

# Socializing Millennials in a Baby Boomer World: The Influence of a NPD Practitioner

**Concurrent Abstract**

Whether we “blame” the Millennials for being insecure and job hopping; or the Boomers for being technology resistant, frozen to the old ways and parents of the coddled Millennials; or the complacent Xers smashed in the middle, the truth is “It is what it is!”

As NPD Practitioners, authority to make significant change is often not part of our job descriptions; however the span of our **influence on the practice environment** is nearly endless. We coach the preceptors to be role models in civility and providing feedback. We encourage the new graduate to reflect on clinical experiences and interpersonal relationships as they ride the rollercoaster of emotions for the first time. We buffer the new employee from the barrage of communications by filtering and explaining to ease their transition. We create a structure that dispels ambiguity of expectations for the new nurse.

This session will describe socializing strategies that the NPD Practitioner can thread throughout centralized orientation, unit-based preceptor orientation and transition to practice residency programs. Some of these strategies include: 1) receiving and giving feedback; 2) reflective practice exercises; 3) how to be assertive AND civil; 4) resilience with morally distressful situations; 5) interpersonal relationship skill development; and 6) collaboration and “making a difference” through EBP project work.

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## Multiple Generations in the Workplace

<p><b>Baby Boomers 1944-1964</b></p> <ul style="list-style-type: none"> <li>Strong sense of duty</li> <li>Competitive</li> <li>Career = self-worth</li> <li>Live to work</li> <li>Teamwork and process oriented</li> <li>Work long hours</li> <li>Fine with face-to face and electronic interactions</li> <li>Enjoy mentoring, committees, teamwork</li> </ul>	<p><b>Generation X 1965-1979</b></p> <ul style="list-style-type: none"> <li>Actions over words</li> <li>Independence- Self-directed/self-reliant/pragmatic</li> <li>Entrepreneurial/risk takers</li> <li>Outcomes oriented</li> <li>Work to live</li> <li>Comfortable with technology</li> <li>Work well independently, avoid micromanagement</li> <li>Direct communication</li> <li>Offer the reasons behind requests</li> </ul>
<p><b>Millennials 1980-1995</b></p> <ul style="list-style-type: none"> <li>Strong social relationships</li> <li>Want to know “Why”</li> <li>Expect instant feedback and results</li> <li>Work smarter, not harder</li> <li>Teamwork and outcomes oriented</li> <li>Technologically savvy/dependent</li> <li>Expect electronic tools and communication</li> <li>Mentoring/constant feedback</li> <li>Teach workplace interpersonal skills</li> <li>Simplify teaching materials</li> <li>Thrive in teams</li> </ul>	<p><b>Gen Z 1996-2015</b></p> <ul style="list-style-type: none"> <li>Never known life without Internet/smartphones/social media</li> <li>Visual communicators/learners</li> <li>Independent/entrepreneurial/pragmatic</li> <li>Aware of personal brand</li> <li>Technologically savvy/dependent</li> <li>Social media normal way to communicate</li> <li>Teamwork and outcomes oriented</li> <li>Expect electronic tools and communication</li> <li>Communication- Concise/direct/personalized</li> <li>Interactive and visual</li> <li>Teach by demonstration and practice</li> <li>Thrive in teams</li> </ul>

**Taken from**

Christensen, S, Wilson, B, & Edelman, L, (2018). Can I relate? A review & guide for nurse managers in leading generations. *J Nurs Manag.*; 26:689–695.

**Purposes of Socialization:**

Shape the way staff view teamwork and work habits  
 Engage employees- helping them belong to the team  
 Provide employees with skills to interact and communicate with the team  
 Build confidence & competence through experiences with patients & the team  
 Retention- Interprofessional

Strategies to thread socialization throughout practice

- 1) receiving and giving feedback;
- 2) reflective practice exercises;
- 3) how to be assertive AND civil;
- 4) resilience with morally distressful situations;
- 5) interpersonal relationship skill development; and
- 6) collaboration and “making a difference” through EBP project work

**NPD Role Responsibility**  
**Competency Management**



- Performance Merit
- Skills Validation
- Annual Education Days
- Debrief sessions

**NPD Role Responsibility**  
**Education**




- Pebble Effect
- Developing annual curriculum and ongoing education
- Bulletin board Education & Gaming
- Journal Club

**NPD Role Responsibility**  
**Role Development**




- Residency Programs
- Unit roles and responsibilities- committee, precepting
- Certification

NPD Role Responsibility  
**Collaborative Partnerships**



- Zero Hero/Treat me with Respect
- Pebble Effect
- Residency Programs
- Resilience Fair-Tea for the Soul

NPD Role Responsibility  
**Research / EBP / QI**



- Residency Programs
- Critical Care Quality Review Committee(CCQRC)
- Unit/Hospital/National/Worldwide research trials

NPD Role Responsibility  
**Orientation/ OnBoarding**



- Welcoming New Staff
- Orientation Process
- Touch base with Orientee/Preceptor
- Celebration

ANPD Practice Model taken from:  
 Rheingans, J. (2016). The Nursing Professional Development Practice Model. *Journal for Nurses in Professional Development*, 32(5), 278–281.

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