

Developing Adult Nursing Practice: NURS 1593

Summative Assignment

Name of the student

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Introduction: Person-centered care is a patient-focused care plan in which the beliefs, values, and preferences of the patients are taken into consideration. Hence, the patient and the healthcare professionals implement shared decision-making and ensure patient autonomy (Grover et al., 2022). This study focuses on a patient who was admitted to the hospital due to a fractured neck of the femur. Hence, person-centered evidence-based care is implemented in partnership with the healthcare professionals in the multidisciplinary team, and a nursing care plan is interpreted and evaluated to decide on future care and discharge. The critical discussion will also include the role of the multidisciplinary team in the patient's care.

Case study: Emily Smith (name changed) is a 78-year-old patient who was brought into the hospital by ambulance after she experienced severe pain in the back and the hips. She lives with her husband and was unable to move due to the excruciating pain. It is important to mention that Emily has a history of osteoporosis and hypertension for which she is taking medication regularly. She was capable of carrying out activities of daily living and has experienced falls in the past year. Emily's journey to the hospital began when emergency services were called for urgent admission into the hospital. The paramedics after arrival assessed Emily and then she was transported to the Accident and Emergency Department (A&E). The A&E department confirmed a fractured neck of the femur after proper clinical examination and imaging. Owing to the severity of the fracture, surgical intervention was necessary and she was admitted to the general surgical ward. Emily complained of pain in the back and the hips which indicated a sudden onset of pain and this was exacerbated by movement. The fracture was mainly due to conditions like osteoporosis. Li et al. (2020) have stated that the incidence of hip fractures in the UK is approximately about 76,000 cases per year and it mainly occurs in patients who are aged 70 years and above. Ilic et al. (2023) have highlighted that hip fracture is a major issue worldwide and in 1990, the annual incidence was 1.3 million, it is expected that by 2030 hip fractures will increase by 3 to 11 million. Additionally, by 2050, it will increase by 5 to 21 million. Emily Smith was admitted into the surgical ward and a surgical intervention was needed due to the fractured neck of the femur. The definitive diagnosis was confirmed only after a proper study of the clinical images. The medical plan of care included surgical fixation of the fracture through a person-centered approach to prevent complications like avascular necrosis and restore mobility. Emily was admitted under the care of a surgical team and was led by a consultant surgeon. It was decided that she would be admitted into the surgical ward and she would be provided with pre-

operative and post-operative care which involved rehabilitation services, pain control, and wound management.

Critical discussion on nursing assessment: The nursing assessment used to plan Emily Smith's care needs proper consideration of her physical health. The Roper, Logan, and Tierney Nursing Model (also called the RLT model) on activities of living serves as a basis for conducting nursing assessments. The model helps in conducting a holistic assessment of the patient because the 12 activities of daily living provide a systematic process through which a patient is assessed who needs complex care (Williams, 2017).

One of the major advantages of the RLT model is that patient individuality is an important consideration. The model effectively provides a process of assessing the patient's relative independence and dependence on performing the activities of daily living. This is done using the independence/dependence continuum. This helps nurses to develop individualized care plans to maximize patients' independence in carrying out different activities of daily living. Additionally, the model also allows a nurse to determine whether the dependency of the patient still exists.

However, the weakness of the model is in the increased emphasis on physical care and it lacks application of the five key factors politico-economic, environmental, sociocultural, psychological, and biological (Holland and Jenkins, 2019).

As per the health condition of Emily, she is also assessed based on the 12 activities of daily living as mentioned in the RLT model and her mobility status is a prime concern in this scenario. Emily will need mobility assistance because she has a fractured neck of the femur and subsequently, she will be undergoing surgery which will impair her mobility. Hence, the nursing assessment will include a thorough examination of her current mobility status and her mobility condition after the surgery. Assessment of the patients is an important nursing skill and this highlights the ability of a nurse to implement the theory into practice. Nursing assessment demonstrates the implementation of knowledge and skill into providing individualized care toward complex healthcare needs (Jabraeelzadeh Kamblash et al., 2024). studies highlight that nurses play a vital role in planning care plans and assessments of patients (Ajibade, 2021). Considering Emily's comorbidities, age, and the traumatic nature of the injury, the nursing assessment focuses on Emily's physical health and complications like pressure ulcers, and deep vein thrombosis that can potentially arise after the surgery.

The National Framework for NHS Continuing Healthcare states the various care domains which include mobility nursing care. The nursing care for mobility assistance of Emily requires an individualized care plan which includes assisting Emily to sit up on the bed after 24 hours of surgery, dangle her legs, and eventually assist her to stand up with support. The nursing care will also include ambulation and gait training. This means walking aids like crutches and walkers will be used to enhance Emily's walking stability improvement and improve strength. It is important to mention that non-powered walking aids like wheeled walkers, crutches, and footed walking frames provide patients with a stable form of support and it is widely used for patients who need walking assistance (Yang et al., 2023).

Critical discussion on person-centered care: The person-centered care developed for Emily includes the establishment of communication and building trust. This means that Emily is engaged in actively listening and her preferences and concerns are carefully understood. Sharkiya (2023) has stated that communication is one of the vital components of nurses and it promotes trust between patients which helps in the establishment of a therapeutic relationship. Subsequently, individualized care planning is developed in which Emily's decision-making on the care process is taken into consideration. Furthermore, Emily is empowered to make informed decisions and choices to ensure her recovery. Fisher et al. (2018) mention that shared decision-making is an effective strategy in person-centered care because it enables the healthcare provider and the patient to make collaborative decisions, which allows emphasis on the patient's preferences and values. Emily is encouraged to make decisions and be actively involved in the care process by promoting independence and autonomy. She is engaged in the various rehabilitation goals and mobility exercises. Rocque et al. (2024) state that person-centered decision-making allows patients to be actively involved in the healthcare process enabling better health outcomes. Emily's mental state is assessed and she is provided with emotional support and psychosocial care. The emotional support and active listening allowed Emily to express her feelings and also share her concerns. Bradshaw et al. (2022) highlight that emotional support for patients receiving person-centered care is essential because it facilitates high-quality and safe patient care. Additionally, it also allows the nurse to understand the needs of the patient through shared understanding.

The NMC code is followed in this care delivery process which acts as a guide for nursing care. It is important to mention that the NMC code highlights the prioritization of people, practicing effectively that allows effective delivery of care based on evidence. Ensure the safety of the patients by building nursing professionalism and trust.

Critical discussion on MDT: A collaboration is formed with a multidisciplinary team that will include physiotherapists and nutritionists who will promote quality of life and ensure Emily's overall health. Srinivas et al. (2024) have highlighted that multidisciplinary teams providing care in a person-centered care model include healthcare professionals who are from varying disciplines. These healthcare professionals collaborate and work as a team towards effective patient care. It is important to mention that such a multidisciplinary team can potentially include physiotherapists, dieticians, nurses, and social workers. The role of the physiotherapist in the multidisciplinary team is to ensure that the patient can walk and optimize the overall rehabilitation. The physiotherapists engage in evidence-based exercise that will improve the mobility status of the patient, range of motion, gait patterns, and mobility strength (Almilaji et al., 2023). The nutritionist will provide an individualized nutritional plan tailored for the patient. It is important to mention that malnutrition can delay the process of recovery after a hip surgery. Nutritional supplements recommended by a nutritionist can effectively help in faster recovery post-surgery (Ashkenazi et al., 2022).

Interpretation and evaluation of nursing care: The overall effectiveness of the nursing care given to Emily is to improve her mobility status. This means that the multidisciplinary team conducted the assessment of Emily's mobility status which provided important information on how to develop a person-centered care plan that is curated as per the needs of Emily. After the completion of the proper assessment, the nurse collaborated effectively with the healthcare professionals which included a nutritionist and a physiotherapist. The team developed a mobility care plan based on the inputs and interventions of the nurse, physiotherapist, and nutritionist. It is important to mention that the mobility care plan included strategies, interventions, and objectives that were all aimed at assisting Emily to gain independence, have an overall recovery, and promote mobility.

The discharge planning process contributes to the future of the patient and it includes future care of the patient through a proper follow-up plan. Hence, in the case of Emily, the discharge process

will involve various members of the healthcare team which includes a nurse, physiotherapist, and nutritionist. Additionally, it will also include Emily and her family members. Older patient worries about how they will manage at their homes even though they believe, home is the best place to recover. Hence, it is normal for them to feel worried and nervous about their discharge (Segevall, Randström and Söderberg, 2018). The transition from hospital care to home care can be challenging for both the caregivers and Emily owing to her mobility status. The discharge plan must include all the required care provisions that will be necessary in the home care setting. A patient needs assessment is needed to develop an effective discharge plan that includes all the needs of the patient (Muhamad et al., 2022). Emily will be needing mobility assistance and this will require home nursing services to address her mobility needs. The discharge process should include home nursing services, occupational therapy, and physical therapy to address patient needs (Martinsen, de Lima and Rudolph, 2024). The discharge planning process will follow the NHS constitution because it enables a patient to access the NHS services based on their healthcare need and not their ability to pay. Secondly, the patient remains at the center of everything that NHS does.

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Conclusion: It can be concluded that the case study of Emily Smith (name changed) provides insight into how nursing care is provided to a patient undergoing hip surgery. Emily was urgently admitted to a hospital because she complained of excruciating pain due to the fracture of her femur neck. The nursing assessment was done based on the FLT nursing model which allowed the nurse to identify mobility as the activities of daily living, which need nursing care. It has been found that after the surgery, Emily will require mobility assistance and she will need the collaborative intervention of a multidisciplinary team that includes a nurse, physiotherapist, and nutritionist to recover at a faster rate. Furthermore, it has been identified that patient needs assessment is necessary for effective discharge planning and transitioning to home care.

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