

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</p> <p>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</p> <p>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>Today my patient was hard of hearing. She was an older woman who is having GI problems. My nurse and I were involved in her care, and I helped clean her up a few times today. I learned that the patient's family can be extremely useful in situations like these. Her daughter helped me communicate by writing down what I needed to ask her and helped calm my patient down. I also remembered an important factor from our hearing loss lecture about talking low and slow. That also helped me provide better care to my patient.</p>	<p>Step 4 Analysis</p> <p>Something I applied today was speaking low and slow for my patient with hearing loss. A broader issue that comes up from the problem of hearing loss is how the patient is feeling. I know it is probably really scary not knowing what is going on and having to rely on other people to communicate for you. I think my nurse was frustrated to have a more difficult patient and it threw her day off, but it affected the patient's quality of care. I hope she gets another chance to work with patients like this and see their perspective of things.</p>
<p>Step 2 Feelings</p> <p>At first, I felt sad that she couldn't really hear me. I used to work at a memory care & assisted living facility and lots of patients were hard of hearing there. It always made me sad when other caregivers would walk in and start giving care without trying to explain what is going to happen. It scares most people because they don't know what is going on. My nurse was not having a good day and tried to leave the patient without changing her, saying she would wait for the CNA to do it. I personally don't feel comfortable doing that because I would not want to lay in my own feces. I ended up changing her and it reminded me of why I started this career path. This is important because I never want to feel like I don't need to help someone just because someone else can do it.</p>	<p>Step 5 Conclusion</p> <p>I could have made the situation better by trying to communicate with the patient more about the IV. My nurse could have made the situation better by doing the same thing. She was hard of hearing not blind or mentally impaired. We should have taken the time to really explain to her how important it is to keep her arm straight and not to pull on the IV. I learned that I will always do everything in my power to assist people who can't hear very well. I don't know how it feels to have hearing loss, but I know it would be scary and different for me.</p>
<p>Step 3 Evaluation</p> <p>Something good about working with this patient today is that I was very busy. Something bad about working with this patient was that we had a lot of trouble with her IV site. She kept bending her arm and forgetting to keep it straight so her antibiotic would stop due to line occlusion. When her daughter arrived later in the morning, she helped us communicate to the patient that we needed her arm to be kept straight. We tried to find another IV site, but my nurse was having trouble finding one. Something that went wrong with this patient is that her IV ended up getting pulled out. This was an accident, but it posed a large problem for my nurse considering we could not find a good IV site to switch to.</p>	<p>Step 6 Action Plan</p> <p>I think overall this experience was a good one because I learned a lot today. Next time I will work on explaining things better and helping my nurse out with that. I will always watch IV sites very closely in people with a deficit because they could accidentally pull it out or do harm to themselves. I will use this experience especially with older people, because it reminded me to remain compassionate and to always help wherever I can.</p>