

Covenant School of Nursing Reflective



Learning to be a reflective practitioner includes not only acquiring knowledge and skills, but also the ability to establish a link between theory and practice, providing a rationale for actions. Reflective practice is the link between theory and practice and a powerful means of using theory to inform practice thus promoting evidence based practice.” (Tsingos et al., 2014)

Using the Reflective Practice template, document each step. The suggestions in the boxes may help you as you reflect on the incident. This Reflective Practice document will be reviewed by faculty and then you will post the final reflection in your LiveBinder folder.

<p>Step 1 Description A description of the incident, with relevant details. Remember to <u>maintain patient confidentiality</u>. Don't make judgments yet or try to draw conclusions; simply describe the events and the key players. Set the scene! It might be useful to ask yourself the following questions</p> <ul style="list-style-type: none"> • What happened? • When did it happen? • Where were you? • Who was involved? • What were you doing? • What role did you play? • What roles did others play? • What was the result? 	<p>Step 4 Analysis</p> <ul style="list-style-type: none"> • What can you apply to this situation from your previous knowledge, studies or research? • What recent evidence is in the literature surrounding this situation, if any? • Which theories or bodies of knowledge are relevant to the situation – and in what ways? • What broader issues arise from this event? • What sense can you make of the situation? • What was really going on? • Were other people's experiences similar or different in important ways? • What is the impact of different perspectives eg. personal / patients / colleagues?
<p>Step 2 Feelings Don't move on to analyzing these yet, simply describe them.</p> <ul style="list-style-type: none"> • How were you feeling at the beginning? • What were you thinking at the time? • How did the event make you feel? • What did the words or actions of others make you think? • How did this make you feel? • How did you feel about the final outcome? • What is the most important emotion or feeling you have about the incident? • Why is this the most important feeling? 	<p>Step 5 Conclusion</p> <ul style="list-style-type: none"> • How could you have made the situation better? • How could others have made the situation better? • What could you have done differently? • What have you learned from this event?
<p>Step 3 Evaluation</p> <ul style="list-style-type: none"> • What was good about the event? • What was bad? • What was easy? • What was difficult? • What went well? • What did you do well? • What did others do well? • Did you expect a different outcome? If so, why? • What went wrong, or not as expected? Why? • How did you contribute? 	<p>Step 6 Action Plan</p> <ul style="list-style-type: none"> • What do you think overall about this situation? • What conclusions can you draw? How do you justify these? • With hindsight, would you do something differently next time and why? • How can you use the lessons learned from this event in future? • Can you apply these learnings to other events? • What has this taught you about professional practice about yourself? • How will you use this experience to further improve your practice in the future?

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Use this template to complete the Reflective Practice documentation. Do not exceed the space in each box. Any information not visible to you is lost.

<p>Step 1 Description</p> <p>I have been doing my preceptorship on S5 an ICCU. This preceptorship happened the beginning of module 8 and has involved myself, other floor nurses, aides, and my preceptor. There are many skills I have practiced and learned on the floor, but I still have not successfully initiated an I.V. I have done many blood sticks and draws, along with learning an efficient way to chart and manage my time. As a student nurse I have been developing my skills and the result is better time management and skill improvement.</p>	<p>Step 4 Analysis</p> <p>New nurse shock is something that many new nurses or graduate nurses face in the field. This preceptorship is preparing me in a way that clinicals in past modules have not. By working 10 shifts for 12 hours, I have better understanding of what the job will demand of myself. Issues that arise from this event are a realistic understanding of how nursing judgment and critical thinking are crucial in the field. I assessed a patient recently that a foley and 0 output after a 12- hour day shift. The patient complained of stomach pain, and when lifting their gown to listen to bowel sounds it was obvious to my preceptor that the patient had a distended bladder. We removed the foley to discover it was kinked internally and the patient had immediate relief. So my preceptors nursing judgment was an amazing lesson for me to remember to listen to the patient and use critical thinking.</p>
<p>Step 2 Feelings</p> <p>In the beginning of this preceptorship I was feeling nervous. I was afraid all the nurses would think I was slow and dumb. This whole preceptorship has made me feel more confident over time and optimistic about my future as a nurse. The nurses on this floor and their helpful tips and words have made me feel encouraged and know that not all nurses eat their young. So far, I know I have so much to improve and learn with my skills and time management. I am optimistic because though I have made mistakes, over time with repetition, I am getting faster and better. This gives me confidence and motivation to keep working hard.</p>	<p>Step 5 Conclusion</p> <p>I feel that I could have made this preceptorship better from the beginning by being more prepared on my medications and knowing what they are used for. I now use my time management in the chart to look at physician's notes, history, labs, and upcoming medications before rounding. By doing this, I have a better understanding of what is going on with the patient before I see them. Report is a great way to do this as well, but by 2100 medication administration I have a better understanding of my patient's needs.</p>
<p>Step 3 Evaluation</p> <p>The good thing about this experience so far is how I am able to do and take on more than I thought I could. The bad thing that I feel that I am still lacking in many skills, such as I.V. starts. I.V. starts have been difficult for me because some patient's veins are rolling, hard to hit or impossible to feel. Skills that have gone well have included improved blood sticks, trach care and critical thinking. I feel I have done well with listening to the patient and improved on charting. My preceptor continues to push me in a positive way even when I feel like I am not ready. I did not expect a different outcome, other than hoping to be better equipped with skills and time management. I feel I have contributed to this floor by having a good attitude and helping when needed with other nurses and their patients.</p>	<p>Step 6 Action Plan</p> <p>Overall, this preceptorship has taught many things. There are so many different patients with different needs on this floor. With all patients wearing telemetry lines it is important to keep an eye on everything cardiac. Checking bladders of patients with foleys and ambulating patient's with assistance is of great importance. I have encountered very rude patients, and this has been a different learning experience for myself. I have been observing and learning how to communicate with people who are angry, swearing and even throwing things when in pain. There are many things I would do differently because I am still learning. But when I make mistakes, I find that I am more likely to remember my mistake and not make it again. I left two tubes of blood in a patient's room unlabeled because I thought my preceptor took them, since this mistake I have been careful to not make that mistake again. These sort of lessons will only continue to help me as a future nurse.</p>