

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.” (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. <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?

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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?

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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.

Step 1 Description

While precepting at LTACH I got to take care of a variety of patients. The most interesting one by far and the one I was most nervous about was a patient that had three JP drains in his abdomen and two chest tubes. I got to help manage all of the drains with the help of my preceptor. She was very detailed in her teaching about the drains. Showing me how to properly measure the output for the drains and how to change the dressing covering the exit site. Under her supervision I was able to remove the left anterior chest tube.

Step 4 Analysis

I can apply what I learned about chest tubes to the removal. You have to instruct the client to be in a supine position where they are rolled over so we can see the chest tube and have access to it. Before removal we instruct the client to hold their breath and to bear down as if they are having a bowel movement.

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<p>Step 2 Feelings</p> <p>At first I was pretty apprehensive about going to LTACH and knowing it was med surg. But after the first few days of being there I really am liking the environment over there. The staff is friendly and everybody is willing to help each other out. My preceptor is a great teacher as well.</p>	<p>Step 5 Conclusion</p> <p>Overall I felt like the chest tube removal went as good as it could be. Teresa explained step by step what i will be doing and demonstrated how to hold dressing as i was removing the tube. LTACH and its nursing staff are great individuals to work with and to learn from. They are all willing to lend a help hand or just to answer any questions that you may have.</p>
<p>Step 3 Evaluation</p> <p>Taking out the chest tube was nerve wracking and exciting all at the same time. I've taken out NG tubes, foleys and IV's but the chest tube was something new to me. Overall it was a great experience. I didnt think my preceptor was going to let me do it at first but then she asked me if I was ready and I jumped at the opportunity.</p>	<p>Step 6 Action Plan</p> <p>The main thing I would want to work on is my med admin and time management for when i get into the practice by myself. For example when giving an IM injection that goes into the thigh I forgot I had to draw back to see if I struck a vein. In certain situations I let my nerves get the best of me and without my preceptor there I definitely would have made a mistake. I am grateful for all of the learning opportunities. I also want to improve on my SBAR. There is a lot for me to learn and I am excited to take on the challenge.</p>