

# Responsibilities of the graduate nurse



Privacy and confidentiality are important aspects of the nursing profession. It is important for the Graduate Nurse to understand and respect the need for patient confidentiality. As healthcare professionals, the nurse's connection to their patients and colleagues depends on it. Nurses have the ethical responsibility to safeguard the information they obtain whilst caring for a patient. When patients entrust their healthcare and personal information to a nurse, they expect it to be kept confidential (Erickson & Millar 2005, p. 1).

In most situations, nurses must keep information given to them by patients confidential. However, they are required to report information they receive if they have serious concerns about the clients or someone else's safety. It is also important to realise that confidentiality is not to be broken unless it is absolutely necessary. It is not something that nurses take lightly. They want to do what is best for the patient and a decision to break confidentiality only happens after a lot of thought, and should be done in consultation with the relevant supervisor. The nurse should only tell those who absolutely need to know, and this is usually a very small number of professional or relevant authorised people.

In all areas of healthcare there will be many personal things that as a nurse we will learn about the people that they care for. A nurse will be privy to information regarding a person health, family, social history, personal needs and financial affairs. All of this information is to be regarded as confidential unless consent for the disclosure of such information is given by the patient or as stated earlier the nurse deems that there is a danger to the individual or to someone else. Nurses are only permitted to talk about these things at our workplace with other healthcare professionals who care for the same

patient. It is also important to note that when nurses talk about a patient's personal details that it is done in a respectful way.

All individuals have the right to have their details and personal information kept private. There are laws in Australia which state what nurses can and cannot do with confidential information. Discussing confidential information of a patient in your care to other people outside of the workplace may lead to legal action. When a nurse discloses personal information about their patient they are breaking their duty of care to that patient. Confidentiality is seen as an obligation to the provider of information whereas privacy is an obligation to the source of the information. Confidentiality and privacy require that all parties must ensure that information is restricted to those who genuinely need to know, and that those people should only be told as much as they need to know and no more. For example, a healthcare professional may need to know of the medical condition so that they can provide advice, but not of the identities of the patients involved.

Every person has the right to equal recognition and protection before the law. Everyone is entitled to equal and effective protection against discrimination, and to enjoy human rights without discrimination. This applies regardless of a person's age, gender, race, disability, religion, marital status and a range of other personal characteristics.

Scenario- An emergency medicine technician (EMT) responded to an emergency call regarding a possible overdose. On arrival, the patient was found unresponsive and transported to the hospital. The EMT later told a friend that she had helped transport the patient to the hospital for treatment

of a possible overdose. The EMT's friend told another nurse about the medical treatment. The EMT then learned that her friend worked with the patient (a nurse at the other hospital). The patient claimed that the EMT had defamed her and violated her privacy by publicizing information regarding her medical condition and making untrue statements including that she had attempted suicide. The patient was awarded \$3, 000 in compensatory damages and more than \$30, 000 in legal fees.

Casual sharing of personal and health information regarding a nurse is a failure to respect them as a person. Nurses value the keeping of confidential information between friends, colleagues and other authorised individuals. All nurses should expect that our relationships with one another will allow us to trust that particular private information will not be exposed. Exposure of confidential information can lead to low self-esteem if made public. Everyone has secrets that they don't want to be made public. Nurses need the benefit of confidentiality when seeking health advice or assistance. In order to support confidentiality of nurses private information, there needs to be respect for an individual's autonomy and their right to privacy, the promise of information remaining confidential and the benefit that the security of confidentiality offers us.

Graduate nurses have the right to work in an environment that supports and facilitates ethical practice in accordance with the Code of Ethics for Nurses in Australia (2008) and its interpretive statements. One provision of the code is 'nurse's value to management of information'. This statement refers to the management and communication of health information. Graduate nurses are entitled to the same moral, professional and legal safeguards as any other

person in regards to their personal information. Personal information is any identifying information about a person that is verbal, written or electronic form. This information can relate to physical or mental health, including family health history. (McGowan 2012, p. 61).

Factors that may influence confidential and private communication:

Communication is the transfer of information between or among people. The practice of nursing utilizes constant communication between the nurse and the patient, the patient's family, the nurse's co-workers, supervisors, and many others.

Professional relationships

Graduate Nurses are required to care for and safeguard the public. They must practice autonomously and be responsible and accountable for safe, compassionate, person-centred, evidenced-based nursing that respects and maintains dignity and human rights. They must show professionalism and integrity and work within recognised professional, ethical and legal frameworks. They must work alongside other healthcare professionals, carers and families including the community. All nurses must use excellent communication and interpersonal skills. Their communication must always be safe, effective, compassionate and respectful. They must communicate effectively using a wide range of strategies and interventions including communication technologies. All nurses must practice autonomously, compassionately, skilfully and safely and must maintain dignity and promote health and wellbeing. They must assess and meet the full range of essential

physical and mental health needs of people of all aged who come into their care.

### Self-disclosure

In nursing there are many boundaries that one must not cross. Self-disclosure is the easiest and most often crossed by nurses today. Self-disclosure refers to the nurse sharing personal information, experiences, feelings, ideas, thoughts and views with their patient. It can be comforting to the patient because it shows that the nurse has an understanding of the patient's current situation and reinforces that their experience is not unique. Self-disclosure should only be used if it is deemed as helpful to the patient, aimed to benefit the patient and the focus will not remain on the nurse after self-disclosure has occurred. Self-disclosure can be used to promote and encourage patients to express fears, feelings and experiences. It also shows the patient that the nurse trusts them with personal information, making them feel more comfortable therefore reciprocating that trust.

In deliberate self-disclosure the nurse intentionally tells the patient information about themselves. The nurse can tell personal experiences and their personal history or they can intentionally tell their feeling about the patient or the situation. This disclosure gives the patient a glimpse of the nurse's life and likes. The patient did not ask to see these things; they were the nurse's decision. Also information that the nurse posts online are another form of deliberate self-disclosure.

Scenario- You are the nurse on a surgical unit preparing a woman who is undergoing a mastectomy. She is very upset and says that she feels alone.

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She is afraid she will no longer be attractive and she may even die. You are the same age as the patient and have also had a mastectomy. You are now healthy and work full time. You remember the challenges you faced when you were diagnosed and wonder if it would be helpful to share your experience with your patient.

It is generally not appropriate to disclose personal information to patients. However, after careful consideration it may be appropriate for you to disclose a limited amount of information to the patient. You would firstly acknowledge the patient's fears and then explore her grief and focus on her needs. It may then become apparent that it is appropriate to disclose a limited amount of information about your past experiences. The disclosure of personal information provides information, support and hope for the patient. Eg./ in relation to the patient feeling alone, the nurse may refer to a time when she also felt alone. The nurse would then offer information regarding a support group that helped the nurse and other patients in the same situation.

Unavoidable self-disclosure is another type of disclosure that a nurse does not have much control over. Pregnancy is something that is disclosed at a certain point, whether the nurse wants to disclose it or not. A physical disability is also hard to hide whether it is a limp or a brace, as these are things that can be seen. A wedding ring or lack of ring show a patient if the nurse may be married. These forms of personal expression are outward expressions that are left to the patient to interpret. Another unavoidable self-disclosure is if a patient sees the nurse at an outside establishment such as a

restaurant or the mall. This inadvertent disclosure sheds light on the nurse's personal life and choices.

Accidental self-disclosure occurs when the nurse discloses something by mistake. A nurse's facial expression or subtle response to a patient is a good example of accidental self-disclosure. Emotions can be hard to control even for the most experienced clinician.

Positive uses of nurse self-disclosure occur when the nurse uses the disclosure therapeutically. Always think about what you are going to use therapeutically and use good judgment at all times. A nurse talking about healthy lifestyle habits such as diet and exercise that has worked for them is a positive disclosure. The negatives of nurse self-disclosure is the fact that there is too much self-disclosure by the nurse. Therefore the roles can feel reversed and the patient can feel like they must comfort them. Nurse self-disclosure shows the patient and their family that the nurse is unable act in a professional way.

### Professional boundaries

One thing that most nurses encounter daily is a patient asking them a personal question. Whether it is curiosity or uncomfortable silence, patients ask questions. Many nurses find it hard to redirect or reflect these questions, and end up answering them, especially if it is just casual conversation. Nurses need to practice situations like this so they know how to give a patient centered answer. It is the nurses duty and in the patients best interest to divert all conversation to the patient for a successful nurse patient relationship. Patients often ask these harmless questions not realizing that it

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is not in the best interest for them. Sometimes not answering the questions might make the nurse seem evasive and closed off. Nurses need to practice so their answers to the questions do not offend the patient that is making casual conversation

### Confidentiality

When thinking about privacy and confidentially, it is important that the nurse questions themselves “ what would I want if it was my personal and health information?’

### Scenarios

1. One of your nurse colleagues is expecting and it’s been decided that you will organize the baby shower. Not having access to co-workers addresses, you only look in the demographics portion of the electronic medical record to obtain this information. You do not look at any clinical information. Would this be OK? Answer: No, even demographic (address, phone number, etc) information is considered protected health information under the privacy regulations and should not be accessed without approval of the patient.
2. You have a very good friend who is a nurse practitioner and is away from the hospital on vacation. While she is out, her breast biopsy results come back. Because she had told you she was having this procedure, you felt it would be the right thing to do out of concern to look up her results and call her with this information. Is this appropriate? Answer: No, just because a colleague chooses to disclose certain portions of her health information with you, it does not mean

you have the right to continue and follow up on any related results or findings.