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Clinical Self- Evaluation

Introduction

For Community Health Nursing, Course NUR 4010, my clinical site was the Stein Senior Center located at 204 East 23rd Street. This clinical site serves over one hundred seniors who live near and far. The overall objective of this course was to serve the members of this community center, immerse ourselves in all of the programs offered and build relationships with members and staff. As a nursing student who has experienced clinical sites in hospitals, this experience was special and rewarding.

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

At the clinical site, there was not any confidential information about members. The only time that private information was kept confidential was during blood pressure screenings, where the client's blood pressure would be recorded followed by their initials. This instance was the only time any client information was obtained. I was punctual to clinical and prepared for the day. In an instance where I was running late for the morning, I communicated with my professor ahead of time. I showed up to clinical with my ID and blood pressure cuff. I made sure to represent the school in a professional manner every week and did not behave inappropriately. Preparing for clinical learning meant being on time with all of my materials. I value organization and maintaining a well-ordered space, and I believe this helps to put me in the mindset to prepare for every clinical. Part of preparing is also reviewing tasks and completed work from the previous class, and staying on track for the objectives of the day. Being prepared for clinical was a group effort, as well, especially when working on a service learning project. Having a recorder in the group kept us all aligned and focused on our roles. I appreciate when there is an understanding among all clinical members of our roles. Assignments for clinical included presentations to the community members at the Stein Center. The presentation that my partner

and I were assigned was on the benefits of exercise after the age of 65. We both prepared a PowerPoint presentation, a short interactive quiz and handouts. We completed our assignment on time and were able to present to an audience of over 50 members. Guidance was sought appropriate to the clinical professor as well as the community director at the Stein Center. Whenever we were in clinical, respecting the site and following guidelines was a priority. Whenever I was confused about tasks, such as setting up monitors or printing, or using computer, I made sure to ask beforehand and follow directions. Seeking guidance was balanced out with taking initiative as a student, but usually only in instances where I was familiar with protocols and could make appropriate decisions on my own. Clinical conferences were a highlight of the collective clinical experience. I enjoyed speaking together as a cohort and reflecting on various nursing experiences, within the site, at school, and in the workplace. Conferences helped to create a sense of unity within all of the group members. This time allowed us to discuss tasks for the day, designate students for activities, and discuss important updates concerning our service learning project. Dressing professional was also important, for clinical I wore dress pants and a blouse/sweater with flat shoes. I did not wear revealing clothing or attire with offensive language/signs. I tried to dress comfortably and professionally, with respect to the dress code.

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

The client information that was gathered daily was attendance. Everyday, the senior citizens sign-in to the Stein Center and choose activities they would like to participate in. When we had to do presentations, we would get the signatures of citizens that attended that morning. During interactions with the client, I was able to obtain information about their heritage and background, and during client interview almost all of the citizens were comfortable with sharing information. Significant data that was obtained during interaction was blood pressure, and most shared they took medications and shared part of their diet. Complete physical assessments were not taken

during clinicals at the Stein Center; however, information about outward appearance, mental and emotional state, and nutrition status was visible through observation. Prioritization of needs at the center were based on following the schedule for the day, and assistant staff members. In addition, priority-setting and planning was established through interviews with the client, where I expressed by role and status as a student. If any health related questions arose, I asked my professor and advised citizens to seek their providers for more information. No medication was administered at the site, if it were it would be confidential and private in a medical record and under the supervision of the professor. Safety was of utmost importance, especially during lunch. Proper hygiene protocols were followed, such as wearing gloves, hairnets, and aprons when distributing food. In case of emergencies, we were told to call 911. Overall, client and community outcomes were met throughout clinical and I provided information and service to the members.

Objective 3: Effectively communicate with diverse groups and disciplines using a variety of strategies regarding the health needs of individuals and families in the community setting.

Therapeutic, and appropriate, communication was utilized during clinicals with all client interactions. When engaging with members, language was kept clear and understandable. Also, rate and volume was an important consideration since the members were elderly. My demeanor and approach with all of the clients was friendly and professional, and I felt genuinely comfortable talking with members and building a rapport with them. Whenever an altercation or a misunderstanding occurred it was always discussed during conference with the professor, though it was not often any issued occurred. Developmental needs for all of the citizens was appropriate and no one had any difficulty understanding or communicating.

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

Teaching initiatives and learning based plans were in the form of powerpoint presentations on relevant topics such as nutrition, fitness and exercise, and fall prevention. Presentations were

done weekly by different students. Most, if not all of the members, were very engaged during presentations. Members participated during interactive components of the presentations and were quite knowledgeable on topics. Most, if not all, thanked us for providing this information. This kind of feedback was helpful in determining if the content was relevant, and if we were successful in delivering the information.

Objective 5: Utilized information technology when managing individual and families in the community

No information technology was used during clinicals with the clients. If information technology such as EMR's were used at the Stein Center, it would have been strictly confidential and private under supervision by the professor. The only technology that was used during clinicals was a computer for research and preparation for the health fair. When using the computer's, content was saved on a USB and browsers were cleared.

Objective 6: Demonstrate a commitment to professional development

Many professional development opportunities arose in clinical that reflected community nursing responsibilities. Particularly, in planning for our health fair, as a student nurse I had to reach out to many organizations and representatives and persuade them to attend the fair. This involved advocating for the citizens and benefits of having a fair to promote services and opportunities to the citizens. Invitations to the fair were conducted primarily via telephone and email, which required learning how to professionally communicate with high ranking officials, directors and executive of distinguished offices and organizations. Professional development also extended to the day of the fair as well, when I engaged with said officials in person and had the chance to officially represent NYCCT.

Objective 7: Incorporate professional nursing standards and accountability into practice

From the first day of clinicals, our roles and responsibilities as a student nurse were discussed in conjunction with expectations from the clinical site, the Stein Center. All of the previous objectives mentioned were part of the content discussed. Important components of professional

nursing that I held myself accountable for included ethical practice, confidentiality of the members, and advocacy. As a part of the Stein Center mission, building relations with senior members and guarding their health and wellness, as a nursing student I dedicated to assessing problems that the elderly population has in the community, overall demographic and safety issues, and standard of living. Through nursing standards and clinical expectations, I was committed to providing above standard care.

Objective 8: Collaborate with client, significant support persons and members of the health care team

Collaborative efforts during clinical included support by all of the staff at the Stein Center, including program directors and coordinators. In preparation for the health fair, regular communication with staff occurred to which materials such as flyers and invitations were approved and printed. The staff at the Stein Center was extremely supportive in our efforts to coordinate the fair, and helped to notify and remind the members on a weekly basis of the upcoming event. Staff at the Stein Center were also helpful in identifying the types of resources that would be helpful for the fair, as well as providing contact info to organizations that would best benefit the members. The collective effort of myself, fellow nursing students and professor, along with the kind staff at the Stein Center truly demonstrated the power of teamwork. From our effort, over 20 organizations and 100 senior members attended the health fair and were able to access useful information, meet providers, and make connections for care.

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

While preparing for the health fair and service learning project, it was essential to take into consideration the economic, political and social demographics of the neighborhood. The Stein Center is dedicated to serving the elderly population, and its location, in Gramercy Park, posed challenges for this particular age demographic. Assessment of the neighborhood revealed that it was an up and coming middle to high class society, with mostly young and middle aged

residents. The neighborhood is quite expensive to live in, and there is limited access to affordable dining, fitness, and groceries. Gramercy Park is not the ideal neighborhood for seniors and in planning for the health fair it was important to bring providers and organizations that seniors may not otherwise have had an opportunity to meet. Economic, political, social demographic factors are important in a community setting because it helps to create a holistic view of the types of services that are required.

Conclusion:

It takes a special nurse to be a community health nurse. Community nursing is a tireless and selfless field, in many respects different than a clinical nurse. My experience at the Stein Center was extremely humbling and rewarding, and I had the chance to practice many nursing skills that extended beyond textbook assessments and medications. Thank you Professor Egues and all of the staff at the Stein Center for this opportunity.