

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</p> <p>This week was such an eventful experience, and I was able to use my knowledge on the floor. The first day during clinicals I removed staples, sutures, and performed a blood draw for the first time. I was constantly learning and gaining experience from start to finish. I became more confident throughout the day and wanted to practice on my head-to-toe assessment on a patient with further complications on the following day. I wanted to be more thorough within my assessments so I can document the correct data about a patient. Things did take a turn as one event stuck with me the most. The second day back on the floor by myself and all the confidence in the world became a complicated situation. In the patients' room I saw something that needed to be addressed and I proceeded to document the findings on my paper. As time passed, I learned that the outcome was not to be expected. Overall, I did learn on how to use my voice in this type of situation, and I gained positive feedback about the situation.</p>	<p>Step 4 Analysis</p> <p>What I can apply to this situation is from previous knowledge. During report, I try to pick up as much information that is provided so I can double check the information for confirmation. As a student, I am still learning and tend to write down something incorrectly. By performing this technique, I can check the data but also learn more information about the patient. In this situation I have learned from previous literature that a CVAD dressing is important when it comes down to infection. The dressing should be changed every seven days, intact and covered from each side completely, and to be dry with no drainage. The patient I had today their dressing was not. This arises concerns because the report was different from the actual evidence shown. The dressing is always labeled, and the report and evidence did not compare. I needed to gather further conformation so I can do by my patient and do no harm. The impact that was made for me became a learning experience. The impact the patient received became a positive situation pertaining to their care. If I did not say anything the patient could have experienced a different outcome.</p>
<p>Step 2 Feelings</p> <p>In the beginning, I had so many thoughts running in my head to explain the situation. This was by proper care, skills, and lab work. This event was shocking, but I did my part as a student to find answers to the findings I documented. During this time, I felt overwhelmed but also proud. I was able to recognize the issue and not oversee the problem. The actions of others were completely different from two individuals. One individual turned their back and the other taught me no matter if I was right or wrong in the situation. In the end, I felt accepted because of the confirmation I received by further investigation from another individual. The most important feeling was going with my gut. I went ahead and did right by my patient for their overall care when I was present.</p>	<p>Step 5 Conclusion</p> <p>I could not have made the situation better in my opinion because I already started being a patient advocate the minute, I saw the issue. Others could have made the situation better by allowing me to act on the problem as a learning experience. The dressing did not look changed, and it was the perfect opportunity to perform this sterile procedure as a student. I did learn to not be afraid to stick up for myself and for the patient. It does not matter if I am right or wrong. In the end, I am learning from these experiences which will further my education before I am licensed and performing on my own.</p>
<p>Step 3 Evaluation</p> <p>The best part about this event was hearing my concerns being addressed. I was nervous during this time. I started talking to the family member about how much I loved her pillow to remove my thoughts of anxiety. It was very difficult at first because person did not take the concerns as a concern. It was more of a question to this person. I emotionally could not have walked out those doors without telling someone else. I contributed to this event by providing a sense of protection for other students to voice their own concerns about a patient they are taking care of. As soon as I lead the way about speaking up another individual did the same. I felt like a leader and not just a student.</p>	<p>Step 6 Action Plan</p> <p>The situation is something to remember for the rest of my career. Being in the patient room was the hardest part because I wanted to take all of the pain away. One way of doing that was to be the best I can be to improve the outcome for the patient. Professional practice has taught me that it is not all about documenting and giving medication. It is more about getting the information about the individual to know the baseline to see if they are improving. Without a proper baseline you can never see it incline or decline of the patient. I will use this event to further improve my practice in the future. The patient deserves at least 5 minutes to talk about themselves. They constantly are in a state of mind that is evolved around medical terminology. Within those 5 minutes a patients' pain, state of mind, and overall perception can change. You never know the outcome if you never put in the effort to see the change.</p> <p>BE.THE.CHANGE.</p>