

Reflective practice is  
an integral part of  
developing skills to  
improve



Reflective writing is as a medium for an individual's reflective capacity to be communicated and examined both internally and externally. Self directed learning is emphasised through reflective writing as students engage in a more holistic approach which uncovers the reasons behind their actions.

## **Experience and learning**

Moon (2004) emphasised that an individual can both reflect in order to learn or learn as a result of reflecting. Through experiencing new situations medical students are able to learn and develop new skills but the level of learning depends on the depth of reflecting of the experience. This is often why reflection is described as learning through experience. Reflection of an experience is associated with deep learning where the student is able to gain more insight into the decisions behind the actions involved. (Marton, Hounsell, Entwistle 1984) By learning through experience students are able to build on previous knowledge which covers a solid knowledge base that can be applied to changing situations and which experiences can be drawn from. Learning does not stop at reflection but involves the changing in decision making processes and actions that reflection should bring about in future situations. What is learnt from reflection must be put into practice for it to be effective.

Kolb (1984) proposed that Learning does not result from having an experience but occurs when an experience is examined, reviewed and reflected upon. This process allows a connection to form between theory and actions where an experience involves preparation, action, reflection and connection back to previous knowledge. Reflection involves lifelong learning

as the changing nature of medicine and ethical concerns continues to challenge practitioners.

## **Emotions and Reflection**

William (2002) said “ Actions are so much more powerful if they arise from both feelings and thoughts”. Reflection involves the process of

understanding and examining emotions and how they affected a situation.

Emotions are an integral part of any experience and it is through reflective practice that the impact emotions has on a situation comes to light.

Practitioners have to deal with many different situations that can cause psychological and emotional strain. Reflective writing allows emotions to be dealt with and not compressed. Through expressing personal feelings practitioners are able to be more focused and self-aware which can increase their capacity to feel empathy for patient’s situations. Empathy makes patients feel more understood and heard and through reflective writing the promotion of understanding of patient’s situations and vulnerabilities can be achieved. (Squier 1998)

Negative feelings can hinder performance through self doubt and lack of confidence but through reflecting on negative experiences these emotions can be used to improve performance and encourage self directed learning.

(Olckers, Gibbs, Duncan 2007) Reflective writing allows students to use emotion in their writing which assist in overcoming psychological and emotional barriers which they may face and provides an opportunity to examine potential moral consequences of an action. Reflective writing allows students to deal with their emotions instead of suppressing them and allows

the development of strategies to deal and express emotions in different  
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settings. This promotes a sense of practitioner wellbeing where the mental, emotional and spiritual health of practitioners is looked after. Through reflecting on emotions a connection between the medical profession will the rest of society is built where there is less risk of practitioners becoming detached and intolerant.

## **Reflection and learning in the Professions**

Reflection in the medical practice can be viewed from three directions; reflection-on action, reflection-in action and reflection-for action. (Killion, Todnem , 1991)

Donald Schon (1983) developed theory of reflective professional practice by developing reflective- in and reflective-on action. Reflection- in action involves connecting past experience, feelings and knowledge to a current situation. This process allows new insight and understanding to be established in relation to the situation which will influence the decisions made by the medical practitioner as the situation develops. This type of reflection is particularly important to medical practitioners who face complex and new situations regularly and who need to make fast accurate decisions and actions. (Schon 1983)

Reflection-on action involves reflecting on a situation that has occurred and analysing decisions made to determine weaknesses or possible improvements that could be implemented in future practice. This form of reflection is often only undertaken when something goes badly or not to plan but it is essential for reflection to take place after experiences that went well to fully reflect on an individuals strengths and weaknesses.

There is also pre-action reflection which describes a form of reflection before an action is taken. This form of reflection aims to prepare professionals to be able to deal with situations where there may be no time to reflect in action so it becomes important to reflect prior to action. (Mann, Gordon and MacLeod, 2009) Reflection prior to action is often done unconsciously where future possible actions are accessed and evaluated and goals are set. In medicine if prior knowledge of patient's condition is known research through literature, past case studies and communication with other health professions can result so that possible conditions which may be present can be dealt with. Reflection for action can be used to view the situation from a variety of perspective not just from one's self. It can include perspectives of the patient, other health professional and text based knowledge. This form of reflection can reduce mistakes and prepare practitioners for possible unforeseen circumstances. (Keith Ong 2011)

## **Reflection and Personal Development**

Reflective practice is a key skill for medical students to develop and continue to use throughout their medical careers. Reflective practice assists medical students and practitioners to refine their ability and continually challenge their own decisions making process. The goal of reflection according to Epstein, " should be to develop not only one's knowledge and skills, but also habits of mind that allow for informed flexibility, ongoing learning and humility", (full text 1 19) Personal and professional development is an integral part of the medical profession. This development is cultivated by reflective practice which allows self-assessment and professional identity to be uncovered. Professional identity is established through reflective writing

as a medium for practitioners to express their own voice and perspective, and clarify and refine personal values which may be competing or conflicting to others. (Shapiro 2006)

Through becoming more self-aware reflective practice allows practitioners to become more engaged and aware during clinical encounters and improve clinical reasoning. This is why reflection has close links to safe practice as critical thought has been put into decisions allowing care to be solely patient based. (Bansman 95). Critical examination of decisions allows problem solving skills to enhance which contributes to more effective treatment of patients.

Reflection assists in guiding present and future decisions and actions in a competent and knowledgeable way through allowing new experiences to draw on previous situations to increase understanding of patients and to extend empathy towards them. (Wald 2010) Reflective “ writing improves clinicians’ stores of empathy, reflection, and courage... Writing that affects the reader is art” (Charon 2004) Reflective practice is shown to have many benefits for practitioners not only through clinical skill improvements but assisting in developing the whole person by developing interpersonal skills. Practitioners improve skills of empathy as they are more aware of their patients and their own emotions and how those emotions may effect the consultation or decision made by the patient.

Reflective practice allows a connection to form between technical and knowledge based facets and emotional aspects. It aims to develop personal skills which will enhance and guide technical learning and performance in a

clinical setting. Through assessing the bigger picture though reflective practice students are able to deal with more complex and unforeseen issues.

## **The process of reflection**

Reflection may be difficult to teach (Stimson 2009, Roberst 2009) although reflective frameworks can assist in engaging individuals with reflective practices and developing skills for future internal reflection. Reflection in a practical setting needs to be continuous for the knowledge uncovered during reflection to be translated into action. Gibbs' (1988) created the 'Five stages of reflection' model which can be used as a guide for reflective writing. This model represents the cycle that reflective practice is a part of. The five steps of this model include describe, reflect, research and analyse, decide, act and evaluate. Brookfield (1987) approach to reflection involves using the view points of a number of different perspectives known as the 'four lenses'. It involves researching, analysing and connecting through critical reflection.

## **Conclusion**

Reflective practice is an important attribute for undergraduate medical students as it increases self-awareness, refines problem making skills and prepares students to deal with complex, unpredictable situations. Through reflection students are able to refine their clinical skills by recognising their strengths and weaknesses which develops personal competence and identity. Although reflection takes time and effort the long term benefits create a more competent and compassionate practitioner