

United Nurses of Alberta

Anna Sokolowski

AS: My name is Anna Sokolowski and I work in the recovery room at the Royal Alexandra Hospital.

Q: How long have you been working there?

AS: I've been working there for 5 months.

Q: Where did you graduate from?

AS: I did my first 2 years at Grant MacEwan and my 2nd two years at U of A.

Q: Did you do a practicum?

AS: Yes, I did a practicum at Royal Alex. I did practicums at all the hospitals except for the Misericordia.

Q: What's your first impression of life on a ward?

AS: Life on a ward. Well let me just say that my first impression, well coming out of nursing, my first impression was that it's an exciting time to come out of nursing, because there's a shortage. You can go anywhere you want to go and there's vacancies everywhere. Looking at that is good because you have your choice of where all the jobs are. But then when you actually get in there you see the downside of the nursing shortage. It's

great that you can get a job anywhere, but then when it comes to staffing, everyone's short staffed. There's nurses and they keep working overtime and more overtime. Then you see nurses that the more overtime they pick up they're starting to burn out. You're kind of thinking, well if they're saying the shortage is going to get worse, what's going to happen 5 years down the road when that's me?

Q: Do you get called for extra shifts?

AS: It happens. Before I started in the recovery room, I'm the float pool and you could work any shift you wanted almost. You could go in there and say, this is when I'm available, and they could say, okay I can spot in here and here, you can have all those shifts.

Q: Do you find that you're working more shifts than you want to?

AS: Right now, being a new grad, it's exciting; you're excited to be in there nursing, you're loving it. You love your job and picking up that overtime is great right now. I love to pick up the extra shifts right now. It's exciting being in there and learning. But I can see down the road to the future, when I can see the other nurses saying, the phone calls and extra shifts when they have families and other life commitments. It takes a toll on them and they get tired of getting that phone call at 6:30 in the morning to come in and work. So right now as a new grad, you can work as much as you want.

Q: What was it like working at the U of A Hospital?

AS: I worked there as an undergrad nursing employee at the Royal Alex Hospital. That was great, because after my 3rd year you can work as an undergraduate nursing employee (UNE). I found that was one of the best things I ever did to work on my nursing skills. It's a different learning environment than school. I found it was really helpful to my training in that with working as a UNE, I worked with a great bunch of nurses. They'd say, oh come over here, we'll show you this. Or, oh look, they're doing this in this room, come learn how to do this. Or, do you want to go start an IV and get experience? It was a great way to gain some skills.

Q: Is there enough time in the working situation for you to ask questions and get some additional information on things you're not certain about?

AS: I have to say that working in the recovery room where I am now is wonderful. They have a good variety of staff, lots of older nurses, and they are really good about helping us new grads. We have questions, we can approach them. They're very approachable. They'll pull you aside when there's breaks in the day and say, do you want to learn more about ECGs, and show you a lot of these little things. We're pretty lucky in the recovery room because we have those quieter times. On the floors working on the float pool on a surgery floor, you don't really have that downtime if you're running short staffed. You can always ask questions but it's a bit harder to find the time to sit down and talk about those things. But you can always approach your clinical nurse educator on the unit too, and they'll help answer any questions as well. They're very approachable.

Q: It sounds like a lot of the learning is happening during coffee breaks rather than a structured learning.

AS: Maybe to a point it's coffee break learning. But recovery room is a different area, because there's times when they have scheduled in-services where they in-service the whole staff, the clinical nurse educator. I find that very beneficial because you're always learning new things. But it's easier to do that in the recovery room, because the ORs you can start the ORs later or the ECT treatments later. That makes it easier. Whereas on the unit, you have patients, I think the challenge on the floor is you have patients there 24 hours a day; you don't really have a break with no patients there. That's definitely a challenge getting in-services on the floors.

Q: What brings you to the UNA convention?

AS: What brings me to the UNA convention? I have to say one of the nurses I work with got me involved just going to the local meeting. That was right when the new contract was coming out. I had an idea what UNA was about; so she was like, well come and learn more. Then that got me interested in learning more about what UNA does. Then she's like, there's no better place to learn than going to an annual general meeting and learning what UNA is all about.

Q: Is that happening for you here?

AS: I'm learning what UNA is all about and seeing how things get decided, and the whole process of voting on things. Am I learning more about UNA through coming here?

I think so. With the people I'm sitting with, they're like, ask questions, ask questions.

They want me to get involved and understand what's going on, so they're really good with telling me what's going on and saying, this is how things are done.

Q: So the people you're sitting with are side coaching you and explaining what's going on?

AS: Yes, they're explaining what's going on and they're answering my questions I have about how things are done.

Q: Would you come back again?

AS: Would I come back again? I think so, ya. Ya, I would.

Q: What do you think about UNA's political agenda to protect public healthcare. Had you thought about that before?

AS: Have I thought about the political agenda before coming to this conference? I wasn't really sure about UNA's stance on everything before coming to this meeting. Now I can see that they definitely do have a clear stance. Part of me coming to the meeting was just learning more about what UNA was all about and learning about their stances.

Q: Is public healthcare important to you?

AS: I would have to say that public versus private healthcare is a very debatable issue.

I'm kind of sitting on the fence right now. It's a really tough topic, a really tough topic. I

do think that there should be healthcare for everyone, I do think that, no matter if you can afford to pay for it or not. I'm still learning about both sides of the story. It's a tough, tough subject. On one hand you can have healthcare available to everyone and people have to wait so long to have their surgeries done. It's a very debatable issue, very debatable issue.

Q: Are there other topics that you want to talk about?

AS: I'm just going back to the nursing shortage and thinking about my first impressions of the nursing shortage. It's an exciting time for us because there's all these jobs opening up. Then when you see that there's all these jobs and you can get a job anywhere you want, it's really exciting. However, then when you actually are in these jobs, you start to see that the nursing shortage is going to... what am I trying to say? I'm just thinking along the lines of with the nursing shortage, that it's something that it seems it's not going to get better right now, because there's no real answer where are we going to get all these extra nurses from. Being short on the units, it not only affects the safety of us as nurses, but it also affects the safety and quality of care that we can give to our patients. That's a big one because sometimes it's just those little extra things that you have time for to sit down and talk with a family or sit down and just . . .

When you are short staffed, it's those little extra things that make a big difference to your patients, your families, that you don't have the time to do any more. It's hard because especially as a new grad coming out, like in school you've had the perfect, you're never short staffed as a student and you always have the extra time to take with your patients

and the patients' families. As a nurse going out on the units and being short staffed, sometimes that extra time that you have to do those little things is gone. It's hard because you want to be able to give your time and you want to be able to take the time for all those little things, because they do make a big difference to the patients and their families.

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