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1 Introduction

2 Today's Registered Veterinary Nurses (RVNs) are expected to function in dynamic, complex, and ever
3 changing environments. As professionals, they are required to refresh and update their skills and
4 knowledge to maintain their competence. They must also be able to solve a myriad of patient, client
5 and practice problems in order to deliver high standards of care (Royal College of Veterinary
6 Surgeons, 2018). An individual RVNs professional and tacit knowledge may not always be adequate
7 to allow them to handle the complex, uncertain, and unique situations within a practice
8 environment. An important element of practice is therefore being able to 'think on one's feet' or to
9 'learn by doing'. Adult learners have been shown to favour this type of experiential learning, and it
10 has been described that this type of learning can be supported and improved through the use of
11 reflection (Kolb, 2015).

12 Reflection is defined as "*serious thought or consideration*" (Oxford University Press, 2018). It is a
13 technique that can be used to evaluate practice in order to develop an understanding of what it is to
14 be a veterinary nurse (VN), and to develop critically thoughtful approaches to providing patient care
15 in sometimes challenging environments (Pierson, 1998). This literature review serves to provide VNs
16 with the knowledge to understand what reflection is and why it is important for them to develop
17 this skill. Methods of introducing reflection into one's practice will be discussed.

18 A brief history of some theories of reflective practice

19 The concept of reflection has been around for a very long time, being described by the philosopher
20 Aristotle as far back as the 300's BC (Kraut, 2012). The contemporary discussion about reflection and
21 reflective practice (RP) has largely been derived from the seminal works of the educational
22 philosophers John Dewey and Donald Schön. Dewey (1910, p.9) described reflective practice as

23 *"the active, persistent and careful consideration of any belief or supposed form of knowledge*
24 *in the light of the grounds that support it and the further conclusions to which it tends"*.

25 He believed one must have a questioning approach and consider why things are the way they are,
26 and how else they might be. The later work by Schön (1983) described the reflective practitioner as
27 having the capacity to reflect on their actions so as to engage in a process of continuous learning.
28 Schön (1983, p.54) described professional practice as dichotomous with one end being the "*high,*
29 *hard ground*" where practitioners make use of research-based theory and scientific technique, and
30 the other end being the "*swampy lowland*" where practitioners are faced with confusing situations
31 and "*messy*" problems which are difficult to solve with technical know-how alone. Schön (1983,
32 1987) believed this division could be bridged through the use of RP and described 2 different
33 elements to this concept: reflection-in-action and reflection-on-action.

34 **Reflection-in-action** is the quick thinking and reaction that occurs whilst you are doing, and is
35 essentially 'shop-floor' problem solving. Importantly it does not interrupt the action you are taking
36 or interfere with the flow of work. Reflection-in-action is more likely to occur when there is an
37 element of surprise, when you are nervous about performing a task, or doing something new. Schön
38 (1983, p.70) theorised that

39 *“...when intuitive, spontaneous performance yields nothing more than the results expected*
40 *for it, then we tend not to think about it. But when intuitive performance leads to surprises,*
41 *pleasing and promising or unwanted, we may respond by reflecting-in-action.”*

42 Reflection-in-action allows you to see what is happening as it is happening, to consider why it is
43 happening, and to respond by doing something differently (Fig. 1). This type of reflection occurs
44 often within the workplace, but is usually not recognised as such by the individual. It is therefore
45 rarely formalised or recorded.

46 **Reflection-on-action** is to reflect about the practice that you have undertaken, usually after the
47 event, to turn that information into new knowledge and learning (Fig. 2). Schön (1987, p.26) defined
48 it as

49 *“...thinking back on what we have done in order to discover how our knowing in action may*
50 *have contributed to an unexpected outcome. We may do so after the fact, in tranquillity, or*
51 *we may pause in the midst of action (stop and think).”*

52 During this process you ask yourself questions to explore the event more deeply and your responses
53 will depend on your existing level of knowledge and experience, and to some extent your values and
54 beliefs. This type of reflection is much more purposeful and structured and may be easily recorded
55 informally or formally.

56 Greenwood (1993) felt Schön’s model of RP was flawed as it failed to recognise the importance of
57 reflection-before-action. This is the process of thinking about what and how you are intending to do
58 something, before you actually do it (Fig. 3). Greenwood (1993) believed this to be an important
59 time for reflection in order to integrate previous experiences and knowledge into your current
60 practice, and that failing to reflect before action could lead to error, or to not achieving the desired
61 outcomes. Reflection-before-action also provides an important opportunity for feedback to be
62 obtained from colleagues and clients. This feedback may result in a change or improvement to the
63 intended process, and for an appropriate action plan to be created. It can also facilitate learning
64 within the practice environment (Greenwood, 1998). This type of reflection is more likely to occur in
65 anticipation of a challenging situation (Mann et al, 2009).

66 **The benefits of reflective practice**

67 RP is fundamentally a learning tool that can help professionals to integrate theory with practice
68 (Champion, 1991; Hatlevik, 2011). It can also influence professional decision-making and can help
69 one to develop emotional intelligence (Butler, 2016; O’Donovan, 2006). Boud et al (1985) proposed
70 that the outcome of reflection is both emotional and cognitive changes, which have the potential to
71 lead to behavioural changes. If behavioural changes arise then these can actively enable one to
72 modify their current practice for the better. Because of these potential benefits to practice, RP has
73 attracted considerable attention within nursing education over the last three decades. A strong
74 proponent of RP within nursing is Christopher Johns (1995, p.226) who defines that the purpose of
75 RP

76 *“...is to enable the practitioner to access, understand and learn through, his or her lived*
77 *experiences and, as a consequence, to take congruent action towards developing increasing*
78 *effectiveness within the context of what is understood by desirable practice.”*

79 It is clear from his definition that Johns believes that reflection can help nurses to examine events in
80 order to understand the meaning of practice with a view to developing desirable or best practice.

81 It has been suggested that when practitioners follow routine or habit their actual practice conflicts
82 with their espoused theories of best practice and they operate at a less than effective level (Argyris
83 and Schön, 1974). The more repetitive and routine practice becomes, the more likely it is that
84 practitioners will miss opportunities to consider what they are doing and why, and may be drawn
85 into patterns of error that can be difficult to correct (Schön, 1983; Taylor, 2010). RP can help
86 practitioners to identify the habits they fall into in the workplace which get them through their day,
87 it can help them to improve the quality of care they deliver, and can stimulate personal and
88 professional growth (Jasper, 1999; Kim, 1999; Taylor, 2010).

89 **The skills of effective reflective practice**

90 RP is especially useful in helping to facilitate professional motivation through learning from
91 experience and critically examining oneself in order to perform better within practice (Bulman et al,
92 2012). Activities to promote reflection are commonly included in student veterinary nurse (SVN)
93 education, and Clarke (2010) proposed that this is essential in order for SVNs to develop professional
94 competence. However, there is currently no formal requirement for RVNs to reflect on their
95 practice, as there is within other healthcare disciplines. The Royal College of Veterinary Surgeons
96 (RCVS) has proposed changes to their continuing professional development (CPD) structure to
97 include evidencing learning through reflection (RCVS, 2016). There is clearly perceived importance of
98 RP in the veterinary profession, and this highlights the need for the skills of RP to be learnt by RVNs.
99 It has been recognised however that the use of RP as a learning tool in practice is a complex activity
100 that requires conscious development by both pre- and post-qualifying professionals over time
101 (Atkins and Schutz, 2013).

102 Atkins & Murphy (1993) identified specific underlying skills that need to be developed in order to
103 successfully undertake reflection-on-action. These include self-awareness, description, critical
104 analysis, synthesis, and evaluation.

- 105 1. **Self-awareness** is the cornerstone skill. By being self-aware we are able to see ourselves
106 openly and honestly in order to examine how we behaved, how we were influenced by an
107 event, and how we may in turn have influenced the event (Atkins & Schutz, 2013).
- 108 2. **Description** is where one accurately recollects the salient features of an event in order to
109 give a detailed account (Boud et al, 1985). Descriptions should be comprehensive yet
110 concise, and reconstruct the events so that someone who was not present would
111 understand the situation from your perspective (Atkins & Schutz, 2013).
- 112 3. **Critical analysis** is a key skill for effective RP and is a process where the event is broken
113 down into its constituent parts in order to examine each component in detail to better
114 understand how they relate to and influence each other. Critical analysis requires one to
115 identify existing knowledge relevant to the event, identify and challenge any assumptions
116 made, and to explore alternative courses of action. Despite the negative connotation of the
117 word 'critical', this is not a negative process. Instead it is a process of critique which is
118 positive and constructive, and can help an individual to identify opportunities for change and
119 improvement in their practice (Atkins & Schutz, 2013). Critical analysis requires searching
120 for and appraising the scientific literature which relates to the key elements of the event. To

121 do this successfully RVNs require skills in identifying sources of reliable evidence and
122 undertaking critique of the literature. These skills have been shown to be underdeveloped in
123 nurses, and the author would argue that a similar situation is currently true for RVNs
124 (Melnyk et al, 2004; Pravikoff et al, 2005).

- 125 4. **Synthesis** allows one to achieve a satisfactory outcome from reflection as new knowledge,
126 feelings or attitudes are integrated with the old (Atkins & Schutz, 2013). This skill requires
127 individuals to undertake original thinking to create change and to develop new perspective
128 or fresh insight. It is the step where real learning occurs as one synthesises new knowledge
129 to better inform future practice.
- 130 5. **Evaluation** is the ability to look back in order to make a judgement about the value of
131 something (Bloom et al, 1956). Evaluation may be conducted externally within a predefined
132 set of criteria or standards, or internally as a personal process of self-assessment. Evaluation
133 allows one to find discrepancies between what was done and what was needed, and allows
134 a future-oriented plan of action or improvements to be made (Atkins & Schutz, 2013).

135 **The process of reflection**

136 It has been suggested by Clarke et al (1996) that nurses may choose to reflect upon the technical or
137 practical aspects of practice, the wider context of practice, and the knowledge of self (including
138 personal qualities, experiences and attributes), though any event in practice can be a source of
139 reflection and learning. Although it is much more common to explore negative events, as they often
140 have a bigger impact, it is also important to remember to explore positive events to identify why
141 they went well and what you would want to repeat in future.

142 Regardless of what one chooses to reflect upon, there are three common steps in the process of RP
143 (Atkins & Murphy, 1993):

- 144 • **Step 1:** An awareness of uncomfortable thoughts or feelings, surprise, or a sense of inner
145 discomfort around an event (Boyd & Fales, 1983; Schön, 1983).
- 146 • **Step 2:** A constructive critical analysis of the event which examines knowledge and feelings.
147 It is important to use positive feelings and remove negative or obstructive feelings during
148 this step (Boud et al, 1985).
- 149 • **Step 3:** Where the individual develops a new perspective on the situation and undertakes
150 learning.

151 These common steps have been utilised in many models of reflection. Models encourage a
152 structured approach to the act of reflection and help guide the individual through the process. They
153 can be beneficial as they help one achieve a deeper level of exploration and understanding of the
154 event, to see the event from different perspectives, and to recognise the wider organisational or
155 external influences (Ashby, 2006; Taylor, 2010). Some models help you to explore the event through
156 the use of broad questions e.g. Gibbs (1988) reflective cycle (Fig. 4), and others provide a
157 comprehensive framework of cue questions, e.g. Johns (1995) model of structured reflection (Fig. 5).
158 Which model an individual uses is ultimately a personal choice and may be dictated by preference,
159 by the level of experience with performing RP, or by the complexity of the event being explored.
160 Models are only there to provide guidance however, and are not meant to be the 'rules' of

161 reflection. As such, RVNs should be encouraged to develop a flexible approach to the use of a model
162 of reflection and utilise the parts that are most useful (Heath, 1998).

163 **Methods of reflection**

164 There are many ways that one can utilise RP within VN, both individually and in a group context.
165 Informal and formalized opportunities for reflection occur regularly within practice, often without
166 being recognised as such (Table 1).

167 Personal reflection can be successfully performed through keeping a journal, which is a collection of
168 handwritten or electronic notes built up over time recording one's thoughts, observations and
169 experiences. It is personal to you and can enhance learning through the action of writing and
170 critically exploring your experiences (Gillis, 2001). To make the best use of your journal, each entry
171 should end with conclusions, things learnt, and an action plan of things to implement (Gillis, 2001).
172 Table 2 describes some examples of what might be included in an action plan.

173 A journal can be kept using a two-phase process (Ashby, 2006):

- 174 1. Soon after the event, record a description of what happened and why, and the emotions you
175 felt. Key issues to be explored later are briefly outlined at this time (Heath, 2009).
- 176 2. At a more appropriate point when there is more time, the event can be explored deeply and
177 critically. This is often best achieved by using a model of reflection to guide you through the
178 process. Without a model there is a risk of only focussing on one aspect of the event, and of
179 the reflection being limited (Ashby, 2006).

180 Group reflection activities can help increase learning as participants are able to draw on the
181 experiences of others. Group reflection can also allow contradictory perspectives to be offered, can
182 help to validate one's practice through receiving reassuring feedback from others, and can help
183 reduce the sense of isolation within practice (Platzer, Blake and Ashford, 2000).

184

185 **The challenges to RP**

186 Although widely reported to be a beneficial practice, critical reflection can cause practitioners to
187 start questioning long-established belief systems, which can create strong feelings within the
188 individual and make them less satisfied with the way practice is carried out (Driscoll & Teh, 2001).
189 The novice practitioner may end up feeling negative or overly critical about their performance, or
190 experience a range of negative emotions (Driscoll & Teh, 2001). RP can also present many personal
191 challenges, and Bolton (2014) described the different blocks and limitations that can occur:

- 192 • Inexperience at looking inwards or imagining another's experience.
- 193 • Not knowing how to create a critical reflective narrative.
- 194 • Fear of incompetence or ridicule.
- 195 • Too painful and revealing.
- 196 • Tiredness, overwork, lack of time, or too many other things to do.
- 197 • Lack of motivation.

198 Different strategies can be employed to overcome these negative feelings and challenges. A mentor,
199 critical friend, or group who participates in guided reflection can be very beneficial to provide
200 support and encouragement, to maximise learning in the novice practitioner, and to provide
201 constructive feedback (Platzer, Blake and Ashford, 2000). It is also important that the environment in
202 which the reflection is conducted is inclusive, supportive, non-judgemental, and confidential
203 (Platzer, Blake and Ashford, 2000).

204 **Conclusion**

205 Reflective practice may help RVNs tackle the complex and difficult aspects of practice, to identify
206 facets of themselves that can be improved, and understand more completely the organisations they
207 work in (Bulman et al, 2012). However, despite the published benefits of RP, the author could find
208 no published qualitative or quantitative research describing its use in the field of veterinary nursing.
209 There have been many barriers and perceived constraints to RP identified in other professions
210 including a lack of skills or knowledge of the process, limited time within the working day, lack of
211 power to implement any changes identified, and a fear of judgement if reflections are to be shared
212 with others (Driscoll & Teh, 2001; Heath, 1998; Pierson, 1998). The author would propose that
213 similar barriers currently exist within veterinary practice. There is a need to legitimize reflection and
214 for organisations to regard it as an important and intentional activity, rather than something that is
215 done in an ad-hoc way. Managers need to understand that reflective activities can and should be
216 part of routine clinical practice and allot appropriate resources to help support its action (Driscoll &
217 Teh, 2001). The proposed CPD changes by the RCVS may help to encourage its uptake and encourage
218 RVNs to utilise RP for professional development. However, for this change to be fully embraced, the
219 concept of RP and the benefits to practice that it can provide need to be fully understood by
220 everyone within veterinary practice. For this to occur opportunities to increase knowledge and skills
221 in RP need to be made available. This could include inclusion within pre-registration and post-
222 registration education, publications within the veterinary literature, continuing professional
223 development activities, and research to evidence the benefits to VN practice. The biggest barrier to
224 RP is undoubtedly oneself, and if an individual has a positive attitude towards the process then it will
225 be successful (Caldwell & Grobbel, 2013).

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