

Advocates Spotlight Nurse Role

Competencies Outline Methods For Encouraging Transformation

The Pioneer Network, a national culture change advocacy organization, recently released 10 new competencies to help nurses participate in nursing facility culture change. The selection process for these competencies began in 2008, when the Hartford Institute for Geriatric Nursing, in collaboration with the Coalition of Geriatric Nursing Organizations and the Pioneer Network, formed an expert panel to discuss the role of nurses in the culture change movement.

The panel recommended creating a list of nurse competencies to help guide nurses as they participate in implementing culture change. Nursing experts then looked at the work involved with culture change and role models in the field in order to write a list of relevant and critical competencies for successful person-directed care.

The panel created 39 competencies and then narrowed down the list to 10 after conducting a survey of nurses from all over the country.

The 10 competencies cover a wide range of nursing duties. The competencies do not indicate the role of the nurse or level of education, so some concepts may apply more to some types of nurses than others.

Together these 10 competencies describe the attitudes and actions necessary for a successful licensed nursing team to encourage culture change. "These competencies are useful in identifying specific skills needed by nurses working in care settings involved in culture change," the Pioneer Network said in a statement. "It is a

first step in creating measurement and other tools useful in educating and supporting nurses in this work."

The competencies outline specific methods for encouraging culture change, such as acting as a team, focusing on person-directed care, and participating in shared problem solving.

The 10 nurse competencies are:

- 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.

- Creates systems and adapts daily routines and person-directed care practices to accommodate resident preferences.

- Views self as part of team, not always as the leader.

- Evaluates the degree to which person-directed care practices exist in the care team and identifies and addresses barriers to person-directed care.

- Views the care setting as the residents' home and works to create attributes of home.

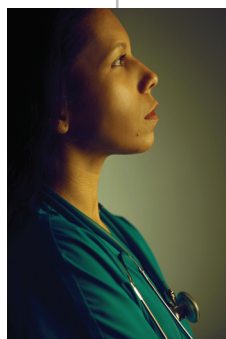
- Creates a system to maintain consistency of caregivers for residents.

- Exhibits leadership characteristics/abilities to promote person-directed care.

- Role-models person-directed care.

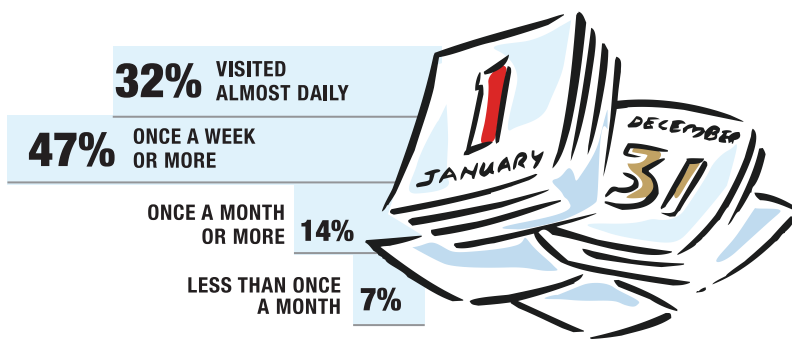
- Problem-solves complex medical/psychosocial situations related to resident choice and risk.

- Facilitates team members, including residents and families, in shared problem solving, decision making, and planning.



By The Numbers

Most nursing home residents visited by family at least weekly



Based on the responses to the question, "How often are you (or do you) visit?"

Source: Skilled Nursing Resident and Family Satisfaction Surveys collected in 2009 by My InnerView, as reported in the "2009 National Survey of Consumer and Workforce Satisfaction in Nursing Homes"

—Amelia Martinez