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.

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
- 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?

Step 4 Analysis
- 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'

Step 2 Feelings

Don't move on to analyzing these yet, simply describe them.
- 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?

Step 5 Conclusion
- 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?

Step 3 Evaluation
- 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?

Step 6 Action Plan
- 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.

Step 1 Description	Step 4 Analysis
During CPE, we had a scenario in which we were required to perform correctly. This involved performing universal competencies as well as two assessments as well as med administration. This is always a stressful situation being in front of our instructors and having to perform our skills to their standards. This is a good way to test us on if we are up to date on our skills that we must have to keep the patient safe.	I applied everything that I have learned from day one of nursing school to be able to properly perform the skills that we had to do. I am not sure if another student had the problem that I had but I just feel like we should be tested the way that we are taught and the way that we practiced every week in clinicals. I feel like I was super confident going into the scenario however I was not able to use all my skills.
Step 2 Feelings	Step 5 Conclusion
In the beginning I felt nervous, but as the situation went on, I started to remember all the steps to properly take. It's very stressful but I was able to perform all my assessment correctly, follow universal competencies, and keep my patient safe, except for giving meds. When administering medication, I thought that I did it all correctly until I failed at the end. This made me very upset, especially since the reason I failed was because I gave Tylenol which will not hurt my patient. However, we did not learn on paper. We learned by using the EMR, which will have us enter in the patient's specific vital signs for the specific medication, so overall I feel like we practiced using the computer for nothing if this is going to make me borderline passing by dropping my grade for CPE by 25 points.	Going back, I would have liked to been able to use the computer to actually access the EMR. However, if that is not an option for us to be able to use, I would ask what the patient's temperature if I knew not to give the patient a Tylenol if their fever wasn't high enough. I also think that we need to practice with a paper on the screen instead of using the computer, so we don't make this error.
Step 3 Evaluation	Step 6 Action Plan
This event/scenario is a good idea to get a baseline on where we stand as far as skill base, however me failing the first try did not put my patient in any harm, which is what I thought we were being graded on. The event itself in my opinion needs to reflect real life scenarios by using proper equipment to not only perform skills but to administer and enter in meds. This situation for me would not have occurred if I had been using the EMR do to the fact that I would catch my own error and not let it happen.	I can use the lesson that I learned from the outcome of this event by never making the same mistake again. This situation will not further my skills but clinicals this module definitely helped me improve more that I could have imagined. I now will always know to not give Tylenol unless a patient has a fever less than 99.9.