

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 We had our graded CPE today, April 6 2022, at 1145. I and my other 4 classmates were in the same group and was preparing for our instructor to call us one by one so that we could start preparing for our graded CPE. I was the last one called in our group and as soon as I got my case scenario, I started reading the Doctor's order attentively and compared the meds ordered to what our instructors gave us as SBAR about our patient. No one in our group had the same case scenario so each of us would have our own pertinent case, own assessments other than neurological assessment that we had to perform, and our own set of drugs to give. I knew that each of us would give different meds although we started to look up for the same meds the day prior to our CPE. I played a role as the nurse who would do an assessment of the patient, and I would also give the meds that are scheduled on that day. The same case happened to my other classmates. However, I was able to pass the CPE in one take, which was really good because it was what I prayed for, while my other classmates had to come back in the afternoon to do what they missed on their first try.</p>	<p>Step 4 Analysis I was able to apply the universal competencies, including AIDET, that we had been practicing since we started nursing at CSON and basically everything that we learned from doing focused assessments and performing the 7 rights of med administration. I was also able to identify the safety hazards that may put my patient at risk of fall since he was under fall precautions like putting the bed rails up, identifying that the patient was wearing non-skid socks, bringing the call light at my patient's grasp to call if he needed help with anything. I was also able to demonstrate that I would check for any clutter or any mess inside my patient's room that would also put my patient at risk. I raised the bed of my patient when I went to do my assessment and med administration and brought it back down before I left. I demonstrated the 4 P's (potty, pain, position, possession) before I left my patient's room. When I went to get my patient's medications, I was also able to demonstrate the correct and proper way of extracting the medications from the Pyxis and prime my IVPB meds of antibiotics. All of these were done correctly because we were trained and prepared before for the graded CPE.</p>
<p>Step 2 Feelings I prepared as much as I could the night before our CPE, made a very thorough patient education and pertinent assessments that I would do when I give specific medication. I also wrote everything that I thought would be important like all the focused assessments from our NII's and all the values that would withhold the medication if in case the patient's labs and vital signs get way out of the range. I really did not feel any anxiety the night before because I knew that our instructors, even from our previous modules, have been preparing us for this and for the future. I was confident that I would be able to perform all the assessments needed, demonstrate all the 7 rights of med administration, and do the universal competencies as based on our NII's. I started to feel anxious minutes before they gave us our case scenario, but when I received it, I said to myself, "You can do this!" This made me feel more confident and I felt really happy when I passed the CPE in the first take. It felt really good to be able to perform all the assessments, med administration and universal competencies because I knew that in the future, I would be able to apply these to my nursing profession.</p>	<p>Step 5 Conclusion It would have been great to hear that all of us were able to pass our graded CPE in our first try. I heard from my classmates that they missed washing their hands or using hand sanitizer when they went to the patient's room, so they needed to come back in the afternoon. Some missed to wrap things up within the allotted time and others missed some parts of their assessments. I guess that's how it is. Some people can be prepared but lose their self-esteem or confidence when they started to get anxious. I knew that all of us prepared to the best we could for this graded CPE, but we were made differently. Just like nurses, some would like to take things in their own way while others prepare to do things just how they learned things. I could have done things better by addressing the IV line first before the indwelling catheter but other than that, I really think everything went well for me for today's graded CPE. I learned that I needed to assess all the lines that are connected to my patient, but to start with the cleanest line to the dirtiest line. I also learned that the things we have been learning and preparing based on our NII's are the things that would help us in the future to be safe nurses.</p>
<p>Step 3 Evaluation I think the best thing about the event was that we were given information about the patient the day before the CPE because it helped me to have a grasp of what my patient's disease is, his medications, his vital signs and his present condition. Also, I really appreciate that they gave us 20 minutes to prepare before the graded CPE because I was able to critically think what assessments would be needed, what other things to look at when I get inside the patient's room, like his IV line and indwelling catheter, and what meds to hold or give based on the present condition and doctor's orders in the patient's new information. I think these preparations made it easier for me to overcome my anxiety over the event. Everything went really good from my universal competencies, assessments and med administration. My instructors commended me because I was able to perform all the necessary points that need to be addressed, however, I did a little mistake from checking the indwelling catheter first before the IV line to which my instructor's said that it was ok but next time go from the cleaner line connected to your patient going to the dirtier line. Over all, they were happy about me assessing these lines and satisfied with my over-all performance.</p>	<p>Step 6 Action Plan I think that the graded CPE was well-planned by the instructors and was well-designed to bring out the best from all of us students because the graded CPE summarizes how far we have mastered the universal competencies from our NII's, how far we have understood the 7 rights of med administration, pertinent assessments, and many more things that would make us safe nurses in the future. I think the conclusion that I could get from the event was that these things we were learning ever since module 1, were not only meant to make us good nurses but also to bring safety and quality care to our patients. I would not do something differently because we were given enough information, enough time to prepare and enough time to perform all the required areas to pass the graded CPE. I would surely apply these learnings in the future. This event taught me that I should trust myself and I should give more credit to myself because I did my best to pass this CPE. I would use this experience to be a safe nurse in the future, provide quality care and bring comfort to our patients.</p>