



Transformative Reflection for Medical Practitioners: Why and How

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Our aim as educators is to provide you with our way of seeing the importance of **Reflection as a Practice** and perhaps to prompt you to be curious to explore it further for yourself.

Fish and de Cossart, 2012

My intentions for today are therefore:

- to share with you our ideas which have been our practice for more than 10 years **WHY DO IT?**
- to offer you a framework to support written reflection **HOW TO DO IT**
- to share an example of how written reflection can encourage deeper thinking and understanding.



Definition: Reflective Practice

Reflective Practice is a special kind of practice, which involves systematic critical enquiry into one's professional work and one's relationship to it. Where reflection is focused on the detail of one piece of practice or event, it will explore clinical expertise; where it is focused on wider perspectives, it will serve to help us recognize, explore and develop our Professional Identity (the nature of our practice more generally and how we conduct ourselves within it).

Reflection as central to learning through and in practice



Key point

For all professionals, such improvement (and the struggle to understand our practice in depth and know ourselves better as a practitioner) is dedicated ultimately to enable us to better serve our patients and learners.

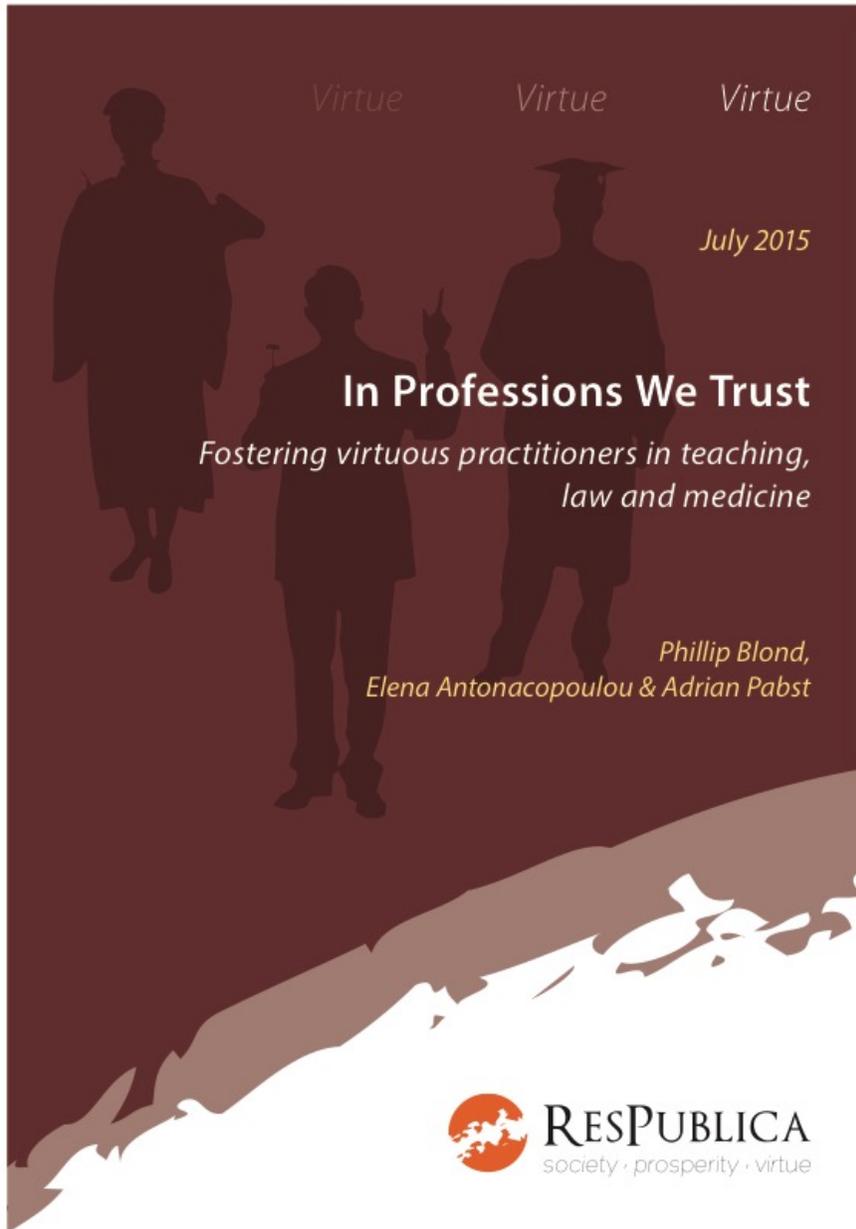
Reflection is a practice because it is about:

- seeking to uncover rigorously and understand and articulate the relationship between one's visions, values and beliefs, and one's thought, knowledge and action, in reference to specific examples of one's own practice
- having an exploratory cast of mind, that is both critical and meticulous
- processes which crucially include contextualising one's practice, viewing and investigating it critically, and exploring open-mindedly how it relates to wider understandings of that practice and the practice of one's profession
- understanding our practice better, and thus being motivated and committed to improving it, and thereby being equipped to go about such improvement.

de Cossart and Fish 2005

Reflection as a form of investigation

- It is about your own practice and yourself as a professional.
- In reference to specific examples of individual patient cases, events or processes in your own practice, reflection seeks to uncover rigorously and understand and articulate the relationship between your visions, values and beliefs, and your thinking, knowledge and action.
- It is about exploring and providing evidence of the complexity of your practice and the quality of your expertise.



The notion of a profession as something which encompasses and adds to the public good is in crisis.

Professional persons are no longer generally seen as a class of individuals superior to other workers, driven by high ideals. Most sociologists now characterise the professions as special interest groups which exploit their skills in an endeavour to achieve greater income and higher status in society. Many laymen take a similar view.

Lord Justice Jackson

When the profession fails the state steps in to regulate.

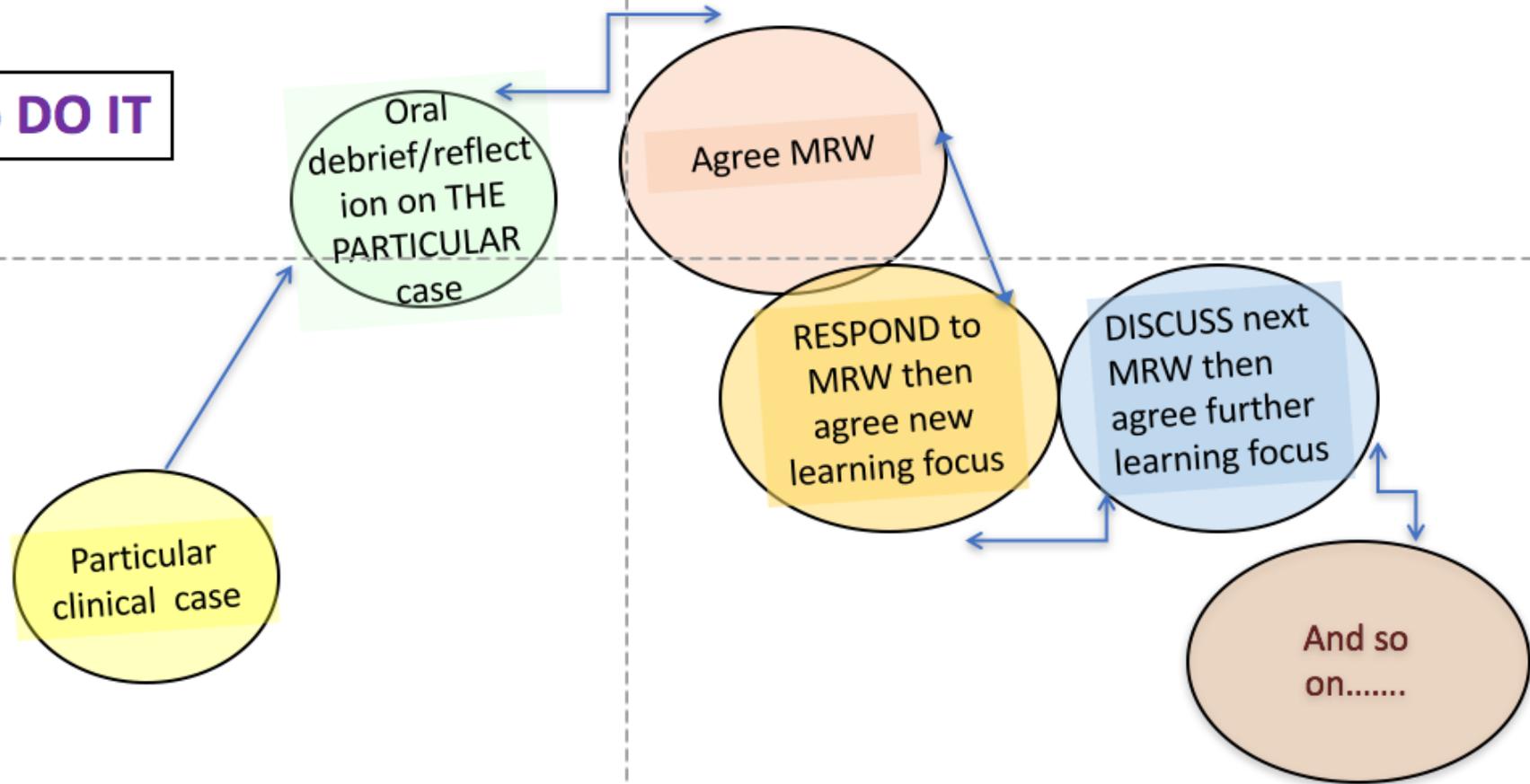
Making more out of less

Enhancing a learner's clinical experience (PMETB 2009)

Minimum

Advanced teaching

HOW to DO IT

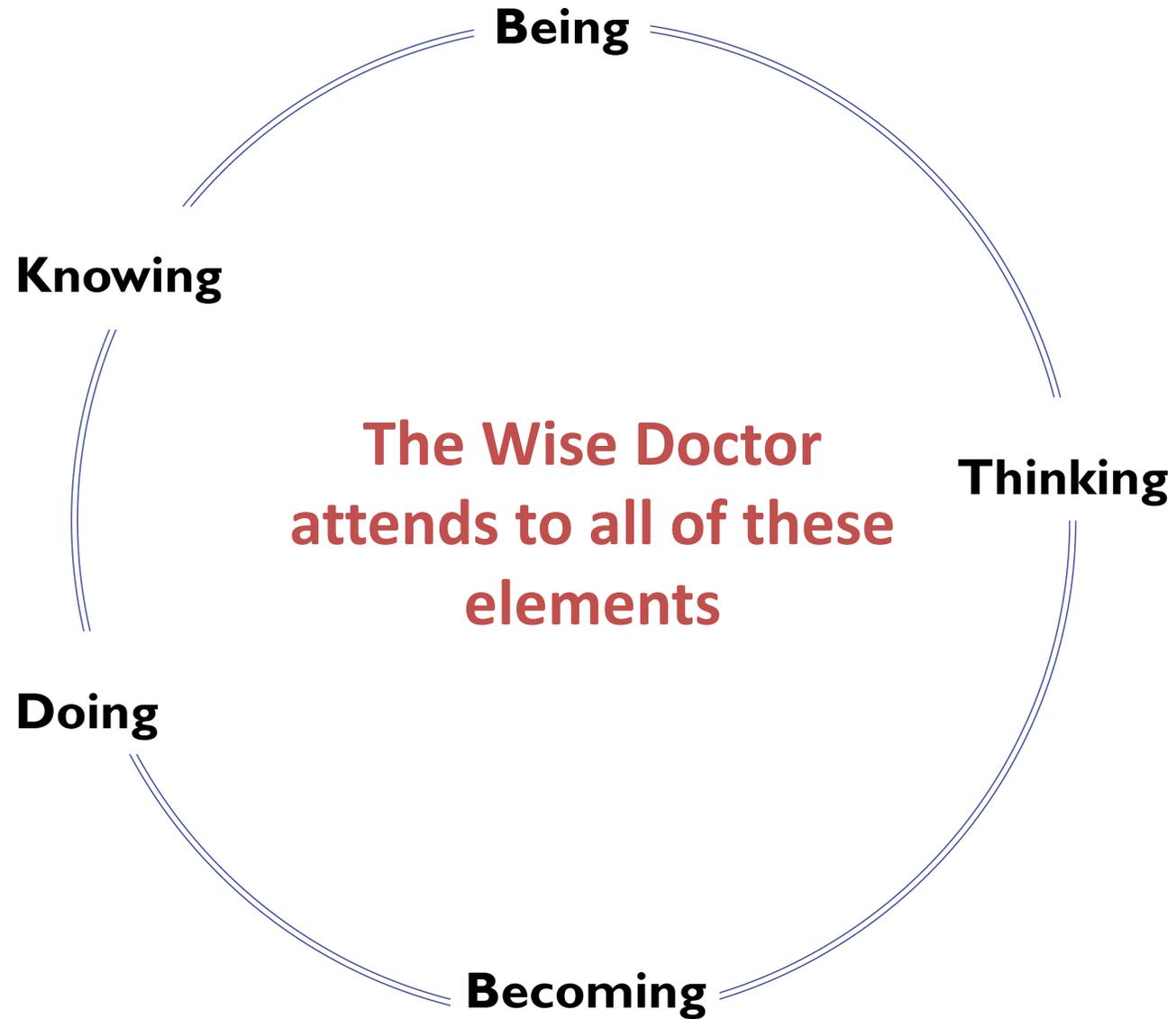


My request to Professor Fish was to tell me how to teach and assess professional judgement

Professional Judgement



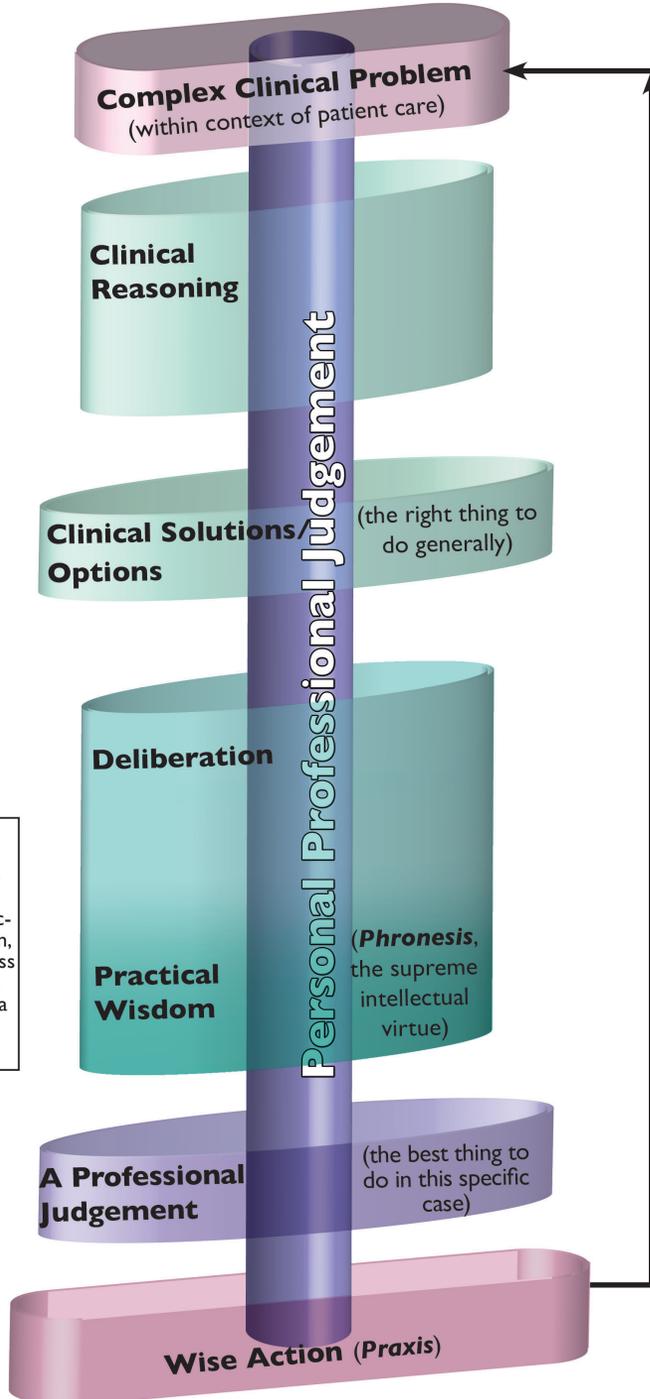
Clinical Decision Making



The Clinical Thinking Pathway

Formulaic

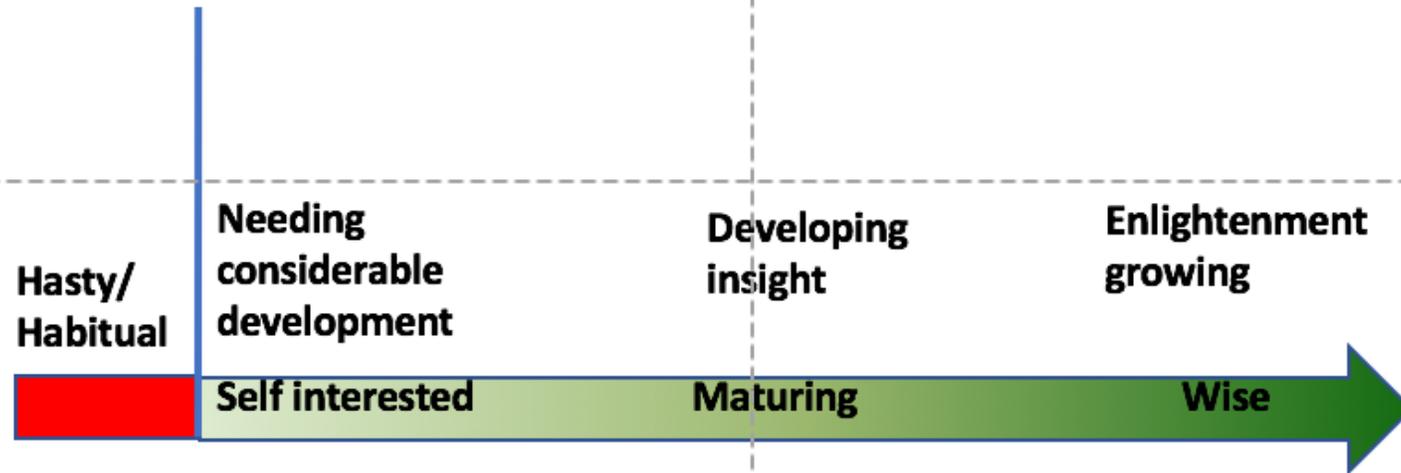
Deliberative/Discerning



Phronesis recognizes the ethical significance, understands what is required in the particular moral situation, and has a willingness and capacity to act so that these take a concrete form for this case.

Praxis is morally committed action in which, and through which our values and thinking are given practical expression.

Quality of the judgement for each particular patient



Context

Kind of person you are

Professional judgement

Knowledge

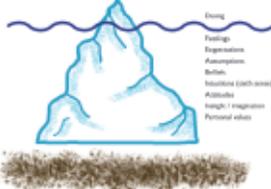
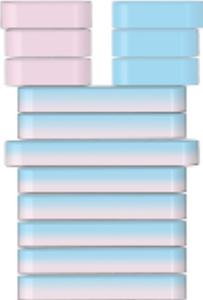
Kind of professional you are



Clinical decision-making

How you see the wider perspective

Relationships you make with patients

The Invisible	Heuristic	Reflective Focus
1. Context	 Woman under Willows	The importance of the context of the case or event and the interpretations made about it cannot be overstated.
2. Kind of person you are	 Iceberg	This is about one's personal values / assumptions / beliefs as related to the case or event.
3. Kind of professional you are	 Extended / Restricted	This is about exploring one's professionalism in relation to the case or event.
4. 14 Forms of Knowledge	 Knowledge Cards	This is the range and kinds of knowledge one brings to the case.

The Invisible	Heuristic	Reflective Focus
5. Professional Judgement	 CTP 1 Decisions to Act	This is the quality of professional judgement both personal and product one brings to a case.
6. Clinical Decision-making	 CTP 2 Thinking processes underlying the decision to act	This is the complex pathway of one's clinical reasoning and deliberation.
7. The Therapeutic Relationship	 Doctor with Patient	This shows the quality of the relationship created between the doctor and the patient.
8. Contextual awareness	 Faded out background	This involves seeing beyond the case and all that is going on in its background and the wider global context of practice.

How?

The Invisibles Process: learning to do it

Selecting the case and creating the Bullet Points



The patient case starts the process



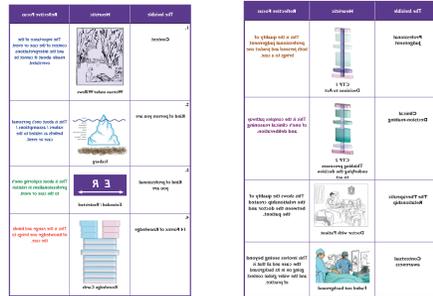
Professional conversation to ensure appropriateness of the case and agree facts of the patient's journey

- Title**
- Xcccccccccccccc
 - Vxxxxxxxxxxxxxxxx
 - Fcccc
 - Bxxxxxxxxxxxx
 - Mnnnnnnn
 - Ghhhhhhhhhhhh
 - WSsssssssssss

The Bullet Points

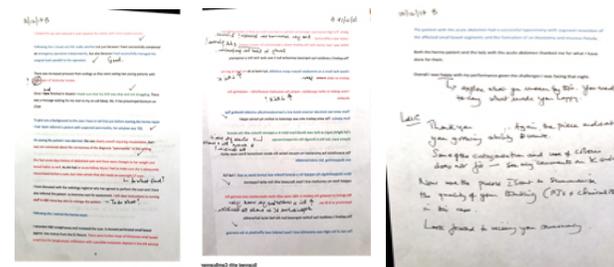
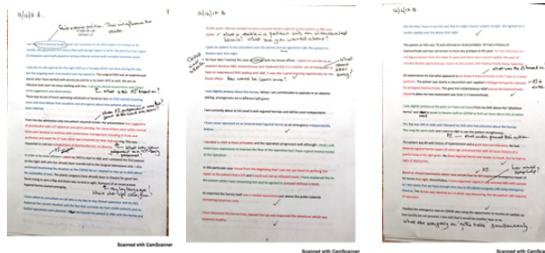
Creating the Written Narrative using Rainbow Writing and *The Invisibles*

- Title**
- Xcccccccccccccc
 - Vxxxxxxxxxxxxxxxx
 - Fcccc
 - Bxxxxxxxxxxxx
 - Mnnnnnnn
 - Ghhhhhhhhhhhh
 - WSsssssssssss



- Bullet 1** **Bullet 2** **Bullet 3**
- Xcccccccccccccc Fcccccc Vxxxxxxxxxxxx
 - BBBBBBBBBBBBBBBBBBBBBB
 - CCCCCCCCCC CCCCCCCCCC BBBBBBBBBB
 - dddddd dddddd B
 - eeeeeeeeee eeeeeeee CCCCCCCCCC
 - Fffffffeffff Fffffffeffff dddddd
 - Gggggggggg Gggggggggg eeeeeeee
 - Fffffffeffff
 - Gggggggggg

Interrogating the case for the quality of Professional Judgment and Clinical Thinking



In order to be more efficient I asked my SHO to start in A&E and I reviewed the first patient on the night shift who was already being transferred to the surgical admission Unit. I also continued monitoring the situation on the CEPOD list as I wanted to stay up to date about the availability of slots. The plastic surgeons had already been in theatre for a good two hours trying to save a flap for hours and there was no end in sight. Rumours of an incarcerated inguinal hernia started emerging.





Practical dilemmas about supervision and teaching

Della Fish, Linda de Cossart and Tim Wright



Practical dilemmas about the learner and learning

Della Fish, Linda de Cossart and Tim Wright



Practical dilemmas about assessment and evaluation

Della Fish, Linda de Cossart and Tim Wright



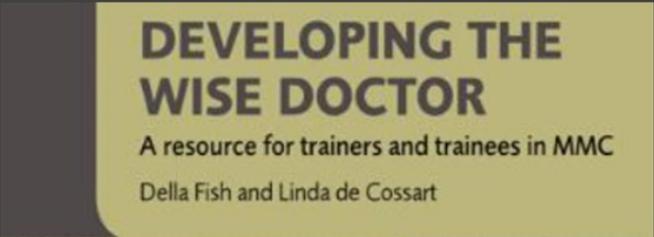
Resource Booklet

Tim Wright and Della Fish



Reflection for Medical Appraisal
exploring and developing your clinical expertise and professional identity

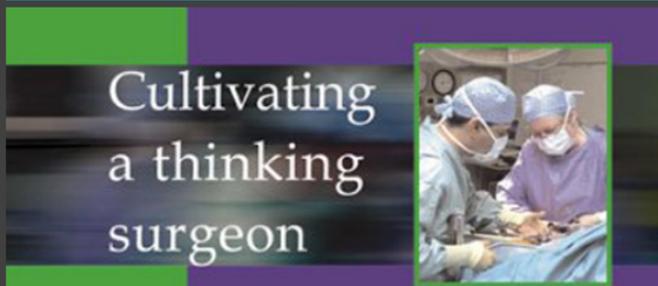
...being, doing,
knowing,
thinking and
becoming...



DEVELOPING THE WISE DOCTOR

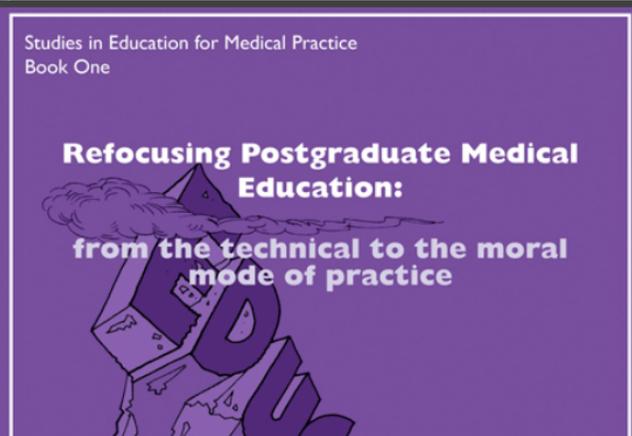
A resource for trainers and trainees in MMC

Della Fish and Linda de Cossart



Cultivating a thinking surgeon

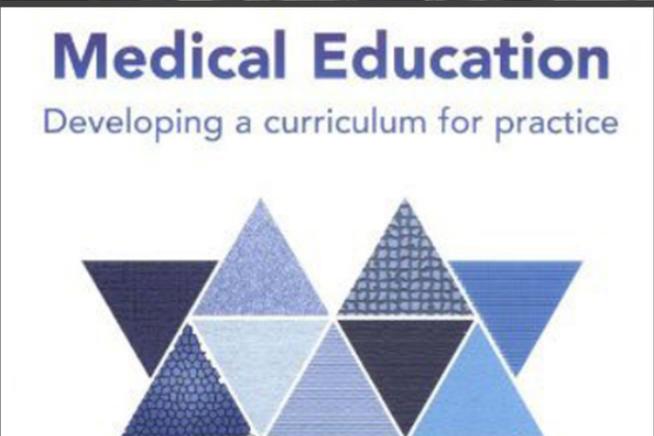
New perspectives on clinical teaching,



Studies in Education for Medical Practice
Book One

Refocusing Postgraduate Medical Education:

from the technical to the moral mode of practice



Medical Education

Developing a curriculum for practice