

# Registered psychiatric nurse competencies



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## Learning Plan: RPN Entry-Level Competencies

## The Body of Knowledge and Application

## Strengths:

I have experience working with older adults, and I am dedicated to serving them because I wanted to touch their lives in my own special way. In dealing with seniors, it is essential to give them attention, respect their preferences, and be aware that they are also capable of sharing information that can help in their plan of care and well-being. 2. 16. 4 Cooperate with the client to determine the strengths and objectives for health (BCCNP, 2014, p. 13).

I enjoy the challenge of looking after Dementia and Alzheimer's people because through this it made me realize that I should be aware of my verbal and non-verbal cues. Our actions will demonstrate our genuine intentions, and it is essential for us to establish a good trusting relationship. 2. 13 Show interpersonal communication skills curative use of self and therapeutic relationships (BCCNP, 2014, p. 12).

I can perform basic nursing skills in helping clients in their activities of daily living such as dressing, feeding, and bathing. I also have experience in transferring a client safely in their bed or their wheelchair (Potter & Perry, 2014, pp. 1230-1240). 2. 3 Exhibit nursing theories: conceptual nursing models, nursing skills, interventions and differences in nursing practice (BCCNP, 2014, p. 11).

I have learned from our clinical procedures 1 and skills lab on how we are going to

assess the client's pain with the use of pain scale 0 to 10 and also pain management (Potter & Perry, 2014, pp. 1017-1047). Through this, I will know if a patient is in pain or discomfort through their facial expressions and through the client itself. 2. 17. 2 Identify clinical indicators that may harm the well-being of the client, such as any discomfort (BCCNP, 2014, p. 13).

I am open to new ideas and further my knowledge in conducting a thorough assessment of the whole being of the client and provide a good quality of care. 2. 16. 1 Conduct a comprehensive evaluation which includes the patient's physical, mental health, social, spiritual, developmental and cultural status (BCCNP, 2014, p. 12).

#### Learning Needs

2. 16. 1 Specify a framework based on evidence relevant to the type of evaluation required (BCCNP, 2014, p. 12).

2. 16. 2 Conduct a comprehensive assessment which includes the patient's physical, mental health, social, spiritual, developmental and cultural status (BCCNP, 2014, p. 12).

2. 16. 3 Conduct a thorough psychiatric assessment like their mental status or history of violence (BCCNP, 2014, p. 13).

I want to enhance more my skills in performing a complete and accurate nursing assessment. In our upcoming clinical placement, we are going to deal with seniors. I want to gather detailed information about the physical, psychological, psychosocial and their functional aspect. During our skills lab, we are taught about the quick prior assessment or initial assessment which includes the ABC (airway, breathing, circulation) check, pain assessment, and management, vital signs taking. I want to b

able to perform a thorough health assessment, including their functional abilities like their activities of daily living and also their behavioural aspect. I want to be knowledgeable in all types of nursing assessment even with wound assessment and care. I think that I should also work on my communication techniques so that I can be confident in interacting with my clients. I will carefully read this related article "Comprehensive nursing assessment in the care of older people." by Armstrong and Mitchell (2008). It will be relevant in our first clinical placement.

### Learning Goals & Objectives

By the third week of February 2019, I want to be able to come up with strategies in handling clients with challenging behaviour like aggressiveness. I should have enough ideas and learnings about the cause of clients' aggression so that I can help in reducing their chance of being aggressive. Also, by reading related articles and watching videos at least 1 hour a day will give me ideas on the best approach in managing their behaviour.

2. 20. 1 Get involved in minimizing aggressive behaviour (BCCNP, 2014, p. 14).

I want to demonstrate competency in assessing wounds and performing wound care by March 2019.

2. 19. 2 Carry out necessary nursing interventions to deal with physical circumstances which includes draining tubes, skin and wound management (BCCNP, 2014, p. 13).

I want to develop more my skills in performing a thorough assessment and use a tool that will guide me in evaluating the physical and psychological status of clients, and will complete this by March 2019.

2. 16. 2 Conduct a comprehensive evaluation which includes the patients physical, mental health, social, spiritual, developmental and cultural status (BCCNP, 2014, p. 12).

### Learning Plan

I will join any training or online learning modules that are available to help me in evaluating the client's behaviour and reduce the chance of getting aggressive and be able to provide safe client care. I will also spend some time reading this article entitled " The challenging behaviour scale (CBS): Development of a scale for staff caring for older people in residential and nursing homes." by Moniz-Cook et al., (2001).

I will keep on reading my Canadian Fundamentals of Nursing book by Potter & Perry (2014) about the necessary information on conducting a safe nursing procedure as well as wound assessment and proper wound dressing (pp. 1250-1299). Reading this will greatly help me in our first clinical practice.

I will apply all the theories and skills that I have learned from our skills lab. Mainly, I would like to conduct a comprehensive head-to-toe assessment to my future clients. I will check the ABC (Airway, Breathing, Circulation) of the client and if there is any complaint of pain, I will assess and manage the pain (Potter & Perry, 2014, pp. 1017-1047). I will also check the client's vital signs and master the normal values of the following: temperature- 36°C-38°C, pulse- 60-100 bpm, respiration- 12-20 breaths per minute and blood pressure- 120/80-139/89 mmHg (Potter & Perry, 2014, p. 490).

I will ask my instructor to observe me when conducting the head-to-toe assessment to see if I was able to apprehend the critical information. I will ask her for feedbacks or if she has other techniques that she can suggest or share. I will also ask my peers for

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feedback so that I will have an idea of what certain areas I need to improve (BCCNP, 2018).

I will search for evidence-based articles regarding the methods on how to efficiently communicate and minimize patient's aggressive behaviours and prevent further injuries for all the care providers. I will thoroughly read this related article by Meehan et al., (2006), entitled "Reducing aggressive behaviour and staff injuries: A multi-strategy approach."

### Outcome Evaluation

After our skills lab, I was given a chance to practice some of the nursing skills. We were taught and were able to practice wound care by properly changing dressing as well as closely monitoring for discharge, odor and the size of the wound. Also, we were given clinical case scenarios to test our proficiency in problem-solving and conducting a comprehensive head to toe assessment. On our test day, we were given a situation of a man who has a history of aggression and was suffering from a stroke which affected his speech and caused weakness on the left side of his body. When it was my turn to perform, I started with proper hand hygiene and do the safety checks which is one of the priorities in nursing care (Potter & Perry, 2014). One of the critical nursing procedures that I did next is quick prior assessment which includes the ABC (airway, breathing, circulation). Moreover, I successfully administered a thorough pain assessment and proper vital signs taking (Potter & Perry, 2014). I was able to answer the questions asked by my instructor like enumerating strategies on how to best deal with aggressive clients such as giving them 15 minutes to calm down, know where the exits are and avoid getting too close to them to prevent harm; and I was able to pass the test with flying colors. I am confident that my learnings from the skills lab will

contribute to the completion of our upcoming older adult clinical placement. Prior to our upcoming clinical practice, I have done some more research and readings that help me deal with clients who have a tendency to be aggressive. I found this educational tool from an article by Moniz-Cook et al., (2001) entitled, The challenging behaviour scale (CBS): Development of a scale for staff caring for older people in residential and nursing homes. Regarding this, a staff member, usually a key worker who knows the resident can complete CBS (Moniz-Cook et al., 2001). Another article Meehan et al., (2006), entitled, Reducing aggressive behaviour and staff injuries: A multi-strategy approach, which will guide me in keeping my clients' safe as well as the safety of the care providers. I find these articles beneficial for a future RPN like me because they serve as a guide in assessing a client who has the potential to commit harm to self and others. I have spent time understanding these educational tools as I know that I can gain knowledge from them so that if I encounter aggressive patients in the future, I will be able to utilize these tools. I am glad that we had an instructor who taught us some techniques on how to maintain the quality of care and client safety despite their negative behaviors. Furthermore, I was able to display a therapeutic approach that is why I manage to make clients open up and share whatever they are feeling.

I am glad that I can relate this experience to my previous practice as a care aide as I have dealt with people suffering from Dementia and Alzheimer's. Some clients do not want their care providers to force them to do tasks; they get irritated if they are being asked with a lot of questions. The best approach that I used for clients who are aggressive either verbally or physically is to leave them and give them time to calm themselves and come back when they are relaxed. I found out that older adults still want to keep their independence, as care providers we should respect their choice a

preference.

## References

- Armstrong, J., & Mitchell, Elizabeth, MSc Adv Nursing, B. Sc(Hons), R. G. (2008). Comprehensive nursing assessment in the care of older people. *Nursing Older People (through 2013)*, 20 (1), 36-40. Retrieved from <https://search.proquest.com/docview/218610317?accountid=195685>
- British Columbia College of Nursing Professionals. (2018b). Peer Feedback: Learning from Each Other. Retrieved from [https://www.bccnp.ca/PracticeSupport/Documents/RPN\\_peerfeedback.pdf](https://www.bccnp.ca/PracticeSupport/Documents/RPN_peerfeedback.pdf)
- British Columbia College of Nursing Professionals. (2014). *Registered Psychiatric Nurse Entry-Level Competencies*. Retrieved from: [https://www.bccnp.ca/becoming\\_a\\_nurse/Documents/RPN\\_entry\\_level\\_competencies.pdf](https://www.bccnp.ca/becoming_a_nurse/Documents/RPN_entry_level_competencies.pdf)
- Meehan, T., Fjeldsoe, K., Stedman, T., & Duraiappah, V. (2006). Reducing aggressive behaviour and staff injuries: A multi-strategy approach. *Australian Health Review*, 30 (2), 203-10. Retrieved from <https://search.proquest.com/docview/231737852?accountid=195685>
- Moniz-Cook, E., Woods, R., Gardiner, E., Silver, M., & Agar, S. (2001). The challenging behaviour scale (CBS): Development of a scale for staff caring for older people in residential and nursing homes. *The British Journal of Clinical Psychology*, 40 , 309-22. Retrieved from <https://search.proquest.com/docview/218637714?accountid=195685>
- Potter, P. A., & Perry, A. G. (2014). *Canadian Fundamentals of Nursing* (J. C. Kerr & M. J. Wood, Eds.). Toronto: Mosby Elsevier.