

Covenant School of Nursing Reflective Practice



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. <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</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' perspectives?
<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 The nurse and I had to go obtain a blood culture from one of the pts. The night nurse reported how she tried 4x so we knew going in that he was a hard stick. The nurse was the one drawing the blood and she had me hold the Accuvein and insert the tubes once she got flashback. We were able to get the first set on the first try on his L side, but for the second set on his R side, we had to try three different times.</p>	<p>Step 4 Analysis I have observed different ways nurses obtain blood draws/blood cultures for pts who are a hard stick. Majority of the times I see nurses obtain blood from the IV, which I know this method should not be done as it can contaminate the sample. I respected how even though the nurse was having difficulty, she still didn't resort to using the IV.</p>
<p>Step 2 Feelings Going into it, I knew he was going to be a hard stick, but still walked in confident that we were going to be able to get it on the first try. I also felt bad for the pt because we had to get a T&C earlier in the day, so it was the second time we were sticking him within 3 hours. I could tell he was trying to hide how he was uncomfortable whenever the nurse inserted the needle, so I just wanted to make him as comfortable as possible.</p>	<p>Step 5 Conclusion For his R side I could tell that it was an uncomfortable feeling for him so I tried to use therapeutic touch by rubbing his hand while I was holding his arm. Before I started to do that, he would move or twitch his arm while the needle was still inside, but when I started to rub his hand, he completely stopped. I thought this was a perfect example of how therapeutic touch can benefit a pt.</p>
<p>Step 3 Evaluation While we were using the Accuvein to find an ideal vein, I was swiping down on different veins to see which ones seemed to have the best blood flow. I was able to see how veins can vary, even in the same extremity, where some may have poor perfusion and others may not. It was unexpected that even while using the Accuvein for the R side, there was no flashback present and we had to try again. I also thought it was unexpected that once the nurse removed the butterfly, a bit of blood would enter the tube.</p>	<p>Step 6 Action Plan I thought this was a difficult situation, but it can happen every now and then. I thought the nurse and I tried our best and handled the situation to the best of our ability. The nurse tried everything to avoid sticking the pt for a second (or third) time and I was trying to make the pt feel as comfortable as possible. In the end, I was glad we were able to get it done, and I was relieved that the pt was very kind about it all.</p>