

A spotlight on reflective practice

Consider:

- ✓ In what ways is reflective practice similar or different to activities such as chatting with colleagues and families?
- ✓ Do I use reflection in my practice?

Introduction

We all reflect but in different ways and about different things. Often the reflection provides the “story of the day” that we may muse over by ourselves or tell a sympathetic ear, but ultimately the “story of the day” we want others to know about, because it has some sort of significance. The “story of the day” is usually described in a context that connects the past, present and future and is characterised by an experience, event and/or ongoing issue. More often than not we tend to focus on what we perceive did *not* work in the “story” rather than on what *did* work – let alone extracting lessons learnt.

Reflective activities need not be intrusive or complicated. Reflection encompasses many combinations of forms and mediums in the health and education fields. Journals, diaries (video, written, photo), logs, critical incidents; critical incident interviews; observation; metaphors; action learning sets; mentoring; coaching; visits to other organisations and on-line discussion groups all can facilitate reflection. Self and/or group processes can support deeper understanding and improvement of practice. Use of different reflective practices can help develop skills in self-awareness; analysis and evaluation.

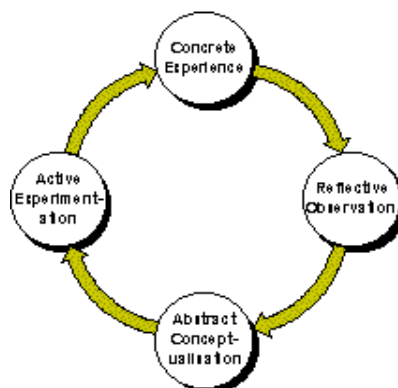
There is a plethora of literature related to reflective practice. Different thinking and models of reflective practice may help structure your own approach to reflection.

Reflective practice theories

Thinkers, such as Brookfield’s (1986) “Adult learning”, Kolb’s (1984) “Experiential learning” and Schön’s (1983, 1987) reflection, in and on action have informed reflective practice theories. Early work around developing a “cycle of learning” can be found in John Dewey’s promotion of the use of abstract concepts in everyday life and Kurt Lewin’s exploration of the relationship between person, place and situation. Two examples are presented for your consideration.

Example 1

David Kolb’s (1984) model proposed a learning cycle of “concrete experience, reflective observation, and abstract conceptualisation leading to further active experimentation”.



It is possibly the most well-known of the models (adapted by many others) with the cycle applicable to different timeframes (eg. minutes, days, weeks and months) and other “cycles of learning” within each phase.

The type of model or approach to reflective practice that best suits you will vary. Peter Honey and Alan Mumford (1992) adapted Kolb's framework and identified four different individual learning preferences or styles emerging from the cycle of learning:

Kolb:	Honey and Mumford:
Concrete experience	Activist (prefers doing and experiencing)
Reflective observation	Reflector (prefers to observe and reflect)
Abstract conceptualisation	Theorist (prefers to understand underlying reasons, concepts and relationships)
Active experimentation	Pragmatist (prefers to “have a go”, try things, see if they work)

(Atherton, 2006)

Example 2

Johns (1994) structured model of reflection asks individuals (or groups) to write a description of an experience, for example, meeting a family for the first time. Key questions are used to interrogate the experience.

Aesthetics	<ul style="list-style-type: none"> ✓ What was I trying to achieve? ✓ Why did I respond as I did? ✓ What were the consequences of that for the family, others or myself? ✓ How was this person(s) feeling? ✓ How did I know this?
Personal	<ul style="list-style-type: none"> ✓ How did I feel in this situation? ✓ What internal factors were influencing me?
Ethics	<ul style="list-style-type: none"> ✓ How did my actions match with my beliefs? ✓ What factors made me act in incongruent ways?
Empirics	<ul style="list-style-type: none"> ✓ What knowledge did or should have informed me?
Reflexivity	<ul style="list-style-type: none"> ✓ How does this connect with previous experience? ✓ Could I handle this better in similar situations? ✓ What would be the consequences of alternative action for the family, others or myself? ✓ How do I feel about the experience? ✓ Can I support others and myself better as a consequence? ✓ Has this changed my ways of knowing?

Adapted from: North Bristol NHS Trust, Nursing and Midwifery <http://www.nbt.nhs.uk/>

Consider:

- ✓ What do I need to know and be able to do as a reflective practitioner?
- ✓ What kind of reflective practitioner am I?
- ✓ How do I, or can I, use reflection in my practice?