

# **NUR1201**

# **Improving the Patient Experience Through Reflection**

Presented by Natasha Reedy *RN; BHealth Sc (Nursing); BLM (Primary); MEd  
(Learning Innovations & Futures); PhD Candidate*

*Version 24th June 2019*

## Learning Outcomes

1. Students describe reflection.
2. Students identify the benefits of reflecting on the patient experience.
3. Students identify the nursing governance standards that underpin and guides nurses reflective practice and the reasoning behind their learning and active engagement with reflective practice.
4. Students identify the Gibbs Reflective Cycle 1988 (adapted version) to frame their patient experience reflection and reflective writing.

## Importance of Reflection

“Life can only be understood backwards; but it must be lived forwards.”

Soren Kierkegaard 1813-1855 CE

“Those who do not learn from history are bound to repeat it.”

George Santayana 1863-1952 CE

# What is Reflection?

- Reflection is the thoughtful examination of something, for example reflection on practice.
- Reflection as a way of practice, for example:
  - the reflection process is a vehicle that moves the lived experience to the consciousness (van Manen, 2017, p.812).
  - engaging in reflection on experiences, knowledge, actions, feelings, values and beliefs as a student nurse is important to identify how these shape practice.



# Benefits of Reflection

- Engaging in reflective thinking is important as it is linked to educational transformation and facilitates the transformation of practice (Dewey, 1910; Schon, 1987, 1995).
- Reflection supports the development of critical thinking.
- Critical thinking is an essential quality and attribute of a nurse.
- Reflection bridges the divide between thought, action (Allan & Driscoll, 2014), theory and practice (Reedy, 2019).

# Nursing Governances

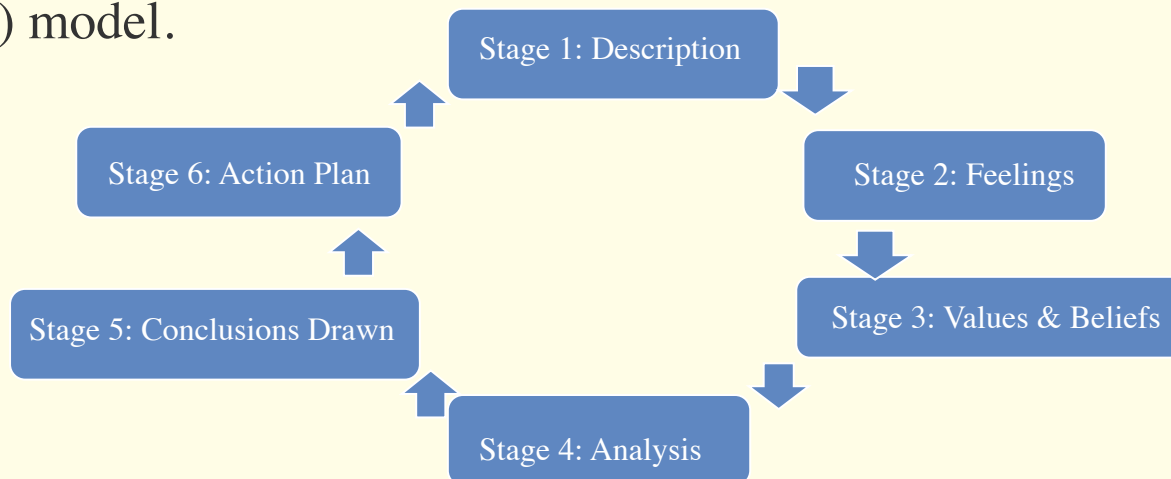
## Supporting Reflective Practice as a Nurse



- **Registered Nurse Standards for Practice** (Nursing and Midwifery Board of Australia [NMBA], 2016)
  - *Standard 1:* Thinks critically and analyses nursing practice.
  - *Standard 1.2:* Develops practice through reflection on experiences, knowledge, actions, feelings and beliefs to identify how these shape practice.
- **The ICN (International Council of Nurses) Code of Ethics for Nurses** (ICN, 2012)
- **Code of Conduct for Nurses** (NMBA, 2018)

# Gibbs Reflective Cycle

- The Gibbs Reflective Cycle (1988): is a six stage reflective model designed to facilitate the nurse's ability to examine, analyse and draw conclusions about a lived experience that will direct future strategies for improvement to practice. The following six stage reflective cycles is an adaption of Gibbs reflective (1988) model.



Adapted from: Burns, S. & Bulman, C. (2000) (Eds.), *Reflective practice in nursing: The growth of the professional practitioner* (2nd ed.) Oxford: Blackwell Scientific Publications.

# Gibbs Reflective Cycle

## Stage 1 Description

### Stage 1: Description

Examples may include:

- Exemplary practice (great role model)
- Clinical incident situation /learning in an unfamiliar setting



# Gibbs Reflective Cycle

## Stage 2: Feelings

### Stage 2: Feelings

What feelings / thoughts, did you / others experience?

- Reflect on / jot down why you (& others) felt the way you (they) did about the event.
- What values and beliefs connect to your (and others) emotions / feelings here?

## Gibbs Reflective Cycle

### Stage 3: Values & Beliefs

#### Stage 3: Values & Beliefs

Where do your values and beliefs originate from?  
(your upbringing, associated life learning, University studies, such as the ICN Codes of Ethics for Nurses value statements.

# Gibbs Reflective Cycle

## Stage 4: Analysis

### Stage 4: Analysis

What sense/meanings can  
be made of the situation

- What was my role, what was the context?
- What other experiences connect to this experience/ situation /event?
- From your university learning / theory development, life experiences, discussion with your peers / experienced RN's...what do you make of the situation?

**Example:** What theory can you connect to make better sense of the situation. For example integration of interpersonal/ communication theory, including micro active listening skills/ strategies, knowledge of aging and / or development theory, Registered Nurse competency standards, Codes of Conduct and Ethics and legal requirements.

## Gibbs Reflective Cycle

### Stage 5: Conclusions Drawn

#### Conclusions drawn

- What are the potential conclusions / new meanings that can be drawn here?
- How would you approach this in the future for quality outcomes?

## Gibbs Reflective Cycle

### Stage 6: Action Plan

#### Action Plan

- What action plan /strategies would you use if this or a similar situation arose?
- Describe this action plan that you would initiate, based on your conclusion/s?
- What theory / research supports your approach?

## Summary

1. Students described reflection.
2. Students identified the benefits of reflecting on the patient experience.
3. Students identified the nursing governance standards that underpin and guides nurses' reflective practice and the reasoning behind their learning and active engagement with reflective practice.
4. Students identified the adapted Gibbs Reflective Cycle (1988) to frame their reflective patient experience and reflective writing.

## Reference List

Allan, E. G. & Driscoll, D. L. (2014). The three-fold benefit of reflective writing: Improving program assessment, student learning, and faculty professional development. *Assessing Writing*, 21, 37-55.

Burns, S. & Bulman, C. (2000) (Eds.), *Reflective practice in nursing: The growth of the professional practitioner* (2nd ed.) Oxford: Blackwell Scientific Publications.

Dewey, J. (1910). *How we think*. London: D.C. Heath.

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

## Reference List

International Council of Nurses. (2012). *The ICN Code of Ethics for Nurses*. Geneva, Switzerland: International Council of Nurses (ICN).

Nursing and Midwifery Board of Australia. (2016). *Registered Nurse Standards for Practice*. Melbourne, Vic: Nursing and Midwifery Board of Australia.

Nursing and Midwifery Board of Australia. (2018). *Code of Professional Conduct for Nurses*. Melbourne, Vic: Nursing and Midwifery Board of Australia.

Schon, D. (1987). *Educating the reflective practitioner*. New York: Basic Books.



## Reference List

Reedy, N. E. (2019). Becoming and being a nurse: A research informed theory to guide contemporary university and industry approaches to preparing and supporting graduate nurses. (Unpublished doctoral dissertation). USQ, Toowoomba, QLD, Australia.

van Manen, M. (2017). Phenomenology in its original sense. *Qualitative Health Research*, 27(6), 810-825.