

Professional Development - Negligence in Care

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Opinion

“Nurses dispense comfort, compassion and caring without even a prescription”. (S.L.Bury, 2008).

Nursing Negligence is reported commonly in hospitals, due to multiple factors where the shortage of staff, form in sufficient theoretical and particle knowledge, communication skills, behavioral problems and time management issues have great impact on the inpatient and outpatient care. I observed that a nurse was administrating medication in a ward during my advanced concept in nursing clinical rotation at cardiac unit. When she asked client for medication, he refused to take it and said aggressively that why I take these useless medicines as it’s been a week in hospital but none of staff and doctors is taking care of my health, and I still don’t know why I am here admitted for so long duration, can somebody help me to understand my disease and progress on treatment please help? On the aggression of the Client, nurse stated that let me check your file and I will tell you about the disease you are suffering from. Upon checking the details, that client was reported as post Angioplasty with the history of hypertension and myocardial infarction. She further added in pitiful manner that as I am here only to perform medication and came as a helper form the other unit, therefore, I don’t know anything further, although, I will inform the nursing station that you need a help to understand about your disease problem and treatment progress. As a nursing student I was observing the whole scenario. I was performing vital signs in the same unit. In contrast, it reminds me the course of nursing ethics and fundamental of nursing which allow that health care professionals to follow the rights of patients, as their primary responsibility is to help and anticipate patients during care, where I felt it was being ignored. Consequently, the patient was annoyed and disappointed because of misbehaved and negligence. I believe that; “Human factors are the scientific discipline concerned with the understanding of interaction among human and other elements of a system, and the profession that applies theory, principles data and other methods to design in order to optimize human wellbeing and overall system performance.”(Human Factors and Ergonomics Society, 2000).

An example of the Cancer Centre runs by Macmillan in which the concept of caring matter comes first and secondly effective communication skills of nurses with patient is important. I consider that nurses have responsibilities to fulfill the most important aspect about their behaviors and communication. Every patient should be handled carefully and attentively. Department of Health highlighted the issues of staffing levels, attitudes and behaviors, poor communication, ineffective

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clinical and managerial leadership, and a failure to prioritize; all which are integral in human factors (2010). It has also been noted that advocating patients and providing them education in respect of disease and medication has been overlooked. As it is define by Joint Commission on Accreditation of Health Organization (JCAHO) defines “Negligence is categories into 6 components, failure to follow standards of care, failure to use of equipment in a responsible manner, failure to communicate, failure to document, failure to assess and monitor and failure to act as a patient advocate”.

After observing the situations I really want help that client based on my upholding knowledge, after finishing my assigned task, I went to that client and help to verbalize his feelings, and I was astonished in the whole week of hospitalization none of the health care providers explain about his diagnosis or treatment, After discussing with the facilitator, I choose the client for my teaching and develop critical care map which I learned first time in the course of advanced concept in nursing. Based on the assessment, history and problem identification and Nursing diagnosis and its interventions, I was able to provide the teaching on how to cure hypertension and the care of angioplasty. Later than I observed that client anxiety was released and he found comfortable on the gesture.

Furthermore, upon analysis of this scenario different situation various dimensions comes in my mind that may be most of the incidents are caused due to shortage of staff, prolong duties, knowledge deficit, which can be due to the lack of direct and indirect benefits to staff which cause demotivation, discouragement and poor performance of staff.

Such incidents have pondered me to look for literature support for nursing education, which is fundamental act for the patient satisfaction and also helpful for the referral to other patients as well. This shows good reputation and quality assurance of any organization. As a Patients may one day be able to check whether a hospital is recommended by just like they would read hotel reviews before making a reservation (David, 2012). They should be treated with holistic care as they come to hospital for the sack of wellness.

When I consider myself in that scenario, I would have explained the patient and family regarding their disease process and treatment facility. No matter I came in unit for the help at least before administration of medication I would look the diagnosis and the treatment. I must follow the dignity and accountability towards the subjective and objective concerns and feelings of patient. Nevertheless, I will reassure the patient to use the therapeutic technique of clarification instead of defending, and utilize the calm and patient approach. Additionally, follow the bills of rights, rights of medication, proper orientation of hospital and provide the health education as needed to decrease the anxiety of a patient.

I recommend that ongoing sessions for the continuity of education, certification courses such as medication and professional attributes must be conducted. Therefore, motivation in staff in respect of appraisal and increments leads to job satisfaction, reduction in turnover and uplift the quality care and professionalism in staff.