Relational Practice Module Exercises

Module 5: Relational Practice with Healthcare Team Members

Exercise 5.1: Reflect on a time you observed nurses and doctors working together.

- Did you hear any language that conveyed a special status to the doctor or the nurse? For example,
  - Did the nurse say ‘yes sir’ to a male doctor or ‘yes, ma’am’ to a female one?
- Now reflect on a time when you saw or experienced the expectation of status by another health professional. Was this a nurse, a psychologist, a physiotherapist, a dentist, a social worker? Who? Does that matter? What makes you think status was involved?
- Can you think of any other examples that you saw?
- If you did not see anything like this, what does that fact teach you about status within the care team?

Exercise 5.2: Think back to an experience you’ve had working with Canadian nurses.

- Did you see them asking each other for information, clarification or help? For example, did you ever hear one nurse ask another to help her/him calculate a medication dose? Maybe you heard a nurse ask another to help clarify something in a chart or, to help refresh a skill such as tracheostomy care.
- What about your own nursing practice? How often have you asserted yourself in the pursuit of good client care? If you have not, what stopped you?

Exercise 5.3: Now think back to an experience you’ve had working with Canadian physicians.

- How frequently have you asserted yourself to a physician in the pursuit of good client care? If you have not, what has stopped you?
Exercise 5.4: Practice using SBAR. Take the example of Mr. Jaeger. Draw an SBAR table like the one below. Place each piece of that communication into it.

A further description of SBAR is helpful to learn what information a nurse should include in his or her communication.

**Situation (S)** begins the conversation. The LPN provides some context. For example in a crisis, the nurse might call a physician after hours to say “*Mr. Jaeger fell out of bed. He hit his head. His nose is bleeding. He is alert and oriented.*”

**Background (B)** provides more context so the listener (the receiver of the message) can understand how this situation occurred. It would sound like this: “*We had the side rails up. He was sleeping when last checked. He says he was dreaming he was at home. He woke up and had to go to the bathroom. He tried to get over the side rail to do so and fell.*”

**Assessment (A)** is then reported. “He appears to have fallen on face down. He hit his face. His nose was bleeding. We’ve stopped it. He’s been assisted back to bed. I examined his nose. It’s swelling, painful and he cannot breathe through it. He’s developing what looks like periorbital hematomas.”

The **recommendation (R)** does not include a diagnosis. LPNs are not allowed to diagnose. Only physicians and some Nurse Practitioners can do that. In the R stage, the LPN offers a suggestion to solve an issue or a problem or seeks guidance, advice or orders. For example the nurse might say: “*I wonder if Mr. Jaeger needs an x-ray?*” Or the nurse might say: “*Mr. Jaeger doesn’t have an Order for analgesics and I think he could use one for pain. What do you advise?*”

*Table 6: SBAR*

<table>
<thead>
<tr>
<th>S-situation</th>
<th>B-background</th>
<th>A-assessment</th>
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<th>R-recommendation</th>
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Exercise 5.5: Complete this case study in which you, the LPN need to make a phone call to the physician. Create a table like the one given and fill it in.

- Earlier in the day, you and the doctor talked about your client and you were under the understanding the intravenous would be discontinued today. Now, the doctor has left the unit but you see that the intravenous medication was not discontinued. The IV order still stands. The bag currently hung at the bedside is almost finished. You don’t think you should hang another but you are unsure. You don’t want to call the doctor but the other nurse on your team says you must. Using the concepts of assertiveness and relational practice ...

- What will you say? Using the tool, SBAR, prepare for that conversation. You are given the script for the beginning of the call.

Table 7: SBAR Exercise

<table>
<thead>
<tr>
<th>Introduction &amp; beginning</th>
<th>Hello, Dr. Smithski. My name is _____ and I am the LPN working on Medical Unit 5C. I am working with Mrs. Belowski, your client.</th>
</tr>
</thead>
<tbody>
<tr>
<td>S-situation</td>
<td></td>
</tr>
<tr>
<td>B-background</td>
<td></td>
</tr>
<tr>
<td>A-assessment</td>
<td></td>
</tr>
<tr>
<td>R-recommendation</td>
<td></td>
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</tbody>
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Exercise 5.6: Think of an experience you’ve had with health professionals at work in Canada.

- Have you witnessed a difference between the ways the nurses speak to male doctors versus female doctors? If so, that is based in gender-bias. If not, you may have seen some very good role-modelling of the concepts of gender equality.

Exercise 5.7: Reflect back to an experience on a hospital unit or in a care facility in Canada to answer these questions.

- Have you ever seen male nurses treated differently than females?

- How do you explain that?

- Do you treat male nurses differently? How so?

- Have you ever been told to smile when you are at work? How did that make you feel?