

Refining skills of communication in more complex situations

Role play – Preceptee with a work colleague

PURPOSE OF SCENARIO: Conflict Resolution with a work colleague

PARTICIPANTS: Nurse and more senior nurse

LEARNING OUTCOMES:

Demonstrate the following skills:

- listening
- accepting responsibility
- assertiveness
- explanation
- resolution

SETTING: Initially in the corridor on the neonatal unit, moving into a private room

SCENARIO:

You are working on the neonatal unit and you are looking after two babies. One of the babies (Marcus) is ventilated and now that you are back from your break, you want to suction him. You briefly help at the neighbouring bed, making sure you keep an eye on Marcus' monitor by turning it so you can see it from the next bed. You feel pretty confident in performing suction and believe that you adhere to the unit guidance on this procedure. Mum (Emma) is present and you explain to her what you are about to do. As you complete the procedure a more senior nurse (Helen) shouts to you across the room telling you that you have performed the procedure wrong and 'we don't do it that way here'.

You feel very embarrassed and are aware that mum is anxious about this. Marcus has tolerated suctioning very well with no desaturations. You feel shaken up by this and mentally go back through the procedure to identify what you did wrong. You wonder if you kept your gloved hand clean, you thought you did. You wonder what else might have been wrong? You then approach your colleague Helen and ask her quietly if she has some time to talk through the incident. You are brushed aside by this colleague who says she doesn't have time to talk to you now.

You feel unsettled by this, another member of staff suggests you talk to the nurse in charge, however you believe it is important to address the issue now with Helen and await an opportunity to do so.

There are two issues you want to discuss, the approach taken by your colleague regarding shouting at you across the room and secondly, why she didn't use constructive feedback on a one-to-one.

On returning from your lunch break you see your colleague in the corridor and ask (for the second time) if she could have a chat with you in one of the empty cubicles.

ADDITIONAL INFORMATION FOR ACTOR PLAYING STAFF NURSE HELEN HANKS:

You are feeling cross today, you had requested not to work Christmas and have had to work Christmas Eve, Christmas Day and then New Year's Eve. You feel put upon and believe that this is not at all fair. What's more, home life is difficult at the moment. One of your sons has become very quiet and withdrawn and will not talk to you about what is wrong. You are a single parent and get very little support as a parent. You are also tired - this is your 3rd long shift and you have a night duty shift tomorrow night.

On top of everything, the unit is busy today and the skill mix is appalling leaving you working with a high proportion of junior staff. (You are not in charge of the unit; the nurse in charge is involved in a complex issue with a patient's family). You have your own workload and you had to correct one of the new staff, who you don't know that well, about a procedure.

The nurse (use whatever his/her name is) has asked if he/she can speak to you probably to talk about what he/she'd done wrong and to apologise. You didn't have time when they collared you earlier, but now they've asked you again.

(As far as you are concerned, you don't even consider that the request to meet you might be about how you spoke to him/her, that's normal behaviour for you – you haven't time to think about how you speak to staff, the most important thing is the clinical care of the neonates)

There were three things about the clinical care that you have an issue with:

The nurse (please use his/her name) had just returned from a break. Marcus (the patient) had been suctioned about 20 mins before and the nurse should have found out about this on their return to shift.

"We can't rely on family members to tell us whether things have been done or not".

"It's your responsibility to find out this information before repeating suction".

"If you had felt a repeat suction was necessary after such a shortish time then you should have discussed with me or a senior nurse)"

ALSO:

"The monitor was partly turned away from where you were standing at the bed space. I get that this was probably because you'd been helping at the next-door cot and there's nothing wrong with that but to be safe when suctioning that baby, you should have turned the monitor right back so you could see properly before starting with the suctioning".

ALSO:

"Your gloved hand to hold and advance the actual suctioning catheter is supposed to be absolutely clean. I saw you reach up and touch two of the infusion pumps between putting the glove on and before taking hold of the actual suction catheter".

"This really is poor practice and increases risk of lower respiratory tract infections".

The nurse is keen to talk to you about your approach. You were in the wrong to shout across the room, particularly in front of family and colleagues. This is typical of you. If the nurse makes a good case of how this made her feel, then you can reflect on it, if a little begrudgingly.

One of our aims with this scenario is to arm junior nurses with the skills to be assertive and speak up, so resolution of the situation would be the desired outcome, so that the participants feel empowered to go back out into practice and speak up for themselves.

You could accept that your approach has affected the nurse, you could offer to work with the nurse more closely (you are not her allocated mentor), you could suggest that she writes a reflective piece for her portfolio (or you could! for yours). You are unlikely to divulge much of the personal information above – this is more to give you some context.