Example of Reflective Essay on Learning Experience

This essay is a reflective account on the progress I have made during the on-going nursing training programme I have embarked upon. The areas I intend to cover include the usefulness of assessment feedback for facilitating growth and for understanding the areas that need to be improved in my learning, the extent of the development of key transferable skills, an overview of meetings with my personal development tutor and issues related to my personal learning. Finally, areas for future development will be identified with a view on how to address them, all of which will go towards improving my personal and indeed professional development.

Individuals may spend a lot of time thinking over experiences they have had and things they have to do. However, within nursing it is believed that in order to progress, these thoughts should be turned into guided reflection enabling one to improve them in the future. The essential purpose of reflective practice is to enable the practitioner to access, understand and learn through, his or her lived experiences and, as a consequence, to take ‘congruent action towards developing increasing effectiveness within the context of what is understood as desirable practice’ (Johns 2000, p3).

As a mature student with experience of an access course I felt I had developed self-discipline, which is important for effective learning. Throughout this course I have gradually developed strength and confidence in all the transferable skills, such as communication, effective learning, and teamwork and information technology. These skills have been developed through both the coursework and the placement.. I felt confident about my verbal communication whereas I was concerned about my literacy skills which are impeded by my dyslexia. In my case dyslexia results in poor spelling, grammatical errors and difficulties with organising work. It should not affect my understanding of my subject, although it can take me time to absorb what I read.

The course has helped me to recognize the importance of all aspects of communication, both verbal and non-verbal, such as body language, touch, facial expression and eye contact. It has shown me how crucial non-verbal communication can be in expressing meaning. During my placement visit at the hospital I put into practice my communication skills which enabled me to interact with people from different cultures and backgrounds. For example, while I was working in the ward with a staff nurse, I observed through facial expression that a patient was in pain. I went over to ask her what the problem was. She told me she was in pain. I immediately reported it to the nurse in charge. After this, I made her comfortable and continued to communicate with the patients. From this scenario I have learnt that good communication skills are important in delivering health care services. Good therapeutic communication can help to relieve patient pain and anxiety.

I believe the best way of learning is to become an autonomous learner which in itself requires good communication skills and discipline. During this course, I have developed good time management skills, especially for meeting deadlines in submission of assignments and for combining studying with domestic demands. Initially, accessing the internet and using the
electronic searching method was a bit difficult but it became clearer with the help of the IT workshop. It also helped greatly when finding articles needed for annotated bibliography assignment. Having to do presentations is another effective way of learning because it provides an opportunity to research the topic and then teach others. I prepared a research presentation and I knew little about the components that would make the type of presentation successful. I experienced some nervousness because I find it difficult to face an audience and deliver a speech but with the help of the tutor’s feedback I am beginning to work on my fears and confidence by becoming involved in group discussion.

My IT skills have improved quite considerably since the beginning of this module. I knew how to use e-mail, Microsoft word and various ways to search for information. The IT sessions have contributed greatly, so much, now have the confidence to use the internet regularly. I have also learnt how to use database and PowerPoint I will continue to build on what I have learnt and improve on it because the technology is updating frequently and it is necessary to keep up with this trend.

Carrying out a literature search during an assignment, taught me how to use the search engines using keywords in order to find relevant articles. Carrying out a literature review has given me an insight into what research involves the ways in which research can be carried out and the different methodology that is used. I now understand that academic articles are peer reviewed before being published in reputable journals.

Assessment feedback is an important part of learning. It gives the student an awareness of what they can do and what needs to be improved, in both written and practical work Whilst evaluating my feedback sheet on the role and function of health related organization, Module IPH1625, I felt that the mark received was above my expectations which left me feeling positive and motivated to continue the good steady progress. I found the research section of the essay quite challenging and spent many hours preparing my essay. Fortunately the organization that I had picked was of great interest to me as British heart foundation was an organization that dealt and helped people from all walks of life. The fact that this topic was of interest to me made it much easier for me to discuss and write about it with passion, and I could really express how I felt about the issues involved. Through the feedback received, I realized that I had addressed all areas of the marking criteria to an effective level. Having not previously shown my work to my module leader, to my surprise the contents of my work was above standard and very well done. My dyslexia is a worry regarding typographical errors which I may not notice. To combat this I used the computers grammatical and spelling checkers as well as showing my essays to my dyslexia tutor who helped me to proof reading. I was thrilled to see that in the feedback given, my grammar, spelling and punctuation was not seen as a problem. It is very motivating to receive this kind of feedback and the self satisfaction left me with a positive feeling which I hoped to maintain.

My first learning stage was the novice level which Benner (2001, p20) described as ‘beginners who had no experience or skills to practice in the situation in which they are expected to
perform’. At this stage of my learning I had limited knowledge and understanding of patient condition as well as the environment in which care is delivered. This made me anxious and nervous. My culture (which forbids me from addressing an elderly person by name) inhibited my ability to communicate effectively with patients and various members of staff. This problem was due to lack of previous experience in caring for patient and lack of understanding of the situation in which am expected to perform. My knowledge regarding patient’s illness or disease process was lacking. Hence I did not know how to assess or carry out patient admissions or pain assessments. For example, when patients complained of pain I always informed my mentor instead of carrying out a pain assessment to identify factors which may be contributing to the pain.

However, I constantly relied on my mentor for guidance. Through advice, feedback on my performances and by observing my mentors and other members of staff, I was able to develop strategies on how to overcome communication problems on my next placement. During this placement I was able to reassure patients, carry out pain assessment, monitor and record vital signs (under clinical supervision) as well as understand their implications for patients’ care. Although I had developed confidence in clinical skills in my first placement, there was an increase in my confidence during my second. There was an increase in learning, however, my skills and knowledge within this domain were still limited. I still relied on general guidelines or instructions given to me by my mentor on how to execute some of the duties delegated to me. As a result I could not use my initiatives to prioritize or plan care appropriately or make sound judgment regarding the care which I was giving to patients. My communication skills also improved as I was able to listen and reassure patients, carry out pain assessments. In the future I hope to ensure effective communication in my daily activities, building on my strengths until I become competent in my communication skills, and able to identify potential problems and difficulties and ways to find solutions to the problem.

The advanced beginners’ level was the second level of my learning. As explained by Benner (2001, p22) ‘the advance beginner is one who can demonstrate marginally accepted performance; one who has coped with enough real situations to note the reoccurring meaningful situational components’. In relation to performing at this level, the status quo is that the theory sessions are in the final stages, after which we would move into placement, where yet again I would have the opportunity to relate acquired theoretical knowledge to practice.

Personally, I have found that the various placements were the biggest learning curve for me and influenced my learning immensely. I feel that I have performed well, as I have done things that I had never done before such as taking measurements of blood pressure, giving injections, and administrating the correct medication. The biggest impact on me was the learning disability placement. I felt that this is where I really put my communication skills into practice. I found learning disability extremely interesting and at the same time challenging. One of the major challenges I encountered was the aggressive behavior of the patient. I learnt the importance of
being patient and to try to understand what is making them angry in order to calm them down. Sometimes medication is needed for this.

Meeting with my Personal development tutor (PDT) has been extremely useful; at the first meeting we met as a group which we had an open discussion on learning, teaching approaches and available learning support. My second meeting was one to one and I was able to express the problems I faced with modules in terms of understanding prospective assignments and in selecting textbooks which are user friendly to facilitate introduction to new areas of knowledge. It was also a good opportunity for me to discuss issues encountered during placement, in relation to my experiences, which included difficulties as well. I generally found these meeting to be useful because it was and still is an avenue for me to discuss and analyse both personal and professional development.

On reflection I can see that I was able to achieve the above nursing needs of patient due to 12 months of acquired knowledge and experiences. In progressing through the stages of skill acquisition, reflecting enabled me to gain new ideas, insights, understanding of clinical practice and I was able to change and improve my practice as I progressed. This ability is vital for personal and professional development. By reflecting I developed reflective skills such as self-awareness, ability to describe, critically analyze, synthesize and evaluate (Bulman and Schutz 2004, p10).

‘Self improvement builds on awareness’ (Moon 1999, p14). Learning is a lifelong process of discovering what is not known and recognition of learning needs is the basis for further development. NMC code of conduct and the life long learning document requires one to be able to recognize when further learning and development may be required. The NMC’s PREP (2001, p7) requires registered nurses to keep up to date with new development and to go for courses that are relevant to the practice area so as to ‘deliver care based on current evidence, best practice and, where applicable, validate research when it is available (NMC 2002, p5).

I would like to continue building on my nursing competency so as to increase my knowledge and skills. Achieving this will be through practice and self-directed learning, as well as through clinical supervision which provides support for the student; this will help me in further development of skills, knowledge and enable me to enhance my understanding in practice area. I will also further my education to degree level.

In conclusion, I have critically demonstrated how my learning has evolved from novice to advanced beginner of nursing. I have also planned to continue to maintain my personal and professional development by engaging in regular learning activities and also updating my professional portfolio. Furthermore, I will continue to acquire more knowledge to prepare me to face professional challenges, especially in the area of decision making, and the ability to spot opportunities and utilise them. I have an understanding of and confidence in my chosen profession as adult nurse. I want to see learning as part of me; learning new skills everyday is a lifelong experience. Reflective practice will not only improve the quality of care I give but also
enhance my personal and professional development thus helping me to close the gap between theory and practice.

REFERENCES


Moon, J.A. (1999). Reflection in Learning and Professional Development. London:

Kogan Page.
