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# **Professional Development and Care Planning**

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Professional Development and Care Planning

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#### Section I: Title and Abstract

Title: Professional Development and Care Planning

Nursing expertise and care provision skills are vital milestones in achieving improved quality service delivery within the Californian State Prison health care system. Besides delivering quality care, it ensures that patient data is handled with confidentiality to avoid unprecedented breaches. The initiative strives to improve healthcare quality, safety, equity, and efficiency through patient-centeredness. The in-service training and empowerment of nurses will support the process of imparting knowledge and practical skills to deliver quality services to prisoner patients. In so doing, it lowers the risk of emerging and re-emerging diseases within the prison population.

#### **Abstract**

The Covid-19 infection trend revealed to the Californian Prison healthcare system the importance of offering top-quality preventive and care services to control diseases. Irrespective of the understanding, there have been challenges in the transitional gap as older nurses are retiring and replaced by new ones. However, the lack of technical experience among the new nurses has exposed the patient population to human errors, which might be costly to amend. As a result, the initiative embarked on a project to train and empower nurses on preventive and care techniques.

Critical areas of concern include reporting, data collection, patient symptomology, results interpretation, and active delivery of quality care. The initiative took an in-service training approach through seminars, workshops, and conferences to achieve the goals. The training provides hands-on skills and evidence-based strategies for dealing with diverse prison care system issues. More importantly, it empowers the nursing team to provide patient-centric care to prisoner patients effectively. The initiative results are motivated nursing team, well-empowered and skilled team, lowered transmission of diseases, reduced number of new disease cases, satisfied prisoner patients and decreased the Californian Prison care unit's cost. In conclusion, nurses'

empowerment through skill provision is vital in ensuring capacity building, practical skill imparts, and assured delivery of quality care services.

Section II: Why did Start

# Problem Description:

Other than the current Corona Virus pandemic, the prison population is at risk of diverse emerging and re-emerging diseases and infections such as TB, HIV/AIDS, STI, skin diseases, and cardiovascular disorders. The population may be termed a particular group as the quality of care needs to consider issues linked to the provision of services, monitoring prisoners, congestion in the prison rooms, and diet challenges. While considering the problems, the in-service training strives to provide a nursing training initiative that will help neutralize the prison care system's vulnerabilities. As such, the Professional Development and Care Planning initiative is significant as it supplies the care team with vital skills to promote patient-centered care, system efficiency, and reduced infection rate within the prison population.

# Available Knowledge

The prison population is an at-risk population when considering the current issue of emerging and reemerging diseases. The only sure way to reduce the transmission of diseases is to have a stable preventive
model. As a result, the project strives to train, empower, and effectively improve clinical nursing competence.

More importantly, it will enhance their teamwork, critical thinking, communication, and problem-solving. In so
doing, there will be assured multidisciplinary interactions in approaching and solving diverse health challenges
with the prison care system. Understanding is crucial to reinstate the PICO Statement: In the prison healthcare
system, how effective is nursing practitioner training and empowerment in critical thinking, teamwork, and
problem-solving useful in preventing mortality and morbidity of prisoners.

It strives to reveal how nursing training improves their decision-making and coordination to achieve disease control and prevention. According to Chaghari, Saffari, Ebadi, & Ameryoun (2017), training is vital in empowering and building a care team. It provides them with evidence-based approaches, the practicability of

skills, and approaches to utilize to achieve the much-needed improvement in care delivery. Even though the American Association of Nursing (AACN) has hinted at a nursing shortage in the care system, training the available nurses will seal the gaps and provide an assured improvement in care delivery.

#### Rationale:

A successful control or prevention of an infectious disease requires an accurate understanding of the agent's behavioral makeup and characteristics, causing the infection. Moreover, the care team must understand how the agent interacts with the hosts and its environment (Nicoll, Gay, & Begg, 2010). While looking at the unique prison population, the nursing team needs to be empowered on the diverse mode of disease transmission, carriers' role, and the natural reservoir of infection. For example, issues with malaria or dengue fever could be approached by checking strategies to control mosquitoes within the prison system. To successfully manage the unforeseen infectious disease problems, nurses' training on approaching the condition is vital. The intervention is expected to work as it provides the care team with hands-on understanding and skills to prevent and provide patient-centric care to patients.

# Specific Project Aim

The specific project aims to improve nursing skills by 70% and streamline communication, teamwork abilities, and multidisciplinary coordination by 85% by the third month of project initiation.

# Section Three: What did you do?

The prison population is vulnerable to various diseases and infections such as kidney problems, hepatitis, paralysis, diabetes, tuberculosis, mental health disorders, and cancer. Such health issues demand high level and well-trained nurses (Ross, 2013). However, there is a situation where the prison department is supplied with new nurses without the required skills in prison preventive measures and care techniques. As a result, in-service training is a vital intervention in guaranteed improved and patient-centric care.

# **Intervention SWOT Analysis**

| Strengths |                                      | Weakness | ses                                    |
|-----------|--------------------------------------|----------|--|
| i.        | 100% attendance of all nurses        | i.       | Lack of new health technologies in     |
| ii.       | Easy recall and utilization of       |          | the prison department care system.     |
|           | learned skills                       | ii.      | Lack of nurse-trainer interactive      |
| iii.      | Prior knowledge in care delivery     |          | teaching                               |
|           | will improve the quality of service. | iii.     | The conflict between work hours        |
|           |                                      |          | and seminar/training hours.            |
| Opportun  | ities                                | Threats  |  |
| i.        | Hands-on training opportunity for    | i.       | A high rate of older nurses'           |
|           | all nurses                           |          | retirement                             |
| ii.       | Collaboration with local care        | ii.      | An increased rate of attrition rate as |
|           | providers                            |          | nurses look for opportunities          |
| iii.      | High-level support by local          |          | outside the prison care system.        |
|           | authorities                          |          |  |

#### Intervention

In totality, the intervention entails in-service training of nurses. Nurses will be trained on patient handling, disease prevention, and care techniques to reduce disease transmission from one prisoner patient to another. Nurses will be prepared and empowered by senior physicians and nurse leaders from the Californian department of health. They will also invite professionals from both the private and public sectors to encourage and motivate CNLs to work within the prison care system.

#### Measures

According to the Institute for Healthcare Improvement (IHI), measurement is vital in testing and implementing changes. Measures help the team to understand whether they are making the required lead to improvement. The most significant step is the discovery of new knowledge. The in-service training strives to bring new knowledge into the CNLs' daily practice (IHI, 2020). Additionally, it focuses on outcome measures that purely focus on the value impacted on patients. For example, is there a reduction in disease transmission? Are the prisoner patients satisfied with the care given by the nurses? Also, it checks on the process measures of the initiative. For example, are the multidisciplinary teams coordinating and working together to improve care delivery?

#### **Ethical Considerations**

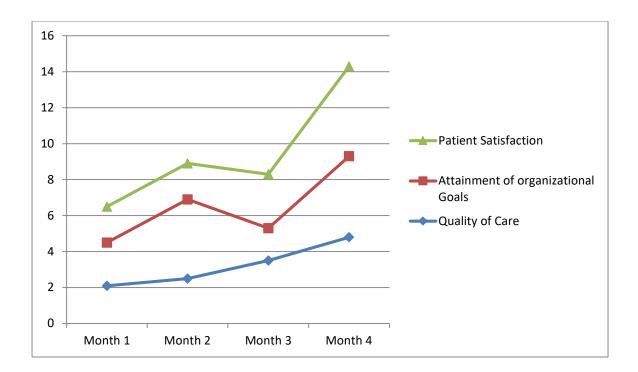
Ethical aspects considered in the intervention's execution were prison patients' informed consent, confidentiality, and privacy. Regarding privacy, it was made sure that no personal information was exposed during the training process. Moreover, patients and nursing team rights were respected. It is critical to mention that there was no conflict of interest in attaining the project's goals and objectives.

## Sections IV: Results

In the care microsystem, critical issues within health care delivery touched on patient symptomology, data collection, reporting, results interpretation, and active delivery of quality care. Accomplishing the goals and the demands in the care environment and in-service training initiatives through conferences, workshops, and seminars remained a sustainable intervention. The core reason being, training provides the nursing team and the multidisciplinary teams with hands-on skills and evidence-based strategies to approach diverse healthcare issues within the Californian prison care system. Additionally, emphasis on a value-based approach to healthcare provision presented an excellent opportunity for nurses to adopt patient-centric approaches to care delivery.

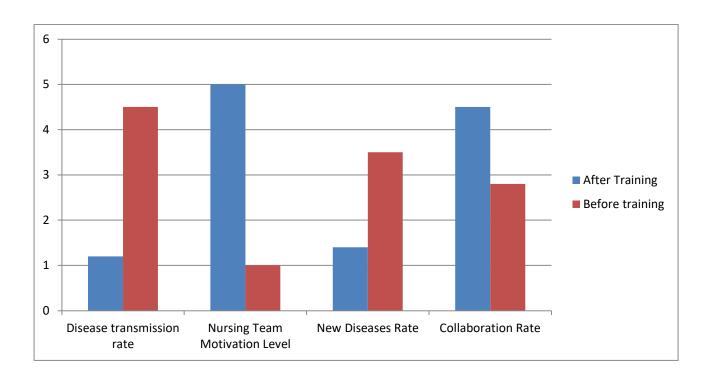
Analytically, the program showed that training or educating nurses is a vital investment for healthcare programs in care units. It triggers internal promotion opportunities, the success of organizational plans, and staff

development leading to improved care. The training demonstrated efficiency in the improvement of the quality of patient care and satisfaction. The following graph shows changes in the rate of satisfaction among the prisoner-patients.



The graph shows that after training, the quality of care, patient satisfaction, and organizational goals in delivering patient-centric care took an upward trend. The core reason for attaining the documented improvements is based on the fact that training was executed in a manner that enhances the capacity and ability of employees to deliver quality services to the prisoner patients.

Additionally, the program worked effectively in promoting the level of motivation that the nursing team had in regard to delivering quality services to the patients. The last four months show motivated nursing team, lowered disease transmission, reduced number of new disease cases, well-empowered and skilled team members, and satisfied prisoner patients. More importantly, the improvements in care delivery are closely linked to the lowered cost of operating the Californian Prison care unit. The positive trend is reflected in the graph below:



During the program, there are numerous progress changes and modifications made to the intervention to ensure that success is achieved. First, the program's initial plan was to educate the nurses on the areas they do not know about real-time patient care. However, it emerged that the in-service training needs to pay attention to nurses' competency and empowerment to enable them to help the Californian Prison care system achieve its goals. Therefore, the modification was done on the level of participation of nursing teams. For example, there were two sessions, one in the morning hours and another in the evening. The core reason for such arrangements is to ensure nursing teams are provided with flexible times to access the training sessions.

Additionally, an aspect of adult learning principles was included in the progress. In the learning process, adults are aware of the learning intentions and objectives. As a result, they know the specific areas or approaches that need to guide their learning processes. More importantly, they are self-assessors of what they have learned and how well it is applicable in the care delivery microsystem.

Analytically, there were no unintended negative consequences, failures, or costs as everything worked as per the plan. However, there were unintended positive outcomes. For example, the training nurtured multidisciplinary team collaboration towards the achievement of patient goals and objectives. As a result, it played a critical role in assisting the organization in achieving its primary role in delivering quality patient-centered care.

## **Section V: Discussion**

The in-service training fostered crucial skills and abilities for the nursing team. For instance, it promoted a problem-solving approach, search skills, motivational factors, clinical performance monitoring, disease prevention, staff participation and tackling healthcare microsystem challenges, and approaches to overcoming in-efficiencies in prison care systems (Tanner, 2010). The approach offered an excellent environment for nurturing essential grounds for achieving patient-centered goals and objectives.

The program offered prison and clinical administrators an opportunity to initiate local programs to provide training to the stakeholders. As initially highlighted, the prison population is at risk of emerging and reemerging diseases and infections. For example, the population is at risk of Covid-19 due to challenges in the social distance and sanitization needs. Additionally, they are vulnerable to STIs, HIV/AIDS, TB, cardiovascular infections, and skin diseases. While considering the risks and susceptibilities surrounding the prison system, it is no doubt that the population is made up of a special group requiring close monitoring. The in-service training served as an important ingredient of neutralizing the vulnerabilities and providing alternatives to promote success in care delivery (Sajjadnia, Sadeghi, Kavosi, Zamani, & Ravangard, 2015). The professional development and care planning initiative created a sustainable platform where the prisoner-patients' needs are achieved in totality.

There are numerous lessons learned from the initiative. First, it has provided that in-service education should be designed for the human resources development of the nurses, the hospital system, and the prison

institution as a whole. More importantly, if nurses perform and deliver patient-centric care effectively and efficiently, it becomes important for them to undergo training for new skills and abilities.

The experiences in 2020, including the Coronavirus and administration of the vaccine, have proved that nursing is a dynamic profession. It calls for nursing professionals to deal with both emerging (new) and reemerging conditions. Moreover, there is a rapid change in health care delivery that demands in-service training programs and initiatives for nurses. There are new enrolled nurses within the Californian prison care system to help replace the old retiring group. Consequently, newly recruited nurses need in-service training to update them on the latest developments, programs, policies, and needs within the Californian prison system. Typically, new nurses tend to have a knowledge deficit linked to new developments and procedures in the provision of patient-centric care. Therefore, all new nurses on probation must be in-service training to ensure that they understand the demands and requirements in offering healthcare services to prisoner patients. As such, the program has revealed the significance of training, creating a crucial milestone in attaining the demands and goals of quality care delivery in care environments (Khan et al., 2011).

In assessing the program's phases, it is essential to acknowledge that numerous factors contributed to the initiative's success. Central among them was the support offered by the Californian prison administration. The administration ensured that any requirements to make the in-service training successful were executed. For example, they helped in arranging the conference rooms. Additionally, the collaboration of the nursing team helped in the effective attainment of the in-service training. There was no delay in delivering the content as the nursing teams kept the team. Through the collaboration, it became easy and effective for members to deliver quality in-service training leading to success.

## Conclusion

Before executing the program, one of the most significant concerns was how effective nursing practitioner training and empowerment would be in improving problem-solving, promoting teamwork and

critical thinking, and preventing increased cases of mortality and morbidity of prisoners. However, in-service training proved its ability to enhance decision-making and coordination to achieve patient-centric care, disease control, and infection prevention among prisoner patients. More importantly, it has proved to be a vital capacity building and empowerment tool for care delivery teams. For example, it has nurtured the practicability of skills, evidence-based approaches in care delivery, and promotion of quality care delivery. In totality, the initiative has worked in streamlining communication, multidisciplinary coordination, and teamwork abilities in delivering quality care to prisoner patients.

#### References

- AACNnursing. 2020. "AACN Fact Sheet Nursing Shortage." *Aacnnursing.Org*. <a href="https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage#:~:text=The%20U.S.%20is%20projected%20to,need%20for%20health%20care%20grows.&te">https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage#:~:text=The%20U.S.%20is%20projected%20to,need%20for%20health%20care%20grows.&te">https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage#:~:text=The%20U.S.%20is%20projected%20to,need%20for%20health%20care%20grows.&te">https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage#:~:text=The%20U.S.%20is%20projected%20to,need%20for%20health%20care%20grows.&te">https://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Shortage#:~:text=The%20RN%20workforce%20is%20expected.increase%20of%20438%2C100%20or%2015%25.
- Chaghari, M., Saffari, M., Ebadi, A., & Ameryoun, A. (2017). Empowering Education: A New Model for Inservice Training of Nursing Staff. *Journal of advances in medical education & professionalism*, 5(1), 26–32
  - http://www.ihi.org/resources/Pages/HowtoImprove/ScienceofImprovementEstablishingMeasures.aspx
- IHI. (2020). Science of Improvement: Establishing Measures | IHI Institute for Healthcare Improvement.
- Khan R.A.G, Khan F.A, Khan M.A. (2011) Impact of training and development on organizational performance. Global Journal of Management and Business Research. 2011;11 (7): 63–8.
- Nicoll, A., Gay, N., & Begg, N. (2010). Theory of Infectious Disease Transmission and Control. *Topley* & Retrieved 2 October 2020, from Wilson's Microbiology And Microbial Infections. doi: 10.1002/9780470688618.taw0014
- Ross, M. W. (2013). Health and health promotion in prisons. Abingdon, Oxon: Routledge.
- Sajjadnia Z, Sadeghi A, Kavosi Z, Zamani M, Ravangard R. (2015) Factors affecting the nurses' motivation for participating in the in-service training courses: a case study. J Health Man & Info. 2015;2(1):21–6.
- Tanner C. (2010) Transforming pre-licensure nursing education: preparing the new nurse to meet emerging health care needs. Nursing Education Perspectives. 2010; 31(6):347–53.

# **Appendixes**

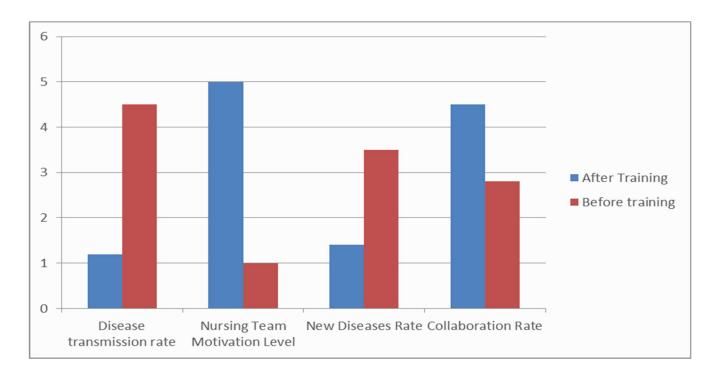


Figure 1: Impact after training

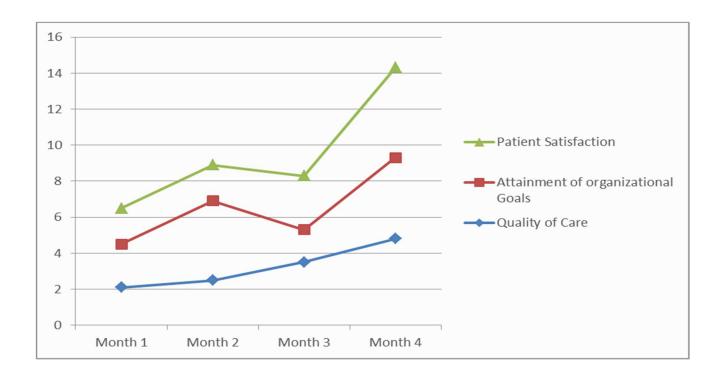


Figure 2: Level of Patient Satisfaction, quality of care, and attainment of organization goals after the training.