

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. Remember to maintain patient confidentiality. 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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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>While I was in the room asking my patient questions, a surgery team came into the room. They wanted to discuss options with the patient, or really, lack there of. I decided to stay in the room to observe the interaction and overall, I'm glad I did. While observing, I quickly found that the team didn't seem to be very well versed on the idea of using therapeutic communication. The discussion was over a surgery the patient was needing on their back. Long story short, the patient was told that the only way insurance would approve the surgery were if the patient broke their back.</p>	<p>Step 4 Analysis</p> <p>I personally feel as though this situation did a good job at showing how not to speak to your patients. My patient had a history of bipolar disorder and schizophrenia, yet the surgeons continued to explain to them that if they broke their back, only then could they receive the surgery they were wanting. That immediately concerned my nurse and I for our patients safety because it quickly made us suspect the patient might try to ensure their back was broken. Although, I understand what the surgeons were attempting to explain, I could see how it could've been handled in a much better way than it was.</p>
<p>Step 2 Feelings</p> <p>At the beginning of the conversation, I of course, did not expect it to go the way it did. However, it quickly became apparent by the way the team interacted with the patient that they were not well versed on the art of therapeutic communication. They way they chose to speak to the patient and interact with them made me extremely uncomfortable. Considering the patient's mental health history, I was immediately concerned about how the patient might react once the team left the room.</p>	<p>Step 5 Conclusion</p> <p>I feel as though this situation could've easily been made better had the surgeons simply taken a more therapeutic communicative approach. Either way however, this situation reaffirmed to me how important the way we choose to communicate with others really is. Not only that, but also how easy it is to make a cognizant change to our interactions, even on the spot.</p>
<p>Step 3 Evaluation</p> <p>I feel like I handled the questioning aspect well on my part. However, I was worried with how my patient would react once the surgery team left the room. It was hard watching my patient go through their most recent experiences and watch them plead their case in hopes of their surgeons helping them.</p>	<p>Step 6 Action Plan</p> <p>Overall, I feel like this situation could've been handled in a much more appropriate way. It just required the surgical team to slow down and hear their patient out and unfortunately they chose not to do that. Just simply watching the patient's reactions to the way they were being talked to, it made me feel for them and their situation. I hated that they were being treated like that right in front of me and yet I couldn't do anything about it. It just makes advocating for our patients even more of an importance and a priority.</p>

