

## REFLECTION FOR HEALTH CARE WORKERS

### Introduction

Reflection, and reflective practice, is increasingly being encouraged to help health care workers (HCW) learn and become more effective practitioners. There is a large body of material to assist HCWs – a google search on 26 June 2020 (when I first wrote this) with key words reflective practice and healthcare workers generated over 34 million links! How to find your way through all this can be daunting. This brief introductory paper has therefore been prepared to help both, trainees and established HCWs understand the basics and start their journey of reflection- unusually this paper has been developed not from a theoretical perspective but from the lived experience of a practitioner. In essence it is case study based .

It starts with some background and then describes the key elements of reflection. There are two exercises for you to practise your learning.

### Background

"The unexamined life is not worth living" said Socrates, and as society and healthcare in the 21<sup>st</sup> century becomes more complex we should heed his saying; the need to step back, review what we are doing and plan for the future is more necessary than ever.

To begin with, here is a personal example from my professional life – see Resource No 1 at <https://www.nhs70.org.uk/story/rajan-madhok> - which contains my reflective writings over 25 years in the NHS. As I explain in the compendium it started after I moved from orthopaedic surgery into public health when I realised that I needed to improve my critical thinking and communication skills and started writing; it was not until much later that I realised that what I was doing was reflection. The term reflective practice was not much in use then and indeed even now. I sort of fell into it, but once I got the 'bug' I kept going and tackled increasingly complex subjects. I had discovered that writing made me think and make sense of what I had observed or done, and most importantly how I could improve. As you will notice I had approached the subject back to front. Until very recently I had very limited knowledge of the theory of reflective practice and I basically did what I felt like! I did not know 'Reflection on Action' from 'Reflection in Action' (more on this later).

**NOTE:** it is not expected that you fully read the compendium unless interested but to scan it to get an idea, and perhaps later on return to it.

Some caution before you proceed- only do so if you want to, since unless you are motivated enough it is of no use.

### Getting started

Let us start with an exercise.

**Exercise No. 1**

Write a paper (pen or electronically)

- describing your current thinking about, and your practice of, reflection – what do you understand by it and how do you practise it
- why you want to learn more about it – what is your motivation
- what do you think will be challenges and how will you overcome them – to basically create a plan

Once you have done this, save this paper for yourself and use it for Exercise No 2 later and to create a log-book whereby you visit what you have written every year and write a yearly report – you will be amazed at a) how time flies and b) what joy you will get when you look back after 25 (and hopefully longer) years.

**The basis of reflection**

“The only constant in life is change” goes the old cliché but it is actually true and indeed 21<sup>st</sup> century is going to see more and frequent changes. This applies to all aspects of life including healthcare as science and technology advance and as societies change. What this means is that HCWs need to constantly update themselves and review their practice in the context of changes in their professional and political, economic and social environment. Just following the old model of education and learning is not going to suffice and HCWs need to invest in life-long and adult-learning; see the table below for a comparison of the Pedagogy (‘old/traditional’) and Andragogy (new/modern) ways of learning. It is not, however, an either/or decision and more of a balance though at the practitioner level andragogical approaches are more useful.

### Pedagogy vs. Andragogy

	<b>Pedagogical</b>	<b>Andragogical</b>
The Learner	<ul style="list-style-type: none"> <li>• The learner is dependent upon the instructor for all learning</li> <li>• The teacher/instructor assumes full responsibility for what is taught and how it is learned</li> <li>• The teacher/instructor evaluates learning</li> </ul>	<ul style="list-style-type: none"> <li>• The learner is self-directed</li> <li>• The learner is responsible for his/her own learning</li> <li>• Self-evaluation is characteristic of this approach</li> </ul>
Role of the Learner's Experience	<ul style="list-style-type: none"> <li>• The learner comes to the activity with little experience that could be tapped as a resource for learning</li> <li>• The experience of the instructor is most influential</li> </ul>	<ul style="list-style-type: none"> <li>• The learner brings a greater volume and quality of experience</li> <li>• Adults are a rich resource for one another</li> <li>• Different experiences assure diversity in groups of adults</li> <li>• Experience becomes the source of self-identify</li> </ul>
Readiness to Learn	<ul style="list-style-type: none"> <li>• Students are told what they have to learn in order to advance to the next level of mastery</li> </ul>	<ul style="list-style-type: none"> <li>• Any change is likely to trigger a readiness to learn</li> <li>• The need to know in order to perform more effectively in some aspect of one's life is important</li> <li>• Ability to assess gaps between where one is now and where one wants and needs to be</li> </ul>
Orientation to Learning	<ul style="list-style-type: none"> <li>• Learning is a process of acquiring prescribed subject matter</li> <li>• Content units are sequenced according to the logic of the subject matter</li> </ul>	<ul style="list-style-type: none"> <li>• Learners want to perform a task, solve a problem, live in a more satisfying way</li> <li>• Learning must have relevance to real-life tasks</li> <li>• Learning is organized around life/work situations rather than subject matter units</li> </ul>
Motivation for Learning	<ul style="list-style-type: none"> <li>• Primarily motivated by external pressures, competition for grades, and the consequences of failure</li> </ul>	<ul style="list-style-type: none"> <li>• Internal motivators: self-esteem, recognition, better quality of life, self-confidence, self-actualization</li> </ul>

Source: <https://www.educatorstechnology.com/2013/05/awesome-chart-on-pedagogy-vs-andragogy.html>

### What is reflection

Reflection is “a generic term for those intellectual and effective activities in which individuals engage to explore their experiences in order to lead to a new understanding and appreciation” (1) and critical reflection is the process of analysing, questioning, and reframing an experience in order to make an assessment of it for the purposes of learning (reflective learning) and/or to improve practice (reflective practice) (2).

### What does reflection entail

In essence, reflection is about making sense of our actions in order to improve further, and one would have thought that we would all be practising this. However, that is not the case- reflective practice is still in its infancy and is also in danger of becoming a 'tick box' exercise.

Here is what good reflection would look like:

"If we take the example of a medical mistake, a superficial, educationally ineffective reflection will consist of a description of the events or a description accompanied by reasons such as the team/clinic was busy and other people failed in their responsibilities.

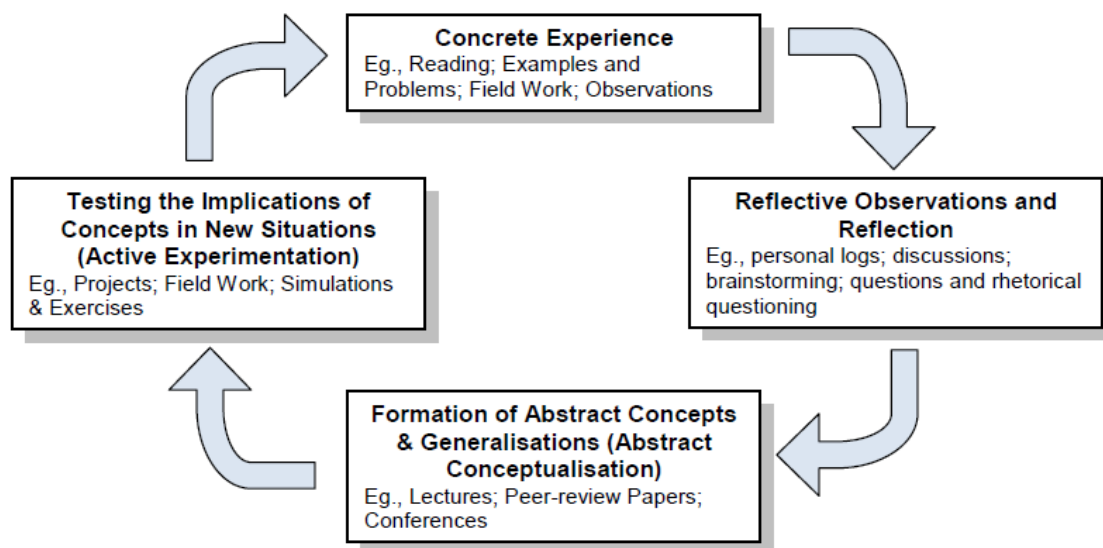
"A more useful and deeper reflection would include consideration of:

- how and why decisions were made,
- underlying beliefs and values of both individuals and institutions,
- assumptions about roles, abilities and responsibilities,
- personal behavioural triggers, and similar past experiences ("when pressed for time, I . . ."),
- contributing hospital/clinic circumstances and policies,
- other perspectives on the events (frank discussion with team members, consultation of the literature or other people who might provide alternative insights and interpretations),
- explicit notation of lessons learned and;
- creation of a specific, timely, and measurable plan for personal and/or system change to avoid future similar errors.

"Effective reflection, then, requires time, effort and a willingness to question actions, underlying beliefs and values and to solicit different viewpoints. This "triple loop" approach moves beyond merely seeking an alternate plan for future similar experiences (single loop) or identifying reasons for the outcome (double loop) to also questioning underlying conceptual frameworks and systems of power." (2).

You could use the same approach to any public health and social care issues: smoking, alcohol or infectious diseases, or care of the elderly, and so the topic is relevant to all HCWs in all settings. The following diagram (from UK Faculty of Public Health) is a good summary.

Figure 2. Learning cycle and examples of each phase



Source:UK Faculty of Public Health [FPH Tips on Writing Effective Reflective Notes](#)

### How to do it

But how does one acquire the necessary skills and become a reflective practitioner, especially as we are all busy and have too many demands on our times? At this stage I should also point out, in case you have not already noticed, many different terms are used when talking about reflection, such as:

- reflective learning
- reflective practice (or reflection in education or research)
- reflective thinking and
- reflective writing

and whilst it may be useful to look at these various aspects in details, for now they are part of the continuum whereby one learns and puts learning into practice and uses thinking and writing to achieve this. Indeed as one acquires the basic knowledge and skills and starts practising reflection, it moves from being a retrospective (Reflection on Action) to a real-time (Reflection in Action). You may want to see this resource from La Trobe University to learn more about some of these issues. <https://latrobe.libguides.com/reflectivepractice/types>

In addition, here are two resources from the Monash University Library: the first of these includes the structure below, which is a simpler way to start and can enable one to go deeper and start exploring the Triple Loop mentioned above: [https://www.monash.edu/rlo/assignment-samples/medicine-nursing-and-health-sciences/reflective-writing-and-critical-incidents#What\\_is\\_reflective\\_writing-1](https://www.monash.edu/rlo/assignment-samples/medicine-nursing-and-health-sciences/reflective-writing-and-critical-incidents#What_is_reflective_writing-1)

- **Description** – What happened?
- **Analysis** – Why did it happen? What were you feeling? What theories might help explain what happened? Are there other perspectives that challenge your views?
- **Outcomes or Action** – What did you learn? What would you do differently next time?

The second one is the following video: [https://youtu.be/N2qZX3M\\_9MY](https://youtu.be/N2qZX3M_9MY)

### **Getting started**

To begin with it is important to recognise that not everybody is as reflective and that reflection is an active choice to pause, examine, and analyse and that it requires dedicated time and use of different techniques/methods- some alone, others with help from mentors/peers.

To do reflection one needs to start with the objectives – the piece of work that you are going to reflect on and whether the objectives of that work were clear, and also the objective for reflection – to assess what more to learn and how to use the results of reflection in practice. Overall you need to develop your own approach to how you would do this, what techniques to use and how much to do alone or with peers/mentor.

For those of you who are already more advanced, and also following the saying that the best way to learn is to teach, you may want to see this table of the twelve tips (2) on how to teach reflection - whilst it is about medical education, the scheme and ideas are relevant to all HCWs.

### ***Twelve Tips for teaching reflections at all levels of medical education***

1. Define reflection
2. Decide on learning goals for the reflective exercise
3. Choose an appropriate instructional method for the reflection
4. Decide whether you will use a structured or unstructured approach and create a prompt
5. Make a plan for dealing with ethical and emotional concerns
6. Create a mechanism to follow up on learners' plan
7. Create a conducive learning environment
8. Teach learners about reflection before asking them to do it
9. Provide feedback and follow-up
10. Assess the reflection
11. Make this exercise part of a larger curriculum to encourage reflection
12. Reflect on the process of teaching reflection

Depending on your professional background, you may wish to see these three resources focused on Nursing and Midwifery, Doctors, and Public Health Professionals - these are from the UK and you may wish to look out for similar ones from your own settings and also your own professional bodies.

- Nursing and Midwifery Council (UK) : Joint statement by UK regulators <https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/benefits-of-becoming-a-reflective-practitioner---joint-statement-2019.pdf>
- General Medical Council (UK). The reflective practitioner <https://www.gmc-uk.org/education/standards-guidance-and-curricula/guidance/reflective-practice>
- Faculty of Public Health (UK). Reflective notes. <https://www.fph.org.uk/professional-development/cpd/reflective-notes/>

Once you have gone through the above you can create your own approach to reflective practice- noting that although it is becoming a requirement for some professions, to get best value from your time investment you need to make it a regular habit, not a task, and something to be enjoyed! In any case by this stage you should have a better idea of how far up the Triple Loop (mentioned above) you are: when you make reflection notes after a CPD activity are you critical/reflective enough, did you understand the 'root causes' - what worked and what did not, what have you actually learnt and how will you build it into your practice?

## Conclusion

This has been a brief introduction to the subject of reflection, and hopefully will stimulate you to learn more and practise it regularly.

We started with a quote from Socrates, and here is another one and this time from Rumi – a 14<sup>th</sup> century poet/mystic (Sufi):

*“Do you pay regular visits to yourself? Start now.”*

Reflection is not just for professional practice but also for personal development, after all you want to have some balance between work and play and overall have a successful and happy life. Getting there takes time and so earlier the better, and all this starts with creating the mind-set – what you think becomes your actions, actions become habits and habits define your character. So start by creating the reflective thought processes in your mind: What am I doing? Why am I doing it? Is this good- and for whom? Can I do it better? and make this a way of living.

How and what you reflect on will change with the stage of your life, and to demonstrate this, I recently wrote a supplement to the compendium referred to above – and this time in verse; see Resource No 5 on the earlier url. The anthology is focused on life lessons, based on my learning, and this is all the more relevant for the younger generations who are likely to have different careers to the ones enjoyed by the older generations (like me in 60s); they will have repeated career changes

with learning interspersed with periods of work and constant reflection can and will make all the difference in achieving a good work:life balance and ensuring that one becomes professionally successful and personally happy. .

### **The end (and a new beginning)**

To finish off here is the second exercise

#### **Exercise No. 2**

“Revisit the paper you wrote in Exercise 1 and add another section on what you have learnt and your plans for how to build reflection into your life: both professional and personal?”

In the plan you should also include further reading especially articles written by your professional bodies and more relevant to your context.

If you have got this far, then congratulations on having done both the above exercises which is basically you doing what Reflection is about.

And here is a gift for you – if you want you can use this reflective journal as the basis of your own diary (you can adopt it, and if you need it in Word, then get in touch).

Good luck.

### **References**

1. Mann K, Gordon J, Macleod A. Reflection and reflective practice in health professionals education: a systematic review. *Adv Health Sci Educ Theory* 2009; 14(4): 595-621.  
([https://www.researchgate.net/publication/5813985\\_Reflection\\_and\\_Reflective\\_Practice\\_in\\_Health\\_Professions\\_Education\\_A\\_Systematic\\_Review](https://www.researchgate.net/publication/5813985_Reflection_and_Reflective_Practice_in_Health_Professions_Education_A_Systematic_Review) )
2. Aronson L. Twelve tips for teaching reflection at all levels of medical education. *Med Tech* 2011;33(3):200-5.  
(<https://pubmed.ncbi.nlm.nih.gov/20874014> )

### **Recommended books**

1. Schon D A. *The reflective practitioner: how professionals think in action.* Ashgate 1983.
2. Moon J. *Reflection in learning and professional development: theory and practice.* Kogan Page 1999.