

3rd World Conference on Learning, Teaching and Educational Leadership (WCLTA-2012)

“I hate Gibb’s reflective cycle 1998” (Facebook©2009): Registered nurses’ experiences of supporting nursing students’ reflective practice in the context of student’s public commentary.

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Abstract

This paper presents findings regarding nurses’ views of their support of nursing student’s reflections during clinical placement and their assessment. Descriptive survey data were collected using the Assessment of Clinical Practice Questionnaire (McCarthy & Murphy, 2008), a 24-item validated questionnaire from 163 nurses, currently supervising undergraduate student nurses in Ireland. Findings reveal that overall nurses are reasonably well prepared for their assessor role and are happy to carry it out. However, direct supervision of student reflection is inconsistent. The results of the study show that nursing students’ reflections need to be more closely supervised by nurses in practice, and nurses require further additional training in order to more fully support reflective practice. Additionally, ways of encouraging students to engage more fully in the process need to be explored.

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Selection and peer review under responsibility of Prof. Dr. Ferhan Odabaşı

Keywords: Reflection; nursing student; student; clinical practice;

1. Introduction

Reflection is a useful and valuable tool for professional development in nursing and is used widely as a teaching and learning methodology for nursing students both in the classroom and during nursing practice (Rolfe et al., 2011). However, studies indicate superficial use of models of reflection by students, and anecdotally, apathy towards model use is common (Timmins & Dunne, 2009, Langen & Prendergast, 2007). While the student perspective on this topic has been explored, there is little emergent information on their supervisory nurses. Studies examining student’s use of reflection in the clinical area reveal that a lack of knowledge about and preparation for reflection negatively influenced their practice (O’Donovan, 2006). Furthermore they were much more likely to reflect on their practice, and use models of reflection, if they received support from a mentor or preceptor in practice (O’Donovan, 2006). Although reflection is primarily a private activity, there is increasing recognition that close supervision is required for student reflection in the educational context (Timmins et al., 2007; Langen & Prendergast, 2007). Although formalised supervision for reflection has been suggested for nursing students in the past (Johns, 2004), this notion receives little attention in the published literature on the topic.

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Gibbs (1988) model of reflection is widely used for educational purposes (Rolfe et al 2011, O'Donovan 2006). Gibbs (1988) model involves reflection across five phases of the cycle- description of the event, feelings, analysis, conclusion and action plan. In the site for this case study students are taught about this reflective cycle in their University classes. During clinical placement students write about aspects of their clinical experience, using these headings, in order to learn from practice and develop as a professional. This paper examines nurses' experiences of supporting students while using Gibb's (1988) model of reflection as a component of their clinical assessment in hospital practice.

2. Materials and methods

The original study (Howe et al., 2011) aimed to examine nurses' views of assessing nursing students' competence. A sub aim of this overarching study was to examine nurses' views of their support to students during formative use of Gibb's (1988) model of reflection as a component of their clinical assessment in practice.

2.1. Sample and setting

The study was carried out in a large teaching hospital where undergraduate students are placed for both general and children's nursing clinical education. There are approximately 780 registered nurses in the population of this site. Nurses completing questionnaires were required to have supervisory function in relation to nursing students. Five hundred questionnaires were distributed of which 163 fully completed questionnaires were returned, indicating a response rate of 33%.

2.2 Design

The study was a non-experimental quantitative research design, using a descriptive survey technique. Data were collected, with permission, by using the Assessment of Clinical Practice Questionnaire (McCarthy & Murphy, 2008) a 24-item validated questionnaire.

2.3 Ethical considerations

Permission to access the population was obtained from the Directors of Nursing and ethical approval from the Hospital Ethics Committee was obtained prior to distributing questionnaires to registered nurses.

2.4 Data collection

The research team visited the hospital site and wards site to distribute the questionnaires. Questionnaires were delivered and returned in sealed envelopes and were coded so that data could be analyzed and reported anonymously.

3. Results

Findings showed that most staff (87%, n=143) had a clear understanding of how to assess a student's clinical performance. Just over half of the respondents (51.5%) attended specific local educational preparation for their role as student supervisor (preceptor) although overall 64.4% of the cohort received some formal education in teaching and assessing of students. The length of the preparation course attended varied from half a day to two days. A web based learning course, provided by the regulatory body was also utilized by 16% of the respondents to prepare them for their role.

Table 1 outlines nurses' reported practices regarding supporting students' use of reflection in the clinical area as part of their assessment. The majority of respondents (73 %, n=119) had a clear understanding of the process of reflection-on-practice. Approximately 75% (n=121) agreed that reflection (using Gibbs model) was an organized way for a student to self-assess their practice. However, only 48% (n=79) reported ability to guide a student through the stages of the Gibbs model. Just over half the participants 51% (n=84) reported having read the students reflective piece before making a judgment on the students clinical performance.

Table 1. Respondents self reported agreement with statements relating to students' reflection using the Gibbs reflective cycle (N=163).

	Strongly Agree	Agree	Undecided Or missing data	Disagree	Strongly Disagree
Reflection-on-practice is an organized way for a student to self-assess his/her own practice	9.8% (n=16)	65% (n=105)	15% (n=25)	7% (n=12)	3% (n=5)
I have a clear understanding of the process of reflection-on-practice.	25% (n=40)	48% (n=79)	16% (n=26)	9% (n=15)	2% (n=3)
I can guide a student through the stages of the Gibbs Reflective Cycle	12% (n=20)	36% (n=59)	20% (n=33)	22% (n=36)	9% (n=15)
I always read a student's written reflections before making a judgment about his/her clinical performance	8% (n=13)	43% (n=71)	14% (n=23)	28% (n=46)	6% (n=10)
I always discuss a student's written reflections with them as I make judgments on his/her clinical performance	7% (n=12)	45% (n=74)	19% (n=32)	22% (n=36)	6% (n=9)
The content of a student's written reflections influences my assessment of a student's clinical performance	3% (n=5)	26% (n=42)	26% (n=42)	38% (n=62)	7% (n=12)

4. Discussion

It is reassuring that this study finds that nurses are secure in their assessor role, and understand the processes involved, as many studies find a lack of confidence among nurses while assessing student competence (Butler et al., 2011). It is also reassuring to note that nurses place confidence in the benefits of students using Gibbs model of reflection during their practice. However, as many staffs were not guiding the student through the stages of the Gibbs (1988) cycle, this may exacerbate previously reported superficial model use (i.e. writing to the *description* phase only) (Timmins & Dunne, 2009). It is possible that nurses may need further updating on model use in practice, and that reflection on practice should form a greater component of supervisory preparation. It is also possible that the model may need further modification for local use, as components such as analysis, evaluation and conclusion can appear to overlap thus causing confusion for both staff and students. It is of concern that nurses did not always read students reflections, nor did they use these to help inform their assessment of students. This suggests that the preceptors did not put sufficient emphasis on this part of the assessment process to inform their judgment of the student's competence, perhaps favouring their own observations. This is disappointing given the fact that contemporarily nurses are expected to be *reflective practitioners* and to develop and maintain a reflective portfolio (Timmins 2008) and ultimately learning these skills needs to take place in the real world of practice.

It is also possible, given student's anecdotally negative views about using reflection (Facebook, 2009, Langen, & Prendergast, 2007) that students are reluctant to come forward to nurses with their reflections, or they may shy away from presenting them. Indeed in one study students suggested:

a reflective piece contains my private and personal thoughts and feelings which I do not want to share with a stranger and I do not feel it is in any way appropriate to mark or grade how a person feels or reacts to a certain situation (Timmins & Dunne, 2009, p.339).

Facebook reveals quite strong views on the matter:

"This is horrendous...what sort of feelings am I supposed to have about the ways children use ICT equipment? I hate GIBBS" (Sawbridge, 2008).

"I am sure GIBB was put on this earth to make student nurses lives a living hell!!!!!" (Fulton, 2008).

“Iv'e decided the only thing a reflective cycle should be used for is commuting in the ..dark” (Dodsworth, 2010).

Johns (2004) highlighted that students need experienced preceptors to help guide another nurse in the process of reflection, and the fact that students struggle with reflection, and anecdotally hold negative views seems to indicate that formal support in the clinical area needs to be incorporated into current assessment processes. Indeed formal support models for supervision of reflection have proven successful (Ekebergh, 2011; Horan & Monahan, 2008).

5. Conclusion

Findings suggest that these nurse supervisors may not be placing enough emphasis on the student's reflective work, even though, in this context, it is regarded as a part component of the student's assessment. Furthermore student's apparent skepticism about reflection or concern about privacy may prevent them from sharing this important component of their professional development. Further research into both the students and preceptor's experiences of using reflection, particularly from a qualitative perspective, would be of value to explore the barriers more fully. Observational studies may be useful to indentify the reflective practice in the clinical area and observe how it is taught. Further studies are also required to investigate the benefits of supervised reflection in the clinical area. It is also recommended that the importance of the students' reflections in practice is highlighted during nurses' supervisory preparation programmes, and that further educational support is provided to supervisory staff on the subject of reflection. It is important for both the nursing profession and nursing educators to agree on the optimal procedures for reflection by students in and on practice and consideration may need to be given as to whether or not reflection should form part of the assessment process.

Acknowledgements

The team would like to thank those staff who gave so willingly of their time.

References

- Butler, M.P., Cassidy, I., Quillinan, B., Fahy, A., Bradshaw, C., Tuohy, D., O'Connor, M., McNamara, M., Egan, G., and Tierney, C. (2011). Competency assessment methods-tools and process: A survey of nurse preceptors in Ireland. *Nurse Education in Practice*, 11(5), 298-303.
- Gibbs, G. (1988). *Learning by doing: A guide to teaching learning methods*. Oxford: Oxford Brookes University.
- Dodsworth, K. (2010). *I hate Gibbs reflective cycle*. In Facebook. Retrieved September 17, 2012 from <http://www.facebook.com/group.php?v=wall&gid=20515884041>
- Fulton, K. (2008). *I hate Gibbs reflective cycle*. In Facebook. Retrieved 17th, 2012 from <http://www.facebook.com/group.php?v=wall&gid=20515884041>
- Howe, R., Dennehy, C. & Murphy, M. (2011). *Report on the research study exploring the competency document used for the clinical assessment of undergraduate student nurses*. Unpublished Report prepared for Adelaide Meath National Children's Hospital, Tallaght (AMNCH) Dublin, Ireland.
- Johns, C. (2004). *Becoming a reflective practitioner*. Oxford: Blackwell Publishing Ltd..
- Ekebergh, M. (2011). A learning model for nursing students during clinical studies. *Nurse Education in Practice*, 11(6), 384-389.
- Horan, P., & Monahan, M. (June 2008). *Exploring nursing academics and nurse practitioners experiences of a partnership approach to facilitating the development of reflective processing skills in undergraduate nurse education using an electronic data collection technique* [Powerpoint Slides]. Paper presented at the annual NETNEP 2008 Conference - 2nd International Nurse Education Conference Research and Innovation in International Nurse Education, Dublin.
- Langen, D., & Prendergast, M. (September 2007). *Reflection and reflective writing as a component of the assessment of competence for undergraduate nursing courses- A student perspective* [Powerpoint Slides]. Paper presented at 18th International Participative Conference for Education in Health Care. Fitzwilliam College, Cambridge, UK.
- McCarthy, B., & Murphy, S. (2008). Assessing undergraduate nursing students in clinical practice: do preceptors use assessment strategies? *Nurse Education Today*, 28(3), 301-313.
- O'Donovan, M. (2006). Reflecting during clinical placement – Discovering factors that influence pre-registration psychiatric nursing students. *Nurse Education in Practice*, 6(3), 134-140.
- Rolfe, G., Freshwater, D. and Jasper, M. (2011). *Critical reflection in practice: Generating knowledge for care*. Basingstoke: Palgrave.

- Sawbridge, H.E. (2008). *I hate Gibbs reflective cycle*. In Facebook. Retrieved September 17, 2012 from <http://www.facebook.com/group.php?v=wall&gid=20515884041> accessed
- Timmins, F., Lipp, A., & Monahan, M. (September 2007). *Lipp* Service: Developing critical reflection and reflexivity in nursing students: An exploration of three models of supervision* [Powerpoint slides]. Paper presented at NET 2007 18th International Participative Conference for Education in Health Care, Fitzwilliam College, Cambridge, UK
- Timmins, F. (2008). *Making sense of portfolios: An introduction to portfolio use for nursing students*. UK: Open University Press.
- Timmins, F., & Dunne, P. (2009). An exploration of the current use and benefit of nursing student portfolios. *Nurse Education Today*, 29, 330–341.