MEMORANDUM

**TO:**  NEW STUDENTS MAJORING IN NURSING

**FROM:** RACHAL TRIGGER, SENIOR

**SUBJECT:** THE NURSING COMMUNITY

**DATE:** NOVEMBER 1, 2013

The contents of this memo discuss the nursing discourse community in detail. Everything from the entry requirements all the way to advice from seasoned nurses is included. This information has been compiled as a way to give nursing students the “inside scoop” of what it really means to be a nurse.

**Requirements**

 Nursing has very specific requirements that must be met before joining. To obtain the title of nurse, one must graduate from an accredited nursing program, pass the national licensing exam (NCLEX), and then apply for a license to practice. This can be a very lengthy process, and it is only the beginning according to Vera Beadle.

**Work Environments**

Vera Beadle is a registered nurse, who currently has a BSN degree and is working towards obtaining a MSN degree. She has worked in many areas of nursing throughout her 20 year career. She started her career off as a staff nurse on a medical-surgical floor of a large hospital. After a few years she left medical-surgical nursing for a position in a rural emergency department. 10 years into her time working in the emergency room she decided she wanted a slower-paced job with less stress. She left her emergency room position, and took a job with community mental health. This transition offered a much more convenient work schedule, and much less stress. The field of nursing provides many diverse work environments that nurses can seek out. Some areas are vastly different. An example of two starkly different nursing work environments includes a doctor’s office and an operating room. She talked about how this is one of the greatest benefits of nursing. If a nurse becomes bored or “burned-out” in one area, there are many other areas that he or she can transfer to.

**Education**

Beadle talked about how nurses can have widely varied backgrounds in their education. To gain an entry level RN position the minimum educational requirement is an Associate Degree in Nursing. These positions are also filled by nurses with a Bachelor of Science in Nursing. Management positions generally have a minimum requirement of a Bachelor of Science in Nursing, but are often held by nurses with a Master of Science in Nursing or a Master of Nursing Administration. The Doctorate of Nursing degree has been gaining popularity in recent years. More schools are beginning to offer the program. Graduates of these programs are leaders in the clinical or administrative settings.

**Building of Knowledge**

Beadle spoke about how nursing requires lifelong learning. She began her journey as a nurse over twenty years ago with an Associate Degree in Nursing. She has since gained specialty certifications, such as ACLS and medical-surgical certification. According to her, gaining these specialty certifications is another way for nurses to build their knowledge and advance their careers. In recent years she has obtained a BSN degree, and very recently began a MSN program.

Beadle talked about one other way that nurses build knowledge. She really stressed the importance of evidence-based practice. She suggested that I look over a copy of the *American Journal of Nursing* (AJN). The AJN is a professional journal that is peer-reviewed and evidence-based. It also provides another opportunity for nurses to build their knowledge through continuing education. Beadle spoke about how it is necessary for nurses to complete a certain number of hours of continuing education in order to renew their license.

I visited the State of Michigan’s website, [www.michigan.gov/lara](http://www.michigan.gov/lara) to review exactly what type of continuing education is required for nurses to renew their license. Every two years nurses must complete 25 hours of continuing education. One hour must be on pain and symptom management. Nurses are instructed to retain records of completed continuing education for 4 years after their license renewal.

Another resource that Vera suggested I reference is the American Nurses Association’s website [www.nursingworld.org](http://www.nursingworld.org). The American Nurses Association (ANA) is a professional organization that represents the interests of registered nurses in the United States. Its mission statement is “nurses advancing our profession to improve the health for all”. The ANA gives nurses another chance to gain continuing education. It also puts out numerous peer-reviewed publications. However, the most important thing that the ANA does is advocate on the behalf of nurses. The ANA has lobbied to limit hours worked, to prohibit mandatory overtime, and to require nurses to get breaks.

**Surprises Upon Entering the Profession**

Beadle spoke about a few of the things that surprised her upon entering the nursing profession. The first thing that she spoke of was how new nurses were often mistreated by more seasoned nurses. This was so common that it even had a phrase to describe it. Vera told me about how nurses “eat their young”. She said that as a new nurse she would often be ridiculed if she did not know something, or if she made a mistake. She said it was also common to be yelled at and publicly belittled by senior nurses and physicians. She was happy to report that in her recent experience healthcare facilities have been taking steps to prevent this kind of workplace bullying. Facilities are implementing zero tolerance policies for this kind of behavior. The ANA also has a current program that focuses on preventing workplace bullying.

Another surprise that Beadle encountered as a new nurse was feelings of inadequacy. She felt that her education had not totally prepared her to be a successful nurse. These feelings were compounded by the bullying that she was often subjected to in those early months. She offered some advice meant to help new nurses find success in their early months of practice. She spoke about how new nurses should seek out a mentor. She said that they should seek out someone willing to teach, because the real-life learning begins once a nurse enters the field.

**Communication**

Janet Jacobs is the Director of Nursing at a long-term care facility. She is responsible for the entire nursing department of the facility. This includes around 90 nursing assistants and 25 nurses. She starts her day off with a morning meeting. This meeting is around an hour long, and its focus involves reviewing the nurses’ report sheets from the previous day, along with any incident reports that may have been completed. After morning meeting she addresses any employee concerns that may need to be addressed. She frequently rounds the facility, watching for any issues that may need to be attended to. Scheduling is another task that is completed as time allows. One of the most important jobs that she completes is resident/family care conferences. This is a meeting held every 3 months for each resident. The resident and their family come in to meet with the department heads to evaluate the resident’s progress and plan of care. This is an important meeting that encourages open communication and collaboration between the resident and their healthcare providers.

I spoke to Jacobs about the other types of communication that she commonly engages in. She spoke about how they frequently use a form called an interdisciplinary communication form. This form is basically a memo. The top has a section to write who it is to, who it is from, a subject line, and a date line. The bottom is blank, and is where the staff member writes whatever they need to communicate to a staff member in another department. The interesting thing about this form is that it has a carbon copy which the writer of the document is able to retain or place in a patient’s chart. This is helpful because it leaves a signed and dated paper trail of any communication that has taken place. Also, if it is put in a patient’s chart, it allows other staff members to see if a particular issue has or has not been addressed. This could potentially save a nurse a lot of time, and allow them to focus on issues that have not already been addressed.

Another common form of communication that Janet spoke about is the charting that is completed by the staff nurses providing direct patient care. This type of communication is put directly into the patients chart and is used to communicate not only with other nurses, but with physicians, therapists, dieticians, and other ancillary members of the healthcare team. She spoke about how this communication must be accurate and thorough. This is especially important in long-term care because chart review is a part of the state’s annual survey of the facility. If there are errors or vital information left out of a chart it could result in the facility receiving a citation from the state.

The facilities policies are a third form of communication that Jacobs spoke of. This type of communication takes place from management to the employees. The policies are very important, because they spell out the exact procedure in which tasks are to be completed. It is important that staff members follow policies because they are put in place to ensure the facility follows practice guidelines and maintains patient safety. Staff members must follow them carefully, or they risk disciplinary action.

Jacobs allowed me to review some of the sample care plans that are used in the facility. A care plan is a medical plan for the care of a particular patient. Care plans are another type of communication used by nurses. They are created by nurses, and list specific interventions that will be provided, followed by the outcomes expected. Nurses use these care plans to communicate their plan of care to other nurses and members of the healthcare team. They are also used to evaluate the effectiveness of the interventions being provided. Upon evaluating these care plans I witnessed first-hand the technical language used by nurses. Many abbreviations were seen, including AEB (as evidenced by) and R/T (related to). Another characteristic that I noted was that nurses tend to keep their writing concise and to the point. Short phrases and lists were used in lieu of sentences.

**Nursing Defined**

Both Jacobs and Beadle defined nursing in very similar terms. They both stated that nursing is defined by caring. Vera stated that “physicians treat, and nurses care”. Regardless of how far a nurse takes their nursing education, or the field of nursing that is chosen, all nurses have this in common.