

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 My nurse and I were administering medications on Tuesday to a patient that had dysphagia. Because of this, the nurse was crushing the patient's medications so that they could swallow the pills in powder form. We were in the patient's room and the nurse scanned the medication and asked if I would start crushing the pills she handed me. While I was crushing them, I emptied one crushed pill into a cap and realized that there was a sort of coating in the cup. I looked back at the package that the pill had come out of and saw that it was a controlled release tablet. I panicked and asked what the nurse wanted me to do, and she said it would be fine and that she was going to go ahead and give it to the patient.</p>	<p>Step 4 Analysis As far as literature goes, everything I have learned so far in nursing school says to never crush controlled release. I know that we were behind on med pass, and I can't help but think that the nurse was feeling rushed and just wanted to get this med admin done. The impact that this could have on the patient is making them feel sick or potentially bottoming out their blood pressure depending on that medication it is.</p>
<p>Step 2 Feelings I was feeling very panicked and uneasy about the situation. I know that controlled release tablets are a controlled release for a reason, and I was very worried that the patient would have a bad reaction to receiving the medication all at once. I thought that once the nurse realized what happened, we would go get another pill or call the HCP to see if there was another form of the medication that would better suit this patient; I thought that it would be worth the extra time. However, the nurse decided to administer the medication as is and that made me feel very worried about what the outcome might be.</p>	<p>Step 5 Conclusion I think I could have made the situation better by being more aware of what pills I was crushing before I crushed them. We went over the meds as we scanned them, but I should have been crushing them and administering them as we went rather than waiting until the end. That way, I would have never tried to crush that pill because I would realize immediately that it was controlled release.</p>
<p>Step 3 Evaluation I know that I am not very experienced with medication administration at all, but I just really feel like that was not the best decision by the nurse. I also know I should have been reading the medication packages closer before crushing the medications because maybe if I had waited and asked about the controlled release pill before crushing it, we would have figured out a better way to give it to the patient.</p>	<p>Step 6 Action Plan Overall, I really felt uncomfortable about this situation, and it has been bothering me ever since. I realized I must really pay close attention to things nurses hand me even if it is something we have already gone over. Next time, I will be adamant about administering medication as we scan them rather than scanning them all and then giving them all to the patient at once. This taught me that not all nurses will always use best practice, but if you feel uncomfortable with something you should not do it. I really felt uncomfortable with this, but it definitely isn't my place to tell the nurse not to do something.</p>