## teaching tips

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## **Situations in Which Questions Are Valuable**

#### **ABSTRACT**

This column discusses several situations in which questions are valuable

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When teaching, the most powerful tool instructors have is the ability to engage the participants by asking questions. Individuals generally prefer to talk rather than to listen. Asking questions facilitates talking. In addition, asking questions gives one the edge in practically any situation (Marquardt, 2005). Questions can be valuable in several situations.

Persuade people. Instructors or leaders often find it valuable to persuade staff or students about ideas or plans to gain their support. Good questions can create rapport and uncover elements of plans that might worry or concern individuals or, conversely, ease their doubts. Questions can be as simple as "What do you think?" or "How does that idea strike you?" or "What might the disadvantages be to this idea?" When trying to persuade, leaders are always more effective when asking questions

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than when explaining all the reasons others ought to agree with them (Marquardt, 2005).

Gain information. Questions are commonly used to gather information or discover what students or staff already know. Leaders need extensive information. No one can know everything. Questions can include "Is there anything else I should know?" or "If I have additional questions after reviewing our discussion, what would be the best way to contact you?" The ability to listen to responses and glean information is essential (Leeds, 2000).

Plant ideas. Using questions to plant ideas is one way to lead staff or students in the implementation of a specific project. Describe both plan A and plan B and then ask "What do you think about these options?" or "Which one do you think might work?" or "What do you see as the strengths or drawbacks in each of these plans?"

Clear up fuzzy thinking. Instructors or leaders must think clearly when asking questions. Doing so requires much more concentration than merely making a statement and is a more creative and constructive approach. Good questions organize problems for both teachers and students and support opportunities to find solutions. Questions also stimulate others to think more clearly before answering. They are forced to or-

ganize and verbalize their thoughts. Such questions may include "What specifically must be done, or what is your plan for handling it?" or "What do you plan to do first and how do you see the finished project?" (Leeds, 1988).

Motivate staff and students. One of the best ways to motivate staff and students is to encourage them to solve their own problems. Any thoughts, positive or negative, that instructors or leaders may have regarding situations should be presented as questions. These may include "Could you give me more details about your thinking regarding this project?" or "What do you estimate the costs to be (financial or human resources)?" or "Where would you look to obtain more information?"

Solve problems. Questions can help identify issues or problems and allow instructors or leaders to discover information facilitating their resolution. Examples of such questions include "What seems to be the issue?" or "What possibilities or opportunities do you see?" Such questions express interest and also help staff and students think more clearly. They allow staff and students to gain confidence in their problem-solving ability.

Remove the sting from criticism. Direct criticism often creates defensiveness in recipients. When feedback is given in the form of a question, it stimulates the recipient

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to think about the situation. Questions that arouse thinking and encourage action include "How do you think arriving late affects your team?" or "What makes you feel that way?"

Next month, additional situations will be identified in which the use of questions leads to success.

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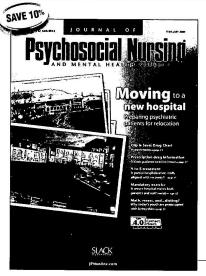
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# teaching tips

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### More Situations in Which Questions Are Valuable

#### **ABSTRACT**

This column discusses more situations in which questions are valuable. J Contin Educ Nurs 2009;40(9):393.

Last month, specific situations were identified in which the use of questions is valuable. The situations discussed included to persuade people, gain information, plant ideas, clear up fuzzy thinking, motivate staff and students, solve problems, and remove the sting from criticism. This month, additional situations are identified

Open communication between diverse individuals and departments. Diverse individuals may have difficulty working or learning together. They may not know one another or fully appreciate the contribution of others in a group. Questions can bring these individuals together. Those who lead meetings should begin by asking for a clear definition of the problem or learning task upon which all can agree. Then, each individual should be asked to identify what he or she can contribute or about his or her perspective. Individuals can also be asked how they can work together.

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Reduce mistakes. When an assignment is made or a project is outlined, it cannot be assumed that the individuals involved feel confident in their ability to carry it out. Often, the wrong question is asked: "Do you understand?" This question is not particularly helpful because individuals frequently answer by nodding in the affirmative. The right question is: "Can you summarize what you plan to do with the project?" or "Can you tell me the steps you might use in addressing this issue?" This could be followed by: "Is there anything more I can do to clarify the situation?" or "Could you take a day or so to give this some thought and then get back to me with any additional questions?"

Overcome objections. When objections are anticipated, the following questions can be effective: "What are your major concerns about this project?" or "What other options do you see?" or "How can I help?"

Gain cooperation. When departments or groups are being uncooperative over an issue, the following question should be asked: "Have you ever made an exception?" If there is not a definitive answer, a good follow-up question is: "What would it take for you to make an exception in this case?"

Clarify statements. The most important use of questions is to clarify statements. If a new administrative assistant says she will organize

your files, you should ask: "How do you plan to do this?" or "What will they look like?" or "How will I find what I need?" If you do not ask such questions, the assistant may organize according to her system, which may be completely foreign to you.

Reduce anxiety. Teachers or leaders are in control when they ask good questions. Questions mandate subject matter and establish the tone of exchanges. Stress levels and anxiety are reduced for individuals who ask questions. Conversations can be kept on track by shifting the focus of questions.

Defuse difficult situations. Difficult situations or confrontations can lead to anxiety over possible escalation or a chain reaction of attack-counterattack. These situations can be defused by a question such as: "Would you tell me more about what happened and what you were feeling?" This will reduce defensiveness and open up the lines of communication.

The situations described last month and in this column exemplify how important it is to hone your questioning skills. Practice asking questions of your friends and colleagues. Compose questions before you are in specific situations. Write 10 smart questions on a card you can carry with you. Such efforts will considerably expand your skill set.

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Student Nursing Scope of Practice, Role, Accountability, and Professional

Behaviors in the Clinical Setting

Genet Ali

Submitted to Nancy Novice

NR 485 Senior Practicum

Most Excellent School of Nursing

July 31, 2012



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Student Nursing Scope of Practice, Role, Accountability, and Professional

Behaviors in the Clinical Setting

#### **Student Nursing Scope of Practice**

A Colorado nursing student functions within the scope of the Colorado Nurse Practice Act under the mentoring and supervision of a state-licensed RN. Student nurses may not transport clients, ride in ambulances, recommend over-the-counter drugs or unprescribed treatments, take telephone or verbal orders for medications or treatments, package or label drug supplies for any individual, administer medications or treatments without consultation with the RN responsible for them, administer chemotherapeutic drugs that require certification, change tubing on central lines or discontinue central lines infusions without direct supervision of the RN, administer any IV drugs by the "push" method or "piggyback", except when the drugs are identified in writing by the agency as appropriate and safe for administration by the general staff nurses, are double-checked by the RN prior to administration, and are under the direct supervision of the supervising RN. Additionally, student nurses can't perform endotracheal intubation, care for or make decision independently concerning critcally ill patients with monitoring devices needing expert reading and interpretation, sign out narcotics, carry narcotic keys, perform ABGs, administer vasoactive drugs independently, administer blood, or perform any skill/task that he/she has not been trained for and been checked off as competent.

#### Student Nurse Role

The student nurse's role is to maintain health and professional liability insurance, discuss with the preceptor and/or agency course objectives for the learning experience,



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function within the scope of the Colorado Nurse Practice Act, and follow the policies and procedures of the agency. Other responsibilities include identifying his/her own learning needs, communication these to the clinical instructors and preceptors, being prepared for clinical activities, and maintaining a current basic life support certification (School of Nursing, 2003).

#### **Professional Behaviors in the Clinical Setting**

The nurse participates in "quality of care activities as appropriate to the nurse's education and position, and then uses the results to initiate changes in nursing practice and throughout the health care delivery system" (Standards of Clinical Practice, 1998). The nurse evaluates one's own nursing practice, while acquiring knowledge and competency (Standards of Clinical Practice, 1998). Nurses interact with and contribute to the professional development of other health care providers as a colleage by sharing knowledge and skills, providing peers with constructive feedback and contributing to a supportive and healthy environment, conducive to the clinical education of nursing students and other employees, as appropriate (Standards, 1998). Nursing practice is guided by the Code of Nurses. The nurse's primary commitment is to the patient, the recipient of services (Code of Ethics for Nurses, 2001). Under this commitment, the nurse strives to provide the patient with education and the opportunity to participate in planning their own care as much as possible. This is to be done using culturally appropriate, religious and ethnic considerations (Code of Ethics for Nurses). Respect for individuals extends to all that interact with the nurse. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual. Colleages, employees, assistants and students are



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treated with respect, precluding any harassment or threatening behavior (2001). When acting as a nurse professional, the nurse establishes and maintains appropriate limits to relationships. Nurse-patient and nurse-colleage relationships have as their foundation, the purpose or preventing illness, alleviating suffering, and protecting, promoting, and restoring the patient's health (Code of Ethics for Nurses). The personal nature of nursing involves working closely with other colleages, and allows for the potential for the blurring of professional limits to relationships. These boundaries should be maintained, even with long term relationships in the workplace (Code of Ethics for Nurses).

#### Conclusion

The student nurse's roles and accountabilities are complex and varied. They involved the patient, and colleages, as well as adhering to agency policies and standards. As they are learned and understood, what is involved in becoming an RN becomes clearer.



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# NR 485 Senior Practicum Scope of Practice Grading Rubric

Required Content	Possible Points	Earned Points	Comments
Thoroughly addresses the following:			
Introduction	5		
Description of student nurse scope of practice	10		
Discussion of student nurse role and accountability	10		
Discussion of professional behaviors in the clinical setting	10		
Conclusion	5		
Paper Presentation/format:			
Grammar, spelling, syntax	2		
Clarity, logic, and accuracy of paper presentation	2		
Adhere to APA writing format	2		
Does not plagiarize, uses text	2		
book/references as appropriate			
Adheres to page limits (4-5 pages) not including cover page and reference pager	2		
Total Points:	50		



Age: <u>34</u>	Date Admitted: 5/31/07	07 Diagnosis: Spinal Cord Injury	tal Cord Injury	Occupation: RN
eligion/Culture/Ethnicity:_		Student: Sally Sue Date	Date of Care: <u>6/14/07</u>	Date: $6/15/07$
ursing Diagnosis: Assessment with ctive & objective data	Patient Goals & Objectives	Interventions:	I did	Outcome/Evaluation S.O.A.P format
ective data: cating meals sing Snacks	<ul> <li>Eat 100% of 3 meals a day</li> <li>Eat 2 snacks per day</li> </ul>	<ul> <li>Educate on proper nutrition</li> <li>Help patient choose food that appeals to them</li> <li>Offer small frequent meals</li> </ul>	<ul> <li>Done on 6/14</li> <li>Done each day</li> <li>Done each day</li> </ul>	

Outcome/Evaluation S.O.A.P format	Pain level at 4/10 after pain medications given
I did	• Yes
Interventions:	<ul> <li>Discuss pain management with physician</li> <li>Offer pain medications regularly</li> </ul>
Patient Goals & Objectives	<ul> <li>Assess pain every 4 hours and give pain medications</li> <li>Rate pain at 0/10</li> </ul>
Nursing Diagnosis: Assessment with subjective & objective data	Diagnosis: Acute Pain



Nursing Diagnosis: Assessment with subjective & objective data	Patient Goals & Objectives	Interventions:	I did	Outcome/Evaluation S.O.A.P format
Objective data: patient quiet, withdrawn, states he can't believe he'll never walk again.	Patient will state that he is not depressed by next week.	<ul> <li>Anti-depressant</li> <li>Offer emotional</li> <li>support</li> </ul>	• Done, BID • Done on 6/15	Patient still quiet
<b>Diagnosis:</b> Depression				



Please reflect on your time spent as a staff nurse, a preceptor, or a clinical faculty member and bring a brief situation or experience, with questions, to discuss relative to this encounter and/or concerns with your practice and student liability issues. We will be discussing these exemplars in your small break out groups on Day 5.

