Reflective Essay

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[Writer Name]

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Introduction:

The aim of this essay is to discuss how a 16 year old girl, Debby, lost her weight and appetite and how a Driscoll model of reflection will be used. This essay will demonstrate the nursing process and how it was applied. A system of planning in nursing process is to deliver the nursing care such as implementation, evaluation, planning and assessment (Barnard and Lloyd, 2012). The essay is to reflect on my role as Member of Multi Disciplinary Team (MDT) during a role play case conference. I will also discuss the obstacles that healthcare professionals may face during collaboration. I will look into the involvement of patients and their families with members of the MDT in making decisions concerning their care plan. I plan to show an understanding of loss, depression and health issues. The role play was about 16 year’s old girl that has type 1 diabetes but the mother is worried because she is losing weight and lost appetite. Type 1 diabetes patients need life-long insulin treatment to survive and dangerously have high levels of glucose in their blood.

To maintain confidentiality I have provided my patient with a fictitious name (NMC 2008):

My essay is based on Debby, who is 16 years old and suffers with type 1, diabetes which is a chronic Non-Communicable Disease (NCD). She had lost her weight and appetite and was called in MDT conference. After a short stay on Medical Assessment she was transferred to the department where she believed that her health condition should be managed in the community.

Multi-disciplinary team was arranged to identify what she needs concerning about her care. There is a great deal of input from a large team as well as Accident and Emergency nurse, Diabetic nurse, Community nurse, Adult nurse, mental health nurse, Dietician, General Practitioner (GP) and Social worker. Additionally, an assessment is made through Intermediate
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Care Assessment Team (ICAT) with the intention of finding the criteria which are accepted by the patient on this particular unit. The unit uses Driscoll model of reflection which consist of major stages to analyse practice on a basis to assess and identify needs. The stages include what happened, what did you learn or gain from the experience and what I will do if it happens again or how the experience will impact on future practice. It was about my role as a member of Multi-Disciplinary Team (MDT) in a case conference.

Assessment:

NICE (2011) stated that children and young adults that have diabetes should be providing continued integrated package of care by the MDT diabetes care team. Each team member has specific insights and skills. The purpose of this assessment is essentially undertaken in order to recognize the risk and highlight issue areas to give a platform for possible future intervention.

After the decision was made by MDT conference and Debby came to the ward, I decided to participate in her admission procedure. I decided to play the role of a General Practitioner (GP) to provide me a chance to learn about a profession. I also decided to play the role of a General practitioner that include timely decisions about referral and provide guidance on how to manage it in the community. I referred the case notes to Debby which consists of investigations, medical history and doctors notes etc. I outlined the problems that affected her understanding of the issue, management, engaged with diverse specialist and other professionals according to the family and patient needs. When Debby came to the health centre to see me as her GP, I checked her blood sugar level that was above the normal range. She informed me that her diabetes was not properly managed and I told her that if her blood glucose level stays high for a long period of time then it
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can lead to the development of more complications like diabetic ketoacidosis. I referred her for proper monitoring and treatment of hyperglycaemia in order to stabilize her situation before continuing her treatment in the community. DoH (2002) stated that single assessment gives better and more efficient access to cares services. The needs identified were particularly related to pain and mobility.

The understanding I learnt from the incident is the next stage of the Driscoll model of reflection. Reflecting upon my strength and weaknesses at some stage in the role play of the MDT case conference I felt that I gained understanding of nurses’ roles in patient care but my understanding of other health care professional roles was limited (Jasper et al., 2013).

Care planning:

This stage of nursing planning is to help identify issues and determine what approach should be used. During the role play of ‘GP’, the decision-making and problem solving skill applied by a nurse. This phase can be made by writing goals, setting priorities and planning nursing actions. On reflection, I felt this was a good thought, specifically for me as a student. According to Archibald (2000), nursing models used to provide systematic care delivery stemming from a need to sort out care logically, in order to enable the plan of care to continued and used by others. Nursing care plans played a vital role in promoting individualized approach to care delivery. Debby, aims were set to enhance mobility, to reduce pain and increase confidence in mobilizing by osteoarthritis. Newton (1996) stated that aims of nursing care must be achievable and realistic that reflects the patients aim for surviving so that they should set in close relationship with the patient and relied on assessment of the individuals on the
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understanding incorporated with them. The MDT case conference gave me the opportunity to have a better understanding of the roles of other professionals through learning from one another (Jani, 2011). On the other hand, I learnt so much about the dietician and the diabetes nurses, who are key members of the multi-disciplinary team case conference and their roles are very important for the continuity of care in the community. The dietician gives advice on eating a healthy diet, eating diet low in fat, sugar and salt. She encouraged her to eat a diet high in fibre and much of vegetables and fruits. She also explained how to balance the amount of food intake with the right amount of insulin (Taylor and Batey, 2012). This is to ensure Debby autonomy but also give her a clear picture of what will be expected of her during the rehabilitation period. It was invented that the aim set was highly prioritized and reviewed by a doctor. This also ensured that I would proceed concentrating on cantered results.

Evaluation:

In the nursing process, the final stage occurs continuously which provides care. The aims refer to the evaluation were set related to particular goals. In Debby’s case, this was her care plan. Thus the asked questions would be: Is Debby in pain? How well does the Debby mobilize? Is she confident in mobilizing alone? The intervention of therapy staff and their role was a key factor in Debby’s succession. This would be proved to the MDT about her succession in hospital reflected on her own living environment, thus an expected discharge date and which equipment’s were needed to ensure that the discharge is safe (Dunning, 2012). The evaluation of Debby’s care plan was fully understood by me and the MDT agreed that aims had been met.
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Conclusion

As an observer and care giver, I found that the care given matched the care planned. Outcomes achieved by collaborating among the Multidisciplinary Team and working closely with Debby and her mother. This experience has taught me the significance of diabetes care in relation to the nursing process and how an effective relationship between patient and healthcare professionals allows information to be recovered. The improvement of assessment and Debby’s involvement in care is emphasized in the care document. In actuality, MDT were depending in the same unit that allow benefit for both patient and staff and permit utmost communication to all concerned in relation to care planning.

Debby’s has commented how she enjoyed the meeting with the MDT and GP. Debby was encouraged by the MDT and maintained such independence feasible during her stay. As an outcome of this placement, I have benefited with it because it has taught me the significance of the nursing process. I have become well-organized in handling patients and utilizing it suitably with the intention of caring the patient in a holistic way.
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References:


