

“Role Transition: A Personal Perspective.”

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Section One

My number one goal to become a RN was when I started my nursing journey in 2006. I was a managing cosmetologist at this time for 20 years, with that I had no background in the nursing field. I wanted to get some experience as a LPN first before becoming a RN. God chose my journey and helped me begin it 10 years ago. This is when I started my first job as a nurse. While working alongside a RN I observed first hand them performing their duties. Over this time, I have wanted to be on the other side of the nursing field even more. My interest and motivation grew watching RN's at my workplace, the doctor's office and at the hospital. Seeing the vast opportunities I would have furthering my education in this field motivated me. The increase in annual salary also influenced my motivation to move forward in this journey. This would be my second goal to continue my education to become a RN. My goal to be finished will be when I complete this LPN to RN transition program in 2020. I am planning to continue to add to my education to obtain my bachelor's degree.

Section Two (Nursing Skills and Functions)

The essentials of nursing are the same for both LPN's and RN's they both care for people who are suffering from illness and injury providing medical and functional assistance to help them live as pain free and as comfortable as possible to move forward toward health.

[CITATION htt \l 1033] Differences of skills and functions of LPN and RN are LPN's perform basic, patient care, obtain vital signs, insertion of catheters, ADL's, basic nursing assessment, and administer medications, Nursing Process which has four steps (Data collection, Planning ,Implementation and Evaluation.) IV certified LPN's could initiate an IV infusion with antibiotics, saline and heparin flush. LPN's can only practice when directed by a RN or physician, physician assistant, dentist, Podiatrist, Optometrist or Chiropractor. RN's perform

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basic LPN nursing skills in adding the nursing process, which has additional steps. Assessing, Diagnosing, Planning, Implementing and Evaluating, and also diagnose and treat patients. They can administer IV medications, saline and blood. Perform the initial head to toe assessment is performed by a RN. LPN's identify common patient problems, plan and manage patient care while getting their medical history and the RN utilizes problem-solving skills to come up with the care plan for the individual patient. Establish goals with the patient and family, manage the implementation and evaluation of the care plan is done by a RN. Both nurses can implement a doctor's orders. To sum it up LPN's are responsible for providing more of the basic nursing care and work under the supervision of a RN. RN's on the other hand are generally responsible for administering medication to patients in addition to creating a treatment plan in order to promote patient health. LPN educational requirements are a one to two year vocational program. RN is required to complete a two-year degree or a three-year diploma. Both LPN and RN use critical thinking skills as they work in the nursing field.

Section Two (Leadership Responsibilities)

One leadership role of a LPN is they are in charge of directing tasks and patient care to STNA's. A LPN can delegate nursing practice when directed by a RN. Teaching a nursing task and to observe and provide patient teaching in a health care setting is a LPN responsibility. RN's teach, administer, supervise and evaluate nursing practice. RN's are the team leaders because they have a higher level of nursing judgement. LPN's at my workplace are responsible for medication administration, performing treatments, catheter care, writing doctors' orders, and are in charge of a forty to fifty bed unit with four to five STNA's under their supervision. The RN CCC is in charge of delegating and supervising staff of three to four units, care plans, IV insertion and maintaining, and making the calls to the doctors for orders. Attend IDT

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(Interdisciplinary team) meeting every three months where they discuss quarterly assessments, review lab orders, look over patients overall care, review care plans and update as needed, and discuss patient care, check and review psychotropic medications with the physician. Complete admissions, discharges and deaths. RN managers do the schedules, supervise the RN CCC, LPN, STNA, and complete the paperwork assigned by the DON and ADON.

Section Two (Peer relationships)

Peer Relationships as a LPN are a little different from a RN as that LPN's work more closely alongside STNA's and less with the physician. LPN's and STNA's together perform patient care. RN's work alongside LPN's, physicians, and less with patient care in a nursing home setting. In a hospital setting RN's, utilize an orderly to assist with the basic patient care. My transition will be changing from having little time spend working with the physicians to working more closely together. In my workplace the RN CCC have the most contact with the physicians.

Section Three (Role changes)

My transitions to a RN continues at my workplace where I think more in depth and to the next level of nursing when performing my LPN duties. I observe the RN while they perform their duties and the outcomes more closely. Shadowing a RN is a role change I am incorporating in my transition from LPN to RN. I am a LPN at the Ohio Veterans Home. I work alongside RN's daily. As I started this journey as a RN student, I have watched closely and more in depth than I have in my prior years. As an example the RN will be performing the assessment, I would have usually continued my LPN duties and tasks that I was required to do now I try to make time to stay and watch the full assessment and the RN's performance. I make up a care plan,

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incorporate an intervention, how I would continue the process as a RN when we have an incident at my workplace in my mind. I will work on my leadership skills as part of my role change from LPN to RN. As a LPN I gather the data, now role changing to a RN I will work on my assessment skills. I will have to be in charge of the LPN and STNA staff. LPN to RN requires more management tasks.

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