NURSEDECK



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Where nurses share stories, resources & guides to help inspire and motivate.

"When you're a nurse, you know that every day you will touch a life or a life will touch yours." —Unknown



NEVILLE GUPTA

Founder/CEO

As a strong advocate for the union between humanity and technology, Neville's focus leans toward tech influence on creating highly desirable working environments encompassing altruism, autonomy, human dignity, integrity, honesty and social justice.

GABRIELLE DIDATO

Head of Influencer Marketing & Partnerships

LAKESHIA BATES

Community Engagement Manager

DESTINY GORDON

Brand Marketing Specialist

nurseadeck

THE VOICE OF NURSING



We're on a mission to amplify "being heard" and create connections for the global nursing community of 28M

NurseDeck, which operates through a digital omnichannel model, including social media, all-inclusive NurseDeck network, and nursing communities offers reward and affiliate-based healthcare services and Nursepreneur PR and marketing solutions that will enhance further education, employment, career opportunities, and extra sources of income

"Be a Voice. Not an echo."

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THE VOICE OF NURSING



Empowerment

Empowering is vital for success in healthcare. Giving nurses a community to be their best reaps positive results to be more engaged and excited about what they do.

Impact

Nurses use their voice and experience to advocate for patients within the team playing key role in shaping policies.

Commitment to Patient Care

Commitment to the service of mankind has always been a key concept of professional nursing.

Healing

A nurse is an instrument of healing. Healing is a positive, subjective, unpredictable process involving transformation to a new sense of wholeness, spiritual transcendence, and reinterpretation of life.

Integrity

Integrity, maintaining strong moral principles like honesty, fairness, and honor, is one of the core values in nursing that needs to be maintained.

Dignity

The nursing profession has a professional dignity that is to be continually constructed and re-constructed and involving the recognition of inner worth and social dignity subject to different social factors and moral behaviors.

Diversity

Acknowledgment and appreciation of the existence of differences. We implement the value of diversity that is a growing need for nurses who can collaborate with each other and treat patients from a culturally sensitive perspective.

Excellence

Courage. Compassion. Connection. The promotion of safe, effective, competent, and ethical nursing care where the individual nursing practitioners can evaluate the services being provided by them and act as a catalyst for self-regulation and improvement.

Personal Development

The importance of lifelong learning and the need for a process designed to promote areas of improvement for nurses such as patient care and population health with dedicated resources, customized professional development plans, and an effective measurement system process.





AN EXCLUSIVE INTERVIEW: TRAGEDY OPENED THE DOORS TO TRIUMPH, AND LED HER TO MENTORS AND LESSONS

ABOUT GROWTH AND SELF CARE.

By NurseDeck

PHD, RN, CNE

Dr. Shannon Harrington is a nurse with 19 years of experience in the clinical setting, academia, and leadership. She is a writer and CEO, running a business named T.R.Y. Again Health & Fitness, LLC. She works with companies and leaders to improve holistic health outcomes, and transform and develop nurse leaders.

ND: Welcome to NurseDeck. Shannon, can you tell us a little bit about how you got started on your nursing journey? I see that you wrote a book too.

SH: I was super excited to be invited to this platform to share a little bit about my story and to hopefully, inspire and motivate someone, and continue to support the awesome work that you guys are doing here at NurseDeck. Whoa, when did I start nursing? When you said that, what I go back to is my first memory of nursing, when I was five years old. I was that kid that was on the playground and if anybody fell and had a boo-boo, I was over there bringing all the kids that have booboo's home and my mom was like, "you cannot fix everybody"! So, I was that kid...

I went from high school straight into a bachelor's program and I graduated in 2002. I cannot believe that I will have been a nurse for 20 years next year, but I have all of my degrees, my bachelor's, my master's, a PhD, my postdoc, all are in nursing, and I've had a wild ride. I say I've been from CNA to Dean and everything in between, and now I am an author, as you spoke of my book, and I am a nurse entrepreneur.

ND: I am absolutely ecstatic to ask you the very first question. And what are your thoughts on the leadership development opportunities for minorities in nursing?



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I say that there's a difference between selfcare routine and self-care practices. Where you start is with self-awareness.

> SH: I think it is both internal and external. And what I mean by internal is, it's a personal journey. I have a lot of friends and colleagues, who would agree. Sometimes we have that scholar imposter or leadership imposter syndrome. A lot of times, minorities don't have people that look like them, or that they can relate to, or that will take them under their wing to help them get to that next level. If you don't have that passion, that drive, that belief, that awareness that you can, internally, then that's an obstacle. That's one obstacle, and the external part of it for me, unfortunately, I've experienced it, is that "Nurses eat their young". So the lack of leadership development opportunities minorities is related to cultural issues. ethical issues and personal challenges.

> ND: I've been talking and listening to people talk about how nurses eat their young and I have to go back through my own personal journey, and it was like, was I eaten? (Laughter). When you analyze the situation, start asking yourself, was it the environment? And that very moment? Was the nurse trying to save the patient and getting me out of the way? And what can I do? What did I learn?

SH: I hope you weren't eaten. There's always a reason for "eating". Sometimes, in high-stakes, life or death moments, a nurse can feel like they were "eaten". If it saved the patient's life in that moment; I say; Eat them. If you are just being mean to a new nurse, then "eating" is not appropriate. We need to cultivate a very supportive environment where nurses feel comfortable, not intimidated or disrespected.

ND: Tell me about your "Try" again. "Try" what [do the] T, R and Y stand for?

SH: T.R.Y. means to transform and renew yourself. And it's based off of the scripture, Romans 12, one and two about being transformed by the renewing of your mind. We were just talking about the mental health aspects of nursing. That growth that you mentioned earlier. If you let nursing just take you where it needs to take you, you have to deal with yourself in a lot of different ways. And a mindset shift happens as you grow, as you learn, as you evolve, as you have different roles in nursing, and as you experience different leadership challenges. In all of those different experiences, it's that constant transformation. So the "TRY" means transform and renew yourself. And it's the name of my business, T.R.Y. Again, Health and Fitness, LLC, as well as the name of my book. It helps you on a 21-day journey. And you know, [as nurses], we're very systematic. So it is three weeks of discovery, decision-making and delivery. In week one you are discovering yourself and becoming self-aware, and then week two, we're going to make some decisions, we're gonna have smart goals.



And then after that, in week three, you're ready to get to work (and deliver) because as I say in the book, "transformation requires your active participation". Nobody can change your mind for you. You've got to be involved in that process of changing your own mind. So that's what the book is about.

ND: So how do we ensure that we are caring for [ourselves]? What's the secret? Because I have yet to find it.

SH: Well, you have to download my free eBook at www.drfitnurse.com and answer that question. Because you have to participate, my dear. But self-care tips, where I start is where you started. I say that there's a difference between self-care routine and self-care practices. Where you start is with self-awareness.

I had to really become self-aware and slow down long enough to smell those roses my mommy always talked about and really say "Shannon everything is not an emergency. Everything does not require your yes!"



No is a complete sentence, you are entitled to your no and without explanation. "No" establishes boundaries and "No" is therapeutic and people on the other side of "No" will be okay. But I had to become self-aware and really understand what I needed in that season and convince myself that it was okay to fulfill that need. And now I'm to the point where I have a self-care routine and I have self-care practices.

ND: How are you able to balance that pursuit of constant education and making sure you're there for your family?

SH: I learned that in a season where it was self-care or die. One of my mentors was my bosses - boss and she and I we were having a conversation about work life balance, because working 70 hours a week, even though you're paid very well to do so, um, it was a lot. And she worked probably more than we did. And she said, "there's no such thing as work life balance." And I'm like, "What are we supposed to do, just kill ourselves at work? Like, what do you want us to do?"

And she says, "I call it work life integration." And she said, "Sometimes you're going to be at work and you're going to have to stop in the middle of a meeting and go and take care of your child or go to the hospital to visit your mom or whatever. And sometimes you're going to be at your kid's softball game, and you're going to get a work call that you have to step away and take." So once you get to a certain level of leadership and responsibility and accountability, it's like your life is not your own. But you have to choose to not necessarily have the balance, but to maintain the boundaries. So I got real good at setting boundaries so I could be there for my family as well as pursue my academic and professional goals.

ND: I want to ask you about boundaries... I want to hear a little bit about that, because I think that so much ties into our mental wellness.

SH: Everything about what I've heard you talk about has been a journey of transformation and elevation... One of my other favorite quotes is, "Elevation requires separation." And I know that Steve Harvey says, "everybody that comes with you can't go with you". They might not understand your transformation. You go from an egg to crawling as a caterpillar to the chrysalis, and then the chrysalis breaks out and it becomes this beautiful butterfly, the mode of transportation through transformation - changes. It kind of separates you from people because they don't understand you and you no longer talk the same language. I think that as you grow up, some people can take that journey of growth and transformation with you.

And some people get left behind because they no longer serve you. They started with the old you, but once you transform from an egg to a butterfly, you kind of need butterfly friends.

ND: How do we move beyond COVID? Because we are so divided. And the science has been divided and politicized. And today we know so much more than we did a year ago. How do we interact with all clinicians to pull us together. How are we going to pull ourselves together to get back on the right track? The loaded question I know and I apologize, but I have this sense of urgency for us to stop yelling at each other. But how do we move forward and support one another as clinicians regardless of what side you are on?

SH: Yes, loaded questions, loaded responses. So I will try to answer this as best as I can. I think that we have to just - start. I had a former manager that led with love. And I think that if we can get back to loving each other... just the fact of loving and accepting each other and trusting each other. And knowing that nobody has all the answers. We are in the middle of unprecedented times where as nurses and as Type A B C D, anal people we want black and white responses, okay, "take the vaccine, don't take the vaccine; don't kill me, it's not gonna kill me; everybody should get it, nobody should get it." We just want yes or no answers. I used to work for an organization and I said, we're building the plane and putting the engine on and putting the wings on while we're in mid-flight. And that's what we're doing right now in the middle of this pandemic.



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Nobody has the answers, but it's not gonna change the fact that the science is what's going to drive us, hate it or love it. But the science is what's gonna drive us. Sometimes it's gonna be political agendas, and /l'm not going down that road. But, it's a lot of different things that can feed all of this. We need to get to the common ground of leading and having those interactions that are founded and rooted and grown in love, and respect, and trusting the process and knowing that nobody knows, but we're all in the same boat trying to figure it out. Once you get the point where comfortable being uncomfortable and accepting a new normal, because that is the shift that we have to make. Right now, in order to move past that we have to be in that sweet spot of uncertainty and just kind of surrender to the process and love each other and stop trying to chew everybody's head off. (laughs)

ND: Thank you. I appreciate your time so very, very much.

SH: You are very welcome, I have thoroughly enjoyed this interview. So thank you very much. I appreciate you.