

## 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><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. personal / 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>

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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><b>Step 1 Description</b> While I was in the process of medication administration for a patient, the patient stated that she did not want an enoxaparin shot due to the burning sensation she was left with the day prior. She also verbally expressed her immense frustration with the incentive spirometer because, "It just did not work". The nurse then stepped in and explained to the patient how important it was that the shot was administered, as its main purpose is to prevent blood clots. The patient ended up agreeing to receive the shot, and I proceeded to administer it while my instructor, who was evaluating my med admin skills at the time, kept her distracted by holding conversation with the patient. At this time, the nurse asked the patient to demonstrate how she was using the incentive spirometer. The patient then expressed her frustration once more, assuring the nurse that it indeed "Did not work." After being persistent for a few minutes, the nurse finally convinced the patient to demonstrate how she was using the incentive spirometer, and it was realized that the patient was using the wrong technique. This patient was breathing out instead of in when using the incentive spirometer, and her technique was then kindly corrected.</p>	<p><b>Step 4 Analysis</b> Communication is key in this situation with this patient. Instead of the nurse just assuming that the patient had already been instructed on how to use the incentive spirometer, the nurse took the time to fully understand why the patient was frustrated and unwilling to cooperate. The patient was either instructed incorrectly on how to use the incentive spirometer, or never taught how to use one at all. Either way, the nurse did not waste in time in trying to get to the bottom of things. It was sort of the same way with the Enoxaparin shot. The shot ended up turning out very well because my instructor took the time to stop, listen to, and distract the patient as best he could from the shot. These two things were very important to the overall health of the patient. A very poor outcome of the patient's health would have resulted had neither of these things been bothered to be addressed.</p>
<p><b>Step 2 Feelings</b> When first being met by the patient's frustration, I started to feel a little intimidated, however, once I observed how the nurse continued to keep calm and be persistent with the patient it made me feel a little more motivated and confident to do the same. I also felt very inspired when observing the distraction technique that my instructor used to help the patient get her mind off of the enoxaparin shot. Overall, the most important feeling for me was the feeling of victory when the patient received the shot with minimal difficulty, and when she reached her goal while using the incentive spirometer the correct way. This feeling is what gives me the courage to face another situation like this all on my own as a nurse in the future.</p>	<p><b>Step 5 Conclusion</b> When being in this situation, I did not do anything other than medication administration and observing these amazing nurses at work. If I were ever able to encounter another situation like this, I would definitely use the techniques that these two nurses used for this patient. I will do my best to help persuade a patient to continue to take their medication by stating the medication's purpose and explaining exactly how it will impact their health. I will also put my instructor's distraction technique to good use from now on while I am administering shots to help ease the worry and/or anxiety of the patient. Lastly, I will strive to never assume something has already been taught to a patient. I will always strive to take it upon myself in asking the patient to demonstrate or teach back anything that could have possibly been overlooked, such as the correct way to use an incentive spirometer.</p>
<p><b>Step 3 Evaluation</b> I loved the outcome of this situation because not only did we get her to take her enoxaparin shot, but we also instructed her on how to use her incentive spirometer correctly. Although the patient met us with a little bit of resistance, we were persistent and willing to listen to the patient express herself. The communication of the patient made me very aware of the fact that she had already had a bad day prior, and I felt as if this made me even more motivated to try and make her as comfortable as possible when administering the enoxaparin. From what I observed, I felt that this made everyone else in the room feel the exact same way as well. My instructor was instantly dedicated to helping distract the patient, and the nurse was dedicated to find out why the Incentive Spirometer was not working.</p>	<p><b>Step 6 Action Plan</b> Overall, I believe that the two most important take away tips from this situation are that one should never assume a task has already been done, and one should keep calm and listen when a patient is frustrated. It never hurts to double check whether or not something has been done, whether it is a simple task such as teaching a patient how and when to use an incentive spirometer, or even making sure that the patient has signed a consent form for surgery. Assuming something has been done may and eventually will get a nurse in trouble. It is also important to remember that the patient will always be more willing to communicate with a nurse who has a caring attitude rather than a "fed up" attitude. The communication relationship between a nurse and a patient is very important because it may help identify and solve other problems that the patient is having, which will then improve the patient's happiness, cooperation, and overall health.</p>