



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 (e.g. personnel / 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?

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>At 8:20 this morning I did my graded CPE for module 4. I completed it in the SIM lab and Mrs. Moreno was my module 4 instructor that oversaw it. I simulated being a nurse and taking care of a patient that was diagnosed with urosepsis while Mrs. Moreno spoke for the simulation manikin. In the end, I passed my CPE on the first try.</p>	<p>Step 4 Analysis</p> <p>Some things that I could apply to this situation were the universal competencies that I have spent 3 previous modules learning and using. I was able to use the fall precautions, 4 P's, and 7 rights of medication administration throughout the scenario to make sure that my patient was kept safe during the entire simulation. A broader issue that arose from this simulation was my lack of confidence when being observed in a graded setting. I am confident when I am not being graded however, it all changes when the setting is not as relaxed and a little more high-pressure. I found that while I was nervous and unsure of myself, Mrs. Moreno was not aware at all. I think this difference in perspectives is a good reminder to act confident so that the patient and others in the room do not feed off your energy.</p>
<p>Step 2 Feelings</p> <p>In the beginning, I was feeling extremely nervous and was thinking about everything that I needed to do to ensure I could keep my patient safe and pass. Towards the end, I had the feeling that I was missing something since the SIM week during clinicals was a lot more complicated than our CPE but, after carefully reviewing everything I did during the situation, I was sure that I completed all the universal competencies. I feel confident after finding out that I passed that I know how to take care of a med-surg patient and can do so safely. I think that this is the most important feeling because that was the goal of module 4.</p>	<p>Step 5 Conclusion</p> <p>I could have made this CPE better by being confident in my abilities and everything that I have learned since August and especially since the beginning of module 4. My instructors have all taught me everything I know and I just need to be confident in that knowledge. I think that the module 4 instructors did their absolute best to make CPE as relaxed as possible while still requiring us to critically think. I have learned that I am able to critically think during medication administration and I am able to successfully implement all my universal competencies.</p>
<p>Step 3 Evaluation</p> <p>Some things that I think are good about CPE is that it puts students in a situation where there is pressure to pass and makes us think critically under those conditions. Something that I think is bad about CPE is that sometimes students do not work as well under that pressure, and it can in the end result in them psyching themselves out and can thus cause some doubt. Something that I think was easy during my CPE was talking out loud about what I was doing because I had a reason for everything that I did and did not do. Something that was hard for me in my CPE was being confident that I knew what to do in the situation that was presented to me. I think that I was so nervous originally that I was expecting to forget or miss something and be required to come back to try again but, was pleasantly surprised when that was not the case.</p>	<p>Step 6 Action Plan</p> <p>Overall, while I dislike CPE every time it comes around, I always leave feeling confident in my abilities and knowledge. I know in the future that I need to be more confident going into CPE and more trusting of myself and what I know. In hindsight, I think that I did everything well in CPE in terms of actions and critical thinking and I was glad to get the opportunity to practice my skills. In the future, I think that today's CPE will help me know that I am making the right choices when I decide to hold medications for specific reasons and, I am much more confident in my ability to speak to patients.</p>