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Health & Medicine, Diabetes



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Nursing and Social Media

Introduction

The use of social media has impacted many organizations. The nursing profession has not been left behind in the use of social media, with nurses using social media to give information to their target groups and reaching out to a larger group of people within a short period of time. This paper, will, therefore, discuss changing the working environment in nursing through the use of social media.

Discussion

Diabetes, according to CDC (2014), has been identified as the one of the leading causes of death (7th) and disability in the USA. This has called for increased spreading of information regarding early diagnosis, prevention and management of diabetes. This includes collecting necessary information regarding the disease. Plans are then developed describing how the specific expected outcomes will be achieved (Davidson & Ray, 2011). The selected/identified area for this paper that requires change will be the improvement of patient safety in hospitals, with special focus on the diabetic group. The involved stakeholders in the planning, implementation and evaluation of strategies to improve patient safety will be the nurses dealing directly with patients, either in hospitals or in home cares. The nursing leaders and the involved patients are also major stakeholders in the change process as well as the government.

The consultants and the resources required for this process include the

information pertinent to diagnosis, interventions and outcomes of diabetes,

the leadership responsible for the planned changes and implementation and the funding of the same. Problem focus for this paper will be on changing the working environment (diabetic care management) through the use of social media. The change and leadership theories that this paper will be based on is the contemporary change theory and Benner's socialization model for explaining the habits of using social media in the nursing profession.

Planning

The goal of this assessment is to reduce complications in diabetic cases. CDC (2014) reported that almost half of the deaths occurring annually are from complications caused by diabetes irrespective of the age group of the patient. Therefore, this assessment seeks to establish the various ways through which complications caused by diabetes can be reduced. Use of social media to responsibly share information in the nursing profession is a commonly used technique by nurses, midwives and nursing students (Betton, 2013). The expected and observed outcomes would be the reduced diagnosis in cases of diabetes as well as reduced hospital visits per patient diagnosed with diabetes due to useful information in managing the same. Consequently, another outcome is the reduced amount of resources used in treatment and management of diabetes. The outcomes are expected to be observed in the following 3 years after implementation of the interventions. The desired change in the nursing care includes responsible use of useful information in improving efficacy of health care delivery to the diabetic patients, use of information to improve patient safety and improved

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teamwork in achieving the set goals. Education and administration are also other desired areas of change. Education will be used to educate nurses more on the use of social media through Code of Ethics (ANA, 2013), while the administration will be responsible for implementing the desired changes and motivating the nurses in observing the implemented changes (Gilmore, 2014). There is expected resistance during the change process and implementation of the change. Resistance can be from any of the stakeholders; patients, government and nurses. The nurses may shield resistance if they feel that the new implementations threaten their jobs, while the patents may resist doe to the increased workload on their part.

Implementation

One of the identified changes within the time table is improving patient safety for diabetic patients during care. This includes avoiding injuries and deterioration of conditions for patients while in care. To achieve this, there are various steps and strategies that have to be followed. One of these strategies involves adequately training all nurses at all levels in a bid to improve quality of care and efficient delivery of the same. This is a continuous process which starts at the nursing institutions and carries on even during practice. Improvement and sharpening of the skills and expertise is vital in achieving patient safety (Betton, 2013). Another strategy is empowering nurses to be transformational leaders responsible for developing and implementing successful health care improvement strategies. This is also a continuous process which involves

inspiring and motivating nurses to adopt leadership roles and hence, more

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responsibilities. Securing the required resources on time is the other step in achieving patient safety. Ensuring that the resources required for patient safety are always available involves streamlining all operations between suppliers and the receivers. This avoids unnecessary delays for deliveries. Alternatively, evidence based care is another strategy in achieving the identified goal. Diagnosis, interventions and outcomes based on evidence care have been proven to be more effective and reliable (Gilmore, 2014).

Evaluation

The actual outcomes achieved include improved patient safety and quality of care through training for student nurses and those in practice. The strategies used to implement this are joining hands with the nursing training institutions and making sure that they are adequately trained in matters pertaining to use of social media, whether for personal purposes or for professional purposes. Such training is effective because it imparts knowledge on the students before they join practice, hence giving them novice knowledge (Betton, 2013). When in practice, nurses can then go forward to attaining the other levels of competence, i. e., advanced beginner, competent, proficient and the expert levels (Davidson & Ray, 2011).

Appropriate Leadership Style

The most appropriate leadership style that is suitable for implementation of the change process is the transformational leadership. According to Davidson & Ray (2011) transformational leadership is most suitable for most organizations since it is more result-oriented. Transformational leaders have a vision and share that vision with their team, which leads to working towards a common goal (Moynihan, Pandey, Wright, 2012). Transformational leaders possess emotional intelligence, self awareness, integrity,

accountability and conflict resolution skills (Moynihan, Pandey, Wright, 2012). Since the nursing environment is a complex system which is can be affected by small changes (Lett, 2012), transformational leadership can be useful in positively changing the health care system.

Learning Experience

The learning experience from this process is of vital importance in change implementation in nursing practice. The leadership theories inform on the best theories that can be applied in achieving the expected outcomes. Transformational leadership is guided by emotional intelligence, which helps transformational leaders in gaining confidence over their followers, sharing common visions and being able to work towards a common shared goal. Contemporary change theory is another theory that has informed this study and has helped in understanding the complex system that is the nursing practice, and how changes affect the whole system (Gilmore, 2014). The complexity in a nursing system facilitates knowledge development, whereby the research and development are carried out of the nursing system, but handed back into the nursing system for application. Benner's socialization model of socialization also informs this study by identifying the different levels of clinical competencies. Use of social media in the health care system is determined by the level at which the user lies (Betton, 2013). A novice has no confidence and knowledge to perform whereas an advanced beginner

possesses some higher level of knowledge due to some related experience. A competent nurse is able to exhibit competency if he/she has practiced in the same field for a period not less than 2 years. On the other hand, a proficient nurse is able to integrate the different knowledge into a whole, facilitating long term decision making (Benner, 2011). An expert is an intuitive nurse who possesses a deep understanding for certain situations. Experts are able to make decisions very quickly because they depend on intuitiveness rather than deliberations (Benner, 2011). Future change projects will, therefore, be better informed having gained the knowledge on change theories and leadership. The process of planning the change requires an expert since it is a complex process. The process of change involves other stakeholders, some of whom may contribute to the development of the process, and others who create barriers to the process. One of the barriers to the change process include stiff resistance, which drags down the process of change and consumes more resources in terms of sensitization to those against change (Gilmore, 2014)

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