

nurse+deck

THE INSIDER'S PERSPECTIVE OF NURSING

Caring.Integrity.Diversity.Excellence

KIMBERLY DELBO

MSN, RN-BC, CSN, CDP

**THE NURSE LEADER
WORKING TO
IMPROVE
HEALTHCARE &
REDUCE BURNOUT**

VETERAN NURSING
PROFESSIONAL,
EDUCATOR, RESILIENT
LEADERSHIP EXPERT

READ ABOUT

Addressing social determinants of health
How to mentor the next nurse leaders
The importance of valuing nurses

NURSE NETRA (HUMOROUSLY)
EXPLAINS THE GREAT NURSE
DEBATE: CULTURAL
COMPETENCY

THE MOST COMFORTABLE
SCRUBS & SHOES FOR
LONG SHIFTS

WHAT'S INSIDE...

If you're here for the Insider's Perspective, you've come to the right place. Each week we highlight stories from nurses #InTheField, bring you tips on leadership, mental health, and more. We also feature a Nurse of the Week - a nurse influencer doing incredible work we can all look up to.



Page 5
Nurse Netra (humorously) explains the great nurse debate: cultural competency



Page 6
The most comfortable scrubs & shoes for long shifts



Page 9

KIMBERLY DELBO

The nurse leader working to improve healthcare & reduce burnout

Kimberly is passionate about quality care for all, and she is walking the walk to make it a reality. A leader, educator, and innovator, Kimberly believes collaboration is the key to transforming healthcare.

nurse+deck Social

Apply to join Scrub Verified



Our community advocates are passionate nurses who share their stories with our community and their followers. There are many opportunities you will have as an advocate:

- Be a part of a community that celebrates diversity
- Be a part of a community that values your opinions
- Access to support & guidance from your network of ScrubVerified nurses
- Get free NurseDeck gear monthly
- Your public support of nurses will become eligible for NurseDeck cross-promotion in order to help our aligned missions
- The opportunity to work with us on a long-term basis

How it works:

Entry qualifications:

- Nursing license must be active
- #InTheField submission
- Currently employed in any clinical setting or be a nurse entrepreneur
- Completed volunteer work, mentored or are publicly involved in promoting the well being or advancement of nursing professionals
- Adhere and promote guidelines set by the CDC, WHO, ANA, and your licensing board
- Submit at least one high resolution photo

Meet all requirements? Apply at nursedeck.com/scrub-verified.

Join the community at social.nursedeck.com

Interested in travel nursing?

There's a new group on NurseDeck Social.



Travel Nurse Rich - Exclusive Content + Tips

Join for travel nurse tips
and stay up to date
with trending
Tik Tok influencer:
Travel Nurse Rich.

Richard Darnell (A.K.A. Travel Nurse Rich) is a full-time Travel Nurse and influencer. He graduated from Mercy College with an ASN in 2016 and continued online while working as a full-time RN to finish his Baccalaureate in 2020. Rich loves spending time with his wife Jocelyn and their two young children Levi and Jase when he's not at the bedside.

The majority of the travel nurse contracts Rich takes are in the Intensive Care Unit and are through his travel company TNAA. In July of 2021, Rich started a travel nursing TikTok account because he wanted to help share what travel nursing is all about and how anyone can be a travel nurse just like him.

*All members will
first receive a FREE
one week trial*

Membership Rate:
*One-time fee of
\$35*

#InTheField

Nurse Netra explains the great nurse debate: cultural competency

Kansas City-based psychiatric nurse Netra Norris explains cultural competency, what led to her specialty, and her take on the nurse myth.

Q: TRUE or FALSE: “Nurses eat their young.”

A: Absolutely false. Nurses do not eat their young, we are very much vegetarian when it comes to that statement.

Q: What is your specialty and where are you based?

A: I am based in Kansas City, MO and I’m a psych nurse kind of gal.

Q: What does cultural competence mean for healthcare providers?

A: Cultural competence requires acknowledging personal biases and removing them from what the patient wants or needs for their best way of living. To know is to acknowledge so as healthcare providers we must embrace other cultures with acceptance and the willingness to learn.

Q: What is your experience with nurse unions?

A: When nursing gets tougher the nurse unions keep growing. Advocation is not just needed for patients.



Q: How did you choose your specialty? What drew you to it?

A: I chose my specialty from personal experience that transitioned into a passion to help others free themselves. ■

Find Netra on Instagram: @netra.norris.

The most comfortable scrubs & shoes for long shifts



Nurses are some of the hardest working medical professionals out there, and working long shifts can be challenging. Whether you're on your feet all day, or sitting in front of a computer screen for hours at a time, it's important to make sure that you are as comfortable as possible during your nursing shift.

That comfort usually comes from the type of shoes and scrubs worn by the nurse. The shoes they wear and the nurse scrubs they choose will make a difference in how long they can work during their shift, as well as how much energy they have to do their job.

Unfortunately, not all shoes and scrubs are the same! There are so many different options and styles to choose from. Some things to consider when deciding on what style of shoes to wear are how long you will be on your feet, do you need arch support, traction, and how versatile the shoe is.

A study from HermanMiller Healthcare showed that the average nurse can walk up to 4 miles during a 12- hour shift.

The type of shoe a nurse wears can make or break the shift! A bad shoe can lead to back problems, knee problems, hip pain, or plantar fasciitis. Finding the right shoe will eliminate the chances for soreness or injury.

At the end of the day, the most important thing is finding a pair with whom you will feel comfortable enough to work the entire shift and deliver the greatest possible treatment to each patient!

Here is a list of the top five shoe brands worn by nurses:

- Dansko Clogs
- Hoka
- Brooks
- Bala
- Clove





All of these brands have different styles to suit the needs of every foot! A good pair of shoes or sneakers can provide all-day comfort and support for nurses on their feet all day long. Besides for comfortable footwear, scrubs also play a role in how comfy the nurse will actually be.

Nurses spend their shifts bouncing from room to room, sitting to standing, and lifting patients. Having on the right scrubs will make all of those tasks much easier. The type of scrubs being worn can tell you a lot about a nurse. Some nurses like them for fitting with the cuffed bottoms. Other nurses prefer looser scrubs with a lot of pockets. It's all about preference and ensuring the job gets done! Body shape, color, price, functionality, and durability also play a factor in which type of scrubs a nurse will choose to wear. Picture sitting at the nurses station trying to chart an assessment but your scrub top doesn't fit right.

All you will think about is how uncomfortable you are! Don't do that to yourself! Just like with shoes, there are so many options to choose from when finding the right pair of scrubs.

Here is a list of the top 5 scrub brands that nurses wear:

- Cherokee
- Dickies
- Greys Anatomy
- WonderWink
- Figs

Each brand has different styles that suit each body type. If you are a nurse looking for shoes and scrubs, take the time to do your research. Be comfortable and confident knowing you are providing the best care possible! ▀



nurse+deck

INTERVIEW HOST



BREANNA KINNEY-ORR, RN
NURSEDECK AMBASSADOR &
INTERVIEW HOST

Nurse Breanna hosts interviews for NurseDeck to share stories, resources & guides to help inspire and motivate the NurseDeck community.

Breanna has been a Registered Nurse for 15 years. She specializes in creating communities where nurses are supported, focusing on amplifying nurses' voices across the healthcare community. She also specializes in content creation, editing, and copywriting, with an emphasis on medical, health, and wellness topics.

I love hearing about startups. With NurseDeck we have our little patch of dirt at work time, to spruce up and help the nurses' community base. I love that there are people like NurseDeck trying to shake things up because we desperately need it.

WANT TO HOST AN INTERVIEW?

NurseDeck is a community built by real nurses and for real nurses. Our interview hosts know what to ask our featured nurses because they've been in their shoes, and so have you!

NurseDeck is where nurses share stories, resources, and guides to help inspire and motivate other nurses, and inform the rest of the world about the nursing profession.

If that's something you want to be a part of, email julia@nursedeck.com.

KIMBERLY DELBO

MSN, RN-BC, CSN, CDP

An exclusive interview: **The nurse leader working to improve healthcare & reduce burnout**

By NurseDeck

Kimberly Delbo has over 15 years of experience in nursing practice, academia, and research. She's worked in school nursing and home health, and served in leadership roles in a career center and long-term care setting. Kimberly has been an educator for years, most recently working as an adjunct professor at Luzerne County Community College and nurse faculty at Lehigh Valley Health Network. She's a leader - and founded a leadership consulting and coaching company, Radiant & Resilient Leadership - and a learner, as she's pursuing her doctorate of nursing practice, leadership, innovating change, and nursing education. She recently took on another role as community innovations director for Partners for a Healthy Community, a nonprofit working to close the digital gap and promote technological literacy, health and wellness among vulnerable seniors. Kimberly believes in collaboration and promoting a culture of excellence, health, and safety to meet the high demand for quality care.

NurseDeck (ND): Hello, thanks so much for being with us today, Kimberly. You are one of those nurses that has done so much, and worked on topics that are top-of-mind for nurses right now, so I'm really excited to talk with you today.

Kimberly Delbo (KD): Thank you for inviting me to be here with you today.

ND: Let's jump in! What are your thoughts on cost-effective health care? What are things we can be doing to improve it?

KD: Absolutely. We know our healthcare system is broken, we spend more on healthcare than any other developed country, yet our outcomes are the poorest. There's so much we can do to improve quality of care, and just the cost of care in general. I love population health, and I have advanced specialization in education and community health nursing, which always have a very special place in my heart. I'm really an upstream preventionist, at heart.



So, when we look at decades of research, it has shown that for every dollar we invest in prevention, we can realize a savings of up to \$13, in theory. I believe there's a shift that's needed, in terms of caring for people where they live, learn, work, play, and pray. Now, while addressing those social determinants of health, evidence has also shown us our health is very much determined by these social determinants, like housing, food, transportation, and we really can impact it. I mean, 80% of one's health is determined by social determinants. So, how can we impact that more effectively? I believe that really will require us to improve primary care and mental health services, and that will have a tremendous impact on improving the cost of care delivery. There's power in partnership and innovation, and I really believe that's part of answering how we correct the broken healthcare system. It's going to



We know our healthcare system is broken, we spend more on healthcare than any other developed country, yet our outcomes are the poorest.

require us to break down our silos, and really forge relationships, through informal and formal partnerships, working across the care continuum to enhance health care. It's really exciting times when certain things aren't necessarily going well, it's a wonderful opportunity for us to harness this disruptive time we're living in to make improvement. We can't help but to say we have a fragmented healthcare system in many ways, right? Unnecessary duplication of medical care, in general, which costs our healthcare system billions of dollars, so how can we better leverage technology to fix this? We know technology is an accelerator driver, when it comes to translating research into evidence-based practice innovation so I think we would be amiss if we did not leverage technology like that, which can help us realize tremendous outcomes. Leadership is foundational. We have to have a new type of leadership moving forward to transform our healthcare system. We need to move beyond traditional styles of more linear leadership models where it's a top-down versus a systems approach to care delivery.

ND: That is such an important point, because we look at healthcare as this giant entity - like how in the world are we going to fix this? And, of course, it has to come through collaboration. We have such a bootstraps mentality in this country - that you have so much control over your destiny - but really the situations you're born into, you live in, determine your health. Thank you for raising all those awesome points.

KD: We can talk all day about that point. Nurses are so geared to be able to help fix these problems that we're facing. So, if we leverage them effectively, I'm sure we can make a tremendous difference.

ND: As far as platforms like NurseDeck - talking about reaching out and touching the person next to you to start a movement to help with some of these problems - what do you think nurses can get out of a virtual community like ours?

KD: I love what you're doing at NurseDeck, and kudos to you folks for the vision to start such a platform that fosters a spirit of community and connection. You include students in it, which I love, I love the nurse educator in academia, I love that. I just love the fact that you're giving them the resources, the guidance, the mentorship, and the voice that they need to be able to make a difference and grow within their profession. One thing nurses do really well is we are lifelong learners, many of us, and we're looking to grow and thrive where we're at, but we also want to make a difference. That's the reason why many of us join





the profession of nursing, right? I love the mentorship you bring to the table, mentorship is important at every level of nursing. I foresee it really allowing nurses to find the guidance they need to help them where they're at in their journey, and connect them with the other professionals that can give them advice and support in the process.

ND: Why did you want to become a mentor? Why was that important to you?

KD: I find great joy in seeing others reach their goals and dreams that they never dreamed were possible. As a result, it often can change their entire lives. Some of them are even coming from lower socioeconomic levels into nursing school, and then getting a career in nursing. You're seeing them then becoming able to buy a new home and some of them are single moms. It helps them in terms of their entire family unit - to address their own social determinants in their household. We sometimes take a population of students and then see them thrive and, and it's so fulfilling to see that occur. Then

they're helping society by providing quality care, so it's a win-win-win, a win for the student, a win for the society in general and the organizations in which they're employed. I think why I'm so drawn to mentorship is truly, it's an affair of the heart. It's a connection, and it really can benefit everyone. From an organizational standpoint, mentorship has been proven to enhance loyalty between employees and employers, it helps to decrease absenteeism, promote retention, and diversity, and also helps people to acclimate to their roles and grow within that role. When you look at it from a mentor level, it's beneficial to them. It's fulfilling to be able to make a difference in a profession and also in the lives of other humans. I don't think that there's a greater calling, or a greater reward, than to be able to do that. It allows you to give back to others what was given to you in the past, and it helps you to improve your communication skills. For the mentee, this is going to increase their confidence, help with professional development, their recognition of their skill development, and acquisition of skills in general. It also

just provides that connection, which we so desperately need. We're living in the midst of the COVID pandemic, but this is also a social isolation, loneliness epidemic in which we're living, and this was long before COVID. I'm pursuing my DNP, and I had done a lot of work looking at social isolation and then COVID hit. We can leverage technology to address that, and the weight of it but I think we really need to promote relationships. So that's what mentorship does, and it's a beautiful, beautiful thing, a beautiful process.

ND: I hear what you're saying, that mentors are anchors for our profession. A mentor, even if they've never been through a pandemic before, can still offer some guidance on how to get through tough times when you feel like you're drowning at work. My heart just goes out to those nurses. Speaking of COVID, how do you feel about the treatment of nurses and health professionals? I feel like we had our big hero moment and now it's gone. What are your thoughts on what nurses and health professionals have gone through?

KD: This is what really strikes a chord with me. It's so disheartening to see



We're living in the midst of the COVID pandemic, but this is also a social isolation, loneliness epidemic.



this occurring. I have the privilege of networking with nurses across the globe, and they've indicated they feel less valued, less respected, unappreciated, they're just exhausted emotionally, physically, mentally, holistically exhausted. They're just really worn out, and suffering from moral injury, burnout, mental health problems, and they're deciding to leave the bedside in droves. It's a scary thing for our healthcare system in general. One of my colleagues, Aliya Aaron - she runs Nursing Innovation Hub - put up something on LinkedIn and said, "Could you imagine a healthcare system without nurses?" I mean, what would happen right? We need to think about that: what impact it is going to have on our overall society. This is going to have an impact COVID-19, and not just on nurses. This is a serious thing we need to be proactive on and thinking about. We're dealing with this public health crisis, a nursing shortage crisis, which has translated into a public health crisis, and then seeing things we never had to deal with. In the history of nursing, with high patient acuity, high volumes,



we're dealing with virus on every end, and now wave after wave after wave. It's just exhausting for these poor nurses and healthcare professionals across the continuum. As a result, they're leaving, and this is going to impact care delivery. When we look at a national survey that was completed not too long ago, it said nurses were reporting that they're worried about going to work, worried about how they're going to be treated, and 56% reported a manifestation of the inability to concentrate. So, it's impacting their mental health in many ways. Creating psychologically safe work environments that are going to destigmatize mental healthcare, is really going to be necessary moving forward to address these issues that we're facing as a result of COVID-19 and the social isolation and loneliness epidemic at the same time.

ND: I one thousand percent agree, I think it's going to be a subject that people are going to be talking about for decades to come. That sort of leads into our next question, the current working conditions

for nurses. I think the hot topic in the beginning was, "there's no PPE" and everybody's struggling and scrambling for ventilators and "where do we put people in? How is this transmitted?" A lot of those questions have been answered, but the current working conditions have not.

KD: The work environments we're working in, they have to be improved. The state of health among nurses before COVID-19 was not good, and then we threw on COVID. I mean, we had 50% burned out before COVID-19, and this goes for physicians and other healthcare professionals. We have to do something, and this is why leadership is so important: a positive professional, healthy workplace environment. I've had the privilege of doing a lot of research in that area, and that's another reason why I decided to launch - even before COVID hit - Radiant and Resilient Leadership, in an effort to promote positive professional workplace environments. There's a lot of work we can do in this space, and a lot of organizations that really need this work to be done. There's assessing the problem, first and foremost, and acknowledging it, and then working as a team professionally and collaboratively. Bolstering the leadership pipeline is going to be necessary for workforce development to occur. So this is going to include structural empowerment on all levels, providing the resources and professional development they need to step up and really rise through this situation. Organizational resilience is all about helping organizations as a whole be more resilient and bounce back after this crisis. So, there's a lot of work we can do and, and there is return on investment with doing this, it doesn't cost a whole lot of money. It's really, it's a no brainer.

ND: Right. I think leaders are made in

nursing, and I think this pandemic is producing a lot of leaders, even if they don't realize it's happening right now. That's one silver lining that could come out of this, and if we can just get them through this, I think we might have a chance at really doing some good within the healthcare system, which will ultimately benefit everybody. What are some ways nurses can start advocating for themselves when they feel like the leadership is lacking? Where are there things they can start doing to advocate for themselves?

KD: I think we need to recognize the power we have, and that starts with our voices, right? We all have a voice, and that's something we have to acknowledge for ourselves and become active to build our network and speak up. Don't be afraid to say the things that are hard to say, but when you do say it, focus on solutions. That's something nurses can do really well: focusing on solutions to these public health problems we're dealing with, including how we're treated, and speaking up when things are not right. It really starts with us, and I think it comes down to taking a stand for what's right, and integrity, and how we treat others in the process; having those high moral standards for how we treat one another and the expectation to be treated in that same way.

ND: That's so true. As far as nurse leaders, what makes a great one? Do you have any tips if someone has been put into a leadership position, and they're looking to elevate themselves?

KD: The number one thing is caring leadership: truly caring for the people you're working with, and not losing sight that it's about the people. Leadership is all about people, it's all about relationships. Humility is the hardest thing - it's humble servant leadership but then also a combination of authenticity. I really believe authentic leadership has



the power to help us heal post-COVID, and it's going to be necessary. This has been proven in the literature, when you look at evidence-based research it has been very effective in helping to address burnout. Sadly, sometimes we shift away from being real with one another because it takes vulnerability, and we think leaders have to have all the answers when the fact is that's contrary to the truth. We're not going to have all the answers, but that's why it's so important to be collaborative.

It's a conundrum, so to speak, in many ways, because in the same token, we have to protect the nurse leaders that are, you know, stepping up and into that role, because that can be quite exhausting. I fear for the nurse leaders out there that are really doing it, so it's important to help them maintain self care through the process. I've lived through burnout myself, having served in a long-term care facility during COVID, and I'm supporting my husband in his role as a healthcare administrator there. It was a difficult time, and it still is for many. I'm thankful we can make a difference in helping others to realize they're not alone and we're in this together.

ND: I couldn't agree more. What are some things hospitals and clinics can do to create safe workplaces for nurses?



We have to protect the nurse leaders that are stepping up and into that role, because that can be quite exhausting.

KD: I think leveraging psychological safety is a start, and promoting that at all levels of the organization, with everyone. Leaders are looking for tools to address mental health in the workplace or promote well-being in the workplace, so providing those tools to leaders is key. We know that when we're caring for our people, we are caring for them holistically. So, we're thinking about tools for them to care for themselves physically, or thinking about tools to care for them emotionally, which often leads to social media. Then there's spiritually, and that can tie into mindfulness and yoga and prayer. We assess the organization, we find out where they're at, and there's a plethora of reliable instruments to help do this. There's a lot of literature out there in regards to burnout and promoting healthy workplace environments, and that's really what we need people thinking about from an unbiased perspective, looking for ways to brainstorm solutions, and then implementing different interventions that are going to address those issues they've identified.

ND: I couldn't agree more, I think that's so relatable to so many nurses. What do you think about organizations and hospitals that, maybe at the beginning of the pandemic, lost some of the trust with their employees? How do organizations go about repairing that trust with their employees? What repair work can be done with organizations like that?

KD: That's a great question. I think again, it comes back to authenticity. We knew that there was a surge, we had to optimize PPE, and we didn't know what was going to happen. So you make the best decision you can at that time with the information you have, and that's basically what we did. We did what we were told to, hopefully the organization did too.

This is where we're at today, things might change tomorrow, be open to them as you're going through it. Hopefully, they did that if they couldn't do it, then or they didn't do it then. If lines of communication weren't as clear as it could have been, then recognize we could have done it better. How could we have improved upon this situation? I think that's one thing about healing anything in life, is recognizing how you could have done it better. Then, verbalizing that to your team, and taking ownership for anything that maybe wasn't done best, putting the people first.

ND: Just empowering the voices of their nurses will go a long way to helping them invest back in and chip away at some of the burnout that they're feeling. How do you think NurseDeck can help with these issues and challenges that nurses are facing right now?

KD: Continue to do what you're doing, shining a light on the state of the broken healthcare system and then shining a light on those that have a desire to fix it. Focusing on solutions and building relationships is so important, and empowering people through professional development and ways they could grow as leaders. I think that's a challenge, but it's also an opportunity for us to help nurses thrive and not just merely survive where they're at. That might be empowering them with skills that are needed to be better leaders, it might be empowering them to think like innovators or entrepreneurs. It's thinking outside of the box, and fostering partnership in the process and leveraging the power that's there with partnership and innovation.

ND: I love that. When things get broken open, there's one place you can go with it, which is to grow bigger and to heal. It's so nice to know that there are people out there really invested in the bedside nurse that ultimately will help to heal the system of brokenness we have right now. Because we need everybody.

KD: Yes, it's going to take a village. We all have a part to play

ND: Awesome. Thank you so much for your time, it was so nice talking with you today.

KD: Thank you for inviting me! ■



www.linkedin.com/in/kimberly-delbo-msn-rn-bc-csn-cdp-6a7375121/



A COMMUNITY OF RESOURCES BUILT FOR REAL NURSES.

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

MEET THE NURSEDECK TEAM

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

SIMRAN P. GUPTA

Digital Communications Manager

JULIA TALIESIN

Managing Editor, Insider's Perspective Magazine