

Occupational Therapy Clinical Education Program Clinical Educator tip sheet

Reflective practice

The ability to be a reflective practitioner has been described as an essential attribute for competent health care professionals working in complex health care environments (Boud et al 1985, Moon 2001, Schon 1983). Boud (1999) recognised the need for students to learn from practice experience as opposed to learning discrete theory to be applied while in professional practice.

What is reflective practice?

Reflective practice has been described as a: *'form of mental processing—like a form of thinking—that we use to fulfil a purpose to achieve some anticipated outcome. It is applied to relatively complicated or unstructured ideas for which there is not an obvious solution and is largely based on the further processing of knowledge and understanding and possibly emotions that we already possess'* (Moon 2001, p. 2).

The quote above sets reflective practice apart from the recall and recollections which might occur unintentionally as part of daily work into an intentional, structured process which enables a clear outcome.

Types of reflection

Schon (1983) suggested that there are two forms of reflection. Reflection **in** action involves thinking and processing whilst completing the task. Reflection **on** action is completed retrospectively and is most likely to be used as a teaching and learning opportunity in practice settings. Reflection in action is a more advanced skill which can be perfected over time.

Stages of reflective practice

The literature presents a range of processes, stages, and levels to represent reflective practice. Following a literature review Atkins and Murphy (1993) identifies 3 characteristics common to the majority of authors:

1. Awareness of uncomfortable feelings and thoughts
2. Critical analysis, examination of feelings and knowledge
3. Development of a new perspective on a situation

An easy way to remember the process is using the prompts: What? So what? Now what? (Rolfe 2001).

Want to know more? The Occupational Therapy Clinical Education Program have produced a ***Clinical education guide to reflective practice*** which is available via Clinical Education Support Officers.

References

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A reflective practice cycle (adapted from Gibbs, 1988)

Description: What happened? Provide facts only, don't make any inferences or assumptions as to why things happened the way they did.

Thoughts/Feelings: What were you thinking and feeling?

Evaluation: What was good about the experience/what areas did I do well? What was not so good about the experience/what areas could I improve?

Analysis/Synthesis: What sense can you make of the situation? What have you learnt? What does it mean?

Conclusion: What else could you have done? What could you have not done?

Action plan: If it arose again what would you do? Would you do things the same or different? How will you adapt your practice in light of this new understanding (what techniques/strategies will I use to improve my performance)? How will I know I have improved (what is my measure of success)?