

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?

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>Step 1 Description It was the morning of my second clinical rotation for the week, the nurse that I was assigned with and I were getting report from the night nurse who had this particular patient before us. As we were sitting at the nurse's station the night nurse began to go through this patient's chart, admit diagnosis, and hit key points about this patient to help us gather a better understanding of what was taking place. During report the night nurse had informed the nurse I was with as well as myself that this particular patient was hard of hearing. As I began to look at the patient's chart and look at the things that they had going on with them I could understand why they may have been hard of hearing. The nurse and I walk into the patient's room to administer their meds and my nurse is using a very high tone, due to our understanding of the patient being hard of hearing. As my nurse began to ask questions that were measuring just how oriented the patient was, the patient began to get frustrated. They stated, "I'm a very respectable person, why are you mad at me?". As time passed while I was scanning meds, this patient stated that they are not hard of hearing, yet they just need to be talked slowly to because English is not their first language.</p>	<p>Step 4 Analysis What I can apply to this situation from my previous knowledge is that not everything everybody says is true. That speaks for itself in life as a whole, not just in nursing practice. Today, I was able to use that knowledge and integrate it in to the situation that took place. What really was going on was just a big misunderstanding and miscommunication. These happen in my everyday life as well, however in nursing practice I think it is a vital component to have concrete facts about particular patients and their situations. I understand that mishaps happen, although it is important for me especially to make sure I am concrete in the information I am relaying to coworkers and even peers around me. I just try to think about my grandparents and relate how they would feel if their nurse came in and was very high toned to give meds when they have no hearing troubles. I can understand each side of the situation and am thankful I was able to partake in resolving the issue that arose from it.</p>
<p>Step 2 Feelings In the beginning of this situation I was comfortable but over time I began to become very uncomfortable. As I stood there scanning the meds one by one and making sure things were correctly charted, I began to question why this patient was beginning to get so agitated with my nurse and I. It made me feel uneasy because my nurse was already in a high tone of voice and our patient was getting very frustrated in the process. The patient kept stating things along the lines of they are well respected and they knew what year it was. The patient also questioned my nurse and asked them why they were mad. To this my nurse replied, "I'm not mad at you, I'm required to ask these questions so we can depict change if it occurs.". The way my nurse handled the situation initially was the way they knew best. The patient stated that they could hear a pen drop and explained their situation to us. This made me feel bad for them, especially because all this time my nurse had a high tone of voice while speaking to them because of what was given in report from the previous nurse who was caring for this patient. Overall, my nurse was very good at keeping their composure during this time and righting their wrongs.</p>	<p>Step 5 Conclusion What have you learned from this event? I could have made the situation better by furthering my investigation on the hard of hearing comment made by the night nurse during report. I as the student could have asked the night nurse questions such as is it just one ear or is the ears bilaterally. My nurse did a good job of holding their composure during the time our patient was getting frustrated, however I think that they nurse could have just asked the patient if they were hard of hearing as oppose to continually go back and forth with the patient until the patient had stated to both of us that they just needed to be talked slowly to. I could have even done this myself when the opportunity arose. Overall, my nurse still did a great job of doing what they thought was best for the situation due to the report that we were given. My nurse nor myself were aware of what the patient really needed as far as communication went and tried to handle it in the most professional yet beneficial way to the patient. Overall, we were able to resolve the issue and decrease the patient's feeling of becoming agitated by simply just slowing down our speech and not raising it.</p>
<p>Step 3 Evaluation What was good about the event was I was able to experience how to best handle confrontational situations that sometimes challenge you to hold it together. I didn't like the confrontational aspect of this situation, it made me feel uncomfortable and uneasy as it always does. I understand that these situations are a part of life as a whole and are to be dealt with in the correct manner. I struggled depicting just why the patient was so irritated and made myself feel dumb when we were able originate where the problem was. Thankfully the problem was just a simple fix. My nurse did a great job at gaining that patient's respect even after the situation occurred. Going in to this patient's room we both knew we were going to have to be loud to help them understand, however I think that we could have fixed this issue by furthering questions about his hard of hearing to the night nurse before us. My nurse in the middle of the situation did a great job of informing the patient about why they were doing what they were doing, even while they were both becoming frustrated. I didn't partake in the actual situation itself between the two, I was able to sit back and evaluate just how this nurse was going to hold their composure and handle a situation that challenged them.</p>	<p>Step 6 Action Plan I think this situation overall was a great learning experience. I was able to conclude that although the night nurse's coming off the floor are extremely knowledgeable, sometimes there can be a miscommunication in the process of report that can lead to the situation that my nurse and I were put in today. I can use lessons in this event for future issues by being mindful of just how great my nurse did with holding their composure during the time of conflict. I strive to be like my nurse from today by becoming confident in my practice and skills, yet still stern enough to get my point across. I struggle with being very vulnerable and changing my tone of voice in situations that make me uncomfortable or uneasy. My nurse today encouraged and challenged me to really fix that, especially for my nursing career. While I went in to other patient's rooms I was extremely self-conscious and selective about what I chose to say and how I said it in order to hopefully begin strengthening areas in which I lack.</p>