

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>For my capstone clinicals, I was assigned to the Pediatric Med Surg Unit. My preceptor told me that we were getting a new admit who had a skull fracture. Immediately I thought about what the possible causes of a skull fracture could be for a kid. I asked my preceptor assuming the patient was in a wreck and my nurse told me that it was abuse from the patient's uncle. I immediately became nervous to be this patient's student nurse.</p>	<p>Step 4 Analysis</p> <p>I was so anxious about how to handle this situation and what to do for patient care regarding this abused child. While completing some patient history, we found out that this patient and their mother lived with their aunt and uncle. So, the uncle lived in the same house as the patient. We found out that the uncle was beating the patient while the patient's mother was at work. There is actually evidence that it is very common for the abuser of a child to actually live in the same home as the child. I honestly cannot make any sense of why anyone would abuse a child. I was able to communicate with the patient and their grandmother to find out about the patient's past history and current living situation. How my preceptor handled the situation and how they talked to me about the case was inspiring and really helped prepare me for the patient's care and ease my nerves.</p>
<p>Step 2 Feelings</p> <p>From the beginning I was nervous about this patient. I wanted to know what happened and why and how anyone could ever abuse a child, especially one in your own family. I wanted to know who this child was living with and how this uncle was allowed time with the child. I felt a loss of faith in humanity and a sadness that this child was having to go through this. My preceptor was amazing with the child as I observed them getting the child's vitals. I was inspired by my nurse's actions and how they handled the situation with such grace and gentleness. I felt sadness, anger, disbelief, and then I felt inspired by my nurse. I feel that all of these emotions were important.</p>	<p>Step 5 Conclusion</p> <p>I have learned how to keep an eye out for child abuse cases and what to do if we suspect one. I think the only thing I could have done better is possibly ask more questions and possibly talk to the case manager more for my own education. My nurse was amazing, and I think they did an excellent job providing care to this patient. I learned to take time to slow down and get on the patient's level. Sometimes our patients are just afraid, and we have to show them that we can be trusted and that we are just trying to help them get and feel better. I learned that sometimes it helps our patients if we fully explain everything that we plan on doing before we even start doing it.</p>
<p>Step 3 Evaluation</p> <p>This was a difficult situation. However, it was a good thing that the child was in our hospital. If the child was with us, then they were safe, and getting help. It was amazing to see how well my nurse did in this situation. After observing my nurse, I was able to mimic the gentleness that was working for my nurse to help complete the child's care. My nurse made it look easy and I was expecting the opposite. I was able to assist in the care of this child and learned how to slow down and fully explain things before even moving towards the patient. It was much easier to treat the patient once my nurse demonstrated those techniques.</p>	<p>Step 6 Action Plan</p> <p>I will use my learned skills to keep an eye out for child abuse cases and act if I suspect one. I have learned that these CPS cases unfortunately do occur, but I am glad that I was able to care for this child. I will apply my learnings from my preceptor to my future abuse cases. The only thing I would do differently is possibly asking my nurse more questions. In the future, I will watch for signs of child abuse and treat every patient with gentleness and caution. I believe this experience has helped further improve my nursing practice in my patient care and communication. This has taught me to always ask questions, even if you're feeling uneasy.</p>