

Reflective Practice at a Private Sector Medical College

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ABSTRACT

Introduction: To create both professionally and actually, wellbeing professionals need to construct fundamental aptitudes in reflective practice. Facilitators in general agree that these skills should be created as portion of educational module for the wellbeing of professional students. The aims were to present reflective practice to third-year medical students and to evaluate the students' self-perceived reflective aptitudes before and after their reflective exercises.

Objective: Using a composed survey, third-year medical students' perceptions of reflective practice were accumulated before and after their clinic placement. Students moreover completed two reflective writing pieces about their clinical placements.

Material and Methods:

Study design: Quantitative, Cohort study.

Settings: Akhtar Saeed Medical College, Lahore

Duration: 1 Year i.e. 1st September 2020 to 30th August 2021.

Results: The students' reflective writing papers were distributed into one of the three categories: non-reflector, reflector and critical reflector. Content investigation of students' perceptions of reflective practice uncovered nine topics. Eight fundamental topics emerged from students' proposals for moving forward their reflective capacities.

Conclusion: It concludes that student's issues around the appraisal of reflective writing are discussed, and students' recommendations for progressing their reflective capacities are displayed.

Key words: Reflection in practice, reflective learning, quality assurance

INTRODUCTION

The undergraduate medical course at private sector medical college is a 5-year course. Students are chosen based on academic performance in their past studies, within the third year of the course, students are provided with their journey to begin with clinical arrangements. To be prepared for their professional's degree, students should cultivate their capacity to reflect on their practice. Although third-year students were casually energized to reflect on their clinical encounters. Facilitators recognize that the improvement of reflective practice abilities in students helps them in becoming more compelling proficient professionals¹. Consequently, as portion of the students' clinical arrangement and patient dealing exercises, reflective writing was presented into the third year of the course¹.

"Schon distinguished two types of reflection, 'reflection in- action' that refers to reflecting whereas doing and 'reflection on- action' refers to reflection after an activity. Concurring to Hatton and Smith, Schon's system consolidates all levels of reflection, including critical reflection

Medical students who reflect on their clinical situation experiences can discover it useful for their advancement. It has been claimed that intelligent exercises challenge assumptions and generalizations, offer assistance them to care more approximately their patients, give them more prominent self-awareness, self-confidence, and improve their communication aptitudes and give them with an enhanced awareness of the complexity of their patients'

lives; and help them to commit arrangement of benefit by giving quality care to make a difference

There is a debate in literature research whether reflective writing should be accessed at all or reflective practice should be required an activity. One reason of survey is that by reflective writing transfer a clear message to students that it is important and it is recommended that reflective practice can be viably learnt when students are in a safe and caring environment and when they are not punished with lower grades².

This aimed about to present reflective practice in third year medical students through the arrangement of a framework for reflection. It is moreover pointed to assess students' self-perceived reflective aptitudes, before and after their reflective exercises. The perceptions of both students and staff following the reflective practice exercises were also investigated³.

MATERIAL AND METHODS

Fifty (50) third-year medical students at Akhtar saeed medical college were invited to participate in the study. Forty-four students had given consent to take part in the study, and the six who did not given consent completed the reflective writing activities as part of their course but were not included in the study. Three academic staff members also participated in the study. The study was approved by the Research Ethical Committee at College and all participants gave written informed consent to participation. The venture was propelled with a workshop for staff included in the clinical placement of teaching, where they

were presented to a few hypothetical models of reflection and the students' new reflective composed activities. A workshop was too held for students at the starting of the instructing period where they were introduced to a system for reflective practice (Table 1) ^{4,5}.

This included a few questions adjusted from Plack and Greenberg's reflective questions, as well as Scho'n, and Bourner to help students with composing two pieces of reflective work around their clinical encounters. Students were moreover given with two diary articles to present them to the concept of reflective practice in medicine, and they were given with other related references. An eight-item overview based on the past studies utilizing Likert-type categorical scales (items 2–9) and two free content reactions (question 1 and 10), was utilized to inspire students' concepts and definitions of reflective practice, as well as their recognitions around the reflective process. Students were inquired to complete the study twice, once at the starting of the instructing period (September) earlier to being presented to the reflective practice system and once more at the end of the instructing period (July)⁶. Students' reactions were given a code by which their two sets of information were coordinated.

As part of the survey, students provided definition of reflective practice (item 1 – Reflective practice is defined as), one prior to their clinical placement and again towards the end of their placement⁷.

The ultimate question (item 10 – My intelligent aptitudes would be enhanced by) inquired students to propose ways to improve their reflective aptitudes. Content examination of their comments revealed eight themes (see Table 3). The data was analyzed by using SPSS 23.

Table 1: Framework of reflective practice for students [adapted from Greenwood, Scho'n, Bourner and Plack and Greenberg.

Description
Reflection before action (before going to clinical practice)
1. What do you think will happen in clinic?
2. What are you most apprehensive about?
3. What are you most comfortable with?
Reflection-in-action (at the clinic)
1. Is this what you expected to happen?
2. How might you change what the clinician or you are doing to make it more effective?
3. What was the impact of the clinician or your actions on the situation?
4. Was the outcome what you expected?
5. Why/Why not?
Reflection-on-action (after clinic)
1. What might you do differently if you were faced with that situation again?
2. What might you do next time to improve the outcome?
3. What would you do if....?
4. What plan can you put in place so that it does not happen again?
5. What might you do differently if you were faced with
Reflection on the process occurs when the student begins to explore strategies and/or processes involved in an experience; other possible strategies may also be explored.
1. How do you learn best?
2. How did you find the experience?
3. How else can you look at the experience?
4. How effective was the clinical learning experience for your learning?
5. Why do you think you reacted the way you did?
6. What made you think that (assumptions about the situation)?

Thirty eight completed the pre- and post-surveys, giving a response rate of 86%. Six students did not complete all activities and were hence excluded. Of the thirty eight students, 65% were females and 35% were males. The students' age ranged from 18 to 24 with a mean age of 20.

RESULTS

Table 2: Comparisons of Survey Results

No.	Description	Survey	Strongly Disagree	Disagree	Agree	Strongly Agree	P value
1.	I reflect on my own practice	Pre	0	1	20	17	0.56
		Post	0	1	19	18	
2.	I am encouraged to reflect on my practice	Pre	0	2	30	6	0.48
		Post	0	1	28	09	
3.	Professional skills are enhanced by reflection about practice	Pre	0	2	24	12	0.44
		Post	0	3	25	10	
4.	Reflective practice helps me to care about patients	Pre	0	1	28	09	0.49
		Post	0	0	30	08	
5.	Reflective practice helps me to become more aware of my own strengths and limitations	Pre	0	2	22	14	0.58
		Post	0	3	25	10	
6.	Reflective practice helps me to communicate better with patients	Pre	0	2	26	10	0.65
		Post	0	1	25	12	
7.	Reflective practice helps me to challenge my own assumptions	Pre	0	7	24	07	0.34
		Post	0	4	25	09	
8.	I have the skills to undertake reflective practice	Pre	0	1	23	14	0.50
		Post	0	2	26	10	

Table 3: My intelligent aptitudes would be enhanced by students

Sr. #	Description of Theme	%age
1.	Make time to regularly reflect	28
2.	More time for reflection during clinical hours	16
3.	Feedback from staff	20
4.	Discuss with colleague/s	20
5.	Daily journal writing	6
6.	More clinical experience	5
7.	Easy guidelines and clear standards to follow	4
8.	More reminders to reflect	1

DISCUSSION

Organ donation is a community service, which saves lives, Given that this was the students' to begin with intelligent movement; it was encouraging to see a few changes to their definitions by the end of the instructing period. Most students included their own feelings in their definitions, and there was a little increase in the number who particularly

included their patients' sentiments in their definitions. The students' composed reflections moreover showed that the movement had driven them to address their practice and to review the reflective handle. It is basic that staff has agreed definitions for surveying reflective writing. Indeed after moderation, there was still an error between the numbers of agreements for non-reflectors vs. reflectors. This could be because of the teachers were modern to this and held different conceptions about the two categories⁸.

This comes about of the two studies were compared with thing 8 'Reflective practice helps to challenge my claim assumptions (pre-conceived ideas)' appearing a measurably critical difference, albeit negative. This may be due to the students' need of experience reflecting on their practice and an acknowledgment that it may be more difficult than to begin with thought. At slightest, the activities prompted a few students to think almost their own pre-conceived ideas. It is trusted that students will gotten to be way better at reflecting on their practice as they pick up more involvement⁹⁻¹⁰.

The students also made a few proposals about things staff might do to energize them to reflect whereas on their clinical placements. These included giving time for them to reflect, giving more input and requiring that they examine their clinical experiences with a accomplice or colleague. In spite of the fact that it would be difficult to supply them with more time to reflect amid the clinical session, it would be conceivable to inquire them to talk about their experiences with a colleague. The exceptionally active educational modules make it difficult, although not impossible, to supply more time in case the importance of reflective practice is perceived by the relevant curriculum committees. The results of this study can be utilized to support educational programs changes to incorporate adequate time for reflective practice all through the clinical years of the course.

This study has a few confinements. As this was the primary attempt to incorporate reflective practice within the course, the staff involved was inexperienced within the process themselves, and the students were not able to examine the process with senior students. The number of students within the cohort was very small, and subsequently, encourage ponders over a few a long time might be carried out to extend the numbers participating. Be that as it may, even with these restrictions, this study has affirmed the esteem of reflective hone in undergraduate medical students^{11,12}.

CONCLUSION

The subjective comments indicate that presenting reflective activities into third-year medical students' to begin with clinical placements was beneficial. Students' reflective comments indicate that the presentation of reflective practice exercises as portion of their clinical arrangements may help them in creating these crucial skills. Moreover, students figured it out that they required to create more time for themselves to reflect, but they too needed staff to provide them with more time to reflect amid their clinical placements. The following time the reflective writing movement is utilized with third-year students, staff seems present combined student discussions about clinical arrangement encounters and frequently remind student to reflect.

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