

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 Today at clinicals, my nurse and I were attempting to discharge a patient and there were orders to discontinue the patient's PICC line. I asked my nurse if she would allow me to pull out the PICC line and she agreed. My nurse helped me gather all of the correct supplies and she talked me through the procedure. I pulled the PICC line with no complications and held pressure until the bleeding stopped. After which, we wrapped the insertion site and charted the procedure.</p>	<p>Step 4 Analysis I think this situation was very applicable for me because I want to be an ICU nurse and, in my experience, many ICU patients have PICC lines inserted and removed. I think it was a good experience for me and my nurse because she was able to teach me and while I was holding pressure, we discussed the most recent best practice studies so we were both able to learn something.</p>
<p>Step 2 Feelings When my nurse told me that the PICC line was going to be removed, I eagerly volunteered. I was extremely excited for this opportunity until we started getting all of the supplies together. Once we started preparing, I realized that I only knew how to do this procedure in theory and I was nervous that I would forget something and put the patient at risk. Fortunately, my nurse was an incredible teacher and she talked me through the steps and I was able to remove the PICC line with no issues.</p>	<p>Step 5 Conclusion I think the only thing that could have made this experience better was if the patient was able to speak or understand English. He was only able to speak and understand Spanish so the language barrier was a slight challenge. This event provided me with the opportunity to actually remove a PICC line instead of only having discussed it in theory.</p>
<p>Step 3 Evaluation Being able to remove this PICC line was a wonderful experience for me and the support of my nurse and her willingness to teach me made the whole thing much better. I was rather pleased with myself for pulling the PICC line smoothly and managing to not cause my patient any discomfort from the removal of the dressing or the removal of the line. My nurse was incredibly helpful and was willing to teach more than any other nurse that I have been paired with in clinicals.</p>	<p>Step 6 Action Plan Overall, this situation was a fantastic experience for me. I learn better with hands on experience so having the opportunity to remove the PICC line myself helped me understand the process much better than discussing the process in class. I think this experience will greatly improve my future practice as an ICU nurse because many ICU patients require PICC lines or CVLs.</p>