EDITORIAL ARTICLE

Reflection and reflective practice: a cornerstone value for the future of nursing

Nurses in the clinical setting often encounter difficult situations, where the most appropriate option of action is not always apparent and readily available to them. Reflection is a process which consists of elaborate analysis of what they experience and what they think they know. Through reflection, nurses and students improve their problem solving abilities, identify strengths and opportunities for additional learning, and acquire alternative ways of approaching clinical situations in the future.^{1,2} Reflection also assumes that experience from clinical practice can only become constructive if learning is to derive from it.

Dewey³ was one of the first to emphasize the importance of active nature of learning from "problematic situations". According to Burnard,⁴ every situation may be a potential learning experience but people do not necessarily learn from everything they do. Some sort of cognitive process is needed. Individuals need to notice what they do and they "need to be aware of what is happening".⁴ However, in order to reach a deeper level of understanding, critical thinking should be combined with reflection.⁵ By adopting critical thinking, you begin to enquire more deeply into the situation you are reflecting on.

Hence, reflection has long been included as an integral part of experiential learning models as it directs the learner towards more abstract concepts and generalizations.^{6,7} As nurses encounter problematic situations, reflection lends itself as an intellectual and affective activity for them to pause, explore further and learn from their experiences. This happens as reflection involves purposeful critical analysis of knowledge and experience, which will ultimately improve professional practice.⁷ Therefore, reflective practice is an essential attribute of competent nurses professionals who are committed to address "problematic" issues in clinical practice.⁸⁻¹¹

In nurse education, students need to act and to think professionally as an integral part of learning throughout courses of study, rather than learn the theory before they can engage in practice. One way to reflect on practice is through a written narrative – also known as reflective account - that can serve as a pathway to subsequent learning and competency development. A written narrative is an account of a clinical situation including a reflection on one's thoughts, actions, intentions, insights, and new perspectives learned. In order to develop and maintain competence across a practice lifetime, it is critical to learn effectively from one's experiences. Most models of reflection offer some guidance on how to analyse an incident with elements of critical thinking that would enable identification of learning needs. The state of the stat



ISSN: 2241-6005

ΤΟ ΒΗΜΑ ΤΟΥ ΑΣΚΛΗΠΙΟΥ®

Τόμος 18, Τεύχος 3 (Ιούλιος - Σεπτέμβριος 2019)

In reflection, experiential knowledge is utilized to enable professional and personal development, ¹³ as long as the episodes of reflection are purposeful, focused and questioning. ² This is where models of reflection come handy. Different models with step to step guidance can be used for the purposes of reflection, but it is a personal matter which model the student or professional uses. Models of reflection implicitly require the nurses to pause, acquire a sense of what is going on, question their actions and by taking an inquiring look deep into their thoughts, feeling and actions, to come up with an action plan for the issues at hand. Building integrated knowledge bases requires an active approach to learning that leads to understanding and linking new to existing knowledge. ¹⁴

In the last two decades, reflection has continued to be a central principle of professional practice which leads to self-aware competent professionals with integrated professional knowledge who manage and not just cope with situations.^{2,13,15,16} For example, the Nursing and Midwifery Council¹⁶ in the UK has put in place a revalidation process which aims to improve public protection and professional standards by encouraging a culture of reflection and improvement while strengthening professionalism through ongoing reflection. To evidence this, a minimum of five written reflective accounts in the three-year period since the renewal of registration are required.

However, Asselin¹⁷ discusses that there is still limited specific information for the staff nurse about reflection on practice. Reflection on practice can be difficult when first attempted and needs to be developed as a specific skill. Several authors suggest the need for an experienced mentor, guide, or facilitator to assist the nurse in the process of reflection. Certain level of skill is required in learning to reflect. Asselin suggests that staff development specialists should be in place to assist staff in reflecting on practice through a written reflective narrative. Drawing upon my experience as a newly qualified nurse working in the UK in 1996, I still remember being overwhelmed by a degree of confusion and ambiguity when, in 1994, the UK Central Council for Nursing, Midwifery and Health Visiting required that each nurse and midwife holding a registration to practice in the UK, should maintain a personal professional portfolio with pieces of "reflective accounts" and evidence of continuing professional development (CPD). This sense of confusion was experienced by other nurses as well, who were also uncertain on whether they were prepared to meet the requirements of the UKCC.

In conclusion, reflection is a process which allows the nurse to make sense of confusing situations and reach new insights which will enable the nurse to respond to clinical situations from a changed perspective. Reflection has been incorporated into undergraduate and

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postgraduate studies, and an experienced mentor, practice educator or facilitator could offer support and guidance. As reflection brings to the foreground the notion that experiential learning results from analysis of real life "problematic situations", it becomes more apparent that reflection also serves as an indisputable cornerstone value for the future of nursing.

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ISSN: 2241-6005

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