Written Reflection on Personal and Professional Development

Student name:
Student ID:
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Course:
Unit code:

Description

Our week 7 lab session aimed to develop infection prevention strategies based on Australian guidelines. The session consisted of a demonstration by the clinical instructor. Thereafter, there we were paired to have our practice. One of the pairs' objectives was identifying the crucial areas where sterility is paramount. I had a chance to prepare a sterile tray with the help of the other team members. However, at this point, I realized my mistake: I mistakenly touched a non-sterile area with my gloves. The instructor corrected me, allowing me to restart the preparation. Through the procedure, I learned one important thing: proper maintenance of a sterile field required students to be extra keen and with good concentration. After the procedure, I gained much in infection prevention and control techniques. I also gained many practical skills that will help me in the hospital setup.

Feelings

My participation in the infection prevention and control practice session brought excitement since it was the first time. However, the session was accompanied by other problems, such as mistakenly touching a non-sterile area. However, the facilitator's approach to giving me a second chance to restart the setup gave me more confidence to do the right thing. I was delighted to do the correct procedure during my repeat, which brought me much joy. The lab session has built more on my dedication to always doing the right thing and being keen when handling setups requiring a high **level of sterility.**

Evaluation

The experience delivered various positive effects on learning. Through the practice environment, I had the chance to rectify mistakes while protecting patients from harm. The facilitator's constructive feedback helped me improve my knowledge of good techniques and protected me from experiencing failure. Working with other students helped me find more tolerability throughout the process. Under intensive pressure, the nurse identified that many vital procedures would be omitted, leading to compromised sterile procedures. My most significant mistake was losing awareness of my hand movements as I assembled the sterilization tray. The successful session showed that knowledge about infection prevention is equally important to procedural skills, although the session achieved its objectives. The session taught me valuable skills yet showed me that I must improve my practices continuously while adhering to all established protocols.

Analysis

The experience demonstrated how elaborate and vital sterile technique practices truly are. The analysis revealed that the first contamination developed because I failed to mark sterile and non-sterile areas clearly and paid insufficient attention to hand movement while wearing gloves. According to the Australian Guidelines for Infection Prevention and Control, one must establish proper aseptic fields while performing invasive procedures (Australian Commission on Safety and Quality in Health Care, 2019). Knowledge of the aseptic nontouch technique (ANTT) and avoiding direct contact with critical sites is the method to stop healthcare-associated infections (Rowley & Clare, 2019). I understood during this challenge that preventing infections requires following proper procedures and keeping a composed, systematic approach when under pressure. Planned tray arrangement before contact proved crucial, along with organizational abilities. This examination taught me that infection control is an adaptable safety mechanism required for secure patient care. The lessons from my experience demonstrated that focused detail practice leads to better patient outcomes and minimizes dangerous healthcare repercussions.

Conclusion

During my staffing experience, I should have dedicated more time to developing mental readiness before beginning the sterile field setup. The clinical outcome might have improved from visualizing the successive steps previously and practicing the procedure in my mind. Through this learning, I have better understood infection prevention as the fundamental principle of nursing professional competence (Mitchell et al., 2020). Practice mistakes provide essential chances for my development according to what I learned. The session demonstrated that workplace success demands beyond technical competencies because emotional palettes, situational mindsets, and reflective skills create the bridge between minimum expectations and true success. I will maintain my aseptic skill improvement through simulated practice and regular feedback sessions in the upcoming time. My plan includes a complete Infection Prevention and Control guidelines evaluation to expand my theoretical understanding. Combining practical experiences with theoretical education and personal reflection will help me grow into a safer and more efficient nursing professional.

Action Plan

When returning to implement a sterile field again, I would stop to plan each step in my mind before starting my procedure. I will identify critical zones mentally and then keep

my hands away from such areas because I follow the aseptic non-touch technique (ANTT) principles. During my future laboratory sessions and clinical placements, I will search for directive supervision opportunities for sterile field setup training. I will view educational videos about sterility setup while reviewing safety guidelines issued by the Australian Commission on Safety and Quality in Health Care. My practice of mindfulness during procedures involves complete attention to each movement as a part of my control strategy (Knighton, 2020). I will establish infection prevention as a leading and automatic nursing practice I desire to develop. My reflection practice will continue after each practical session to recognize accomplishments and determine potential improvements.

References

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