

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 on page 2, document each step in the cycle. The suggestions in each of the boxes may be used for guidance but you are not required to answer every question. 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 experience, 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. Use only the space provided. Information that is not visible is lost.

<p>Step 1 Description</p> <p>On October 20, 2021, my clinical day was at the outpatient clinic at Sunrise Canyon. Most of the day consisted of many blood draws and injections, but mostly blood draws. There were several scenarios that stuck out for me. The first blood draw that I was able to try and do, I was not successful. The lady was a very hard stick. Her veins were deep and I just could not get it. I only tried on her once. My classmate and I kept taking turns. She stayed in the room with me the first stick and my other attempts she left the room and I was able to get a successful blood draw. My classmate was having a little more trouble so I stopped going in there with her because the room was kind of crowded. Another scenario was an injection. I did not want to give the first injection because I have never done one besides a vaccine. The nurse said she would do it, but while she prepared the medication and I asked her many questions about how she gave this injection. I told her we just learned about the drug on Monday, so I was still a little nervous about it. She told me how she does the Z-track method and then I asked if she draws back and she told me "No" that she has read evidenced based research on not using it.</p>	<p>Step 4 Analysis</p> <p>With the injection situation, it makes it hard as a student to want to participate in skills throughout clinicals. As a student, I want to take advantage of every opportunity that I can, but I do not want to do something wrong especially if it is something that we are taught differently. The nurse stated that she has read some evidenced based practice that went against aspirating, and she said are they teaching y'all to aspirate. I responded yes. It also makes it harder to want to participate because if we have a question and ask them, they may tell us something that is different than what our instructor may say. If we forget to ask our instructor and continue to do what the nurse say we may pick up on doing the wrong thing. It can also go both ways. The nurse who is use to not aspirating, and believes that aspirating is not the right way, she may not feel comfortable with the student nurse participating in skills.</p>
<p>Step 2 Feelings</p> <p>When one of the nurses stated that she would mostly be doing blood draws and injections my heart kind of sunk. I have not been a big fan of blood draws, IVs or injections because I have not had much practice. When I have tried in the past, I have always had trouble and failed. After my first stick, I knew that it was going to be a long day. I already felt defeated, and was not ready for the next one. Although I did not get it on the first time, the nurses were very helpful and encouraging. I noticed my classmate was having trouble as well, so after I started getting it I kept encouraging her and decided to not go in there with her to hopefully help with her emotions. Once I got in the second time I felt better about it. Then my second and third stick it became easier, and I kept wanting to do more. I felt more confident and started to enjoy blood draws more. I still don't feel confident with injections, and after she talked about not aspirating for blood it made me not want to give an injection because she practices something different and I wanted to practice what we have been taught.</p>	<p>Step 5 Conclusion</p> <p>After this clinical experience, I learned to be more confident. It is hard to be confident because this nursing school experience has been extremely hard with COVID. Half of my nursing school experience has been online and minimal clinical experience. It makes me feel unprepared and that I do not know what I am doing as a nurse. After today, I definitely learned that it does take actual practice, and it will come easier to me when I start working on a certain floor and doing it more. I feel ten times more confident doing blood draws and will be more eager to take advantage of the opportunities I am given that way I can continue to get more practice and improve.</p>
<p>Step 3 Evaluation</p> <p>I felt like there were many things that went good throughout the day. The nurses were very encouraging they allowed us to practice and actually take the time to teach us unlike sometimes in the hospital when the nurses are in a hurry trying to complete all their tasks. When we didn't get in the first time, they would try to help us and talk us through it then give us advice for the next time. I noticed my classmate started stepping out with me so I realized I could make her situation better by stepping out for her as well. Besides the blood draws, we did not do much. The nurses just did their paperwork and made phone calls, and didn't really explain much of what they were doing. To me, what made the situation difficult is that you never know what type of patient you will get and how their veins will be. Some people are easier sticks than the rest, but the nurses made it look easy every time because it is something that they do all the time.</p>	<p>Step 6 Action Plan</p> <p>I felt like this is the most practice that I have done as a student nurse. It helped me because now in the future I would want to do all the blood draws. I felt so confident in the end that I would have loved to do more. One thing that I do need to work on, is knowing the order of the tubes to use. I realized today that that was something I forgot and which one is which. Usually in the hospitals they have a chart but at the clinic they only used three tubes. I also need to remember everything I felt at this moment when I am a nurse and will have a student. I will do my best to try to encourage the student because I was once where they were felling lost, unprepared, and not smart.</p>