

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.” (Tingos 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. <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?

Covenant School of Nursing Reflective Practice

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 morning during CPE at the Covenant Women's and Children's Hospital, in the simulation lab, I was given the opportunity to care for a patient named Willard Dunn. He was admitted and diagnosed with urosepsis. I had the pleasure of being evaluated by Mrs. Starch and a module 8 instructor. I attempted to maintain patient safety, medication administration and patient teaching, while maintaining universal competencies. Unfortunately, I did not meet the universal competencies but I got the opportunity to come back in the afternoon and try again with Dr. Nesbitt and Dr. Stennett. I succeeded the second time around.</p>	<p>Step 4 Analysis</p> <p>Going through this experience helped me to become a safe nurse in the future. I know that I will ask for pain, position, potty and personal belongings before I leave the room to prevent falls and promote patient safety. As well as fulfilling the fall bundle which is in the universal competencies. The fall bundle which includes the yellow fall risk bracelet, yellow gown, yellow socks, adjusting bed rails to all but one rail up, and making sure the bed is at the lowest height.</p>
<p>Step 2 Feelings</p> <p>I was very nervous going into CPE this morning. I felt that my nerves overwhelmed me a lot. They caused me to over think. Overthinking led me to over looking very small but important details when it comes to patient safety. Also the feedback I got from the first experience made me feel a lot better. The positive feedback, and corrections made me realize I did have some strong points and the experience wasn't all bad. The second time going in I was still nervous but this time more focused about what needed to be met; which was patient safety and universal competencies.</p>	<p>Step 5 Conclusion</p> <p>Some other things I can take from this situation is to walk in a place confidently and to know the things that I have been taught. Walking in confidence allows me to apply what I learned in a real life situation. This scenario also taught me not to allow my nerves and thoughts to overwhelm me. This will help me to avoid over looking the small but very important details.</p>
<p>Step 3 Evaluation</p> <p>Even though the first time did not go as planned. I did have strong points. Medication administration went well for me. I definitely feel more confident when it comes to giving a patient their while fulfilling all seven rights of medication administration. . I did forget to give the patient his call light and adjust his bed rails before I walked out of the room to get his medications. What I forgot is a big deal when it comes to patient safety. It should not be overlooked, especially in a real life situation with a real patient.</p>	<p>Step 6 Action Plan</p> <p>As I previously said this situation will make me a safe nurse in the future. I can take what I fell short on the universal competencies and use it as a lesson learned. I will always be mindful to where the call light is at all times and paying attention the the bed side rails as well. Not only that but continue to follow the 7 rights of medication administration and overall maintaining all the universal competencies at all times.</p>