

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>This Tuesday, at clinicals I was put with a rather difficult nurse. I was the only student put with this nurse, and I was able to do medication pass with her on all her patients. Of course, in the reality world of nursing nothing goes as perfectly planned and my nurse had to adjust for almost every patient because something would happen, and my nurse would have to fix it. For example, for two patients that we went to medication pass on requested pain and antinausea medication, so we would have to gather the medication and go back to administer it. Another example was when we started an IVPB through a PICC line, but it was not functioning properly, so she had to try different things for it to start flowing.</p>	<p>Step 4 Analysis</p> <p>A broader issue that arises from this situation is that future nursing students that will be put with this nurse will also feel how my fellow classmates and me. However, the more important issue I feel comes from this is how patients must feel being treated by this nurse. I had a patient state to me how she seemed very isolated and serious and how he was trying to be nice to her and get to know her well by talking or making jokes, but she was just frustrated the entire time and would not engage. What I take from this situation is that patients do not feel they have a nurse who truly likes her job or does it well, but I also feel it is because she does get frustrated easily. I think I speak for everyone when I say our experiences with her have been the same, but I did not let anyone's perspective interfere with my thinking.</p>
<p>Step 2 Feelings</p> <p>When I first heard I was going to be put with this nurse I was rather nervous because so many of my classmates had said she was not very good at teaching. However, I did not let it determine how my day was going to be with her. As the day went on, I understood where my classmates were coming from because every time my nurse needed to adjust her patient's care plan, she seemed to get frustrated easily. This week at clinicals was rather tough on me as I was reminded of past events from when I was being cared for in the hospital and it truly infuriates me when nurses don't want to give patients their pain medication or believe in their pain. I feel this is important because when I become a nurse one day I want to care for my patients and not get easily frustrated, I chose this field and all the things that come with it. I understand become frustrated is unavoidable, but I don't want patients to feel bad for the pain they are experiencing.</p>	<p>Step 5 Conclusion</p> <p>I personally do not feel there was anything I could have done to make the situation better. What I did to make the situation better was taking the time to go back into the patient's rooms and talk to them since my nurse seemed very isolated emotionally, and that was when my patient felt comfortable enough to tell me how he felt about his nurse. I feel letting the patient's talk their emotions out helped them. I feel my nurse could have made the situation better by communicating with me or with anyone which is such an important aspect in any situation, not just in the hospital. What I learned from this event is that I do not want to be the type of nurse who ignores or belittles students, especially when I choose to work at a place that has students learning or belittle patients and their pain.</p>
<p>Step 3 Evaluation</p> <p>What I believe was good from the event is what my instructor has talked to me about and I agree with. That is that being put with different nurses will show us various aspects of nursing from all kinds of nurses. What I feel was bad was how my nurse made me feel because if I did not do something the way she did she would begin to shake her head and make me feel incompetent. However, it was easy to lose that feeling because I know my value is not going to be determined by one day with a nurse who does not like to teach students. I feel I did as well as I could with this nurse even though I tried asking questions and she would not provide very clear answers. I did expect a different outcome because I was hoping she was better than everyone was saying.</p>	<p>Step 6 Action Plan</p> <p>Overall, Tuesday was a rather tough day for me. Not all of it was because of the nurse I had, but also because of the PTSD I was dealing with. I was not looking forward to coming back on Wednesday, but I was glad I did because my instructor, classmates, and my new nurse made me feel better. In hindsight something I would do differently would be to talk to my instructor about how I felt that day emotionally not just how things were with my nurse. What this has taught me about professional practice is that some nurses just have their way handling situations and doing things, but that should not interfere with how knowing how capable I am in doing things.</p>