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| **Objectives** | | **ANMC Competencies** |
| **1.** | Discuss the role of the nurse within a rural setting, identifying skills, knowledge and attitudes required to work effectively in a rural area of Australia. | 1.1, 1.2, 1.3, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 5.1, 6.2 |
| **2.** | Discuss the process of dialysis where possible on clinical placement. | 2.2, 2.4, 2.5, 2.6, 3.2, 3.3, 4.1, 4.2, 5.1, 6.1 |
| **3.** | To become more confident in handover | 1.1, 1.2, 2.5, 3.1, 3.3, 3.6, 4.4, 5.1, 6.1, 6.3, 7.2, 7.3, 10.4 |
| **4.** | Develop my knowledge on 3 common medications I administer while on placement. | 1.1, 1.3, 2.1, 2.2, 2.5, 2.6, 6.3, 7.3 |

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| **Objective 1** | **Discuss the role of the nurse within a rural setting, identifying skills, knowledge and attitudes required to work effectively in a rural area of Australia.** | 1.1, 1.2, 1.3, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 5.1, 6.2 |

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| **Date** | **CPD Activity** | **Evaluation** |
|  | To achieve this objective I will:   * Ask the nurses themselves about their roles and what they do every day. * Be involved in the active nursing care being given to the patients; observe what the nurses do and how they interact with the patients, also how they educate the patients. * I will behave in a professional manner and treat my patients with respect in and out of the hospital and also show respect to the other workers and doctors | * I feel that nurses working within a rural setting from my experience have a more laid back and welcoming personality towards their patients. That doesn’t account for all nurses but I saw a lot of nurses that engaged with their patients more than just doing their job. * The nurses actually showed that they cared for the patient more for the person they are than just another patient that has been admitted. * The nurses were always happy to answer questions and they made me feel comfortable to ask them about their careers as nurses and what they’ve experienced. Some nurses would share different tips and were happy to let me assist with things I hadn’t done before but some nurses were a bit reluctant and didn’t seem to enjoy having students around. * I felt the nurses did a great job in providing extra information to educate the patients on how to care properly for a wound once they leave hospital etc. I felt that more care went into providing information after they’ve been in hospital. Maybe providing patients with a little more advice before would be beneficial to help educate the patient and have a better understanding. * A lot of nurses I found could be a bit disrespectful towards a patient if they were being a bit difficult or would tend to refer to the patients with a stigma when at the nurses’ station etc. I find it easier to be polite to the patients whether they’re being difficult or not because usually they appreciate that extra attention. I think it would be best for nurses to keep their opinions to themselves and to remain professional. |

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| **Objective 2** | **Discuss the process of dialysis where possible on clinical placement.** | 2.2, 2.4, 2.5, 2.6, 3.2, 3.3, 4.1, 4.2, 5.1, 6.1 |

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| Date | CPD Activity | Evaluation |
|  | To achieve this objective I will:  -Review past lecture notes  -Watch or ask to assist the setting up of dialysis while on placement  -Ask the patients about their personal experiences with dialysis  -Ask the nurse as they have experience and may deal with dialysis often | -The nurses on placement are usually great when it comes to letting us students take over on a procedure or something we may not have tried before. When given the opportunity, I would try it so I can help myself get a better understanding.  -In a lot of cases, some of the patients have a better understanding and perspective on their own illness and the procedures they undertake so I find asking them about it beneficial. I usually take whatever information I’ve learnt from others experiences away with me because in the future I may come across someone in the same situation.  -The nurses would be the next best person to ask along with the doctors if I got a chance to speak with them. I find the nurses can explain it in a more simpler way because a lot of the time, they remember what it is like to learn something new. |

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| **Objective 3** | **To become more confident in handover.** | 1.1, 1.2, 2.5, 3.1, 3.3, 3.6, 4.4, 5.1, 6.1, 6.3, 7.2, 7.3, 10.4 |

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| Date | CPD Activity | Evaluation |
|  | To achieve this objective I will:  -Know my patients well  -Document any care I’ve provided the patient as it happens  -Double check with the other nurse in case they’ve done anything for my patients throughout the day | -Get to know my patient and build a therapeutic relationship with them. This way, they feel they can trust me and tell me if anything has changed with them health wise. Sometimes I notice some nurses that don’t really bother engaging with their patients that don’t require a lot of care  -Know what care has been provided to the patient the shift before. I notice a lot of the other nurses converse with the nurses from the earlier shift to fill in the gaps on what has gone on throughout the shift.  -Sometimes other nurses help one another out so before doing handover check with the other nurses in case they have.  -I feel if I write everything down, when I do handover, I don’t feel lost and feel more informed and can present handover in a better manner |

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| **Objective 4** | **Develop my knowledge on 3 common medications I administer while on placement.** | 1.1, 1.3, 2.1, 2.2, 2.5, 2.6, 6.3, 7.3 |

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| Date | CPD Activity | Evaluation |
|  | To achieve this objective I will:  -Review past lecture notes  -Check MIMS and any other books I have that provide information on the drugs  -Ask the nurses as they would deal with medications every shift | -A lot of the nurses would put me on the spot with a drug and ask me questions in regards to the drug. I felt that put me under pressure a lot but it made me want to review different drugs each day so I wouldn’t feel clueless if placed in that situation again.  -I got a lot of time throughout placements to catch up on work or to review some drugs so I would often grab one of the MIMs and review the drugs that a few of my patients have been prescribed that I’ve had to administer.  -The nurses were always happy to fill in the gaps if I wasn’t fully sure on what a drug did exactly or if I hadn’t heard of a drug before. |