



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 eg. 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>Rory and I were the nurses assigned to take care of a post operative patient in SIM. We were given ample time to prepare for possible complications of this patient and the care we would need to provide.</p>	<p>Step 4 Analysis</p> <p>I felt like I applied my previous knowledge and clinical skills appropriately to assess the patient condition and notify the physician. I also did the appropriate research on possible complications from the surgical procedure that the patient can suffer and the interventions that can help with these complications.</p> <p>The broader issue that rose from the event was how to effectively handle a cohort that acts inappropriate while in a patient room? What is the correct and best way to handle the situation and still provide the best care for that patient.</p> <p>Our patient was suffering from a post op hemorrhage and required a blood transfusion and bolus of fluids to help replace volume loss from the procedure and incision site post operatively.</p> <p>Other observers from the sim expressed there concerns about the lack of teamwork and the inappropriate actions of my sim partner.</p>
<p>Step 2 Feelings</p> <p>I felt very confident in providing care for this patient. I work in the OR and help to complete these procedures on a full-time basis. I knew my previous and clinical experience would help me be a more critical thinker and assess the needs of the patient. I was however, still a lil anxious because I felt there was a communicative disconnect between Rory and I. In the end this played a critical role in the overall scenario and caused teamwork issues when attempting to provide care to the patient. During the simulation I got very frustrated and even explained to the patient I needed to leave the room to call pharmacy and check compatiability, mostly because I needed to take a deep breath and regain my composure. In the end, we prioritized care for this patient appropriately and that gives me a sense of relief.</p>	<p>Step 5 Conclusion</p> <p>I could have made this SIM better by giving the lab draws a higher priority to see the results and know that our patient needed a transfusion. In addition, I could have created a better team approach by more effectively communicating with my partner.</p> <p>I have learned how important it is to communicate effectively and prioritize care for the patient. To use critical thinking skills to create an effective SBAR when notifying the physician of a patients condition especially after a procedure.</p> <p>Rory could have made the situation better if he allowed me to help him in the moment and teach him afterward on how to operate the IV pump. It was crucial to get this bolus going and he delayed that treatment with his arrogance on needing to do it himself in the moment. We all have different learning styles but in nursing or helathcare in general there is a right and wrong time to ask or learn certain task. In addition, I do not feel like it gave the patient or their visitor a good perception of how he or the hospital handle situations.</p>
<p>Step 3 Evaluation</p> <p>I felt that the Sim was a great learning experience and if given the opportunity to repeat the SIM that we could work better as a team and improve the overall care for our patient.</p> <p>The SIM was frustrating because Rory was struggling with how to program the IV pump and snapped at me when I attempted to help. This was very out of line and contributed significantly to teamwork disconnect. I felt that I needed to keep reassuring the patient they were ok and we were taking good care of them all while he was complaining how the pump manufacturers were idiots. I felt that his tone during the majority of the seem was poor and he was upset. Prioritizing care was a critical part of caring for this patient including using SBAR to notify the physician of their condition. However, we did communicate how this should be done and acted accordingly to provide the greatest patient needs first. I contributed to helping care for my patient by providing medication and teaching as ordered, as well as, reassurance that we were doing everything necessary to improve their symptoms. I could have communicated more effectively with Rory to make the scenario/ patient care go smoothly. Also, I should have recognized that drawing the labs needed to be a higher priority.</p>	<p>Step 6 Action Plan</p> <p>I can definitely use these lessons to adjust and grow through effective communication and better handle situations of adversity amongst my fellow staff members even if it means involving a direct supervisor. In hindsight, I feel like I handled the situation well, in that moment the care of the patient was most important and I needed to put my frustrations aside in order to help them feel comfortable and provide care of them. Next time I would for sure focus on prioritizing the labs for a patient in this situation because those values were critical to providing care. In addition, I may have suggested or started a 2nd IV as we needed to transfuse blood and it is always helpful when needing to infuse multiple drugs along with blood as many products may not be compatible with the blood.</p>