainee responsibilities
- · Teaching and research responsibilities

PERSONAL FACTORS

- Inclusion and connectivity
- · Family dynamics
- · Financial stressors/economic vitality
- · Flexibility and ability to respond to change
- · Level of engagement/connection to meaning and purpose in work
- · Personality traits
- · Personal values, ethics and morals
- · Physical, mental, and spiritual well-being
- · Relationships and social support
- · Sense of meaning
- Work-life integration

SKILLS AND ABILITIES

- · Clinical Competency level/experience
- Communication skills
- · Coping skills
- Delegation
- · Empathy
- Management and leadership
- · Mastering new technologies or proficient use of technology
- Mentorship
- · Optimizing work flow
- Organizational skills
- Resilience
- · Teamwork skills

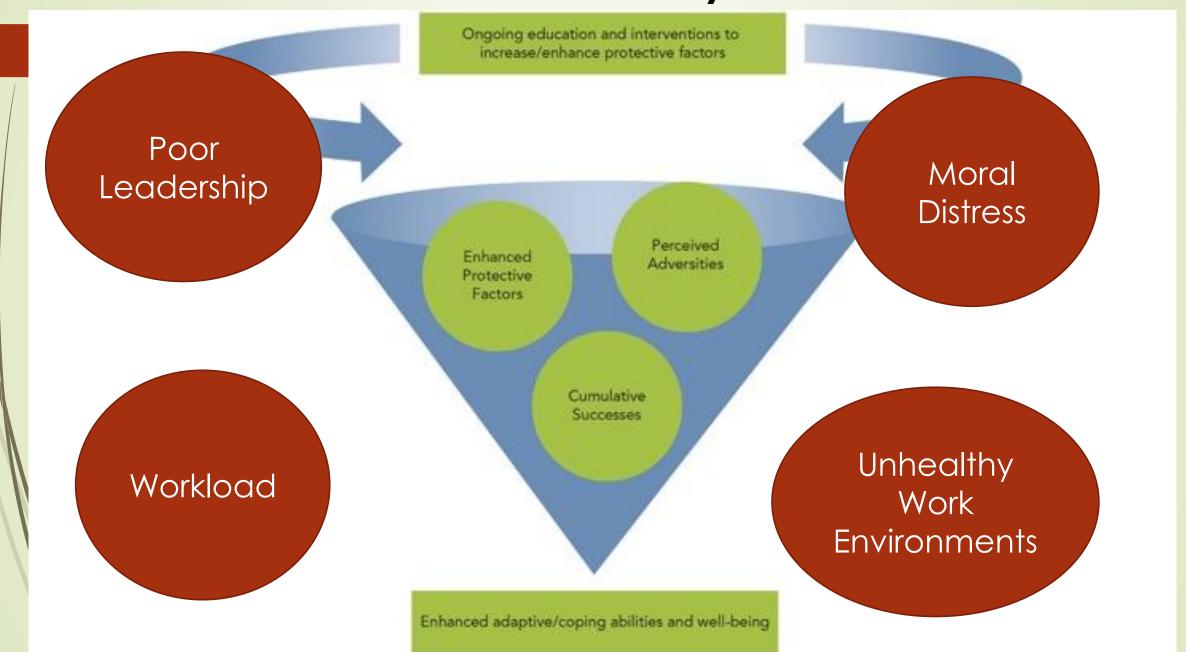




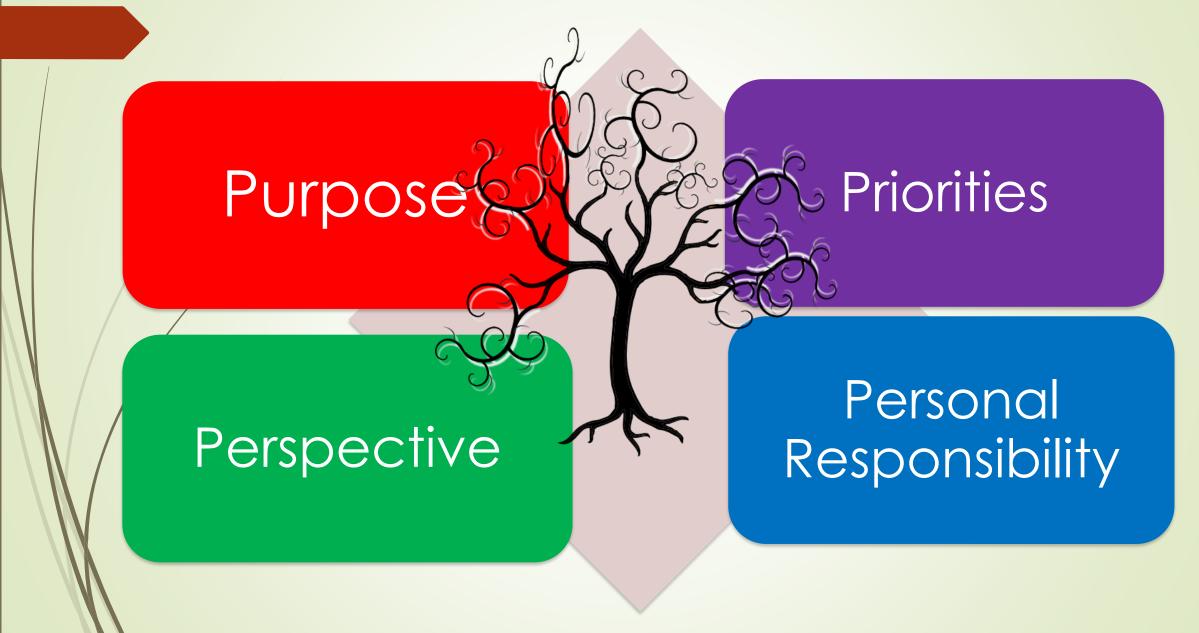
Stephens' Model of Resilience

"an individualized process of development that occurs through the use of personal protective factors to successfully navigate perceived stress and adversities. Cumulative successes lead to enhanced coping/adaptive abilities and well-being." (Stephens, 2013, 2017).

Risks for Faculty



4P's of RESILIENCE



Priorities



What matters to you and Why?



Purpose

Why are YOU here?





Personal Responsibility

- HRT
- Moral Courage
- Growth Mindset
- Commitment to Priorities &
 - Purpose
- Collective Efficacy



ROCK THE BOAT

PRACTICE & PROMOTE Critical & Creative Thinking



Collective efficacy



