Reflect, Learn, Act teaching lesson - Lesson plan for facilitator

Interactions with patients, peers and professionals on placement
Exploration of reflection for medical students

Lesson plan

- **Learning Outcomes**
- **Activity 1**
- **Discussion 1 - Reflection**
- **Achieving good medical practice: guidance for medical students**
- **Gibbs’ Reflective Cycle**
- **Activity 2**
- **Discussion 2 - Reflection improving interactions with patients, peers and professionals**
- **Completion of Learning Outcomes**

This interactive teaching lesson explores the process of reflection. Medical students can struggle with reflection and find it challenging to appreciate its full benefit for development. This lesson aims to make reflection more relatable and applicable to clinical practise. This session begins with students writing a review of a visit to a café, restaurant or place of interest, to encourage discussion about how we use reflection in our every-day lives. The students will be introduced to Gibbs’ Reflective Cycle which provides a step-by-step guide on how to thoroughly reflect. This is used to reflect on a clinical scenario whereby students discuss in pairs their personal experience when the student carried out a procedure or saw a significant event on placement within a clinical environment. Group and peer discussion are key for facilitating a successful teaching session. All students must be able to view the PowerPoint presentation.

**Materials**

- Lesson plan for facilitator
- Supporting PowerPoint
- Students require a pen and paper or laptop

**Introduction**

This teaching lesson will explore how to **Reflect, Learn and Act** and how reflection improves interaction with patients, peers and professionals on placement.

**Learning Outcomes**

- To understand the importance of reflection and how it improves interactions between patients, peers and professionals
- Be able to use tools (for example Gibbs’ Reflective Cycle) to structure reflection
- Awareness of the recommendations in the GMC’s documents: *Achieving good medical practice: guidance for medical students* and *The reflective practitioner: guidance for doctors and medical students*
Activity 1
Ask the students:
- Does anyone write reviews on websites such as “TripAdvisor”?
- Can everyone please write a short review of five sentences about a visit to a café, restaurant or place of interest?

Students should be given approximately 2 minutes to do this.

Discussion 1 - Reflection
After students have completed this activity, discuss the following bullet points:
- Get one student to read out their review
- Explain that the student has, without necessarily having been aware, used reflection. The student will have described what they have done. For example visited a restaurant, what was good about the meal, what was bad about the meal and then possibly included recommendations to improve the experience in the future.
- State that this is an example of how we use reflection in our day-to-day lives and through nurturing these skills, they can be used in our professional lives in addition to our personal lives.

Define reflection
- The Latin meaning of reflection is to ‘turn back’ or ‘bend’ which illustrates that active recall of an experience can lead to deeper comprehension which, in turn, determines how future experiences are dealt with.
- Reflection is seen to be an “essential characteristic for professional competence.” (Mann et al., 2007)

The GMC’s document Achieving good medical practice: guidance for medical students details the standards expected of a medical student. This states that students must:
- “respond constructively to verbal and written feedback from patients, lecturers, clinicians and members of the multidisciplinary team by critically reflecting on the feedback and making an action plan to improve where necessary.”
- “reflect on what you have learnt and look at ways to improve your own performance.”

Some examples of specific reflection required for a student and a doctor:
- Students use reflection in their portfolio (for example Personal Development Plans) and whilst responding to feedback and making a plan for improvement from an essay, examination or clinical procedure.
- Doctors are required to undertake an annual appraisal, revalidations and reflection can also be used for incident reports.

Reflection should be used daily for personal development.
There are multiple models that can be used to provide a structure for reflection such as Kolb’s cycle and Atkins and Murphy’s reflective model. As reflection is a personal process, students can choose which model is most effective for them, however, Gibbs’ Reflective Cycle is used in this lesson as it provides a clear step-by-step guide.

Outline every stage of the Gibb’s Reflective Cycle

Adapted from (Gibbs, 1988)

- Description- What happened?
- Feelings- What were you thinking and feeling?
- Evaluation- What was good and bad about the experience?
- Description- What sense can you make of the situation?
- Conclusion- What else could you have done?
- Action plan- If it arose again what would you do?
- Back to Description, cycle is complete

This will take approximately 6 minutes to do this.

Activity 2
Ask the students to get into pairs.
Using the Gibbs’ Reflective Cycle get the students to think of a time when they carried out a procedure or saw a significant event on placement within the clinical environment and discuss this in their pairs.
For example students can discuss the following events: venepuncture, attending a surgery, breaking bad news, managing an angry patient.
Students should be given approximately 6 minutes to do this.

Discussion 2

- Ask if everyone was able to work through all of the steps of the cycle and can appreciate that this provides an in depth understanding of the event.
- Highlighting the importance of reflection, in September 2018 the GMC published *the reflective practitioner- Guidance for doctors and medical students*. This document explains why reflection is essential and provides a “toolkit” which can be used as a framework for reflection. This “toolkit” uses the three questions “What? So what? Now what?” as a clear basis for reflection. “What?” explores your thoughts during the event you are reflecting upon, “So what?” explores the importance of the event and how you feel about it and “Now what?” directs how you are going to learn from this and how this will shape future events. Due to the personal nature of reflection you can choose the framework which works best for you.

- The GMC’s document *Achieving good medical practice: guidance for medical students* states that- “At its core, reflection is thinking about what you’ve done, what you did well and what you could do better next time. To do this, you need to think about what effect your actions have on yourself and on others, including patients and colleagues, across all aspects of your education and training.”
- This shows that reflection is not solely focussed on the individual but considers others involved.

Discussion- specific to Activity 2

Following reflection on a time when the student carried out a procedure or saw a significant event on placement within a clinical environment, ask the students within their pairs to explore reasons how reflection could improve interactions with:

- Patients
- Peers
- Professions
Discussion - General
Explore reasons for how reflection can improve interactions with:

1. Patients – e.g. improves patients safety as less mistakes are made if reflection is carried out after the event. As a result the individual and, if they share this, other health professionals now know how to avoid the mistake and have learnt through this experience.
2. Peers – e.g. reflect on your clinical practise and can share this with your peers so they can learn from your experience
3. Professionals – e.g. being able to handover exactly the information that the doctor requires following reflection on the information that you might require about the patient if you were managing their care.

Now by the end of this lesson, students should have achieved the following **Learning Outcomes**

1. To understand the importance of reflection and how it improves interactions between patients, peers and professionals
2. Be able to use tools (for example Gibbs’ Reflective Cycle) to structure reflection
3. Awareness of the recommendations in the GMC’s documents: *Achieving good medical practice: guidance for medical students* and *The reflective practitioner: guidance for doctors and medical students*

Remember to **Reflect, Learn and Act** for your own personal progression towards becoming a safe practising doctor and fulfilling the GMC outcomes in *Achieving good medical practice: guidance for medical students*.

This will take approximately 6 minutes to do this.
Overall this session will take approximately 20 minutes to carry out.

**References**

**List of Figures**
**Figure 1:** Keyboard. Homelet, Google images. [Accessed 6 September 2018]. Available at: https://homelet.co.uk/letting-agents/news/article/the-pros-and-cons-of-letting-agent-review-sites


Recommended reading