

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 I had already completed all of my assessments and got all of the information I needed for my paperwork, so I followed my nurse to help her pass medications to her other patients. We had a patient who was very old, history of dementia, and not oriented with time or place. She had fell at her house and fractured her hip. Before even entering her room, the whole floor could hear her screaming. She was screaming for help and that her family was trying to kill her. Upon entering the room with my nurse to help her, the patient questioned our religious background and asked us to help her from her family. With her history of dementia and not knowing where she was, we tried to keep reassuring her that we would call her family and that she was in the hospital. When her son-in-law arrived, she still was angry and upset because she believes that he is trying to kill her. She refused all her medications and kept telling us that we would be "going to hell," for trying to give her medications.</p>	<p>Step 4 Analysis Once her son in law came to the hospital, he explained everything to us. He said that she truly does not remember anything due to her dementia and that he has documentation to prove everything. One main thing I applied to this situation was constantly reassuring the patient and trying to reorient her to the setting. It's important to do that to help the patient adjust and maybe even possibly reduce their fear.</p>
<p>Step 2 Feelings Before entering the room and interacting with the patient, I was very nervous. I feel like as a student, I have not had to work with a patient who was unoriented to surrounds and with a history of dementia. Even hearing her yell, scream, and try to get out of bed worried me because I did not want her to hurt herself. After talking to the patient, and attempting to calm her down, I felt very confused. We knew she needed her medications, but at the same time patients have every right to refuse any kind of treatment or intervention.</p>	<p>Step 5 Conclusion I do not think there is anything else I could have done in this situation; I think everyone felt that way. She refused medications and she refused to listen to anyone. There is only so much you can do to stay within your scope of practice as nurse and ethics wise.</p>
<p>Step 3 Evaluation The hardest part in this situation for me was trying to communicate with the patient. No matter what I said, she remained upset and convinced that everyone in the hospital was out to kill her. Obviously that is not the case at all, but I can see how difficult it is as nurse to have to try to care for someone who constantly refuses your help.</p>	<p>Step 6 Action Plan This situation reminded me that even when patients are not cognitively present or aware with what currently is going on, they still have every right to refuse anything. It also taught me that no matter how hard you try to help some patients, they either do not want your help or simply do not care. I can defiantly see this kind of situation occurring again throughout my academic career and future professional career.</p>