The Importance of Professionalism and Presence in Nursing

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Association of New Brunswick Licensed Practical Nurses

L'Association des Infirmier(ère)s Auxiliaires Autorisé(e)s du Nouveau-Brunswick
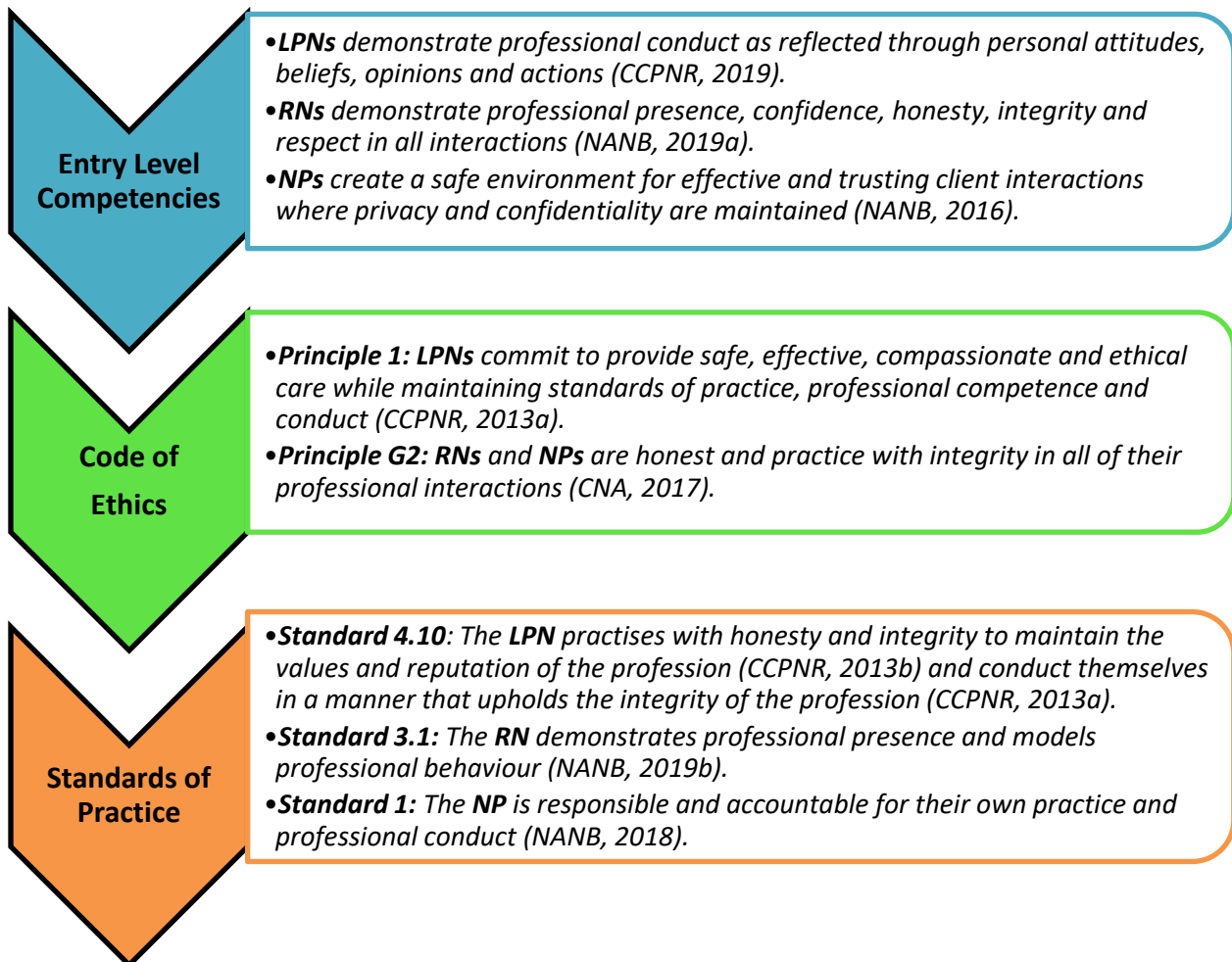
Mission

The Association of New Brunswick Licensed Practical Nurses ensures the public of their commitment to safe, competent, and compassionate, ethical care by regulating and enhancing the profession of practical nursing.

Professionalism is characterized by members of an occupation who share the same **values** and similar education. In nursing, professionalism is realized through purposeful relationships with **clients** and the **healthcare team** and occurs in healthy workplace environments in which each professional embraces accountability for their actions. The term professionalism may be interpreted as an over-arching term, including everything from basic manners, education and appearance, to specifics like individual behaviour, job skills and job title. This document is a teaching tool on the importance of professionalism and presence in nursing and a resource on how to apply professionalism to practice.

Nursing professionals are prepared with the knowledge and skills (competencies) to practise and this is recognized by being a Licensed Practical Nurse (LPN), a registered Nurse Practitioner (NP) or a Registered Nurse (RN). Practice expectations regarding professionalism are described throughout the following nursing regulatory documents from the [Association of Licensed Practical Nurses (ANBLPN)](#) and the [Nurses Association of New Brunswick (NANB):](#)

Entry Level Competencies

- *LPNs* demonstrate professional conduct as reflected through personal attitudes, beliefs, opinions and actions (CCPNR, 2019).
- *RNs* demonstrate professional presence, confidence, honesty, integrity and respect in all interactions (NANB, 2019a).
- *NPs* create a safe environment for effective and trusting client interactions where privacy and confidentiality are maintained (NANB, 2016).

Code of Ethics

- *Principle 1: LPNs* commit to provide safe, effective, compassionate and ethical care while maintaining standards of practice, professional competence and conduct (CCPNR, 2013a).
- *Principle G2: RNs* and *NPs* are honest and practice with integrity in all of their professional interactions (CNA, 2017).

Standards of Practice

- *Standard 4.10*: The *LPN* practises with honesty and integrity to maintain the values and reputation of the profession (CCPNR, 2013b) and conduct themselves in a manner that upholds the integrity of the profession (CCPNR, 2013a).
- *Standard 3.1:* The *RN* demonstrates professional presence and models professional behaviour (NANB, 2019b).
- *Standard 1:* The *NP* is responsible and accountable for their own practice and professional conduct (NANB, 2018).

An Element of Professionalism is Presence

Professionalism encompasses varied aspects of behaviour, appearance and **communication** and has been described as both a noun and a verb. We are expected to 'be' professional, 'look' professional and 'act' professional. **Professional presence** is an element of professionalism and a core relational skill within nursing. It is described as a sincere and reciprocal exchange between the nurse and client – the sharing of a human experience (Fahlberg & Roush, 2016). As the scope of nursing practice continues to expand and the nursing team is challenged to prioritize the human-aspects of care amidst technical and scientific demands, nursing professionals should focus on clients as well as the equipment and tasks. Professional presence should become the driving force in nursing with the ultimate purpose being the delivery of safe, competent, ethical, and **compassionate** care for all persons (Priest, 2017).

To be professional and to be present means professional presence needs to be embedded into whom you are as a person. This may mean reflecting on where one is lacking professionally and purposefully trying to improve in that area. Self-reflection as a practitioner is considered professional behaviour, including how one's practice adheres to employer policies, regulatory standards, the code of ethics, and legislation. This is the first step in the Continuing Competence Program (CCP) and may be described as *professional self-awareness.* Professionals who self-reflect are more apt to respond positively to feedback and are more willing to adapt to change behaviour and practices as required (Scottish Government, 2012).

Characteristics of Professional Presence

Professional presence is more than a checklist of things to do or to refrain from doing and it does include the impression you give upon entering a room. It reaches beyond the uniform to include self-confidence and a way of being, knowing and doing. It's about showing the best of yourself. People are reassured by knowing that they can trust you and that you are dependable; seeing that you are capable – that you can do what you say you can do; knowing that you care – about yourself, others and the situation; and knowing that you are confident without arrogance (Bambi, Guazzini, De Felippis, Lucchini & Rasero, 2017; Integrity Coaching, 2017).

We all have characteristics that are inherited or learned. Our personal values, **attitudes,** and beliefs impact who we are as a professional. The following characteristics are associated with professional presence (Bambi et al., 2017; Cusack, Drioli-Phillips, Brown & Hunter, 2019; NSCN, 2018):

- accountability;
- being ethical and honest (**integrity**);
- clinical competence;
- respectful collaboration;
- effective communication;
- words and language reflecting care;
- having a sense of duty;
- being reflective in practice and open to change;
- having a sense of optimism;
- showing compassion and empathy; and
- looking professional.

Nursing presence is impacted by civility. Civility is an awareness of being polite and it does not depend on liking everyone, but on resolving to think before you speak. Civility may mean agreeing to disagree; talking through differences; or providing civilized criticism that is not blunt and harsh, but as factual and as objective as possible (Lower, 2012). Civility includes what is spoken, what is written and body language.

"Why Be Civil?" Civility is foundational in the **therapeutic relationship** and has the ability to transcend through all interactions between the nursing professional and the client. Tone of voice, appropriate touch, body language conveying genuine concern and self-confidence in one's professional abilities, are all characteristics of civility and of being present with clients. Being truly present with the client should foster a meaningful and trusting exchange (NSCN, 2018).

Therapeutic Relationship

Professional presence, communicated through words, actions and physical appearance can be the commencement of a trusting nurse-client relationship. A visible nametag and an introduction including name and the designation of LPN, NP or RN should help in fostering a sense of trust that someone is in charge of client care. Speaking with confidence and compassion often results in the reassurance of the nursing professional's capability and the ability to meet the demands of the job and the needs of the clients (Aquino-Russell, 2013).

Presence in the therapeutic relationship is physically 'being there' and psychologically 'being with' the client. For example, a nursing professional using a personal communication device at the bedside is physically there but absent with the client psychologically. Whereas the nursing professional who is committed to holistic care, is more likely to relationally engage with the client while performing clinical tasks (Priest, 2012).
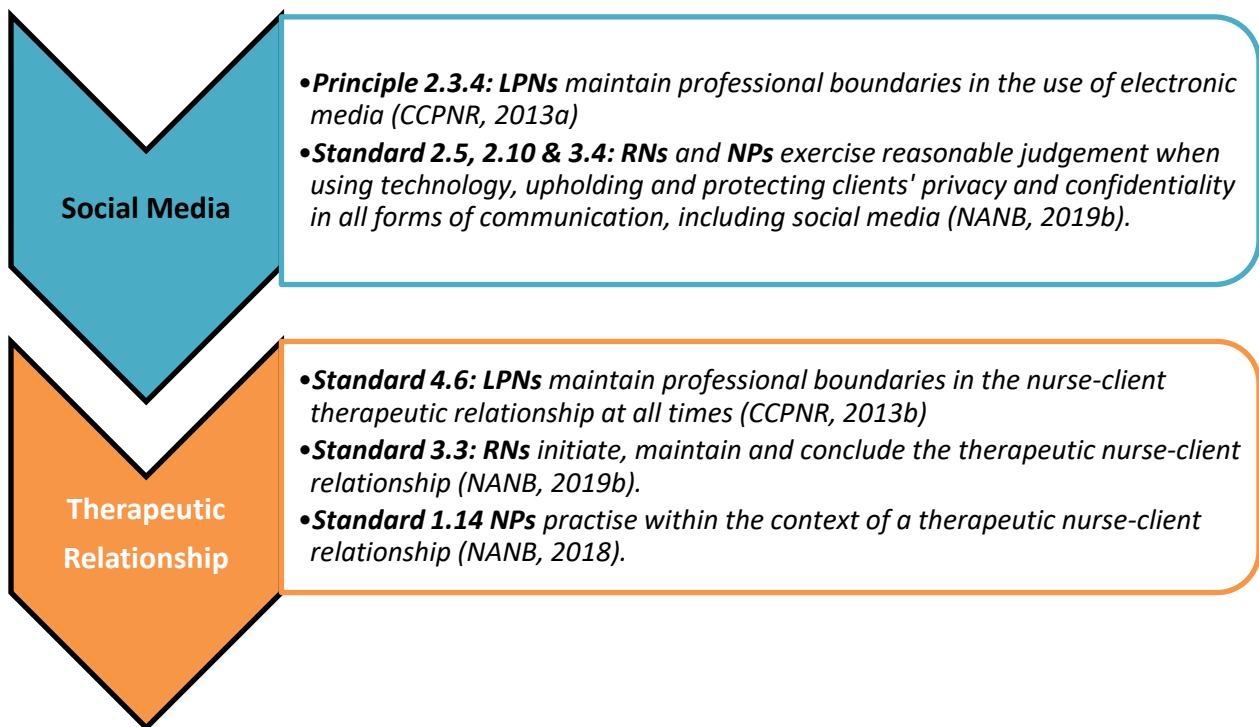
Professional presence is not something you can put on and take off – it is a lifestyle both on the job and at leisure. Being a professional on and off the job will encourage public trust in the profession of Nursing and public trust impacts the therapeutic relationship (Aquino-Russell, 2013). Changes in society's expectations and advancements in both science and technology have increased health care consumers' knowledge and expectations. There is an increased demand for transparency and accountability. Society is quick to congratulate and quick to condemn, therefore professional presence needs to be a constant in the workplace and in one's social life, including social media (Hubbard Murdoch, Ahlquist, Farthing & Mennie, 2018).

The Impact of Technology on Professional Presence

Communication styles vary from generation to generation and current societal norms include electronic communication and texting, which involves less eye contact than face-to-face communication. The habit of looking at a screen can impact the therapeutic relationship if nursing professionals allow personal communication devices to be a part of their work-life. Differing values and norms between nursing professionals and clients in what is considered acceptable use of technology, is a potential battlefield of misunderstandings, hurt feelings and negative body language. Nursing professionals are expected to review and practice in accordance with their standards of practice and employer policy, including those pertaining to the therapeutic relationship and the use of technology (Hubbard Murdoch et al, 2018).

Social media is a great way to keep in contact and communicate with friends and family. We have seen social media grow and for many people, it is part of their day to day lives. However, we need to keep in mind that the information we share through social media could have an impact on our profession. Images, videos, stories, and rants can go viral. Once you place information on social media, you have minimal control over what happens with that information next, or who gets to see that information. As Alexander (2016) indicated, "it is difficult, if not impossible, to step outside your identity as a nurse" (p. 262). Nursing professionals are required to keep their work-life and personal-life separate.

Information is at our fingertips, as well as at our client's finger tips. There is an infinite amount of data on the internet, and many of our clients take advantage of the resources that are out there. They often come to us self-educated and ready to engage themselves in the care process. Clients expect nursing professionals to be competent and their impression of whether you are competent or not, is impacted by professional presence.

Social Media

- *Principle 2.3.4: LPNs maintain professional boundaries in the use of electronic media (CCPNR, 2013a)*
- *Standard 2.5, 2.10 & 3.4: RNs and NPs exercise reasonable judgement when using technology, upholding and protecting clients' privacy and confidentiality in all forms of communication, including social media (NANB, 2019b).*

Therapeutic Relationship

- *Standard 4.6: LPNs maintain professional boundaries in the nurse-client therapeutic relationship at all times (CCPNR, 2013b)*
- *Standard 3.3: RNs initiate, maintain and conclude the therapeutic nurse-client relationship (NANB, 2019b).*
- *Standard 1.14 NPs practise within the context of a therapeutic nurse-client relationship (NANB, 2018).*

Being Competent

Continuous learning is an expectation for all nursing professionals throughout their career. With advances in technology not only within the health care system, but also in the lives of our clients, continuous learning is more important today than ever before. Clients are prepared to talk about their own care and treatment, so they expect nursing professionals to at least know what they know, and more.

Those in the nursing profession are also required to react professionally in varying circumstances or to have 'situational judgment'. The term 'situational judgment' refers to the ability to judge circumstances and then react in the most appropriate way (Scottish Government, 2012). In other

words, one may have knowledge and skill but not react appropriately in a situation and come across as unprofessional. Hence the argument that professional presence is more than appearance and skill – it is a way of being. You cannot put it on and take it off and you may have to adjust behaviour and in some instances, modify appearance, to be the most effective with clients. For example, if a nursing professional is working within a community setting, choosing to wear plain clothing may be more effective than wearing a nursing uniform (scrubs).

Professional Image

Image is an integral component of professional presence and it is created when there are positive interpersonal skills, polite behavior, professional attire, and confidence in one's knowledge and abilities. It is influenced by self-care, effective communication (both written and verbal) and personal attitudes. Self-care starts on the inside (mentally) and is projected on the outside (physically). It is difficult to provide excellent nursing services when you are not at your peak physically or mentally. A first impression communicates how the nursing professional feels and respects themself. If a client thinks their nursing care provider takes care of and respects themself, then they will be inclined to trust that they will be taken care of, too (CRNNL, 2014; NSCN, 2019).

Professional image is also reflected in being neat and professional in appearance. Remember, appearance does matter, and it is not only the first impression that counts, but *every* encounter with the nursing professional. Nursing professionals are watched by clients and their families while providing direct care and indirect care, such as when nursing professionals are in the hallway, cafeteria or at the nursing station. A consistent exposure to professional presence will most likely foster a therapeutic relationship between the nursing professional and the client. (CRNNL, 2014; NSCN, 2019).

Impact of Practice Environment

The practice environment, also known as the context in which nursing professionals work, is pivotal in supporting presence. A positive practice environment includes support from the employer in which values, principles and boundaries are clearly shared and modelled by **leadership**. When employers provide a **collaborative** environment that allows professionals to work efficiently it helps in fostering a strong, fair and democratic **culture** which can positively impact client care and satisfaction. (Alternatively, research has shown that an extremely chaotic and disorganized work environment has the potential to *negatively* affect professionalism, client health outcomes and client satisfaction (Terzioglu, Temel & Sahan, 2016). The practice environment is pivotal in supporting professionalism and this encourages **quality practice environments** which supports professional behaviours.

Improving workplace culture is dependent on a management approach that values positive and professional attitudes. Nursing professionals account for the majority of employees working in health care and it is they who spend the most time with clients and their family members. Therefore, it is important for employers to facilitate an environment which fosters professionalism in the workplace (Masat, Cinarli, Sener, Erdogan, Simsit & Koc, 2018). Fostering trust and feeling safe to raise concerns when issues arise, is essential for safe practice. From an employer's perspective, this may mean specifying expected behaviour, modeling professional behaviour and taking appropriate action to address unprofessional behaviour.

Nursing is often viewed as "task orientated" which does not provide an accurate portrayal of the profession. Nursing is both an art and a science which involves both **autonomous** and **collaborative**

care, while practicing under a specified Code of Ethics and Standards of Practice. If the culture of the workplace views nursing as "task orientated", the structure of that workplace has the potential to conflict with professional presence. Often, work environments value productivity, efficiency, and achievement through tasks, therefore it is important for employers to find avenues that support professional presence.

Research has shown that nursing professionals' value a workplace that allows them to work both autonomously and collaboratively while maintaining therapeutic relationships with their clients. Additionally, nursing professionals' value safe staffing models, flexible scheduling, authentic leadership, and opportunities for professional development (Manojlovich & Ketefian, 2002). Alternatively, heavy workloads and high work demands can affect a nursing professional's quality of work and professional presence, negatively (Masat et al., 2018).

Retention of staff is probable if the nursing team feels they are valued for their knowledge and contributions to the health care team. Reciprocal respect between nursing professionals and other healthcare providers is a characteristic which impacts clients and staff alike. When the professionalism of a nursing provider is compromised, it not only affects the individual negatively, it also has a negative effect on the facility, co-workers and the quality of care being provided to clients (Terzioglu et al., 2016). True professional presence requires everyone to strive to create an environment which fosters growth, encourages input, and shows respect. It is the 'give and take' of working as a team.

Hidden Curriculum

Formal educational curriculum is almost always accompanied by a **hidden curriculum** and is the product of each educational institutions culture, values, and attitudes (Farquharson, 2019). Hidden curriculum can be defined as content an educational program teaches without intending to, or are even aware of (Chen, 2015) and results in students inadvertently learning concepts due to their environment (Murphy, 2019).

As soon as a student enters their nursing program, they begin to receive an informal education in professional socialization through the interactions they have with their peers and educators (Chen, 2015). What students are formally taught in the classroom does not always have the biggest impact on them. Rather, it is what they *observe* from their educators that creates the biggest impact on their understanding and expectations of the nursing profession (Karimi, Ashktorab, Mohammadi & Ali Abedi, 2014). To put it simply, actions speak louder than words and "students repeat what their educators do, not what they say" (Karimi et al., p. 6, 2014).

Nursing students spend a large portion of their time in clinicals where they interact with other healthcare professionals. It is during this time that most of the hidden curriculum is learned and this has the potential for either a positive or negative influence on the student (Farquharson, 2019). If breaches in professional behaviour occur during preceptorship, these unprofessional behaviours are often mimicked by the student or new employee in their desire to "fit in" with the crowd (Murphy, 2019).

As students graduate and enter clinical practice, there is often a discrepancy between what they have been taught, and what they experience as an employed nursing professional. The continuation of role-modeling is important in developing awareness of professional behaviour or a lack of it. Employers can help combat the abandonment of professionalism by ensuring that there are positive role models in

the workplace and that all staff are given the opportunity to practice their professional autonomy (Manljlovich et al., 2002).

Learning by observation is one of the most important strategies that students and new graduates use regarding professional behaviour. Though professional presence is woven throughout the formal nursing curriculum, once new graduates enter the workforce the value of professionalism will either be further developed or abandoned as a result of a hidden curriculum and workplace culture. As nursing professionals progress through their careers, it is imperative that we never forget that we are *always* teaching, whether formally or informally through a hidden curriculum. Our actions and behaviours are always influencing those who are around us and have the potential to shape the future of nursing (Farquharson, 2019).

Conclusion:

The term professionalism may be interpreted as an over-arching term, including everything from basic manners, education, and appearance, to specifics like individual behaviour, job skills and job title. Presence is a key component of professionalism and is the demonstration of respect, confidence, integrity, optimism, compassion, and empathy in accordance with professional standards, guidelines, and codes of ethics (NSCN, 2018). Some may consider professional presence as a way of being and acting "on-the-job" without considering the impact that one's personal behaviours can have on the profession of nursing (including social media and social lifestyles).

Healthy workplace environments in which each nursing professional embraces accountability for their actions, are key underpinnings in shaping the sense of professional presence that results in the delivery of compassionate, competent, safe, and ethical care. Professional presence is impacted by workplace culture and practice requirements outlined by nursing regulatory authorities and employers, along with public expectations of nursing care services. Professional presence can become the driving force that guides nursing practice and is realized through purposeful relationships with clients and the healthcare team.

Nursing professionals, their healthcare **colleagues**, employers, government, and the public need to value the profession of nursing and their contributions to the healthcare system. As a nursing professional, valuing one's profession is projected in appearance, body language, and in both verbal and non-verbal communications. These characteristics also contribute to professional presence and presence is critical for creating credibility, fostering trust, and leaving a positive image of nursing (Karimi et al., 2014).

APPENDIX

Suggestions for Improving Professionalism and Presence in Nursing[1]

Actions for improving professional presence include but are not limited to the following suggestions:
- Make eye contact with people, smiling as appropriate.
- Introduce yourself to your clients, including your name, your professional designation, and your role in their care. This can foster trust.
- Dress for your role and for your audience.
- Have body language that is open (relaxed) and upright posture.
- Listen more than you speak.
- Match your tone of voice to the situation.
- Practice humility versus arrogance or 'know-it-all' attitude.
- Treating others with a positive regard and working collegially with others.
- Being positive in attitude, even towards diversity and adversity.
- Remember 'impressions' matter and we all create a first impression and an ongoing impression.
- Learning about professionalism and demonstrating it at work.
- Raising concerns and encouraging other to raise concerns, when issues arise that could compromise safety or quality of care.

Professional presence in nursing is evidenced (demonstrated) by the following actions:
- adherence to the professional code of ethics, regulatory standards and employer policies.
- clear communication - being able to articulate one's professional role on the healthcare team and consistently introducing oneself by name and designation.
- advocating on behalf of clients and their healthcare needs – putting the client's needs first.
- providing competent, compassionate, and client-centered nursing services.
- collaborating respectfully with both client and colleagues.
- maintaining a professional image and looking after one's self.
- practising reflectively and continuing education, including annual participation in the ANBLPN Continuing Competence Programs.

Successful achievement of professional presence should result in:
- a trusting workplace culture.
- a professional image of nursing professionals in the workplace.
- appropriate use of technology in nursing practice and when off duty.
- individualized care evidenced through support for client's having increased involvement in their health care.
- good health outcomes of clients.
- receivers of care describing positive nursing care experiences.
- improved staff retention and improved sick-time usage by nursing professionals.

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[1] Ballard, J., 2014; Cusack et al., 2019; Scottish Nursing and Midwifery Council, n.d.

Glossary

Attitude: a manner of thinking, feeling, and behaving towards individuals, social issues, or an event that takes place in an individual's environment (Shohani & Zamanzadeh, 2017).

Autonomous: Having the authority to make decisions and the freedom to act in accordance with one's professional knowledge base (CCPNR, 2019).

Client: Individuals, families, groups, populations, or entire communities who require nursing expertise. The term "client" reflects the range of individuals and/or groups with whom nurses may be interacting. In some settings, other terms may be used such as patient or resident. In education, the client may also be a student; in administration, the client may also be an employee; and in research, the client is usually a subject or participant (NANB, 2018).

Collaborative: Joint communication and decision-making processes with the expressed goal of working together toward identified outcomes while respecting the unique abilities and autonomy of each team member (CCPNR, 2019)

Colleagues: all health-care providers and nurses working in all domains of practice (CNA, 2017)

Communication: the transmission of verbal and/or non-verbal messages between a sender and a receiver for the purpose of exchanging or disseminating meaningful, accurate, clear, concise, complete and timely information (includes the transmission using technology) (NSCN, 2017).

Compassionate: the ability to recognize and be aware of the suffering and vulnerability of another, coupled with a commitment to respond with competence, knowledge and skill (CNA, 2017).

Culture: learned values, beliefs, norms and way of life that influence a person's thinking, decisions and actions (CNO, 2019)

Formal Curriculum: what a school officially claims to teach in their published course outline or manual (Farquharson, 2019)

Healthcare team: providers from different disciplines, often including both regulated health professionals and unregulated workers, working together to provide care for and with individuals, families, groups, populations, or communities. The team includes the client (CNA, 2017).

Hidden Curriculum: That which a school teaches without, in general, intending or being aware that it is being taught… a combination of factors involving the organization's structure and culture that affect student learning (Chen, 2015; Farquharson, 2019).

Integrity: adherence to moral norms that is sustained over time. Implicit in integrity is soundness, trustworthiness and the consistency of convictions, actions, and emotions (Burkhart, Nathaniel & Walton, 2015).

Leadership: a relational process in which an individual seeks to influence others towards a mutually desirable goal. It not limited to formal leadership roles (CRNNS, 2017).

Professionalism: the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served (Murphy, 2016)

Professional presence: the demonstration of confidence, integrity, optimism, passion, and empathy, in accordance with legislation, practice standards, and ethics. This includes the registered nurses' verbal and nonverbal communications and the ability to articulate a positive role and professional image, including the use of name and title (CPSI, 2017).

Therapeutic relationship: a relationship the nurse establishes and maintains with a client, through the use of professional knowledge, skills and attitudes, in order to provide nursing care that is expected to contribute to the client's well-being (CNA, 2017).

Values: crucial factors that motivate and are associated with an individual's beliefs about appropriateness and desirability of something. Values acts at the guide for ethical behaviours, for example, in providing safe nursing care (Poorchangiz, Borhanie, Abbaszadeh, Mirzaee & Farokhzadian, 2019).

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