

The Nurse Becoming Podcast #117 - Finding Your Purpose In N...

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SPEAKERS

Elisabeth Collins, Amanda Guarniere

A Amanda Guarniere
Hey, Elizabeth! Welcome to the show.

E Elisabeth Collins 00:03
Hey, Amanda, thanks so much for having me.

A Amanda Guarniere
My pleasure. You are one of the few guests on my podcast who I've actually met in person. It's so fun. So Elizabeth and I met at the Nebraska nurse practitioner Association conference earlier in 2022. And part of me thinks that like, I kind of forced you to be there, because I'm, I messaged you about it, because I knew that you were the only person in my community who I knew who lived in Nebraska. Thanks for coming, even if I did force you into it.

E Elisabeth Collins 00:43
Well, I'm so glad you mentioned it to me, because I had just recently moved back to Nebraska. And so I hadn't even heard about the conference. And then when you messaged me about that, I was like, Oh, I definitely need to go, I need to go and network and then meet you. And you're the keynote speaker. And it was awesome. So I'm really glad that you let me know about the conference in my state.

A Amanda Guarniere
Well, anytime. And you know, you did me a favor by being a little bit of a plan in the audience

for some questions I was going to ask during my talk, so, so I'm very grateful for that. Absolutely. It was fun. So I've already introduced you a little bit, but I'd love for you to introduce yourself. In your own words. Tell us a little bit about who you are and what you do.

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Elisabeth Collins 01:22

Sure. So I'm Elisabeth Collins. I'm a doctorally prepared, dual board certified nurse practitioner, I am certified as an adult gerontology acute care nurse practitioner, and a family nurse practitioner. And so yeah, my background is in nurse practitioner has primarily been in hospital medicine. I've worked as a hospitalist nurse practitioner for several years. And then more recently, I've transitioned into PRN clinician roles, still in hospital medicine, also in occupational medicine. And then I'm also doing some remote stroke coordinator work on the side. So I work remotely as a stroke coordinator, leading my facility through the Joint Commission's primary stroke center certification. So that's been a an awesome project and opportunity for me. And then more recently, I've started a business. I'm an entrepreneur as well, I do healthcare consulting, in educational services. That's a little bit about me. But I'm, I'm a nurse. Of course, Nursing is a big part of my life, but it's not my whole life. So on the personal side, I'm a I'm a wife, I'm a mother... I love to travel. I love to grow plants and flowers.

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Amanda Guarniere

Well, speaking of traveling, this really interesting tidbit stuck in my mind that you I think we talked about this at the conference. And I didn't prepare you for this question. But hopefully you'll tell the story about when you commuted to Guam. Is that for work? Is that right?

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Elisabeth Collins 02:53

That's right. Yeah. So when I finished NP school, I was living in Japan. And, you know, I, I was I had done clinical rotations in multiple different locations, I had done them in Japan at some military facilities, I had done them in the mainland United States, I've come back to Nebraska for several rotations. I had also traveled to Guam for a rotation. And so I had the connection there. And so, you know, at the time when I was getting ready to graduate from NP school and take boards, I kind of had this decision to make, like, am I going to stay in Japan where the opportunities are much more limited for work, particularly as a civilian nurse practitioner? Or am I going to, you know, move like, what is that going to look like? Well, the facility where I did my clinical rotations in Guam, had some openings, I contacted them and just said, you know, hey, you know, do you have a need for nurse practitioner, and they did. And so I accepted the position, and it was a hospitalist nurse practitioner role. And so what I would do is I would work for two weeks in Guam, and I had an apartment there, car, all the things while second, second life there, really. And then I would every month travel back to Japan for two weeks, I would have two weeks off, and I would spend that time with my husband. And so I did that monthly for several years. And until of course the pandemic sort of changed things. And travel became much more difficult. So in 2020, I ended up spending a lot of time in Guam, actually, because I couldn't travel back to Japan. And that kind of prompted are our decision to make a move back to the states in 2021. So yeah, it was it was a fun ride. while it lasted, I love to travel. And I loved the routine of it. It was an eight hour commute to work. Two flights, you know, no big deal. But it was a lot of fun.

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Amanda Guarniere

I love that! I just I just thought that was so that was so memorable and such an interesting, you know, not only personal experience, but really a professional experience that you don't hear about every day like actually traveling by plane and commuting, a pretty far distance to work which I guess just shows goes to show the variety Do you have opportunities that are out there for NPs. And also just a really cool thing to a really cool like icebreaker thing to, you know, someone had someone ask you like, What's one thing that's really interesting about yourself? Like, I would definitely put that list!

E

Elisabeth Collins 05:17

Yeah. It's funny, because in the moment you just do it. But yeah, looking back, it's like, wow, that was pretty wild. Like, I can't believe I live that life. And it was a lot of fun. And I honestly wouldn't have ever have even thought of it either. Except when I did a clinical rotation in that area, I found that it's actually not that uncommon. physicians do that a lot as well. There, I worked with physicians for multiple countries that actually would, we'd go to Thailand, or they'd go to Taiwan, or Korea or whatever. And then they would come back and work for a couple of weeks in Guam and then leave and yeah, the opportunities are endless for nurses, for sure.

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Amanda Guarniere

That's super interesting. So you know, we've talked about your NP career, but I'd love to go back to the beginning a little bit and have you tell us more about your nursing journey, kind of what roles you were in as an RN? And kind of what prompted you to go to NP school? So tell us that story.

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Elisabeth Collins 06:09

Yeah, absolutely. So I was a teacher, before I was a nurse, I was a teacher for eight years. And I always knew, in the back of my mind, I kind of had an interest in nursing. And it's one of those careers that it's like, you know, if you want to make a difference in people's lives, teaching in nursing were the two things that I thought of out of high school. So I went the teaching route first. But then, as I was several years into teaching, I just that thought kept coming back into my mind for several reasons. You know, maybe I'll go back to school for nursing. And even though I love being a teacher, and so I thought, first of all, I'm going to get my CNA license just to see, you know, can I really even handled nursing, I didn't know to be honest, like the smells and the sights like I just didn't know if I could handle it. So I went ahead and enrolled in the CNA course, and turns out, I loved it, I loved the clinical rotation in the nursing home, I loved the geriatric patient population. And so that really solidified my decision to go back to school for nursing. So I enrolled in a community associate degree nursing program. And I completed that. And then shortly after completing that, is when my family and I made the decision to move to Japan. And so, pass the NCLEX, RN picked up and moved, you know, 6000 miles away. And, you know, that had its challenges as well. But basically, I got involved with the American Red Cross, while I was in Japan, I was able to do some volunteer nursing. And then eventually I got hired on as a staff nurse in the emergency department. So primarily, my experience as an

RN was in the ER. So I worked as a staff, nurse, triage, nurse, charge, Nurse all the things and really enjoyed that experience. But it was during that time, when I was living there that I decided to go ahead and finish my bachelor's degree in nursing, and then eventually made the decision to pursue graduate school. That was kind of my journey through nursing.

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Amanda Guarniere

I love it. So I want to talk more about kind of your your decision to further your education and your NP career and really how it has led you to discover your purpose. And I use that phrase, because I know that that's a phrase that's really important to you and really a cornerstone to your business. So I think I remember you mentioning that there's kind of a story to tell there about about that that moment. So I'd love to learn more about what that means, for you.

E

Elisabeth Collins 08:39

Sure, yeah, I think, you know, discovering your purpose in nursing something a little bit different to everybody, because each of us are on an individual, you know, journey and, and that purpose might mean something different to someone else than it does to me, but we can definitely learn from each other. And, you know, my purpose now is to make healthcare better, and also to help nurses maximize their potential and make a difference beyond the bedside, but going backwards and looking at what has led me to where I am now and how I discovered my purpose. So I was working as an ER nurse, like I mentioned, and I loved my job. And I loved the team. We had great camaraderie, great teamwork, and I love the patient population. I love the variety in the ER, something new all the time. And so there were a lot of things to love about my job. However, I found myself having this underlying irritation at times, and sometimes that I could pinpoint it to, you know, maybe a lack of autonomy. There were situations at times where, you know, as a nurse, I would assess the patient, I would talk to the patient, and then the provider would do the same. And then the care plan that was created or the orders that were put in were, you know, things I didn't quite agree with, even though I had to carry them out. And you know, Even if I would ask the provider about it and get an explanation still, it was like, Yeah, but did you listen to the patient? And I think nurses are really good at listening to patients, for the most part. And so that was something. You know, although I loved my job, I craved more autonomy in helping patients navigate those, those decisions and their treatment plan. And so that was one thing. And then also, you know, as I was working as a nurse, I would notice things in that were problems, whether it be in my department, or inter departmental issues, communication issues, procedural problems. And I thought, you know, why isn't anyone addressing these things? Why aren't we fixing the problem? It irritates everybody. So why don't we just fix it. And so there was that. And then when I would speak up about the issue, I sometimes felt like my voice wasn't really being heard. And that was frustrating. And so when I look back, although I loved my time, as an ER, nurse, those underlying sort of irritations definitely prompted my decision to seek more because I think, as a nurse, I craved more impact. You know, a lot of people in health care, they go into health care, nurses go into health care a lot of times because they want to make a difference, right. And when you feel like that's being stifled, and you're not maximizing your full potential, and you can do more to impact patients to impact the system, then you want to do that. And so I started seeking out those opportunities and looking into, you know, more education. And that's really what prompted my decision to go to graduate school to become a nurse practitioner, and pursue eventually the doctorate degree as well.

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Amanda Guarniere

So did you find that doing that and going down that path, like, did it help you really get an opportunity to make that difference? And to have that impact that you felt that you were lacking before?

E

Elisabeth Collins 11:50

It absolutely did. Yeah, absolutely. So as a hospitalist nurse practitioner, I really enjoy helping patients navigate their hospitalization, because it's a transition, right, they're entering into the hospital, and then the transition, you know, through discharge, and just all the steps along the way, being able to communicate to them exactly what the care plan is being able to listen to them. So rewarding. And so I think, becoming a nurse practitioner did solidify that for me like it, it definitely gave me the autonomy that I craved. And then pursuing my education further and finishing the doctorate degree, really, learning through that process, what all is involved in systems level change, and, and kind of getting a piece of it in school, and then being able to take that a further and to the point of where now I'm leading other projects, quality improvement initiatives, and making a difference for patients for nurses, you know, transforming health care from the inside out. Like, that is so rewarding to me. And I feel like my nursing career has been extremely meaningful, fulfilling and rewarding. And I'm so glad that I made that decision.

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Amanda Guarniere

I'm glad. I'm glad to hear that. I think it's always it's, it's always good that, you know, when what you decide to do actually realizes the reason that you decided to do it, right? I guess I'm wondering... So I want to speak to the nurses who may not have interest in becoming a nurse practitioner, right? Because I don't want to give the misconception that becoming an NP is the only way that someone could get this fulfillment and impact it was it sounds like this was the path that was really specific to you and your skills and the impact that you wanted to make. So I'd love if we could talk about for a bit, you know, how can we also as nurses, not necessarily as NPS really realize that impact or, or improve our circumstances without necessarily furthering our education? Because that may not necessarily be the answer. Right?

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Elisabeth Collins 14:02

Right. You're absolutely right. That's, that's such a good point. And I think it's important for nurses to, there's a couple of steps to realizing it, and to doing something about it. The first step being just noticing that underlying irritation, if you find yourself you know, unhappy when you come home from work, and just not feeling right, and snapping at people maybe at work or at home, those underlying irritations and you pick up on that and then maybe dive a little deeper and find out why and there could be a cause for that. And it could be that you don't feel like you're making your impact and you might feel stuck. And so the second thing, then is just realizing if you do feel stuck, just just recognizing that. And then the third thing then is to do something about it. And I absolutely agree that the answer for everyone is not necessarily graduate degrees or becoming a nurse practitioner. Because really, if you're going to go down

that path, you need to know that that's the path for you. But your path might be different, but that That means that if you're identifying that you are stuck, perhaps, you know, some sort of pivot in a different way, that could be a different niche that could be just, you know, speaking up at work and knowing how to transform the healthcare system. And that's something I'm really passionate about, and want to do more with nurses in the future is to equip them and empower them to create change, right where they are. Because I do believe it's possible, but there are several key factors. One of them is you have to find a seat at the table of the decision makers. If you don't do that, you know, then yeah, you're right, your voice won't be, you know, heard, and that's how I felt as an er en. And so, you know, I think there are definitely other ways that nurses can pivot and instill, you know, find that impact that they're looking for, and that that meaning full purpose that they're looking for, and it doesn't always have to include becoming a nurse practitioner, for sure.

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Amanda Guarriere

Good, I'm glad you share that sentiment, because, you know, I've definitely observed and talked to folks who have kind of gone from step one to step three, in in the steps that you're, you know, outlining, noticing that underlying irritation, I love that phrase, by the way, and then doing something about it and having that something be go to NP school, and ultimately, at the end of that path, they realized that it wasn't the answer to what the problem was. So I always think it's a good opportunity to have this conversation as as much as possible. And what I really love that you said is, you know, creating change where you are, and it kind of reminds me of this, of kind of a metaphor to politics and elections, right? Like, if you want to change the world, you don't necessarily need to become the president right away. Right? Like, there's so much power in local, like even town committees and town boards of education and things that seemingly everyday citizens can be involved with, that don't involve running for some sort of national political office. And I think, you know, we can kind of draw a parallel there, and basically say, you know, if you are someone who feels this underlying irritation and wants to make a difference, it doesn't mean that you necessarily need to go to another job, go to another location, advance, you know, advance your profession to another degree or whatever. But, you know, find those opportunities to get those seats at at the table where you are, because ultimately, you know, it's likely that you'll be able to see kind of more immediate benefit of your actions, if you're kind of on a smaller scale, potentially.

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Elisabeth Collins 17:44

Yeah, absolutely. And just knowing too, that if you do make that leap to, you know, the next level of school or whatever that might look like for you go into it very cautiously, you know, make sure you're getting good advice. And that was something I really appreciated, was a mentor who kind of guided me into that decision, and gave me really good advice about which even specialty to choose. And she said, you know, you don't want to invest all this time and money and effort into graduate level education, and then get to the end of it, and you can't even do what you wanted to do. And that really hit me and I was like, You're right, I don't. So I think that was an important piece along the way is that mentorship, but absolutely agree. You know, nurses can make a difference, right where they're at. And I think that it's important to take that deep look at, like, what is causing the underlying irritation? And then, and recognize that feeling of feeling stuck, and then decide from there: what is the best route to do something about it?

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Amanda Guarniere

Yeah. Can you give an example, you know, maybe a concrete example of finding a seat at the table with decision makers, and sticking with that idea of okay, like where you are right now, as a nurse, where you're working right now-- What are some examples of those seats?

E

Elisabeth Collins 19:03

Yeah, absolutely. So recently, I saw a post on social media of a nurse and and it was really fun for me to see it because she said, I'm a new ER, nurse. And we have this issue and transitions of care on getting patients up to the floor, and there's no policy about it. And I want to write a policy. So how do I write a policy? And how do I, you know, get the CEO to sign off on it. And it's funny because I'm having been there and done that in last week, I sent a policy to the CEO to sign so like, this is what I do. It was fun for me to see that initiative and another nurse, you know, and that desire to do it. So I think the first thing is, you know, whenever you want to create change, systems level change, you have to understand the issue. You can't, you know, present solutions until you first understand the issue. And that does include a lot of groundwork, you know, finding out is this an issue for just You are, is it an issue for other people, even collecting data on that issue is important and kind of taking a deeper dive into that, and then having solutions to present, when you do want to change something, you know, the decision makers will listen a lot more carefully, if you come with a solution instead of just to complain, because then they know that you're solutions minded and not just problem minded. And they want people on their team who can help create solutions. Um, sometimes I think there's this disconnect between, you know, bedside nurses or bedside clinicians and management, you know, this, us versus them situation, where really the, you know, the upper level management, they're looking for people to help them out with code as well. And you could be that person, if you bring to them the solution, and it can be a win win for both of you. So, you know, who are those people? Well, the first step is, you know, going through the chain of command, you know, healthcare is very hierarchical. And so you know, going to a manager first presenting it, but if that doesn't work, going to the next level, you know, some of the people I've had the pleasure of working with in my current facility would be the chief nursing officer or the chief medical officer, he's my direct boss right now. And the chief executive officer as well. And, you know, if you can't have a meeting with those people, or the chief operating officer, and you know, bring up an issue, and, you know, present a solution, and then say, you know, the other part of that is, are you willing to, to help make that change? Because it is work? If we're honest, it does take take time. And so, you know, if you're willing to be that change maker, there's a lot of potential there, I think, for nurses, because nurses have such insight into the issues that affect our patients, because we're there, we're right there with them. Whether we're a nurse or nurse practitioner, we're talking to the patients were collaborating with other nurses. So we know what the issues are. And there are many issues in health care that we could focus on not just staffing, that is obviously a huge one. But there are many other ones. So I think if you if you find, I guess roundabout way, sorry, as long winded way to, to answer the question. But if you have an issue that you want to fix where you are, you know, finding a seat at the table of those decision makers, taking it up through the chain of command, but just know that if you don't get the answer you were looking for, at the first level, go to the next level. And that's okay.



A Amanda Guarniere

Yeah, I love that so much. And, you know, my takeaway here, the important point that I want to reiterate and underscore that you mentioned, is bringing a solution, right. And I think that sometimes, as nurses, especially as bedside nurses, we can get so used to being in the role of fulfiller of the orders, that, that sometimes you can either forget or not realize that you have great ideas that are worthy of, of coming to fruition, and arguably, like you are in the best position to have the most effective ideas. So you know, not only is that something that I hope nurses feel empowered to do, but also it will help with the actual making of the change when you bring it up that chain of command, whatever that looks like, and not only shine light on the problem, but present a solution because otherwise, you know, it will I think it'll help you. Not only be involved in the change, help that change happen. But I think that managers are more likely to listen to people who not only shine a light on a problem, but also have thought through the next stage and are opening up that conversation of of improving, improving the process. So I just love that so much.

E Elisabeth Collins 23:53

Completely agree.

A Amanda Guarniere

So I'd love for you to share, like as we kind of wrap up this episode... Tell us more about your platform as a nurse entrepreneur, how you're helping nurses, and where people can connect with you.

E Elisabeth Collins 24:12

Sure, I'd happy to share. So yeah, like I said, my business is kind of twofold: it's healthcare, consulting and educational services. The educational part is, is a piece for nurses, I help DNP students navigate their doctoral projects, choosing the right topic, choosing one that will get approved and make an actual difference in healthcare. And then I just offer some other forces for nurses as well, and some mentorship as well. Because I think having mentorship through the different transitions as a nurse or a nurse practitioner is important, because I know that the mentors that I had along the way we're super helpful. So my, my website is theinnovativenp.com And yeah, you can find me on social media as well @theinnovativ NP on Facebook and Instagram. I'm also on LinkedIn, if anyone would like to connect.

A Amanda Guarniere

Awesome well, I'm going to make sure that all those links are in our show notes. And I just I love this conversation. It's it's been fun to talk to you even beyond you know the little small talk that we had in person but to really dive in deep to some of these issues that are obviously so important to you so thank you so much for being here.

E Elisabeth Collins 25:25



ELISABETH COLLINS 25:25

Yeah, absolutely. Thank you so much for having me Amanda. It's always so fun to to connect, and I agree. It's it's especially wonderful to take it to the next level and talk about how we count nurses can influence healthcare and transform it really from the inside out. Yeah. Thanks for having me.



Amanda Guarniere

Of course. Thank you.