

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:

Instructional Module:

Date submitted:

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> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p>So while in the SRC outpatient clinic today I performed 8</p> </div>	<p>Step 4 Analysis</p> <p>When the second phone call came up is when the nurse had to step in. The mother voiced her concern about her son's trust and how she would like to speak to a nurse because she didn't want to put this all on me and have me running back and forth. I thank her for that because of course this is outside my scope of practice to be giving her advice on what to do. The nurse gave her completely different advice once she heard the mothers concern of her son's trust because ultimately that is a very important thing. I personally felt the child should still be brought in for safety reasons.</p> <p>The nurse decided that the patient should continue taking his medication (even the new higher dose) and the mother should just watch him closely.</p>
<p>Step 2 Feelings</p> <p>How I felt with the blood draws was pretty good about myself considering I hadn't done one in 8 months. The phone call with the woman about her son who was possibly suicidal was a different story. I was empathetic with her and consulted the nurse to figure out the best possible path to take. She was worried the medication he was on was causing it and was even more worried because his dose had just been upped but he hadn't started that dose yet. The worst part was that she didn't want to lose his trust by bringing him in because she knew he wouldn't want to go.</p>	<p>Step 5 Conclusion</p> <p>In conclusion I could have made this whole process shorter by instead of relaying messages just letting the nurse handle it in the first place. What I have learned from this event is that even though what the mother described was not a good situation the nurse is still the one who can make a better call than me. I should state that the nurse is the one who told me to tell her to come in and that I in no way shape or form made any decision on my own to tell her what to do. The only thing I would change is to cut me out of the middle-man position and just hand the phone over immediately even though the nurse was busy.</p>
<p>Step 3 Evaluation</p> <p>What was good about the event was that I kept calm and kept her calm. After talking to the nurse we all decided what was best was to bring him into the EOU. What was bad was that she did not have a way to bring him just yet but that he was sleeping at the time of the first phone call. I would have passed the phone call off to the nurse the first time given the importance of the matter but she was very busy. I believe what went well was that I and the mother handled the situation very well and devised a plan of action.</p>	<p>Step 6 Action Plan</p> <p>What this has taught me is that in a serious situation such as that and even though I relayed the information accurately the nurse ultimately needed to be handling that call whether she wanted to or not. It was outside of my scope of practice regardless of if I made any of the decisions (I did not). The overall situation made me uneasy and fearful for the mother. I truly hope the nurse made the right decision to tell her not to come in and to keep taking his medication.</p>