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I must admit I was very apprehensive about clinicals at Orchard Park Health Care Center. Before our morning of orientation it was a somewhat vague unease that I have always experienced when visiting a nursing home. But by the time the morning was over I had worked myself into an emotional ball of knots, truly wondering if I would be able to properly care for the resident who had the misfortune of being assigned to me. His list of problems and impairments seemed overwhelming and I was sure that I would do something really bad. I went home that day and tried to analyze what was bothering me the most. His care plan was missing and even though I was assured by Joanne that I had more than enough information to go on, I felt like I was walking into a huge unknown and that it was all up to me to do it and to get it right. I was also really bothered by the fact that no one would be there to show me how it was done on a “real” person. Mannequins and classmates do not come close to simulating the “real thing” no matter how hard they try.

Now that my time is coming to an end, I am amazed at how quickly I have come to trust my knowledge and instincts and have become more confident and relaxed in my care-giving skills. The resident that I was so worried about hurting has become a real person to me. I am in tune with his moods and energy levels and feel proud and protective of him when I see someone else working with him. I think of ways that I can make his mornings go a little smoother and wonder what he does for the rest of the day when I am not there. I had no idea that just a few days of caring for someone would change my perspective that dramatically.

Orchard Park also provided a unique opportunity to practice basic nursing skills. The residents generally welcomed the extra attention that we students lavished on them

and they supplied us with a plethora of interesting sounds, symptoms and situations. In hindsight I like the fact that we were given “hard” cases. By using the philosophy of baptism by fire but providing enough guidance that we all actually passed the test, we finished clinicals knowing that we can be nurses.

I gained insight into the importance of teamwork in a healthcare setting and have started thinking of strategies that would provide the best possible care for the residents and the RN’s role in the team as a whole. It became very obvious that Orchard Park has a staff morale problem. There are individuals there who do their best to provide good, safe care to the residents but on the day shift they are a rarity. There is very little conversation between the workers and no easy interaction between the various levels of workers. NAC’s are reminded of their low status every time they ask an RN for an alcohol swab. Turn over is high and the new hires are not welcomed but informed of the bare essentials and left on their own to figure things out and are then treated like naughty children if they ask questions or need any help. They are responsible for too many residents per shift and have become driven by the clock rather than being able to focus on each individual person. To compound the problem, they take care of different residents each day rather than working with the same individuals. Corners are cut everywhere and their main comment is, “Just wait until you get out into the real world. Then you will do it just like me.” This atmosphere directly affects the quality of the care the residents receive and can actually endanger their lives. Standard precautions are not followed, changes in the residents’ physical, emotional and mental status are overlooked and their basic needs are not met. Nobody wins in a situation like this.

As I mentioned above, there are some people there who do a wonderful job and are shining examples of caring. I watched one NAC who was fairly new to the job

interact with a gentleman who was not feeling well one morning. He was lying in bed moaning and would not talk to me. I thought that he probably couldn't talk. Bell walked in and noticed that he had not touched his breakfast. She took the time to ask him what was wrong, to get him more comfortably situated in his bed and to lay out his food in a more appealing way. What amazed me though, more than what she did, was the gentleman's complete turnabout when he interacted with her. He began talking in full sentences, with a strong voice and called her an angel. He smiled and talked with her because he knew that she cared about him. He still did not feel well and never did eat his breakfast but his spirits were lifted, knowing that there was someone there who cared about him.

As I walked the halls today, I was very aware of how much I still have to learn. Heartbeats still sound the same to me and every person I passed had more experience in hands-on care than me. My pulse still races when I take someone else's pulse and every blood pressure measurement is somewhat of a crap shoot. But I was also aware of the eyes of the residents following me and how differently I view them now. They have become people to me--individuals with needs and desires, hopes and dreams and as a nurse I need to focus on their possibilities and potentials rather than their limitations.