ASSESSMENT OF REFLECTIVE PRACTICE

What is reflective practice?

Reflective practice involves individuals analysing their experiences in order to learn from them. As such, it can be an important tool in experiential learning programmes, where individuals learn from their own professional experiences in order to develop both personally and professionally.

The ability to reflect is associated with the higher order skills expected of more senior surgical trainees, who have accumulated a considerable amount of professional and personal experience and surgical insight, and who are seeking to develop in preparation for becoming consultants.

Getting surgical trainees to reflect may be difficult, but in order for experiential learning to be successful and for the experiential learning cycle to be closed, review and reflection need to be considered. Trainees cannot be 'forced' to reflect, but the conditions in which they are more likely to reflect can be created or enhanced within the training environment.

The THREAD exercise

A three-stage reflective practice exercise has been piloted over the past year by those involved with the Reconstructive Trauma Surgery Fellowships in the Queen Elizabeth Hospital in Birmingham. The three stages are as follows:

- A reflective diary – personal
- Regular discussions between the trainee and AES – shared
- A handover document (THREAD) for the next trainee - public

Feedback from one of the trainers and trainees involved in the exercise has been included with this information and it is hoped that the exercise may be adapted for future use by all of the Interface Fellowships.

The following intends to provide some information and guidance for each step of the process for both trainers and trainees.

The reflective diary

One way of introducing reflective practice to surgical trainees is by encouraging the regular use of a diary to record such items as:

- Reflection on operations undertaken observed.
- A review of clinical cases.
- Process and safety issues.
- Ethics.
- Patient experience during the course of treatment.
- Issues arising from audit.
- Interpersonal communications and workplace issues.
(Further suggestions of items to include can found in the diagrams below).

The diary should be used by the trainee to comment on events and record personal reflections in free-form text, which will then be used as the basis of regular discussions with his/her supervisor.
When undertaking reflection, trainees should look for:

- Commonalities in events
- Differences in experience
- Interrelations between incidents

_N.B. A reflective diary tool is currently available on ISCP and can be found under ‘Learning Plans’. This can be used to record text, which can then be made available to supervisors and TPDs to view. Alternatively, the development of a suitable app would be welcomed._

**The discussion**

Trainees and trainers should meet regularly to assess the diary entries from a reflective standpoint. In 3-month placements, it is recommended that a regular time is set aside on a weekly basis in order for this discussion to take place. Less frequent discussions would be appropriate in longer-term placements. It should be stressed that the trainee need only share with the trainer information they are comfortable with communicating and parts of the diary may remain personal.

It is suggested that, during the discussion, the trainee and trainer should talk about an event/topic chosen by the trainee in order to assess what the trainee has drawn out of his/her reflections. The topic discussed should be recent and it may be of benefit to highlight any similarities and differences between it and previous experience.

**Examples of points to consider include:**

_Do the reflections..._

- Capture a _personal_ experience (not third party)?
- Highlight multiple perspectives on action(s)?
- Use a narrative style?
- State and reveal opinions and emotions (I feel, not We think)?
- Illuminate the multiple perspectives and personal insights of a number of the people involved?

**The handover document**

The trainees produce a handover document for their successor, which can be then be built upon by future holders of the post as a record of individual and shared experiences. The handover document should be developed in the trainee’s own style, however, it must contain enough detail to enable successive trainees to ‘hit the ground running’ when they arrive in-post. Some examples of points to include can be found in the diagrams below.

_N.B. Patient confidentiality must be maintained according to usual practice and any patient identifiable data included in the handover must be anonymised._
HANDOVER PROJECT DIARY

Personal
What affected me most?
Leadership highlights
Most valuable team player
New learning objectives
Out of the frying pan...
Whinge of the week
If Only I.....

Shared
New Surgical Technique
Most valuable new skill
Most valuable operative training
Team working challenges
Interspecialty interactions
Case of the Week
If Only I....

Write about a specific event
• Use an autobiographical viewpoint.
• Follow a stream of consciousness (don’t write an essay).
• Compare events and contrast with different or similar experiences

Then assess the writing from a reflective standpoint (with your trainer)
Do the reflections...
• Capture a personal experience (not that of a third party)
• Highlight multiple perspectives on action(s)
• Use a narrative style
• State and reveal opinions and emotions (I feel, not We think)
• Illuminate the multiple perspectives and personal insights of a number of the people involved
• Protect patient confidentiality

Public / Handover
Critical Incidents
Nevers
Must do
Watch out for
Significant events
Make the most of...
Training moments to value
Critical conversations/communications
Training hot spot
Danger do not go there
Could do better
THREAD

Trainee

Diary

Record

Reflections

Refine

Supervisor and Trainee

New Surgical Technique

Most valuable new skill

Most valuable operative training

Team working challenges

Interspecialty interactions

Case of the Week

If Only I...

New Trainee

Handover

Relate

Critical Incidents

Nevers

Must do

Watch out for Significant events

Make the most of training moments to value critical conversations/communications training hot spot danger do not go there could do better

Personal

Shared

Public/ Handover Document
Experiences with the THREAD Reflective Practice Exercise

Trainer’s Perspective

We have been using the THREAD reflective diary exercise for the first 3 Fellow on the Reconstructive Trauma Surgery Interface Fellowship. The trainee keeps the reflective diary, using the specimen questions as a guide and a spur to facilitate reflection. The Fellow and the Educational Supervisor meet once per week for approximately 30-60mins to discuss, in confidence, the reflections during the week.

We have found it most beneficial for the fellow to read out each reflection, following which, the trainer and the trainee explore each event/observation from a variety of perspectives; e.g., clinical, interpersonal relationships, service design, communication, clinical risk, management etc. Usually there are at least a couple of different learning points to be drawn from each event.

This has proved to be not only an interesting and stimulating exercise for both participants, but I have also found it to be of educational benefit personally.

The informal feedback I have had from the trainees is that they have found it useful, and each discussion has produced a number of learning points for them. It has also given them some “guaranteed one-to-one facetime” with the Educational Supervisor which they appreciate.

One thing which is most apparent is that the degree of benefit is directly related to the commitment both participants bring to the exercise; the trainers in terms of time, and the trainee in terms of making time to adequately reflect on the learning experiences and recording the diary. The discussion is structured by the reflections of the trainee, and so the trainee both sets the learning agenda and ensures there are sufficient experiences to discuss.

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Experiences with the THREAD Reflective Practice Exercise

Trainee’s Perspective

As a Plastic Surgery trainee, I had little experience of writing a reflective diary prior to my Interface Fellowship in Reconstructive Trauma Surgery, and was fairly sceptical about its benefits. Up until this point, reflections were something I did on an ad hoc basis in the coffee room with colleagues, or at home over dinner with my wife. However, it was made clear at my initial meeting with my educational supervisor that I would be expected to keep a reflective diary and we would meet on a weekly basis to discuss my thoughts.

I was given a template, which gave me a few pointers on how to get started. This explained what kind of approach should be used to get the most out of the process. Over the course of a week, I would write about specific events, or interactions that had captured my imagination in some way. These could be positives or negatives. It really didn’t matter, as long as there may be something to learn from the experience.

I tried to keep things as up to date as possible by carrying a small notebook with me everywhere. This allowed me to jot down contact details of members of the team, details about surgical procedures, diagrams, opinions about teamwork issues or the structure of the service, and general gripes. I have kept this as my “Personal Diary”.

At the end of each week, I would update my “Shared / Assessed Diary” as a word document in preparation for meeting with my supervisor. Much of the material from my personal diary was included, but documented in a more flowing style. I would meet with my supervisor on a Monday evening after work to go over my reflections on the previous week. This time was well protected and would take place in private over a coffee. I gave us both the opportunity to reflect on events, some of which we’d both been present at and others that were not previously known to him. We used the diary as a tool to draw as many different learning points out of each reflection as we could. This would often involve me discussing an issue from one or two perspectives, and then having my supervisor help me explore any other aspects that I had not discussed or appreciated. This would often lead to discussions on how I might approach the situation differently in the future or how this would change my practice. On the odd occasion that our meetings were cancelled due to leave, I found myself disappointed at not having the opportunity to discuss my reflections until the following week.

The final part of the process was the “Public / Handover Diary”. This had been started by the fellow prior to me and included important information pertaining to the fellowship. The idea was to provide a regularly updated guide to each fellow as they start their post on ways to get the most out of their time. This included general contact details, important dos and don’ts, and suggestions as to previous highlights in training experience.

After my initial scepticism, I discovered the reflective diary to be an excellent tool for getting the most out of my fellowship. This can only be the case, if both the trainee and trainer truly engage with the process. For me, this requires the input from the trainee to keep the diary up to date and mindful of any experiences that would benefit from further reflective discussion. I found the template provided very helpful in structuring my thoughts. Equally important, however, is the trainer’s time and effort as a facilitator of high-level discussion of complex problems, and scenarios. I was fortunate in my placement, but as with all things in life, the more you put in, the more you get out.

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