**Stress and Nursing Practice**

Nurses play a fundamental role in providing high-quality care to patients to foster positive healthcare outcomes and improve their quality of life. However, while performing their duties, nurses experience stressful situations that influence care delivery and negatively affect their daily lives. The essay explores a case study that defined me as a nurse, how I handled the stress and the importance of debriefing.

**Case study.**

The case study that defined me as a nurse involved taking care of a 45-year-old Caucasian male who had a hip fracture. I was providing care to the patient and aiding him to carry out daily living activities before regaining his independence. The client had undergone hip fracture surgery in the orthopedic ward. My duty as a nurse was to ensure I continuously assess his progress with recovery and provide quality care delivered at all times. However, I felt that the physician attending to my patient was very sluggish in decision making. Therefore, I spent a lot more time monitoring and assessing the patient, which was a bit stressful.

Although the surgeon performed a successful hip surgery to help the patient recover from the fracture, he failed to prescribe thromboprophylaxis. When the physician came for the routine rounds, I suggested that he prescribes thromboprophylaxis to avoid obstruction of the blood vessels, but the physician also ignored my suggestion. This led to the patient developing pulmonary embolism after 25 days of the surgery. The patient complained of chest pain and shortness of breath, which indicated pulmonary embolism of the lungs. His condition was worsening daily, which increased my worry. I was very worried that I could be blamed if the patient died as a result of pulmonary embolism.

**Effect on practice**

This case affected and still affects my nursing practice significantly; the negligence of both the physician and the surgeon predisposed the patient to serious healthcare concerns. The case made it difficult for me to concentrate on my work. Every moment, I was worried that the patient might succumb at any moment. With the high workload in my organization, I performed many unnecessary tests on patients and made various mistakes during the test. It was evident that the case was affecting my work productivity. At some moments during my practice, I get stressed and worried about the possibility of losing a patient due to the negligence and mistakes of other people. However, I have developed strategies of ensuring high-quality care is delivered to patients, and mistakes that can lead to sentinel events are always avoided.

To overcome stress, I first understood that the physician's negligence led to detrimental effects on the patient. I stopped blaming myself for what happened. I openly shared what happened with my close colleagues, and they encouraged me to be healthy and positive at all times. In addition to that, one colleague referred to yoga and mindfulness as effective ways of managing stress and fostering enhanced mental wellbeing. After four days of mindfulness, I felt relieved of the stress and negative thoughts. I also conducted evidence-based research about pulmonary embolism to ensure that I provide high-quality care to patients in similar situations in the future. Since there were increased chances of the patient dying from the condition, I became more organized at my work and taught myself how to handle issues keenly and calmly. I arrive for my shift 20 minutes earlier and ensure all details and medications of patients under my responsibility are right.

**Debriefing**

Debriefing is a crucial element of healthcare provision. It ensures members of the healthcare team identify issues, learn from faults, and improve enhanced organizational productivity. Debriefing is also vital in evaluating the performance of the individual or general team by identifying what is working and what is not. Team members can, therefore, improve the highlighted concerns to foster productivity (Countinho, Martins & Pereira, 2016)

Debriefing is also essential in improving the quality of work; by involving every member of healthcare staff, debriefing aids in solving communication problems and stressful situations (Hunter, 2016). Debriefing also enhances communication within the healthcare setting since every individual is asked about their responsibilities, issues, and perception about overall working conditions and care delivery progress (Hunters, 2016). Lastly, debriefings allow the healthcare team members to evaluate their successes and failures in the care delivery process and implement corrective measures to transform the organization towards high-quality healthcare for improved organizational productivity (Hunter, 2016). Corrective measures will reduce mistakes, errors, solve the issue of high-workloads and role stress (Hunter, 2016)

If debriefing took place in my organization, it would be conducted in the boardroom since it is spacious. The nurse leader or a member of the care delivery team with strong communication skills, practical experience, and creativity will lead the debriefing because of their vast experience in solving workplace issues. Issues that would be discussed include; the relationship between nurses and other professionals (such as physicians), medical negligence, high workload, role stress, limitation of equipment, and the need for efficient training on how to use organizational technology.

**Conclusion**

In conclusion, stress is one the biggest challenges faced by nurses. It not only affects patient healthcare outcomes but also leads to job dissatisfaction and high-rates of burnout. It is fundamental for nurses to acquaint themselves with skills and knowledge required for stress management. In addition to that, debriefing sessions in healthcare settings aid in solving fundamental healthcare challenges.

References:

Coutinho, V. R. D., Martins, J. C. A., & Pereira, F. (2016). Structured debriefing in nursing simulation: students’ perceptions. *Journal of Nursing Education and Practice*, *6*(9), 127-134.

Hunter, L. A. (2016). Debriefing and feedback in the current healthcare environment. *The Journal of Perinatal & Neonatal Nursing*, *30*(3), 174-178.

Samama, C. M. (2020, February). Postoperative venous thromboembolism prophylaxis: changes in the daily clinical practice, modified guidelines. In *Seminars in thrombosis and hemostasis* (Vol. 46, No. 01, pp. 083-088). Thieme Medical Publishers.