

PMH Simulation Reflection

My feelings over simulation have changed throughout the week. When we first started the week, I felt anxious and uncertain about caring and communicating for psych patients. I was timid by their diagnosis and with my limited knowledge felt incapable of providing care. However, by the end of the week I am more confident in my ability to administer therapeutic quality care to psychiatric patients. I expected simulating nursing care to psych patients to be awkward and non-therapeutic. Once doing simulations of different disorders, I came to understand the diagnosis of psychiatric patients better. This aided my language and ability to give therapeutic care without potentially dismissing or triggering my patients. During simulation I was able to therapeutically communicate patient education, discuss patient's feelings and support a healthy therapeutic relationship. However, I need to improve my nursing process and my distractibility. It was hard for me to remember what my role was, specifically when I felt rushed to confront the patient's emotional needs. In other regards, being in the patient role helped me better understand the importance of healthy coping mechanisms. When the nurses slowed down to talk through emotions and offer breathing techniques, I found it very satisfying. On the contrary, when prompted with lots of questions I felt more overwhelmed and found it to be unhelpful. I now have a better understanding of therapeutic communication and how to make my patients feel seen and validated. I realized this week, the importance of not being dismissive, but also keeping a safe boundary. Being mindful to not play into delusions or show countertransference back to the patient. This week drastically changed the way I think about mental health. With education over different psychiatric diagnoses, I am no longer afraid or intimidated by diagnoses. I now am prepared with tools I need to have therapeutic communication and management with my patients. I will use the knowledge I gained from this experience to deescalate, validate, and build a therapeutic relationship with my patients. Specifically using the "I see...", "You seem...", "tell me...", model I feel prepared to converse and interact with patients at hard points in their lives.