

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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Name: Dina Dang

Instructional Module: 6

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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>My experience on the med/surg ortho floor this past module has been very engaging and thought-provoking! I was able to be apart of an organizational-wide EHR change, provide total patient care to 5 patients in a shift, and experience lots of isolation precautions. Throughout my 10 shifts, I was also able to practice nursing skills and even perfect them. There was many opportunities to perform blood draws, pass meds in any and all forms, and even start foleys. As the shifts progressed, my expectations changed in the sense that I knew what to expect when going in. It was the same skills being practiced, passing of meds, and charting. Of course, there were days when things would change or not go according to plan.</p>	<p>Step 4 Analysis</p> <p>Precepting during the transition to EPIC was a hard thing for everyone, including myself. I have only been charting on meditech just like everyone else. I knew that my role on the unit was to be a nursing student, and that I was strictly there to learn. With the transition to EPIC though, it felt like everyone else on the floor was also there learning as well. Everyone helped each other. If a nurse did not know where to find something, I was able to help her, vice versa when I started charting.</p>
<p>Step 2 Feelings</p> <p>When I first started my shifts, I was very nervous because I did not know what to expect. I had my own goals that I wanted to achieve and skills to practice prior to starting my clinicals. I guess I could say I was excited to start, that was until the shift to EPIC happened. My preceptor was the only nurse on the unit who has had previous experience with EPIC, so for about 4 shifts, she was charging. Whenever she was charging, I would either follow another nurse or I would walk up and down the unit asking all the nurses if any of them needed help with anything. During the stretch where I was not working with</p>	<p>Step 5 Conclusion</p> <p>I do not think there is anything I could have done better. I feel like I did the best I could given the situation with all the change going on. I made the most of the preceptorship and I always made sure my instructor was aware of everything that was going on. I was able to learn tricks and tips for many skills, but most importantly practice providing care to patients.</p>

<p>my preceptor, I was very frustrated. I felt very behind comparing what I had done in clinicals up to that point with the expectations given to us from the school. I was not able to take on my own patients, every shift I had different patients, and I was not able to receive continuous feedback from the same person. My last couple shifts I was able to catch up and meet those expectations, but after completing all of them, I can't help but still feel like my learning experience was not the best that it could have been.</p>	
<p>Step 3 Evaluation I know that having a huge hospital wide EHR system change is a very big deal and a huge transition, so I did my best to be as understanding as possible. At the end of the day, my education is not as important as patient care. Although I was not able to always work independently with my preceptor, she and I tried our best to make sure I was still able to practice nursing skills. There were times when she was charging, but she would stop for a moment to go with me to pass meds or supervise a blood draw. The nurses on this unit were all kind and always asked if I wanted to do any skills or see any skills.</p>	<p>Step 6 Action Plan Everything I learned during this preceptorship will help me so much as I begin my career soon. This experience has taught me how to prioritize patient care and improve my communication skills. I feel better about giving and receiving report. Overall I was really able to figure out how I want to be a nurse in terms of organization and comfort.</p>

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