THIRD EDITION



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Foreword

The third edition of *Leadership for Evidence-Based Innovation in Nursing and Health Professions* recognizes and embraces health care from a postpandemic perspective. The foundational philosophy of this textbook, *the recognition and demonstration of the continuum of innovation to evidence for safe practice and quality care*, has never been more important. Driving innovation at this time is the realization that much of what has been in place in health care is nonsustainable and now requires significant levels of new thought and reconfiguration.

The authors recognize and describe numerous lessons learned during the pandemic from their unique perspectives. These scholars demonstrate that the historical evidence for many current practices is now inadequate, and such practices are no longer sustainable. In so many ways, long-held dogma has now been dispelled and replaced with new evidence reinforcing the need for a truly health-driven enterprise. Specifically, the significance of advancing the health of individuals and ensuring the health of the community now needs to be the driver of service and reinforced as the prevailing core of all health-related activities.

The lack of adequate resources, the paucity of systems support, and the failure of effective leadership challenged clinical nurses and their colleagues to develop unplanned innovations in nursing structures, practices, and processes to address serious gaps in health care during the pandemic. More importantly, the untapped potential of professional nursing was surprisingly unleashed, accelerating nursing innovations and transformation and providing strong evidence for new approaches to safe and quality patient care.

Leadership for Evidence-Based Innovation in Nursing and Health Professions delivers a relevant, critical resource for all nurses to engage in the validation of evidence-based care and new thinking related to the development and application of innovative health care, closing the historical and still-existing gap along the evidence-innovation continuum. Health care will not be the same, nor should it.

Kathy Malloch Tim Porter-O'Grady

Walkthrough

New to the Third Edition

The exponential growth of available research, advancing healthcare and information technology, and the pressing need to prepare current and future leaders to navigate the dynamic contexts of health care were key drivers in the development of the *Third Edition* of this text. There are major revisions to reflect the changes and innovations in the healthcare system.

Section Dividers: Each of the three sections is marked clearly with an opener page to make it easier to navigate through the text and find what you are looking for.



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xviii Walkthrough



Reformatting of Chapters 1 and

16, respectively, as an *introduction* to the book and concepts and a provocative *conclusion* to the text with a focus on a futuristic view of what healthcare systems will become.

Chapter Objectives: Every chapter opens with a list of *Chapter Objectives* that allow readers to review the important concepts they will encounter in the chapter.

Case Examples: These show how concepts might present in the real world and enhance critical thinking skills. They provide insights to help leaders to build capacity for transformation.



Teaching and Learning in the Technology Tsunami 279 WEB 3.0 \$ 9 P % \$ 10 B * Semantic Metaverse 3D Connectivity Blockchain Digital Micropayme web graphics (Ubiquity) identities Figure 11-5 Web 3.0 spectrum. Table 11-6 2023 Trends in Health Care and Education Education Trends Artificial intelligence Artificial intelligence and big data Artificial intelligence Personalized health care Personalized learning | Immersive technologies Wearable medical devices Gamification Likewise, advances in technology and the ubiquity of technology in our every-day lives are worthy of consideration in terms of how they are transforming how we usy lives are wontiny or consistentation interins on two times are transforming now we think about teaching and learning in musting. How we educate and to what end are shifting. Table 11-6 highlights the top trends emerging in 2023 across the healthcare system (including docutation). How we we as musting educations prepared (or not) to teach future musting professionals with this technology and for future practice with 12?

The knowledge era has presented us with a new dynamic between information of learning, and we must proserome looks add earning most ones whether the professionals with this technology.

Tables, Boxes, and Figures: The chapters include tables, boxes, and figures to illustrate and substantiate the topics being discussed. They make difficult material more manageable and

easily understood.

and learning, and we must overcome long-held assumptions about how we think and learning, and we must overcome long-held assumptions about how we think about information, knowledge, and learning. The life span of relevant knowledge has greatly diminished. For instance, prior to the COVID-19 pandemic, futurists estimated that the volume of healthcare knowledge was doubling every for 80 years. They now estimate it to be doubling every 80 syst and accelerating. The shortening half-life of information further suggests that focusing on covering content is less useful than using content to learn how to learn. This also means that musing edication programs must prepare students to engage in lifeting learning and ongoing catcing programs must prepare students to engage in lifeting learning and ongoing professional development to remain competent.

protessional development to remain competent.

Knowledge is no longer a commodity, but it has become an application to be accessed and used as needed and purged when no longer useful (Brown, 2005). Brown used the term navigationism to frame how we might educate students to thrive in the knowledge economy. He described information navigation as a new

rsing Education's Perfect Storm: Will It Sink Our Titanic? Chapter 11 N

Box 11-1 Resources for Creating More Inclusive Environments

- The Micropedia of Microaggressions is a comprehensive tool to learn about the different microaggressions people experience and unlearn those behaviors to create more inclusive environments. [https://www.docs.com/docs.co

by the CASN's antices on nursing Education in Casada was developed by the CASN's antices on nursing selectation verifiering roup, which fectuated faculty members, students, and individuals working in health care from across Canada. Members engaged in critical conversations essential to developing these recommendations for schools of nursing. Although this is a Casadian document, the recommendations and strategies will be helpful to all nursing schools seeking direction to implement antiracist practices. https://www.casn.ca/wp-content/ugloads/1923/DS/CASN-Promoting-Anti-Racism-in-Nursing -Education-in-Canada_FINAL.pdf CASN Promoting Anti-Racism in Nursing Education in Canada was developed

Teaching and Learning in the **Technology Tsunami**

Since the 1990s, we have been living in the knowledge era. In nursing practice Since the 1990s, we have been niving in the sitrowedge eral, into intusing practice and education, we have experienced an unprecedented explosion in the generation and availability of research and information in general. The exponential growth of knowledge and the bulgations access to in two been enabled by amazing advancements in technology. Access to an ocean of information is literally as our fingerity hough our mobile deviews (e.g., drugg guides, clinical practice guidelines, clinical decision support took, and artificial intelligence (AH) enables deserth engine).

The control of pocket. Knowledge is accelerating at an exponential rate, and the rise of Web 3.0 pocket. Knowledge is accelerating at an exponential rate, and the rise of Web 30 (see Figure 11-3) technologies is transforming how we intenert with knowledge, technology, and each other. Web 2.0 technologies focus on reading and writing comer, whereas Web 3.0 focuses on creating content (reaming web). Web 3.0 utilizes technology to facilitate information interchange among users while simultaneously changing open content poorle. Web 3.0 combines data with increasing trust enabled by such technologies as blockchain and the use of a decentralized structure (Wah, D. 2022. Although at present (2023), we are experiencing Web 2.5 with elements of both 2.0 and emerging 3.0 functionality, it is worth considering what this means for the future of how we engage in navigating and utilizing the web.

XX Walkthrough

organizations operate, yet we still have legacy systems, legacy, leaders, and very slow change. Health care must undergo metamorphosis now in order to care for our aging population and stop the destruction of our professions resulting from burnout and broken systems. Will you pick up the call?

References

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Albert, N. M., Pappas, S., Potters Corialy, T., & Malloch, K. (2020). Quantum leadership: Creating austinated value in both of residence of control and control of the control

References: References provide a list of additional resources to help readers gain a deeper understanding of the material. New references have been included to reflect the current research in the field.

Instructor Resources

- NEW! Slides in PowerPoint format
- Instructor Manual
- **NEW!** Podcasts

Student Resources

NEW! Podcasts included the Navigate eBook

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