

NURSING CAPSTONE PAPER EXAMPLE

This paper will include a description of some of the most important interpersonal skills that a nurse must have in order to assess psychological needs and provide effective psychological care. A sick man coming to the hospital is exposed to unpleasant experiences. It comes with a specific idea of medical staff, nurses and doctors who are there to help, facilitate, nurture, eliminate pain, cure, comfort and understand. Fundamental interpersonal skills that each nurse should have and which also support health care are: communication skills, assessment skills, emotional care, counseling, negotiation, persuasion and information delivery. Skills are previously learned rather than innate. They can be developed with exercise and are constantly being improved. Interpersonal skills always involve the connection between two or more people or groups and their mutual involvement. Interpersonal skills have proven to be the basis for providing health care and how the psychological role of nurses is to predict and meet the emotional needs, to realize the relationship, to communicate and to encourage it, to increase self-confidence and self-reliance. In order to understand the patients, provide them with emotional care, offer counseling, have good observation skills, active listening, we must be tolerant, show respect, interest, expertise, gain trust and communicate clearly for patients with understandable language. One nurse said, "All nurses should have the basic counseling skills to help them connect and communicate with the patients in a way that is not superficial." Counseling can accomplish many things, such as helping the patients understand and accept certain feelings as "normal" consequences of their illness or injury. Here we can first of all emphasize the ability to listen and respond, which would encourage people to share our emotions about the situation they are in. Burnard (2005) mentions counseling as a process in which one person helps another to clarify his or her life situation and decides on a further course of action. In other words, counseling is a process rather than a one-off activity, and requires a combination of skills, personal qualities and procedures. Counseling is important in contexts where people are faced with major changes or adjustments such as life-threatening illness, deformity, disability, loss of various forms, such as loss of partners and the future (Priest, 2014). Counseling alone cannot solve one of these problems, but it does not really involve solving problems. Counseling is not assuming responsibility instead of a patient or giving false security but it can help a person to see, explore their situation, feelings, and thoughts in an atmosphere of understanding provided by a counselor. Do all nurses need to acquire and practice counseling skills? There is a lot of discussion about this topic. Some believe that counseling is essentially a higher level of communication skills that only some nurses need. Others argue that counseling is a skill that facilitates effective communication, regardless of the degree of nursing education, and that all nurses should have counseling skills to be good communicators because this is primarily the case with the patients. The use of counseling skills with physically ill people is considered crucial for far-reaching positive consequences, i.e. benefits that cannot be overestimated. Nichols (1993) considers that all competent health professionals should have basic counseling skills. It is also considered that the counseling exercise would be useful to improve the communication of all health professionals. When we are involved in communicating with another person, our attention should be such that we are directed directly to her, so none of our potential distractors hinder it. The tone we are talking about, the expression of the face, the position of the body, the touch, and other nonverbal signs to which the message of our kindness is transmitted is to be taken into account.

Interaction and attention to attention implies not only the physical but also the psychic presence. We need to be aware of ourselves because awareness of ourselves has a strong influence on communication. The so-called "giving of attention" is very difficult to achieve. By exercising, we can improve our participation skills by using non-verbal communication. Egan (2001) advocated the SONOO position, where the letters in the acronym indicate:

Straight Sitting (does not necessarily mean direct face to face, but upright sitting and the ability to clearly present our person to another person)

Keeping Open Hold (means that hands or legs are not crossed because it can point to the message "I'm not actually interested in you and / or closed for what you want to say")

Stepping forward (lightly, towards another person and without exaggeration, effectively empathizes).

Establishing contact with the eyes (this social skills must be at an appropriate level: it is estimated that more than 20 seconds of direct contact with the other person may be perceived as annoying and / or even jeopardizing).

Relaxation (It is not easy to realize when you focus on all other SONOO position elements, but with exercise, we develop our own version of the position that is pleasing to us and allows us to feel as relaxed as possible in the situation.

Active listening must be purposeful. One of the most significant segments in verbal communication with the patient. It is often neglected, and the reason for this is the rapid progress and development of technological and pharmacologically sophisticated diagnostic and therapeutic options, but also more demanding nursing / health documentation. Active listening comprehensively covers what the speaker wants to say. The nurse should know how to listen to the patient's messages, figure their meanings and give feedback that the messages have been understood. Therapy communication begins with active listening and is a prerequisite for empathy and assertiveness. Undivided attention strategies include: call setting, encouraging, illuminating, perceiving new opinions, and reflecting. We are keen on making inquiries and demonstrating that we are following the interviewee. Help is empowering discussion with nonverbal and verbal signs. Clarify the requirement for both general and obscure proclamations. Then it follows the recognition of the unlimited: thoughts and feelings. We apply reflection to messages and emotions. By rephrasing, we repeat the key thought, but more concisely. At the end of conversation, it is important to summarize and it is an important skill; the key data, tasks, messages and goals are summarized. When listening active, it is of utmost importance to use non-verbal signs of active listening, to keep track of the interviewer and to be aware of his non-verbal communication. All this involves contact with the eyes, avoiding excessive movement and gesture. It must be in a position opposite the patient, face to face, leaning slightly forward, relaxed, open gesture and comfortable posture of the body. With regard to additional active listening instructions, they relate to the need to stop activities that are not essential to listening and to prevent obstructions, reverse their own obstructions and fatigue. We have to decide to listen and prepare, documentation and everything that needs to be available, and it is important that we are prepared in advance. Listening should be empathic, without interruption, we must be involved, providing enough time and space for the interlocutor. It is important that we finally check if we understand everything. Negotiation is a process of achieving a common goal or understanding of the needs of others, that is what the other person wants. Or, it is a mutual method of communication to reach an agreement.

Negotiation is inevitable in working with people. Working with nurses with other people should be successful, reducing tensions between patients and healthcare professionals and achieving the best for the patient. Active listening, explanation and paraphrasing are the first preconditions in negotiation and lead to establishing a trust relationship. Building healthy interpersonal relationships contributes to positive social interactions. By establishing trust, the nurse becomes a patient advocate and advocate. In the process of adhering to health recommendations and the co-operation of taking therapy, bargaining is of crucial importance because it facilitates joint decision making, problem solving and conflict. Negotiation improves healthy communication and interpersonal relationships. The characteristics of the negotiation process are the fact that this relationship: uses the process of practical / effective decision-making, is based on evidence, focuses on patients, is inexpensive, improves / maintains healthy communication and interpersonal relationships.