

Nurse Leadership Institute Guidelines and Expectations

Nurse Leadership Institute

By signing below I agree to the following:

Conflict of Interest

• Planners / Faculty / Presenters of this educational activity disclose no conflict of interest related to any portion of this educational activity. This offering will be awarded _____ contact hours of nursing continuing education credit for full attendance.

Administrative Rules

- I understand that promptness is expected. I will be on time for the beginning of all classes and will return from breaks and meals promptly.
- Further, I understand that I have committed to be present for all scheduled workshop hours on September, 30, 2013; January 16 and 17, 2014 and April 11, 2014 and will plan to attend the celebration event in September 2014 date TBD.

Exploration, Discovery and Growth Rules

- I agree that all information shared by other participants will remain confidential. I will not repeat or discuss what is shared with anyone.
- I agree that I will *not* engage in 'side-bar' discussions.
- I agree that I will direct my comments to whoever has the floor, whether it is faculty in the front of the room or a participant who commented last.
- I agree to participate verbally in discussions and exercises appropriately. It is my responsibility to weigh my fair share of contribution, speaking neither too often nor too little.
- I agree to be open to new ideas and experiences.
- I agree to take risks and step outside of my comfort zone.
- I agree to maintain a positive attitude.
- I agree to give supportive feedback and make corrections without invalidating anyone.
- I agree to suspend judgment and be responsible for my actions.
- I agree to be responsible for learning as much as I can from this experience. I also agree to ask for what I need from my facilitators and my fellow participants.
- I agree to get better acquainted with my fellow participants so we can all identify ways to support one another, to work together as a team and develop professionally.
- I understand that I have assumed an obligation when I registered for this workshop.

Nurses Empowering Nurses to Cultivate Healthy Communities



Project Expectations

- Based on the timeline provided later in the course, I will plan, implement and complete a capstone project.
- Within 2 weeks of the completion of the workshop I will electronically return to Michelle Cheuvront (Michelle@coloradonursingcenter.org) the form that describes my intended project plan.
- I will collect baseline and post-intervention data in three areas:
 - My capstone will be designed such that I can apply some measure of its success. Therefore, I will \Diamond collect data prior to my intervention and prior to the end of project. I will include this in my final project report that will be presented to the participant group as a whole one year from now. The completed project documentation will be submitted to the Colorado Center for Nursing Excellence electronically to Michelle@coloradonursingcenter.org and will also be presented to the participant group on a poster.
 - \Diamond Over the next year, I will provide to the Colorado Center for Nursing Excellence the following data sets:
 - -Any changes in my job status
 - -Any updates to my email address
- I understand that coaching is a critically important component in developing and sustaining my new skill sets.
 - \Diamond I will schedule and keep appointments with my coach for a minimum of two one hour sessions each month for the first three months, and then monthly thereafter through September 2014.
 - It is my responsibility to initiate this contact with my coach. \Diamond
 - I will be accountable to complete my coaching assignments and bring the topic/agenda for \Diamond coaching to each scheduled session.
 - \Diamond I agree to provide my coach with feedback at the end of each session, to ensure the coaching sessions are supporting my growth.
 - If I am unable to work with my designated coach, I will contact Deb (303-715-0343 ext. 14 or \Diamond Deb@ColoradoNursingCenter.org) or Michelle (303-715-0343 ext. 20 or Michelle@ColoradoNursingCenter.org) for assistance in finding a new coach.
- I agree to ask for the assistance, support and guidance that I need to be successful in my capstone project and grow my leadership skills.

Signature: Date:

Nurses Empowering Nurses to Cultivate Healthy Communities