No lift policy



The given scenario has provided a clear perspective to the correct attitude and compliance ability of the nurses to the 'no lift' policy of The Area ofHealthServices. The complaint has a certain gravity of issue to address but analyzing the situation further may lead to a conclusive approach whether the nurses have actually done the right thing or not. The 'no lift' policy was designed to prevent and reduce nurses' injuries when lifting or moving patients (Morieson, 2000).

As stated in the complaint of the relative, Mrs. McDonald was forced to lift herself up in bed. This phrase may lead to a conclusion that the patient is actually capable of doing the act without any assistance from thenursingstaff. She is at least aware of her capability to do a minimal procedure by herself. Although the core service for a nurse is to provide assistance, there are some restrictions that are implemented to benefit both the staff and the patient. Apparently, there is a motion on the nursing profession that provides a chance for the patients to be more independent.

This will eventually permit the individual to carry his tasks for self fulfillment. The complaint also stated that the two nurses were negligent of the patient. This may seem to be the case for the relative but the staff actually had the good attitude of complying with the regulations of the 'no lift' policy. They have provided a rather complementary act by protecting their own health as well as giving opportunities for Mrs. McDonald to eventually start rehabilitating herself.

As a matter of fact, if they had neglected the 'no lift' policy just to satisfy the relative's impressions, they might have been subject to a very high risk of injury. This is one good example on how competent a nurse can be. A professional acts in accordance with own competency level and recognized standards of enrolled nursing practice (ANMC).

There is another consideration that should be realized regarding the nurses' manner in the situation. They have attempted to assist Mrs. McDonald in the most effective way by helping her climb up in bed without lifting her. The patient was able to receive sustainable assistance by guiding her body and gently holding her up to the correct position. This somehow shows that the nurses were still aware what was happening and that made them consider implementing the correct nursing practice enveloped in the nursing practice policy.

In a bigger picture, the nurses did the most appropriate approach by not lifting Mrs. McDonald. They were just following a simple rule for the benefit of both parties involved, the patient and themselves. However, the submission of a complaint could have been avoided if there was a complete transparentcommunication between the nurse and the relative.

As stated in the nurse code of ethics, the nurse has aresponsibility inform people about the nursing care that is available to them, and people are entitled morally to accept or reject such care (ANMC, 1993). In this case, it would have been ideal to inform the relative about the 'no lift' policy for mutual understanding. Moreover, the nurses should have at least questioned Mrs. McDonald if she actually is capable to lift herself

independently. This affirmation may have provided a different perception on the side of the relative since it is the patient's own judgment about her

capability that is of great importance. The complete cooperation of Mrs.

McDonald and the nurses should have been the most effective factor to avoid this kind of complaint scenario.

References:

- ANMC. 1993. Code of Ethics for Nurses in Australia. Australian Nursing and Midwifery Council. Retrieved May 18, 2007 from http://www.anmc. org. au/docs/ANMC Professional Conduct. pdf.
- 2. ANMC. National Competency Standards for the Enrolled Nurse.
 Australian Nursing and Midwifery Council. Retrieved May 18, 2007 from http://www.cshisc.com.au/docs/upload/ANMC%20competencies
 %20for%20the%20Enrolled%20Nurse.pdf.
- 3. Morieson, B. 2000. Australian Nursing Federation. Retrieved May 18, 2007 from http://www.anfvic.asn.au/media releases/010622.html.