

# [Role as a student nurse | reflection](https://assignbuster.com/role-as-a-student-nurse-reflection/)

This essay will discuss a significant event in relation to the peoples priorities identified within the Healthcare Quality Strategy. It will also discuss my role as a student nurse in relation to a patient who is receiving palliative care. The essay will demonstrate my understanding and views on reflection and the issues surrounding my practice. I have chosen Gibbs’ (1988) reflective framework as it has a structured format and six steps which follow in order starting with a description of the event and ending with an action plan for future practice. The steps are Description, Feelings, Evaluation, Analysis, Conclusion and Action Plan (Gray, 2007). Reid, (1993) describes reflection as a process of reviewing an experience of practice in order to describe, analyse, evaluate and so inform learning about practice.

In May 2010, the Scottish Government introduced the Healthcare Quality Strategy for NHS Scotland, their aim is to deliver the people’s priorities which are: firstly caring and compassionate staff and services, good communication and a clear explanation about conditions and treatments, effective teamwork between clinicians, patients and others, a clean and safe care environment, continuity of care and clinical excellence. Secondly, to bring together the patient’s priorities as well as the values of everyone working within the NHS Scotland. Thirdly, by applying these three interventions and putting them into practice improvements within priority areas of the Healthcare Quality Strategy will be met (Scottish Government, 2010, p. 6). This reflective account will identify the way in which these priorities were met in relation to my significant event and it will also confirm their importance.

## Description

Whilst on my Management Placement I met Janet, she is 65 years old and has been admitted to my ward for palliative care. She has end stage bowel cancer and is awaiting a bed at the local hospice. All names have been changed to protect her identity and maintain confidentiality (NMC, 2008). Janet’s GP has requested that she be admitted onto the ward as she is now confined to bed because of increased pain and a general deterioration of her condition (Dougan and Colquhoun, 2006).

## Feelings

Whilst carrying out my training as a student nurse, I have met a number of palliative patients and you feel helpless as to how to care for these patients. With regard to this experience my feelings are sadness, anger and helplessness. In relation to the people’s priorities, I must provide the best care for my patient and be caring and compassionate always (Scottish Government, 2010, p. 6). The level of involvement from all members of the multidisciplinary team, the care and compassion shown to this patient at all times was very humbling (NMC, 2008). I was privileged to have the opportunity to be involved in Janet’s care as well as working within a ward of clinical excellence (Scottish Government, 2010, p. 6).

## Evaluation

A holistic approach with continuity of care is extremely important and all nurses have a central role in providing information, care and support (Kennedy and Lockhart, 2007). Excellent communication and good interpersonal skills are essential in order to provide Janet with the care she requires. Also when dealing with members of the multi-disciplinary team, effective teamwork is imperative again providing Janet and her family with continuity of care and the clinical excellence they require from all staff. I feel the Quality Strategy aim was achieved, as all staff when looking after Janet dealt with her in a caring and reassuring manner at all times, in turn providing Janet with the best care, whilst she was on the ward (Scottish Government, 2010).

## Analysis

Palliative care helps to improve the quality of life for patients and their families who have to come to terms with the difficulties associated with life threatening illness. It is about identifying the patient’s needs through accurate assessment, good symptom control and sensitive nursing care (Scottish Partnership for Palliative Care, 2012).

Over the next few days whilst looking after Janet and taking part in the ward rounds, I was able to plan Janet’s care. Whilst preparing Janet’s care plan I put some goals into place with the aim of making Janet’s stay in hospital as comfortable as possible and also to determine if Janet’s physical condition was improving or deteriorating (Richards and Edwards, 2008). When planning Janet’s care I took a holistic approach and looked at her physical, psychological, social, emotional and environmental needs. This included not only the patient, the hospital and any multi-disciplinary team members but also her husband and any other family members she would like involved (Dougherty and Lister, 2011). As Janet’s condition could change from day to day her care plan was reviewed on a daily basis and updated accordingly (Dougan and Colquhoun, 2006).

As Janet was bed bound she required the assistance of two members of staff to assist her with her Activities of Daily Living (Hamilton and Price, 2007). Good personal care from the nurses and the nursing auxiliaries is paramount. As Janet is lying in the same position for a long period of time, the development of pressure ulcers can become a concern as her skin can breakdown quickly. The use of the Waterlow Risk Assessment Tool was used in assessing and establishing the needs of the patient; this involved regular positional changes, a specially prepared mattress for her bed or a cushion for their chair (Waterlow 2012). Following assessment the nurse developed a care plan in order to help maintain patient skin integrity and any actions or implementations which needed to be carried out (Anderson and Fletcher, 2007).

In addition to caring for Janet on the ward I was given the opportunity to go to the Hospice and meet with Janet’s palliative care nurse and also be included in her multi-disciplinary team meeting. This meant I learnt more about Janet’s condition and therefore provided her with the best care I could whilst she is on the ward.

Palliative care patients must have good symptom control of their pain and also nausea and vomiting. Janet was placed on a syringe driver to control her pain. A syringe driver is a small portable pump which is attached to the skin by a cannula and gives the patient a continuous dose of analgesics and/or anti-emetics (MacMillan Cancer Support, 2012).

When dealing with patients who are receiving palliative care the people’s priorities are relevant. All nurses must be able to make the patient as comfortable as possible, be aware of their wants and needs and provide a safe and clean environment (Scottish Government, 2010, p. 6).

On reflection this event has brought further awareness of the level of involvement of staff members from nursing auxiliaries, nurses and consultants. This was shown by the number of multi-disciplinary meetings, assessments, re-assessments, written correspondence and working hours placed into looking after this patient. All staff members were committed to providing the correct input and treatment for this patient and to make her last few days as comfortable as possible (Scottish Government, 2008).

## Conclusion

This reflection has demonstrated the difficultly in caring for palliative care patients. It requires a holistic approach to ensure that the patient and their family receive the best possible attention. Nurses have a duty to ensure that the care they deliver is of an acceptable standard (NMC, 2008). While participating in ward rounds I took on board the doctor’s instructions and carried out and prioritised the care of my patient, therefore making Janet’s stay in hospital as comfortable as possible. The code provides values, which can be adapted to any setting and as long as these are followed, nurses will be able to carry out their legal and professional duty of care (NMC, 2008).

## Identify Steps

All staff on this ward were experienced in dealing with palliative care patients. However as a student you can be hesitant when communicating with patients and families at this difficult time for fear of saying something incorrect. Therefore education and training not only for students but for all staff across all care settings should be paramount in order to provide good palliative and end of life care (Scottish Partnership for Palliative Care, 2012).

In relation to my transition from student to nurse, palliative care does not only deal with cancer patients but with patients who have long term chronic illnesses such as multiple sclerosis, heart disease and respiratory problems, therefore palliative care is relevant today and also in the future because we will be caring for an ageing population (Scottish Partnership for Palliative Care, 2012)

In conclusion and in relation to The Healthcare Quality Strategy I feel that Janet was looked after in a caring and compassionate manner at all times and the nursing auxiliaries and nurses looking after Janet worked well together putting her first and treating her with respect at all times (Scottish Government, 2010).

## Action Plan

Palliative care is a sensitive subject to deal with but I feel that as long as you treat the patient as an individual, listen to their wants and needs, then a positive outcome can be accomplished. Communication and good interpersonal skills are once again highlighted as an essential part of good nursing practice. I must be an effective communicator and be able to provide a high standard of care at all times and this is imperative when dealing with palliative care patients. I must keep my knowledge and skills up to date (NMC, 2008).

Whilst on this placement I was expected to take control of situations and be able to communicate and deal with whatever is presented to me. You have to be able to stand on your own two feet and this will be imperative in my transition to becoming a registered nurse.

## Conclusion

In conclusion and in relation to The Health Quality Strategy and my transition from student to nurse, Bowie (2010) states that positive practice should be highlighted as it allows others to learn from it and provides opportunities to improve the safety of patient care. Reflecting on these events has helped me to identify areas where practice needs improvement and given me a greater insight into my own role as a registered nurse.