



Introducing Professional Practice

A day in the life of a hospital ward: working with patients

Ann

I like looking after the patients that need a lot of help really. You know like as regards hygiene and people that can't do a lot for themselves. It's nice to care for them, and know that you've got them washed and dressed in the morning after they've been laid in their bed all night. You've got them up, they smell nice, you've combed their hair, you've put curlers in, things like that. As a nurse you're there any time of the day for anything. You're there to talk to, to cry with, to laugh with. If you can't look after yourself, you're there to do things for people, and to look after the medical side I suppose.

James

We have a patient on the ward at the moment whose prognosis so to speak isn't very good. Something happened that upset her on the ward, something to do with another patient. Just feeling able to sit with her and to help her sort of discuss the feelings she was having at that time, so that after half an hour or so she felt more comfortable with what had happened.

Jackie

I think, giving good care is listening to what the patient and the family want, first and foremost, because I think that's something that doesn't always happen. Keeping the patient and the family well informed is another thing. Making sure that they feel physically, as well as they can do, in terms of being clean and making sure that they've been fed and making sure that they...they know their way round and things like that. Treating everybody with respect and with kindness, I think that's giving good care.

Ann

I don't think the doctors see the patients the same as what nurses do. I mean they're more, I'm not saying more interested but they're more there to look after the illness. You know the patient's come in to hospital obviously with an illness. I think the doctors look more to what's wrong with the patient, as to the patient as an individual. I don't think the doctors realise what we do during the day. You know they just look after the medical side of things.

James

It's not just a case of when the patient's considered medically fit they can be discharged. We wouldn't necessarily consider medically fit as being the time when they should leave hospital, if there are social problems as well that need to be taken care of. I feel that the doctors we work with at the moment are very much aware of that. Whilst they may consider some patients as being fit for discharge they always ask us about the social side of things as well. Medicine to me seems to be changing. I get the feeling that there is a change more towards a...a more caring outlook.

Dr Dave Rowbotham

Nursing staff are vital. I can't be there all the time, they are my eyes and ears, so they basically watch over the patients for me and will let me know of any changes either good or bad, that are...that may be important. If you're performing a procedure, maybe putting what we call a central line which is a...a drip into the internal jugular vein in the neck, or a liver biopsy, or putting a drain into a chest, it's very helpful to have an assistant there, someone who can help you with the...the practicalities of it and also talk to the patient. Because whilst you're concentrating with your tongue in between your lips you're not often able to talk er er you know about bits and bobs to relax them.

We are in it for the same goal. In effect we are two parts of the same arm working in the same direction. Doctors can be accused of just concentrating on the diseased heart rather than the heart within the patient. But if you care then you care whichever branch of caring you're in. It's far easier for nursing staff to get heavily involved because they are there all the time. The thing about medicine is, you, you get bleeped off, you get bleeped somewhere else, you...you know you have a ward full of patients. But the nursing staff have fewer patients, and as such it's...it's more easy to get em... embroiled into the emotional wranglings that's going on and it, you know it can be...that can be a very rewarding part of it, but it can also be very destructive, and has lead to a lot of people I know leaving nursing. They can't give of their best unless they're involved, but the emotional turmoil and distress that it causes by being involved time and again, it just wears them down.

You can't personalise it too much otherwise you get too involved but the basic question I always ask myself is, if this was my dad, or my brother, what would I want somebody to do for them, what would I want them to say to them to explain to them, or to, you know, to treat them or sometimes not to treat them. And, that way I think it's, it's...I find it easy to get up in the morning, look yourself in the eye in the mirror and say, 'I did what I felt was right'.