



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</p> <p>During my PMH block I was required to participate in AA meeting. On Friday May 6th I chose to visit Southwest AA group. We were able to go in groups of two, so I had another CSON student there with me. I played the role of an onlooker and listener. I have never been to one of these meetings, so I was not sure what to expect. Going in I had the typical alcoholic description of what the members of the group would look like. The members of all take on a role. There were chairs organized in an almost rectangle shape with more chairs on the outside that aligned the walls. The members are all familiar with each other, so spotting a new face was not hard. I introduced myself and they knew I was a nursing student. I was welcomed with open arms and given the opportunity to speak.</p>	<p>Step 4 Analysis</p> <p>I noticed the age group of the members seemed about late 50's and up. Which caught me by surprise. All I kept imagining was that is a grandma or grandpa to someone. It was hard for me to grasp that for some reason I can't explain. Another similarity I noticed was when they would tell their stories, each one mentioned a relationship they longer had with a loved one. Their son hasn't talked to them in years. One lady's daughter has not visited her in a long time. All these relationships lost because of their alcohol addiction.</p>
<p>Step 2 Feelings</p> <p>I was nervous going to this meeting, I have never been to one and did not know what to expect. However, once the meeting started and you get to hear everyone's stories, you can feel how they call care for one another. They feel at home and can express their feelings. When each member would talk, I noticed they would say, "I just needed my people". This showed me how much these meetings can mean to someone. They rely on this time to vent and get feedback from their peers who are going through the same thing. The outcome of this gave me insight on how much support alcoholics need.</p>	<p>Step 5 Conclusion</p> <p>What could have gone differently was the two members who were being distracting, I would have enjoyed the meeting so much more. I feel I could also have spoken up more and given feedback. I was just scared to say the wrong thing and upset someone. I had an uncle who was an alcoholic, so I could have opened up more to let them know I have a little experience on being an outsider. I leaned to never judge a book by its cover. Which I normally don't, but this experience has opened my eyes on what an addict could look and be like. Looking at the faces around the room I could point out maybe two that looked like they recently were drinking. I sat beside a man who resembled what you picture a pastor at church to look like.</p>
<p>Step 3 Evaluation</p> <p>The environment was relaxing, no judging just support. I would not say this was bad, it just bothered me a little, when members were talking some would be eating. These two women on the end of the table showed up late to the meeting. They brought lunch with them since the meetings are 12-1:00. Okay that's fine, but it's the fact they would talk while eating and be very loud with the wrappers of their food. When they finished, they would crumble up the wrapper loud and I just had a hard time listening to whoever was speaking. It was very distracting to me, and I find that rude. I kept thinking if you know what time the meetings are why wouldn't you eat before you come or even after. What I did well was use active listening when each member was talking and telling their story or expressing their feelings. I contributed by speaking on my behalf and answering any questions they had. I also got a copy of their testimony book.</p>	<p>Step 6 Action Plan</p> <p>I liked getting an inside point of view on how the AA meetings go. I like how close the members of the group are with each other. After the meeting was over, some stayed inside to chat, while others gathered outside the front door. Very open with their emotions as well as welcoming new people into the group. A common thing that was said around the table was I felt like I needed to come, I needed to talk to my people. That showed me they can feel when they might be taking a step backwards instead of forward, which is a good thing. They recognize they might be falling back into what lead them into addiction and reach out for help.</p>