

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?
<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?

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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.

<p>Step 1 Description Module 4 CPE took place on Monday, May 5 at the CSON Sim lab. I was playing the role of the Nurse for a patient admitted from ER. Mrs. Kensing and Mrs. Webster were my evaluators.</p>	<p>Step 4 Analysis From my previous knowledge, I can apply that a levofloxacin is used to treat a complicated UTI and can cause some kidney function problems. Recent evidence in literature surrounding this situation is that having a catheter puts the patient at increased risk for CAUTI. The knowledge that older adults experience decrease in LOC when infected with UTI is relevant in this situation. Broader issue that arises from this event is that the patient is uroseptic, meaning the infection is in the blood which can lead to organ failure and death. The patient was in a long term care facility prior, so I can assume the patient was having to hold their pee or not receiving adequate hygiene care which resulted in an untreated UTI. Really playing the role of the nurse I was trying to keep the patient safe and ensure they received their antibiotics to treat their infection. Other peoples experience's were similar since we all had the same CPE, this is important to keep it fair to each student. Difference perspectives allow for more teaching opportunities from an outsiders perspetive on the situation.</p>
<p>Step 2 Feelings At the beginning I felt prepared and confident to complete the CPE. I was thinking that this was a learning opportunity whether I passed the first try or not; I would learn something from the scenario no matter what and it would only make me a better nurse. The event made me feel slightly anxious. Mrs. Kensing's role as the "family member" made me think my actions were being performed correctly. This made me less nervous. At the end, I left like I might have passed, but I was still unsure. The most important feeling I had was contentment. I think is was the most important because even if I had to repeat I knew it was for the greater good; to build me into a stronger, safer nurse.</p>	<p>Step 5 Conclusion More clear orders would have made the situation better. The orders regarding diet and oxygen parameters were a little confusing since they were different on each paper. There is no way others could have made the situation better. I could have been more confident in my actions. I have learned that if the patient O2 sat is good on room air they do not need O2 even if it is ordered.</p>
<p>Step 3 Evaluation The prep time was good. The oxygen order was confusing, and therefore bad. Preparing meds was easy. It was difficult to determine if I should give the PO meds since one paper said NPO but the other said something about a low fat diet. I think patient safety went well; I was able to recognize certain things like side rails being down and correct them to keep pt safe. I did well communicating with the patient. I think the instructors did well keeping me calm and relaxed by their words and actions pre and post CPE. I thought maybe I forgot a step and would have to repeat. I do not think anything went wrong, I did get confused by the oxygen order but was able to understand before the scenario ended. I contributed by being the nurse in the CPE.</p>	<p>Step 6 Action Plan Overall I enjoyed the situation. I can draw the conclusion that patient safety is important in nursing. Next time, I would ensure that I understand the orders fully before starting the scenario. In the future I can make sure to keep my patient safe. I can apply these learning events to other events in real life. This has taught me the importance of professional practice in nursing in order to keep the patient safe ad healthy. I will use this situation to remember to keep my patient safe.</p>