

Nursing Portfolio and Professional Mission Statement

Posted on July 22, 2024

A1) Professional Mission Statement:

My professional mission statement revolves around the ultimate goal of providing competent and quality enhanced patient care by adopting the process of continuous learning. In this regard, my degree in the nursing profession may make me able enough to pace in any managerial position where I will apply my leadership aptitude and skills. In addition, my provoking habit of merely learning makes me a lifelong learner along with my professional career. Hopefully, these features allow me to improve my professional practice in the healthcare field by the application of evidence-based training, safety, and quality-centered work in alliance with the usage of modern technology. Hence, by the amalgamation of such measures and procedures, my professional journey would be highly reliable and efficient concerning the quality enhanced care of all my patients.

A2) Reflection of Professional Mission Statement:

Undoubtedly, reflecting on a personal mission statement caters to the broad spectrum of personal values in alliance with future careers. However, I see the value of accomplishing my bachelor's degree and especially focusing on how this professional education will mount benefit my career in the future life. It is pertinent to discuss that before joining this school I passed over various positions because of lacking the right type of professional education. Such a condition lingered in an upset state of mind, and it led me to gain some additional knowledge. So, the knowledge, experience, and practical aspects that I have earned through this degree program will boost my career capacity. In this way, I profoundly feel that I would be able to achieve my career goals which are not limited to simply being a staffing nurse in the future, but rather to hold some managerial positions to make a difference in the healthcare profession.

Professional Summary:

The professional summary poses a unique significance to elaborate the personal viewpoints and the ongoing circumstances. So, it is parted into the following parameters: –

A2-a) Portfolio Representation of Healthcare Professional & a Learner:

The program at WGU is very insightful when I consider it as a healthcare professional and profound learner. Undoubtedly, looking at the required course scheme along with the class schedules proved to be daunting at the start. Especially, when someone has the perception of coming to school for more than twenty-five years. But in my first class of Applied Healthcare Statistics, I was overjoyed by knowing that I already knew a lot of information quoted in the course contents. It made me relaxed and mentally prepared for learning the material in an easy way. Meanwhile, the next class i.e., C820 Professional Leadership and Communication, urged me to identify and use the communication strengths that I already have in my possession. I recognized multiple objectives including optimal learning ways, collaboration in teamwork, and creativity by reviewing the five dynamic reports and the working style self-assessment.

Similarly, my reflection paper in C820 guided me to improve my communication aptitude, working esteem, and response to bioreactors before being entitled to waste. It was very exciting to learn about the healthcare systems of multiple countries in C489 Task 3, in Organizational Systems and Quality Leadership. It is understood that several things in the United States healthcare system need dire improvement (Blizinsky & Bonham, 2018). However, learning and researching about the healthcare systems worldwide was quite informative and appealing. This aspect was insightful in the context of the USA where the healthcare system has always remained a hot political topic concerning policy statements of the ruling elite. It also provided me an opportunity to advocate the need for resources and revolutionary changes in our healthcare system for better care of the patient community. In other words, it encouraged me to raise my voice for healthcare reforms in the United States of America.

A2-b) Professional Strengths:

The professional strengths in the context of 'C820 Professional Leadership and Communication' may be enlisted as a scrupulous organization, strategic orientation, detailed coordination, and teamwork spirit, which guided me through this journey. I also learned to point out comparisons, outcomes, research conducting techniques, evaluations, and interventions in the course C361 Evidence-Based Practice and Research. My paper was based on finding the reasons for nursing staff failure in the profession. In addition, my professional strength is adorned with extensive research work, especially concerning the comparison of US and England healthcare systems. The issues related to insurance expenses need massive consideration as most Americans are unable to pay these. Hence, my professional strengths made me able to identify, analyze and chalk out strategic recommendations for solutions.

(A2-c & A2-c1) Challenges during Program & Ways to Overcome Challenges:

Mentally, I had the perception to face numerous challenges during the program and I had set up various roadblocks in this context. Fortunately, the challenges were not as severe as I imagined before starting the program. Meanwhile, one of my family members had cardiac surgery and needed my attention and care. During the class schedule, I had to spend plenty of time or almost all the evenings with him for care and sincerity. I devised a mechanism to focus on my studies during the program and for that purpose, I marked the signs on the wall. That was an indication for my family members not to disturb me. But such unavoidable circumstances did not allow my family as well as me to execute that comfort plan. However, that panic duration only took a month or two, and things transformed to normal. During that time period, I tried hard to manage the program by adopting strict discipline turmoil.

Similarly, another challenge waiting for me was Applied Healthcare Statistics C 784. Since my childhood, I had to counter mathematics with immense struggle. At the initial stage, I gave up for a while but later on, I struggled to learn this course with the help of a friend. I fixed 2 hours on daily basis and finally get rid of the stress jerks on my nerves. When I got stuck on some part of statistics, I utilized the assistance of my fellows, and eventually my learning and retaining capacity increased manifold. In addition, I learned a lot from watching the course videos and overcame my weaknesses by practicing the tasks repeatedly. It was a hard nut to crack but at last, I passed it with colors. In addition, Biochemistry C785 also proved a shocking challenge with tough questions like confronting a foreign language. However, I applied solid and determined commitment to formulate a study plan and stuck with it enthusiastically. Hence, the sprouting challenges were countered with full devotion, and I overcame them one by one.

A2-d) Program Outcomes:

At WGU, I provoked 9 BSN program outcomes through my course work, and these are identified as follows:

1. Multiple modes of communication including written, interpersonal, oral, and electronic domains caught demonstrated in the respective course. I utilized all these domains and modes of communication to improve my interpersonal skills and investigate my Task 1 topic. Such a communication pattern helped me to seek an adequate solution to the research topic.
2. For ensuring quality nursing care, I tried to demonstrate clinical reasoning in C489 where I learned evidence-based practice as quality indicators. In the next step, learning The PICO method in C361 was a milestone to accomplish my Task 2. In this task, I specifically learned how to undergo any ethically based situation as or when it raises.
3. Safe and quality-driven care in alliance with professional, legal, and ethical standards needs

accountability parameters and I learned this fact through earning my IHI certificate and working in the RCA process. The improvement in healthcare is directly linked with free and safe reporting of various hazards and potentials. In this context, the priority to relinquishing errors may enhance the measures of patient safety and care.

4. Clinical knowledge in alliance with theoretical and empirical knowledge encompasses considering human experiences which helps to be a professional nurse and social promoter. My critical thinking skills were polished in the class of C100 Humanities along with my leadership skills. I also demonstrated and learned necessary knowledge regarding the nursing history, nursing principles, and features of the State Board of Nursing.
5. Ensuring empathetic patient-centered care without any discrimination to all the individuals, their families, and multiple communities were the main crux of C228. Additionally, the exploring virtual city enabled me to point out disparities along with focus change to confront the needs of the community.
6. The profound applicability of leadership and knowledge-based skills for the purpose of self-improvement and a healing environment in Task 1 of C493 was insightful. Through this task, I was entitled to identify a prevailing issue within my department, informed all the stakeholders about this issue, and finally devised a solid solution plan. Similarly, the research paradigm concerning C361 allowed me to educate peers about hygiene practices for better patient outcomes.
7. The engagement of inter-professional coordination may result in improved quality and safety of healthcare which I learned in 1 project object of C493. In this context, I identified staff shortages, and training needs among staff and pointed out the opportunities to enhance patient safety. I collaborated with top management to solve the staff-related issue on a priority basis including shortage and cross-training issues among human resources.
8. Meanwhile, I used to earn AMNH certification during the C475 which allowed me to understand and encompass the knowledge of genetics along with the demonstration of RNA and DNA in C785. The learning and knowledge about genetics and biochemistry made me excited and overjoyed.
9. The course relating to Information Management and Technology i.e., C468 enabled me to apply modern technology for effective communication, mitigating errors, and decision-making. It eventually improves patient care and support for the concerned stakeholders. This course was a blessing as nursing chunk usually lacks proper guidance and training to apply and work with technology.

A2-e) Roles Adopted during the Program:

During this program, I went through three main roles including detective, scientist, and manager. The nursing community has to investigate patient slots which is not visible and for that purpose detective work is significant in locating required information, inquiring about patient history, checking results, and executing physician orders (Pich & Roche, 2020). I used my detective skills to accomplish my

research work. For example, in C228, I played a detective role in conducting interviews and assessments during research around the city area. Similarly, I performed a scientist role when I collected data to experiment with hypotheses. The said role was best demonstrated while I performed multiple dissections in Anatomy and Physiology labs conducting heart, kidney, and leg surgery. In addition, I also performed a scientist role in C228 while formulating hypotheses, preparing questionnaires, and executing practice in multiple units.

Moreover, in C304, my manager role was best represented concerning the healing environment. When I performed duty in ICU, I ensured to make the room a more comfortable and cleaner environment. I used to start the day by talking to patients and respective attendants, discussing the goals of the day, and executing the plans.

A2-f) Professional Growth:

The acquired knowledge from my BSN polished my growth paradigm concerning my career and ensuring job opportunities. This program has augmented my leadership qualities as before intruding into this program I never imagined any managerial position. However, the respective courses in the program aroused an urge to move towards managerial positions. Meanwhile, I applied for such a position in my department with full confidence but could not succeed. This program has grown a motivation in me to look at the same position in the future. Similarly, my professional and leadership aptitude has been polished which makes me able to perform my duties to earn the credit of a capable nurse. In addition, I have become resilient and mentally prepared to face any type of future challenges.

Part B

B1) Quality and Safety Reflection:

The fundamental aspects of the nursing profession revolve around acute nursing care concerning the patient community. A minute fault or delay in the application of recommended procedures may lead to a severe and significant impact in the context of patient outcomes (van et al., 2020). However, the dire significance of quality and safety in the program was incorporated into C304 (The Professional Roles and Values). Improved patient care encompasses the fact that all the required care has been incorporated to enhance and meet the standards of safety and quality of healthcare services.

B1-a) Quality & Safety – Development of Professional Definition:

Nursing theorists have demonstrated through multiple theories that how the nursing community has

impacted quality and safety. The foremost quality and safety measure was to improve sanitation circumstances and to reduce the death rates (Harun et al., 2022). In the nursing profession, the professional definition of safety and quality deals with the surety of providing the safest care and also set various standards for improved patient outcomes, according to my viewpoint. These standards must possess enough potential to prevent avoidable hazards with a special focus on the protection of patient slots under observation and treatment.

B1-b) Quality & Safety – Artifact Support:

A magnificent example of quality and safety in the nursing profession is protecting the patient's five rights in collaboration with medication administration. Any type of medication error may have severe and lasting consequences for patient slots as presented in C304 Task 1. Errors in medication administration may occur when any or multiple steps are missed or skipped by the respective staff, and it may lead to lasting impacts. Nursing care can be improved manifold by knowing and practicing five medication rights along with other set standards. Such precautionary support and their adoption may reduce patient safety happenings in the country.

B1-b1) Quality & Safety, Artifacts Supporting Definition:

During the completion of Task 3 in the course C304, I created a portfolio shell. The identification of quality and safety manners is executed in my recent clinical practice to ensure improved quality care. This demonstration is aligned with the descriptions of C304, Quality, and Safety.

B2) Quality & Safety, Importance of IHI Certificate:

IHI certificate is mandatory for perusing a nursing career according to my viewpoint. In my personal case, this certification helped me to understand the fundamentals of the nursing profession including populace health dimensions, improved patient safety, leadership polishing, family and person-centered care along with cost-effective and value-added services. Further, the portion of the course entitled 'Root Cause System Analysis' fascinated me because I had participated in RCA concerning the wrong-site process implementation at my employer. However, the detailed learning outcome with all the aspects of RCA in this certification improved my nursing practice and relinquish various evaluation-related issues. The approach for reporting errors helps the masses to identify healthcare issues and improve care quality. Consequently, a very simple error or near miss has a learning opportunity by which the nurses can improve the safety and quality of the concerned quarters.

C1) Evidence-Based Practice Reflection:

Nursing practice has a mandatory component in the form of evidence-based practice. It ultimately assists the nursing community to improve patient care by reducing any type of harm. EBP is a need of time in this profession as nursing is a constantly changing field with the capacity to absorb innovations and their implementation. Healthcare settings have a desire for improvement concerning all the team members and the application of EBP nourishes such improvements. In addition, novel ideas, modern inventions, and fresh discoveries are part and parcel of the healthcare field and the utility of EBP can improve patient outcomes under the umbrella of modern advancements manifold.

C1-a) Evidence-based practice & Development of Professional Definition:

During the program, I passionately learned about several types of research, techniques of analysis, and the application of research to empower and improve my nursing practices. Particularly, in C36 I struggled with such learning and also emphasized PICO components in accordance with nursing field requirements. In this context, patient, population, problem (pff) intervention (iff) comparison (cff), and outcome (off) are pertinent to mention. These components guided me to devise and articulate EBP questions in an appropriate manner. Meanwhile, I struggled to evaluate evidence levels and their utilization in “The Johns Hopkins Nursing Evidence-Based Practice Model (JHNEBP).

C1-b) Evidence-based practice artifact support:

During task 1 of C361, I came to know that accurate and updated research is the key to high-quality research outcomes in the context of evidence-based practice questions. The research findings can be compromised on accuracy grounds by using lower-quality peer reviews and research articles.

C1-b1) Evidence-based Practice: Artifacts supporting the Definition:

In C361, I learned comparison techniques on grounds of research. For this purpose, I compared the research findings and evolution of articles to support the research question. The parameters included educating the populace on hand hygiene in comparison to not providing education on hand hygiene. It demonstrated remarkable results in the context that the reduced rate of infection relates to the improved practice of hand hygiene and vice versa. It is pertinent to mention that patient outcomes are highly affected by insufficient research. So, I tried to identify high-quality research articles in support of my research questions. I presented the research to staff meetings so that it may help

improve hand hygiene.

C2-a) Evidence-Based Practice: Primary Research:

The validity of research articles and research reviews is mandatory for evidence-based research. The data can be skewed leading to lessened patient care if the research has not solid and validated foundations. In other words, the literature review is the hallmark step to achieving quality care (Robinson et al., 2021). In this context, the understanding of research validity can be established by knowing the parameters of primary and secondary research. As far as my practice is concerned, I thoroughly analyzed primary research sources which led me to conduct secondary research. For comparison purposes, the primary research articles were summarized to filter out low-quality articles. In addition, the primary research bounds the researchers to approve or disapprove of new methodologies ideas, and concepts based on reliable shrives of evidence. In fact, it requires a rigorous investigation of the issue and its respective impacts with a special focus on solution perspectives.

C2-b) Evidence-based Practice: Achievement in Excellence:

The projects related to quality improvement have mainly empathized with improved patient outcomes over time in the amalgamation of modern research. In this aspect, the verification and validation of research material have primary importance. At my workplace, I am part of the 'Patient Safety Community' where consistent works are adorned with aligned improvements. My performance and function in this role depend upon learning and practicing various types of quality-based research. Meanwhile, I learned these types, investigate to locate quality research attributes, and struggled hard to achieve excellence regarding EBP.

Part D

D1) Applied Leadership Reflection:

Applied leadership deals with the application of leadership skills to gain improved patient care and quality. For this purpose, peer recruitment can be executed to patient outcomes, and an efficient workplace environment, and provide guidance to others for the same improvements. The peculiar characteristic of an effective leader lies in not demanding the complete task but communicating properly and requesting to ensure the completion of the task. In other words, the leadership related to the demonstration of quality work and promotion of quality care instead of executing the charge. A leader must be vigilant and an excellent example to follow the rules, policies, and protocols during performing their duty and also urge others to follow the proper guidelines encompassing rules and

regulations.

D1-a) Applied Leadership: Development of Professional Definition:

According to my point of view, the applied leader definition states to be best among the peers relating to all leadership aspects. The course of Roles and Values states to step up like a leader irrespective of one's position to ensure a positive example for other nurses. The ultimate goal would be the patient outcome, quality care, and satisfaction of the patient. In other words, practicing leadership does not demand a managerial position but requires applying leadership skills to assist fellow peers to ensure integrity, accountability, and uprightness and show humility embedded with empathy.

D1-b) Applied Leadership: Artifact support:

During the completion of Task 1 in C493, I came to know the significance of leadership skills, and their applicability in solving problems and minimizing loss in any field. Specifically talking about the nursing profession, leadership skills can mount immense improvement in patient care and quality.

D1-b1) Applied Leadership, Artifacts supporting Definition:

In Task 1, I identified primarily environmental problems concerning the current clinical practice. For improving work conditions and boosting staff morale, I investigated the main issue and devised some possible solutions for my managerial team. Further, in a step-by-step manner, I tried to fix the issue by analyzing the situation keenly, identification of contributing factors, cost-effective analysis, implementing a timeline, and trying to convince all the stakeholders to pin on the same page. Finally, I preferred to share the solution plan after completing the necessary arrangements. As a result, they accepted my solution ideas and implemented improved patient care by enhancing the nursing morale.

D2-a) Applied Leadership, Professional Collaboration:

Leadership skills are required to collaborate and coordinate with the top management to execute any solution. For that purpose, I provided a cost-effective solution plan, and the managerial team was receptive to improving patient care along with making changes in the working environment. Meanwhile, I also contacted and collaborated with peers about several problems including deficiency

of pieces of training, staff deficiency, lack of an encouraging environment, and widened manager-subordinate trust gap. Many nursing fellows willingly recommended arranging for extra work in the case of cross-training sessions. In addition, it proved fruitful to acquire trained staff with multifarious specialties.

Part E

E1) Community & Population Health: Reflection:

The top priority of medical attention has become community and population health, especially in the past few years concerning the pandemic episode (Torri et al., 2020). The prevention of this COVID-19 needs public education as an essential entity. Undoubtedly, in the current shadows of misinformation and a trustless environment, community education is very difficult. Reflecting on other issues relating to community and population health, medical science never faced such difficulty in addressing such issues. Public trust is directly related to the availability of solid and reliable information to the masses in an undetectable way. Such a strategy can be helpful to gain the lost trust of the public in medical sciences to solve their other issues including drug abuse, obesity, HIV, etc.

E1-a) Community & Population Health: Development of Professional Definition:

According to my viewpoint, the definition of community and population health deals with the evaluation of the respective community in the context of issues that affect the masses. It directly involves the assessment of community needs in a holistic approach along with the difference with neighboring populations. A population may be affected by multiple health crises or be limited to a particular area. So, identification of these resources is compulsory in various situations to sort out the issue. In C304, I learned about the roles nurses may apply and perform to cater to different situations, especially in those circumstances where the community or population is under threat. This threat may affect the community as a whole or at the individual level.

E1-b) Community & Population – Health Artifact Support:

In C228, I completed two tasks that have broad perspectives in alliance with the issues affecting the community. In Task 1, I discovered various performance features regarding research including need assessment performance, assessments of sites, interviews of residents, and broad-area surveys to encompass the issues of neighboring communities and populations. However, Task 2 allowed me to forecast and estimate risk factors and epidemiological determinants. In addition, I also learned the

response techniques of nurses to the community populace regarding any health issue.

E1-b1) Community & Population Health: Artifacts Supporting Definition:

For the purpose to complete Task 1, I drove the far areas of the community where I came to know many aspects that I was ignorant of before this visit. Differences between neighborhoods are directly linked to the availability or absence of resources. This dimension revealed that certain issues are entitled to the health sector but are contributing to health issues like unhealthy diets, lack of exercise, and unhygienic conditions. So, the identification of such factors is necessary to implement modern innovation and to eradicate various issues from society related to the health paradigm.

E2-a) Community & Population Health: Community Health Task:

In C228 Task 2, I tried to identify and understand the health issues and their respective impact on the community populace. For that purpose, I chose the horizon of COVID-19 to estimate how the community succeeded to handle the issue, the investigation of the reporting protocols, and the nurse's role in the health sector of the community. For such an assessment, the virtual city of Sentinel allowed me to accomplish my assessment. In my community, my main concern was the research response about the pandemic and the overall impacts this pandemic has cast on the populace.

E2-b) Community & Population Health: Community Diagnosis:

COVID-19 had totally changed the living setup of humans worldwide and I identified its impacts on the human populace around the globe in alliance with the impacts on my community. I accomplished this target in C228 Task 2. Its impacts were devastating as it caused entire chaos to small and medium-sized businesses along with increased unemployment. Therefore, health awareness and education became mandatory to cease its further spread around the globe. In this context, providing the relevant information to the masses I emphasized the importance of mask-wearing, proper masking techniques, hand washing, and execution of vaccination as a top priority. In this way, I utilized the awareness and education tracts to save and secure the workplace.

E2-c) Community & Population Health Changes in Focus:

I learned about changing the focus of community evaluation during C228 Task 1 about the virtual town of Senital city. I knew the fact that the said course will lessen my fatigue to collect research data. During the visit to neighboring areas, I made a mental list of all the required assessments for the class. I also considered that such a change in focus will automatically improve the quality of care to patients. Meanwhile, I noticed various and differentiated demographic attributes of the population while working at VA.

E3: Community and Population Health: Importance of AMNH Certificate:

The course relating to the American Museum of Natural Genetics proved very fascinating and insightful. The role of genetics in human life and its learning improves the nursing practice to apply treatment to patients. According to my viewpoint, it is better to complete this certificate before enrolling in biochemistry for an enhanced understanding of genetic effects on health. Many hereditary diseases devastate the human populace and the familiarity of nurses with these diseases mounts efficient care of the patients. This certification will assist me to help the community and population by understanding the factors leading to genetic disorders and respective treatment options as well.

References

- Blizinsky, K. D., & Bonham, V. L. (2018). Leveraging the learning health care model to improve equity in the age of genomic medicine. *Learning health systems*, 2(1), e10046.
- van Belle, E., Giesen, J., Conroy, T., van Mierlo, M., Vermeulen, H., Huisman-de Waal, G., & Heinen, M. (2020). Exploring person-centred fundamental nursing care in hospital wards: A multi-site ethnography. *Journal of clinical nursing*, 29(11-12), 1933-1944.
- Harun, M., Dostogir, G., Anwar, M. M. U., Sumon, S. A., Hassan, M., Mohona, T. M., ... & Styczynski, A. R. (2022). Rationale and guidance for strengthening infection prevention and control measures and antimicrobial stewardship programs in Bangladesh: a study protocol. *BMC Health Services Research*, 22(1), 1-11.
- Robinson, K. A., Brunnhuber, K., Ciliska, D., Juhl, C. B., Christensen, R., & Lund, H. (2021). Evidence-based research series-paper 1: what evidence-based research is and why is it important?. *Journal of Clinical Epidemiology*, 129, 151-157.

Torri, E., Sbrogiò, L. G., Di Rosa, E., Cinquetti, S., Francia, F., & Ferro, A. (2020). Italian public health response to the COVID-19 pandemic: case report from the field, insights and challenges for the department of prevention. *International Journal of Environmental Research and Public Health*, 17(10), 3666.

Pich, J., & Roche, M. (2020, November). Violence on the job: the experiences of nurses and midwives with violence from patients and their friends and relatives. In *Healthcare* (Vol. 8, No. 4, p. 522). MDPI.