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What about the dead donkey? The link between the popular television comedy series *Drop the Dead Donkey*, and the effectiveness of formal continuing education might seem tenuous if not fanciful. Dead donkeys are, of course, news items that are discarded in favour of others considered to have a greater impact and will catch the attention of the purchasing public. They are not necessarily

of a lesser quality, rather they have outlived their purpose and are no longer considered totally satisfying to customers and consumers.

Professional Update hopes to be able to publish details and conclusions of the study carried by Shirley Sunter in a later Issue.

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A to Z of Professional and Management Talk for Nurses

Every profession and trade has its own vocabulary to which new words are constantly added and 'worn out' ones discarded. Some call this jargon, with a degree of scorn, whilst many recognise the need to be familiar with terminology to be able to understand and communicate with colleagues and other professionals. Much of the vocabulary, however, consists of everyday words and terms. Graham Thurgood has compiled an A to Z of those that are in common usage, though not always fully understood.

A is for Audit

Nursing audit is a method of ensuring that the individual nurse, or a clinical unit, is held accountable for the care delivered. It is a tool designed by nurses and used by nurses in the assessment and evaluation of nursing services (Vaughan & Pill moor 1989). Nursing audit is also associated with standard setting and quality measurement.

B is for Budgets

A budget is an amount of money allocated to use for a specific purpose. Budget planning and setting involves forecasting what services or work is required over a specific period (usually 1 year) and identifying the cost of providing it. To manage and control a budget the nurse will require frequent and regular information about the state of the budget.

C is for Clinical Supervision

Clinical supervision is a working alliance between two or more professionals for the purpose of enhancing the individu-

al's professional growth. The individual is helped through a process of self reflection and problem solving to maximise potential and optimise services to the patient.

Clinical supervision is ... 'an exchange between practising professionals to enable the development of professional skills' (Butterworth 1994).

C is also for CD-i

CD-i is the shorthand for 'compact disc interactive'. It is an electronic interactive multimedia resource for self-directed study. Similar to operating a video-recorder, CD-i enables the TV screen to become a fully interactive resource. (See *altrum Update* on page 23.)

D is for Delegation and Deployment

Nursing involves working with numerous people who have a variety of skills. To ensure staff provide patients with the required care they must be deployed appropriately and work delegated to staff has to be within their capabilities. Delegation should not be confused with 'abdication'!

E is for Evaluation

Nurses must be able to evaluate both the effectiveness of patient care and the performance of colleagues and other staff. Individual performance review and peer review techniques are now widely used. Self evaluation skills are vital in maintaining personal professional development and the use of reflection can enhance self evaluation.

E is also for Effectiveness and Efficiency
Effectiveness is 'doing the right thing', whereas Efficiency is 'doing the thing right'!

F is for Forecasting Skills

The ability to predict such things as patient dependency needs, likely outcomes of planned care and future staffing requirements are increasingly required of the nurse practitioner in a market driven care system.

Wright (1985) describes how the skill of foresight in nursing care can only improve with experience.

G is for Group Dynamics

The ability to apply the knowledge of group dynamics skilfully to practice is important when leading a nursing team in a multi-disciplinary system. Ovretveit (1990) identifies a lack of preparation for multi-disciplinary team membership and describes different types of team stressing the need to plan and review team policy.

H is for Health and Safety at Work

It is vital that nurses are familiar with the health and safety policies of their organi-

sation. It is incumbent on all staff to contribute to a safe and healthy working environment. Stress management skills are increasingly desirable for both self help and the health of colleagues and staff

I is for Innovation

Many job adverts today state that the job will require the applicant to be 'innovative'. It implies such things as a willingness and capability to take on and implement new ideas and methods, to take justified risks at times and to challenge the 'custom and practice'. An ability to manage change and utilise research findings may also be qualities of the innovative professional.

J is for Job satisfaction

Helping your staff to obtain high levels of job satisfaction can be enhanced through a knowledge of job design and job motivation theory. Grant (1994) reports on a Welsh survey that identifies job satisfaction of nurses is influenced by a lack of encouragement to fully use or develop their skills. The absence of positive feedback from their managers also has a lowering effect on job satisfaction.

K is for Key Results Areas

Key results areas may be part of a nurse's job description identifying different key elements of the role (Vaughan & Pillmoor 1989). They could also feature in such things as projects, assignments and operational plans to specify the most important outcome features.

L is for Leadership Skills

Nursing teams function most effectively when they have clarity of purpose, clear objectives and assured feedback on performance. These are provided and sustained by the leader. In addition the leader must establish a clear agenda, value the contribution of each individual, nurture potential and be able to embrace change (Salvage 1989).

Facilitative leadership skills and the motivation of staff to adapt to change and assist with quality control are identified by Morison (1992).

M is for Mentorship

Mentorship is the term commonly used by colleges and the national boards to describe the support and guidance given to pre-registration students (Project 2000) by named nurse practitioners during the 3 years of their course. This is outside of, and in addition to, the formal areas of assessment and other measures of performance and progress.

M is also for Marketing

Marketing is NOT the selling of goods or services. Marketing is about presenting your services to your current or potential customers/consumers in a way that is competitive in purpose, price and accessibility. This approach to promoting health care services is vital not only for consumer relations but for securing the business of general practice (fundholders).

N is for Networking Skills

Nurse practitioners need to maintain contact with nursing colleagues and with other relevant key health care professionals outside nursing. Membership of professional organisations and specialist nursing groups, e.g. research, mental health, coronary care, etc. together with the use of professional journals are part of the networking scene.

O is for Organisational Skills

A knowledge of organisational structures and cultures is important when planning unit/departmental philosophies, setting objectives and determining where your team 'fits' within the total organisation. How the patients day is organised and its influence upon the nurses day/shift are also important organisational issues. The models for delivering patient care need to be evaluated with these factors in mind.

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11

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