



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.

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| <p><b>Step 1 Description</b></p> <p>I had a patient who had an unstageable pressure wound on his coccyx. He was bed bound and incontinent of stool, he came to the facility with the wound but it has worsened since he has been there. I helped the nurse change the dressing on the wound.</p>   | <p><b>Step 4 Analysis</b></p> <p>This injury could have been avoided, He could have been turned every two hours, used assistive devices to keep pressure off of his bottom, kept clean and dry, and treated the wound immediately when it appeared.</p>   |
| <p><b>Step 2 Feelings</b></p> <p>I felt very bad for the patient, he had acquired this wound from being in the hospital and not being turned regularly. This was the first time that I had seen a pressure wound that bad in the clinical setting and I felt very bad for him because I can't imagine how painful it is.</p>   | <p><b>Step 5 Conclusion</b></p> <p>To help this situation I think that first the pressure ulcer could have been avoided or at least not allowed to become an unstageable injury. It was not just from this facility or from one person taking care of him it was from him being unable to move and being incontinent for a long period of time. I also think that the room could have been stocked with the necessary supplies so that he didn't have to stay exposed and in an uncomfortable position for so long.</p> |
| <p><b>Step 3 Evaluation</b></p> <p>While changing the dressing he was incontinent of stool so we had to change and clean him also which was not helping the wound heal because of how close the wound was to his rectum. Also the supplies to change the dressing were not stocked in the room so the nurse had to get the dressing and it took a while. The patient had to lay exposed for about 10 minutes which was not good for his dignity.</p> | <p><b>Step 6 Action Plan</b></p> <p>Now that this wound has happened what we can do now is try to get it to heal without causing further damage. We can turn him every two hours, use assistive devices such as wedges, the different inflatable mattress, and keeping him clean and dry to let the wound heal. We can also make sure that he is getting plenty of protein and an adequate diet.</p>  |