

Professional Practice within Health and Social Care Organisations

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## TABLE OF CONTENTS

<b>PART 1 .....</b>	<b>3</b>
Introduction.....	3
Scenario .....	3
Overview of Professional Issues .....	4
Leadership and management .....	4
Multi-disciplinary team.....	5
Communication.....	5
Risk Management .....	6
Accountability.....	7
Focused Analysis.....	7
Leadership and management .....	7
Multi-disciplinary team.....	9
Communication.....	10
<b>PART 2 .....</b>	<b>13</b>
Introduction.....	13
Opportunities for Professional Development.....	13
SWOT Analysis.....	15
Leadership and Management.....	15
Multidisciplinary Teams .....	16
Communication.....	16
Professional Development Planning (PDP).....	17
Conclusion .....	19
<b>REFERENCES.....</b>	<b>20</b>
<b>APPENDIX 1.....</b>	<b>25</b>
Leadership and Management.....	25
Multidisciplinary Teams .....	25
Communication.....	26
<b>APPENDIX 2.....</b>	<b>27</b>
Professional Development Planning (PDP).....	27

## Professional practice within health and social care organisations

**PART 1*****Introduction***

Organizational culture, dynamics and professional practices are one of the vital elements of any organization which reflect the sense of identity. It determines the organization's legends, rituals, meanings, value and norms, beliefs, language and the manner in which activities are performed around the organization (Cooke and Bartram, 2015, p.711). The essay revolves around exploring the dynamics, culture and professional practices of health care organizations. The part 1 of essay includes the discussion of the challenges faced by the health and care services in meeting the changing demands of public, overview of professional issues identified in light of a scenario and a focused analysis of the issues identified. The part two includes the opportunities for professional development for newly qualified nurses, swot analysis, a personal development plan of a critical stance in examining the nature of professional practice in context of contemporary health and social care.

***Scenario***

Here in this case the nursing staffs is looking after a service user going through his last stage of prostate cancer who shared his thoughts of committing suicide to senior nurse and asked her to keep it a secret. The nurse decided to share his thoughts of suicidal attempt with other professionals of healthcare and team members in order to provide extensive care not only from her side but from the whole team. Proper protocol regarding suicide and self-harm was followed by the nursing team and the senior nurse supervised it. Effective communication was maintained with Mr. Green, the factors which were causing the suicide

attempt were identified, and appropriate nursing interventions were maintained in order to deal with the risk factors. Collaboration with other staff and health care professionals was also increased to ensure further care and minimize the risk. Mr. Green was moved to additional care service unit and with no sign of self-harm behaviour or suicide attempt he passed away after 76 days of discharge, peacefully with his relatives. The senior nurse set a good example of efficient leadership, team management and professional decision making, ethically addressing her job description and saving life of a service user.

### ***Overview of Professional Issues***

A health care system comprises of all organizations, people and actions whose sole and core purpose is to promote, restore and maintain health (Swayne, Duncan and Ginter, 2012, p.10). With the vicissitudes in population and the rise in death rate across globe has also given immense rise to the significance of health and social care for both the individuals and society (Swayne, Duncan and Ginter, 2012, p.10). Moreover, with the growing significance, the health care management is entitled with number of challenges and professional issues such as leadership, management, multidisciplinary teams, effective communication, risk management, accountability, change management, time management and managing junior staff etc. (Storey, 2016, p.20). Following are the overview of five vital challenges and issues faced by the health care system.

#### *Leadership and management*

The organization entails health care professionals from manifold chastisements forming several interconnected care teams that strives towards providing safe and consistent care. Therefore, good leadership is an important and critical success factor of an organization (Kim, Farmer and Porter, 2013, p.1060). With multi-disciplinary teams performing both

homogenous and heterogeneous set of tasks, triggers management issues, since the job descriptions differ along with different cultures and work patterns which results in conflict and in few case complete miss-management. In view of Glendon, Clarke and McKenna, (2016, p.22), efficient leadership is a building pillar for an organization that can smoothly achieve all of the objectives, since it involves people, who are the best asset of any organization. In context of the above scenario, with the help of efficient leadership and management, the patient's decision of suicide became void.

#### *Multi-disciplinary team*

According to Cameron, et.al, (2014, p.225), multidisciplinary is a key feature of the contemporary service model of health care. It involves professionals from an array of disciplines working together to provide inclusive care to many patients needs as possible. The disciplines includes general practitioners, practice nurses, community health nurses, allied health professionals such as physiotherapists, occupational therapists, dieticians, social workers and health educators. Working in a multi-disciplinary team can be challenging. The issues that may arise would be in context of team formation and implementation, training, conflict management, confidentiality, team policies and friction in supervision (Tousijn, 2012, p.522). In light of the above scenario, the nurse contacted various health professionals to address the issue of the expected suicidal attempt from the patient. The patient was saved due to efficient team work, but in case of lack of confidentiality and conflict management it could have been another way around.

#### *Communication*

As highlighted by Moorhead, et.al, (2013, p.85), health care and social care professionals need efficient communication skills to develop an affirmative relationship and

share information with the patients. They need to master the art of communicating with the patient's family and with colleagues and related professionals. In the field of health and social care, various factors affect the flow of efficient communication; sensory deprivation, foreign language, complex jargons, slangs, dialect, acronyms, cultural differences, distress, health issues, environmental problems and misinterpretation of message (Moorhead, et.al, 2013, p.85). Moreover, other barriers to effective communication include aggression and assertion (Thomson, 2015, p.634). The scenario depicts an upright example of efficient communication, where the senior nurse emphatically listened to the patient, established a relation of trust and confidentiality and meanwhile communicated the issue to other medical professionals who took over of the confidentiality and assures extensive care for the client.

### *Risk Management*

Risk management refers to the process of identifying and analysing situations or practices that creates financial risk for the health and social care. It consists of developing strategies to control and mitigate the risk (Cameron, et.al, 2014, p.225). In view of Free, et.al, (2013, p.100), risk management cover the risks involved in service quality, staff risks, risks related to achieving goals and objectives and managing risks related to the health care reputation. The professional issues related to risk management consists of legal setting, dereliction, malpractice, mitigating malpractice and dereliction, confidentiality of medical records and patients' rights (Szmukler and Rose, 2015, p.125). In case of the mentioned scenario, there was high risk of patient committing suicide which would have tarnished the goodwill of institution due to staff negligence.

### *Accountability*

According to Magnan, et.al, (2012, p.37), accountability is the substantial issue in health care, it consists of the procedures and processes through which one party validates, justifies and takes responsibility for its activities. The health and social care accountability entails three core categories; financial accountability, performance accountability and political accountability. Financial accountability consists of tracking and reporting of resources allocation, disbursements and utilization by using financial tools of auditing, budgeting and accounting( Grajales,et.al, 2014, p.13). Performance accountability includes demonstration and accountability for target, outputs and services performance(Magnan, et.al, 2012, p.39). Political accountability includes institutions, procedures and mechanisms that ensure quality health and social services for the users. In light of the types of issues, the first issue is the miss-usage of financial resources. Secondly, the provision of appropriate and legal procedures, professional standards service and values. Thirdly, providing enhanced service delivery and management(Gradinger, et.al, 2015, p.661). As mentioned in the scenario, the nurse would be held accountable if the patient had committed suicide.

### *Focused Analysis*

#### *Leadership and management*

The key challenge facing all health and social care organizations is to enrich cultures that make certain the conveyance of endlessly refining high quality, safe and compassionate health care (Abualrub and Alghamdi, 2012, p.668).Leadership is the most persuasive and influential force in shaping organizational culture and therefore ensuring necessary leadership behaviours, qualities and strategies is significant. A leadership task is to assure safe, High-quality patient care; building a culture that fosters safety and quality, providing sufficient number of competitive staff and other care providers, managing the human, financial,

physical and information services and assuring a continuous flow of evaluation and performance improvement (Shirazi, et.al, 2015, p.125). The leadership issues in a health care organization stems from the absence of five pillars; using data, planning, communicating, changing performance and staffing. As mentioned by Lasching and Smith, (2013, p.24), the pillars are inter-related and must function in coherence to one another. The leaders are required to develop a vision and goals for each pillar's performance and to evaluate the performance. The health care systems require leadership at various levels of an organization. Firstly at individual basis, they are subjected to the issues of ensuring every patient's voice is heard, the experiences, concerns, needs and feedback are acknowledged as done in the scenario, where the senior nurse listened to the patients concerns and took immediate actions. Secondly, the leadership is required at team level, where the professional issues of meeting team objectives, working with cross-cultural members and navigating cross-boundary working arise. Thirdly leadership is also essential and highly important at organizational level. This incorporates the boards' leadership decision and approach towards attending, monitoring and rewarding on the basis of patient's feedback and by addressing the concerns of employees towards improving patient care.

The core challenge is to address the cultural problems of staff, motivational issues and stakeholder issues (Anderson, 2015, p.18). Moreover, the leadership at a national level, which is engrossed with the potential challenge of developing a single integrated vision, values, processes and demands. Besides, these the need for efficient health care management is the decision of which leadership style to follow as each has certain advantages and disadvantages; autocratic, democratic and laissez faire (Fitzgerald, 2013, p.227). In light of (Munir, et.al, 2012, p.512), there are various professional issues and challenges in context of health care leadership, which will increase if the leaders will not exhibit the qualities of high energy levels and stress tolerance, self-confidence, internal locus of control, emotional

maturity, personal integrity, socialized power motivation, achievement orientation and low needs of affiliation and leadership behaviours of being task oriented, relations oriented, external networking and change oriented (Asamani, Naab and Ofei, 2016, p.23). In the scenario, one can observe the clear reflection of effective leadership, where the professionals worked toward s single goal of saving the patient's life, and altering his decision of suicide.

### *Multi-disciplinary team*

According to Evans (2012, p.23) multi-disciplinary teams results in maximizing clinical efficacy. Multi-disciplinary is beyond the definition of various medical professionals from diverse disciplines working together. It is an art of shared goals and values in which the teams need to understand and acknowledge the competencies of other team members and need to develop an attitude of learning from other team members while respecting their beliefs and perspectives. Moreover, the teams need to reconsider and reassess exclusive claims to specialist knowledge and authority in order to provide best possible care to the patient. Working under a multidisciplinary team can be challenging, as professionals would find themselves dithering between adherences to their profession and to working to comprehend team goals (Imison and Bohmer, 2013, p.12).

The factors which influences the effective multidisciplinary teams include the management structure of an organization, the orientation of employment contracts of team members with comprehensive employment policy, maintaining a balance between generic and specific professional roles, the client group of the team, conflict resolution, training and preparation for working in multidisciplinary teams, information sharing and efficient communication and insufficient team enrichment (Hartgerink, 2014, p.791). The professional issues involves in multidisciplinary teams include team formation. The challenge of team formation entails efficient team building, the teams are usually not formatted in the earliest

stage of team formation which results in lack of a common vision and goals, the service focus on the needs of the population is not specific due to lack of team building, absence of budget and accountability, absence of agreed operational procedures and absence of organizational support and development to the MDT.

Secondly, the challenge of training, the team needs to be trained in the areas of team building, team working, medication management, mental health knowledge, interventions information and suicide awareness, prevention techniques and approaches. As in the scenario, the nurse had the training on suicide prevention and with a help of multidisciplinary teams efficiently prevented the suicide. Thirdly, conflict management since team members bring different ideas, goals, beliefs, values and needs to the teams, the difference are both a primary strength of team and a stimulus for conflict issues (Ke, et al, 2013, p.1).

The professional issue in context of multidisciplinary team includes the element of accountability. There is lack of clarity regarding the roles and responsibilities engrained in the multidisciplinary team and ambiguity in the boundaries of accountability compared with the job descriptions of key workers. Furthermore, the concern of confidentiality is another stimulating problem in context of multidisciplinary teams. The patients expects service providers to assure confidentiality specially in mental health services, conversely in case of multidisciplinary team the information has to be shared among all team members which is against the confidentiality ethics (West and Lyubovnikova, 2013, p.134). As seen in the scenario, the senior nurse had to share the information with other key members in order to assure the patient's safety and meanwhile maintaining confidentiality.

### *Communication*

In the contemporary health and social care effective communications play a significant role in working with varied range of people with the help of incorporating

different forms of factors that affect communication and ways of mitigating the challenges and issues related effective communication ( Kitson, et.al, 2013, p.4). The health care organizations use various form of communication; verbal in form of responding to patient's questions, identifying the problems faced by the patient, contribute towards team meetings, delivering bad news to patients or to their families, providing emotional support to the patient family and identify the individual's care needs. In case on non-verbal communication, the care providers need to assure their body, appearance and attitude communicates optimistic messages to the patient's regarding their feelings. Similarly the care providers need to develop efficient non-verbal communication skills e.g. interpreting the body language of patients; often patients say they are okay but their body language reflects the pain they are enduring. Non-verbal communication therefore entails facial expressions, touch or contact, gestures, proximity and eye contact (Weller, Boyd and Cumin, 2014, p.149). However, the health and social care providers face numerous communication challenges which often intrude the flow of efficient communication such as sensory deprivations and disability. E.g. in case of cerebral palsy, Down's syndrome and autism limits an individual ability of verbal communication and therefore the care providers have to face the challenge of meeting additional communication needs by the sensory impaired and disabled patients(Tomori, 2014, p.306).

Moreover, the challenge of foreign language and dialects; people from various backgrounds and cultures interprets non-verbal behaviour in diverse ways and may entail a diverse sense of humour which may result in misinterpretation of the message or lack of understanding from the receiver's end. In addition, the distress and emotional difficulties also hinders the flow of effective communication such as in case of a depression, anger or any other mental problem. Thomson(2015, p.640) highlights the environmental problems which may hinder the effective communication. Such as noisy and uncomfortable environments,

poor lightened environments, extra cold or hot environments and environment which lack privacy. Various professional issues may take place due to care provider's inability to adapt the environment, understand language needs and preferences, maintaining pace, using electronic devices, being an active listener, using influential body language, proximity, facial expressions, eye contact and assuring clarity in messages (Kitson, et.al, 2013, p.10).

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## PART 2

### *Introduction*

Throughout the past years nurses have gained significant importance and influence in all aspects of an efficient healthcare system. However, in the current healthcare scenario it is vital for the nursing professionals to develop effective leadership and management skills at an early stage in their careers. The present study primarily concerns the development and management of leadership capabilities within the nursing professionals and is disseminated into two main sections. The first section deals with the identification of core issues in professional nursing practice in relation to the case scenario. Moreover, this section also provides the significance and critique of three main professional challenges. Furthermore, the second section deals with identifying potentials opportunities for new nursing professionals. It also enumerates the strengths, weakness, opportunities and threats for the pre-identified professional challenges. Additionally, the concluding section of the study deals with developing measures in order to address the professional lags identified in the SWOT analysis.

### *Opportunities for Professional Development*

The NHS Institute for Innovation and Improvement (NHSI, 2011) admitted that nurses are imparted upon by immense responsibilities by the frontline staff, the patients as well as their attendants. Hence, adequate opportunities and skills can be identified as a significant resource to align the workforce and to ensure that the nursing professionals possess the required resources and behaviours to assure health and care. Appropriate clinical supervision can be considered as a means to ensure safe and accountable nursing practice. It can be annotated as a systematic process of professional learning and support which aids in the development of knowledge and higher competence among the new professionals (NHS,

2006). These supervisors comprise of necessarily the senior nursing staff or in some instances the physicians themselves. The supervising staffs serve as a bridging link between the theoretical and practical knowledge of the newly graduated nurses and form an essential ground for their skill development (Swihart, 2009). Furthermore, another potential opportunity lies in lifelong learning and professional development which can be acquired in order to meet the changing and challenging demands of the communities and drastically alters health care needs (AACN, 2010). Nursing professionals should consider becoming lifelong learners in order to advance their professional knowledge, skills, practice and values (Giri et. al, 2012). This kind of training can be provided endogenously by the supervisors themselves or specific informal learning and development programs can also be planned which has been discussed in the later sections of the study.

NHS (2006) narrated that the clinical supervision of nurses is a multifactorial construct and comprises of three distinct features which include formative function, restorative function and normative function. Formative function enables the supervisor to recognize strength and weaknesses in their subjects whereas the restorative function serves to build an affiliation between the supervisor and the nursing practitioner. Lastly, normative function primarily concerns safe practice and development of optimum standards for nursing practice. Swihart (2009) narrated that nurses are expected to recognize and respond to a number of patient demands arising from the increasing complexity in the health care system. In these circumstances, accountability can be regarded as an eminent professional opportunity where newer regulations, accreditation processes, financial priorities and professional standards are implemented from time to time in order to enhance effectiveness of the overall healthcare system. Additionally, American Nurses Association (2009) conceded that one of the potential ways to enhance professional responsibilities and learning in nursing is to increase their role and make them accountable for a number of services. These services may

include the provision of encouragement, support, advocacy and mentorship towards the patients as well as the junior nursing associates.

Briefly, all the three identified opportunities can be regarded as inter-related systems which can be addressed collectively through employing selective measures. Moreover, the competencies of the supervisory staff are considered to impart a significant influence in the professional development of the new nursing professionals. The opportunities thus identified, can be annotated as a means for professional development and long term sustainability of the professionals and an effective tool in future nursing management operations and services.

### ***SWOT Analysis***

#### *Leadership and Management*

<b>Strengths</b>	<b>Weakness</b>
<ul style="list-style-type: none"> <li>• I believe that my leadership and management skills serve as a bridging link between me and other health care professionals</li> <li>• Nurses are considered competent in leadership by virtue of a license to practice nursing (NLN, 2010).</li> </ul>	<ul style="list-style-type: none"> <li>• I feel considerable lack of knowledge in certain areas which adversely affect my management skills</li> <li>• In terms of new and developmental aspects of medicine my skills are limited due to which I am unable to supervise the junior staff in these areas</li> </ul>
<b>Opportunities</b>	<b>Threat</b>
<p>The multidisciplinary and interconnected nursing as well as health care professionals may serve as a potential learning and management opportunity for nursing professionals</p>	<ul style="list-style-type: none"> <li>• According to Dahnke (2009), nurses show their professional and management skills by serving individuals of different norms and values. However, this workplace diversity and value conflicts may serve as a potential threat for nursing leadership and management practices</li> </ul>

*Multidisciplinary Teams*

Strengths	Weakness
<ul style="list-style-type: none"> <li>• Synchronised and efficient work management is ensured</li> <li>• It serves as an essential mode of knowledge sharing and skill development</li> </ul>	<ul style="list-style-type: none"> <li>• Multitude of opinions and lack of expertise may result in significant conflicts among multidisciplinary teams (AANAC, 2013)</li> <li>• Lack of adequate communication and managing skills have also been experienced by me and my colleagues while working in teams.</li> </ul>
Opportunities	Threat
<ul style="list-style-type: none"> <li>• Working in a multidisciplinary team will improve my management and coping abilities significantly</li> <li>• It will provide me with newer opportunities for career growth and development</li> <li>• It will significantly enhance my communication skills</li> </ul>	<ul style="list-style-type: none"> <li>• Workplace diversity and difficult cultural acquisitions within the nursing field, if not managed, may affect the overall work process</li> <li>• Inadequate communication skills and increased workload results in potential conflicts between my team and a lack of tolerance is specifically observed in these scenarios</li> </ul>

*Communication*

Strengths	Weakness
<ul style="list-style-type: none"> <li>• It serves as a collaborative platform between the nurses and other health care professionals</li> <li>• Adequate communication skills serve as governing blocks for professional progression and development</li> <li>• It serves as mode of trust between me and the patients</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of adequate communication skills may lead to mistrust and the role of nurses is disregarded</li> <li>• Lack of professional knowledge may serve as a perpetuating factor for poor communication skills</li> <li>• I believe that poor communication skills are directly linked with inadequate managing and leadership capabilities</li> </ul>
Opportunities	Threat

<ul style="list-style-type: none"> <li>• In my opinion effective communication skills are a key opportunity towards the building and development of professional relations</li> <li>• I believe that they positively affect the patient's psychology resulting in optimum patient outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• It has been reported that long working hours, night shifts and increased workload adversely affect the behavioural attributes of the nursing staff resulting in poor communication and decreased interest in the patients (Kelly, 2011).</li> </ul>
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### *Professional Development Planning (PDP)*

Professional Issue	The area identified for Development	What needs to be developed	How is the developmental area going to be developed	When will this be commenced	How will the achievement be monitored
1) Management and Leadership	Lack of knowledge Lack of professional development in newer areas of medicine	Professional skills Professional knowledge Personal development	<ul style="list-style-type: none"> <li>• I will attend additional sessions put on in University.</li> <li>• I will take CME (continued medical Education) programmes for knowledge enhancement (ANCC, 2014)</li> <li>• I will spend more time with the supervisory staff to gain better experience and knowledge</li> <li>• I will take part in various CPD (continued professional development programmes) to advance my professional capabilities (Giri et. al, 2012).</li> </ul>	July 16	<ul style="list-style-type: none"> <li>• Practice Assessment Document</li> <li>• Supervisory staff</li> <li>• Module examinations</li> <li>• Appraisal</li> </ul>

<p><b>2) Multidisciplinary Team (MDT)</b></p>	<p>Multitude of opinions Lack of experience among nursing professionals Lack of adequate communication skills</p>	<p>Professional skills Knowledge management Behavioural control</p>	<ul style="list-style-type: none"> <li>I will take additional counselling and mentoring sessions from various health and social care providers</li> <li>Behavioural control will be a part of professional development programs such as CPD (continued professional development) (Giri et al, 2012)</li> </ul>	<p>July 2016</p>	<p>The supervisory staff The Hospital MD Nursing supervisor and senior associates</p>
<p><b>3) Communication</b></p>	<p>Lack of adequate communication skills Lack of professional knowledge Lack of leadership and management capabilities</p>	<p>Professional knowledge Communication skills Management and Leadership</p>	<ul style="list-style-type: none"> <li>Different mentoring and managing programmes can be held within the hospital or institution or extra informal sessions may also be held (NSHI, 2011)</li> <li>Counselling and learning sessions</li> </ul>	<p>August 2016</p>	<p>Appraisal Senior staff Corresponding nurses</p>

			can be arranged specifically for the nursing staff (Swihart, 2009)		
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### ***Conclusion***

The present study dealt with the issue of leadership and management which is a key requisite in the professional nursing practice of today. It incorporates a scenario presenting a patient with terminal illness and suicidal ideation which was effectively managed through the efforts of senior nursing staff. However, the patient died soon after but the death procured as a result of his illness not his past mental health concerns. The study highlights the main issues and professional challenges faced during the adequate monitoring and management of Mr Green and in turn the nurses' role in coping with these challenges. The challenges include leadership and management, Multidisciplinary team work, communication, risk management and accountability. The study depicts that by effectively managing these key professional concerns adequate and favourable patient outcomes can be achieved.

Furthermore, the second section of the study focuses on the potential professional weakness which primarily includes lack of skills and continued professional development which can be seen to impart an inverse impact on leadership, management, communication and MDT. These issues can be addressed by arranging specific training, professional development, continued medical education (CME) and continued professional development (CPD) programmes for nurses.

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## APPENDIX 1

*Leadership and Management*

Strengths	Weakness
<ul style="list-style-type: none"> <li>I believe that my leadership and management skills serve as a bridging link between me and other health care professionals</li> <li>Nurses are considered competent in leadership by virtue of a license to practice nursing (NLN, 2010).</li> </ul>	<ul style="list-style-type: none"> <li>I feel considerable lack of knowledge in certain areas which adversely affect my management skills</li> <li>In terms of new and developmental aspects of medicine my skills are limited due to which I am unable to supervise the junior staff in these areas</li> </ul>
Opportunities	Threat
<ul style="list-style-type: none"> <li>The multidisciplinary and interconnected nursing as well as health care professionals may serve as a potential learning and management opportunity for nursing professionals</li> </ul>	<ul style="list-style-type: none"> <li>According to Dahnke (2009), nurses show their professional and management skills by serving individuals of different norms and values. However, this workplace diversity and value conflicts may serve as a potential threat for nursing leadership and management practices</li> </ul>

*Multidisciplinary Team*

Strengths	Weakness
<ul style="list-style-type: none"> <li>Synchronised and efficient work management is ensured</li> <li>It serves as an essential mode of knowledge sharing and skill development</li> </ul>	<ul style="list-style-type: none"> <li>Multitude of opinions and lack of expertise may result in significant conflicts among multidisciplinary teams (AANAC, 2013)</li> <li>Lack of adequate communication and managing skills have also been experienced by me and my colleagues while working in teams.</li> </ul>
Opportunities	Threat

<ul style="list-style-type: none"> <li>• Working in a multidisciplinary team has improved my management and coping abilities significantly</li> <li>• It has provided me with newer opportunities for career growth and development</li> <li>• It has significantly enhanced my communication skills</li> </ul>	<ul style="list-style-type: none"> <li>• Workplace diversity and difficult cultural acquisitions within the nursing field, if not managed, may affect the overall work process</li> <li>• Inadequate communication skills and increased workload results in potential conflicts between my team and a lack of tolerance is specifically observed in these scenarios</li> </ul>
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*Communication*

Strengths	Weakness
<ul style="list-style-type: none"> <li>• It serves as a collaborative platform between the nurses and other health care professionals</li> <li>• Adequate communication skills serve as governing blocks for professional progression and development</li> <li>• It serves as mode of trust between me and the patients</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of adequate communication skills may lead to mistrust and the role of nurses is disregarded</li> <li>• Lack of professional knowledge may serve as a perpetuating factor for poor communication skills</li> <li>• I believe that poor communication skills are directly linked with inadequate managing and leadership capabilities</li> </ul>
Opportunities	Threat
<ul style="list-style-type: none"> <li>• In my opinion effective communication skills are a key opportunity towards the building and development of professional relations</li> <li>• I believe that they positively affect the patient's psychology resulting in optimum patient outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• It has been reported that long working hours, night shifts and increased workload adversely affect the behavioural attributes of the nursing staff resulting in poor communication and decreased interest in the patients (Kelly, 2011).</li> </ul>

## APPENDIX 2

*Professional Development Planning (PDP)*

Professional Issue	The area identified for Development	What needs to be developed	How is the developmental area going to be developed	When will this be commenced	How will the achievement be monitored
4) Management and Leadership	Lack of knowledge Lack of professional development in newer areas of medicine	Professional skills Professional knowledge Personal development	<ul style="list-style-type: none"> <li>I will attend additional sessions put on in University.</li> <li>I will take CME (continued medical Education) programmes for knowledge enhancement (ANCC, 2014)</li> <li>I will spend more time with the supervisory staff to gain better experience and knowledge</li> <li>I will take part in various CPD (continued professional development programmes) to advance my professional capabilities (Giri et. al, 2012).</li> </ul>	<ul style="list-style-type: none"> <li>July 16</li> </ul>	<ul style="list-style-type: none"> <li>Practice Assessment Document</li> <li>Supervisory staff</li> <li>Module examinations</li> <li>Appraisal</li> </ul>
5) <b>Multidisciplinary Team (MDT)</b>	Multitude of opinions Lack of experience among nursing	Professional skills Knowledge management Behaviour	<ul style="list-style-type: none"> <li>I will take additional counselling and mentoring sessions from</li> </ul>	July 2016	The supervisory staff The Hospital MD Nursing supervisor and

	professionals Lack of adequate communication skills	al control	various health and social care providers <ul style="list-style-type: none"> <li>• Behavioural control will be a part of professional development programs such as CPD (continued professional development) (Ciri et al, 2012)</li> </ul>		senior associates
<b>6) Communication</b>	Lack of adequate communication skills Lack of professional knowledge Lack of leadership and management capabilities	Professional knowledge Communication skills Management and Leadership	<ul style="list-style-type: none"> <li>• Different mentoring and managing programmes can be held within the hospital or institution or extra informal sessions may also be held (NSHI, 2011)</li> <li>• Counselling and learning sessions can be arranged specifically for the nursing staff (Swihart, 2009)</li> </ul>	August 2016	Appraisal Senior staff Corresponding nurses

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