

# Reflective analysis time management and nursing nursing essay



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An event that was meaningful to me as a nurse happened during my clinical time at St. Michael's Hospital when I did not wash my patient before 8: 00 am in order to prepare her to go to a plastic surgery appointment later on that day. My patient's 10: 00 am Heparin administration was delayed by 45 minutes because she was being washed at that time. This event occurred because I did not prioritize the tasks I had to complete during the day properly, and therefore I learned the importance of time management while I work as a nurse on the clinical unit.

Besides me, the people who were involved in the event were the registered nurse who I shadowed, my clinical instructor, and my student nurse buddy. At the beginning of the clinical day, while the events happened, I contacted my instructor, my nurse, and my student nurse buddy. The nurse and I sat down to look at the Kardex of patients and wrote down notes on our Personal Organizational Plan (P. O. P.). On the Kardex, my patient's condition was the same as yesterday except she would have a plastic surgery appointment later on that day. Usually the patient's husband would visit her daily around 9: 30 am and provide care which including washing the patient and helping her to perform bowel elimination. My patient preferred that nurses leave them alone while her husband cares to her. On this particular day, the patient's husband had an appointment and could not visit his wife in the morning, which meant it was my responsibility to wash my patient early so she could be ready for her appointment. I verbally informed my student nurse buddy that I would need her help to wash my patient but I thought my memory was good enough that I did not have to write down this specific task on my P. O. P. When I met with my patient, I concentrated on measuring her

vital signs, completing the initial assessment, nursing activities, and interviewing my patient for the Roy Care Plan assignment as these tasks were originally listed on the P. O. P. I made sure I finished charting by 9: 00 am. Once I finished charting, the nurse came up to me to see if I had bathed my patient and I replied no. From the nurse's unsatisfied facial response, I realized I should have bathed my patient earlier in advance. My clinical instructor also asked my student nurse buddy and I the reason the patient had not been washed yet. I thought I could have washed my patient after I completed the charting as I knew the patient usually was washed around 10: 00 am by her husband. I felt really bad and irresponsible because I did not wash my patient on time and prepare her for the appointment. My intuition told me there must be an essential task I had missed, but I just could not recall what it was since I did not write it down on the P. O. P. I thought my clinical instructor and the nurse must feel disappointed that I did not perform the task earlier as I remembered my clinical instructor stated clearly to check if any of our patients has special orders or tasks to be done at the beginning of the shift. I believe there are ethical and economic considerations to be taken into account about this event. If my patient was still in the process of getting ready while she received a call to go down to the plastic surgery unit, it would create unnecessary wait time for the plastic surgeon and other patients who would see the plastic surgeon later on. In order to compensate for the extra wait time, staffs at the plastic surgery unit may try to rush things and quality of treatment that patients receive may suffer. Staffs may have to work overtime due to the delay and economic burden would be a result. In addition, delay of administering Heparin will increase patient's risk of blood clotting and serious consequences such as <https://assignbuster.com/reflective-analysis-time-management-and-nursing-nursing-essay/>

pulmonary emboli, myocardial infarction, and deep vein thrombosis may be resulted. This will be considered as maleficence to the patient (Potter & Perry, 2009). Moreover, I believe I should be accountable to my patient by providing safe and quality care to my patient which includes washing my patient on time. This belief arises from my nursing teachers constant reminders to us that it is very important to follow CNO's practice standards during practice.

The key issue of the event is time management skills for clinical practice. If effective time management strategies were applied to my clinical practice, the chance of this event occurring would have been minimized and my performance of clinical practice will be improved.

According to Chater and Litchfield's study done on new graduate nurses who work in a neonatal unit at an Australian hospital (2007), five themes: "knowing, planning, support, fulfillment, adapting and being flexible" can be utilized to help student nurses and new graduate nurses to better manage their clinical time.

Firstly, "knowing" is essential for nurses to manage time on the unit. The reason is if novice nurses do not know the condition of their patients, then they will not know what interventions they need to apply. More time will be spent looking up and learning about how to take care of the patients' conditions. Therefore, obtaining nursing knowledge and familiarity with the daily routine care of the unit can help nurses handle their time on unit more efficiently. Having knowledge about the patient's condition will also help

novices feel less anxious, gain a sense of control, and raise their level of confidence (Chater & Litchfield, 2007).

Secondly, “ planning” involves thinking about all the tasks which need to be completed as well as how much time each task requires. Proper planning can guide nurses through their day and ensure that important tasks will not be missed. Taking the time to think about required tasks also saves time because it allows the nurse to figure out what resources will be needed to complete a specific task and get everything ready in advance, rather than beginning a task and suddenly realizing something is missing and having to pause to figure it out.

Thirdly, new nurses should not hesitate to obtain support from their preceptors and peers. Researching the right knowledge for a patient’s problem is time consuming but important, so nurses should not be afraid to ask for help since it is in the best interests of the patient. Also, talking to another new nurse peer will aid in continued development of time management skills. Moreover, when novice nurse are able to manage time and are able to complete all the routine care, they gain a sense of fulfillment and accomplishment (Chater & Litchfield, 2007).

Finally, adapting and being flexible is essential to mastering time management skills. There are always unexpected and unpredictable events that occur during clinical and being able to adapt and find alternative ways to deal with various situations will help nurses feel less stressed when managing their time on the unit (Chater &Litchfield, 2007).

Besides the five managing themes stated above, prioritizing is a necessary tool for effective time management. Nurses have to prioritize tasks on their route and finish tasks from high to low priority order. For example, when starting a shift, a nurse should decide which patient requires the most care. The nurse can do this by checking in with each patient briefly to “say hello” but at the same time to assess their needs. After an assessment is done, it can be explained to the patients who do not need immediate care that they will be taken care of shortly while the nurse attends to those with urgent needs (Waterworth, 2003). In addition, nurses should be careful of some priority setting traps. The first trap is “whatever hits first” which means a nurse responds to tasks that happen first instead of thinking twice and then responding. The second trap is the “squeaky wheel”, a patient who is able to gather the most attention from a nurse to hear his or her urgent request may not be the one who is the most in need. The last trap is “waiting for inspiration”, nurses should not wait to be inspired to complete a task and they should actively think about what tasks have to be done while on unit (Vaccaro, 2001).

I learned effective time management strategies to handle my time on clinical and I will definitely utilize the time managing strategies step by step from knowing, planning, prioritizing tasks, gaining support from other nurses, and being flexible with my tasks.

My thinking has changed after analyzing the key issue. It now makes more sense to me the reasons that our instructor requires us to finish all the paperwork on Tuesday night even when we feel tired after spending the whole day on unit. In fact, completing the Diagnostic Complications Sheet <https://assignbuster.com/reflective-analysis-time-management-and-nursing-nursing-essay/>

and Medication sheet correspond to the “ knowing” phase by gaining knowledge about our patients so that we can provide specific care to our patients, feel less anxious, and better manage our time on unit. By filling the detailed P. O. P., this correspond to the “ planning” theme which helps student nurses organize their day and ensure tasks to be performed will not be missed.

In my point of view, I would preserve the action that the register nurse comes to check on me to see if I bathed my patient. With this action, she is being responsible to the patient and also she is offering me support to help me take care of the patient. On the other hand, I would definitely change the way I organize my P. O. P and I would follow my P. O. P. with flexibility and do not just focus on the original task I planned for my patient. For example, once I found out my patient has to be washed before 8: 00 am, I will write it down immediately so that I will not forget to complete the task.

If a similar situation arises again in my practice, I would inform my student nurse buddy that I require her help to wash my patient before a certain time and ask him or her to remind me to finish the specific task in case I forget or become occupied by some other tasks.

In term of recommendations, I think there is no better way than to come to the unit with preparation. For example, student nurses can build their well of nursing knowledge by reading the nursing interventions related to a patient’s specific condition from the Canadian Fundamentals of Nursing and the Medical-surgical Nursing in Canada. Also, Pharmacology for Canadian Health Care Practice can help student nurses build up their knowledge in

medication. The more a student nurse comes prepared for their clinical time, the less anxious he or she will be and can apply the five time managing strategies mentioned above to handle their time on unit more effectively.