

How to reflect on your work experience

20 minutes discussion
25 Minutes Q&A from students

Host: Mark Williams
Founder of Medical Projects

Panelist: Dr Peter Darling
Doctor

 Medical Projects



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**MEDICAL
PROJECTS**


Housekeeping and Introductions:

- This webinar will finish before 8pm
- We will send a recording and slides out within 48 hours
- Q&A section at the end
- Please use the Upvote system
- We will be using poll questions, get involved!

About Me

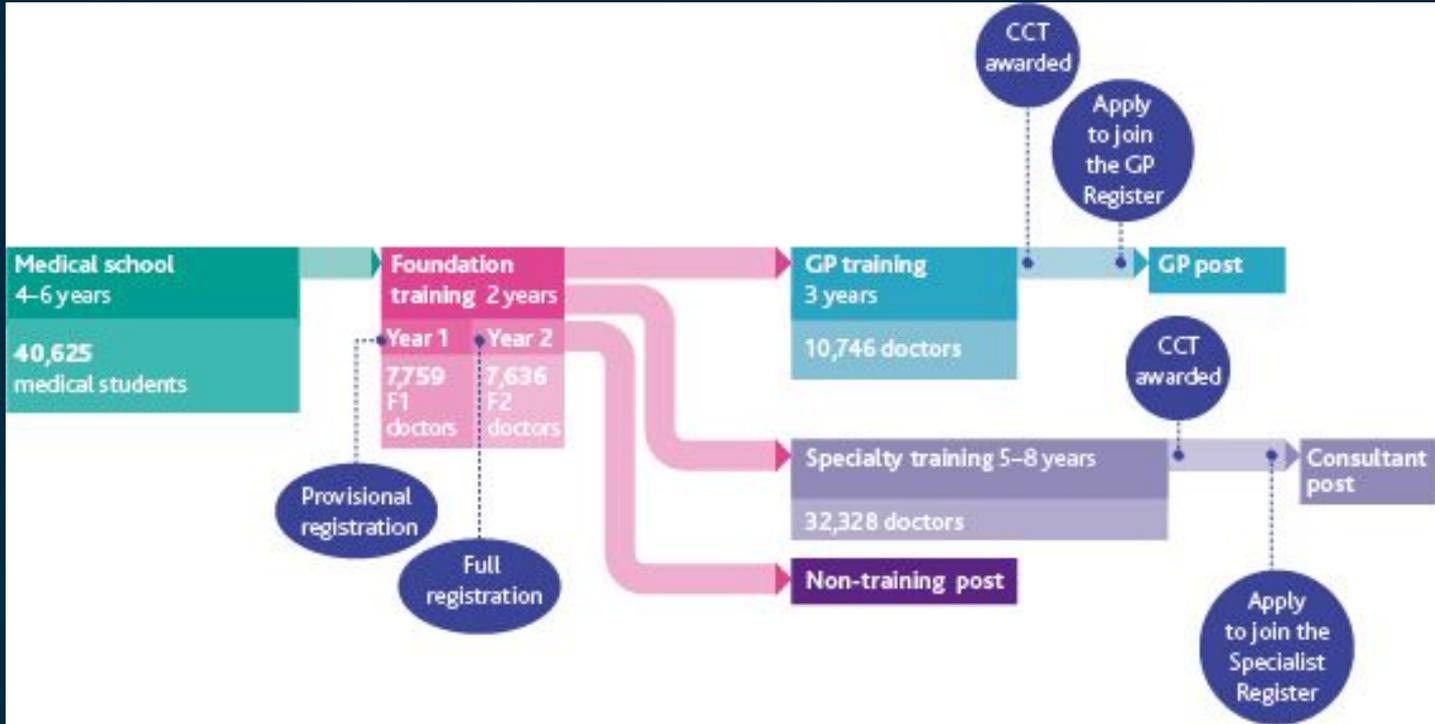
Grew up in Belfast, Northern Ireland

Studied Medicine at University of Dundee

Junior Doctor and GP Training in Northern Ireland

Now working as a GP Locum, Minor Surgery and Steroid Joint Injections, Teaching and Private Online Work

Pathway of a Doctor



What is Reflection?

“...the way that we learn from an experience in order to understand and develop practice”

(Jasper 2003)

What is Reflection?

- Reflection is an exploration and explanation of events
- Reflection often involves revealing anxieties, errors and weaknesses, as well as strengths and successes.
- It is usually necessary to select just the most significant parts of the event or idea on which you're reflecting.
- It is often useful to reflect forward to the future as well as reflecting back on the past.

Why is reflection important for aspiring medical students?

- Allows you to expand on your work experience.
- Shows you have developed an understanding of a skill that will be used throughout your medical career.
- Lets the people reading your personal statement/interviewers know you took something out of work experience.
- Do it really well to impress and help boost your application.

Example of Reflective Writing

Although the atmosphere within the group was co-operative, no-one seemed willing to make decisions about how to divide up tasks. Eventually **I stepped forward** and drew up a list of tasks and people, but I was aware that this might be seen as an unfair way to proceed. **I realised** I was pushing people to act, but **I felt** it was important that we started to work on the project as soon as possible.

Although we had a successful outcome, we should maybe have found a way to include everyone in the process of decision-making at the start. **In future** group work, I will probably suggest this and be aware of how that will help group dynamics from the start.

How to Reflect – Simple three Step Method

- **What?** What happened and when - basic details
- **So what?** This is how you felt and understood what happened at the time – this could include your feelings, anything that surprised you, and anything else that seemed important/useful/significant/interesting/puzzling about what happened.
This could also include noting why you felt as you did.
- **What next?** You may, for example, decide to ask a supervisor on placement about something that happened, or check the theory on something you saw on placement.

Reflection After Medical School

- Foundation Years – Continuous Reflective Entries on Clinical Cases, Learning Events, Teaching. (Approx 20-30 over each year)
- Training Portfolio – Continuous Reflective Entries with requirements differing depending on the speciality
- GP Training – Approx 2 Reflective Entries per week

Setting Telephone triage

Brief description Phonecall from a single, young mother with an infant who was discussing mental health. Found during phonecall to be between permanent housing due to losing her rented flat and needing to stay with different family/friends. No concerns of safeguarding however I feel cues were recognised to offer help with regards to social situation. Offered social work input and letter for housing executive.

Capabilities that this entry provides evidence for

Capability	Trainee	Supervisor
Data gathering and interpretation	I feel with this case I was able to respond to cues very well and build rapport to allow the patient to divulge information regarding her sensitive situation. Show less	managed to extract appropriate information well - given the sensitivity of case
Community orientation	I was able to offer resources such as social work and letters for the housing executive which the patient was not sure were available. I feel with this I was able to show how I can explore my use of resources outside of the medical management to help the patient. Show less	good liaising with social services/ help with Housing executive
Maintaining an ethical approach	There was a weighing up of the need for the completion of a UNOCINI, however careful exploration of the situation and gaining confidence with the patient's insight and plans with her social circumstances and her own mental health, I felt not only that a UNOCINI not be required but could also be detrimental to the situation for the patient and her child Show less	good thought process, and balance of risks well

Reflection and Learning needs

 Edit

Reflection: What will I maintain, improve or stop? I feel this case was managed well and I was able to demonstrate good medical practice.

Learning needs identified from this event Ongoing updates on social resources and specifically resources in the geographic area I am working.

Questions?

