

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>I was not successful in starting my first foley on a real patient. I had a great instructor and staff nurse in the room helping me, and a nice classmate giving me positive vibes. The other nurse and student helped hold the patient's legs, since she was fairly immobile from multiple issues. My instructor was there to guide and assist me and reassure me I knew what I was doing. The patient's daughters were in the room also, but I honestly didn't notice them until afterwards.</p> <p>I was not able to get the foley started.</p>	<p>Step 4 Analysis</p> <p>I practiced putting in a foley in IM2 probably a dozen times and ended up having to do it for my CPE. I wonder about the risk/benefit of putting a foley in a patient who more than likely had some sort of fungal infection in her urethra vs, leaving her semi-incontinent and contributing to pressure wounds. Caudi is a huge deal, so pushing infected material back into her body doesn't seem like the best idea, but the alternative doesn't seem that great either. Since she was already on IV antibiotics for the wound infection, perhaps it was assumed those would take care of what was going on with her urinary system.</p> <p>This was probably a first for me to put into action not taking things personally as a student who is still learning. As much as I want to be Wonder-Nurse™ I'm going to mess things up or do them incorrectly or just have the universe against me in a situation at times. That'll always be a possibility, so best get used to it.</p>
<p>Step 2 Feelings</p> <p>I was honestly a bit nervous going in. You always hope your first real person doing something complicated on will be the "ideal" patient like in the HESI videos and such, but that wasn't the case. This patient was overweight, unable to bend one knee due to an infection and wound vac, and unable to lie supine due to CHF and dropping O2 sats. Not exactly a recipe for success for a student. I hadn't really practiced or thought much about foley's since module 2, but luckily even if it was just sim practice, the muscle memory came back. I knew before I started there was a decent chance I wasn't going to get it, but I also thought that there was a chance I could. I hadn't written myself off, but definitely wasn't overly confident or arrogant.</p> <p>My instructor and the other nurse helping were encouraging and tried every which way they could to see if I could get it. It helped knowing they understood the level of difficulty of the situation, and still had confidence in my ability to do it.</p>	<p>Step 5 Conclusion</p> <p>In hindsight, I probably would have declined attempting the foley, given the severity of her situation. If a practiced nurse had done the first attempt, it might have escalated the issue to the right specialist sooner than with me doing it.</p> <p>Everyone that was in the room was great, and everyone reassured me before and after that I was capable and hadn't just completely woofed the procedure.</p>
<p>Step 3 Evaluation</p> <p>What was good about what happened is that I'm now positive I know where the urethra is on a female patient. What was bad was she was a very sick lady and I felt bad putting her through everything that goes into that procedure only for it to not work and her have to do it all again (several times). Setting up the kit and going through the technical motions was fairly straightforward.</p> <p>I still get a bit of "performance anxiety" having a group of people watch me to see what I'm doing and if I'm going to do it right or mess it up. I know in the logical part of my brain, no one is hoping I fail (For a variety of reasons), but the suspicious middle schooler deep in my brain still worries sometimes.</p> <p>The optimistic part of me that I keep to myself was really thinking I was going to nail it. I hoped I would. But I didn't. Initially I was worried that I was really going for the whole wrong area, but at the end of the day and some other people attempting, it probably wasn't my skill level or knowledge deficit that prevented me from getting it.</p>	<p>Step 6 Action Plan</p> <p>I think it was one of those starting off bad kind of things, and was more than likely going to keep getting bad, and even if it hadn't, it wouldn't have improved anything exponentially. Being able to recognize when you need to stop and get help or have someone else more skilled give something a try is a huge deal in healthcare. Your ego can't take priority over the patient's comfort and safety. It's gotta be in the backseat or even in the trunk.</p> <p>I will use this as a reason to stay up on skills, always have enough assistance for whatever is about to happen.</p> <p>It's also shown me how important it is to have supportive nurses around you. This could have been way worse for me mentally if the instructor or the staff nurse in the room had been condescending or rude about me not being able to get the catheter in. I was able to walk out with my confidence still mostly intact, and I'll remember to be that nurse later on too.</p>