

Covenant School of Nursing Reflective Practice



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. <u>Remember to 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' perspectives?
<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 We came back from lunch, and the floor was not very busy. At lunch, we talked about how slow it usually is when we get back, and we talked about code blues. I was walking down the halls answering call lights, and physical therapy was working with a patient in the hallway. The few times I passed by I heard the physical therapist saying the patients name trying to get her to respond. She would for a few seconds and then I kept hearing the physical therapist say the patient's name. I informed the charge nurse and she went to assist the physical therapist. She was doing a sternum rub and trying to get the patient to respond. The patient was still not responding they rolled her from the hallway to her room and quickly transferred her from the chair to the bed. I saw the many nurses in the room, so I went in there to remove the chair so they could have more room for the equipment and crash cart. Many nurses started coming in. One by one each nurse started grabbing different equipment to prepare for a code. Everyone was going in and out of the room, and before they started compressions the nurse went to check the chart to double check the patients code status, and the patient ended up being a DNR. Anytime a nurse was calling out things they needed many of the students tried to grab what they needed. I was able to retrieve a blood pressure cuff to help assist the nurses. Once they were told the patient was a DNR, the nurses took comfort measure and just applied her oxygen. After several minutes she was responding a little more.</p>	<p>Step 4 Analysis The patient's oxygen had dropped due to her not having her oxygen on while walking in the hallway, so I feel like this situation could have been prevented in a way. I also do not know if the patient was trying to get weaned off of oxygen or how many liters she was on previously which could play a part in why the physical therapist thought the patient could make it without the oxygen. I have had patients who have previously been on oxygen who think they can take it off to walk to the restroom without realizing how much it effects them. They shortly become short of breath. Without that oxygen the patient's body would have responded and her heartrate and blood pressure would start to decrease. This is why patient teaching is important. The body responds quickly to the lack of oxygen and this was an example of that.</p>
<p>Step 2 Feelings At the beginning, I became a little nervous because this would be the first time that I would have seen a code, but I tried to calm down and help as much as I could. Everything was going slow, then all of a sudden everyone is rushing to the room and going fast past. My adrenaline starts running, and I am not even doing as much as these nurses, so I cannot even imagine what they are thinking. I was wondering if they felt like with their first code. Do they always feel that way? Does their emotions and feelings ever change.</p>	<p>Step 5 Conclusion One of the hardest things is being a student and wanting to help in situation like this, but the floor already has their assignments. All of my classmates wanted to see what was going on, so we all stood outside the doorway, which probably was not a good idea because we are attracting more attention to that room and the other patients or visitors can see. It is just hard because we want to see these things we do not usually see, but there is so many of us including the nurses that maybe some of us should have gone to do other things.</p>

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Step 3 Evaluation

During this event, the nurses new exactly what to do, and they all went and rushed to help assist this patient. Each nurse knew their assignment and went to it. The patient had oxygen at her bedside and the oxygen was low, but physical therapy took the patient in the hallway without oxygen. The Charge nurse double checked the patient's code status because if they would have done anything and she was a DNR, they would be in trouble. I felt like I did as much as I could without getting in the way. Most of us stood in the hallway because the room was already crowded, but whatever I could do I tried to help. Like pulling out the chair from the room to the hallway or running to get a blood pressure cuff when I heard they needed one.

Step 6 Action Plan

I felt like seeing what happened allowed for questions to be asked and after our clinical day, we were able to discuss the events that happened with our instructor. It was a great discussion about the event and learning experience. One thing that I loved hearing during discussion is we will never have a black and white scenario to an event. We just learn a lot of our judgement calls on the job. It makes me feel better because I feel like I need to know every little detail right now so I get hard on myself.