

Professional Progress Summary

Briana Leinart

School of Nursing, Old Dominion University

NURS 481: Role Transition

Dr. Lynn Wiles

April 17, 2023

Professional Progress Summary

This paper is meant to provide the reader with an overall collection of the experiences gained throughout my two years at Old Dominion University's School of Nursing (ODU SON). At the start of the nursing program, an emphasis has been placed on cultivating student nurses on the eight core competencies also known as "The Great Eights". These eight core competencies are critical thinking, nursing practice, communication, patient teaching, research, leadership, professionalism, and culture. As I am nearing the completion of my Bachelor of Science in Nursing at Old Dominion University, I am now able to fully understand and apply the eight core competencies to my nursing practice which has better prepared me as I transition from a nursing student to a new graduate nurse. This assignment highlights the personal and professional growth I have obtained throughout the nursing program through several course projects, assignments, and clinical experiences.

Critical Thinking

Junior Year

During my junior year, critical thinking was introduced to me as the ability to facilitate nursing practice through injury, problem-solving, and synthesis. In the beginning, it was slightly difficult for me to pick up this skill as it requires much more than memorizing information off lecture notes or book pages which was what I became used to when completing my prerequisite classes. I remember sitting down for my first exam in nursing school and most of the questions expected the application of knowledge rather than the regurgitation of the material. My instructors focused on the understanding of basic nursing fundamentals in addition to the use of theorists and models to help guide our nursing practice. This foundation of knowledge assisted me greatly when I was completing my clinical logs, nursing care plans, and case studies. It

helped me look at the bigger picture when I was caring for a patient, and I began to incorporate a more holistic understanding of disease processes and their relationship to patients' conditions.

Senior Year

During my senior year, I started to feel confident utilizing my critical thinking skills and applying them to practice in the acute care setting. This was a skill that developed through my experiences and required assignments in nursing school. One example is when I was caring for a patient during my adult health two clinical. The patient was a 77-year-old female who presented to the emergency room a week prior complaining of a headache, blurred vision, and progressing left-sided weakness. Unfortunately, the patient was found to have had a hemorrhagic stroke in the right partial occipital lobe. When reviewing the patient's chart in the morning, I noticed that she was scheduled to receive Heparin, an anticoagulant medication. I was concerned because it increases the risk of bleeding and she had recently experienced a hemorrhagic stroke. Out of my concern for the patient's safety, I immediately informed my clinical instructor and the nurse I was working and we called the provider and verified that this was the correct order. Overall, this experience is one of the examples that shows how I progressed through my clinical experiences I have been able to incorporate my knowledge of medications, interpretation of lab values, and work effectively with members of the interdisciplinary team to create a proper plan of care for the patient.

Nursing Practice

Junior Year

During my junior year, the application of nursing practice was introduced in the didactic setting and soon evolved to clinical rotations and simulation labs. We first learned about assessment, diagnosis, outcome, planning, implementation, and evaluation (ADOPIE) and how

to properly utilize the nursing process. It was during these experiences that I started to understand the reasons for implementing certain interventions. Learning new nursing skills and head-to-toe assessments was slightly challenging to me at first, however, through practice and instructor feedback I felt that I could effectively implement these new skills in my nursing practice. The safe learning environment provided me an opportunity to feel competent with my newly developed nursing practice and I was able to confidently utilize those skills during real patient applications. This is an example of the growth I have experienced throughout my time in nursing school.

Senior Year

During my senior year, I was able to take my nursing practice to a new height. During role transition I was to become more independent and confidently utilize the knowledge I've gained over the past two years to guide my nursing practice. I was able to conduct in-depth assessments and implement the appropriate interventions. For example, I cared for a patient who presented to the emergency room with worsening shortness of breath and stated that this was not normal for her. This promoted me to review the patient's complete blood count (CBC) and arterial blood gases (ABG) which ended up being below normal levels. This information was important to me because I knew that the patient also had an upper gastrointestinal bleed and the worsening shortness of breath may be due to the acute blood loss. This results in less oxygen reaching the tissues, which may cause clinical manifestations like dyspnea, tachycardia, muscle pain, and fatigue. My interventions included regularly assessing vital signs, monitoring CBC and ABG levels, applying oxygen, and positing the patient with proper body alignment. This demonstrates my ability to not only utilize technical nursing interventions, but also evaluate lab

values and other information to critically think and provide safe and effective nursing care for patients that I cared for.

Communication

Junior Year

During my junior year, we were taught that communication could be delivered in verbal, non-verbal, and written ways. I focused heavily on being able to create therapeutic relationships with patients, families, and the interdisciplinary staff. My experience in the different types of clinical settings helped my communication skills evolve significantly. For example, when completing my behavioral health clinical hours I was able to work with many individuals who were struggling with mental illness including schizophrenia, depression, addiction, etc. These clinical experiences placed me outside of my comfort zone as I often couldn't relate to many of their experiences which sometimes caused me to not know what to say in response to some statements that were made. For example, I worked with an 18-year-old patient diagnosed with schizoaffective disorder that stated he had a queen ant placed in his ear to control all the ants and that he can communicate with all birds. In this instance, I continued to listen to him and asked him how this made him feel. This helped facilitate our conversation and over time I was able to learn that he was upset because his mother abandoned him as a little boy and that his grandmother was getting sick, so he was scared of what was going to happen. In the end, these experiences taught me how to use communication to create a therapeutic relationship with any patient and the importance of both verbal and nonverbal communication.

Senior Year

During my senior year, I became more familiar with the clinical setting, which increased my familiarity with communicating with the many members of the healthcare team when

utilizing the numerous informatics, technology, and communication devices. One such example was during one of my clinical days when caring for a patient who was admitted after having a stroke. During one of my assessments of the patient, they had a change in mental status and became unresponsive and unarousable. I immediately worked with the nurse and called a medical response team (MRT) for a stroke alert. The patient was then transferred to get a computed tomography (CT) scan where the healthcare staff brought out a portable computer and conducted a telehealth visit for a stroke. I was able to assist in giving report to the MRT and to the neurologist conducting the telehealth visit so they would better understand the situation and we could work together to create a more effective plan of care for the patient. I was then able to assist in documenting all of this information on the patient's electronic medical record (EMR). These experiences have continued to refine my communication skills with patients, families, and the healthcare team. Overall, this demonstrates my ability to communicate through the use of many different technologies.

Patient Teaching

Junior Year

During my junior year, the effectiveness of my teaching became more apparent as my understanding of the concepts being taught expanded, thus increasing my comfort level in this area of nursing. During the summer semester, I was placed in the Healthy Living Center (HLC) for my community health clinical rotation. My clinical group created a presentation on how to prevent and manage chronic diseases such as diabetes, hypertension, and obesity. During the intake process, many participants who were prediabetic or diabetic informed us that they did not perform regular blood glucose checks. With this information, we created informational handouts and uploaded an educational video that taught the participants how to perform blood glucose

checks with their glucometer while also keeping a daily log. Many participants found this video helpful as it provided a visual example of the steps that needed to be performed. By providing this education, it demonstrated my ability on using information technologies to communicate health promotion, risk reduction, and disease prevention.

Senior Year

During my senior year, I became more confident in my teaching abilities due to my experience in the clinical setting. In my nursing informatics class (NURS 417), we utilized the Patient Education Materials Assessment Tool (PMAT) to evaluate and compare the understandability and actionability of patient education materials. PMAT uses an inventory of both desirable and undesirable characteristics of patient education materials and produces a numeric score and ultimately allows us to understand the information that many patients are reading online. Using this tool, I evaluated CDC and Mayo Clinic websites to identify the strengths and limitations of the educational materials for diabetes. Through the use of this information technology tool, I was able to select educational materials that were most beneficial to patients while also enhancing my own knowledge base. Overall, the use of informatic technologies has allowed me to become more knowledgeable and aware of the educational materials that I want to utilize in my nursing practice.

Research

Junior Year

During the first semester of my junior year, my understanding and application of nursing research was extremely limited. I would often unintentionally utilize different types of medical research, rather than nursing research, to provide evidence for the application of nursing practice in my clinical logs and course projects. However, during the second semester, we were required

to take a nursing research class (NURS 363) where we taught all the different elements of research as it applies to nursing. I was then able to utilize all the knowledge and skills I learned in this class and apply them in my other courses. For example, when completing my obstetrics (OB) clinical case study for a patient who had gestational diabetes, I was able to utilize descriptive nursing literature to encourage breastfeeding due to the added diabetes-related benefits such as stabilizing newborn blood sugars, aiding in maternal weight loss, and decreasing the risk of developing Type 2 Diabetes Meletus. On the other hand, I utilized nursing research to suggest implementing an Oxytocin checklist in labor and delivery units throughout the county as the checklist resulted in a 14.5% decrease in cesarean births for fetal heart rate abnormalities requiring intrauterine resuscitation as well as a reduction of tachysystole incidences by 63%. In the end, I am able to understand that articles in nursing literature are utilized to establish clinical relevance and nursing research is used to provide evidence for the inclusion of interventions that are or should be implemented. This illustrates my ability to differentiate between descriptive nursing literature and published reports of nursing research.

Senior Year

During my senior year, I felt more confident in my understanding of research as it pertains to nursing. It is evident that I can now integrate and apply nursing research into all of my assignments as well as my clinical practice. While completing my role transition I started to utilize nursing research to learn more about the operating room (OR) and the role of the circulating nurse because I realized that this was the career I wanted to pursue after graduation. First, I was able to learn that the visit by the operating room nurse before surgery is an effective method in reducing the anxiety level of patients as it can leave the patient better informed and also allow them to feel as though they will have an advocate present while they are unable to

speak. Additionally, operating room nurses are often responsible for the proper positioning of patients and research shows that for every 30 minutes past a four-hour procedure the risk of pressure injury development increases by approximately 33 percent. Being able to effectively utilize nursing research has provided me with endless opportunities to continue my education and will assist me in becoming a better nurse for the patients that I care for in the future.

Leadership

Junior Year

My military experience set an early foundation for my developing leadership skills. During my junior year, I wanted to improve my leadership skills by taking advantage of any opportunities that arose in the clinical setting. For example, while at the HLC I helped organize and manage a telehealth intake appointment system where we would call participants that are signed up to take the HLC's cooking class. During the telehealth appointment, we would conduct a presurvey, obtain a food log, provide a brief overview of what to expect in the class, and answer any questions that they had. The implementation of this intervention allowed us to streamline the data collection process and improve patient understanding prior to the first class. After evaluating this intervention, we found that we helped ensure successful classes and in turn, helped promote healthy communities.

Senior Year

This last year of nursing school has provided more opportunities to lead and provide effective nursing care to my patients. For example, during role transition in the operating room, my preceptor encouraged me to delegate tasks to the service associate staff for requesting equipment needed during surgeries, obtaining blood for patients needing transfusions, and taking patient specimens down to pathology so that they can be tested for cancers and other diseases.

These tasks are often completed to advocate for the highest quality of care for the patient and help me to foster a great working relationship with the interdisciplinary team. Overall, this demonstrates my ability to delegate and supervise the nursing care given by others while retaining accountability for the quality of care provided.

Professionalism

Junior Year

After spending eight years in the United States Navy, I learned the importance of professionalism and the impacts it can have on your career. During my junior year, understanding the scope of practice as a nurse was essential when providing care to patients. While working with my community aggregate at the HLC we would conduct Hemoglobin A1c testing at the end of the four-week class to help identify patients who were prediabetic or diabetic. Oftentimes, many participants wanted to know exactly what their levels meant. As a nursing student, I understood that I was unable to provide a diagnosis based on the levels that were presented to me. I would then have to inform them that their levels were elevated and that they should schedule an appointment to talk to their provider to get a better understanding and ask further questions. By stating this to the patients, I demonstrated an awareness of the limits of my practice. An additional experience that I had was when I was completing my Rehab clinical and I was assigned a patient who was very friendly with all of the other patients while completing group therapy. When I would visit her in her room to help with her daily care she would often ask me for information on other patients. I kindly explained the Health Insurance Portability and Accountability Act (HIPAA) and that I was legally not allowed to discuss patient information and that I would have to refrain from answering any questions. In conclusion, these

examples illustrate my ability to understand the effect of legal and regulatory processes on nursing practice and health care delivery, as well as limits to one's own scope of practice.

Senior Year

During my senior year, I came to the realization that nursing professionalism was beyond the scope of my own self-ideals. Professionalism encompasses the entire healthcare framework based on the standards of practice that all organizational processes are based on. In my ethics, law, economics, and health policy nursing class (NURS 412), we were assigned to a group in order to create a health policy brief on a current healthcare-related bill. I was able to assist in creating and organizing the health policy brief on S.1567, Nurse Staffing Standards for Hospital Patient Safety and Quality Care Act of 2021. We explained that proper hospital nurse staffing has been proven to improve overall patient outcomes and increased patient satisfaction while also lessening burnout among nurses. We then sent our health policy brief to our local delegate and advocated for safe nursing standards and requested that they support passing bill S.1567 to establish minimal direct care for nurse-to-patient ratios which will improve the delivery of quality healthcare services and guarantee patient safety. Overall, this demonstrates my ability to advocate for professional standards of practice using organizational and political processes.

Culture

Junior Year

During my junior year, I came to realize the significance of understanding a patient's decisions and the cultural significance of defining health. While caring for a 66-year-old female admitted with sepsis due to mitral valve endocarditis she explained to me that the healthcare team suggested possible palliative and hospice options as she was not a candidate for a mitral clip and valve surgery. She was very upset with this information and wanted to get multiple

opinions so that she could proceed with aggressive medical treatment. In some cultures, talking about death and dying is offensive and seen as causing a loss of hope. People synonymously use phrases such as “giving up” or “ending the fight” to describe palliative and hospice practices. The patient explained that she was distraught while receiving this information and I remained empathetic and encouraged the patient to choose what decision she feels is in her best interest. In conclusion, this example demonstrates my sensitivity to personal and cultural definitions of health, and how these beliefs influence an individual’s reaction to the illness experience and end of life.

Senior Year

During my senior year, my awareness has increased to circumstantial factors that can impact the healthcare for diverse individuals. While completing projects in my community health class, we found that an individual's health status can be affecting many ways including culture as well as social determinants of health. As of 2020, Norfolk, Virginia has a food insecurity rate of 13.2% which is higher than the national average of 11.8%. Food insecurity is the limited or uncertain access to reliable or nutritious meals which can often be due to poverty, employment, disability, etc. Research shows that food insecurity is associated with a higher probability of chronic diseases such as hypertension, coronary heart disease (CHD), and diabetes. Often, families struggle to maintain health good health due to several factors related to food insecurity. In trying to reduce food insecurity, a social policy was created by the government named Supplemental Nutrition Assistance Program (SNAP), which provides monthly funds for people to buy the food they need to thrive. An intervention we implemented at the HLC was assisting participants in submitting SNAP applications in order to help address this issue and create a healthier community. Overall, this example illustrates my ability to consider the impact of

research outcomes and, the effects of health and social policies, on persons from diverse backgrounds.

Conclusion

Reflecting back on my two years at ODU SON, I have found that I have gained an exceptional foundation for the implementation of my future nursing practice. My medical assistant certification and military experience set a great basis for my path to becoming a nurse. The ODU SON curriculum was more challenging than I had initially expected and it made me appreciate the hard work and dedication that is required to become a registered nurse. I have gained an abundance of new experiences and skills that have shaped me into the nurse I strive to be. I feel that I excel at caring for patients through a holistic approach by not just providing care, but taking the time to understand the bigger picture. Although I consider my weakness to be communication, my time in the nursing program has assisted me in improving tremendously. In the end, I am thankful to the faculty that has imparted their knowledge to me and the clinical staff who took the time to aid in my development. As a novice nurse, I feel extremely confident in utilizing the eight core competencies in my future nursing practice, however, I believe that there is always an opportunity for continuous learning and improvement. As Florence Nightingale states, let us never consider ourselves finished nurses, we must be learning all of our lives.