

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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<p>Step 1 Description</p> <p>After I walked out of my patient's room, a nurse and another student nurse asked me if I could help transfer a patient to another bed. When I entered the room, the transporter had already set up both beds for the transfer. When we were getting ready to transfer the patient to the other bed, the patient asked if we could change her brief because she has been asking since 7 AM and it was now 9 AM. So, we immediately started to get the supplies ready to change the patient and then she said no one changed her brief in all night. When we pulled the sheets back to change the brief, the bed pad was fully soaked, and the smell of old urine was strong. We changed her brief and transferred her over to the bed, and then the transporter took her to her procedure.</p>	<p>Step 4 Analysis</p> <p>With my previous knowledge of the development of skin breakdown, I knew this patient was at risk because she was immobile, and her skin was moist for an extended time. Judging by the patient's report of the nursing care received, she likely was not repositioned adequately throughout the night to promote skin integrity and prevent pressure injury formation, so she could have also been at risk for a pressure injury. I also know from previous knowledge that the patient was at risk for a urinary tract infection. This is because it is a warm, moist environment which is grounds for bacteria growth. Also, an issue presented in this event is that the nursing staff failed to provide dignity to the patient by not meeting her basic hygienic needs.</p>
<p>Step 2 Feelings</p> <p>When I walked into the room, I thought I was helping with a straightforward transfer from bed to bed. Then, when the patient said she has been asking for someone to change her brief since 7 AM, I felt sad that she had been sitting in her urine that long. I felt even more sad and shocked when the patient said no one changed her in all night. My heart felt like it was broken because she had to sit and sleep in her urine all night. I even felt a little bit disappointed in the staff that did not change the brief throughout the night or from the time the patient asked. I also felt worried that the patient would have skin breakdown due to her skin being wet.</p>	<p>Step 5 Conclusion</p> <p>The only way I could have made the situation better would have been to notify the patient's nurse to follow up on this situation had she not been present during transfer. There are a few ways others could have made the situation better. The night nursing staff could have checked her brief more often during the night. At the change of shift, the day nursing staff could have changed the brief when the patient asked to be changed. From this event, I learned why it is important to check patients' briefs often to avoid this situation. I also learned that the nurse needs to follow up and ensure patient is receiving superior care from delegated staff.</p>
<p>Step 3 Evaluation</p> <p>One good thing about this event is that the patient did not have any skin break down. Another good thing is that me, the other nursing student, and the nurse were the ones to change her before skin breakdown occurred. One bad thing about this event is that the patient had to sleep in her urine and was put at risk for skin breakdown. One thing that went well was that we successfully changed the brief and cleaned the patient. One thing I did well was assess for skin breakdown and assist the patient to turn. I did not expect for the patients brief and bed pad to be soaked in urine. The other student and nurse worked well on cleaning the patient and removing the soiled brief and bed pad.</p>	<p>Step 6 Action Plan</p> <p>Overall, this event was a good learning experience, and it could have been avoided. In the future, I can look back on this experience and ensure this does not happen to future patients. I can check myself and ask delegated staff to ensure patients briefs are changed, clean, and dry. I can also explain and remind my future patients to use the call light to get their brief changed even if it takes multiple calls to get someone to help. I can also explain and remind delegated staff that it is important to keep the patient dry to prevent skin breakdown and infections. In reality, this event has taught me that the nursing practice is not always done efficiently and that it is an important, ongoing task to ensure optimal patient care and safety.</p>

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.

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