**Abigayle Van Amerongen**

**Clinical practicum**

**Jocelyn Dupuis**

**October 7th 2023**

**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.
 | During my clinical shift on the palliative care floor I over heard a family member talking to the nurse about how her brother is in tears over their moms death but she is seemingly fine and how she probably seems heartless but that she just processes grief differently. I agreed with that family member that grief can look different on everyone. I think hearing this and being placed on the palliative care floor made me want to learn more and gain a better understanding of the grief process in order to better my self as a nurse.  |
| **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 article findings indicate the importance of providing spiritual and emotional care to families of palliative care patients as well. Often depression and anxiety come together where grief and loss are present and being more aware of this as a health care provider is important in order to make sure effective coping is being used by both the family and the patient. I believe grief comes in many forms and everyone processes it differently. This belief is supported by Özdemir, F., Doğan, S., & Timuçin Atayoğlu, A. (2020) who found that family caregivers of palliative care patients experience psychosocial problems during their grieving process. However, I think preparedness can affect one's coping. I think if an individual is adequately prepared for the grieving process, they are more likely to cope with it in a healthier way. This is evidenced by the study's finding that family caregivers who used spiritual coping styles such as praying and meditating, were better equipped to manage their grief. Although the study found spiritual coping to be beneficial, I believe preparedness can be achieved through various means, not just spiritual ones. For example, receiving support from family and friends, engaging in activities that bring joy, and seeking professional help are all effective methods of preparing for and coping with grief. Ultimately, my belief is similar with the study's findings that different coping styles can be beneficial during the grieving process. |
| **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
 | the patient's perspective in this scenario is most likely that they feel overwhelmed by their emotions and unsure of how to express them in a healthy way. The patient may also feel guilty for not expressing their grief in the same way as other family members and therefore are unsure of how to cope with their emotions.The family member's perspective in this scenario is possibly that they feel concerned for the patient and want to help them in any way they can. The family member may also feel a sense of guilt for being able to express their sadness in a more outward way.  |
| **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 what I’ve learned from this experience and the article findings is that its important to address and be aware of the families’ mental needs as well as the patients. Its also important to educate effective cooping techniques and watch for signs of ineffective cooping for families and patients to facilitate healthy grieving. Something I could have done differently is communicated this finding to the nurse in order to facilitate some type of intervention for the family.  |
| **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
 | I can use the article finding in my nursing practice by focusing on the psychosocial problems faced by family caregivers of palliative care patients and their spiritual coping styles. As a nurse, it is important to understand the challenges faced by caregivers and provide adequate support to them. The findings of the study suggest that family caregivers of palliative care patients experience a range of psychosocial problems, including depression, anxiety, and sleep disturbances. These problems can have a significant impact on their mental health. Therefor as a nurse, putting a bigger emphasis on family centered care in the palliative care will help to make the patient and patients’ family experience on the unit much more meaningful. Going forward I can implement nursing interventions such as 🡪providing education on the signs and symptoms of depression, anxiety, and other psychosocial problems to family caregivers. 🡪provide information on spiritual coping strategies, such as prayer and seeking support from a religious institution.🡪 refer family caregivers to appropriate resources, such as local support groups and counseling centers, as needed.I can use learning resources such as Nurse labs to find more psychosocial nursing interventions.  |
| **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 the concepts that influenced this experience would be health teaching and learning because Ive Identified something I as a nurse should learn about in order to health teach it if need be. As well as person family centered care and evidence informed decision making. Person and family centered care comes in because I can use my new knowledge on the grief process in order to extend care to the patient and their family. Evidence informed decision making because when having emotional discussions with patients and their families im able to make evidence informed decisions regarding how I communicate and things I can say to help the family better understand the grief process.  |
| **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:** Özdemir, F., Doğan, S., & Timuçin Atayoğlu, A. (2020). Psychosocial problems of family caregivers of palliative care patients and their spiritual coping styles. Perspectives in Psychiatric Care, 56(3), 636–641. https://doi-org.ledproxy2.uwindsor.ca/10.1111/ppc.12479 |
| **Grade:** | **□ Satisfactory □ Excellent**  |  **□ Unsatisfactory**  |  |
|  |  |  |  |