



ANMJ

AUSTRALIAN NURSING & MIDWIFERY JOURNAL



Launching your nursing career - Essential tips for early success

Introduction

Starting a new nursing career is an exhilarating experience full of potential and hopes for the future.

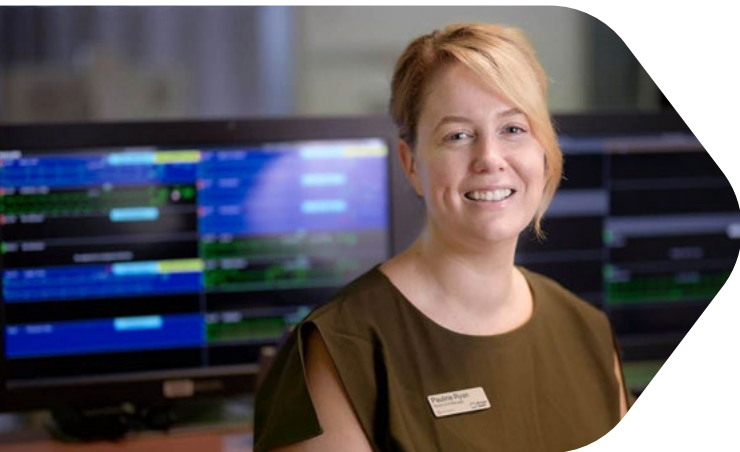
Being ready to begin your first shift as a registered nurse, you may feel a mix of excitement and anxiety. To help increase your chances, the following articles provide tactics to help manage your first nursing position. For more advice, go to: anmj.org.au



A NUM'S top 7 tips for early career nurses

By Robert Fedele

Starting out your nursing career can be daunting, exciting and challenging



Nurse Unit Manager (NUM) Pauline Ryan works at Victoria's Monash Medical Centre in a cardiothoracic and respiratory unit, overseeing everything from daily operations to engaging with patients about their care and monitoring clinical standards.

A large part of her role involves supporting and empowering staff to perform to the best of their ability.

Pauline believes a successful work culture is built on trust, accountability, transparency and shared goals.

"The best teams have a shared vision based not only on outstanding clinical care but also on values," she explains.

"The best health outcomes are also about meeting our patients' emotional needs and ensuring they are informed. Focusing on the human aspect of patients is so important and needs to be role-modelled."

Thinking back to her own days as a fledgling nurse, Pauline says the best piece of advice she received was to "trust your gut".

She says staff need to be supported with education and professional development but also must feel safe and confident enough to speak up and challenge the norm.

"Sometimes you can look at a patient and just know that something isn't right, even when their vitals tell you another story. Ninety-nine per cent of the time you are right. Speak up, tell your nurse in charge, a senior nurse or the doctor."

As a NUM, Pauline admits being responsible for a group of staff can be difficult and that it's important to acknowledge that challenges exist on both sides of the fence.

"I've learnt that it's ok to be vulnerable and let your staff know when you're stressed out or even not sure – we are all human after all," she says.

"I have learnt over the years that there is always someone to listen to or seek advice from.

"It's important to have increased self-awareness. Staff watch your reactions and feed off your energy. A great NUM to me is someone that is both a patient and staff advocate, innovative, kind and not afraid to speak up."

Pauline shared her top 7 tips for early career nurses with the ANMJ to help them along the journey as they navigate the profession.

1. Ask questions

I always worry if a new staff member never asks questions or for help. We don't expect you to know everything so don't be afraid to ask for help.

2. No shortcuts

Follow processes even if it takes you longer. Lay down a strong foundation during your early career days by always following correct processes. It will take longer to begin with but you will become a super nurse this way.

3. Communication

Communication and connection are vital so create a space where you can connect with other grads or new employees to share information and debrief.

Our educators use "team app" but there are other free apps out there that share tips/tricks.

Sit with your team and have lunch. Talk to your NUM or educator if you're struggling. Connect with those around you.

4. Be patient oriented

Don't be task oriented; be patient oriented. I often see new nurses become consumed with checklists or tasks. You need to be holistic in your care.

5. Be kind to yourself

Your grad year is about learning. Think of feedback in a positive light and a method to improve yourself.

6. Trust your gut

Your gut/intuition will develop over the years so learn to trust it.

7. Practice mindfulness

This is the best piece of advice I wish I had been told all those years ago.

Nursing requires increasing resilience and strong mindfulness practices can support this.

Find out what mindfulness practice works best for you and practice. It took me nearly a year to be able to meditate effectively and now I complete a meditation every night before bed.

If your team doesn't practice mindfulness, talk to your NUM about creating a group of "wellness warriors" who facilitate mindfulness activities for your team.

10 tips to avoid medication errors



By *Natalie Dragon*

Two call bells are ringing, a patient's pump is beeping and a relative has just motioned for a word as you've started your medication round. Sound familiar? It's important for nurses to become familiar with various strategies to prevent or reduce the likelihood of medication errors. Here are 10 tips that may help.

1. The 'rights' of medication administration

Ensure you know and follow the rights in medication administration: the right patient, medication, reason, dosage, route, frequency and time. Some ANMF Branches offer resources which highlight the rights of administration, dosage calculations and a drip rate guide for calculating drip rates. Check your local state or territory branch.

2. Know your medication administration policies, regulations and guidelines

Each health service has an obligation to ensure its medication administration policy and any associated guidelines are provided to every nurse or midwife at the time of orientation. Be familiar with the content, including practices on medication ordering, transcription, administration and documentation. Some units will have specific guidelines on areas at high risk for potential errors.

3. Keep focused

Interruptions have been identified as a major source of error during the preparation and administration of medications for nurses. Certain strategies including 'no interruption zones' and 'do not disturb' vests have been identified as ways to minimise drug errors. It takes a collaborative team effort for best practice with medication administration, such as freeing up time for nurses administering medication to be left to do just that as other staff answer phones and call bells.

4. Have a drug guide available at all times

Whether it's print or digital depending on personal or an organisation's preference, have a drug guide handy for reference. You need important information at hand, including trade and generic names, therapeutic class, drug interactions, dosing, nursing considerations, side effects and adverse reactions, and drug cautions such as 'do not crush' or to give before or with food.

5. Be aware of high alert medications

Be particularly alert to red flag medications that can cause irreversible harm or are particularly relevant to your ward or specialty unit area, including narcotics, continuous infusions of inotropes or concentrated electrolytes, epidurals, anaesthetics, and other specific drugs such as heparin. Know the protocol for anaphylactic reaction or overdose. Be aware of drugs used in your area that are often confused due to spelling or pronunciation.

6. Consider name alerts

Some organisations have name alert strategies in place to avoid potential medication mix-ups with patients with similar sounding names. Always check you have the patient's name and one other identifying question, such as date of birth before administering medication. Ask about allergies; don't just rely on the medication chart. Verify all allergies, not just medications.

7. Double check diagnosis

If you're unsure of a medication, check your handover notes or a patient's chart for their medical history. Be aware of medical conditions such as kidney or liver conditions that may affect metabolism of certain medications.

8. Speak up

Speak up and ask for help if you are unsure about a medication, patient or policy or practice on your unit. Know the limits of your own knowledge, skill and judgement. To keep your workplace safe, help to identify risks and report them using the appropriate risk-management process and incident-reporting systems. This will ensure that risks are brought to the attention of management and duly addressed. Best practice in medication administration needs to be assessed, evaluated and communicated by everyone from management to staff. It takes a collaborative effort where everyone shares in the responsibility of a safe culture.

9. Document everything

Take a thorough patient assessment and document everything, include any vitamins or alternative therapies the patient takes at home. Ensure you document any additional prn or pain medication given during your shift and handover at shift change-over. Don't use abbreviations in your notes, which can be misinterpreted.

10. Stay up to date

Use resources such as [NPS MedicineWise](#) to stay abreast of latest news and updates on medication administration. Your employer should also provide education opportunities and resources. Some health organisations require assessments or annual mandatory medication competency testing.

It's important to continually review your practices and reflect on your own medication management.

This post was originally published on April 12th 2019 and updated on September 29th 2020

What I learnt from my first month as a graduate nurse

By Robert Fedele



Registered nurse Melanie Challen finished her graduate year at Peninsula Health's Frankston Hospital in Victoria.

She undertook three rotations throughout her graduate year, working in gastroenterology and general medicine, the orthopaedic and plastics surgical ward and lastly in the emergency department.

Melanie followed in the footsteps of her mother to become a nurse.

She was attracted to the profession by the opportunity to care for people of all ages and with a variety of health issues, the ability to travel, the flexibility of shift work and the chance to work alongside like-minded health professionals with similar passions.

Looking ahead to the future, Melanie is setting her sights on undertaking post-graduate studies in Critical Care through the emergency department and completing a Diploma of Midwifery.

Her ultimate goal is to become a remote area nurse (RAN) and travel around Australia with her family while providing healthcare to rural and remote communities.

Melanie spoke to the *ANMJ* and reflected on her first month as a graduate nurse and the lessons she learned.

My first day on the job involved a supernumerary shift working alongside an experienced nurse, learning the routine for the day on the ward, exposure to the illnesses that I would work with over the coming months and discovering where to find the equipment I needed.

The first day on the job was a transition from student nurse to graduate registered nurse; similar because I was buddied with a nurse, but different because I was now allowed to administer medications and make clinical decisions.

In the back of my mind throughout the day also loomed the reality that the next day I would be by myself, although with support on hand.

That next day rolled around and I was extremely nervous, but I felt as though the supernumerary shift had me prepared for the shift

and I felt extremely well supported by my peers, leaders and educators.

I found that from there, every shift had its challenges but I was better prepared to face them.

After I finished my first shift I felt a range of feelings from being overwhelmed to feeling completely empowered.

My mum has always described nursing as both a science and an art – nurses are expected to understand the science of anatomy, physiology and clinical skills – this is what we spend years learning at university.

But a compassionate nurse will also see nursing as an art; there is an art form behind making a patient and their loved ones feel safe, special and well cared for.

The art of nursing is something nurses are born with, but we also develop it throughout our careers.

At the beginning I found this balance quite overwhelming, whilst also trying to balance time management.

I also found my first shift extremely empowering. I loved what I was doing. I trusted my instinct/gut feeling and I knew I had made the right career choice.

I quickly learnt that asking for help was brave.

In the past, I have held extremely high standards of self, and this has seen me value my independence.

I quickly learnt that striving to achieve everything by myself, particularly at the beginning was unrealistic and I was only disappointing myself when I failed to achieve all the tasks of the day.

It soon became apparent that asking for help from other nurses, educators and my leaders was brave and was resulting in better outcomes for my patients.



This also meant learning that it was ok to handover tasks to the next shift.

To that end, I also learnt that if I expected help from my colleagues and I was going to handover tasks to the next shift, I also had to be an effective member of the team and help others when they required it.

The thing they don't teach you at university is that the scenarios developed for our learning, whether it is a case study where a patient deteriorates, or a patient requiring an intervention, are likely to be only one of your many patients, and that those scenarios will not necessarily happen in the "real world".

You will also be caring for other patients at the same time that will require other interventions, or you may have more than one patient deteriorate and you will need to balance your time to achieve the best outcomes for everyone.

At university, you are also split into groups and there may be four of you caring for a patient who is deteriorating, so university scenarios are the 'perfect conditions' and that probably will not be realistic once you start your career.

The biggest challenge was leaving my hometown.

Being born and raised in Mansfield, I had never really ventured away from my comfort zone.

When considering which hospitals would suit me to complete my graduate nursing year there was only really two options: Mansfield District Hospital or Peninsula Health. Both had their individual pros and cons, and both would challenge me, clinically and in my own personal growth.

Little old Mansfield held my family, the challenges of healthcare in a rural/remote setting and I would be working in the hospital that I was born in.

The Mornington Peninsula held my boyfriend, a new start and a major metropolitan hospital.

I landed myself a position at Peninsula Health, and I remember walking in the main entrance at Frankston Hospital on the first day and feeling lost by the sheer size of the hospital, I did not know anyone and I had moved my life here.

After a year, it is safe to say I made the right decision and I love living and working on the Mornington Peninsula with Peninsula

I quickly found that my Graduation Certificate was in fact a ticket to start learning and that within a month of being a registered nurse I had learnt so much more than I did throughout my studies; and this learning has continued on throughout my graduate year, and I expect will continue for the entirety of my career.

Health, and I love returning home to Mansfield when I get a few days off.

My first mistake as a nurse was thinking that completing my university degree meant that I knew everything I needed to know about being a registered nurse.

I had spent years studying, watching lectures, attending practical sessions, performing skills on mannequins and I thought that all of this study would make me competent and confident with all the knowledge and skills I would require to effectively care for my patients.

I quickly found that my Graduation Certificate was in fact a ticket to start learning and that within a month of being a registered nurse I had learnt so much more than I did throughout my studies; and this learning has continued on throughout my graduate year, and I expect will continue for the entirety of my career.

The best piece of advice I got was catch people's glitter, and then spread it yourself.

At the beginning of my career I found that I was working with a variety of different nurses; as with any occupation there were nurses that I enjoyed learning from, and there were nurses that I didn't particularly agree with.

On debriefing with my mentors I mentioned this; and one of my mentors told me that throughout my career I will meet a variety of people that I don't completely gel with; but she said the objective was to catch the glitter that I liked, and then spread that glitter amongst others.

What does all that mean? That on every meeting I have with people there will be things that I do and do not like, but the objective is to take the good parts and carry them on in my own practice; and to let go of the things I don't like.

The thing I loved most was the variety.

Nursing is so full of variety on so many levels. The nature of shift work means that we are always working different days and different shifts throughout the day; sometimes we work weekends, sometimes we get a cluster of days off in a row.

The evolving roster means that we are always working with different members of the team and I enjoy the variety of working with different people; I see this as an opportunity to make new friends, to learn from different people and also to be an effective member of the team no matter who makes up the team that shift.

Most importantly, I have enjoyed the variety of caring for patients that come from different age groups, backgrounds and with distinct health issues.

I like that in the nursing world, no two shifts are ever the same and every day is a new challenge and a new adventure.

Something new I learnt about myself was that I CAN do it.

As I mentioned, I hold very high standards of self but this also means that I can be very self-critical and I doubt myself often.

Throughout the year I have worked towards being kinder to myself, whilst keeping my high standards and I believe, or at least I hope that this has been reflected through the work I have done. Each day I have been exposed to new challenges and I continue to surprise myself by managing and doing the best I can; and the next time I am exposed to similar challenges I feel prepared to deal with it.

A memorable moment that sticks out is caring for an elderly lady with advanced Alzheimer's who required surgery whilst I was working on the orthopaedic ward.

Prior to this, the patient was living at home with her husband. When the time came to escort the patient to theatre, the patient's husband refused to leave her so he walked with his walking stick down to the theatre with us.

I handed over to the theatre nurse and invited the patient's husband to walk with me back to the ward where I made him a cup of tea whilst he waited for his wife to return; but he refused and said that he would wait until she was sleeping, and when the procedure was complete, he would be there when she woke up.

Each day I have been exposed to new challenges and I continue to surprise myself by managing and doing the best I can; and the next time I am exposed to similar challenges I feel prepared to deal with it.

I cried all the way back to the ward for a number of reasons;

- I can only wish to be loved by someone as deeply as that gentleman loved his wife
- The privilege of being a nurse, resulting in me being exposed to that kind of love
- The trust that the patient's husband had in me to care for his beloved
- That to me, that patient was one of the four patients I cared for that day, and one of the many patients I will care for throughout my career. However, to that man, that patient was his whole world, which was a humbling reminder that every patient has a story and a family and we as nurses are just a small piece of that story.

My advice to new grad nurses is to be kind to yourself.

You can't look after your patients and your colleagues if you don't look after yourself. Find yourself a couple of mentors that inspire you both clinically and professionally; they will be the people that you debrief with so you can start fresh the next day.

After every shift I call my mum and tell her about my day and she tells me about hers; a problem shared is a problem halved.

Treat your patients as you would expect your loved ones to be treated; this is the golden standard for the care you will provide to your patients.

Be humble, be curious and try to learn something new every day. Help people, and they will help you. Catch a bit of glitter from every one you meet, and then spread that glitter on.



Not enough time

By Bron Watson



The feeling of ‘not enough time’ to achieve what is needed in a day can overwhelm the best of us. The stress of which not only affects the time poor nurse or midwife, but their colleagues and patients as well.

When it becomes too hard, and too much how do we minimise the effects of this type of stress?

Registered Nurse, Educator and former ANMJ columnist Bron Watson offers six tips to minimise the effects that could protect your own health and wellbeing and of others.

Tip #1

A typical day in nursing involves routine. You have learnt this over time, you tend to do the same thing, because that is what has worked, in the same order. It means you have developed habits, you know what is expected.

Why not have a ‘stocktake’ of your habits at work, what is working and what could do with improvement? Sometimes, a small change in the way you habitually work can add valuable minutes to your schedule.

Tip #2

Remove the word should from your vocabulary. When making a decision, choose to either do or don’t and forget the ‘should’. The word ‘should’ creates confusion and gives permission for you not to make the decision.

Tip #3

Take a quick break outside the building, fresh air and a place to free up your brain and rejuvenate your energy.

Tip #4

Time to lose the time pressure obsession or as researchers like to call it, time urgency. The state of time pressure creates a chronic state of worry in a hurry, or a constant rush hour.

Time urgency fuels the ‘not enough time’ disease, increasing the signs and symptoms we are all familiar with.

The workload will not go away, the staff shortages may not change, the one thing you can control is your ability to lose the time urgency and relax, concentrate on what you are doing, the patient in the bed, rather than the watch on your uniform.

Tip #5

In the current state of the nursing profession, taking care of yourself and wellbeing will lead to a sustainable future. The only person who can do that for you, is you. Taking responsibility of how you view your time, or manage very tight deadlines in an often unpredictable environment is a good place to start. Of course, there are many parameters and stakeholders involved, it is up to you to look after you.

Tip #6

Tell a friend, a colleague, a family member or your boss. This is about sharing your thoughts, what is happening and coming up with positive solutions, rather than using the same strategy.

Face the future with confidence.

At HESTA, we invest time in your super,
to help you invest in your future.

Our online Future Planner tool,
Retirement Income Stream, and
Transition to Retirement Income
Stream are just some of the many
ways we're supporting our members
to retire with confidence.

Learn more at hesta.com.au



Super with impact

HESTA ABN 64 971 749 321 is issued by H.E.S.T. Australia Ltd
ABN 66 006 818 695 AFSL 235249. Consider whether this
product is appropriate for you by reading the PDS and
Target Market Determination at hesta.com.au/pds.
For more information on Super with impact, see
hesta.com.au/impact.

