## Be Patient-Focused by Drawii from Concept Map to Utilization

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I clearly remember when teacher Huei-Ming Su came to our unit in December 2008. She came to teach us how to use concept mapping (a hierarchical form of structure diagram that illustrates conceptual knowledge and their relationships within a specific topic from general to specific concepts), and to share experiences of taking care of patients. Our unit started using the concept mapping tools for case studies in the morning.

## **Utilizing Concept Mapping on Patients and Treatment**

By applying concept mapping with real cases in the clinics, patients who were originally afraid of real care practice can gradually feel more at ease and be interested in the process. When skilled practitioners apply concept mapping to solve clinical problems, it allows them to link medical literature to actual cases with relative ease, and therefore helps clinical colleagues to organize and focus on complex problems. However, it can be difficult for beginners to fully comprehend the concept. The process can often take longer, and cause omission of some important points.

A process workshop was held in the Nursing Department in 2011, after



For more than four years, Hualien Tzu Chi Hospital pediatric ward utilized the concept map in the morning case study or clinical situation teaching and activities, which continuously improve each year. The team found the humanoid map discussions helpful in getting cross-unit consensus.

the department had some experience in utilizing the concept mapping. At that time I joined the workshop with two other colleagues. The use of a humanoid map gave me a first impression with doubts. "How can that be possible? We are already so busy!"

Ideas started to emerge from my mind as the class progressed. The concept of the humanoid mapping method is quite interesting; but one feels strange the way it is presented because we had never been taught before. The teacher understood that the students in the class had no prior experience with this technique so she divided us into groups. Students were grouped according to their experience and expertise in their respective units. Each group picked one case and used a humanoid map to proceed with the exercise. We had a chance to reflect on what we learned in the classroom with discussion. It once again challenged us to re-exam the problems and the causes.

During a group exercise, the teacher directed students to examine the root cause of the problems from all aspects, including the patients' physiological, psychological, social, spiritual aspects, and even the roles of major caregivers in the family. How can these problems be resolved? Are these really problems from the patients' perspective? Are they important? How do we prioritize these



problems? We learned a lot in two days using humanoid mapping to illustrate good nursing care practice; we also learned the characteristics of people from other departments, their unique specialty and interests!

Since we work in the pediatric wards, picture drawing is not unfamiliar to us. Pediatric patients have scars, physically and mentally, because of a series of invasive medical treatments. Their wounds are deepened from isolation from their friends and families. Through drawings, they can express their feelings in an eternal and peaceful way. A vivid drawing will not only draw people's attention, it helps others to better understand their internal world. At this moment, as a nursing practitioner, we need to illustrate our observation and assessment by means of a humanoid map. In the beginning we were not comfortable; but later on we appreciated the benefits after we started drawing. We quickly were used to it.

Humanoid mapping with facial expression can reflect patients' moods at a moment in time. Patients' problems can be understood in a glance. Colleagues can bring their creativity into play as well. Furthermore, because there are connections between each problem, it can cultivate critical thinking and enhance the relationship among colleagues, stimulating organizational skills and logistic thinking through continuous interaction.

## **Utilizing Humanoid Map Fosters Consensus Thinking**

In the beginning of roll-out, we began with colleagues who have served in hospitals for more than one year. The main reason is that these colleagues are preparing for the N2 level promotion examination and therefore need to complete case analysis anyway. It fits the purpose of using humanoid mapping to complement their nursing care.

The first report of the unit was from Chih-Hsuan Yu, who has been in the unit for two years. He used a humanoid map to assess and complete a nursing care process analysis of a teenager who suffered from leukemia. Also, he shared the analysis with everyone during a unit departmental meeting; other functional colleagues also provided their suggestions.

The team discussion of humanoid mapping does not only provide a whole picture of patient's problems, but also provide a picture of the influence of the illness on family members. Teams can therefore have better consensus regarding the individual care and extend it to a family centric care model.

Our next step is to promote the concept to the entire unit, model it as a learning curriculum for the interns, and to train new hires. At this stage, the presentation of the humanoid mapping should not be confined to drawing basics. Management should give us the freedom to be creative. The objective is to identify specific nursing care needs, whether individual or group related, through discovery. However, for colleagues at N2-level and above, the learning focus on how to utilize humanoid mapping to not only see and understand the patient's existing health problems, but to identify possible potential problems. One additional step should be undertaken is to further understand the influence of the illness on major caregivers in the family.

It has been one year since the promotion of the humanoid mapping in the unit. The response from the majority of colleagues regarding the method is positive. Through information technology, both whole and individual future human-centric nursing models will include the mobile working vehicle units, giving them the ability to utilize the technology, which will be accepted as a nursing staff's daily assessment tool.

The use of humanoid drawings can breakdown complex matters and reveals patient's problems immediately. It instills a sense of liveliness to the day-to-day tense environment; inspires learning, innovation, and encourage involvement from each other.



The utilization of humanoid map is to speak with drawing, to understand a patient's nursing care needs immediately. Photograph showing Hualien Tzu Chi Hospital pediatric ward discussion forum.