

Medscape Nursing Implications for Contemporary Medication Practice

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Abstract

Medscape Nursing forms one of the bodies that foster service provision (among nursing practitioners) by defining some of the services that the groups ought to offer, as well as their rights and responsibilities. The website that focuses on performance-based development systems gives insight into the manner in which the personnel's ability to complete tasks and perform their roles is evaluated. Indeed, the website strives to examine nursing competencies by partnering with over 500 client hospitals. In both websites, the insight gained is that gaining an opportunity to participate in team operations forms a crucial turning point regarding workplace interactions. Specifically, the alignment of organizational goals and objectives is central to success in nursing. Additionally, success among members of the team lies in the level of collaboration achieved. Furthermore, embracing workplace diversity is identified as a critical element that aids in achieving the aims and objectives of nursing initiatives. In summary, the websites indicate that successful initiatives (in nursing) are those that are exposed to a flexible team that seeks to respond to the marketplace demand for dynamism. Overall, three reasons account for the increasing use of portfolios. Firstly, the collections inform about nurse preparation and learning processes by promoting ownership and reflection among instructors regarding the learning process. Secondly, portfolios foster assessment processes by presenting nursing firms with information regarding the nurses' effectiveness. Thirdly, portfolios shape the nature of employment by offering prospective employers with information regarding the nurses' suitability for the respective positions.

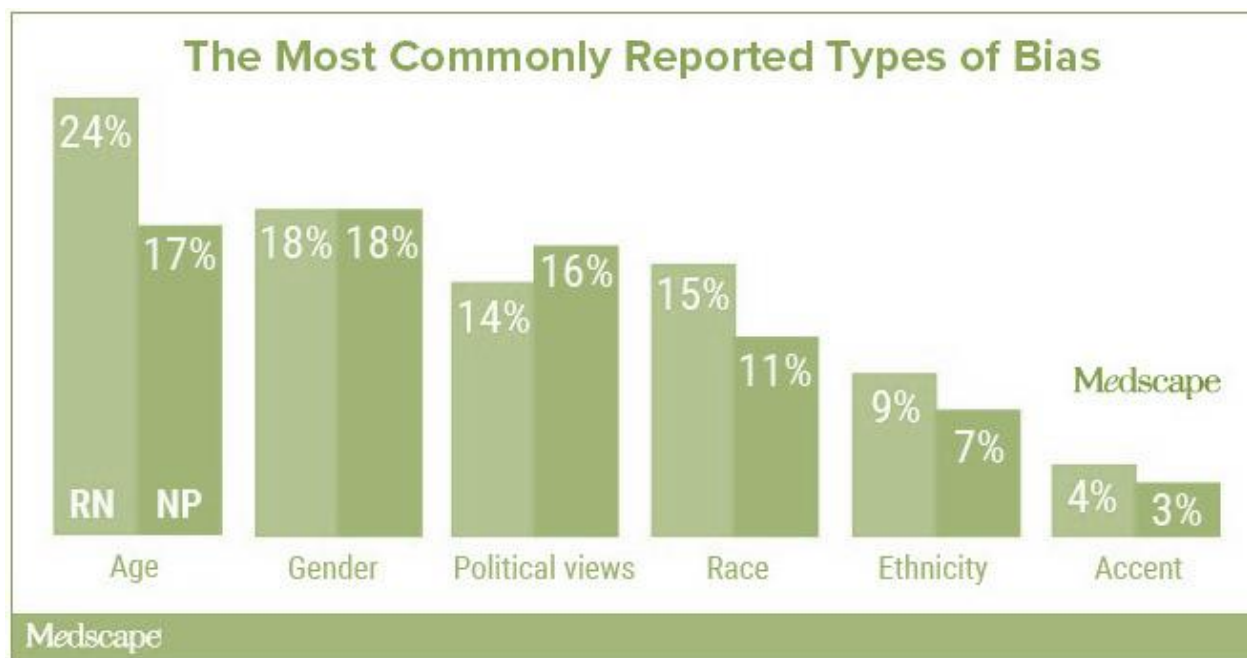
Introduction

A nurse practitioner's role included serving clients through the provision of healthcare management consulting services. Specifically, their responsibilities or services included providing technology, operations, financial, and strategic solutions that would foster success on the part of the company's clients. Hence, they deviate from healthcare informaticists (who are more focused on administrative matters) whereby their job description involves acting as points of communication aimed at linking the staff and clinical nurses. Also, they are expected to report feedback regarding emerging technologies and systems directly, especially by targeting staff members who handle or interact with those systems daily. Some of the additional tasks expected of them include systems development and quality control, besides assisting clients toward establishing strategic solutions relative to new technology investments, as well as the manner in which they could adopt the perceived solutions to unique environments in which their firms are located (to ensure that optimal outcomes are achieved).

Methods

From the information acquired, the process of developing portfolios to assess competence among nurses is important. Nurses form culturally-unique groups whose subscription to healthcare and nursing culture adheres to diverse, learned viewpoints and assumptions (Kirkpatrick, Renner, Kanae and Goya, 2007). In addition, patients are characterized by cultural preferences and attitudes that are likely to conflict with those of healthcare providers. The dilemma necessitates an appreciation and awareness of cultural variations while striving towards the provision of compassionate and competent patient care (Bednarz, Schim & Doorenbos, 2010).

Results



Increasing diversity poses critical challenges to the nursing practitioners regarding the identification of complex issues, analysis of barriers and the selection of new strategies that support cultural competence and diversity (Kirkpatrick, Renner, Kanae and Goya, 2007). Increasing globalization implies that an enrichment of diversity in nursing could account for improvements in service provision. Such pressures necessitate nursing-related institutions to offer programs that emphasize increasing diversity towards diversification in community and client services (Bednarz, Schim & Doorenbos, 2010). In the nursing practitioner body, an expansion of diversity would form a desirable objective to the nurses, as well as patient populations. In addition, cultural diversity and competence is an element that begins with individual effort towards societal improvement. Therefore, a combination of self-care programs with cultural appreciation in nursing is likely to yield desirable outcomes. The self-care practice entails practices in which activities responsible for the promotion and maintenance of lifetime

continuing development, well-being, and healthy functioning could be initiated among mature groups (Bednarz, Schim & Doorenbos, 2010).

Therefore, the need for cultural appreciation in nursing education arises from aspects such as the growth in populations and increasing globalization. Given that the aspects enhance human interaction and cross-cultural service provision, a combination of diversity-related knowledge with self-care programs is likely to improve service provision in nursing. In summary, cultural diversity, competence and self-care programs are likely to arise from understanding oneself, thinking globally, identifying pitfalls, embracing effective listening and learning, and acting locally.

Competence refers to the extent to which practitioners use judgments, knowledge and skills towards effective professional practice (Kirkpatrick, Renner, Kanae and Goya, 2007). On the other hand, portfolios contain summaries of the employment history, licensure and education, as well as supporting documents such copies of letters of recommendation, licenses and educational transcripts (Byrne, Delarose, King & Leske et al., 2007). In emergency departments, the assessment of competence can be in the form of summative or formative evaluations. Specific tools that aid in fostering the assessment practices include written exams in constructed and selected responses and, oral exams in the form of standardized oral examinations, chart-stimulated recall oral examinations, observed clinical behavior, objective-structured clinical examinations and in-training evaluation reports. Other approaches include mini clinical exams, the use of encounter cards, simulation, and standardized patient examination (Kirkpatrick, Renner, Kanae and Goya, 2007).

Therefore, the assessment of competence in emergency departments takes various forms. In all the tools of assessment, portfolios play a critical role in shaping their level of success. For instance, portfolios offer formats that form a foundation for self-reflection on practice, as well as goal planning practices that capture both the science and art of nursing and emergency department service provision (Kuh, 2008). Furthermore, portfolios enable senior leaders in the emergency departments to reflect to collect the work of nurses and reflect on their strengths and weaknesses, striving towards improvement (Kirkpatrick, Renner, Kanae and Goya, 2007). Also, portfolios form rich resources through which the faculty and emergency departments learn about the extent to which important outcomes are achieved over time. In so doing, emergency departments gain from portfolios in such a way that they develop identities as facilitators of service provision, gain insights towards improvement, and make connections regarding disparate sections of the curriculum.

Portfolios, which constitute purposeful collections of the students' work to illustrate their achievement, progress and efforts, have continually gained increasing acceptance and application in nursing. One of the factors responsible for this trend is that the collections offer a rich picture of the learners' performance (Byrne, Delarose, King & Leske et al., 2007). Therefore, the collections are critical because of the manner in which they deviate from objective and more

traditional approaches to assessment in nursing. Also, portfolios have been adopted on an increasing trend because they extend beyond professional development, learning and assessment to form living histories of teaching-learning situations. It is further notable that portfolios form mirrors for nurses to reflect their operations and maps from which plans are created and goals set. Indeed, the collections operate as sonnets that offer frameworks from which contents showcase workplace diversity and creativity (Kuh, 2008). Another feature that adds to the increasing adoption of portfolios is that they meet their full potential through performance-based evidence, goal-driven and organization processes that indicate the nurses' levels of attitude, skill and knowledge attainment (Byrne, Delarose, King & Leske et al., 2007).

Conclusion

Overall, three reasons account for the increasing use of portfolios. Firstly, the collections inform about nurse preparation and learning processes by promoting ownership and reflection among instructors regarding the learning process. Secondly, portfolios foster assessment processes by presenting nursing firms with information regarding the nurses' effectiveness. Thirdly, portfolios shape the nature of employment by offering prospective employers with information regarding the nurses' suitability for the respective positions.

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