

Analysis of performance of registered nurse



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INTRODUCTION

Critical reflection acts as the precursor for transformative learning, which takes place by altering the level of personal understandings and the behavior (Mezirow, 1990). Critical reflection leads to improved learning, assessment and thinking with respect to the system and the society (Smith, 2011). Critical reflection enables an individual to look beyond the horizon and visualize the bigger picture and develop reasonable views about the situation so that the assessment can become easier. Critical reflection is taught in various professional fields, including the health care system. This concept is not just theoretical but requires practical applicability also.

Theoretically there are three models for reflecting critically. The first is the Dewey's model of reflective learning which advocates that knowledge can be obtained by relating the past and present experiences. This approach is referred to as the pragmatic approach. The second model is that of Habermas', which advocates the critical theory behind this approach and demonstrates three areas of knowledge, namely, practical, technical and emancipator. The third and the last model is the Kolb's model of reflexive learning (Patricia Lucas, 2012). The Australian Nursing Federation's standards of competency for a nurse have identified and put forward three domains of better level competencies: adaptation of practice, conceptualization of practice and leading on with the practice (Australian Nursing Foundation, 2005).

AIM AND OBJECTIVE

The objective of this paper is to critically examine and reflect on my professional skills and performance as a registered nurse, in the domain of adaptation of practice. The paper discusses about the main concept of critical reflection and also the competencies in the aforesaid domain. This essay is written in first person, as it will help in better understanding of the critical competencies possessed by an individual.

DESCRIPTION

The initial period of working in any professional field is very difficult and tiring. When I started to work as a nurse, in the emergency, I used to work for 6 days a week. The timings were also very stringent, from 8. 00 AM till 3. 00 PM. The work load was much higher as compared to the task force available. The number of nurses was reduced considerably and the health staff was under continuous stress as they had to cater to so many patients. Another problem faced by the health staff was the duration of stay of the patients and the workload on the emergency section. In my country, general statistics show that patients stayed for minimum two days. With each nurse catering to 6-7 patients at one time, it is nearly impossible to pay adequate attention to each on simultaneously. Plus this increases the work load to a greater extent. Most of the nurses, who worked, just had a diploma in nursing, while I and two others had the bachelor's degree. This is what distinguished us. We had better theoretical as well as practical skills as compared to them. This plus point kind of added to the workload I had. I was made responsible for all the emergency situations and for looking after the patients who were brought in emergency conditions. One of the main procedures of emergency is suturing. Since suturing requires both practical

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as well as theoretical skills, I was the one who was given the task of suturing, assessing the wounds of the injured, examining any other damage like that to arteries or tendons or nerve fibers. The morning task was to review all the patients along with the doctors and then for the latter half of the day each nurse was assigned 6 to 7 patients to take care of.

OVERVIEW OF CRITICAL REFLECTION

Nursing literature frequently mentions about critical reflection but nowhere has this term been defined precisely (McBrien, 2007). Vaguely it has been mentioned as the process of analyzing practice through regulated self reflection (Crowe & O'Malley, 2006). Although everybody has the ability to think with a different perspective, the aim of critical reflection is to enhance knowledge and redefine our understanding about self, by increasing self awareness and self consciousness, thereby focusing on the outcomes of our actions (Forrest, 2008). There are too many scenarios in the health care system, where the nurses are exposed to unexplained judgments, interpretations and decisions. To relieve the stress burden from our shoulders, it is important to inculcate critical thinking in our lives. Yes, it is true, critical reflection will give fire to anxiety, conflict and also cause self doubting issues but it will, eventually, alter the professional practice in an affirmative way (O'Connor, 2008). The new energy within will help in challenging the beliefs and assumption, that already exist and lead to better understanding of the things and thereby bringing about a change for benefit of all. Because of the increase in expectation from the nurses, they face complex demands, change and higher accountability. To comply with such situations, they need to develop skills of thinking on a higher level and

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improvement in the reasoning abilities (Crowe & O'Malley, 2006). Schön (1983) has put forward two major reflections: reflection in action (which occurs when the action is being performed and is a result of thinking critically) and reflection on action (which is reflected after the action has been performed). Reflection in action involves many skills like being a good observer in every situation and trying to learn something out of every situation, interpreting, recording and understanding your feelings and responses to a certain situation and then inter relating your previous experiences, always make yourself counted in the experience via taking a 'witness' stance. On the other hand reflection on action is the most common form of reflection as what you have learnt or understood from your past encounters, all reflects in your future actions (David Somerville, 2004). Critical reflection is important for nurses because they need to incorporate change in their daily interaction, apply and update their professional skills, should develop self awareness and self directedness. They can successfully utilize the opportunities only if they ponder upon the feedback of their interactions and their impact on the patient, their families, colleagues and the health care unit as a whole. Therefore, critical reflection forms the most important ingredient for cooking the recipe of good conduct.

DOMAIN OF INTEREST

Day by day the complexities of the health care system are increasing. Thus, to meet the requirements various competency standards have been set up for registered nurses for advanced nursing. These competency standards aim to distinguish between the general and advanced nursing practices (Australian Nursing Federation, 2005; International Council of Nurses, 2010).

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The domain of interest here is the domain of 'adapting practice'. It contains the competency abilities of advanced registered nurses to comply with and adjust or adapt to the challenging and more complex situations and still yield in better outcomes in terms of services offered (Australian Nursing Federation, 2005). The standards that are set, help in encouraging post graduate education for development in the field of advanced nursing practices and also enable each individual to individually critically analyze their competency in different domains (McGee, 2009). Like every other domain, the domain of adapting practice also stresses on understanding and meeting the needs and requirements of the patients who are suffering from complex and critical conditions (competency standard 4). This domain also states that improvement in the predicted outcomes should be made by referring to the past experiences and gathering information from other sources as well (competency standard 6) (Australian Nursing Federation, 2005). This essay also reflects upon the competencies of a registered nurse and the abilities that were utilized during complex and stressful situations.

FEELINGS AND THOUGHTS

Adaptation to a new environment is extremely difficult and it takes lots of patience and practice to adapt comfortably. I face many challenges in my workplace and earlier found it difficult to adapt. I also felt embarrassed when I needed help and could not ask anybody, fearing that my reputation would go down and that my fellow colleagues would make fun of me. Being equipped with the interpersonal skills, theoretical as well as practical knowledge about taking care of the patients and delivering the best quality of service, enabled me to climb up the ladder of success. Even though earlier

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it was difficult for me to interact with my fellow colleagues, now I can converse comfortably with anyone including my colleagues, patient, families and other staff members. Most of this was the result of feedback which I received from the patients, who generally praised my ability to empathize with the patients and then cater to their needs. As quoted above, feedback is an essential component for critical reflection, the positive feedback that I received from the consumers and my fellow staff members helped me visualize things with a different approach. I started enjoying my work. There were situations when I feared the outcome of some medical action. In my country, there are no rules and regulations pertaining to the safety of the health care professionals. This causes safety issues with the carers. Even I found myself in such situation when the medical practices could not save the life of the patient and his family members were outrageous, blaming the hospital for their loss, intending to burn down the entire building and take revenge. But then one should not be afraid of shadows, as shadows mean there is light somewhere near. There is an instance that reminds me of my good work and better performance as a nurse. I once cared for a boy who had been stabbed in the abdomen. There was profuse bleeding and I had taken every possible measure to stop the blood flow and restore the consciousness of the boy. Three weeks later, that same boy came with his parents and thanked me for saving his life. Such precious compliments and gratitude's count a lot in the long run.

EVALUATION

I realized that during my performance in the hospital, as a registered nurse, I had some positive as well as negative traits. Good command over English

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language was counted among my positive traits. This enabled me to quickly read and understand the nursing articles written in English. Also since I could understand and associate what was mentioned, I was able to deliver effective care to the patients. Also my expertise in the fields of pathophysiology and emergency skills made me an important person in the hospital. Whenever there was a case of any emergency, I was made responsible to monitor the patient and do the needful. On the contrary, the nurses who lacked the knowledge about emergency skills or were not fluent in English language missed the opportunity.

Ching Ying Lee (1998) has reported that nursing practice requires knowledge of proficient English as the nurses should be capable of using medical terms in fluent English. English is the most common language spoken worldwide and therefore, such a language should be known by all in order to address the cross cultural barriers in health care. Not only English is a common language but it has been named as the scientific language worldwide. Therefore, it is essential that all the communications pertaining to the medical condition of the patient, the health care outcomes and the treatment be explained in English to the patient as well as the concerned members (Mylaeus Renggli MI 1998).

Another positive point that added to my portfolio was the good interpersonal and communication skills. With these skills I was able to interact efficiently with the staff and the patients as well. In order to deliver better services I followed the rule of empathy. Whenever any new patient was put under my care, I listened to him/ her and tried to picture myself in her/ his situation, so that I can understand better about the current situation of the patient and

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accordingly provide the guidelines to the family and the other medical staff. Most frequently we were faced with situations in which the burden on the health care unit was so much that all the patients were not being given equal attention, due to lack of task force and increased number of patients. In such cases one or the other patient or the family member would stand and start shouting in anger. I helped in controlling many such situations by calmly making the individual understand our plight and thereby promising him that I will take care of his/ her family member as soon as I get free. I utilized my good communication skills to deal with such patients.

It is very important to have good communication skills in order to build trust between the patient and the doctor. It will consequently allow or enable the patient to disclose the information which might prove fruitful. Good communication also motivates the patient to get involved in the decisions related to health care, minimizes the risk of mishaps and errors and eventually enhances the satisfaction level of the patient (NHMRC, 2004). Literature has also shown the importance of understanding the cultural beliefs of the patients and making more accurate and meaningful decisions that are appreciated by the patient and the family both (Lawrence Dyche, 2007).

Another important learning from my experience was that knowledge is never enough. Even after being a Bachelor's degree holder, I found myself lagging behind in the field of pharmacology. Thus, it became the need of the hour for me to undergo a special three months training in this field and then I was all set and comfortable in explaining the patients about different drugs and their prescriptions. Although it is not advisable for the nurses to get into doctor's

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role and prescribe drugs to the patients but they should know what different drugs are meant for, so that if the patient has a query related to which drug is administered to him or why it is administered, they should be able to answer them with confidence (Clare Lomas, 2010).

One of the negative traits that I discovered within myself was not being able to extract the medical history of the patient. Emergency nurses should possess the skills of physical assessment as well as health history. This lag can be attributed to the overburden and work overload during the emergency situations. Another reason can be the demand for nurses as there had been shortage of nurses since of long time in my hospital.

Joann Griff Alspach (2011) has laid forward the importance of knowing the medical history of the patient as well as of his family. This is important because a track record of all the details about the illness that have been occurring in the family can help in predicting the prognosis of the current state of the patient. Also prior information can help the doctors determine the allergies the patient possesses when subjected to certain chemicals or drugs.

Another negative quality that I possessed was lack of team spirit. Whenever I had many patients and was overloaded with work, even though I wanted someone to help me, yet I never asked for help. I am now able to realize that team work is essential for efficient working of the team as it enables us to learn something new and benefit from each of the members involved.

ANALYSIS

My experience, expectations, feedback and results have majorly influenced the knowledge I have gained so far. My skills like being able to communicate proficiently in English and being able to understand the text presented in medical journals, which are generally written in English, has helped me gain recognition and my work has been appreciated by the authorities as well. Communication is an important aspect of health care as it promotes commonality of understanding and meaning (Sonia Allen, 2007). Also my skills like the knowledge of pathophysiology and dealing with patients during emergency situations helped me get positive response from the patients and their family members.

Though there are certain negative aspects also, like lack of team spirit and lack of ability to get medical history out from the patient, yet I am happy that I am now able to analyze my performance as a whole and can work in the field of teamwork and improve my traits further.

SYNTHESIS & RECOMMENDATION FOR FUTURE PRACTICE

I feel that I have precisely highlighted all my strengths, weaknesses, opportunities and threats pertaining to the nursing practices. According to the standards for practice specified by the Nursing Council, the very first principle to be followed is to respect the individuality and dignity of all the health consumers. Treating with respect means interacting with the consumers in a polite and considerate manner, thereby helping them cope with their deteriorated condition and enable quick recovery. It is important to understand the cultural needs as well and decide upon the course of treatment accordingly. All the registered nurses are expected to work in

partnerships as this enhances the working capability and also builds trust among the members of the staff, leaving no scope of discrimination. Another perception of working in partnerships can be with respect to the health consumers. It is important to listen to them, respond to their concerns and acknowledge their preferences as well. It is not necessary to give affirmation to all their preferences but only to those which are practicable. Also, it the responsibility of the nurse to encourage and motivate the consumers by providing them relevant and complete information about their condition, so that they can make decisions independently. Another point to be kept in mind is to respect and allow patient's privacy and confidentiality. The code of conduct should comprise of integrity so that the consumer's trust can be justified. Integrity means consistency in the principles and ethics that you follow and not abusing the position held by you or the trust of the authorities. Lastly, all the registered nurses must maintain public confidence and trust in their profession and also maintain the ethics involved (Nursing Council, 2011).

CONCLUSION

The aim of this essay was to provide a detailed outline of the analysis of the performance of a registered nurse, when working in the domain of adapting practice. The basic concept of critical reflection and how it modifies the outlook or the perception has been well explained with the help of live examples.