

120 Hour Practicum Journal

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Part One: Integration of Leadership and Management**Teamwork and Team Building**

“A multidisciplinary or interdisciplinary team is an interprofessional collaborative team involved in sharing, partnership, working together and power issues” (Polifko-Harris & Anunciado, 2012, pp.268). There are five stages in a team’s process, forming, storming, norming, performing and adjourning. The forming stage, “occurs when the group is created and they meet as a team for the first time” (Polifko-Harris & Anunciado, 2012, pp.270). The second stage, storming stage, “occurs when the group relaxes into a more comfortable team setting interpersonal issues or opposing opinions may arise that may cause conflict between members of the team and with the team leader” (Polifko-Harris & Anunciado, 2012, pp.270). The norming stage happens, “when there is a development of group cohesion and team members master the ability to resolve conflict” (Polifko-Harris & Anunciado, 2012, pp.271). The performing stage, “the group has cohesion, collaboration and solidarity are evident and personal opinions are set aside to achieve group goals” (Polifko-Harris & Anunciado, 2012, pp.271). The last stage is the adjourning stage. This stage is the final stage where, “termination and consolidation occur due to the team achieving their goals and assigned tasks” (Polifko-Harris & Anunciado, 2012, pp.271).

When discussing teamwork and team building with my preceptor she informed me that she sees teamwork as a big part on the unit. Teamwork is how she sees 7 Main running the way it does. Hallie’s example was that most of the people that she works with are the same people, Angie, Rachelle and they always help each other. The way they help each other is with admissions, passing medications, IV starts and treatments. Hallie said she always sees if anyone needs anything when she has time and she would hope someone would do the same for her. I

don't really see much in the way of improving the staff on 7 Mains teamwork by much. They all are pretty good about helping each other out and working as a team to accomplish the main goal of positive patient outcomes. Hallie said that the best person to talk about promoting teamwork and team building would be the PCC or the patient care coordinators and if she needed to talk to their unit manager she would take that approach as well.

In a study completed by Kalisch and Hee Lee the purpose was to determine if nurse staffing predicted teamwork. In their findings was that, "Higher levels of nurse staffing were related to better teamwork" (Kalisch & Hee Lee, 2010). Kalisch and Hee Lee report that, "taken together, it is hypothesized that level of staffing may impact teamwork, which in turn leads to patient outcomes" (Kalisch & Hee Lee, 2010). According to Kalisch and Hee Lee:

"Teamwork in this study is made up of an overall score for each patient care unit as well as scores on the five subscales representing elements of nursing teamwork presented above under a conceptual framework: the higher the staffing level the better the back up. Back up can either be physical assistance or verbal assistance. Having more staff would logically lead to more available of other team members to monitor one another and help when the need arises" (2010).

Teamwork helps the staff be able to accomplish the days tasks.

Evidence Based Practice

Part Two: Reflection of Goals

Reflecting on all of goals that were set for my 120 hours the feelings are that 90% of my goals were completed. My first forty hour goals, my goals were that I would like to demonstrate the ability to perform 5 IV insertions and maintenance of infusions using proper technique within

my first 40 hours. I was able to complete this by my last day which was October 21st, 2011. My second goal was that I wanted to demonstrate good time management skills and prioritizing of patient(s) treatments and medication administration for at least three patients. Using the word “good” was a problem because there is no way to measure that. However I was complimented on my time management and prioritization skills by my preceptor by Hallie saying, “I really saw you connecting everything this weekend. Time management and prioritization skills were great!” My third goal was that I would be able to verbalize the indications, dosages, physiological responses, and adverse/side effects for the top 20 most commonly encountered medications with the patients on 7 main at Mercy throughout my entire practicum experience. I was able to properly demonstrate this throughout my 120 hour practicum. My last goal was to be able to demonstrate effective therapeutic communication skills between patients and their families as needed on 7 main throughout my entire practicum experience. This goal was accomplished very early on in my practicum and every day working on 7 Main.

Looking back at my goals that I set for my second set of 40 hours were that I would integrate myself in the unit as a member of the staff based on the relationship-based care model. This includes making myself available as a member of the team that can be delegated to as well as delegating tasks to the unit RNs. I was able to accomplish this goal by always asking the other nurses if they needed anything help or anything done. I would ask the aides if they needed anything. My last two days with Hallie she actually gave me the phone that patients could call and that other staff on the floor could call so I was always in touch with the entire unit. My second new goal is to demonstrate good time management skills and prioritizing of patient(s) treatments and medication administration and assessments for three to four patients as by charting appropriately on those patients throughout a 8 or 12 hour shift. Again I used the word

“good” and I will say that my time management skills and prioritization skills did improve and I was actually able to have an entire team. My last two days I had 6 patients and passed medications in a timely manner and completed all assessments and vitals and charted them in a timely manner on all of them. My third new goal is to become able to understand the telemetry strips as by telling my preceptor what I believe the patient is experiencing in an 8 or 12 hour shift. I was not able to complete this goal because my preceptor and I never got to sit down and have her explain to me what to look for. My fourth new goal is to demonstrate proper discharge of a patient with medication information and all questions answered at least once in the next 40 hours. This goal was accomplished because the last three days I properly discharged about 7-8 patients. I gave discharge information such as medications to stop taking, continue taking and to start taking. Any tests and follow-up appointments I also informed the patient when he/she would have to set up the appointment.

My last set of goals included a goal that I wanted to demonstrate time management skills and prioritization of patient(s) treatments and medication administration on four to five patients by charting in a timely manner. I accomplished this goal on 6 patients my last two days. My second goal is to be able to verbalize appropriate and inappropriate skills that are delegated to the LPNs, aides and other RNs to my preceptor to show understanding. This goal was accomplished my last two days by delegating to aides when a patient needed vitals and also delegating to the student from Stark State to get vitals and an assessment and to chart in a timely and appropriate manner. My third goal is I would still like to demonstrate understanding of the telemetry strips as by telling my preceptor what I believe the patient is experiencing. I still did not complete this goal during my practicum experience. And lastly I wanted to demonstrate proper placement of IVs, foleys and be able to hang antibiotics and IV bags without verbal assistance from my

preceptor. I was able to accomplish this during my practicum experience but had no other opportunities for foley placements.

Part Three: Professional Reflection

As the 120 hours of this practicum came to an end there were a lot of mixed emotions. There was happiness that the 120 hours were over and now there was time to focus on other homework and classes. There was sadness that my experience on 7 Main was over and that the staff, who had helped me through these hours, I would no longer be around to ask questions and get a sense of belonging. There was also a very calming feeling that has not been experience since the start of the College of Nursing. It only took 11 days with ten 12 hour shifts and one eight hour shift over the span of a month and a half. A lot of information was learned during these 120 hours and a sense of accomplishment was the best feeling when the clock hit 3:00 PM. My preceptor, Hallie Miller, taught the important information I would need when I finally became a nurse. She was an amazing teacher and I feel thankful to have been put with such an amazing nurse.

During this last set of 40 hours more skills were able to be completed. I successfully started three more IVs and completed post mortem care. Whenever there was down time I took it upon myself to ask other nurses if there was anything I could do for them whether it be passing medications on their entire team or any skills that needed done. One of my patients had a Stark State nursing student and my preceptor allowed me to give report and delegate tasks to the other nursing student. Throughout the full 120 hours I was able to demonstrate my knowledge and complete skills such as administering medications, hanging IV fluid and antibiotics, dressing changes, starting IVs and completing other nursing tasks. Overall I feel very confident that what was learned is information that I will be able to apply to every day that I am working.

Professional Issue

References

