



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.

<p>Step 1 Description</p> <ul style="list-style-type: none"> • CPE was set in the simulation center today (12/4/2000) involving myself (Andrew Romero), Mrs. Columbe (patient), and other instructor from Module 6 • I was the Nurse for my patient to perform medication administration, assessments, patient safety, universal competencies, interact with the patient, and be graded for my CPE. • Others in the room were to act as the patient, critique my skills – technique – delivery for the patient, and provide feedback at the end for how I did throughout CPE. • I did well – I passed on my first time!!! I was nervous throughout it which was my only critique (was to be more confident – which confidence comes with practice). Yet, I kept thinking I did bad but I made sure to do every step right. 	<p>Step 4 Analysis</p> <ul style="list-style-type: none"> • In CPE, they are treating it as if you are treating a real patient – For Example, I didn't give lisonipril because their BP was 90/60 and I didn't give their Plavix because their platelets were 86,000 and we want those above 100,000. • Yet, if you hold those medicines – give the patient a reason why and further it – I did. BP – yes a low BP but it can even lower that BP and more serious complications. Plavis if given with 86,000 platelets could be at risk for serious complications of bleeding. • Treating this CPE/Sim as you would as a real patient in the hospital!!
<p>Step 2 Feelings</p> <ul style="list-style-type: none"> • In the beginning, I was trying to compose myself because I did feel nervous but I wasn't trying to show that – but I think Mrs. Columbe saw right through me or it was the way I was standing. • During AIDET, 4 P's, and getting my medication – I was just making sure I was hitting all the RIGHT points so I was getting ding/checked off. Yet, these are crucial points that we do miss in the hospital and should be utilized when in the hospital – so I do understand why you all stress to remember universal competencies and these points! • The final outcome: I was mind blown to say the least – when I was done – I thought I finished too fast or thinking I missed so many steps!! It was probably my nerves blocking something in my head like doubt or overthinking. • Nervous was the main emotion – but it could be a good emotion because it helped me to keep putting on hand hygiene even if I didn't need gloves on at some points, asking the patient questions, talking to the patient constantly, being on high alert, it does help – sometimes. 	<p>Step 5 Conclusion</p> <ul style="list-style-type: none"> • Allowing myself to be more confident in my skills and talking! • Yes, I was teaching my patient on why they would/wouldn't be receiving these medications but they could see right through me on my nerves and fears! I don't want to be in the hospital and a patient be afraid of me! So, as the modules progress – I hope I become bolder and more confident in my delivered as a nurse! • Mrs. Columbe and Module 6 instructor did everything right and more – no comment! • I have learned to be a better nurse, be confident because I know what I am doing!
<p>Step 3 Evaluation</p> <ul style="list-style-type: none"> • I believe everything went well – I loved how Mrs. Columbe oriented me to the room and made me feel comfortable to the environment especially to the Module 6 instructor. Sometimes we never know who the instructor or guest will be so we are always guessing who it is – so it eased the burden. • Mrs. Columbe was vocal as the patient – when I asked questions to the patient – she would answer. Never was a silent moment. So, that helped with my nerves because sometimes quiet makes me nervous more. • Nothing bad happened besides me thinking I did bad but I checked everything. 	<p>Step 6 Action Plan</p> <ul style="list-style-type: none"> • I think it is a great experience to practice your skills and learn from any mistakes that you may make. • I can definitely apply what I learned from CPE to the hospital – my universal competencies, 4 P's, 3 doctor order checks, verbalizing my 7 Rights!