



# CLINICAL ADVANCEMENT PROGRAM

---

## INTRODUCTION TO PROFESSIONAL PRACTICE JOURNAL



# C.A.P.

## CLINICAL ADVANCEMENT PROGRAM

Grow professionally, earn recognition and reap rewards for your excellence as a nurse in the University of New Mexico Health System C.A.P. When you choose to participate in this program, you'll focus on:

- Professional Accountability
- Professional practice competence
- Educational growth
- Practice excellence
- Research use and generation

Depending on your experience, certifications and education, you'll work toward one of five CAP levels that offer increasing compensation over base pay. Help improve nursing practice in your unit and for UNM Health overall as you:

- Follow the ANA Scope and standards of practice as they guide nurses by describing and delineating minimal competencies and behaviors that define the parameters of safe and effective care.
- Engage in the care delivery model- Relationship Based Care.
- Advance the profession with the Compass of Compassion Professional Practice Model
- Engage in shared decision-making through Shared Governance
- Advance healthcare through Evidence-Based Practice
- Ensure continuous improvement to healthcare systems through a Just Culture

**The compensation increase shall be up to \$8.00 per hour based on the CAP level, however will not exceed the maximum of the pay range for the job.**

CAP Level	Level Requirements Completion/Maintenance of CAP I and II required for level III, IV, & V	Compensation
I	<u>New Employees:</u> CBO/Orientation, New Hire Online Learning & Life Support <u>Incumbent Employees:</u> Annual competencies, on-line competencies, life support, unit changes	\$2.00/hr over base pay
II	CAP Verification Record: updated annually <b>AND</b> Accountability for professional practice competence: CAP Introduction to Professional Practice Journal (EBP, Just Culture, Shared Governance, Professional Practice Model)	\$4.00/hr over base pay
III	Nationally approved nursing certification <b>OR</b> Bachelors in Nursing or in school for BSN (Three-year time limit, one time)	\$6.00/hr over base pay
IV	Nationally approved nursing certification <b>AND</b> Bachelors in Nursing or in school for BSN (Three-year time limit, one time)	\$7.00/hr over base pay
V	Nationally approved nursing certification <b>AND</b> Masters in Nursing or in school for MSN (Three-year time limit, one time) <b>AND</b> One pertinent EBP project annually approved by area Executive Director	\$8.00/hr over base pay

# CLINICAL ADVANCEMENT PROGRAM

---

## Introduction to Professional Practice Journal

At UNMH, we value nursing professional practice and development. This journal is meant to help you begin your nursing professional practice journey. It is an expectation that this journal is to be completed before the end of your new hire probationary period at UNMH. You will only complete this journal once.

### **Activities in Support of CAP II (required for CAP II, III, IV & V)**

**Professional Practice Competence Self Assessment:** Review the ANA Standards of Practice & Performance, Shared Governance, Just Culture, Evidence-based practice, the Compass of Care Delivery Model, and The Compass of Nurse Professional Practice Model



# ANA SCOPE AND STANDARDS OF PRACTICE

The ANA Scope and standards of practice guide nurses by describing and delineating minimal competencies and behaviors that define the parameters of safe and effective care. Nursing practice must observe the ANA Scope and Standards of practice that ranges from competent clinical knowledge to navigating complex healthcare systems. Nurses must advocate for their patients and colleagues, innovate, and serve as leaders throughout their careers.

The Scope of Nursing Practice acts as the guide for nurses in their professional careers. It sets 18 standards of professional practice that all registered nurses are expected to perform competently. They describe the who, what, where, when, why, and how of nursing practice:

- Who: nurses who have been educated, titled, and maintain active licensure to practice nursing.
- What: "Nursing integrates the art and science of caring and focuses on the protection, promotion, optimization of health and human functioning; prevention of illness and injury; facilitation of healing; and alleviation of

suffering through compassionate presence. Nursing is the diagnosis and treatment of human responses and advocacy in the care of individuals, families, groups, communities, and populations in recognition of the connection of all humanity" (American Nurses Association, 2021).

- Where: Wherever there is a need for nursing care.
- When: Whenever there is a need for nursing knowledge, compassion, and expertise anytime, anywhere.
- Why: To achieve optimal patient outcomes in keeping with nursing's social contract and obligation to society.
- How: the ways, means, methods, and manners that nurses use to practice professionally.

The Standards of Professional Nursing Practice are definitive statements of the actions and behaviors that all registered nurses, regardless of role, population, specialty, or setting, are expected to perform thoroughly.

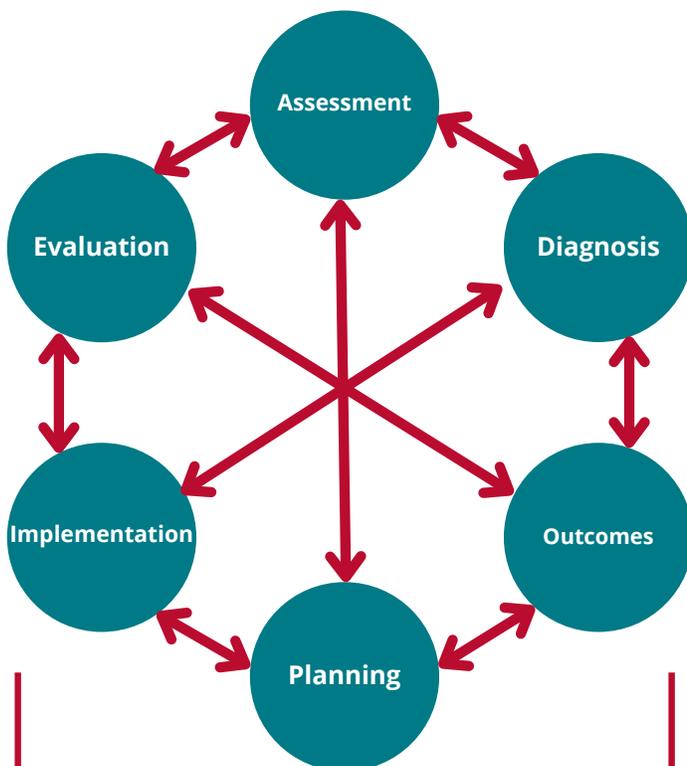


# ANA SCOPE AND STANDARDS OF PRACTICE

## The Standards of Practice

Describe a competent level of nursing practice through the critical thinking model known as the nursing process. The nursing process contains consequential actions completed by registered nurses and forms the basis of the nurses' decision-making.

### The Nursing Process



(American Nurses Association, 2021)

Standard 1. **Assessment:** The registered nurse collects pertinent data and information relative to the healthcare consumer's health or the situation.

Standard 2. **Diagnosis:** The registered nurse analyzes the assessment data to determine actual or potential diagnoses, problems, and issues.

Standard 3. **Outcome Identification:** The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or situation.

Standard 4. **Planning:** The registered nurse develops a plan of care that prescribes strategies and interventions to attain expected outcomes.

Standard 5. **Implementation:** The registered nurse implements the interventions identified in the plan.

Standard 5A. **Coordination of care:** The registered nurse coordinates care delivery

Standard 5B. **Health Teaching and Health Promotion:** The registered nurse employs strategies to teach and promote health and wellness

Standard 6. **Evaluation:** The registered nurse evaluates progress toward attainment of goals and outcomes.

# ANA SCOPE AND STANDARDS OF PRACTICE

## The Standards of Professional Performance

Describe a competent level of behavior in the professional role. All registered nurses are expected to engage in professional role activities, including leadership, reflective of their education, experience, and position.

Standard 7. **Ethics:** The registered nurse integrates ethics in all aspects of practice.

Standard 8. **Advocacy:** The registered nurse demonstrates advocacy in all roles and settings.

Standard 9. **Respectful and Equitable Practice:** The registered nurse practices with cultural humility and inclusiveness.

Standard 10. **Communication:** The registered nurse communicates effectively in all areas of professional practice.

Standard 11. **Collaboration:** The registered nurse collaborates with the healthcare consumer and other key stakeholders.

Standard 12. **Leadership:** The registered nurse leads within the profession and practice setting.

Standard 13. **Education:** The registered nurse seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking.

Standard 14. **Scholarly inquiry:** The registered nurse integrates scholarship, evidence, and research findings into practice.

Standard 15. **Quality of Practice:** The registered nurse contributes to quality nursing practice.

Standard 16. **Professional Practice Evaluation:** The registered nurse evaluates one's own and others' nursing practice.

Standard 17. **Resource Stewardship:** The registered nurse utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, financially responsible, and used judiciously.

Standard 18. **Environmental Health:** The registered nurse practices in a manner that advances environmental safety and health.



# JUST CULTURE



Just culture is a concept that promotes a process to uncover the source of an error (a deviation in the standard of care) in an effort to identify contributing systems and behavioral issues that can be addressed. Increased reporting of errors or deviations in the standard of care can lead to revisions in care delivery systems, creating safer environments for patients and individuals to receive services, and giving the nurses and other workers a sense of ownership in the process.

Any individual involved in a situation where there is a deviation in the standard of care will result in support for the individual's indolence by coaching, counseling, and/or educating. No nurse intentionally wishes to hurt a patient. There are times, however, when a nurse may make a conscious decision to circumvent a patient safety system, this puts the patient at risk.

A just culture, an environment in which errors are disclosed, is an important element for patient safety to become a reality. Transparency within an organization increases the likelihood that staff and leaders will detect and address systems problems, thus preventing potential harm.

***"The work environment improves as nurses and workers deliver services in safer, better-functioning systems and that the culture of the workplace is one that encourages quality and safety over immediate punishment and blame"***

(ANA Position statement)

# SHARED GOVERNANCE

Shared Governance is an organized structure for shared decision-making between staff and management. UNM Hospitals believes that a well-structured organizational shared governance model empowers staff closest to the bedside to own their practice and become closely engaged with leadership, other disciplines, and their patients to work on the common organizational, area, and unit goals. Shared governance councils, both unit and system-wide, are a way for staff to collaborate to review best practices regarding healthy work environments, nurse satisfaction and review current evidence for patient-centered care practices.

## *Shared Governance is:*

- a model that ensures that decisions are made by the people working at the point of care
- a leadership development strategy
- a way to identify future positional leader
- a tenant of professional practice; or
- a key expression of organizational culture.

## *Shared Governance is NOT:*

- the replacement or elimination of positional leadership
- a strategy to support downsizing of leadership
- self-governance
- abdication of leadership responsibilities



# SHARED GOVERNANCE

Shared Governance is frequently referred to as shared decision-making or shared leadership. Shared governance is a structure and process for partnership, equity, accountability, and ownership.

**Partnership**, which is essential to building relationships, involves nurses at every level in decisions and processes, inferring that each interprofessional and interdisciplinary team member is key in fulfilling the mission and purpose of the organization and is critical to safe, effective, efficient care of patients at points of service and care.

**Equity**, which maintains a focus on services, patients and staff, is the foundation and measure of value. Equity does not mean equality in terms of scope of practice, knowledge, authority, accountability, or responsibility. However, it does mean that each team member is essential to quality patient care outcomes

and that no role is more important than another.

**Accountability** is a willingness to invest in decision-making and express ownership in those decisions. Accountability is the core of shared governance and is often used interchangeably with responsibility. It supports partnerships and is secured as all stakeholder groups on campus produce positive outcomes.

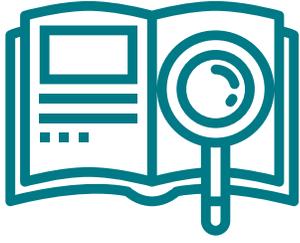
**Ownership** is the recognition and acceptance of the value of the profession's work and how well individual staff members perform their professional roles. It designates where work is done and by whom to enable participation and contributions from all team members.



*Own your  
practice.*

*Turn your voice,  
into our voice.*

# Evidence Based Practice



## Evidence-based practice (EBP)

A problem-solving approach to clinical practice that integrates the conscientious use of best evidence in combination with a clinician's expertise as well as patient preferences and values to make decisions (Melnyk et al., 2010).

RESEARCH	EBP	QI
"What is the best thing to do?"	"Are we doing the best thing?"	"Are we doing the best thing right every time?"
Focused on discovering new knowledge that can be generalized to large groups of people	Focused on implementing knowledge through practice change in a narrow population and measuring outcomes	Focused on generating internal evidence about process and outcome in the setting/environment that generated it.
Directional and based on theory	Not directional and based on clinical inquiry; outcomes focused	Directional and about fixing problems; process focused

(Melnyk et al., 2010)

- Evidence: The best available information gathered from the scientific literature (external evidence) and from data and observations collected in your practice. (internal evidence)
- Clinician's expertise: The knowledge, judgment, and critical reasoning acquired through your training and professional experiences.
- Patients preferences: The unique set of personal and cultural circumstances, values, priorities, and expectations identified by the patient and their caregivers.

### Steps of EBP

**0) Cultivate a Spirit of Inquiry & EBP Culture**

**1) Ask the PICO (T) Question**

**2) Search for the be Best Evidence**

**3) Critically Appraise the Evidence**

**4) Integrate the Evidence with your clinical expertise and patient preferences to make the best clinical decision**

**5) Evaluate the outcomes of the EBP practice change**

**6) Disseminate the out comes**

(Melnyk et al., 2010)

# Care Delivery Model

## Relationship - Based Care



Relationship-Based Care (RBC) is the care delivery model utilized here at UNM Health. RBC is both a culture transformation model and an operational framework designed to enhance safety, quality, patient satisfaction, and staff satisfaction by fostering improved relationships throughout the organization. It serves as the cornerstone of our approach to providing care for our patients, their families, and each other. RBC highlights three fundamental relationships essential for delivering compassionate and humane healthcare: the nurse's relationship with the patient/family, relationships among colleagues, and the nurse's relationship with self. These relationships form the core of caring behaviors, and the principles derived from them guide the transformation of infrastructure, processes, systems, and practices, empowering caregivers from all disciplines to cultivate therapeutic connections with patients and families.

### The Three Key Relationships:

#### Relationship with Self

In order to maintain their well-being and be emotionally present for others, caregivers prioritize their energy levels, practice self-awareness, and mindfulness during interactions with patients, families, and colleagues. Additionally, they actively engage in self-care practices that nurture their body, mind, and spirit.

#### Relationship with Colleagues

Positive work culture and an enhanced patient experience are nurtured by healthy interpersonal relationships and purposeful collaboration among team members. A crucial aspect of this environment is the demonstration of mutual respect, trust, open and honest communication, and consistent, visible support by all team members, fostering a healthy and supportive atmosphere.

#### Relationship with Patient and Families

In RBC cultures, patients are seen, heard, and cared for as distinct individuals. Care and service are designed to prevent unnecessary suffering due to delays, physical or emotional discomfort, and lack of information about what is happening. Patients are included as members of the health care team.

# Dimensions of RBC

## Healing Culture

In a healing culture, every individual, whether they are receiving care or providing it, is embraced with compassion, respect, and dignity. Everyone is encouraged and assisted in their personal growth and development, and each team member's skills are acknowledged and appreciated for their vital role in promoting the well-being and recovery of patients. Central to this culture are the establishment of enduring, exceptional therapeutic relationships and the creation of a calm physical environment, both of which form the fundamental pillars of healing environments.

## Patient & Family at the Center

A comprehensive framework is established to support every caregiver in delivering attentive, empathetic, family-centered, and top-notch care. The systems and services are designed to align with the needs and priorities of patients and their families. Caregivers are equipped with profound insights into the human response to illness and the profound impact of therapeutic connections, allowing them to provide care that is deeply rooted in understanding and compassion.

## Leadership

Leaders foster a collective vision, serving as inspirations and role models for nurturing positive relationships. They empower those directly involved in the tasks to continually enhance their own systems, procedures, and connections. With an unwavering commitment, leaders prioritize the well-being of patients, families, and staff above all else.

## Teamwork

Effective teamwork necessitates individuals from diverse disciplines and departments to establish and wholeheartedly embrace a common purpose. It calls for collaboration built on trust and mutual respect, where everyone works together seamlessly. The consistent and evident display of teamwork is indispensable for delivering high-quality and safe care.



## Dimensions of RBC

### Interprofessional Practice

Every clinical professional is esteemed and appreciated for their distinct expertise and the entirety of their practice capabilities. Their clinical practice is firmly based on research, professional standards, and ethical considerations. The integration of diverse perspectives is fundamental to fostering effective collaboration, ultimately leading to optimal patient care and outcomes.

### Care Delivery

A patient care delivery system serves as a framework for coordinating care. Within an Relationship-Based Care organization, care is intentionally designed to empower clinicians to take personal responsibility for fostering a strong patient-clinician bond and establishing therapeutic connections with the patient and their family. In an RBC culture, fragmented processes are replaced with streamlined approaches that promote consistent relationships and seamless transitions throughout the entire care journey.

### System Design

Every aspect of the organization, including its structures, processes, and people, is deliberately directed towards achieving clinical quality, relational excellence, safety, effectiveness, and efficiency in patient care and the work environment.

### Evidence

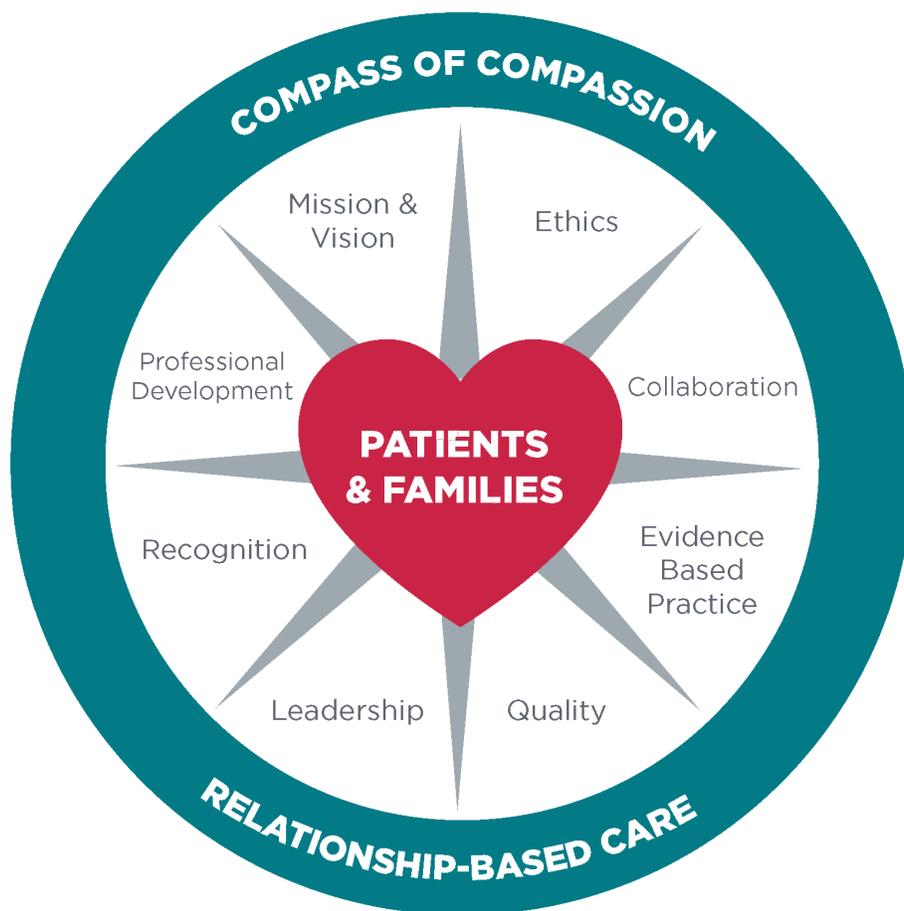
The organization identifies and communicates desired outcomes as tangible evidence of fulfilling its mission and vision. Clinical and leadership practices are reinforced by up-to-date evidence and a culture of continuous learning and development. Acknowledging and celebrating successful strides towards achieving goals fosters a sense of commitment and unity within the organization.



# Compass of Compassion

## Professional Practice Model

The Nursing Professional Practice Model (PPM) employed at UNM Health is the Compass of Compassion. This model guides nurses in their practice, collaboration, communication, and professional growth to ensure exceptional care delivery. Established in 2023, this model undergoes an annual review to maintain its relevance and effectiveness. The model is built upon the principles of Relationship-Based Care, while also integrating the latest research evidence, the organization's mission, vision, and values, as well as the priorities and values of the UNM Health nursing staff.



### Patient-Centered

At UNM Health we understand that patients and families are at the heart of all we do. We aim to establish and maintain strong relationships between patients, families, and healthcare providers, emphasizing the importance of communication and collaboration. Our nurses demonstrate compassionate care by creating supportive environments that help patients feel heard, valued, and respected. They prioritize the unique needs and preferences of each patient to develop care plans that reflect their goals for health and well-being.

## Mission & Vision

The art and science of nursing require a commitment to lifelong learning. Nurses can take ownership of their practice by staying current with nursing evidence-based practice and the advancements of technology, knowledge, and skills in a constantly changing healthcare environment. Investing in the growth and professional development of our staff is how we ensure nursing remains at the forefront of patient care delivery.

## Professional Development

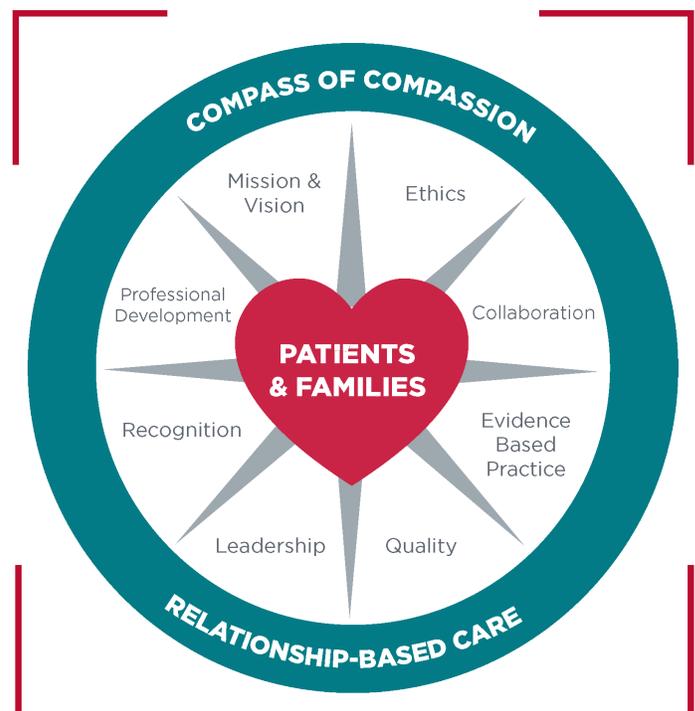
UNM Health's mission is to provide accessible, high-quality, and safety-focused patient care for the people of New Mexico. Our education mission aims to support the educational programs of the UNM Health Sciences Center professional schools, while our research mission focuses on the application of new biomedical knowledge to improve health status in New Mexico. UNM Health aspires to be a leader in improving health outcomes in New Mexico through its academic specialty programs, patient care, education, and clinical research programs. The hospital's values emphasize integrity, accountability, compassion, respect, diversity, effective resource utilization, and institutional mission advancement while supporting personal and professional growth.

## Collaboration

At UNM Health, professionals work collaboratively to provide optimal patient care. Collaboration involves building strong relationships with colleagues, patients, and self. This is achieved by prioritizing timely and accurate communication, compassion, and mutual respect in all our interactions to achieve better outcomes. Interdisciplinary teamwork and programs such as Shared Governance, and LoboSTEPPs help to ensure our teams are sharing knowledge, resources, and expertise while acknowledging our strengths and weaknesses. We collaborate with patients through active listening, providing clear, concise information, ensuring their understanding, advocating for their needs, and involving them in shared decision-making.

## Evidence-Based Practice:

Evidence-based practice (EBP) is a problem-solving approach to clinical practice that integrates the conscientious use of the best available evidence in combination with clinical expertise, and patient values to drive decision making. At UNM Health we strive to promote a culture of inquiry that is supportive and responsive to staff needs, effectively disseminates results, and improves the quality of patient care across the organization. RBC reinforces the concept that those at the point of care are in the best position to design care or services in their own work areas. EBP provides a pathway for staff to engage and take ownership of their practice, while working within interdisciplinary teams to create meaningful change and improve patient outcomes.



## Quality

At UNM Health we strive to provide the highest quality care. Quality as it pertains to nursing is defined as the knowledge, communication, interpersonal, and clinical skills utilized by the nurse to ensure patient safety and achieve desired patient health outcomes. These outcomes are part of a collaborative relationship following the nursing process of assessment, diagnosis, planning, implementation, and evaluation. This continuous process supports empathetic, patient-centered care meeting each individual patient's healthcare needs and expectations.

## Recognition

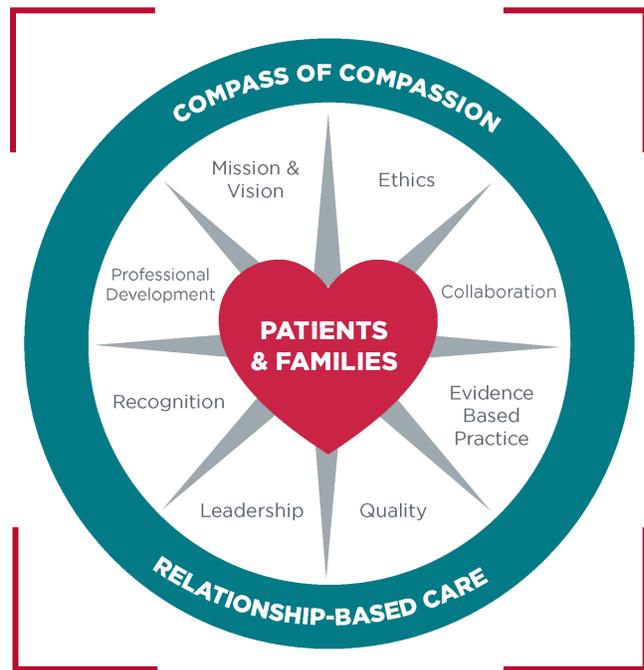
Recognition at UNM Health is a key part of the hospital's commitment to providing high-quality, patient-centered care. Recognized nurses feel valued and motivated, resulting in enhanced job satisfaction, engagement, and dedication to exceptional care. This leads to improved communication, collaboration, and personalized patient experiences, ultimately driving better outcomes and quality of care. This recognition takes many forms, including verbal or written expressions of gratitude, formal & informal awards or other forms of public recognition, and opportunities for professional development and advancement. By valuing and appreciating the contributions of all team members, as well as recognizing the unique needs and concerns of patients and their families, we can create a positive work culture and foster strong, positive relationships between healthcare staff, ourselves, patients, and their families.

## Leadership

At UNM Health, leaders inspire and empower others through a shared vision of compassion and mutual respect for the relationships between patients, families, and the healthcare team. Our organizational culture promotes personal and professional development as we strive to cultivate therapeutic experiences centered in humility, empathy, and trust. The principles of servant leadership bring the team together and fosters commitment to a healthier community.

## Ethics

An understanding of ethical values is essential to nursing practice as they encounter ethical dilemmas during their daily work. Developing ethical awareness helps to ensure quality care. Nursing ethical principles are defined by the American Nurses Association as autonomy, beneficence, justice, and non-maleficence. At UNM Health, we strive to preserve our patients' rights and dignity by upholding each of these ethical principles in our daily practice and proactively advocating for our patients. Application of ethics to clinical practice ensures that our nurses protect and strengthen their relationship with the patient through honesty, equity, and the preservation of patient autonomy.



# ACTIVITIES IN SUPPORT OF JUST CULTURE COMPETENCY

**Definition:** The concept promotes a Process where mistakes or errors may not result in automatic punishment, but rather a process to uncover the source of an error. Errors that are not a deliberate circumvention of a patient safety system often result in coaching, counseling, education around the error, ultimately decreasing the likelihood of repeated error. Increased error reporting can lead to revisions in care delivery systems, creating safer environments for patients and individuals to receive services and giving the nurses and other workers a sense of ownership in the process. "The work environment improves as nurses and workers deliver services in safer, better-functioning systems and that the culture of the workplace is one that encourages quality and safety over immediate punishment and blame" (ANA Position statement)

## Knowledge Attainment (Any 1 Activity):

**Classes:**

---

---

**Online Competency:**

---

---

**Conference:**

---

---

**Articles:**

---

---

**Policies Procedures & Guidelines:**

---

---

**Other Activities:**

---

---

**Just Cultures in Unit Practice (How I participate in Just Culture in my Work):**

---

---

---

---

# ACTIVITIES IN SUPPORT OF SHARED GOVERNANCE COMPETENCY

**Definition:** Shared governance is collaboration, whether scheduling staff, educating new staff, or implementing evidence-based practice. It involves partnership accountability, equity, and ownership with the goals of improved outcomes for both patients and the workforce. It is working together to make decisions that affect nursing practice and patient care. It is working with other disciplines for the patient's good; It is collaborating to improve nursing practice; shared governance is a journey, not a destination. Organizations pursuing shared governance move incrementally from past orientations where the few rule to an orientation where many learn to make a consensual decision. Organizations that implement shared governance are in a constant process of revitalization and renewal. There's always more power to share and more members to bring along on the journey.

## Knowledge Attainment (Any 1 Activity):

**Classes:**

---

---

**Online Competency:**

---

---

**Conference:**

---

---

**Articles:**

---

---

**Policies Procedures & Guidelines:**

---

---

**Other Activities:**

---

---

**Shared Governance in Unit Practice (How I participate in Shared Governance Culture in my Work):**

---

---

---

# ACTIVITIES IN SUPPORT OF EVIDENCE BASED PRACTICE COMPETENCY

**Definition:** Evidence-Based Practice (EBP) is a problem-solving approach to clinical practice that integrates the conscientious use of best evidence in combination with a clinician’s expertise as well as patient preferences and values to make decisions.

## Knowledge Attainment (Any 1 Activity):

**Classes:**

---

---

**Online Competency:**

---

---

**Conference:**

---

---

**Articles:**

---

---

**Policies Procedures & Guidelines:**

---

---

**Other Activities:**

---

---

**EBP in Unit Practice (How I participate in Evidence-Based Practice in my Work):**

---

---

---

---

# ACTIVITIES IN SUPPORT OF PROFESSIONAL PRACTICE CARE MODEL COMPETENCY

**Definition:** A professional Practice Model contains the values structures, and processes that support registered nurses' control of the delivery of nursing care and the environment in which care is delivered, Our model at the University of New Mexico Hospitals is the Compass of Compassion. This model guides our interactions, decision-making, and collaboration, ensuring that we provide compassionate, evidence-based, and quality-focused healthcare.

## Knowledge Attainment (Any 1 Activity):

**Classes:**

---

---

**Online Competency:**

---

---

**Conference:**

---

---

**Articles:**

---

---

**Policies Procedures & Guidelines:**

---

---

**Other Activities:**

---

---

**Professional Practice in Unit Practice (How I participate in Professional Practice in my Work):**

---

---

---

---



Remember there are classes on these topics and we urge you to continue your learning and involvement in your professional practice.

If there is a new class or competency that you would like to have considered for addition to our CAP program, please add here :

---

---

---

---

## Acknowledgement

**I acknowledge that I have completed my self-assessment of my professional practice competence, including the ANA standards of practice and performance.**

**Name:**

---

**Signature:**

**Date:**

---

**Supervisor Name:**

---

**Supervisor Signature:**

**Date:**

---

# R e f e r e n c e s

---

American Nurses Association. (2021). *Nursing: Scope and standards of practice (4th ed.)*. American Nurses Association

American Speech-Language-Hearing Association. (n.d.). *Evidence-based practice (EBP)*. American Speech-Language-Hearing Association. Retrieved January 23, 2022, from <https://www.asha.org/research/ebp/>

Guanci, G., & Medeiros, M. (2018). *Shared governance that works*. Creative Healthcare Management.

Hospitals.health.unm.edu. (n.d.). Retrieved January 23, 2022, from <https://hospitals.health.unm.edu/nursingexcellence/nursing-models/>

Koloroutis, M. (Ed.). (2004). *Relationship-based care: A model for transforming practice*. Creative Health Care Management.

Melnyk, B. M., Fineout-Overholt, E., Stillwell, S. B., & Williamson, K. M. (2010). Evidence-based practice: Step by step: The seven steps of evidence-based practice. *AJN, American Journal of Nursing*, 110(1), 51–53. <https://doi.org/10.1097/01.naj.0000366056.06605.d2>

Miller, V. B., & Jones, T. L. (2011). *Creating a just culture : a nurse leader's guide*. HCPPro. Retrieved January 23, 2022, from <https://search-ebsohost-com.libproxy.unm.edu/login.aspx?direct=true&scope=site&db=nlebk&db=nlabk&AN=493936>.