



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><b>Step 1 Description</b>                  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"> <li>• What happened?</li> <li>• When did it happen?</li> <li>• Where were you?</li> <li>• Who was involved?</li> <li>• What were you doing?</li> <li>• What role did you play?</li> <li>• What roles did others play?</li> <li>• What was the result?</li> </ul>	<p><b>Step 4 Analysis</b></p> <ul style="list-style-type: none"> <li>• What can you apply to this situation from your previous knowledge, studies or research?</li> <li>• What recent evidence is in the literature surrounding this situation, if any?</li> <li>• Which theories or bodies of knowledge are relevant to the situation – and in what ways?</li> <li>• What broader issues arise from this event?</li> <li>• What sense can you make of the situation?</li> <li>• What was really going on?</li> <li>• Were other people's experiences similar or different in important ways?</li> <li>• What is the impact of different perspectives (e.g. personnel / patients / colleagues)?</li> </ul>
<p><b>Step 2 Feelings</b>                  Don't move on to analyzing these yet, simply describe them.</p> <ul style="list-style-type: none"> <li>• How were you feeling at the beginning?</li> <li>• What were you thinking at the time?</li> <li>• How did the event make you feel?</li> <li>• What did the words or actions of others make you think?</li> <li>• How did this make you feel?</li> <li>• How did you feel about the final outcome?</li> <li>• What is the most important emotion or feeling you have about the incident?</li> <li>• Why is this the most important feeling?</li> </ul>	<p><b>Step 5 Conclusion</b></p> <ul style="list-style-type: none"> <li>• How could you have made the situation better?</li> <li>• How could others have made the situation better?</li> <li>• What could you have done differently?</li> <li>• What have you learned from this event?</li> </ul>
<p><b>Step 3 Evaluation</b></p> <ul style="list-style-type: none"> <li>• What was good about the event?</li> <li>• What was bad?</li> <li>• What was easy?</li> <li>• What was difficult?</li> <li>• What went well?</li> <li>• What did you do well?</li> <li>• What did others do well?</li> <li>• Did you expect a different outcome? If so, why?</li> <li>• What went wrong, or not as expected? Why?</li> <li>• How did you contribute?</li> </ul>	<p><b>Step 6 Action Plan</b></p> <ul style="list-style-type: none"> <li>• What do you think overall about this situation?</li> <li>• What conclusions can you draw? How do you justify these?</li> <li>• With hindsight, would you do something differently next time and why?</li> <li>• How can you use the lessons learned from this event in future?</li> <li>• Can you apply these learnings to other events?</li> <li>• What has this taught you about professional practice? about yourself?</li> <li>• How will you use this experience to further improve your practice in the future?</li> </ul>

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><b>Step 1 Description</b>                  The patient had been admitted from the ER for urosepsis, my main role was I was the nurse for this patient, and upon entrance of the room, I immediately began to go through my mental list of assessments and began to educate my patient on the medications they were to receive and why, along with side effects, as well as why certain medications were going to be held for them at this time.</p> <p>Mrs. Heinrich was my instructor I was testing with, another professor was in the room with her, their roles were to grade me and my safety as a nurse, as well as my universal competencies.</p> <p>The result for me in the beginning was the only thing I did not meet on my patient safety was ensuring the patients bed rails were up and at the very end I did not have time to place my patient's call light in place alongside them as well. Following this after debriefing, during my second attempt, I was able to make sure I had done every portion of my patient safety and I passed my CPE after this.</p>	<p><b>Step 4 Analysis</b>                  What I was able to apply to CPE, was my previous experiences in SIM lab and in the clinical setting, along with the universal competencies and patient safety. The recent evidence in the literature surrounding this situation was the genitourinary lectures we had during this module, I was able to apply my learning from that lecture to my CPE scenario. The broader issues that could've arose from my situation was my patient could have gone septic, or I could have administered the wrong medication if I had not properly looked over all of my patient's information and their labs and vital signs. The sense that I could make from the scenario was that my patient only needed antibiotics and their blood thinner administered and I was going to be holding medications due to a low systolic blood pressure reading. What was really going on was that my patient had urosepsis/pyelonephritis, and my objective was to make sure I gave proper teaching and that I was safe, and my patient was safe. The impact of different perspectives is that anyone could have taken this as an opportunity to learn about themselves or their nursing practice overall, and how they can utilize this new knowledge in the future, and I think a lot of my peers had similar experiences as mine during CPE.</p>
<p><b>Step 2 Feelings</b>                  In the beginning, I was feeling very nervous because I did not know what to expect. All I could think about was that I wanted to make sure I was thorough on everything I was doing during CPE. The words from my professors made me feel more at ease and it felt good knowing they were confident in me and it made me feel like I was capable of doing well and being competent. I felt good and happy with my overall outcome, it made me feel more confident in myself and what I can do. The most important feeling I can feel at the moment is the feeling of accomplishment, and this is the most important feeling to me at the moment because I feel like I have learned and grown so much from IM2 CPE to IM4 CPE, I feel more confident and competent in myself and in my nursing knowledge and skills.</p>	<p><b>Step 5 Conclusion</b>                  I could have made this situation better had I slowed myself down in the beginning and ensured my patient's bed rails were up and they were completely safe and it is really the only thing I would have done differently throughout this entire experience for me personally. I do not think there was really anything that could have made the situation better in my honest opinion. But the biggest take away for me was that I am competent in what I am doing, I just need to slow down during my initial assessment to ensure my patient is safe entirely, and that was the biggest take away for me and my learning during CPE.</p>
<p><b>Step 3 Evaluation</b>                  What was good about this event was knowing and feeling more confident in my skills as a nurse in the future, it also helped me to recognize what was most important for the patient, which overall was safety.</p> <p>I do not personally feel like there was anything bad about my experience or what I had done throughout the event, the only "bad" thing was I had forgotten to put up my patient's bed rails before exiting the room the first time, my initial assessments, education, and everything else, I felt fine and competent in, overall nothing was bad about this experience for me.</p> <p>I feel like the only thing that was difficult was trying to be thorough in my patient education while trying to be safe with a limited amount of time but other than that, it was everything that I have been taught so far during school. The outcome I expected was to pass the first try but overall, I was happy with my overall outcome after my second attempt.</p>	<p><b>Step 6 Action Plan</b>                  My overall thoughts on the situation are that it was a very real life situation that I will most likely be facing everyday as a nurse in the future and that this was very good practice for me and for what I should do during my nursing career. The main conclusion I can draw is the importance of ensuring patient safety immediately upon entering a patient's room, it is the main concern for the nurse and the patient, is their safety. Within hindsight, I do not think I would do anything really differently, besides making sure I had my patient's bed rails up. I can use this experience to make sure I am being safe in the future and that it is something I will remember from now on to check and make sure I am being fully safe with my patients in the future. I can also apply what I learned during CPE to every other event and interaction I will have with a patient. What this experience has taught me so far about professional practice is that safety is the biggest concern I should be focusing on as a nurse, above anything else. This has also shown and taught me that I am very capable for providing safe nursing care and I can keep my patients safe as well. I will be using what I learned from this experience, in every patient interaction I will have during my entire nursing career.</p>