



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.

**Step 1 Description**

A description of the incident, 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

- 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?

**Step 4 Analysis**

- 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)?

**Step 2 Feelings**

Don't move on to analyzing these yet, simply describe them.

- 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?

**Step 5 Conclusion**

- 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?

**Step 3 Evaluation**

- 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?

**Step 6 Action Plan**

- 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.

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| <p><b>Step 1 Description</b></p> <p>On 09/24 a patient was admitted to the hospital for urosepsis. Pt had a history of CVA 3 months ago and had HTN. I played the role as the nurse and had to decide what assessments needed to be done along with what medications to administer to my patient. I decided to assess my patients vitals and recent medications given in order to properly care for my patient. I performed hand hygiene and AIDET on my pt as I walked into the room, I verified name, DOB, and allergies. I made sure the correct iv fluids were hung going at the prescribed rate, checked my pts iv site, and catheter site of infection. I gave two medications safely and performed the 4p's and fall bundle before leaving the patients room.</p> | <p><b>Step 4 Analysis</b></p> <p>After going back to complete universal competencies for my patient, I can say I know how important it is to have a few side rails up for my patient to prevent injury.</p>   |
| <p><b>Step 2 Feelings</b></p> <p>I felt nervous at the beginning when I was reading the doctor's orders and deciphering which medications needed to be given to my pt. As the scenario went on, I felt more confident. Besides having to come back in the afternoon to complete my universal competencies, I felt I did rather well. I think the most important feeling I had was feeling confident at the end of the scenario and knowing if I take my time and critically think, I can care for a patient safely.</p>  | <p><b>Step 5 Conclusion</b></p> <p>I believe I could have made my scenario better by taking the time as soon as I walked in to assess my patient's position, bed rails, and place of call light. In the future I will definitely take the time to assess patient safety as soon as I walk in to greet my patient.</p> |
| <p><b>Step 3 Evaluation</b></p> <p>I felt my medication administration went great. My pt was NPO the previous day and got moved to a low fat diet. When I pulled my medications, I decided to use my Volcera to call the charge nurse to confirm my patient could receive a PO med.</p> <p>Something I was not expecting to come back for was failing to pull up my patient's side rails at my first time I went into the room.</p> <p>When I went back in the afternoon to complete my universal competencies, I made sure to go over to the patient first to pull up side rails and place the call light in reach.</p>   | <p><b>Step 6 Action Plan</b></p> <p>I believe the CPE scenario went well overall. I learned the importance of universal competencies and how important it is to look at the doctors orders along with the patients vitals. I will use this experience for patient care in the future.</p>                             |