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**Title:** Gibbs' Reflective Cycle

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RMIT University

## Gibbs' Reflective Cycle

Reflective Practice of Clinical Experiences

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Preparation for Practice & Leadership NURS2155

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## **Reflective Cycle of Clinical Experiences**

### **Description**

In Year 3, I have learned exceedingly during my PEP four clinical placement at oncology/renal/endo ward, for four weeks. On my first week there; I was like a new infant bird that learned to adapt to the new environment. Despite on day one of my placement, my educator was already put pressure on me and the other four students in a stressful condition because we had not even prepared to meet her standard requirement and she expected very high clinical knowledge skills from each one of us, which was reasonable enough.

In addition, my educator she has a loud voice and she assessed on our head-to-toes assessment everyday. Whenever we did the handover to her, she expected us to know well on pathophysiology of the patient diagnosis, that associated with our nursing critical thinking skills; and also understand the five important elements of each medication including classification, indication, action, contraindication and nursing consideration. I remember that I did not do well on all of those skills and I had been told off from my educator that I should know all of those skills better since 'you are in third year' stated by educator. From those experiences, I got motivated to study twice harder than before in order to pass my educator nursing standard.

According to the following week, in one of the busy morning shift, my buddy nurse and I have co-sign all the medications to one of my patient's that I also had accountable for. Yet, she did not stay and observed with me until the patient administered his medications, because she was in an argent to administration her other two patients. All of a sudden, I

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realised that I should not sign the medication chart before the patient's administration. My buddy nurse was very busy on that day and I just do not want to be a burden to her; so I decided to observe my patient by my own until he actually administered his medications. Coincidentally, my educator walked past and caught that mistake. So she went to my buddy nurse at the next room and told her that she supposed to stay with me until the patient had taken the medications, otherwise she would have fail me. My educator took me out from the patient's room and asked me 'did you know what you have done?' and I said 'yes, it was my mistake, I will responsible for what I have done and I won't blame to anyone else'. I apologised to my clinical educator and promised that I would not do it forever again. Those experience, I would not forget in my entire life and I started to assert to my educator that I was willing to learn from my mistake and improved myself along the way through out this clinical placement.

On the other hand, I am very grateful to have my amazing fellow students in my ward, we were supporting and helping each other in every circumstances and we work well in a team. Even my educator also impressed that she had never met a group of students who were very supportive and looking after each other really well like this before. Additionally, over the the past four weeks, my fellow students and I had demonstrated to my educator that we all had passed her clinical acceptable standard with lot of incredible feedbacks from the clinical staffs. On the last day of placement, she recommended us to apply the graduate program at that hospital and offer us as a referee as well, which was a rare thing to hear among of all my placement.

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### **Feelings**

I found it was challenging to do head-to-toes assessment everyday, especially in the very hectic morning shift because I still needed to prepare for my nursing care plan at every start of the shift and had to research on the medications that I was unsure off before given medication; and eventually I was end up of far behind in the shift. Nonetheless, as the time past by, I had improved my time management skills and had learned how to manage the multitask skills in a very busy environment.

In addition, for the first couple days of my placement, I did not do well on my handover to my educator because I did not express enough information that she wanted and I felt so embarrassed because she stated that 'you are in third year and you should know more than that'. All of those powerful words had determined and motivated myself to do more numerous research study as well as practising with my handover skills everyday. For the last three weeks I had given the patient bed side handover to the other nurse with deeply understanding of the patient cases and had received a good implement from the staffs and my educator.

Regarding to my misconduct on co-sign the medication at the wrong time, I felt so unprofessional conduct and depressed because I did not know what to do at that time beside on observing my patient. By the time I realised that I should not sign it off, it was to late because I had already sign the chart. When my educator caught those mistake, I thought I was going to be eliminated from the clinical straight away, but fortunately she was generous and gave me another opportunity with the first warning sign. The lesson that I had

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learned from those day, last me for a life time because I would never conduct the same those mistake again.

Beside from that, I felt very supportive from ward staffs as well as my educator. Particularly, I had a good tremendous support from my other fellow students in this clinical placement, which we facilitated and encouraged on each other and we also growth the knowledge and experiences together a long the way. I feel like I have learned a lot from my first week of this placement already. I become more confident on handling my clinical tasks with professionally and appropriate performances in the clinical setting.

### **Evaluation**

I should have practise my head-to-toe assessment handout from the previous clinical placements, that was why I had poor performance skills when my educator was assessing on me for the first couple days. However, over the past four weeks after I had done practising this assessment every single day as well as my handover skills, I had extremely improved from my poor practise kills up to the nursing professional standard where my educator had expected before. I also delegated the nursing tasks by using time effectively and showing my initiative to my buddy nurse and my educator every shift.

The incident of signing medication in the wrong time was enormously challenging for me. I regret on this unprofessional conduct. Nevertheless, I was pleased by my educator responded positively on me and allowed to take another chance to prove that I will never conducted the same error again. From this incident, I have learned on how serious it is to acting professionally and assertively when dealing with patients in the hospital.

## **Analysis**

Head-to-toe assessment is one of the effective clinical nursing skills to demonstrate the performance between each individual student and the patient (Purpora & Prion, 2018).

Regarding to my educator suggested that head-to-toe assessment will help us as a student nurse to understand more in depth about the patient and also could be the good back up resources to avoid us from getting into trouble, whenever the patient is in the emergency condition. Likewise, Nizar (2014) asserts that time management is essential for all the the nursing clinical staffs to find their own suitable strategies to manage their task on time.

Alturki et al. (2013) clearly asserts, that the aim of the nursing handover is to achieve the better understanding of patients circumstances as well as to improve their health quality with the effective handover from the clinical nursing team. In addition, nursing handover is followed by the ISBAR, which helps to maintain the patient specific information with their safety care and the continuity care across the shift rotation (Spooner et al., 2018).

Furthermore, a student nurse who work under the professional conduct mainly come from the great adviser or educator with a good professional leadership, which they redirect and acknowledge the student about the professional standard and maintain the student nursing competence skills (Doyle et al., 2017).

Despite from the teamwork of nursing, it is part of the critical component to reassure for the patient safety and their quality health of care in the hospital by working as a team and improving the planning of the workforce in the nursing team (Polis et al., 2017). By working

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in the hospital environment setting, supporting other colleagues is significant in effecting with their nursing roles of handling patients care with professionally (Roche et al., 2017).

## **Conclusion**

From all the poor practised and the incident that I had confronted during PEP 4 placement, has impacted on my performance of clinical nursing skills. Nonetheless, these experiences had taught me in how significant it is as a student to provide professional conduct with under the scope of practise. Additionally, I also acknowledge about the important of having a team support from my placement because they always there to encourage and motivate my skills in the clinical setting. And I have learned a lot from this placement compared to my other previous placement.

## **Action Plan**

For my next PEP 5 placement I will aim to demonstrate to my next educator with my therapeutic skills as well as understanding in depth about patients' diagnosis with under the nursing professional performances. I will use my last placement experiences as a fundamental skill to improve on the next placement. Moreover, I will seek advises from my educator or my body nurse in order to be ready for my graduate nurse.



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