

CAREER GUIDE

2019–2020



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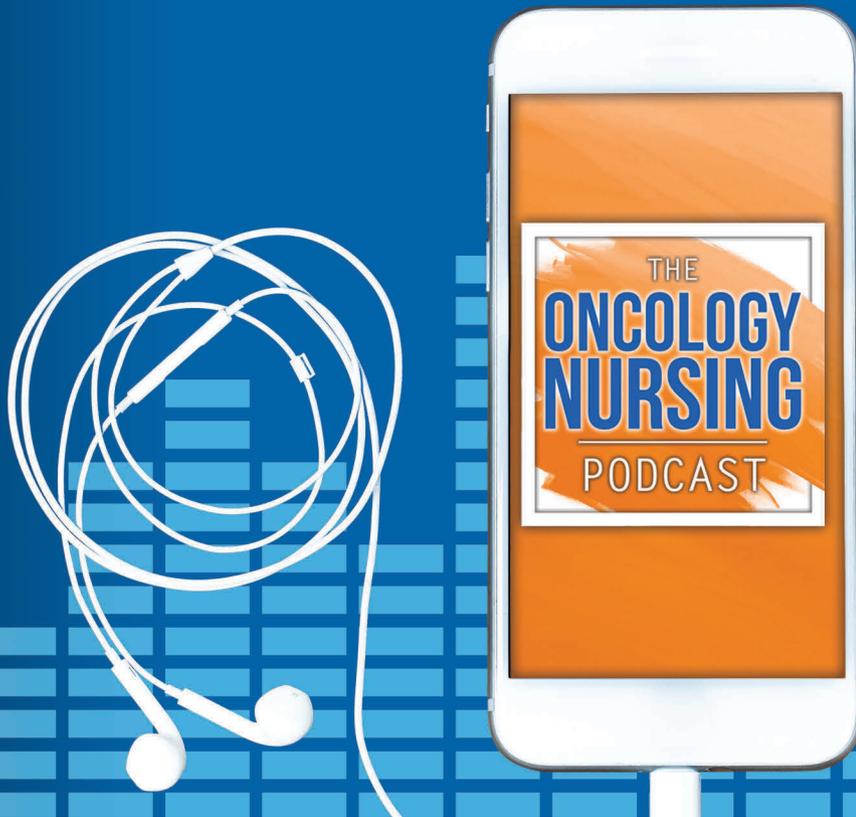
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WHERE ONS VOICES TALK CANCER

Join us at the Oncology Nursing Podcast—on iTunes and the Google Play store—for conversations featuring experts in oncology nursing on the topics important to your practice. Listen, learn, and let us know what you think.

Bringing together the unique perspectives of subject matter experts, ONS's new podcast series delves into clinical conversations important to oncology nursing. Tune in to find out more about topics like immunotherapy, opioids in oncology, financial toxicity, and so much more. Find us for free on iTunes and the Google Play store by searching **"Oncology Nursing Podcast."**



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WANT TO ENHANCE YOUR CAREER KNOWLEDGE IN REAL LIFE?

Attend the 45th Annual ONS Congress in San Antonio, TX, in 2020 and visit the Career Fair Pavilion in the Learning Hall each day to attend sessions on topics like the ones found within this guide. More information on ONS Congress can be found at congress.ons.org.

COVER ILLUSTRATION BY SOPHIA MARIE PAPPAS, 2019

Make Your Resume Stand Out in a Competitive Job Market

The resume is a personal marketing tool that helps to make a good impression on potential employers. It provides a first glance at a person's skills and experience, with the goal of getting an interview.

For those who are entry-level or early-career professionals, resumes should be kept to one page, and experience unrelated to the desired position should be removed. Gaps in employment can be a red flag to employers; these gaps are not un-

common, but they may be addressed during an interview.

Types of Resumes

Resume formats include chronological, functional, combination, or curriculum vitae (CV). Resume format should be chosen to best fit the type of job applicants are seeking.

Chronological

The chronological format is most commonly used because it highlights

an individual's work history and is easy to review; this ease is important because recruiters typically spend less than a minute reviewing a resume. This format includes employers, roles, and accomplishments. More recent positions warrant additional details because experience becomes less relevant the further it is in the past.

Functional

Instead of highlighting work history, the functional format details job functions, focusing on specific skills and achievements. This format can be useful for those who are changing careers or returning to the workforce. Executive-level professionals also often use this type. However, a functional resume is more difficult to review quickly.

Combination

The chronological and functional formats can be mixed to create a combination resume. This type also may be useful for those who are changing careers or those who have held several different positions with the same employer.

Curriculum Vitae

The CV is typically used for academic and research settings and works well for researchers or writers. Components usually include education;

FIGURE 1. RESUME FORMATS

Chronological

- Most commonly used format
- Highlights work history
- Includes employers, roles, and accomplishments
- Easy to review

Functional

- Details job functions rather than work history
- Focuses on skills and achievements
- Useful for those who are changing careers or returning to the workforce
- Often used by executive-level professionals

Combination

- Mixes chronological and functional formats
- Useful for those who are changing careers or for those who have held several different positions with the same employer

Curriculum Vitae

- Typically used for academic and research settings
- Includes education; honors and awards; clinical experience; research and teaching experience; and presentations, publications, and memberships

honors and awards; clinical experience; research or teaching experience; and presentations, publications, and memberships. CVs differ from other resume formats in that they can be lengthy, sometimes 60–100 pages.

Resume Formatting

Design-wise, resumes should have one-inch margins on the left and right sides. Top and bottom margins may vary from half an inch to one inch to enable material to fit on the page. Common fonts, such as Times New Roman or Arial, should be used at a 10- or 12-point size. To make the individual's name stand out, it may appear in all capital letters or bold font. Contact information (e.g., mailing address, email address, telephone number) also is included.

Order

Education is listed in reverse chronological order. Degrees, dates completed, and majors and minors should be included, with it being made clear whether the individual is currently in school or pursuing a degree. Experience should also be listed in reverse chronological order and briefly described, emphasizing skills, accomplishments, and

““ The chronological format is most commonly used because it highlights an individual's work history and is easy to review. ””

knowledge. Skills may include technical skills, languages, leadership skills, or certifications. Transferable skills, or skills that are versatile, are valuable to include because they can be applied to different roles or positions. For example, some transferable skills a nurse may have are clinical assessment and evaluation or patient education and advocacy.

Professional Summary

Resumes can start with a professional summary or an objective statement. A professional summary conveys qualifications and summarizes work experience. This summary should be no more than a few sentences, but years and details should be specific rather than providing vague information. An objective statement

conveys the type of job the individual is seeking. Something to keep in mind is that if this statement is too specific, an applicant may not be considered.

Cover Letters

Cover letters are optional; they may be beneficial for those seeking a specific position. If a cover letter is included, it should be concise and relevant to the position. Volunteer activities and references may be listed.

Conclusion

Tips for a successful resume include keeping it current and accurate, spell checking and reading it out loud, customizing it for the desired position (e.g., use industry terminology), using quantifiable data (e.g., accomplishments, results), and adding relevant awards or recognition received.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Kelly Brassil, PhD, RN, AOCNS[®], ACNS-BC, Tiffani Pope, BA,** and **Anne Bunting, BA,** presented “How to Stand Out in an Increasingly Competitive Job Market.” Brassil is the director of medical affairs at Pack Health in Birmingham, AL, and a lead care manager at the University of Texas MD Anderson Cancer Center in Houston; and Pope is a recruitment manager and Bunting is a senior recruiter, both at the University of Texas MD Anderson Cancer Center. For more information about this session, email Brassil at kelly@packhealth.com.



(L to R) Kelly Brassil, Anne Bunting, and Tiffani Pope present at the Career Fair Pavilion at the 44th Annual ONS Congress.

Create a Lasting Impression With Effective Interviewing Skills

The resume is the first impression an employer gets of an applicant, and that impression lasts. A resume is a tool that can be used to get the hiring manager's attention, so spell checking a resume is imperative. In addition to presenting relevant career experience, a resume also shows whether the applicant has written communication skills and strong attention to detail. Things to include on a resume are bold keywords, an email address, at least one phone number, and LinkedIn information. For optimal readability, no more than two fonts should be used, and the use of pictures and multiple colors should be avoided. Although showing adequate experience is important, previous roles that are not applicable to the current position can be excluded.

Creative, descriptive action verbs (e.g., identified, created, partnered) are useful for describing past jobs, and that experience should also be quantified whenever possible (e.g., more than 100 patients). Having more than one resume is recommended so that different versions can be tailored to specific positions. Job qualifications can be customized to align with those listed on the job site, and applicants should be prepared to provide examples of those qualifications for a

potential interview. Templates, which can be found in word-processing software or online, can be used to simplify this process. Professional resume writers, often found on LinkedIn, also can be hired.

Preparing for the Interview

A resume's purpose is to get the applicant an interview. Once a resume catches the hiring manager's eye, the next steps in the interview process may include a screening call for basic information, a telephone or video interview, or a face-to-face interview. Interviews are an opportunity for applicants to present the best versions of themselves and

provide their personal feelings, perceptions, and opinions to a potential employer.

Applicants should be informed not only about the specific role for which they applied, but also about the company, its culture, and its mission statement. One method for researching the company and the specific role within the company is talking to someone with recent experience in the position. Googling practice interview questions and practicing answers to them is another way to prepare for the interview. Applicants should bring resume copies, research notes, questions, work samples that can be left with the interviewer, and a reference list to



Nicole Korak presents at the Career Fair Pavilion at the 44th Annual ONS Congress.

the interview. References should be notified in advance that they may be contacted by the potential employer. When asked why they are leaving their current role, applicants should be honest about their reasons in a way that does not reflect negatively on past employers or failings of the applicants themselves.

Interview Goals

The interview also gives applicants the chance to interview the potential

that request with skills and reasons. When discussing salary, applicants should be honest about their current salary and personal requirements for future salary. Applicants should also evaluate benefits unique to their current organization, such as bonuses, vacation time, and education days. Common reasons people do not get the job can be found in Figure 1. Actively avoiding these pitfalls can improve your interviewing skills.

“ Applicants should be informed not only about the specific role for which they applied, but also about the company, its culture, and its mission statement. ”

employer. Questions can include professional development, goals, salary, and benefits. Industry average salaries can be researched at www.glassdoor.com, www.salaryexpert.com, or www.bls.gov/ooh. Although knowing average salary is useful, applicants should be realistic and consider their experience (e.g., leadership, organization involvement, certification), academic degree, current salary versus requested salary, and the location and cost of living. If applicants want to request a higher salary, they should be prepared to validate

Conclusion

At the end of the interview, applicants should remain positive and enthusiastic, reinforce their interest in the role, and thank the interviewers for their time. If the applicant has not yet received the interviewer's contact information, this is an appropriate time to ask for a business card. After the interview, applicants should follow up via a short email to convey their appreciation for the opportunity to interview and reinforce their excitement about the position. This email should be no

FIGURE 1. COMMON REASONS PEOPLE DO NOT GET HIRED

- Was unprepared
- Appeared noncommittal
- Communicated poorly
- Behaved unprofessionally (e.g., answered a call or text message)
- Became too personal
- Did not follow up properly
- Seemed overly ambitious or arrogant
- Did not understand the role
- Failed to communicate clearly and concisely
- Did not differentiate self from other candidates
- Was unable to follow application process directions
- Presented self unprofessionally (e.g., dressed inappropriately, arrived late)
- Was not supported by references

more than a paragraph and should not address the interview questions again or add personal information.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Nicole Korak, MSN, FNP-C**, presented "Effective Interviewing Skills: Creating a Lasting Impression." Korak is a senior director of operations at IQVIA in Durham, NC. For more information about this session, email Korak at nicole.korak@iqvia.com.

Set and Achieve Your Professional Goals

Many people struggle to set goals and stick to them. However, goal setting does not have to be complex—it is about creating a target to work toward, and that progress can be slow. Goal setting involves identifying ideal outcomes and creating plans for how to achieve those outcomes. Goals can motivate behavior change, provide direction, sustain momentum, generate feedback, and build character on a personal level. On a professional level, they can enhance job satisfaction, boost performance, reduce turnover, and increase innovation.

Types of Goals

When people think of goals, they may only think of big-picture concepts.



However, short- and long-term goals should coexist. That big-picture goal can be met with the help of several short-term goals that sustain movement. Short-term goals can be defined as requiring six months or less for achievement; long-term goals take longer than six months. When creating goals, ensure that each long-term goal has several short-term goals.

Goals can also be divided into organization-focused or personal development goals. Prioritize goals by categorizing them into a wish list and necessities. Develop questions that are related to organizational or personal priorities, such as the following:

- What can improve patient safety?
- What can affect an institution financially?
- Is there a law coming out that makes certain professional goals more important?
- Is becoming certified necessary to receive a promotion?

Questions like these can help align goals into necessities. Any remaining goals not answered by identified questions may go into a wish list to be achieved after time and energy are devoted to the necessities.

Aligning and Writing Goals

Aligning different types of goals can also help to achieve a series of goals. Alignment means nesting personal goals within larger goals—personal goals nest into unit-based goals, which nest into department-based

goals, which nest into organization-based goals (see Figure 1). For example, if a nurse identifies climbing the clinical ladder as a goal and certification is a requirement for that at a nurse's institution, then certification becomes a priority for that nurse. Ranking things in this way helps to not let unnecessary concerns float to the top.

When writing a goal, consider using the SMART goal method. This stands for Specific, Measurable, Achievable, Realistic, and Time-Bound (see Figure 2). These goals are challenging, balanced, and clearly defined. This is also the time to decide whether goals are stretch goals or more typical. For example, if a nurse has never published before, then publishing an article is a stretch goal; if a nurse has published, it is a regular goal. The best time to set a stretch goal is after a small win and when a nurse has enough resources and support to stretch beyond the norm.

Achieving Goals

After defining goals, break them into tasks. Divide tasks among coworkers if necessary, determine resources (e.g., is there a class to take for certification goals?), establish a time frame, set milestones (short-term goals within a long-term goal), and measure results. Noting achievements is essential as goals progress, but remember that success is not a linear path—failing forward is a possibility. Prioritize responsibilities,

and do not ignore long-term goals for the instant gratification of short-term achievements.

During this process, engage in feedback among peers. Self-assess goals by recognizing methods that did or did not work, but also solicit and encourage feedback about what could be done better or differently. Do not let feelings get in the way and react defensively—remember that feedback is meant to benefit the overall process,

FIGURE 2. SMART GOALS

SMART goals should be challenging, balanced, and clearly defined.

- Specific
- Measurable
- Achievable
- Realistic
- Time-bound

Example: 51% of the team will achieve specialty certification by 2020.

“Peer feedback is an essential component of success, so do not keep goals a secret. Sharing goals with trusted peers allows for collegial feedback, and it motivates others.”

and take time to process how to turn constructive feedback into action.

Conclusion

Goals provide structure for accomplishing personal and professional achievements, and they should be challenging but also attainable and structured. Peer feedback is an essential component of success, so do not keep goals a secret. Sharing goals with trusted peers allows for collegial feedback, and it motivates others. It also creates buy-in to continue working toward those goals. Set

goals, break them into tasks, share them, and achieve them.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Erica Fischer Cartlidge, DNP, CNS, CBCN®, AOCNS®**, presented “Goal Setting for Success.” Fischer Cartlidge is a nurse leader for evidence-based practice and clinical nurse specialists at Memorial Sloan Kettering Cancer Center in New York, NY. For more information about this session, email Fischer Cartlidge at fischere@mskcc.org.

Impact Your Profession by Publishing

As the editors of the Oncology Nursing Society's peer-reviewed journals can testify, the paths to publication are many and varied.

Anne Katz, PhD, RN, FAAN, editor of the *Oncology Nursing Forum*, loves reading and writing, and she was first published during her baccalaureate program before serving as a peer reviewer and on an editorial advisory board. One solo book led to another (and to many others after that). To Katz, those experiences have been gratifying, and she wants to share the joy that comes with seeing one's name in print.

For Ellen Carr, RN, MSN, AOCN®, editor of the *Clinical Journal of Oncology Nursing (CJON)*, writing and editing were integral to her first career in journalism. In her second career, oncology nursing, Carr was approached by those who knew about her background and enlisted to write book chapters, articles, and the like.

Preparing for Publication

Writers both new and experienced who are seeking publication should begin by asking themselves a few questions: What are you going to write about? What are your target publications? Will you be the sole author, or will you collaborate with others?

It's always a good idea to focus on your passions and to share what you know that others don't, such as unique case studies; new measures, instruments, or tools; and improved

processes or even processes that didn't work, particularly if they have wide clinical applicability. Starting small, such as with an abstract and a poster presentation, is a good idea.

Be sure to know your intended audience, too. Consider readers' needs, as well as the implications and applications of your content; this will guide your search for target publications.

Whether to collaborate with others depends on a number of factors—but before any work begins, a few key things should be determined: Expectations should be set and roles established. The order of authors on the byline should be defined. The difference between primary and secondary authors should be discussed. Expectations of authorship without participation should be denied.

FIGURE 1. PREDATORY PUBLISHING

Potential authors should be on high alert for offers of publication that seem too good to be true. Predatory publishers, which charge high author fees for minimal return, have been on the rise in recent years.

Potential publishers should be investigated before committing. If you submit your manuscript to a predatory publisher, you may lose your copyright and also your ability to publish it with a reputable journal, like *CJON* or *ONF*, both of which have no author fees and are indexed in CINAHL®, MEDLINE®, PsycINFO®, and the British Nursing Index.

Although predatory publishers may use the same or similar titles as established publications, there are several red flags: typos and grammar oddities; wide-ranging, nonspecific publication topics;

difficult-to-find or missing contact information; rapid publication; and direct request.

Various websites exist to validate potential publications. These include Think. Check. Submit. (<https://thinkchecksubmit.org>), Directory of Open Access Journals (<https://doaj.org>), and Directory of Nursing Journals (<https://nursingeditors.com/journals-directory>).

Asking for help is another option; consider employing resources like colleagues, editors and journal staff, author guidelines, and industry-related publications (such as *Nurse Author and Editor* and newsletters from organizations, hospitals, and healthcare boards of nursing).

These steps are vital—your credibility is your most valuable commodity.

New writers could consider starting small, with a letter to the editor. Beginning writers may also want to consider using a mentor, either informally (such as a colleague, co-worker, or friend; even those who are not familiar with oncology nursing can offer helpful recommendations if they are strong readers or writers) or formally (such as through the *CJON* Writing Mentorship Program, which matches novice writers with seasoned authors).

Submitting to Journals

Once you have a topic, decide which journal you want to submit your article to, and contact the journal editor with a query letter—and be open to the editor’s suggestions. For example, if an article with a similar focus has already been accepted, the editor might offer guidance on how to angle your article differently. A query letter is also helpful in determining whether the proposed article is a good fit for the target publication or would be better suited to another publication entirely. Also prior to submission, be sure to review and adhere to the posted author submission requirements, which could be the difference between review and automatic rejection. While in the submission process, writers must also be on the lookout for predatory publishers. More information on this can be found in Figure 1.

Writers must have a thick skin when submitting—but they should

“It is rare for articles to be accepted on their first attempt; most require minor or even major revisions.”

keep in mind that those involved in the publication process, like peer reviewers and copy editors, are only trying to improve the work. It is rare for articles to be accepted on their first attempt; most require minor or even major revisions.

The work is worthwhile, though. In addition to sharing information with others and propelling the science of oncology nursing forward, publishing can enhance professional development for clinical and non-clinical nurses and lead to opportunities like coauthorship, book projects and chapters, sole authorship and editor roles, speaking engagements and speakers bureaus, and academic progression and tenure.

Conclusion

Authors looking to build on their experiences are encouraged to explore ways to volunteer for industry publications, including with peer review boards, mentorship programs, editorial boards, and editorships. For new writers and experienced authors alike, the venues for publication are diverse, including newsletters,

consumer publications, and peer-reviewed publications, which often accept submissions of letters to the editor, case studies, clinical reviews and updates, literature reviews, and research articles.

After all, according to Katz, “there is a home for every well-written manuscript.”

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Anne Katz, PhD, RN, FAAN, Ellen Carr, RN, MSN, AOCN®**, and **Leslie McGee, MA**, presented “Impact Your Profession by Publishing.” Katz is a clinical nurse specialist at the Manitoba Prostate Centre and a sexuality counselor for the Department of Psychosocial Oncology at CancerCare Manitoba, both in Winnipeg, Manitoba, Canada; Carr is a clinical educator in the Multispecialty Clinic at the University of California San Diego Moores Cancer Center; and McGee is a senior editorial manager at the Oncology Nursing Society in Pittsburgh, PA. For more information about this session, email Katz at ONFEditor@ons.org, Carr at CJONEditor@ons.org, or McGee at lmcgee@ons.org.

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As part of our continued growth at Baptist Hospital and Miami Cancer Institute, we will be opening a new 200+ bed tower at Baptist Hospital of Miami. This new bed tower will include a new oncology and blood marrow transplant unit. The outpatient and inpatient transplant programs are an important part of our mission to provide sophisticated, high-quality cancer care to patients here in our region and also those coming from the Caribbean, Latin America and beyond.

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Baptist Health is an Equal Employment Opportunity employer.
This position is not open to any third party recruiters, consultants and/or vendors at this time.

FREE PATIENT EDUCATION SHEETS FOR ORAL CHEMOTHERAPY DRUGS

Oral Chemotherapy Education (OCE) is a resource that gives healthcare providers the latest information on oral chemotherapy drugs.

As part of OCE, the Oncology Nursing Society has partnered with the National Community Oncology Dispensing Association, Inc., the Association of Community Cancer Centers, and the Hematology/Oncology Pharmacy Association to offer free patient education sheets on oral chemotherapy drugs.

- Free patient education sheets in PDF format
- Written at an appropriate reading level for patients
- Contain editable fields for providers to enter patient-specific notes
- Include usage, dose and schedule, storage and handling, drug and food interactions, side effects and their management, and resources

[ORALCHEMOEDSHEETS.COM](https://www.oralchemoedsheets.com)



Engage Employer Support for Certification

Employer support is a strong motivator for nurses to become oncology certified—and certification carries benefits not only for an individual nurse, but also for the nurse’s employer.

Effects of Certification

For employees, becoming oncology certified can mean recognition, increased confidence, and enhanced professional credibility and validation of knowledge. There are other bonuses, too. On average, nurses certified in a specialty can earn over \$7 more per hour, and 97% of nurses have reported that certification provides them with personal satisfaction.

Employers supporting oncology certification can see its effects in

recruitment and retention, for one; an institution’s promotion of professional development can help to attract—and keep—nurses who want

including assistance to help employees prepare for certification examinations, exists; at others, it is limited or nonexistent. Similarly, some

““ Many nurses report perceived lack of employer support and recognition as major barriers to certification. ””

to advance in their careers. Support of certification also demonstrates an employer’s investment in its employees and their growth, as well as reflects a commitment to quality and helps to build a strong public image. In addition, employer support may lead to recognition from accrediting agencies of distinction and help the institution meet accreditation standards. See Figure 1 for a list of strategies employers can use to support certification.

However, many nurses report perceived lack of employer support and recognition as major barriers to certification. For example, some institutions offer payment for the initial certification examination or recertification examination, along with a salary increase or a bonus upon certification—but others do not. At some institutions, support from leadership,

institutions may recognize and celebrate the milestone of certification, whereas it may not be as valued at others. Whether certification is required in particular work settings and whether an employee’s workplace peers or leaders are certified also affect the likelihood of pursuing certification.

FreeTake Program

Some employees may simply be afraid of failure. The Oncology Nursing Certification Corporation (ONCC) FreeTake Program may be able to help. Enrollment in the program allows nurses at a particular institution to take an oncology certification test as many as two times, and the institution pays only when a test candidate passes.

Because nurses can retake the test one time for free, the ONCC

FIGURE 1. WAYS EMPLOYERS CAN ENCOURAGE CERTIFICATION

- Offer personal encouragement.
- Provide financial support.
- Distribute certification information.
- Recognize certified nurses.
- Incorporate certification into the career ladder.
- Negotiate salary incentives to certified nurses.

FreeTake Program can help to decrease nurses' test anxiety. The program can also remove the financial burden of paying a test fee up front; the institution is invoiced only when the nurse passes.

The ONCC FreeTake Program is available for institutions with 10 or more test candidates, and the ONCC Board of Directors is considering expansion of the program. ONCC also offers certification support through

the Roberta Scofield Memorial Certification Award, which provides as many as 150 applicants per year with free registration for an ONCC certification examination or renewal; OCN®, AOCNP®, CBCN®, CPHON®,

CROWNS FOR CERTIFIED NURSES

RNs in an oncology/infusion department in California who earn their OCN® credential are honored with a handknit golden crown during a coronation ceremony.

During the ceremony, the latest OCN® is crowned as a scroll, rolled up and tied with a piece of yarn, proclaiming the following is read:

As health care becomes increasingly complex and challenging, the value of certification as a mark of excellence is more important than ever.

Achieving certification demonstrates to patients, employers, and the public that a nurse's knowledge, skills, and abilities meet rigorous national standards—and reflects a deep commitment to patient safety.

Thank you, [RN name], for your commitment to excellence and all that you bring to the team.

The idea for the celebration came from a patient with cancer, said Catherine McFarlane, BSc, RN-BC, CEN, a staff educator for Kaiser Permanente in Harbor City, California. During a lunchtime knitting group, a patient requested help with a complicated pattern that appeared to be only partially in English and the rest in Icelandic. McFarlane copied the pattern, took it home, and attempted to make something that looked vaguely the shape of the item in the photo. All the while, she couldn't stop

thinking of this particular patient and the praise she had lavished on the department's knowledgeable staff. This led to the golden crowns.

Since 2017, McFarlane has knit nine golden crowns—six for the department staff, one for a research nurse, one for a hospital manager, and one for a pharmaceutical education specialist.

"When I shared this with the patient and told her what she had inspired, it brought tears to her eyes, and she was so glad to know that she had played a role in honoring our nurses," McFarlane said. "Who would have thought that just asking for help with a knitting pattern would lead to this?"

KNITTING PATTERN FOR OCN® CROWN

Materials

- Worsted weight yarn
- Size 6 knitting needles

Instructions

- Points are worked first.
 - For each point, cast on 5 stitches.
 - Row 1: Knit 3, yarn over, knit 2.
 - Row 2: Knit.
 - Row 3: Knit until last 2 stitches, yarn over, knit 2.
 - Repeat rows 2 and 3 until there are 12 stitches on the needle.
 - Decrease rows: Knit until last 5 stitches, knit 2 together, yarn over, knit 2 together, knit 1. Knit the next row.
 - Repeat the 2 decrease rows until 6 stitches remain.



Eleanore Bley, BSN, RN, OCN®

- Repeat from row 1 6 times until there are 7 points.
- Cast off.
- Pick up stitches along lower edge of points. Make sure to have an uneven number of stitches.
- Work 6 inches in moss stitch to form sides of crown.
 - Rows 1 and 4: Knit 1, *purl 1, knit 1; repeat from * to end of row.
 - Rows 2 and 3: Purl 1, *knit 1, purl 1; repeat from * to end of row.
- Cast off.
- Sew up seam.
- Using a crochet hook and scraps of colorful, sparkly yarn, add some jewels to adorn your crown.

and BMTCN® of the year awards; recognition plaques for work settings with names of certified nurses; employer recognition for large (more than 25 certified nurses) and small (fewer than 25 certified nurses) work settings; and certification pins.

In addition, ONCC has more in store for certified nurses. Future ONCC programs may include digital badging, discounts for a second credential, emeritus status, and free certification renewal of one credential for ONCC committee members during their volunteer term.

Conclusion

Certification has many benefits for nurses and their employers, and employers should encourage nurses to become certified. Nurses should also advocate for themselves when it comes to earning certification. For more information on certification, read an *ONS Voice* article (<https://bit.ly/2X8SfJS>) that highlights the value of certification, or listen to an *Oncology Nursing Podcast* episode (<https://bit.ly/2KI7K9I>) that shares ways that nurses can prepare for certification testing.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Nick Escobedo, DNP, RN, OCN®, NE-BC**, and **Diane Otte, MS, RN, OCN®**, presented “Engaging Employer Support for Certification.” Escobedo is vice president of the Oncology Nursing Certification Corporation Board of Directors and a nursing director at Houston Methodist Hospital in Texas; and Otte is president of the Oncology Nursing Certification Corporation Board of Directors. For more information about this session, email Escobedo at nickolaus.escobedo1@gmail.com or Otte at ottedm@charter.net.

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Financial burdens of returning to school, attending a continuing education seminar, or conducting research can deter people from pursuing advancement opportunities in their oncology nursing career. Understanding what funding opportunities are available,

as well as understanding what distinguishes a strong application from a weak one, can help nurses to actively pursue financial assistance to support furthering their career goals.

Linda Worrall, RN, MSN, executive director of the Oncology Nursing Foundation, addressed these topics

during a recent presentation. The Foundation provides financial resources that oncology nurses need to learn, grow, and lead in their profession. Specifically, she addressed the following questions related to financial assistance:

- What types of funding does the Foundation provide for nurses?
- Is there only one type of scholarship, or do opportunities differ based on level of education?
- How does a nurse apply for a Foundation award or scholarship?
- Once an application is submitted, what is the process for a response?
- What best practices and tips should nurses keep in mind for the application process?
- If nurses have questions about the application process, who should they contact?
- If nurses are interested in providing expertise, how can they help?

The Foundation aims to support oncology nurses by providing funding opportunities for leadership and nursing education, such as academic scholarships, career development awards, research funding, and project funding. Any oncology nurse is welcome to apply to receive funding from the Foundation. A comprehensive list of scholarships, awards, and funding, including award amounts, is presented in Table 1.

TABLE 1.
SCHOLARSHIPS, AWARDS, AND FUNDING OFFERED BY THE ONCOLOGY NURSING FOUNDATION

TYPE	AMOUNT (\$)
Academic scholarships	
BSN	3,000–5,000
MSN	5,000
DNP	5,000–7,500
PhD/DNSc	5,000–7,500
Career development awards	
Leadership development	1,200
Oncology Nursing Society Congress scholarship	1,200
Bone marrow transplantation education	2,000
Research funding	
Dissertation grants	5,000
Career development	20,000
Research grants	25,000 or greater
Project funding	
Cancer public education projects	5,000

Application Submission and Review

The application submission process includes accessing the online application through the Foundation website (www.onfgivesback.org/apply-now). Complete instructions are provided to applicants on the website as they submit their applications, but the most important thing to remember is to continuously save the application throughout the submission process to ensure that partially completed applications are not lost.

After submission, applications are reviewed by staff for completeness and then scored by a review team. The review team evaluates the application using the Score Tool. Each application is reviewed independently by three individuals, and compiled results are shared with the team lead, who then recommends scholarship or award recipients to the Founda-

FIGURE 1. TIPS FOR CREATING A STRONG APPLICATION

- Review all application instructions and requirements before applying.
- Ensure that you meet the eligibility criteria for the application.
- Plan to submit your application before the deadline.
- Review the application questions closely, and provide a detailed response to each part of the question.
- Review your application for any grammar, spelling, or punctuation errors.
- Complete your application in full, and then save, validate, and submit it.

“Applicants should incorporate their passion for oncology nursing and furthering their career into their application, as well as discuss what motivated them to become oncology nurses.”

tion. Applications are evaluated based on a response to each question. For responses that require a detailed written response, applicants are evaluated on their response to each part of the question and whether the response was clearly articulated with the proper use of grammar, punctuation, and spelling.

Best Practices

Although being an active ONS member is not a requirement to apply for scholarships, awards, or funding, being an oncology nurse or focusing on cancer care in a patient capacity is a must. Nursing certification is also not a requirement for applying; however, being certified in oncology nursing indicates active engagement and dedication to oncology nursing. Reasons for low scores include having grammar, punctuation, or spelling errors; not providing enough detail; or not answering the question fully. Although tailoring a response by adding information directly from the brochure for a program may be tempting, providing personal details is what can really enhance an application. Applicants should incorporate their passion for oncology nursing and furthering their career into their application, as well as discuss what motivated

them to become oncology nurses. Applicants should also provide personal details about what they hope to achieve by receiving a scholarship, award, or funding. Specific examples of how applicants will use and share the information gained from the scholarship can demonstrate thinking beyond the funding to implementation opportunities. Additional tips for creating a strong application can be found in Figure 1.

Conclusion

The goal of the Foundation is to fund as many nurses as possible. “I believe, if you stay in oncology for a year, you stay for life. You want to take care of and grow with your patients,” Worrall said. For application submission assistance or to volunteer to review scholarship applications, email the Foundation at info@onfgivesback.org.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Linda Worrall, RN, MSN**, presented “Advancing Your Career Through Awards, Grants, and Scholarships.” Worrall is the executive director of the Oncology Nursing Foundation in Pittsburgh, PA. For more information about this session, email Worrall at lworrall@onfgivesback.org.

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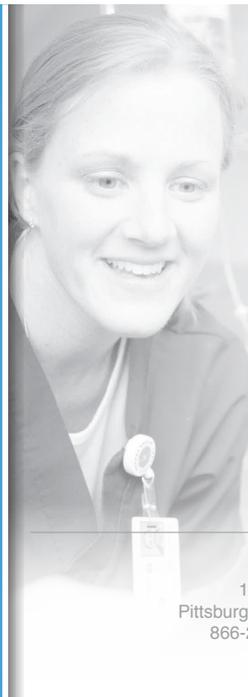
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Promote Resilience and Diminish Burnout Through Self-Care

Lisa Blackburn, MS, APRN-CNS-BC, AOCNS®, does not believe in work–life balance; between work and life, there does not have to be a perfect balance at all times. Blackburn believes that it is OK for work or life to take the lead at certain periods in life, but what can help maintain that sense of balance is prioritizing self-care to build resilience and reduce burnout.

Nurses encounter known hazards each day and use tools to counter those hazards. If nurses administer chemotherapy, they wear personal protective equipment to protect themselves. However, compassion fatigue is also a known hazard of nursing. For compassion fatigue, personal protective equipment can mean enacting skills that build resilience.

THRIVE Program

Organizations and nurses have a joint responsibility to support prioritization of self-care. For Blackburn, this meant the creation of the THRIVE program at the Ohio State University Comprehensive Cancer Center–Arthur G. James Cancer Hospital and Richard J. Solove Research Institute in Columbus. The program begins with an eight-hour retreat for nurses and other healthcare professionals held at an off-site location. The purpose of the retreat is to

expose nurses to as many self-care activities as possible. Blackburn recognizes that self-care is not one-size-fits-all, so her method is to share a variety of techniques in the hope that two or three will resonate with each person.

One of those techniques involves simple breathing exercises that can be performed anywhere—even at the bedside. Another technique is art therapy and the creation of spirit dolls, where the focus is on being creative and self-reflective. The creation of each spirit doll includes writing down five things in life that bring the most joy and incorporating that into the head of the

doll. Other techniques include music therapy using a THRIVE playlist of uplifting songs that participants may contribute to, guided imagery, chair yoga, and acupressure.

Nurses can take those techniques and incorporate them into their home or work life. For example, a team of nurses can schedule a 10-minute yoga flow into their shift. On an individual level, a nurse can use guided imagery as she leaves work by visualizing packing her experiences from that shift into a backpack and leaving it at the hospital, where it will be waiting for her at the start of her next shift.

Following the one-day retreat, THRIVE participants join a six-week



(L to R) Lisa Blackburn, Shannon Panda, Shelly Brown, and Colleen O’Leary performed a dramatic reading from a final session of the THRIVE program at the 44th Annual ONS Congress.

independent study via a private Facebook group that is used to challenge participants to practice the self-care techniques they learned. Weekly posts may pose questions about how participants are committing to self-care for the weekend, which colleague at work is brightening the week, and what smell brings comfort. The posts often encourage posting photos to bring participants together, motivate one another, and share ideas.

After six weeks, participants gather again to discuss how things have changed in their lives over the course of the program. During that final session, Blackburn compiles a dramatic reading from journal entries that participants write about patients they've had. The readings are in the voice of

““ From pre- to postintervention, the program showed positive results for burnout, compassion fatigue, and secondary trauma that were sustained for at least six months. ””

patients and change with each session, but past readings have included themes of being thankful, advocating for patients, making a difference, and creating connection.

Results

Blackburn has compiled data from multiple sessions and found that managers had the highest amount of burnout, and bedside nurses had the highest secondary trauma. From pre- to postintervention, the program showed positive results for burnout, compassion fatigue, and secondary trauma that were sustained for at least six months. In addition, nurse turnover was found to be lower with THRIVE participants.

Conclusion

Practicing self-care on a daily basis is personal protective equipment that

all nurses can use to combat compassion fatigue and build resilience. Nurses already excel at caring for their patients, but learning to care for themselves can be what sustains a career in oncology nursing over decades.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Lisa Blackburn, MS, APRN-CNS-BC, AOCNS®**, presented “The THRIVE Program: Building Oncology Nurse Resilience Through Relationship-Based Self-Care.” Blackburn is a clinical nurse specialist at the Ohio State University Comprehensive Cancer Center–Arthur G. James Cancer Hospital and Richard J. Solove Research Institute in Columbus. For more information about this session, email Blackburn at lisa.blackburn@osumc.edu.

FIGURE 1. EXAMPLES OF SELF-CARE ACTIVITIES

- Yoga flow/chair yoga
- Breathing/autogenic relaxation
- Mindfulness
- Mindful eating/walking
- Music therapy
- Art therapy
- Guided imagery
- Acupressure/self-massage

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Design Your Path to Leadership

Having a supervisory position over others in the workforce may lead to a default leadership role. However, others lead by example by accepting challenges, signing up for additional tasks, and taking control of a situation. How can oncology nurses enhance their leadership skills and become influential in the clinical setting, at a healthcare institution, or in national and international organizations?

This and other leadership-based questions were posed by Ashley Leak Bryant, PhD, RN-BC, OCN®, former

chair of the Oncology Nursing Society (ONS) Leadership Development Committee. Other questions include the following:

- What is the best resource for strengthening leadership skills?
- How does one find a mentor?
- Are classes or continuing education helpful in developing leadership skills?
- How can a nurse seek more leadership opportunities in his or her practice?
- Say a nurse doesn't see herself or himself as a leader—how can her or his perception be adjusted?

Leadership Development Committee

One way to answer these questions, according to Bryant, is through the ONS Leadership Development Committee. The committee's goal is to provide leadership training and to determine who is ready for a leadership role at ONS. For interested nurses, the first step is to take the ONS leadership competencies self-assessment, which can be found at www.ons.org/vote. This tool focuses on vision, personal mastery, systems thinking, interpersonal effectiveness, and knowledge. The second step is to conduct a personal leadership assessment, which involves self-reflection on strengths and areas for growth. Peers and supervisors provide input, and SMART goals are developed based on comments and feedback. SMART stands for specific, measurable, actionable, realistic, and timely.

For those who wish to explore leadership growth opportunities, ONS has developed a pipeline with three distinct categories. Emerging leaders (those with a five-year plan) are defined as oncology nurses with the interest and aspiration to lead but in need of additional skill growth or mentoring. Mid-level leaders (three- to five-year plan) are defined as oncology nurses who are leading within a group setting while showing interest and capabilities for higher-level leadership. Now leaders are defined as oncology nurses who are leading at the board level or any other

FIGURE 1. ONCOLOGY NURSING SOCIETY LEADERSHIP PIPELINE CATEGORIES

Emerging Leaders

- Show interest in being a contributor in the workplace, the local chapter, or other opportunities when available.
- Be comfortable applying technology for collaboration.
- Have the desire to grow as a nurse and leader.

Mid-Level Leaders

- Participate in budgeting in the workplace or in a volunteer role.
- Be active at the local level with the Oncology Nursing Society or another professional association.
- Serve in leadership roles within the workplace.

- Demonstrate experiences that indicate group-level leadership understanding.
- Be comfortable applying technology for collaboration.

Now Leaders

- Serve in executive leadership roles in the workplace.
- Be active at the national level with ONS or another professional association.
- Understand fiduciary responsibility.
- Be a strategic thinker.
- Demonstrate governance-level leadership understanding.
- Use technology effectively.

high-level position of representation. This level often extends beyond the oncology setting. Each category contains additional descriptions to further define the role (see Figure 1).

Diversity and Inclusivity

Advancing diverse and inclusive leadership in nursing is also important when considering the concept of leadership. Bryant noted that nursing is the largest healthcare workforce in the United States, and nurses are in a position to champion diversity efforts. However, the Institute of Medicine's 2010 report *The Future of Nursing: Leading Change, Advancing*

Health stated that the nursing profession was not diverse enough to care for the population of the United States. Figure 2 can help healthcare providers consider how diversity, inclusion, and equity are exemplified

includes safety and trust within an organization.

Conclusion

Those interested in developing their leadership skills should take the ONS

“ Cancer does not discriminate, and neither should the hiring process in a healthcare organization. ”

FIGURE 2. QUESTIONS FOR DIVERSITY, INCLUSION, AND EQUITY

Diversity

- Who is in the room?
- How do we think?
- Do we have diverse perspectives?

Inclusion

- Do people feel empowered?
- Do people feel engaged?
- Is everyone able to share ideas?
- Has everyone's idea been heard?

Equity

- Who is trying to get into the room but can't?
- Would their presence in the room be a threat?

in their organizations. Bryant recognized the following related to those topics:

- Cancer does not discriminate, and neither should the hiring process in a healthcare organization.
- Diverse and inclusive leadership should be the culture of the healthcare organization. It needs to come from the top and include champions throughout to ensure that diversity, inclusion, and equity are discussed and present.
- Consider ways in which nurses can be trained to provide culturally responsible care, such as with patients who have limited English-language skills.

With these in mind, nurses can promote diversity and inclusion, as well as the concept of intersectionality, which is how diverse factors come together in a patient and how you can treat that patient holistically, and create a culture change that

leadership competencies self-assessment and review the open volunteer opportunities with ONS (communities.ons.org). To hear additional leadership advice, the *Oncology Nursing Podcast* contains an interview with Bryant that can be accessed at <https://bit.ly/2X57uTM>.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Ashley Leak Bryant, PhD, RN-BC, OCN®**, presented "Designing Your Path to Leadership." Bryant is an assistant professor in the School of Nursing at the University of North Carolina, Chapel Hill. For more information about this session, email Bryant at ashley_bryant@unc.edu.

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Color by Number Leadership

Having a team with diverse types of personalities creates a climate of toleration and collaboration in the workplace. Recognizing personality differences and learning to effectively lead individuals with dissimilar personalities can reduce

turnover, increase satisfaction, and generate intellectual capital for the organization.

into their strengths and using them to benefit the team.

Color Types Green

Green leaders are abstract thinkers, enjoy thinking, and approach situations logically. Their strengths are being conceptual, analytical, logical, ingenious, and automatic. They value intelligence, ideas, logic, and ingenuity. They may frustrate others by showing insensitivity and hurting feelings. When an organization needs to come up with new ideas or is becoming stagnant, green leaders are essential. Green leaders tend to prefer working alone, typically do not express emotion, and may be oblivious to emotional responses by others.

Gold

Gold leaders are detail-oriented rule followers and enjoy making lists and checking things off. Their strengths are responsibility, organization, decisiveness, dependability, and consideration. They value tradition, accuracy, responsibility, and authority. They may frustrate others by not taking the time to listen. Gold leaders are the backbone of an organization and are essential when setting up policy and procedures or starting a new project. Gold leaders are valuable and dependable employees, and they desire structure in the workplace. Gold leaders often take on too much responsibility.

True Colors

The True Colors personality assessment was created by Don Lawry in 1978. A version of the test can be purchased by individuals or corporations at www.truecolorsintl.com. The test consists of 10 questions, and the answers are grouped into four color options that correspond with a personality type: green (e.g., analytical), gold (e.g., organized), orange (e.g., flexible), and blue (e.g., compassionate) (see Figure 1).

At the conclusion of the test, a person is given a score for each color option, and characteristics related to each type can be more or less prominent depending on the score within each color. People primarily express themselves with characteristics related to their primary and secondary colors. However, capabilities exist in the tertiary and palest colors as well. To become a better communicator and leader, people need to learn to demonstrate value related to those weakest colors. Understanding one's own strengths and what values may lie in those weakest colors is essential before optimizing those traits in others.

Regardless of primary color, each person can be a leader. Remember: Being a leader does not always correspond with a position. All levels of employees can be leaders by tapping

FIGURE 1. TRUE COLORS EXAMPLE

Consider the following statements related to each leadership color. Choose the one that most corresponds to you.

- I am an abstract thinker, I live in a world of ideas, and I enjoy thinking and approach situations logically.
- I am detail oriented and a rule follower, and I make lists and love to check things off.
- I tend to jump between ideas quickly, love adventure, and challenge the rules, and I thrive on change.
- I passionately care about others' feelings and want them to care about mine, and I prioritize the relationships I have.

The first bullet corresponds to green, the second corresponds to gold, the third corresponds to orange, and the fourth corresponds to blue.

Orange

Orange leaders tend to jump between ideas quickly, love adventure, challenge the rules, and thrive on change. Their strengths are acceptability, flexibility, being realistic, being situational, and spontaneity. They value action, excitement, challenge, variety, and adventure. Orange leaders may frustrate others by lack of follow-through. When organizations go through significant change, orange leaders can be champions in getting others on board. The strength of orange leaders is skillfulness, and they must feel free to do as they wish. Orange leaders thrive on change and tend to challenge the status quo.

Blue

Blue leaders care about others' feelings and want others to care about their feelings, and they prioritize relationships. Their strengths are compassion, consideration, dependability, harmony, and being people-oriented. They value harmony, cooperation, approval, and relationships. They may frustrate others by taking an emotional stance and being

Knowing how to identify with each of the colors and what the strengths and weaknesses of each color are can help create an atmosphere of acceptance and appreciation.

too anxious to please. Blue leaders are necessary to generate enthusiasm and embrace inclusivity. Customer service relies on blue leaders to ensure that needs are met. Blue leaders tend to be relationship-oriented and prefer to work in an interactive environment with personal touches. They often have guilt or shame when they do not live up to expectations. Many nurses identify as primarily blue.

Conclusion

Knowing how to identify with each of these colors and what the strengths and weaknesses of each color are

can help create an atmosphere of acceptance and appreciation (see Figure 2). Some teams that use the True Colors assessment wear their primary and secondary colors as stickers on their name badges to help each other to communicate effectively and learn about one another's leadership styles. Creating a culture of acceptance of different personalities fosters self-confidence and self-esteem, and those values are intrinsic to a team. When employees feel valued, it has a positive effect on behavior. This means higher satisfaction and less turnover, which is valuable to an organization. When organizations function with a variety of personalities, it removes silos and lends itself to creativity and innovation, which are necessary for change, growth, and sustainability.

FIGURE 2. MANAGING DIFFERENT COLORS

Green

- Ensure that green personalities see themselves as competent, understand why things are happening, and have some control or are in charge of certain situations.

Gold

- Realize that gold personalities feel compelled to take charge but do not want to depend on anyone. Outline expectations in great detail.

Orange

- Understand that orange personalities may be difficult to manage because they believe in rules and believe that rules should be challenged.

Blue

- Regularly and specifically reassure blue personalities that what they bring to the team is valuable and that they are cared for as people.

This article is a summary of a session from the 44th Annual ONS Congress Career Fair in Anaheim, CA. **Marcy Adams, DBA, MBA, RN, BHA**, presented "Color by Number Leadership: Managing the Diversity of Our Personalities." Adams is the deputy director of Oncology ONE at Bayer Pharmaceuticals. For more information about this session, email Adams at marcia.adams@bayer.com.

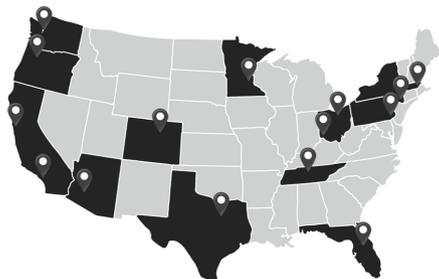
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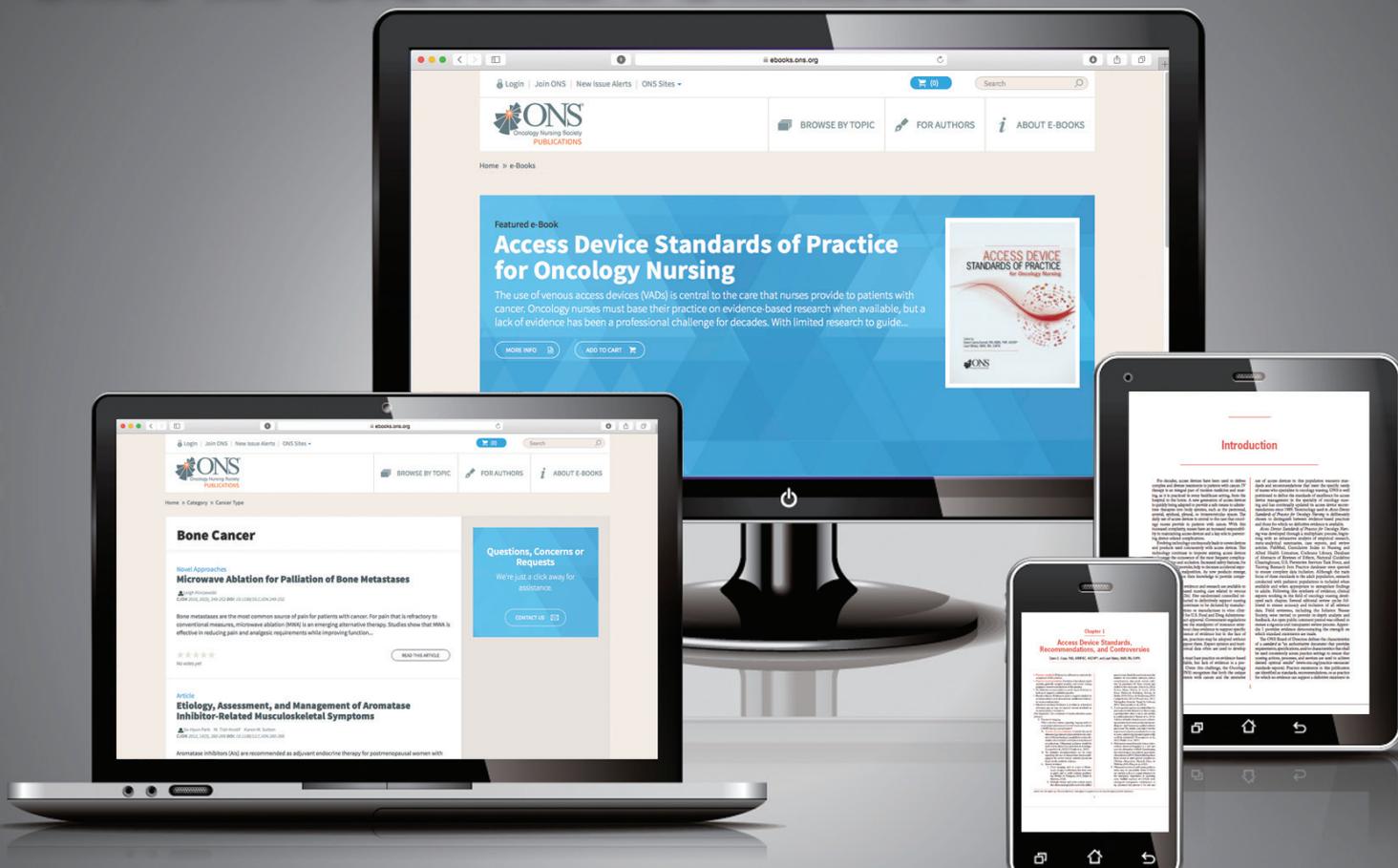
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