During the incident as mentioned earlier there was many agency staff on duty. First the conflict occurred when the enrolled nurse on duty whose main role was to start the medication round after the handover was busy orienting all the agency staff. There was also conflict between the nurses as the registered nurse decided to delegate the role of orientating the agency staff to enrolled nurse who had other duties to complete. Another conflict was that there was no oxygen cylinder in the ward. It is the responsibility of the Registered nurse or enrolled nurses to check them at beginning of every shift. This shows that there was lack of top level supervision on nurse’s performance. In addition the nurses also forgot to manage patient’s airway by applying guddle airway in mouth. This was mainly due to nurse inexperience and they may not have proper education or training for emergency situation management. This reflects that there was negligence on the performance of nurses.

All these conflicts had a great impact on both patient and nurses. The Nurse had to start the medication round late as a result the patient received the medication later than normal time. The nurse patient ration should have lesser than 30.I think nurse patient proportion is also very high. It makes nurses high risk for potential mistake. One of the patient who was on special medication died couple of days later due to hypoxic brain damage as a result of not receiving the right medication and on time. The registered nurse was held responsible and she felt guilty because of not being able to fulfill her duty of care to the patient. Also the nursing management seen as disorganized. Such emergency equipments were not in place when it was required. There was a bad image of nurses among co workers.

As a student nurse what could I have done would be better is to help nurses to check the emergency equipments. From that incident I have learnt not to hesitate to put my view/ideas on patient care. I will also keep in mind that nurse as an advocate. I could have assisted the enrolled nurse in checking the medication chart for those who desperately need to take medication strictly on time. For example Parkinson’s medicine, insulin.

One of my great strengths during the incident was that I was calm even under pressure and I was able to apply my theoretical knowledge into practice. At first I was able to locate and find the oxygen cylinder. Then even though it was late I requested to RN that I wanted to try to use guddle airway as patient was snoring heavily. I did it successfully. I got an appreciation from paramedical staff. They said it was well done but most of the cases nurses missed to use it. In my view I would not able to do or think about guddle airway, if I did not have experience in emergency ward in past. In other hand, my weaknesses include, I was terrified to give a suggestion to use airway. I did not assist the nurses in checking emergency equipments and I did checked medication chart with enrolled nurse for those who need to take on time.

If I was a RN on duty, I would handle the situation in a professional and competent manner. As a leader I would lead the team effectively to achieve a common goal and carry on my responsibilities; provide best possible and effective nursing care. I think as a nurse in charge, one should have good quality of leadership skills. As a part of my job I would check all the emergency equipments and check if they are in working condition. I will also ensure proper staffing and the work load were divided equally so that there were no work overload to an individual which may affect the delivery of patient care. As part of a continuous improvement issue I would also inform the management about the phone interruptions particularly in morning time which would sometimes distract the nurses and cares which would affect their performance. I think they need more current in-service education and training for both nursing and care staff. As a RN in nursing home I will handle my job in professional manner.