

Understand what is  
required for  
competence in own  
work essay



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Understand what is required for competence in own work role 1 . 1 Describe the duties and responsibilities of own work role Morning communications: Start shift with patient handover from the night staff, taking notes of what need to be done throughout the day for example, who need blood products, fluid charts, DIN status and then we have huddle before starting breakfasts. Working on the homology unit part of my duties and responsibilities is to effectively communicate with people on routine and with carrying out duty to deliver the best patient care.

Part of my duties is to make sure patients have their here meals and regular drinks throughout the day as part their nutritional needs. Because the ward is specialist ward it so part of duty to make sure that they have food that they are allowed with their diagnostic medical condition, for example they are not allowed to eat salad or live yogurts or eggs that are too runny for breakfast. During chemotherapy our patients will often go off their food, so encouraging them is also big need.

The hourly rounding's is also very important part of my responsibility and checking upon the patients to make sure that they are k and if they need anything- this isn't always possible but the responsibility is share with other members of staff who are on duty that day. On my ward the patients are in hospital for along period of time and when doing intentional rounding's, you can take your time talking to them and start building relationship with them.

Which make's there stay in hospital little bit more easily because they feel they are being looked after. Personal cares: There are 8 patients bed on the ward and part of my morning role is cleaning patient's rooms this is due to

the patients being at high risk of infection, this is because when patient is entropic their immune system is too low to fight off foreign pathogens, so cleanliness is highly important on this ward. 1. Change bedding 2.

Clean mattress and bed frame, feet and head board 3. Fridge cleaned inside and out, including the cupboard 4. High touch areas- windowsill, sink, suction  
When our patients are unwell on the ward they require help with personal hygiene and help with embroiling to the chair if they feel weak or not there usual self this would be the time where I would assist the patient and ensure they are looked after, whilst maintaining their dignity.

When patient become entropic we have to keep accurate fluid balance of their input and output which would include: 1. Fluid via Avis (input) 2. Drinks (Input) 3. Bowel movement This is time where lunch trolley comes to the ward and I start to dish out patients dinner but depending on the patient, when they start their chemotherapy, it normal for them start going off their food when they are unwell, sometimes because they have no appetite and other times because they do not want to be sick.

It is part of my responsibility to help encourage the patients to eat and tell them what they wide variety of food that is available for them to eat. These patients would also be put on food chart and so maintain food chart throughout the day to monitor their diet. Day case unit- The morning period is our main busy time on the ward and this where our skills as support work comes in to role. Part from the ward we also have day case unit for which sometimes as support worker we are required to do patients observations, blood sugar and weight.

The patients come in and have blood products and blood test and anything else that they might need. It is also my responsibility to help look after these patients, making sure that have regular drinks and food at lunch time. Other duties and responsibilities- Link roles- I am also part of the end of life palliative care nurse link on my ward and have been on and have plans to on more courses to help support the patient and family.

I have been on education programmer for bereavement which provides me with knowledge and importance of helping with the following: Provide skills to improve communication with bereaved families and career's Emphasize the importance of diagnosing dying, discussing wishes and preferences (including organ & tissue donation) and use of Care of the Dying Pathways Promote ole of chaplaincy service and importance of meeting spiritual needs Disseminate best practice from a variety of care settings Increase awareness of local bereavement support services Personal development- It is my responsibility to make sure I prompt my team leader when it comes to my yearly appraisal and anything that I want to contribute my own personal development. My team leader is much organized and takes appraisals seriously because she wants to develop the team members and ward to high standard so that the care we give is top quality and making sure that I get the right support. This includes: Health and Safety- It is important to maintain my own safety within the workplace as well as others' to ensure that the work place is safe environment for everyone.

The security of myself and patients is also important due to the nature of my Job role. 1. 2 Explain how communication affects relationships in the work setting It is also important to promptly alert the nurses where there are any <https://assignbuster.com/understand-what-is-required-for-competence-in-own-work-essay/>

changes in the patient's health and well-being or any possible risks, so that they are aware and they assess the situation and provide best possible care for them at that time and to record the information accurately and pass it on to the relevant nurse or charge nurse in a timely manner and to help prepare and support the patient appropriately during any activity that is to be undertaken. There is research that shows poor or ineffective communication is a major risk factor to patient safety.

The reasons for ineffective communication are varied for example: Health care's hurried, Stressful environment Effective communication depends on clarity: the speaker must convey his or her message in such a way that the listener clearly understands that message. But the truth is communication is influenced by a host of factors: gender, ethnicity, culture, and professional dynamics. So a speaker's intended message may not be what the listener hears or understands which can compromise patient safety. 1. Culture/ Ethnicity- A patient's culture may influence how he or she interacts with clinical support worker or nurse. Language barriers can cause misunderstandings and miscommunication. 2.

Socioeconomics- Levels of education, literacy, beliefs and behaviors can differ tremendously among patients; can affect the ability of staff to communicate with one another for example, nurses and doctors which can lead to communication. 3. Literacy- How well does the patient understand medical terms? Can the patient follow home instructions of aftercare from being in hospital to going home 4. Gender- Gender influences relationships among staff and between care support and patients. 5. Personality/Behavior- Individuals' personalities color their daily communication and influence how

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others perceive them. 6. Personality/ Behavior- Urgency affects a speaker's tone. For example, a hurried doctor or a stressed-out nurse may be perceived as curt by the patient or other staff. Be able to reflect on practice 2.

Evaluate own knowledge, performance and understanding against relevant standards Reflective practice- is the main skill for developing as clinical support worker professional. It refer to the process of thoughtfully taking into account your own experiences, which by doing identifies my own strengths and weaknesses and improves my practice as clinical support worker by reflective process. On the homology ward you can constantly see that we promote reflective practice throughout the time on shift, everyday by having regular huddles and communicating constantly with nurses that I work with. We encourage this immensely because we believe in giving full attention to the patients we look after.

Here are few examples of reflective practice: When describing an experience with patient or family member it is important to be significant with the nurses and doctors so they have good view of what has been going on Antipathies with others in the experience and then linking experiences Look at ways to improve working with the patients and their families and staff members in order to continue meeting the patients Recognizing one's own values and beliefs Reflection to me is taking into consideration my own personal thoughts and actions, his meaner focusing on how I interact with my colleagues and within the environment on the homology ward to obtain a clearer picture of my own behavior. It is by doing this that I am able to build on my existing strengths and take appropriate future action and ask for help <https://assignbuster.com/understand-what-is-required-for-competence-in-own-work-essay/>

of my team. In doing so the aim is to develop my professional actions. There are two forms of reflective practice one being, reflection- on-action and reflection-in-action. It helped me to understand the difference between the two reflections of their importance as it helps to assist in developing my own personal and professional competences. Reflection on action- is probably the most common form of reflect that I put into practice which involves carefully is re-running in my mind the process of my past shifts.

The aim of this is to value my strengths and to develop different and more effective ways of acting in the future. By this there can be a focus on just identifying negative aspects of personal behavior with a view of improving professionally. This however is valuable way of approaching professional development but it does, however, ignore the positives of our actions. People say that more time should be spent on their valuable contribution to the workplace and that we should spend more time towards developing these strengths, however not ignoring, of course the areas of behavior that require attention. Reflection in action- is the hallmark of the experienced professional. It means examining your own behavior and that of others while in a situation.

The following skills are involved: Being a participant observer in situations that offer learning opportunities; Attending to what you see and feel in your current situation, focusing on your responses and making connections with previous experiences; Being ' in the experience' and, at the same time, adopting a Witness' stance as if you were outside it. For example, you may be attending a ward meeting and contributing fully to what is going on. At the same time, a fly-on-the-wall' part of your consciousness is able to

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observe accurately what is going on in the meeting. Reflection-in-action is something that can be developed with practice.

Critical reflection- It refers to the capacity to uncover our assumptions about ourselves, other people, and the workplace. These develop across our lifetime and our early experience plays a vital role in their development. Like geographical maps, our personal maps help us make sense of our environment but are representations only. Personal experience determines how much of our environment we actually 'see'. It can be surprising to hear two people's descriptions of the same event. Each may be astonished to hear how the other experienced the situation. Critical reflection involves uncovering some of the assumptions, beliefs and values that underlie the construction of our maps.

Critical incident analysis offers useful tools to facilitate critical reflection

Feedback- At work, that person may be someone who is more experienced than you, such as a nurse in charge or matron, and who is able to assist you in reflecting on a particular experience. The nurse in charge may challenge your thoughts in a supportive and non-threatening manner in order to maximize the learning that can occur. Though, you do not have to accept the feedback as the truth' but more to consider. What have I learn- Another invaluable approach to reflection is to ask yourself regularly: What have I learnt today? This is a positive approach to processing information, and can be a constructive way of dealing with an event that may have en upsetting. Incidentally, you can also say to other people whom you know well: What have you learnt today?