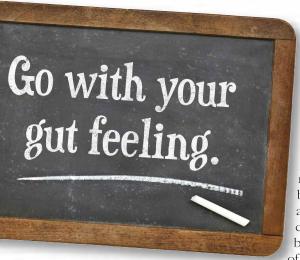
Using your GIFTS to protect your nursing license

By Lorie A. Brown, RN, MN, JD

MY NEW CLIENT, Karen, sits across from me, looking scared. She cries as she tells me the state nursing board has received a complaint about her and she has been fired. I can tell she's a compassionate nurse who does a great job and doesn't understand why this is happening to her.

Like most of my nurse clients, Karen never imagined she'd be called before the nursing board. I tell her that few nurses ever think they'll find themselves in that situation. Yet it happens every day. In 2013, formal charges were filed against 7,000 nurses, according to the National Council of State Boards of Nursing.



To help you avoid financial catastrophe stemming from a disciplinary action, be sure to purchase nursing liability insurance that covers reimbursement of a lawyer's

fees for defending you against a disciplinary action. (Not all policies cover this cost). And to help prevent charges against your license in the first place, be familiar with the laws and regulations governing nursing practice. Questions on the nursing licensure examination are based on *how* to be a nurse, not the laws we must abide by. Even if we read the laws and regulations, we may not understand them because they're written in legalese; what's worse, they may be subject to interpretation. Being familiar with the laws and regulations can help you guard against nursing board actions.

Understanding the nurse practice act

The laws empower each state to appoint a board of nursing, which has the authority to develop administrative rules and regulations to help set standards for nursing practice. In each state, the nurse practice act Following each element of the author's GIFTS acronym can help you safeguard your nursing license.

regulates nursing practice and education. It defines the legal scope of nursing practice, sets standards for the nursing profession, and helps protect patients from unsafe or unprofessional nursing practice. The American Nurses Association has published a model nurse practice act to guide states in creating and maintaining nurse practice acts. (See www.nursingworld.org/modelofpracticeregulation.)

Each state's nurse practice act defines key terms and describes:

- the power, authority, and composition of the nursing board
- · standards and scope of nursing practice
- types of nursing titles and licenses
- protection of titles
- licensure requirements
- educational program standards
- grounds for disciplinary actions and other violations, and possible remedies.

Karen's story

Karen told me she'd been working in a subacute longterm ventilator care facility, where patients were being weaned off ventilators. Alarms for the call light and the ventilator sound similar. The only difference is the ventilator alarm goes off in shorter bursts and sounds if the device has become disconnected or isn't working properly or if the pulse oximeter probe has become dislodged.

The unit where Karen worked was oval shaped. She was sitting at the nurse's station documenting her care and looking toward the five rooms of patients she was responsible for when she heard an alarm. She determined the alarm wasn't for one of her patients. When it kept sounding, she turned around to ask her colleague if she needed help. The colleague said no and explained she was taking care of it.

The alarm stopped, but shortly afterward, another alarm sounded. Again, Karen looked down the hall and confirmed the alarm wasn't for one of her patients. As it continued to sound, she got up and saw that the col-

league she'd just talked to was still sitting at the nurse's station. Karen said to her, "Let's go see what's going on." They found everything was fine with the patient.

The next day, Karen was called into the manager's office and told that a ventilator alarm had gone off but no one had responded promptly. She was shocked to find herself fired and to learn a complaint had been lodged against her with the nursing board. She was beside herself. The alarm wasn't even related to her patient. She told me everyone at the nurse's station that night who didn't address the ventilator alarm promptly had been fired and reported to the board.

I asked Karen, "What were the policies and procedures for answering ventilator alarms at your facility?" She said she didn't know. I explained that nurses should be familiar with and follow their facility's policies and procedures. Then I shared with her a tool she could use to help protect her license in the future. I call it GIFTS—an acronym well worth remembering.

Giving

As nurses, we're always giving to our patients, but we may not be as giving to our coworkers and ourselves. Although Karen's actions seemed innocent because the alarm didn't pertain to her patients and she was busy documenting patient care, her actions showed she wasn't being *giving* to her colleague or the patient whose ventilator alarm was sounding.

Integrity

Integrity means being honest and forthright and adhering to one's core moral and ethical values. One of Karen's core values was to make sure all patients at the facility received good care. That day, her actions didn't align with this core value because she didn't provide care to a patient who wasn't hers.

Focus and follow-through

Focus and follow-through are crucial in nursing. We're programmed to go on autopilot at times—and this can make us miss something important. Have you ever driven home and missed your turn because your mind was focused elsewhere? That's how easy it is to get distracted and fail to follow through on what's required of us. Nurses get so involved in organizing our workload and thinking about what's next that we sometimes don't focus on what's happening in the moment. Karen was concerned about completing her documentation rather than focusing on the most important issue at hand—responding to a ventilator alarm. It took her a while to realize her coworker wasn't responding to the alarm, either.

Follow-through is imperative for nurses. It's part of the evaluation step of the nursing process; we can't afford to neglect it. When we give a medication, we need to follow through and make sure it's having the desired effect.

Trust your gut

Karen's gut was telling her she needed to address the alarm. But rather than responding immediately and making sure her coworker was going to check on the alarm, Karen ignored her gut and continued to document.

Despite our heavy reliance on technology, our gut is our best guide. When something doesn't feel right, act on what your gut is telling you. Don't ignore it.

Source

You are the source of everything that happens in your environment. This means you have responsibility and ownership for it and can do something about it. If you help create a situation, you can change it. When Karen failed to respond to the alarm immediately, she was failing to act as the source. And if she believes she was fired unjustly, she'll always be an *effect* of what's going on around her, not the source of it. Being the source is a much more powerful position because you can do something about the situation.

Using your GIFTS

Perhaps some aspect of your career isn't working well. If you examine the situation, you're likely to realize you're ignoring one or more of your GIFTS. If you use these GIFTS, you will be surprised how quickly the situation can improve.

Using your GIFTS takes practice. For many smart, confident nurses, trusting our gut doesn't come naturally. We tend to think through problems rather than trust our instincts. But our instincts can be strong. Have you ever walked into a patient's room and known right away something was wrong? You couldn't see it or put your finger on it; you just knew. Chances are, something was wrong.

Although Karen was disheartened about being fired and reported to the nursing board, she was grateful to learn about the GIFTS and became committed to using them in her practice to protect her license from that point on.

If you practice the GIFTS, they can become a permanent way of life. They may just be what you need to keep your nursing license safe.

Selected references

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