

Professional development in nursing | reflection



**ASSIGN
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In order to enhance knowledge, skills, values and attitudes needed for a safe and effective nursing practice, this reflective piece aims to demonstrate the author's commitment to the need for professional development contribution and personal supervision activities. Through leadership, peer support, supervision and teaching this account will further enhance the professional development and safe practice to others.

To achieve these aims, backed with supportive evidence, the author shall use a case study to enable him make discussions and debates. To maintain confidentiality, names of people and places mentioned in this account has been anonymised in accordance to NMC code of professional conduct (NMC, 2010).

During the mid-point of his final placement, Bruce was instructed by his mentor to assume the primary nurse role for 73 year old Alice who was detained in an inpatient psychiatric unit under section 3 of the Mental Health Act. Alice was diagnosed with Alzheimer's disease dementia with a history of falls, self-neglect and aggressive behaviours toward staff and fellow patients. Following Alice's CPA review, additional medication was prescribed to her after a mutual agreement between Alice, her family and the MDT as rapid deterioration in her mental state was a concern. CPA (2008) recommends that patients, family and carers should be involved in decision making in regard to their care plans. To promote medication adherence, NICE (2009) declares that, patients should be involved in decisions about prescribed medication to enable them to make informed choices. Bruce was not aware of Alice's new prescribed medication because he had 2 days off from work.

Upon return to work, Bruce volunteered to be the nurse in charge of the shift to enable him gain more confidence and build his leadership skills. Whilst Bruce was being supervised during the morning medication rounds as guided by (NMC, 2010). Alice noticed that there was a new medication so she asked Bruce purpose of the additional medication. Bruce could not confidently explain the purpose of the medication so he asked Dora his mentor who stood by to explain to Alice. Alice became extremely angry and agitated, hostile and physically aggressive towards Bruce accusing him of wanting to kill her however, staff intervened and managed to de-escalate the situation. NICE (2005) recommends that at the first signs of agitation or violent behaviour, staff should first try to calm the patient down using de-escalation methods.

Taking the above scenario into consideration one can say that Bruce acted proactively by volunteering to co-ordinate the shift. However, Bruce should have been more concerned to find out the outcome of Alice's CPA meeting as her acting primary nurse. NMC (2008) asserts that the care of people should be your first concern, treating them as individuals and respecting their dignity. Since Bruce volunteered to coordinate the shift, he could have delegated some of the task i. e. medication rounds to other qualified nurses to enable him to catch-up with what happened at the ward during his absence. Delegation of task enables the team leader to be able to devote more time to those tasks that cannot be delegated. With more time available, the leader can invest time and energy into developing practice, improving standards and influencing decisions that affect their service (Garland and Sullivan, 2010).

It was a bad practice for Bruce to administer medication without knowing its purpose as a nurse. NMC (2010) affirms that, nurses must know the medicine's therapeutic use, its normal dosage, side effects, precautions and contra-indications before administering it. Bruce should have checked the use of the newly prescribed medication in the British National Formulary (BNF) before administering it to Alice (NMC, 2010). Bruce could have also asked Dora about the purpose of the newly prescribed medication when he realised he was not familiar with it even before dispensing it into the pot for Alice. However, one can say that Bruce acted professionally by acknowledging his limitations and therefore asked Dora to explain the use of the newly prescribed medication to Alice. NICE (2009) recommends that as a good practice, nurses should provide patients with verbal and written information regarding their prescribed medication to promote medication concordance.

Bruce in a meeting with Dora identified the need for developing his medication administration and management skills and agreed on an action plan under his mentor's supervision. Care Quality Commission (2013) affirms that supervision provides opportunity for staff to review their performance, set objectives in line with the organisation objective and service needs, and identifies training and continuing developing needs. Bruce further identified the need for research on medication administration, management and medication training all these shall be accomplished under the supervision of Dora. Bruce also has requested to be more involved in medication administration and did a research and found out that, patients must always understand the reason for taking a particular drug. NICE (2009) recommends

that, at intervals agreed with the patients, staff should review patients' knowledge, understanding and concerns about medicines, and patients view of their need for medicine because these may change over time.

Bruce had the opportunity to learn how to write CPA reports, tribunal reports and continued to build his confidence in writing plans of care and risk profiles by assuming the primary nurse role for Alice. Bruce also seized the opportunity by being the primary nurse to Alice to gain a better understanding of the MDT working. DOH (2004) ten essential shared capabilities recommends that professionals, patients, family and carers should work in partnership to provide quality care.

By volunteering to coordinate the shift gave Bruce the insight of the responsibilities and what to expect from a qualified nurse. Coordinating the shift enabled Bruce to research more about his leadership styles, improved on his communication and delegation skills and his management. Bruce also had the opportunity as the shift coordinator, to do an incident report about Alice's physical aggression towards him under Dora's supervision.

It can be argued that Alice was not supposed to behave that way however, she could forget about her CPA meeting and the newly prescribed medication because of the symptoms of her illness. Wrycraft (2009) declares that, typical symptoms of dementia are loss of memory, confusion and a change in personality, mood and behaviour.

NHS (2012) confirms that, common symptoms of Alzheimer's disease include memory loss, especially problems with memory for recent events, such as

forgetting messages, remembering routes or names, and asking questions repetitively.

Based on the above account, a nurse should always reflect and evaluate his or her practice then plan future practice areas for development.