

Reflective Case Study Assignment

With ATI: Apply: The Communicator 2.0: Video Interaction: Client Comfort and End of Life Care

Objectives, Outcomes, Instructions and Rubric

Learning Objectives and Outcomes		
Area	Objective	Course Student Learning Outcome (CSLO's), Baccalaureate Essential's & QSEN
Knowledge	<ul style="list-style-type: none"> • Therapeutic communication during the delivery of nursing care to gerontology patients. • Examine the influence of age on nursing care decisions and actions for patients. • Understand the roles and responsibilities of individuals in a working group. 	CSLO 1 & 2 Baccalaureate Essential VIII QSEN Patient-Centered Care
Skills	<ul style="list-style-type: none"> • Apply therapeutic communication concepts such as active listening, silence, focusing, open ended questions, clarification, exploring, paraphrasing, reflecting, restating, providing leads, acknowledgement, and offer of self. • Engage in conflict negotiation using conflict resolution skills. • Use appropriate communication techniques when communicating with clients who have a barrier to effective communication. • Provide client education that is appropriate in relation to age, culture, learning style, readiness to learn, etc • Communicate with various members of the interprofessional team. 	CSLO 1 Baccalaureate Essential VIII QSEN Patient-Centered Care
Attitudes	<ul style="list-style-type: none"> • Value the role of therapeutic communication in nursing care decisions and actions. • Appreciate the various factors that can impact effective communication • Increase their own self-awareness of judgments and pre-conceived notions that may affect their advocacy for older adults. • Recognize personally held attitudes about working with patients from different age, ethnic, cultural and social backgrounds. 	CSLO 2, 3, & 4 Baccalaureate Essential VIII QSEN Patient-Centered Care

Instructions

Therapeutic communication is a fundamental component of nursing and is a complex concept. Ensuring positive encounters between nurses and patients is important for improving the quality of nursing interactions, the performance of various nursing duties, and meet patients' diverse needs (Abdolrahim et al., 2017).

Students will access the case study through the ATI website. Students will complete the ATI assignment under the "Apply" tab labeled "The Communicator 2.0: Video Interaction: Client Comfort and End of Life Care". If you have difficulty locating this assignment, please refer to the screencast embedded in Edvance 360 to assist you.

The case study provides a 5-minute overview including character background (for example role, age perspective) on each person within the case study. The case study will unfold into various stages with video scenarios. The videos are presented in 30 second to 1-minute communication-related scenes. Multiple healthcare professionals are involved in the case study including significant others, nurses, care providers, student nurses, and the client. The scenario review typically lasts 25 minutes. Average time in the case study is 30 minutes. The student will receive text-based rationale for selected options and will receive a percent correct in relation to the first selected option, and time within the product.

References

- Abdolrahimi, M., Ghiyasvandian, S., Zakerimoghadam, M., & Ebadi, A. (2017). Therapeutic communication in nursing students: A Walker & Avant concept analysis. *Electronic physician*, 9(8), 4968-4977. <https://dx.doi.org/10.19082/4968>

Step 1: Access and complete the case study.

ATI: Apply: The Communicator 2.0: Video Interaction: Client Comfort and End of Life Care

The assignment requires that the student participate in the case for a minimum of 30 minutes. The student should refer to the rubric, as they will not receive any points for this portion of the assignment if the full 30-minute requirement is not met. Insert a screen shot within this document (directly below this text) that shows this requirement has been met. The best option for accessing this information is by clicking the blue “Results” tab that is located on the right-hand side of the screen under The Communicator 2.0, prior to entering the Video Interaction. The student’s name and time spent must be included in the screenshot.



Module: Video Interaction: Client comfort and end-of-life care
Simulation: The Communicator 2.0

CLOSE

Individual Performance Profile

DOWNLOAD REPORT

INDIVIDUAL SCORE

100.0%

TIME SPENT

38:31

Individual Name: Tuan Nguyen
Student Number: NG9976742
Institution: Lakeview CON
Program Type: BSN

Time Use and Score Show all stages OFF

Case	Total # Questions	Date	Time Spent	Score
Video Interaction: Client comfort and end-of-life care		7/17/2021	38:31	100%
+ Stage 1	2			
+ Stage 2	2			
+ Stage 3	2			

Step 2: Self - Reflection

Reflecting on your responses and experience with the case study (ATI: Apply: The Communicator 2.0: Video Interaction: Client Comfort and End of Life Care), answer the following questions.

1. What did you learn from this scenario?

From the scenario, I learned that therapeutic communication techniques take on a friendlier approach to responses. As I look through the answers to the questions that utilize therapeutic communication, I noticed that they tend to have the client do most of the talking or encourage them to do much of the talking. This is important as it allows the client to thoroughly express their thoughts and feelings. Techniques that are not therapeutic will take on a more judgmental or

demanding tone. For example, “Why are you feeling this way?” and “You shouldn’t disagree with your sister during this time.” are nontherapeutic because they tend to leave the client feeling accused or challenged, which is counterproductive to the goal of getting them to feel calm. It is also important to note that actively listening and being assertive in the response are essential qualities in therapeutic questions; however, the many therapeutic answers take on a friendly approach that encourages their clients to talk.

I also learned that while it is vital for the client's family to be involved in the care plan, the client still has the ultimate power and decision over their own wellbeing. As I watched the case study, I initially thought it was appropriate for one of the daughters to speak up against pain medication for her mother, the client. Despite being the client's daughter and having views on what should be done for their mother, it is essential to realize that the client is still awake and oriented. Because the client is alert and oriented, she ultimately decides how she wants her care to go.

2. Identify your biggest takeaways.
 - a. Explain the factors that influenced this decision.

As stated before, one of the significant takeaways from this scenario was recognizing the overall tone in questions that have therapeutic communication components compared to questions that do not. Elements that make stand-out therapeutic questions include a paraphrasing approach where the client’s statements are rephrased. For example, the questions “You are having difficulty resting because of the noise?” and “I hear you saying that you are not ready for your mother to give up.” are good examples of the responses that take what the client says and rephrases it into a question. Questions that also seek to inquire or have the client go further into detail demonstrate a vital component of therapeutic communication. For example, the response, “Let’s talk about this more.” and “Let’s talk about your difference of opinion.” are great examples of therapeutic communication techniques since they encourage the client to talk or expand upon their previous statement.

The scenario also helped me learn the importance of realizing that family involvement is vital in the client’s care plan. Still, if the client is aware and cognitively competent enough to speak for themselves, then the final decision should ultimately belong to the client to make. When the client is not cognitively capable of making up their decisions, it is reasonable to refer to the client’s family. The dispute between the two daughters over ordering medication for their mother’s pain was a substantial factor that influenced my decision. While the conflict between the daughters was out of good intent, it proved counterproductive to what really should have been done. Asking the client what she wanted from

the beginning of the interaction would have been a good decision since she was cognitively competent enough. I acknowledge that the concern against using the pain medications was out of concern that the mother would never wake up. However, in the end, the mother is still competent enough to understand the consequences, and as a nurse, I should be an advocate of what the client wants to do.

3. What are some of the main problems or key issues expressed in the scenario?

One of the problems that were present was the client's condition. The client's situation was mentioned to be in the late stages. This affected the client, who stated multiple times throughout the scenario that she was tired. She expressed pain and feeling fatigued throughout the case study but could not receive the complete comfort or care needed due to the many disagreements. These disagreements between her family address one of the more significant problems in this scenario: the conflicting views present in her family's approach to her end-of-life care. The client's two daughters have opposing ideas and decisions on approaching the client's future care, medication, and potentially more. This conflict also extends to the aunt who expressed desires to have the hospital chaplain visit the client only to be met with disagreement from one of the daughters. The disputes have negatively impacted the quality of care that the client is receiving, as the family sometimes does not resolve their arguments and cannot decide what should be done. This inability to come to a conclusive decision will eventually hinder the client's end-of-life care.

4. What were some of the challenging decisions the nurse needed to make?

a. Describe the rationale behind these decisions.

The nurse was caught in between the conflicting views of the client's family regarding her care. This occurred in three different moments in the scenario. The first time happened when the nurse met the daughters for the first time, and she witnessed the two daughters argue over whether the client should receive hospice care or not. While the client was cognitively competent enough and should have been given the ultimate final decision, the nurse decided to work with the daughters towards a solution. It is crucial to make sure that family members are as aware and on board with the care provided as much as possible. The second time the nurse met the aunt who had requested the hospital's chaplain to visit the client, which was quickly met with disagreement by one of the daughters who did not want the chaplain to come. This is a difficult situation because when the client cannot make the decisions, their family must instead. Unfortunately,

both the daughter and aunt disagreed with each other and could not come to a solution. The nurse then used exploration and active listening to encourage the clients to try to reach a solution. As a nurse, I would have waited until the client was awake and oriented to ask if she wanted the chaplain to visit. The last time this occurred was when the two daughters argued over providing the client with pain medication for her pain. One daughter expressed fears and concerns that the pain medications might cause the client to never wake up again. While the fear was entirely valid, the client was awake and oriented and should have ultimately had the power to decide for herself whether she wanted the medication or not.

5. What factors influenced your decisions and responses during the scenario?

a. Explain your response.

During the scenario, I selected my responses based on their ability to convey therapeutic communication techniques. Answers that utilize components of therapeutic communication do not ask “why” or closed-ended questions, are judgmental, and sound too insistent like they are urging the client to do something. For example, responses like “You shouldn’t disagree with your sister during this time.”, “Why are you feeling this way?” and “Maybe you’d like to rest in the family gathering room.” are responses from stage 1 that are not appropriate since they either sound judgmental, they ask “why?”, or they try to change the subject. Questions with therapeutic communication components either paraphrase, ask open-ended questions, explore, or clarify the client’s response. An example of a question that conveys therapeutic communication is “I hear you saying that you are not ready for your mother to give up.”. This question seeks to clarify what the client stated by restating the client’s statement to validate and ensure that the nurse and client understand the same things. I would continue this pattern of looking out for responses with components of therapeutic communication for each of the stages. Regardless of the scenario, I always selected responses that encouraged characters to express themselves and their concerns or paraphrase the statement or refocus on the client or the client’s family.

b. How will you respond if this scenario presents again in the future?

Concerning the scenario, as a nurse, I would acknowledge the client’s decision-making abilities by assessing the client to make sure that they are awake and oriented. If the client is awake and oriented, then I would have the client decide what approach to take in the care plan. If the client cannot respond, I will let the family plan for the client. I would also

respond to the client based on the appropriate therapeutic communication technique for that client. I would use paraphrasing, open-ended questions, clarification, and exploration techniques to elicit a clear and detailed response from the client in a manner that would avoid offending or make the client feel uncomfortable. These thorough responses are vital as they allow the client to direct the conversation, express their thoughts and feelings, resulting in the client feeling more comfortable, which is the desired effect of therapeutic communication.

6. Have you experienced similar situations in your clinical rotations?
 - a. How did you or others respond to the situation? Please explain.

Although I have never experienced any familial disputes during my clinical rotations, I have had clients refuse medication before. In these situations, I would respect the client's decision not to take their medication; however, I was also encouraged to ask them why they refused the medication. This was done to record their reasons and document them so that nurses were not mistakenly accused of failing to provide the clients their medications. I also have. There were also instances where clients would request medications for their pain, which the nurse and I would respect and provide them their medication after assessing their pain levels. In both situations, the client's decisions and desires were respected and taken seriously. In terms of therapeutic communication, there was not much therapeutic communication shared since the nurse and I focused on getting to each client in time. We also asked the client how he was feeling, and when we needed more information, we would ask if the client could tell us more about it instead of asking why.

- b. Describe successful communication strategies you have used or experienced in the clinical setting.

Therapeutic communication techniques such as active listening, exploration, open-ended questions, and paraphrasing were used in the ATI case study. During each interaction with clients during clinical, I would always try my best to use active listening techniques such as listening without actively formulating the following question to ask the client and provide eye contact. I would also face the client whether I was sitting or standing to let the client know that I was listening and had the client's full attention. I would also use open-ended questions to elicit a detailed and thought-out response. For example, I would ask questions that had the word "how" in them since they effectively elicit a clear response instead of a one-word response. In situations where I do not get enough information, I would use exploration as a technique to go further into detail in the client's answers to get more specific information that may be useful. I

would sometimes paraphrase the client's response by rephrasing them to know that I understand their answers to a degree and that I am listening to what they are saying.

7. Discuss the advantages and disadvantages of having families discuss treatment options, including end-of-life decisions before a loved one becomes ill or early in a terminal illness.

The advantage of having families discuss treatment options as a preemptive measure benefits the family as it gets them prepared for the topic and possibility of death. Families that can successfully arrange treatment prepare themselves ahead of time before illness and complication set in. Doing so will prevent families from stressing and struggling with decisions as the client is experiencing terminal illness. In addition, families that prepare advance directives provide their loved ones an opportunity to preserve their autonomy. Advance directives are documents that state the client's desired treatment methods and interventions that should be carried out if the client is unable to communicate them later (Baker & Marco, 2020). As implied, advance directives are vital as they preserve the client's autonomy by recording their desired interventions should they be unable to communicate. Unfortunately, while advance directives reassure clients that their desired care will be carried out, this can also be a disadvantage to clients who suffer from dementia (Porteri, 2018). Clients that suffer from dementia are not the person they once were and may not remember the requested care recorded on their advance directive (Porteri, 2018). In addition, families that discuss treatment options before the clients become ill may still not be best suitable for the client when they become sick.

References

- Baker, E. F., & Marco, C. A. (2020). Advance directives in the emergency department. *Journal of the American College of Emergency Physicians Open*, 1(3), 270–275. <https://doi.org/10.1002/emp2.12021>
- Porteri C. (2018). Advance directives as a tool to respect patients' values and preferences: Discussion on the case of Alzheimer's disease. *BMC Medical Ethics*, 19(1), 9. <https://doi.org/10.1186/s12910-018-0249-6>



Step 3: Submission

The student should insert their screenshot with proof of time into this document under step 1. The student should then type all of their answers into this document under step two. It is recommended that the student utilize Grammarly to check for errors in spelling, grammar, clarity, and mechanics. Upon completion of the assignment, the student should review the rubric below to ensure all components are completed and submit to the drop box in Edvance 360 prior to the due date.

Rubric

STUDENT NAME _____

Case Study

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
Time within Case study	Less than 30 minutes	30 minutes or more	

Comments:

Reflective Activity

1. What did you learn from this scenario?

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
What did you learn from this scenario?	The student's answer is inadequate with superficial thought and preparation. The student does not address all aspects of the task	The student's answer is well developed. The student fully addresses and develops all aspects of the task.	
Content Contribution	The information provided is off-topic, incorrect, or irrelevant to discussion.	The information provided is factually correct, reflective, and substantial.	

2. Identify your biggest takeaways.

a. Explain the factors that influenced this decision.

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
Identify your biggest	The student's answer is inadequate with superficial thought and	The student's answer is well developed. The student fully	

<p>takeaways.</p> <p>And</p> <p>Explain the factors that influenced this decision.</p>	<p>preparation. The student does not address all aspects of the task</p>	<p>addresses and develops all aspects of the task.</p>	
<p>Content Contribution</p>	<p>The information provided is off-topic, incorrect, or irrelevant to discussion.</p>	<p>The information provided is factually correct, reflective, and substantial.</p>	

3. What are some of the main problems or key issues expressed in the scenario?

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
<p>What are some of the main problems or key issues expressed in the scenario?</p>	<p>The student's answer is inadequate with superficial thought and preparation. The student does not address all aspects of the task</p>	<p>The student's answer is well developed. The student fully addresses and develops all aspects of the task.</p>	
<p>Content Contribution</p>	<p>The information provided is off-topic, incorrect, or irrelevant to discussion.</p>	<p>The information provided is factually correct, reflective, and substantial.</p>	

4. What were some of the challenging decisions the nurse needed to make?

a. Describe the rationale behind these decisions.

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
<p>What were some of</p>	<p>The student's answer is inadequate</p>	<p>The student's answer is well</p>	

<p>the challenging decisions the nurse needed to make?</p> <p>And</p> <p>Describe the rationale behind these decisions.</p>	<p>with superficial thought and preparation. The student does not address all aspects of the task</p>	<p>developed. The student fully addresses and develops all aspects of the task.</p>	
<p>Content Contribution</p>	<p>The information provided is off-topic, incorrect, or irrelevant to discussion.</p>	<p>The information provided is factually correct, reflective, and substantial.</p>	

5. What factors influenced your decisions and responses during the scenario?

- a. Explain your response.**
- b. How will you respond if this scenario presents again in the future?**

Objective	Unsatisfactory 0 points	Satisfactory 10 points	Points Earned
<p>What factors influenced your decisions and responses during the scenario?</p> <p>And</p> <p>Explain your response.</p>	<p>The student's answer is inadequate with superficial thought and preparation. The student does not address all aspects of the task</p>	<p>The student's answer is well developed. The student fully addresses and develops all aspects of the task.</p>	

<p>And</p> <p>How will you respond if this scenario presents again in the future?</p>			
<p>Content Contribution</p>	<p>The information provided is off-topic, incorrect, or irrelevant to discussion.</p>	<p>The information provided is factually correct, reflective, and substantial.</p>	

6. Have you experienced similar situations in your clinical rotations?
- a. How did you or others respond to the situation? Please explain.
 - b. Describe successful communication strategies you have used or experienced in the clinical setting.

Objective	Unsatisfactory 0 points	Satisfactory 10 points	Points Earned
<p>Have you experienced similar situations in your clinical rotations?</p> <p>And</p> <p>How did you or others respond to the situation? Please</p>	<p>The student's answer is inadequate with superficial thought and preparation. The student does not address all aspects of the task</p>	<p>The student's answer is well developed. The student fully addresses and develops all aspects of the task.</p>	

<p>explain.</p> <p>And</p> <p>Describe successful communication strategies you have used or experienced in the clinical setting.</p>			
<p>Content Contribution</p>	<p>The information provided is off-topic, incorrect, or irrelevant to discussion.</p>	<p>The information provided is factually correct, reflective, and substantial.</p>	

7. Discuss the advantages and disadvantages of having families discuss treatment options, including end-of-life decisions before a loved one becomes ill or early in a terminal illness.

Objective	Unsatisfactory 0 points	Satisfactory 5 points	Points Earned
<p>Discuss the advantages and disadvantages of having families discuss treatment options, including end-of-life decisions before a loved one becomes ill or early in a terminal illness.</p>	<p>The student's answer is inadequate with superficial thought and preparation. The student does not address all aspects of the task</p>	<p>The student's answer is well developed. The student fully addresses and develops all aspects of the task.</p>	

Content Contribution	The information provided is off-topic, incorrect, or irrelevant to discussion.	The information provided is factually correct, reflective, and substantial.	
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8. Overall Assignment: Clarity and mechanics is graded for all of the above questions – worth a total of 20 points.

Objective	Unsatisfactory 0 points	Satisfactory 20 points	Points Earned
Clarity & Mechanics	The student's answers included 3 or more errors in clarity, spelling, grammar, or mechanics.	The student's answers includes 2 or less errors in clarity, spelling, grammar, or mechanics.	

Case Study ____/5 points

Reflective_____/110 points

Total: ____/115 points

Instructor Signature: _____

Date: _____