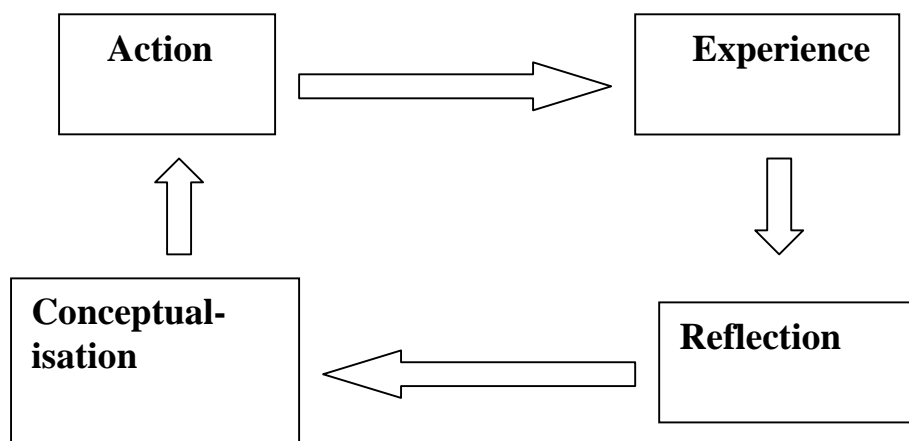


### 3. Reflective writing

**This section of the Toolkit gives guidance on how to go about recording reflections on your practice. It is intended to help you write reflective statements for different CPD purposes.**

#### Introduction

As health professionals become more focused on how to describe and measure ongoing professional development, the need for personal reflection on skills, knowledge, attitudes and personal values will increase. Personal reflection happens as part of day-to-day living. If we find ourselves in a difficult or challenging situation, we often spend time 'reflecting' mentally on what happened, what went wrong, what we could have done or said differently. Equally, we may reflect on what went well, and why. We may discuss the event with friends or family. We may (or may not) deal differently with similar challenges when they happen again. This kind of personal reflection has been translated into more formal processes often called 'reflective practice' (Kolb 1984). Kolb and others have suggested that formal reflection and discussion around practice can lead to development and improvement in practice.



#### Kolb's cycle of reflective practice

Kolb's cycle is the basis of many reflective activities and frameworks undertaken in a professional context, but there are many others (Schon, 1983; Gibbs, 1988; Johns, 1995; Bolton 2001). Nursing practice has well-established systems and processes, which encourage self reflection (Johns,

1995, 2004; Foster and Greenwood, 1998; Heath, 1998), and, in recent years, the RCSLT has encouraged therapists to write reflective statements with reference to different frameworks (RCSLT 1997, 2002, 2004).

The RCSLT defines reflective practice as ‘the means by which therapists will extend their knowledge and skills to maintain competence throughout their professional lives’ (RCSLT Competencies Project, 2002, p.2). As a professional, you will be undertaking this sort of reflection on an ongoing basis. There are many different ways of recording your reflections, and there is not a right way and a wrong way to go about it. The RCSLT is committed to encouraging therapists and support workers to keep ongoing and up to date reflections on their work, but is **not** advocating a **single approach** to this process. This section is therefore designed to help those who are new to the process of recording events and experiences in a ‘reflective’ way.

### **The purpose of reflective practice**

Reflective practice can be used for different purposes. Some examples:

- Helps identify gaps in skills and knowledge and learning needs
- Analyse complex and challenging situations
- Analyse communication and relationships with colleagues
- Examine the way we make decisions.

(Bolton, 2001)

### **Examples of reflective activities**

- Writing a ‘journal’ or diary which records thoughts and feelings on working in a new or challenging situation
- Peer review – to analyse and problem solve around a particular client you are working with
- Mentoring – ongoing conversations in which mentor and mentee ‘reflect’ on specific issues
- Writing a commentary on what you have learnt from a specific CPD activity, e.g. a short course, a SIG event, reading an article, looking at a new assessment

### **Ground rules on reflective writing**

There are a few ground rules about writing in a reflective way. **Always write about yourself and your practice**, although your writing may involve narrative about other people as well. Write in the **first person**. Write **honestly**. Write as if you were writing for yourself, not for someone else. If the reflections are going to be of value to you as learning tools, they need to be honest reflections of you and your work. This may run contrary to the way in which you write professionally in all other contexts (for example, writing in the first person may not feel ‘professional’ to you) but it is essential that you do so here.

Below are some questions you might use to structure your reflective writing.

## **A structure for reflective writing**

### **1. Think of a recent therapy session/CPD activity or event**

This can be anything – an experience with an individual client, a short course, a supervision session, a presentation to a SIG, a review of an article, writing a business plan, completing a funding application, writing an induction course, attending a case conference, designing an audit questionnaire.

### **2. Describe the session/experience**

Describe briefly what happened, what you did, who else was involved, how long it took. Write in the first person.

### **3. What did this session make you feel?**

This question may or may not be relevant. If you are describing a difficult clinical situation, then write about how you felt during and afterwards. If you are describing attending a workshop, then you may not think this question is relevant.

### **4. What would you want to change?**

Again this may or may not be relevant, but it is encouraging you to think reflectively about the experience or event. You may use it to reflect *retrospectively*, (on what you would have done differently), or you may use it to reflect *prospectively* (on what you think might change as a consequence of the event).

### **5. What has this session has taught you?**

Write down what you have learnt from this event. You may be able to make a summative list of what you have learnt, or you may want to write down more 'subjective learning' ('I was really struck by what the speaker said about X...as it related to my own situation at Y clinic.'). Both are equally important.

Here are some examples of how you might record events in this reflective framework.

The first example illustrates how you might reflect on a **formal learning activity**. If you were writing about a taught course or workshop on a clinical topic, you would write in much the same way. The important part is the reflection on *what the event has taught you*, and what you feel you have gained from attending. You might have gained specific clinical skills, learning about a new therapy technique or assessment, or you might have gained from meeting colleagues working in the same clinical area as you but in a different part of the country.

### **Example 3.1: Attendance at an in-service event**

#### **1. CPD Workshop 2 March 2006**

#### **2. Description of the workshop**

*This was a course on the requirements on CPD. It was an informal workshop, which included a 45-minute presentation followed by a workshop. About 17 therapists attended.*

#### **3. What did this workshop make you feel?**

*I was aware that RCSLT had changed the requirements for CPD, and also that the HPC is going to be asking for CPD as well. I felt quite over whelmed by the thought that I would have yet another set of forms to fill in. It was good to hear that others felt the same way about all the changes.*

#### **4. What has this session has taught you?**

*That I am not alone in feeling that this is yet another burden. I did come away with a clearer idea of what I needed to do for the RCSLT and for HPC, less daunted. I now see that the new system is about recording the outcome of my learning, rather than just listing the activities that I consider have been part of my CPD over the last year. I also think I need to be thinking ahead about what I would like to do over the coming year, and using a PDP to help me structure things. I should find it easier to keep a record of what I am doing and how I think it has influenced my practice.*

The second example focuses on an emotionally challenging situation faced by a newly qualified therapist. It illustrates how you can write about the feelings and thoughts, which can emerge from difficult clinical encounters, and how learning from these situations is an essential part of developing as professionals and improving practice.

### **Example 3.2: An experience on a hospital ward**

#### **1. Think of a recent therapy session/experience you have had with a client.**

23 September 2005 4.30pm Ward 2a

#### **2. Describe the session/experience**

*Went to see a patient with aphasia who I had seen several times before on that ward. Wasn't sure I was going to get to see her that day, as I had been very busy with lots of new referrals. When I arrived at her bedside, she was obviously distressed. I asked her what was wrong. She said something, but I could not make it out at first. Then she pointed to her bed. I saw that it was wet. I realised that she was lying in a soaking wet bed.*

*I told her that I would go and find someone who could change her bed linen for her. She just cried out 'No!' and held out her hand to me. I left her and went to find a nurse or support worker, but there was no one there. I could still hear her crying out in a loud voice; 'No!' over and over again. I didn't know what to do next so I left the ward and went back to the Department. There was no one there, everyone had gone home. So I went home, too.*

#### **3. What did this session make you feel?**

*Embarrassed, angry, helpless, panic stricken at the end, wanting to escape from the situation.*

#### **4. What would you want to change?**

*My own emotional reaction to the situation. I felt powerless to help, beyond my capacity. I didn't know if I should stay with her and try and change the sheets, or stay with her and just be there (afterwards I wondered if she was calling out 'No!' because she didn't want me to go away and leave her). I know I left before checking that out with her. I didn't wait and try and understand what she was trying to say to me in saying 'No!' I just left. I felt terrible.*

#### **5. What has this session has taught you?**

*Being on a ward can be so demanding emotionally and so unpredictable. I need to work at staying with the situation, even when it feels out of my control, not thinking of ways to escape situations I find difficult or embarrassing. I didn't see this from the patient's point of view, but from my own.*

*I probably need to talk about this with a more experienced colleague. Try and work out some way of dealing with this sort of situation.*

There are other questions you might want to add to those listed in the box above. For example:

*What would you do differently? What is not happening that you would like to happen?*

*Whose help do you need? (skills necessary to achieve this?)*

Many of the texts on reflective writing encourage practitioners to write about their emotional reactions to situations (Bolton, 2001, Johns, 1995, 2004).

Bolton suggests reflecting on;

- actions (what you did)
- ideas (what you thought about)
- feelings (what you made of it all)

Writing about these three aspects may be a good place to start if you feel uncertain about reflective writing. It may not seem appropriate to you to explore feelings in the context of reflections on CPD events. However, many of the challenges of a therapists' or an assistants' work do have an 'emotional' component to them. Competence in relation to the profession's ethical and moral framework will be influenced by personal values and belief systems and it is therefore an important part of good professional practice to reflect on these aspects of your practice.

A number of experienced therapists have said they think reflective practice is appropriate for newly qualified colleagues but not for them. They argue that they are 'reflective practitioners' anyway, and that there is no benefit to recording their reflections on paper. However, we would argue that even the most experienced therapists find themselves in novel situations, which are worth reflecting on more formally (new guidance on a familiar topic, new management proposals, clinical research, etc.). The third example shows **how you might use reflection as a learning tool when you take on a new role.**

**Example 3.3: First session supervising a 2nd year student**

**1. Student supervision session**

2 August 2005, 11.30am

**2. Describe the session/experience**

*20 minutes one to one with the student at the end of the morning to discuss the session. The student had carried out some activities with two children, and had helped us with the language group (five children). Ailsa, our assistant, was also present at the group. We used the checklist from the university to guide our conversation.*

**3. What did this session make you feel?**

*I felt quite apprehensive at first, but thinking about it afterwards I really enjoyed this session. The student seemed keen to learn during the sessions with the children but did not ask many questions about my feedback.*

**4. What would you want to change?**

*I think I talked too much and didn't give the student enough time to tell me what she thought or how she felt she had got on during the morning. I think possibly if I had done that, she would have asked more. The checklist from the university was good, but we only got through the first three statements and then I started talking about other things and we ran out of time. I think I need to be more focused next time, and not get side tracked by the things that interest me.*

**5. What has this session has taught you?**

*I enjoy this new role, but I need to work on my own 'listening skills' in this context! I need to give the student more time to say what she is thinking, and actively ask her opinion on*

*specifics, like the aim of each activity and how it relates to the overall objectives we have for the child. I felt this time I needed to be 'in control' and that made me talk too much. Next time I want to work at listening more and talking less.*

### **Keeping a reflective diary**

Any activity which involves reflecting on your practice will not only contribute to your development, but it will also count as a CPD activity, providing you keep it in a format that can be submitted and read by others. The format is really up to you.

You could keep a hand written notebook or a Word file of reflective statements in your CPD portfolio using the headings given above. Complete this on a regular basis (perhaps once every three to four weeks). The online diary also allows you to keep a reflective record after every CPD event, or indeed after any direct client or non-direct client experience which you consider has had an impact on your professional development. Like all CPD, reflective writing is only of value if it has an impact on your development as a practitioner.

### **Reflective diaries as evidence of CPD**

For HPC and RCSLT purposes, reflective diaries will count as **evidence** of CPD activity, providing they are written in legible handwriting and have a clear structure to them. The online diary system will include an entry for reflective statements on specific CPD events and activities as well. You can collate these, or cut and paste them into a year long diary in a word document if required.

### **Reflective practice and my PDP**

The learning needs, objectives and achievements which you specify in your PDP could relate directly to your reflective diary as 'evidence'. Your reflective diary could contribute to your preparations for completing your PDP. The PDP process is reflective in itself and might lead you to record a reflective diary of a specific events or experiences.

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