

Decision making processes in the workplace



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Decision Making Paper

The purpose of this paper is to present a scholarly and summative appraisal and an outline of how decisions are made in my current place of work and the steps adopted to arrive at the finalities with possible critical thinking actions that are taken in our profession, the nursing profession.

You readily would not find an individual or a cluster of persons without the necessity, confrontation and responsibility to make decisions. The process of decision making forms the background as far as all the nursing profession goes and all kinds of associated affiliations in the medical sphere. Similarly and as the years come by, there has been a need to focus on decisions taken by professional healthcare practitioners and this can only be achieved when adequate knowledge and a reason to back up the profession is the quest and pursuit.

Reasoning clinically in terms of patient's care is something that one cannot specifically notice or observe directly. As it stands, there is no formulated or standard instrument that is known of and that is used to assess students practising nursing and reasoning skills in our hospitals.

How decisions are made and executed

Based on the facts mentioned above, we have deemed it fit and appropriate, of all decision-making models to adopt the rational model decision making. Utilization of the rational model of decision-making comes with a lot of pros and cons but fortunately, this model seems the safest. Rational decision-making model can be described as a process that is dependent on thinking

through various possibilities and available alternatives that follow a particular sequential reasoning to arrive at the best possible result and outcome. It is a reasoning process that has to do with recognizing a problem via cues and some features that are clinical, gathering of data, analysis and proper scrutiny while producing a well-laid solution (Clack, 2016). There are, however, various kinds of rational models and invariably, decision making does not in any way refer to solution found. With the rational decision-making theory, a deductive kind of reasoning is seen as the most prominent approach in the health care sphere and has its practice as reasoning and physical deductions (Jeffords et al, 2017).

In using this model, certain steps have to be adopted and here are those steps that are approved for its utility:

- ✓ The first step is we try as much as possible to define the current situation and the medical decision that is proposed. This way, as a professional nurse, the means of arriving at the desired end is enriched and thought through properly.
- ✓ Secondly, we do all it takes through a close observation to recognize the criteria for processes involved and the desired result and outcome.
- ✓ Thirdly and very importantly, we thoroughly and decisively think through and weigh all possible solutions. In cases as this, it appears that a lot of instances can fit in and provide an outcome that is worth the task. This requires a long and voluminous cognitive work, but as long as the desired result is seen, it is adopted.

✓ We optimize the results and possible outcome of the proposed solutions as against the possibility of meeting up with the criteria. Sometimes, what we get from the solution we have proposed does not link up with criteria demanded.

✓ Thereafter, we choose the most favorable plan. This is the final seal and the determinant of how plausible and accepted the proposition would go.

However, after choosing a plan, there is a strategy that is formed and they can be explained in four stages and these plans are for the purpose of identifying cues, formulating and checking a hypothesis. Below are the stages.

✓ Cue acquisition: These are specific data and responsive stimuli that spurs the nurse along specific thinking processes via particular cues.

✓ Hypothesis generation: This concerns the development of a different and temporary diagnosis that are cue based.

✓ Interpretation of Cues: This has to do with interpreting and exploring cues for the purpose of supporting a hypothesis with data computing which in turn, helps the interpretation.

✓ Evaluation of Hypothesis: Here, those cues are evaluated and they are used with a general hypothesis. This hypothesis channels the already made decision and every other additional actions.

This model of decision making is, however not a perfect one as pronounced by various researchers. They have consistently questioned the fact that the approach is simple and doubt if its application can lead to a definite, intentional and safe diagnosis and the treatment that follows. In any case, proper and further researched and diagnosing will expose the fact that all models have their pros and cons, risks and benefits (Jettie, 2017). Despite the shortcoming which sometimes is plausible, this model of decision making presents a scholarly way and procedures in handling a critical thinking process and results in the best outcome possible (Preetha, 2018).

A recent work place decision

Some authors submit that when confronted with having to make decisions that are complex, individuals often make use of solving techniques that are based on experience with a three-tier process (Nicholas, 2018). Below are those techniques.

✓ Availability: This is when one assesses the outcome of an action based on recent happenings and presuming that same occurrence will suffice again. Many times than not, this policy and hypothesis stand true and consistent. However, it fails sometimes as past occurrences do not always determine the outcome of a present circumstance.

✓ Representativeness: This is when one compares a present representation of data and a previous representation of data and estimates the result that patient X, for instance, has the same problems as patient Y based on the comparison of data and cues. This technique also is not 100%

plausible at all times as exactness in cases and data does not necessarily infer the same problem.

✓ Anchoring and adjustment: This is when you develop a previous hypothesis based on the availability of it and adjust the present one based on an acquired or additional information.

A Case Study

Recently in our workplace, there was a case of a pregnant woman. She had previously been diagnosed as unable to bear a child via the conventional and normal means of delivery. This is as a result of a very enclosed vaginal opening and any trial might lead to severe complication or death but the patient had a first baby in a foreign country different from ours and it was via that conventional means of vaginal opening which led to a serious complication. Now, based on the previous happening, there is a likelihood that an attempt to deliver a baby through that means would not lead to a greater and more complex complication like a tear or pangs that might eventually lead to death.

Meanwhile, the first day this patient arrived at our hospital and gave a representative data of her previous experience, the first point of contact was to compare that previous data with the present data and see if the same diagnosis will be prescribed. Her previous data read that she went through the normal delivery process but as it stood, from various tests and proper examining, she could not go through the same process of delivery but to conduct an operation where she could bear a child through Caesarian Session. Based on the cues that we had, there had to be proper thinking and

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reasoning to be sure we were not wrongly applying cues or unreasonable presumptions since our collective desired outcome is the safety of the fetus and the mother.

After making a clinical standpoint and examining the total actions, we checked back to continue to review her stance with reflective judgement and the application of a critical reflection to analyze what the patient's result will be like. It was evident that the most favorable plan was to go through an operation for safety purposes when we had carefully compared both alternatives and it appeared that one was more favorable than the other. After the surgical operation, the baby was born without any form of complications whatsoever and the mother was also safe, hale and hearty. This further stretches the fact that comparing a past data of a particular issue and the present data most times than not results in a favorable result. Invariably, this was how critical thinking and comparison affected the decision and has also affected many other decisions that have been made.

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