



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

## Covenant School of Nursing Reflective

*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><b>Step 1 Description</b>                  I took part in a competency performance examination (CPE) in a simulation center, featuring a high-fidelity mannequin to represent a patient with life-like physiology. The CPE was supervised by 2 instructors, providing me with patient feedback, pertinent findings and some assistance. I was given time to review the patient's scenario, including admitting diagnosis, vital signs, prescriptions, and pertinent labs. CPE began when I entered the patient's room to provide total patient care. I performed focused assessments on the patient, including neurological, neurovascular, cardiac, respiratory, and abdominal, and genitourinary assessments. After performing assessments and documenting the findings, I made sure to lower the patient's bed, raise the side rails, have the call light within reach, and ask about the patient having any pain and any need to use the rest room. I left the patient's room to draw up 2 medications, and was able to administer them with no complications. I also taught the patient the purposes of both medications and side effects they may cause. I finished the CPE, performing the objectives on time, and passed meeting all objectives.</p>	<p><b>Step 4 Analysis</b>                  The goals of CPE was to demonstrate all universal competencies while performing specific skills related to patient care within an a time limit. The scenario was the patient had been diagnosed with urosepsis, and was admitted with symptoms of a systemic UTI, including fever, chills, and confusion. The scenario revealed that the patient had an elevated WBC count well over 10,000 and under 100,000 platelets. The patient had a history of CVA and HTN. The most notable vital signs included a BP of 140/96, a temperature of 98.6, and a pain of 2. The patient's ordered medications included Levofloxacin, Clopidogrel, Lisinopril, 2 opioids, and acetaminophen. When I performed a neurological assessment, I found that the patient was alert and oriented to person and time, but confused to place. Based on the findings, I explained to the patient that I would be giving Levofloxacin to treat the infection and Lisinopril to lower BP. The meds that were held were Clopidogrel because the platelets were low, both opioids because pain was low, and acetaminophen because temperature was below 99.9. Overall I was able to make sense of the situation, and knew ahead of time that my colleagues would be presented with different situations and findings.</p>
<p><b>Step 2 Feelings</b>                  In the beginning I felt mostly anxious, but also felt like I can still do this. I was thinking of various scenarios that would be presented by the patient, while also thinking "I got this."                  The event made me feel like the whole world was watching, but in reality it was only the 2 instructors who were watching. When they outlined the instructions to me, I felt more at ease and their words helped me calm down and focus on the patient. After hearing the patient's feedback and pertinent findings, I felt like I had a better idea on what to do for the patient. Halfway through, I felt the sense of urgency, knowing time was running out, but I kept going, knowing that I was in the home stretch. I felt a huge feeling of relief and accomplishment, when it came to the final outcome, knowing that I met all objectives and performed them as best as I could within the allotted time.                  The most important feeling I had about the event was one of confidence, because I made sure to control the anxious feelings I had in the beginning, and to not let them get in the way of providing care for the patient.</p>	<p><b>Step 5 Conclusion</b>                  I could have made the situation better by managing my time better. Certain assessments, while helpful, could have been omitted to allowed me more time. Even though I administered the medications on time, I could feel the sense of urgency when I was giving the Lisinopril and setting up the IV pump to deliver the Levofloxacin at the correct rate. The instructors did a great job with the situation, providing patient feedback as well as assistance when I was drawing medications. I have learned the importance of managing time by performing assessments that are the most important to the patient, as well as planning the care based on the findings presented. I also learned the importance of rationales and that they not only help make sense to the patient, but to me as well.</p>
<p><b>Step 3 Evaluation</b>                  Good things about the event were that assessments and interventions were done in a timely manner, and that my plan of care was straightforward. Some bad things were times when it felt awkward trying to come up with the proper things to say to the patient, and having to pause momentarily to check my notes. Easy things included performing universal competencies and assessments, as well as drawing and administering medications. Difficult things included managing the anxious feelings I had, controlling my breathing throughout the event, and collecting all of my thoughts in order to perform the right actions and say the right things; all while keeping track of time. The overall care plan went well. I was able to ask the most important questions to the patient, as well as perform the right assessments. I managed to take the most pertinent findings and administer certain medications while holding others, while providing my rationales for each of them. I was expecting to go over the time limit during medication administration, because I felt that I had taken more time with assessments, and some of them might not have been necessary to perform.</p>	<p><b>Step 6 Action Plan</b>                  Overall this situation was a highly educational experience. I can conclude that this event helped me integrate all the relevant subjects that I have learned so far. By combining many subjects, including, but not limited to universal competencies, patient data (both subjective and objective), critical thinking, communication, time management, and evidence based practice, I have begun to see a bigger picture on what nursing care is all about. It is for the health and safety of the patient, and being there for the patient.                  I can use these lessons in future modules and clinicals, learning new subjects and integrating them into my current knowledge and skill set. This event has taught me, professionally, the importance of knowledge integration, why nurses perform the actions they are taught, and how everything comes together. Personally it taught me the value of time, and no matter how short of time I have, I need to make every second count. This experience has given me a better idea of where I am with my studies, and that I feel more motivated to go out and seek work experience to better improve my practice.</p>