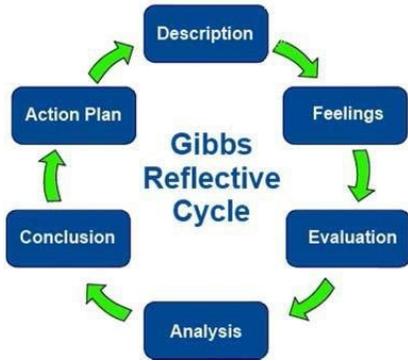


Covenant School of Nursing Reflective

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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>My nurse and I were going over the patients chart and realized the night nurse didn't document the patients information correctly. The night nurse charted that the patient was on some sort of isolation air when the patient was on room air. The night nurse also charted that another patient was English speaking when they were Spanish only. They also never collected labs for the patient when they were scheduled or if they did it was never charted. This resulted in putting my nurse behind schedule so they can get everything settled for the patient.</p>	<p>Step 4 Analysis</p> <p>I know charting isn't the most fun and doesn't seem like much, but it really does paint a picture for a nurse receiving a patient. Having wrong, missing, or incorrect information documented wastes the receiving nurses time as well gives them an incorrect picture of a patient that depending on the error could potentially hurt the patient. From what I understand my nurse was not the only one that was experiencing this type of situation. A few other nurses and aids were having problems with the nurses that received report on and their attempt at charting.</p>
<p>Step 2 Feelings</p> <p>At the beginning I wasn't too worried because mistakes happen but when it kept happening I was becoming shocked and a little frustrated just like my nurse. Even though it didn't put a patient in harms way it did set back a little time and it's never good to pass a patient to another nurse with either wrong or misinformation because it could become harmful depending on what it is. The nurse was very calm and professional. They did what they had to do and even though they were a little frustrated they knew the patient comes first.</p>	<p>Step 5 Conclusion</p> <p>I feel the only thing that could fix the situation is someone taking care of it during the time it was happening at night. I learn just how important it is to have accurate information on patients. The night nurses don't do bed side report so the receiving nurse doesn't see the patient and once the night nurse is gone all the day nurse has is the computer to help them understand the patient and treat them accordingly.</p>
<p>Step 3 Evaluation</p> <p>What was good about the event was my nurses attitude. Even though they kept finding mistakes or they were not finding anything at all they were still professional when it could be a time to be annoyed and frustrated. It was difficult because for a little bit it was a guessing game on what should or should not be on the chart. Everything was sorted out and thankfully the mistakes didn't hurt any patients.</p>	<p>Step 6 Action Plan</p> <p>I understand the night nurse was an agency nurse and they were pulled from their normal atmosphere to come and take care of other patients but documenting should never be an after thought and I feel like it's universal and should be done correctly and in a timely matter. I respect how my nurse took the situation. The nurse was frustrated but was still professional in front of me as well as calm and showed me the everything they could when fixing the information. According to other nurses and aids this wasn't the first time and it happened to quite a few of the day nurses I feel there should maybe be a conversation acknowledging the situation and ways to fix it to keep patients out of harms way.</p>