**Student statement:** By submitting this reflection, I am acknowledging that it is my own work. Comments are my own and have not been used in any previous work (inside or outside the institution). I have followed the rules outlined by my instructor and am compliant with the University of Windsor, St. Clair College, and/or Lambton College Academic Integrity Policy.

Student Name: Student Number: Date:

|  |  |  |  |
| --- | --- | --- | --- |
| **Category** | **Satisfactory** | **Unsatisfactory** | **Student Reflection (must be typed)** |
| **Look Back****(L)** | * Identifies **ONE** relevant clinical event/experience/ learning opportunity that was significant/impactful in one or two sentences.
* Describes this **ONE** clinical event so that the reader can gain an understanding of what occurred.
* Provides opinion/idea/perspective and feelings related to own. role/actions/performance in this clinical experience.
 | * Does not provide a clear and succinct description of ONE clinical event, experience or learning opportunity.
* Does not provide own feelings related to the clinical experience.
* Identified event, experience, or learning opportunity is not relevant to clinical practice.
 | When receiving my patient assignment, I saw my patient had a history of narcotic dependence and was on multiple antipsychotics. As a nurse we try to not have any prejudgments or bias, but as a young adult I sometimes catch myself having prejudgments. So, after learning this information I was a little worried about how my patient would treat me, etc. however when I went in to meet my patient he was one of the nicest patients I’ve had and that led me to have a very enjoyable shift. This experience was a great example and reminded me as to why its so important to not go into a situation with a preconceived judgment.  |
| **Examine Experience****(E)** | * Selects a scholarly article that relates to this clinical experience (may use a CNO standard or BPG in addition to article, but not in lieu of an article).
* Briefly summarizes key ideas/findings of the article.
* Compares/contrasts own ideas/thoughts with those expressed by the author(s) with explanation.
 | * Does not incorporate a scholarly article.
* Summary of the key ideas/findings of the article are not included.

 * No explanation of the author’s ideas/thoughts compared/contrasted with own.
 | The key findings of the article were that bias is within all of us, its part of a natural human instinct and a lot of the time this bias is unconscious and can affect our decision making, especially when put into a position of power. Combating unconscious bias is through education and raising awareness. I definitely agree with the article that these bias’s within us are unconscious and can be addressed. I think in my case my bias was the assumption that if my patient was or is a drug addict, they might not be the nicest person to me. However, I had to address that bias within myself and go into that room open minded. I think the articles idea of changing this unconscious bias through education is true. I think once you realize that bias is there its much easier to get rid of it.  |
| **Appraise** **and** **Analyse** **(A)** | * Discusses at least **two** other people’s ideas/opinions/ perspectives that should be considered related to this clinical event (how might they feel: e.g. client, peer, family, other discipline, etc.).

**\*\***A reflection graded as ***excellent would also include the following:**** Examines perspectives surrounding this event at the level of nursing in general, and/or society in general (e.g. impact on health care system/nursing profession, political, financial, cultural influences on Canadians).
* Identifies how the event/situation challenged own perspective(s) and status quo (usual way of doing things).
* Poses questions that should be considered due to their significance to nursing practice.
 | * No other perspectives are discussed.
* Only one other perspective is discussed
 | I think for patients it makes them feel a lot safer and respected when they feel their healthcare provider is nonjudgmental of them. I think when patients get the perception that their healthcare provider is judging them it would make them not want to come back which could put their health at risk due to not seeking medical attention when its needed. As an individual who has family, I think its important for families of patients to get the perception that their nurse isn’t judging the patient in anyway and is caring for them to the best of their abilities.  |
| **Research** **and** **Revision****(R)** | * Provides summary of learning from this clinical experience and from the article findings.
* Identifies what they could have done differently in this clinical experience.
 | * Summary not provided
* Does not identify what they could have changed about their own role/actions/performance in this clinical experience.
 | I think my learning through this experience and the article is that bias is within everyone and its okay if you find yourself stereotyping someone. That the important part is that when your find yourself stereotyping you educate yourself and address that bias within you in order to provide safe and judgment free care. I don’t think there was anything I could have done differently in this clinical experience because I already had previous knowledge of unconscious bias and so I was able to not let that affect my anxiety towards meeting my patient. I think if anything this experience will help me educate others and remind myself to never judge a book by its cover.  |
| **New Perspective****(N)** | * Incorporates specific examples of how this new/enhanced knowledge will be implemented into future practice as a nurse.
* Identifies a nursing resource(s) that will assist to develop this aspect of practice (e.g. identify a specific nursing textbook etc.).
 | * No specific examples for implementation into future practice are incorporated.
* Does not identify a nursing resource to assist with learning
 | This new knowledge will help me to address other bias’s within my self as my career develops and I discover more about myself and beliefs. I think this new knowledge will also help me to also educate others and spot unconscious bias in other people. This will enhance my practice as a nurse because I will be able to give judgment free, patient centered care to my patients and also promote this type of care to others around me. Something that will help me to continue to develop this knowledge would be seeking out my research on how to manage unconscious bias.  |
| **Concept Identification** | * Identifies and describes key curricular concepts that influence the experience (minimum one in 1st year; two in 2nd year; three in 3rd year; minimum four in 4th year)

(critical thinking, know-based practice, evidence informed decision-making, health, teaching & learning, professional practice, communication, leadership, collaboration, safety, person family centered care, and informatics) | * Does not identify and/or describe related curricular concepts that relate to the experience/reflection.
 | I think key concepts that where present in this scenario are professional practice and person family centered care. In situations like mine professional practice is very important to remind yourself you are a healthcare provider, and you need to put your personal views or beliefs aside in order to care for patients in a nonjudgmental and unbiased mannerism. Family patient centered care is also used because its important to keep the patient’s wellbeing at the top priority and if a nurse maintained bias and judgment towards the patient it would hinder their health care experience  |
| **References and APA Format** | * Scholarly article(s) and any additional resources (CNO, BPG) correctly cited in reflection in APA format.
* Title page in correct APA format
* Reference in correct APA format
 | * Incorrect APA format throughout reflection
* Incorrect APA format on title page
* Incorrect APA format for article(s) and/or other sources.
 | **Student Reference(s) in APA Format:** Prestia, A. S. (2019). Sabotaging success: Nurse Leader, 17(6), 561–564. https://doi.org/10.1016/j.mnl.2019.02.005 |
| **Grade:** | **□ Satisfactory □ Excellent**  |  **□ Unsatisfactory**  |  |
|  |  |  |  |