Anita Schultz

Course: Community Health Nursing

Professor Elaine Leinung

Narrative Self-Reflection

Objective 1: demonstrates individual professionalism through personal behaviors and appearance.

At the clinical orientation we discussed the appropriate dress code for the clinical site visits and what was expected of us as nurses and representatives of CityTech. I always dressed according to the dress code as delineated at our first meeting. It was important to me to portray a professional demeanor to give the staff and residents confidence in our abilities. In this clinical rotation the group was separated to three different sites and each site had a team leader. I was made team leader for my site. It was my responsibility to communicate with the service coordinator regarding our visits each week. I made sure to informed and keep abreast of our schedule, presentation topics and outcomes from home visits. The service coordinator and I worked together to ensure the center received the services they needed while also accomplishing our goals. Communication was key in ensuring a successful clinical experience.

Objective 2: Employ analytical reasoning and critical thinking skills when providing care to individuals and families in the community setting.

Each week the service coordinator had a list of clients that required a visit due to some medical condition. At times the list was enormous or the case load was heavy with serious medical concerns. Most of the time the service coordinator only wanted us to perform blood pressure screenings but upon assessment more was needed. I never let time constraints or the number of clients on the list, dictate my interaction with the client at hand. I always made sure to conduct a through assessment even if it focuses on the main medical condition. A lot of the times other medical concerns came up based on my assessment and rapport with the client. I was important to have the client feel secure with me being in their home and asking such sensitive questions. I always allowed the client to determine the access to their home and their lives. My goals were to obtain information and assist with intervention recommendations. Our assessments controlled the selection of presentation topics because it was the health concerns the clients were bothered by most.

Objective 3: Effectively communicate regarding the health needs of individuals and families in the community setting.

Communication was key in all aspects of this clinical experience. I had to make sure the clients understood why I was in their home and what I would be doing. I was also important for them to understand what I would be doing with this information once I was no longer with them. After every visit I organized a thorough note regarding my visits and recommendations which was given to the service coordinator to follow up. Every week I communicated with the service coordinator our schedule and plan for the visit. When the service coordinator asked for us to conduct more presentations we came up with a plan to have the other groups to come presents on a topic they already did at their home site. The service coordinator was informed who would be coming, what was being presented and if anything was needed. There was constant communication between the staff, Professor and out group.

Objective 4: Establish environment conducive to learning and use a plan for learners based on evidence base practice.

Every visit to the clinical site was an opportunity to teach the residents. Even if it was just a blood pressure check we made sure to explain the reading and what it means to them. I always made sure to have an inviting demeanor and was ready to perform when requested. All the presentations were topics that relate to the elderly population. The content was created using simple terminology and was translated into Spanish and Chinese since most of the audience preferred those languages. Every presentation was an opportunity for us to learn from the reactions of the audience and alter the next presentation based on our findings.

Objective 5: Utilize informational technology when managing individual and families in the community.

We did not utilize electronic patient records during this clinical experience but information was provided to use by the service coordinator from a database of all the clients. Information technology was utilized in conducting research for client visits and the presentations. I utilized my laptop to display the PowerPoint presentation with a projector. In addition I kept my team abreast through email correspondence.

Objective 6: Demonstrate a commitment to professional development.

I am a student for life. Everyday I am looking for new ways to better myself as a nurse. I recently took part in an intensive continuing education series on medical Spanish to expand my knowledge of Spanish and to be better assistance with this community. It was beneficial since I was required to translate the presentations in Spanish and my knowledge of Spanish is more conversational. I try to take advantage of any continuing education opportunities available through nurse.com or other nursing websites. I also have access to webinars through my place of employment that broaden my knowledge on topics I was not taught in depth during my nursing education like Substance abuse, HIV/AIDS and Hepatitis C. I subscribe to various nursing magazines to stay abreast of the changing medical world. A lot of research was conducted to develop and create the presentations for the clinical. This experience was very educational due to the amount of research that was required.

Objective 7: Incorporate professional nursing standards and accountability into practice

 Accountability to me is an ethical and moral issue. It transcends nursing. Being a nurse has been a dream of my whole life. I would never conduct myself in a way that would jeopardize my license or my status as a registered nurse. It was imperative to work within my scope of practice and consult with my professor whenever I am unsure of a situation to avoid problems.

Objective 8. Collaborate with clients, significant support persons and members of the health care team.

Collaboration and communication was conducted throughout the entire time I spent at the clinical site. The entire team, our classmates, the Professor and the residents were always made aware of our plans and what we did for the day. Everything we did was based on our assessments and collaboration with the service coordinator and approval from our Professor.

Objective 9: Recognize the impact of economic, political, social and demographic forces that affect the delivery of health care services.

 The residents in the facility are all low income and receive some kind of public assistance like Medicaid or Social Security income. The facility is also subsidized by HUD to provide affordable housing to the low income elderly. The changing economic climate is also a factor for the elderly because financial resources and dry out leaving these subsidized facilities in a difficult situation. With the Obama administration the push was to assist the poor and stabilize the middle class. The President had a lot of opposition with his goal to help his constituents and the economy. The Affordable care act was also created to provide necessary medical coverage to all that was lacking. It was beneficial to the elderly because it added the option of a managed care plan which lowered the out of pocket costs to the member. Those additional medical costs were causing the elderly to live in without means to survive because they had to pay medical expenses. The financial assistance the facility and the residents receive is importance for the stability and well being of this population.

This clinical experience was challenging and rewarding. I performed tasks I am not accustomed to doing and had to go outside my comfort zone. My goal in the beginning of the semester was to see the elderly in a different light because what I was used to was working with them in nursing homes. I am glad to say the residents of Harbor Hill are vibrant and active. They are not the stereotypical elderly person. They are independent, vocal and willing to learn. They take pride in what they do and work to maintain their health. I look forward to working with this population more and helping to have Community Health Nursing as a main component of their continued medical care.