

## **A Personal Medical Practitioner Service Analysis in Emergency Care**

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### **Abstract**

At a young age of five, I had my first experiences of medicine. At the childhood stage, I witnessed my diabetic father use injectable insulin. With the inner pain exacerbated by his suffering, my perspective would change immediately. As days passed, his state of health deteriorated. My interaction with him enabled me to notice his effort to avoid eye contact; neither did he speak unless necessary. The burden seemed too challenging to overcome at the time. My father's diabetic state at the nursing facility posed a critical impact on my life. Specifically, the state of interaction between nurses and patients attracted my attention. Patients were spoken to and treated in a dehumanizing way, proving to be extremely disturbing to me. The lesson learned was that sections of health care providers exercise appropriate care for their patients while others view the work as a job, failing to exhibit passion. Furthermore, the experience exposed me to the special care and medical needs of aging populations, upon which I ended up recognizing the significance of compassion and sensitivity as integral elements of health care delivery.

### **1 Introduction**

The experience attracted my attention to meditations regarding the nursing environment and its relationship with the medical skills provision. Indeed, advanced medical technology was a rare practice. The state left a lot of questions unanswered. On one hand, I gained interest towards understanding the causes, challenges faced, possible signs and symptoms, and perceived solutions to diabetes. On the other hand, the socio-economic state of the region remained non-permissive to such forms of in-depth analysis. My interest in the condition accounted for the passion that I developed in the eventuality, seeking to specialize in the field of medicine.

### **2 Methodology**

While at the elementary school, I would spend a majority of the lunch breaks reading medical newspapers and magazines that were published twice in a week. Furthermore, I engaged in presentations regarding the emerging technologies and findings in the field of medicine, pointing to the prevailing and dire state of lacking awareness among members of the community; as well as inadequate medical attention and treatment practices at the local, regional and national levels. Passion for medicine led to my participation in voluntary activities and cancer walks. The intention was to remain dedicated to promoting awareness among members of the society. Additionally, I joined various student clubs and affiliations such as scouting, literature and science groups. Such forms of group participation enabled me to become a responsible leader, having attained the skills of collaborative role performance and task accomplishment. Indeed, a combination of the group work skills and academic achievement at the classroom level accounts for the institutional and regional recognition through award-winning ceremonies. In summary, I perceive myself to be among individuals with a range of skills and numerous interests that fall in many career directions. Therefore, through the career experiences, I believe that the practices will prompt an optimal

utilization of the knowledge and skills gained towards better outcome achievement and quality improvement in the healthcare sector.

### **3 Results and Discussion**

In nursing and learning practices, reflection plays a crucial role. For instance, reflections depict that prior learning re-wires the brain. Therefore, a person who learns more about a subject of interest or a work task is more likely to become elaborate in terms of mental schemas. The outcome of this aspect is that the individual ends up connecting various underlying principles and concepts. In turn, the schemas offer an understanding about the manner in which elements of domains correlate, leading to competency in a desirable approach to decision-making and problem solving practices. Indeed, reflections aid in recognizing the value of learning as that which fosters an informed approach to decision-making and problem solving (Duffy, 2007).

Also, reflections project learning to constitute pre-existing schemas that aid in relating information to workplace experiences. Therefore, reflections imply that learning forms a foundation from which new information is processed and applied in situations that prompt its practical application. As such, reflections in learning are portrayed to aid in guiding task forces when faced with inevitable difficulties. A practical example in nursing is that which entails an emergence of conflicts due to multiculturalism. In such a context, diversity failures imply that differences may arise from the task forces' variations in linguistic and cultural backgrounds. Therefore, reflections present learning as a critical element in such situations because it (learning) enables members who have been exposed to knowledge in conflict resolution to exercise rationality while seeking the best option possible (Kuiper & Pesut, 2004).

Additionally, reflections suggest that individuals possessing knowledge or expertise in particular areas are likely to require less support and structure when faced with new situations. The implication is that reflection in learning aids in producing near all-round individuals whose flexibility or dynamic approach to workplace operations enables them to respond to situations accordingly; rather than retreat. The implication to nursing is that individuals who have attained knowledge are less likely to be overloaded or overwhelmed when faced with new situations in their field. This assertion is informed by observations that reflection fosters effective coping with new situations in the workplace; as members relate new information with what they already know, selecting credible from spurious tactics and important information from trivial data (Kindlen, 2000).

While assessing the practitioners' competence, reflections are highly valuable. For instance, reflections foster an understanding of an employees' trend in performance, critical in understanding the manner in which the nature of task performance aligns with the vision and mission of a company. Also, reflection is responsible for the transformation of experience into actual learning regarding individual goals and values, as well as larger scale social issues. Additionally, reflection challenges learners to connect service activities to the objectives of a course while engaging in problem-solving and higher-level thinking. Lastly, reflection is a crucial tool to the understanding

of task force competence because it fosters a sense of connection to communities while increasing a likelihood of the employees' commitment to service (Duffy, 2007).

#### **4 Conclusion**

Regarding the concept of task completion, commitment, and role performance in the place of work, an emergency situation arose when a customer visited the institution during lunch break. The male client sought assistance for his diabetic mother. Left alone in the facility, and with all computer systems shut while I was in the process of turning off the lights to break for lunch, I had to exercise professionally that combines with humanitarian ideals. I logged into the system and provided the needed assistance. Regarding the login details, I made a phone call to the senior groups with whom we worked. Success was realized when I stretched beyond providing the right dosage to advice the customer regarding the indications, contraindications, potential side effects, and the process of administration. In so doing, the emergency situation made me to feel satisfied and gain self-confidence during moments of crisis, should a similar situation arise. Overall, my beliefs regarding the significance of reflection coincide with those of the authors read. In both cases, reflection is believed to be valuable by enabling the care provider groups to understand the extent to approaches to tasks are aligned to the short-term and long-term goals and objectives of one's field of specialization.

#### **References**

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