



## **Introducing Professional Practice**

*A day in the life of a hospital ward: Working in Teams*

### **James**

The idea is that we divide the ward – the patients if you like – and the nurses into three different teams, which we call primary nursing teams and in those teams we then have, the primary nurse which is myself, associate nurses which generally tend to be D grade nurses, and health care assistants, and you're all in one team together.

The idea is that you would hopefully work as a team in co-ordinating the care for the patients who come in un... under your care as in the red team. In our teams we have eight patients each. The idea would be that I would normally prescribe the care or plan the care, for those patients. In reality it doesn't always work like that and besides which the associate nurses that are in the teams have those skills anyway from their training.

So often that sort of role is shared out amongst the qualified members of the team. It's generally one way of co-ordinating the care, for the patients on the ward. They would hopefully be in good continuity of care, as they sort of erm, are cared for by one team.

### **Jackie**

On my ward there's three primary nurses and they're all quite senior nurses, and they're very good at what they do in terms of, they do plan the care and they do look towards planning discharge and things. The thing that I feel is that they're not there twenty-four hours a day and, that planning has to go on even when they're not there. I try not to interfere with what they do, but I try to make sure that things run smoothly, and the flow continues even if they're not there. So I try to talk to them about the...what I'm doing and what they're doing.

I mean I think that sometimes my experience allows them to make plans and to make decisions, and to learn I suppose, so that's why I sort of give a lot. I like to know what's going on, I like to be a part of it, and I think that comes from the way that I was trained which is different to now. Whereas we all used to take charge of the ward, and when you were in charge that meant you knew everything about everybody and...a bit of a power thing I think.

### **Ann**

Before primary nursing, you would start one end of the ward and do all the observations, do all the beds, all the washes, things like that. Whereas now, you have like eight patients each to look after, and you look after those eight patients. You do everything for those patients, and I think that's really nice, because they get used to one nurse looking after them.

Well I've been looking after a lady now for say, only two weeks but I've got to know her really well and she was the type of lady that when she went home from hospital, she's going home from hospital today, and that she needed a lot of extra help when she went home. So we have to arrange all that in hospital, so that she can go home and have the extra help. So I went on the home visit with her with the occupational therapist, to see how she managed at home, and the things that she needed, and she didn't need, and it worked really well. Yeah it were really, really good because you went to see whether she could manage in the bath, out of the bath, could she manage making a cup of tea. How would she manage with her tablets, could she take the tops off the bottles. Who did her shopping, could she manage to push a Hoover, all things like that, that you need to know about elderly people before they go home.