

Executive Director's Report

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Human First, Nurse Second: Nurse's Professional Identity

We are at a critical inflection point in nursing. A point that implores us to recognize and embrace our identities. We are human first, nurse second. Beyond that, we are also employees, students, and more. Why is this relevant to the Delaware Nurses Association? We support and advocate for nurses and our profession. Understanding, embracing, and applying professional identity as a nurse is a relevant, important topic to discuss within the profession. It is also a complex topic that cannot be thoroughly explored in a short editorial. My hope is to inspire reflection, inquiry, and action. Actions that every nurse should take to recognize they are a human first, nurse second. I give full credit for the "human first, nurse second" phrase to an incredible group seeking to connect and support nurses, Nurses Inspire Nurses (nursesinspirenurses.com).

The context of nursing care delivery is at the point of care, usually facilitated by a nurse's employment or volunteering with an organization. The ethics, values, identity of, and advocacy for nursing as a profession happens within the profession itself, usually nursing's professional societies, led and governed by nurses. Why

is this important? Because internal and external forces are continuously attempting to reshape/redefine the professional identity of nurses. The only ones that get to define the identity of the nursing profession are all of us.

What is Professional Identity?

Professional identity is the convergence of our personal and professional identities to form the values we use in practice (Owens & Godfrey, 2022). It's not just being a professional or possessing professionalism. It's so much more complex than that. Defined by Godfrey and Young, it is "A sense of oneself, and in relationship with others, that is influenced by characteristics, norms, and values of the nursing discipline, resulting in an individual thinking, acting, and feeling like a nurse." (Owens & Godfrey, 2022). The International Society for Professional Identity in Nursing completed extensive research that resulted in four domains of professional identity, values and ethics, knowledge, nurse as leader, and professional comportment (Owens & Godfrey, 2022).

Additionally, professional identity is recognized as fundamental to our profession and must start with our education to become nurses. The Essentials, published by the American Association of Colleges of Nursing (AACN), are the blueprint for nursing education. The minimum expected competencies for nurses. Domain 9 of the Essentials is professionalism. AACN explains:

Professionalism encompasses the development of a nursing identity embracing the values of integrity, altruism, inclusivity, compassion, courage, humility, advocacy, caring, autonomy, humanity, and social justice. Professional identity formation necessitates the development

of emotional intelligence to promote social good, engage in social justice, and demonstrate ethical comportment, moral courage, and assertiveness in decision making and actions. ... Nursing identity flourishes through engagement and reflection in multiple experiences that is defined by differing perspectives and voices. As a result, nurses embrace the history, characteristics, and values of the discipline and think, act, and feel like a nurse. Professional identity formation is not a linear process but rather one that responds to challenges and matures through professional experiences as one develops confidence as a nurse. (American Association of Colleges of Nursing, 2024)

Numerous competencies related to professionalism and professional identity follow. Reading and learning are only the first step. Exploration and application must follow.

I am Off Duty.

Nursing is one of the most demanding and stressful professions. When the nurse is off and in a public setting, the last thing we want to hear is, "Is there a physician or nurse here?" We must disconnect from the nurse identity and prioritize ourselves. It's how we recharge so that we can return to complex work environments and be successful. Human first, nurse second. However, my experience is that often the pendulum swings too far to the other side. Where nurses dissociate from their professional identity. I get it. Sometimes, it is a survival skill. As with all things in life, there is a balance.

I hope we can swing the pendulum to the middle and maintain balance. As the Executive Director of a nursing society, it's imperative to the relevance and impact of the association. Why? The

world continues to rotate. Conversations and decision-making regarding nursing practice, advocacy, priorities, and more continue to happen at various tables. All nurses need to have some proximity to these tables. Nursing students, novice nurses, clinical/bedside/chairside nurses, leaders, educators, researchers, policy-makers, tenured nurses, regulators, and more all need to be engaged or we end up with a collective professional identity that doesn't reflect the depth and breadth of nurses.

The next time you are off duty, consider the small things you can do to still nurture your professional nursing identity. Read an email, complete a survey, engage with a nursing association's social media, sign up for membership in a nursing society, read about the issues,

send an advocacy email, and advocate for your nurse identity. Advocacy is a self-care strategy that works. Only you can balance your pendulum between human and nurse. Just remember they aren't separate. They are deeply intertwined and deserving of attention and action.

Leadership is about Characteristics, Not Titles

At the Delaware Nurses Association, we believe every nurse is a leader. Advocacy, excellence, conflict management, trustworthiness, effective communication, these are the characteristics that define a nurse. Not their job title. We invite all nurses to grow and "flex" these characteristics, and ultimately your professional identity, at the Delaware Nurses Association. We strive for structures, processes,

and outcomes that reflect the identities of all nurses and overall ethics of the profession. We are a space where all nurses are leaders and invited to contribute to the advancement of our profession and association. Consider yourself invited. ■

References

Owens, R. A. & Godfrey, N. (2022). Fostering professional identity in nursing. *American Nurse Journal*; 17(9), 12-16.

American Association of Colleges of Nursing. (2024). Domain 9: Professionalism. Retrieved May 1, 2024, from <https://www.aacnnursing.org/essentials/tool-kit/domains-concepts/professionalism>.

Delaware Legislative Update

Senate Bill 124. Signed by Governor Carney. **Related to the role of the Nurse as a Mandatory Reporter.**

Per Delaware statute and the Delaware Nurse Practice Act, all licensed nurses must immediately report any known or suspected:

- Child abuse and neglect, including human trafficking.
- Elder abuse and neglect.
- Impaired licensed clinicians, including self.

Senate Bill 124 updated requirements regarding immediate, oral notifications and anonymity of the reporter.

Here's what DE nurses need to know.

- If the nurse suspects or has confirmed child abuse or neglect, including human trafficking of a child, an oral (telephone) report must be immediately provided to

the Delaware Department of Services for Children, Youth and Their Families (kids.delaware.gov) for the following circumstances:

- Sexual abuse, including human trafficking of a child, where the alleged perpetrator has access to the alleged victim.
- Child death.
- A child with a current physical injury.
- A child who requires immediate medical attention or an immediate mental health evaluation.
- A child who has no caregiver, is currently unsupervised, or is living in conditions that are immediately hazardous to the child's health or safety.
- As licensees through the Delaware Division of Professional Regulation, you must provide your name and address upon making the report.

A note on Anonymity versus Confidentiality.

DNA raised concerns about disclosure of nurse's private, identifiable information to the individuals and families involved in the report of suspected or known child abuse. The Office of the Child Advocate clarified.

Whereas the nurse will not remain anonymous to the Department, their information will be kept confidential from the persons for which the report was made against. The nurse, and other licensed health professionals are protected under federal law, providing confidentiality of who made the report to those involved. Only the Department will know who made the report. ■