

How you are using reflective practice nursing essay



**ASSIGN
BUSTER**

The aim of this assignment is to discuss how I am using reflective practice and codes of conduct in my journey to becoming a health professional. Through this discussion, the relationship between reflection, codes of conduct, and professional development will be demonstrated. For the purposes of this assignment, references to a reflection on an aspect of my clinical practice; namely maintaining patient confidentiality, will be made (see appendix). This reflection is guided by Gibbs' Reflective Cycle (1988) (cited in Jasper, 2003, p. 77). I selected this framework as it allows one to reflect in a systematic manner on positive aspects of the experience as well as areas for improvement. Indeed, this aspect of my clinical practice will form the context of this assignment, as well as other relevant standards of conduct (Nursing & Midwifery Council (NMC), 2008). The following paragraphs will discuss codes of conduct and the process of reflection with reference to my professional development.

Nursing practice is underpinned by clear regulatory principles (the NMC code of conduct, 2008). The code provides standards of conduct, performance and ethics for nurses and midwives and is a tool in safeguarding the wellbeing of the public. As Goldsmith (2011, p. 12) states, the code 'should be used to guide daily practice'. However, Sutcliffe (2011) argues that the code can be difficult to implement in practice. Sutcliffe's argument is supported by first-hand experience during my placement. The following excerpt summarises the experience on which I reflected:

' During visiting hours on the ward a gentleman approached me to ask for the whereabouts of a patient (this patient had recently gone to theatre). In a helpful manner, I proceeded to inform the gentleman of the patient's

<https://assignbuster.com/how-you-are-using-reflective-practice-nursing-essay/>

location. However, the conversation was interrupted by a member of staff who correctly established the identity of the visitor’.

In these circumstances, I did not uphold a key principle of the code: ‘to respect people’s right to confidentiality’ (NMC, 2008, p. 3); in spite of the fact that I had learnt about this principle prior to going on placement. This key standard of conduct is reiterated in the guidance published by the Department of Health (DH, 2003) and by the Caldicott report (1997) (cited in Crook, 2003). Whilst reflecting-on-action following this experience, the code offered a benchmark against which I evaluated my professional conduct. As a developing health professional I learnt that I must respect a person’s right to confidentiality and I must act as an advocate for those who I am helping to care for.

My reflective process highlighted the importance of regularly referring to the code and other supporting guidance so as to develop my professional practice in this area. In my reflection, I propose an action plan for managing subsequent situations. This action plan applies other pertinent aspects of the code, for example, to ‘work effectively as part of a team’, to ‘share information with your colleagues’ (NMC, 2008, p. 5) and to ‘keep clear and accurate records’ (NMC, 2008, p. 6). With reference to applying these principles to my practice hereafter, I would consult the patient’s notes to confirm next of kin and patient’s location (i. e. theatre) and effectively communicate with colleagues about this situation. Furthermore, confidentiality is underpinned by trust (Pattison & Wainwright, 2010). Gibbs’ action plan (1988) functioned as an aid to my learning and development.

Throughout my career I plan to consider and reflect on the fundamentals of <https://assignbuster.com/how-you-are-using-reflective-practice-nursing-essay/>

the code whenever I am thinking of my learning objectives and professional development (Goldsmith, 2011).

Johns (2004, p. 1) proposes that the reflective process is ‘ a way of being within everyday practice’. To illustrate this further, the technique allows the practitioner to become mindful of self within the context of a particular experience. The intention is to resolve incongruity between a practitioner’s own vision and actual experience (Johns, 2004). Schön (1987) (cited in Johns, 2004, p. 1) distinguishes between reflection-on-action (as shown by my reflection) and reflection-in-action. For example, reflection-in-action refers to occasions when a practitioner takes a momentary pause during a particular experience in order to make sense of it and to consider how best to proceed. Consequently, as we become accustomed to thoughtfully analysing our practice following an event (on-action), the ability to reflect-in-action becomes a part of everyday practice (Johns, 2004). Mention should be made here of an absence of conventional research to support this argument; although anecdotal evidence has been found (Johns, 2004).

These two layers of reflection; namely in-action and on-action, are the cornerstone of professional development. For me, reflection as a learning process will facilitate the move from a novice learner to an intuitive expert, by means of developing implicit knowledge accumulated from past experiences (O’Regan & Fawcett, 2006). As I reflect on subsequent experiences in the remit of patient confidentiality, I will develop practical and professional knowledge. The benefits of using reflective practice have been well documented. O’Regan & Fawcett (2006) explains that the process reduces the gap between theoretical knowledge and nursing practice and <https://assignbuster.com/how-you-are-using-reflective-practice-nursing-essay/>

fosters the development wisdom and implicit knowledge. Fawcett's argument has been illustrated by my reflective process.

It is important to discuss what it means to be a professional nurse in order to evaluate its significance to the reflective process and codes of conduct. A registered nurse acquires a body of specialist knowledge from the educational and practical setting. However, the idea of holding a body of knowledge is arguably less important than the ability to draw on intuitive knowledge, tuned through previous practical experimentation and reflection (Schön, 1987 & Stevenson, 1990). My personal experience of the reflective process is that it facilitates the move from reflection-on-action to reflection-in-action. Similarly, this sophisticated skill reduces the perceived theory-practice gap. (

To summarise this discussion, I have used Gibbs' reflective cycle to reflect on an aspect of my clinical practice; namely patient confidentiality. The code (NMC, 2008) has functioned as a benchmark against which I have evaluated my professional knowledge and behaviour. Indeed, the NMC advocates the use of reflective practice for professional growth. I can conclude that an improved skill in reflective thinking will drive my professional growth. Similarly, the values highlighted by the code are equally essential for the development of my professional accountability. It is important to note that the mutual function of reflective practice, codes of conduct and professional development is to ultimately deliver excellent nursing care to our patients.

References

Crook, M. A. (2003) The Caldicott report and patient confidentiality. *Journal of Clinical Pathology*, 56 (6): 426-428.

Department of Health (DH). (2003) Confidentiality: NHS code of practice. Leeds: DH.

Gibbs, G. (1988) *Learning by doing: a guide to teaching and learning methods*. Oxford: Further Education Unit, Oxford Brookes University.

Goldsmith, J. (2011) The NMC code: conduct, performance and ethics. *Nursing Times*, 107 (37): 12-14.

Institute of Health Records and Information Management. (1997) *The Caldicott Report*. London: IHRIM.

Jasper, M. (eds.) (2003) *Beginning reflective practice*. Cheltenham: Nelson Thornes.

Johns, C. (2004) *Becoming a reflective practitioner*. 2nd ed. Oxford: Blackwell Publishing.

Nursing & Midwifery Council (NMC). (2008) *The code: standards of conduct, performance and ethics for nurses and midwives* [online]. Available from: <http://www.nmc-uk.org/Documents/Standards/The-code-A4-20100406.pdf> [Accessed 25 February 2013].

O'Regan, H. & Fawcett, T. (2006) Learning to nurse: reflections on bathing a patient. *Nursing Standard*, 20 (46): 60-64.

<https://assignbuster.com/how-you-are-using-reflective-practice-nursing-essay/>

Pattison, S. & Wainwright, P. (2010) Is the 2008 NMC code ethical? *Nursing Ethics*, 17 (1): 9-18.

Schön, D. (1987) *Educating the Reflective Practitioner*. San Francisco: Jossey-Bass.

Stevenson, J. S. (1990) “ The development of nursing knowledge: accelerating the pace.” In Chaska, N. I. (ed.) *The nursing profession: turning points*. St Louis: The C. V. Mosby Company. pp. 597-607.

Sutcliffe, H. (2011) Understanding the NMC code of conduct: a student perspective. *Nursing Standard*, 25 (52): 35-39.