Action research on developing reflective practice in students Jenny Allis Programme Leader Professional Health Care Studies and Hospital and Health Care					
Jenny Am	31 Togramme Lead	ci i ioicaalonai ne	artir care studies a	na mospitar and meantif care	

Contents Page

Research review	Page 3
Action research	Page 9
Evaluation and conclusion	Page 12
Recommendations	Page 13
References	Page 14

Research review

The aim this research review is to critically analyse current research on the development of reflective practice in student health care professionals. The evaluation of the process and challenges of developing into a reflective practitioner, will help to inform future teaching practices and improve the student experience. It will also critically evaluate current research and practice on teaching reflection to students. This will help inform the recommendations from the action research.

Defining reflection and reflective practice is a complex and diverse process (Caroll et al., 2002). Gallagher et al (2017) argue that there are several common threads that run through all definitions; firstly, it involves analysis of one's self, the process usually changes one's perception and reflection is a process. Reflection is often argued in academic research to be an integral part of personal and professional development (Gallagher et al., 2017), as it promotes analysis of professional performance and promotes learning opportunities (Wilding, 2008). Nursing academics since Schon (1985) argue that reflection supports and enhances the relationship between theory and practice, enabling ongoing analysis of complex professional practices (Gallagher et al., 2017). Reflection in health care is often simply defined as; the ability to review experiences from practice so that it may be described, analysed, evaluated and therefore used to inform improve future practice (Bulman and Schutz, 2008). Thus, improving the quality of patient care and patient outcomes.

Standards for nurse education in the United Kingdom require graduating students to 'demonstrate the knowledge, skills and ability to think critically when applying evidence and drawing on experience to make evidence informed decisions in all situations' (Nursing and Midwifery Council (NMC), page 8, 2018). The NMC (2019) also requires all registered nurses and midwives to demonstrate they are reflexive practitioners in order to revalidate their registration and continue practicing. Within healthcare there is an increasing focus on standards and organisational cultures, these changes have heightened the importance of skills such as communication, critical thinking and problems solving and reflective self-learning (Mawer, 2014). The skills required by students to develop into reflective practitioners equip them to be adaptable and resourceful and apply previous experience to new situations and

consolidate knowledge and evidence-based practice which are essential to healthcare practice and complex health care environments (O'Reilly and Milner, 2015).

Development of reflection promotes holistic development of health care students including emotional intelligence as it has been argued that reflection enables them to consider other's points of view and encourages interactions based on mutual respect, reasoning and cooperation (Sadio-Ramos and Ortiz-Molina, 2010). Laverty (2012) stated that students who engaged in reflective practice demonstrated increased self-appraisal skills and were better able to self-assess their strengths and weaknesses, which they would be able to utilise in order to develop action plans for their ongoing development. They are more able to critically assess and evaluate their own skills, experiences, knowledge and goals and how these can be utilised to their full potential (Ryan et al, 2017). They were also more rounded professionals who were able to merge theory into practice and were less judgmental (Laverty, 2012).

The ability to reflect enables students to actively participate in a process of questioning and increase their capabilities and motivation to respond to evolving social, workplace and learning environments (Ryan, 2015). ,Teachers adhering to professional standards are required to motivate learners to promote achievement and develop skills to enable them to progress (Education and training Foundation, 2014). In higher education this requires learners to develop critical questioning and analytical skills. This critical analysis is also a skill that is required for and developed through effective self and practice reflection (Ryan et al, 2014).

Throughout higher education students are scaffolded to develop their higher-level thinking skills. Critical thinking and critical analysis and evaluation requires students to understand and appreciate the importance of theory and research (Hatlevik, 2011). This appreciation develops throughout the course of the student's education as initially students can view nursing theory as dry and irrelevant, but as their education progresses, they appreciate the importance of this research and find it useful but also enjoyable and inspiring (Jensen and Lahn, 2005). Hatlevik (2011) analysed reflection skills acquired by students during their studies and found these related directly to students perception of the coherence of theory and professional practice. Hatlevik (2011), therefore argued that in order to develop into

reflective thinkers' students need to acquire professional knowledge and experience. Merizow (1990) identified six levels of reflection:

- Level 1. Reflectivity: the ability to describe the experience.
- Level 2. Affective Reflectivity: recognising and expressing feelings.
- Level 3. Discriminate reflectivity: evaluation of activities undertaken.
- Level 4. Judgement reflectivity: awareness of judgments and subjectivity of these evaluations.
- Level 5. Conceptual reflectivity: awareness of what is required for learning.

Level 6. Theoretical reflectivity: ability to demonstrate learning has occurred from the experience and perceptions has changed.

Nurse education research has found that students evolve from initially being descriptive reflectors to higher level reflectors who can critically reflect upon their practice and development (Ruiz-Lopez et al., 2015). Nurse graduates report that as students, they struggled to appreciate the value and benefits of reflection and found it laborious and repetitive, however, they appreciated its value as they transitioned into graduate practitioners (Parrish and Crookes, 2014). Medina et al (2010) argued that for students to be critical reflectors they require training in critical reflection which supports curiosity, creative thinking, innovation and questioning.

Reflective writing requires a higher level of contemplation and is more intellectual than speech (Vygotsky, 1962). It can therefore be argued that scaffolding students to develop these higher-level refection skills is an essential component of not only their personal and professional development, but also their academic development which in turn will promote their holistic development. Models of reflection exist as a framework to support and aid the reflective process, reflective models provide a format to aid the refection and provides guidance for the reflection (Kelsey and Hayes, 2015). Despite this argument that reflective models support learning and the assessment of reflective practice by educators, Hargreaves (2004) and Scholes et al, (2004) argue that these models can restrict creative thought, making the process purely academic therefore losing some it's validity. Hargreaves (2004) argues that students are keen to pass the course and write their reflections in a manner that meets the expectations of the educators and fear criticism or reprimand if they write their true thoughts in their

reflections. However, Parrish and Crookes (2013) interviewed 244 nursing students who reported that that reflective models were beneficial in developing their reflective skills.

Research has demonstrated that the process of becoming a reflective practitioner is complex and develops over time. It is essential that educators develop pedagogies that support and scaffold students to develop their reflective skills (Kennison, 2012). Kennison (2000) argue in earlier unpublished research that whilst educators had been teaching reflection to students, they felt they were not providing students with the skills to be truly reflective. Kennison and Misselwick (2002) argue that educators need to be offered training in the theory, use, and evaluation of reflective writing in order to better support learners to develop their reflective thinking and writing skills. Epp (2008) also found that nurse educators lack confidence when teaching reflective skills and had concerns regarding ethical considerations, evidencing learning has taken place and the depth of reflection achieved by students. Preparing educators will help provide coherence across the faculty when teaching students reflective concepts and provide a structure framework (Parrish and Crookes, 2014). Students stated that programmes teaching reflective concepts need to be well structured and clearly taught using reflective models whilst emphasising the importance and relevance of reflection and utilise authentic reflective tasks as part of the pedagogy (Parrish and Crookes, 2014).

Ruiz-Lopez et al (2015) carried out action research on the use of reflective journals as an effective pedagogy, whilst their cohort was small, seven students and five educators, they did pull together some useful qualitative findings which can be used to inform future practice and research. Ruiz-Lopez et al (2015) found that students and educators appreciated the value of reflective journals used on practice placements in developing students' capacity to develop into reflective practitioners. Educators were able to have insight into how students' learning was developing and any problems they were facing on placement, they could therefore, answer questions and provide guidance more effectively. Students in turn, found the journals enabled them to correct errors and helped the process of self-awareness of their actions, behaviours and emotions, including as one student reported, developing understanding of patient perspective. It was found that the ability to reflect effectively developed throughout the programme with first year students being more descriptive in their reflective writing (Ruiz-Lopez et al., 2015). Ruiz-Lopez et al's (2015) research also highlighted the need for trust between the educator and

student as this reinforces to the student that their work is confidential and they then feel that they can be more honest and open writing their personal thoughts, frustrations and emotions in their journal. Educator awareness of the challenge students face in reflective writing is also key and motivation responses are essential to aid student compliance, this also reinforces with the student that the educator values them (Ruiz-Lopez et al., 2015). Heneao-Castano et al (2012) state that trust, care, acceptance, understanding and compromise are values in educators that students perceived as essential in establishing good relationships. Affective reflection has been described as the ability to recognise one's own emotions and those of others, which facilitates understanding of the situation (Silvia et al, 2012). Ruiz-Lopez et al (2015) found that reflective journals enabled students to express their emotions, however challenges were that educators felt they were not trained in dealing with these emotional responses and both groups highlighted that it is was a time consuming process. This informed recommendations that educators must be motivated and trained in teaching reflective concepts (Ruiz-Lopez et al., 2015).

Gallagher et al (2017) researched the effectiveness of structure reflection for midwifery students, 53 (34%) of them responded to the survey regarding the benefits of group reflection sessions. Students reported that they appreciated the opportunities to discuss issues in a group setting, they felt confidentiality was essential in order to reflect open and honestly. Both educators and students valued reflecting with different cohorts. They reported that by creating a safe environment that promoted honest reflections and conversations, educators improved students' reflective processes. Whilst the research is relatively small with a low response rate and it may not have represented the whole cohort, it does however demonstrate that students have found the process beneficial. The 10 educators who responded, reported that the sessions were essential for students' professional development and in some cases highlighted issues relating to clinical practice. Educators reported that some students attended sessions poorly prepared and required prompting during sessions. 60% of facilitators used reflective models, students valued less structured sessions but recognised the benefits of incorporating a reflective model. Educators reported that for students to gain full value from the sessions, students and educators should prepare beforehand and show a commitment to the process of reflective practice.

This literature review has concentrated on research into reflection in nursing and midwifery. Whilst non-professional programmes were not considered due to lack of literature on such programmes, it can be argued that the finding of this review literature review applies to programmes that include professional development, placements and are pathways into health professional training. Evidence has demonstrated that reflective practice is a process that students find challenging as it requires higher level thinking skills, which develop over time. Students do not always appreciate the value that reflection brings to their personal and professional development, however once they are qualified practitioners, they report that they recognise and appreciate the importance of reflection in developing their practice. The research is consistent in its views that reflection enhances the quality of patient care.

Whilst it is a challenging concept for students to develop, reflection shares a very similar trajectory to academic development throughout higher education, with students moving from descriptive to critical evaluators who are able to demonstrate changes in their perceptions and learn for this to inform their ongoing development and practice. The research reviewed, whilst using relatively small cohorts, did bring up three key areas of consideration when developing pedagogy on reflective concepts. Firstly, educators need to be trained and competent to deliver programmes on reflection. They also need to establish effective relationships with students so the students feel confident and trust the educator so they can honestly reflect on their practice and emotions. Educators also need to be well prepared for the sessions as this improves student confidence and demonstrates that the educator appreciates the value of reflective concepts. Secondly group reflections held in a safe and confidential environment were found by students and educators to scaffold students in developing their reflective practice and writing. However, this research only involved a small cohort so needs to be explored further. Finally, the use of reflective journal was found by educators and students alike to improve students' capacity to become reflective practitioners. However, the students needed to have trust in their educators and educators had to be motivational in their feedback. Educators were in some cases worried that they were not equipped to deal with students' emotional response. Whilst these pedagogies demonstrated positive developments in student's ability in developing reflectivity, educator competency and relationship with students were identified throughout the research as key to development of reflective concepts. However, educators must bear in mind that reflection is a concept that students develop over time with academic and practice experience.

Action Research

In 2018-2019, Level five students had to produce a personal and professional plan which included a reflection on their development throughout the programme and include placement reflections. Grades varied from 38 to 75 Whilst some of the reflections were very well written with a high level of critical self-evaluation and action plans identified plans for ongoing development, many reflections were very basic and descriptive and lacked self-analysis required for developing effective action plans and setting of smart targets. Students who gained higher grades used academic sources to back up their arguments and discussions. It was disappointing that a lot of students were using mainly online sources many of which were nonacademic. Most students chose to use Gibbs' (1988) reflective cycle, they reported this was the reflective model they felt most comfortable with as it was the model that they always used. Students were reluctant to utilise other models of reflection

In 2019-2020 Hospital and Healthcare Level five; to date there have been four out of seven submissions for the personal development plan. Grades varied between 42 and 62. Whilst it is not possible to compare student output with the previous cohort due to the small number of submissions. Common themes have developed: three out of four students did not use citations to back up their arguments and/or failed to use academic sources simply utilising online sources. Only one student demonstrated a good level of self-analysis backed up with source evidence. Another student demonstrated good self-analysis but did not use any evidence from academic sources. There was a lack of action planning throughout.

In 2019-2020 12 Professional Health Care Studies Level five students produced a personal and professional development portfolio in Personal and Professional Practice, this was a pass/fail module so was ungraded. Students were required to complete critical placement reflections. Students were supported in class to do this and some students lacked confidence in their ability to reflect on their placements to the level expected in the assessments. All students passed this assessment however one student did not complete an action plan and two students have been referred to unfair means. Gibbs' (1988) reflective model was used throughout. Students were also required to reflect on their personal and professional development, the reflections apart from one followed a reflective model. However,

three students did not include action plans and one student's action plan was too brief and did not demonstrate she fully understood the value of reflection in personal and professional development. Generally, they used academic evidence to back up their arguments and showed good level of self-analysis. One student did not show good self-analysis as her reflection was descriptive and mainly covered placements not her personal and professional holistic development. This group scored better grades throughout the programme than the 2019-2020 Hospital and Healthcare cohort. At the start of the 2019-2020 only one student was confident using academic journals, however most students throughout the year used more academic sources than Hospital and Healthcare and grew in confidence when using them, this could go some way in explaining the higher quality reflections. This cohort were generally also better at their time management and had started working on their portfolios before most of the Hospital and Healthcare students, giving them more time to carry out research and reflection.

In 2019-2020 Professional Health Care Studies level four there were 26 students, six from HE access and the remaining students either from level three or the majority were widening participation students. In Foundation Clinical Skills, trimester one they produced a portfolio which included SWOT analysis which required an element of reflection as well as a reflective account. Students were required to apply a reflective model and reflect upon a situation where advice and supervision was required in order to develop personal performance in essential and clinical skills. Most students chose to use Gibbs' (1988) reflective model and this was generally poorly utilised. Most reflections were simple, lacking evidence of a true understanding of why student nurses/healthcare professionals need to reflect on practice. Most reflections focused primarily on the description of the incident and the feelings this invoked, rather than on developing the 'learning elements' of the reflective cycle. Only a few students managed to provide a conclusion or produce a meaningful action plan as a result of their reflection.

In trimester two this cohort completed a reflection on their clinical skills assessment as part of their portfolio for Clinical Skills for Practice. There were 22 submissions, most students used Gibbs' (1988) but one student used Kolb (1984), one student used Brookfield (1995) and two students used REFLECT (Barksby et al, 2015). Whilst one student failed to follow a reflective model. Some reflections were extremely descriptive outlining each step of the procedure and failing to analyse their practice and develop effective conclusions and action plans. One student's reflection was solely descriptive with no

attempt at analysis or create an action plan. Students who were struggling with academic writing generally wrote poorer reflections. However, one of these students wrote a very strong reflection, she was an access to HE student. Access to HE students all produced good thorough reflections following all the steps and linking to professional practice and standards. Some students were still struggling to form action plans for their continual development. Maybe looking at the assessment in isolation and not appreciating that it is part of their ongoing development. Use of academic and professional sources to back up statements was varied and lacking in some cases. During this module students worked in small groups and were encouraged to provide peer feedback and reflect on their skill development and create action plans to inform their ongoing skill development.

In trimester 3 these students completed a 15-minute self-evaluation presentation mapping to the NMC (2018) code of conduct as part of their Professional Practice module. This assignment was changed due to Covid 19 and students being unable to attend their placements, students were required to reflect on their behaviour, values and development throughout the programme. This was an ungraded assignment and was submitted by 22 students. Most students followed Gibbs' (1988) reflective cycle, whilst one student did not use a model of reflection. Two reflections stood out of having a high level of self-analysis and development of action plans for ongoing development. Interestingly these were from two of the youngest members of the cohort. Whilst one student researched different reflective models and used Borton's (1970) model effectively to reflect upon a difficult experience and how she has learnt from it to develop an action plan to inform her ongoing development. The quality of the reflections varied from very good to basic. Some students' narrative was repetitive and lacked depth and critical analysis of their development. Most students created smart targets buts some of them were too broad to be effective and measurable. Some students lacked clear and concise action plans.

Evaluation and conclusion

Reviewing this action research in line with the literature review, indicates that the students are on a very similar trajectory to the literature review. The findings of the action research mapped to the findings of the literature review. The quality of the reflections and the high level of description with a lack of a clear and achievable action plan, indicates that students are struggling to appreciate the value of reflection (Parrish and Crookes, 2014). It could also be a measure of where students are in their academic development and their ability to critically appraise and evaluate (Ruiz-Lopez et al., 2015). Whilst reflection develops over time and with clinical practice experience (Hatlevik, 2011), the level four students had no placement experience this academic year.

It has been difficult to compare this year's cohort to last year's due to the small numbers of students but there are some common themes including the choice of reflective model and in some cases the lack of academic evidence. Further research of larger cohorts needs to be carried out, also the grades and quality of students' reflections needs to be mapped against their average grades to establish if there is a link between quality of reflective writing and quality of academic writing (Ruiz-Lopez et al., 2015).

It would be beneficial to work in collaboration with HE access and discuss how reflection is taught and embedded on that programme. It was interesting that students who had accessed Professional Health Care studies via HE access wrote good quality reflections no matter what the general standard of their academic work was.

Interviewing the students, particularly around how much value they place on reflecting and some of the challenges they faced would be useful in developing action plans for scaffolding reflection in students. Whilst this action research has reviewed student output in the form of summative assessments and tutor feedback there has been no voice of the student. This needs to be explored further to inform ongoing teaching pedagogy.

Improving the quality of reflections and students' perceptions of the importance of reflective practice needs to be addressed from a number of angles. The literature review indicated that students benefited from group reflections. Informal peer feedback and reflections need to be developed further. Level 5 students reported that they found the jump from level four very challenging. As academic development is linked to quality of reflections, students could be supported with this further.

Recommendations

The literature review and action research has demonstrated that students need further scaffolding with reflective writing and development.

- Nurse tutors need to ensure that there is coordination in teaching reflective practice across the modules that involve reflective assessment
- OneNote reflective journals can be embedded into modules/tutorial canvas page, so students
 are encouraged to keep reflective journals from their placements and clinical skills lessons, or
 generally about their ongoing development throughout the programme. It may not be possible
 for tutors to review these journals regularly they can be used in group reflections which can be
 embedded into the modules/ tutors.
- Group reflection sessions either embedded in modules or some tutorials can be utilised for group reflection.
- Both OneNote reflective journals and group reflection enables students to practice and receive feedback on their reflections prior to the summative assessment. Further discussion with nurse tutors is required to develop an effective plan.
- Academic development at level 4 and level 5 including the bridging unit, needs to be aligned to reflective development, this includes developing students' ability to use academic sources including journals.
- Collaboration with HE access.
- Student survey.

References

Barksby, J., Butcher, N. and Whysall, A. (2015) 'A new model of reflection for clinical practice', Nursing Times, Vol. 111, No. 34/35, pp. 34–35Brookfield, S. (1995). Becoming a Critically Reflective Teacher. San Francisco, CA: Jossey-Bas

Bloom, B and Krathwohl, D. (1956). Taxonomy of Educational Objectives. London: Longman

Brookfield, S. (1995). Becoming a Critically Reflective Teacher. San-Francisco: Jossey-Bass

Bulman C, Schutz S (2008) Reflective Practice in Nursing. Chichester: Blackwell

Carroll, M., Curtis, L., Higgins, A., Nicholl, H., Redmond, R., and Timmins, F. (2002). Is there a place for reflective practice in nursing curriculum? *Nurse Education Practice*. Vol 2. pp 13-20.

Dasen, P. (1994). *Culture and Cognitive Development from a Piagetian Perspective*. In W.J. Lonner and R.S. Malpass (eds.), *Psychology and Culture*. Boston: Allyn and Bacon.

Education and Training Foundation (2014). *Achieving Professional Potential, professional standards for Teacher and Trainers in Education and Training.* London: etfoundation.co.uk

Gallagher., L, Lawler, D., Bradly, V., OBoyle, C., Deasy, A. and Muldoon, K. (2017). An Evaluation of the Appropriateness and effectiveness of Structured Reflection for Midwifery Students in Ireland. *Nurse Education in Practice*. Vol 22. PP 7-14.

Gibbs, G. (1988). Learning by Doing: A Guide to Teaching and Learning Methods. Oxford: Oxford Polytechnic

Hargreaves, J. 92004) So How do You Feel about That? Assessing Reflective Practice. Nurse Education Today. Vol 24. No 3. PP 196-201

Hatlevik, I. (2011). The Theory-practice Relationship: Reflective Sills and Theoretical Knowledge as Key Factors in Bridging the Gap Between Theory and Practice in Initial Nurse Education. *Journal of Advanced Nursing*. Vol 68. No 4. PP 868-877.

Henao-Casano, H., Nunez-Rodriguez, M., and Quimbayo-Diaz, J. (2012). Cited in Ruiz-Lopez, M., Rodriguez-Garcia, M., Villanueva, P., Marquez-Cava, M., Garcia-Mateos, M., Ruiz-Ruiz, B. and Herrera-Sanchez, E. (2015). The Use of reflective Journaling a a Learning Strategy during a Clinical Rotations of students from the Faculty of Health Sciences: An Action-research Study. *Nurse Education Today*. Vol 35. PP 26-31.

Jensen, K. and Lahn, L. (2005). The Binding Role of Knowledge: An Analysis of Nursing Students' Knowledge Ties. *Journal of education and Work*. Vol 18, PP 305- 320.

Kelsey, C. and Hayes, S. (2015). Frameworks and model – Scaffolding or Strait Jackets? Problematising Reflective Practice. Nurse Education in Practice. Vol 15. PP 393-396.

Kennison, M. (2000). Facualty and Student Perceptions of Reflection and Reflective Writing in Nursing Curriculum. Unpublished Studt=y. West Liberty, WW: West Liberty University. Cited in Kennison, M. (2012). Developing Reflective Writing as Effective Pedagogy, *Nursing Education Perspectives*. Vol 33. No 5, PP. 306–311

Kennison, M. (2012). Developing Reflective Writing as Effective Pedagogy, *Nursing Education Perspectives*. Vol 33. No 5, PP. 306–311

Kennison, M. and Misselwick, S. (2002). Evaluating Reflective Writing for Appropriateness, Fairness and Consistency. *Nursing Education Perspectives*. Vol 23. PP 238-242.

Kolb, D. (1984). Experimental Learning: Experience as the Source of Learning and Development. Englewood Cliffs, NJ: Prentice Hall.

Mawer, G. (2014). *The Language and Literacy in Workplace Education: Learning at Work.* New York: Routledge.

Medina, J., Jarauta, B., Imbernon, F. (2010) cited in Ruiz-Lopez, M., Rodriguez-Garcia, M., Villanueva, P., Marquez-Cava, M., Garcia-Mateos, M., Ruiz-Ruiz, B. and Herrera-Sanchez, E. (2015). The Use of reflective Journaling a a Learning Strategy during a Clinical Rotations of students from the Faculty of Health Sciences: An Action-research Study. *Nurse Education Today*. Vol 35. PP 26-31.

Mezirow, J. (1990). Fostering critical reflection in adulthood: A guide to transformative and emancipatory learning. San Francisco, CA: Jossey-Bass

NMC (2018). Future nurse: Standards of proficiency for registered nurses. London: NMC. Page 8.

NMC (2019). Revalidation. London: NMC

O'Reilly, L. and Milner, J. (2015). Transitions in reflective Practice: Exploring student Development and Preferred Methods of Engagement. *Nutrition and Dietetics*. Vol 72. PP 150-155.

Piaget, J. (1957). Construction of Reality of the Child. London: Routledge and Kegan Paul

Ruiz-Lopez, M., Rodriguez-Garcia, M., Villanueva, P., Marquez-Cava, M., Garcia-Mateos, M., Ruiz-Ruiz, B. and Herrera-Sanchez, E. (2015). The Use of reflective Journaling a a Learning Strategy during a Clinical Rotations of students from the Faculty of Health Sciences: An Action-research Study. *Nurse Education Today*. Vol 35. PP 26-31.

Ryan, M., Gwinner, K., Mallan, K. and Livock, C. (2017). Preparing work-ready nurses: reflexive learning for diverse students in Australian Vocation Education and Training. *Studies in Continuing Education*. Vol 39, No, 3 PP 268-285

Sadio Ramos, F., and Ortiz, M. (2010) cited in Ruiz-Lopez, M., Rodriguez-Garcia, M., Villanueva, P., Marquez-Cava, M., Garcia-Mateos, M., Ruiz-Ruiz, B. and Herrera-Sanchez, E. (2015). The Use of reflective Journaling a a Learning Strategy during a Clinical Rotations of students from the Faculty of Health Sciences: An Action-research Study. *Nurse Education Today*. Vol 35. PP 26-31.

Schon, D. (1985). The design Studio: An Exploration of its Traditions and potential. RIBA Publications for RIBA Building Industry Trust: London cited in Gallagher., L, Lawler, D., Bradly, V., OBoyle, C., Deasy, A. and Muldoon, K. (2017). An Evaluation of the Appropriateness and effectiveness of Structured Reflection for Midwifery Students in Ireland. *Nurse Education in Practice*. Vol 22. PP 7-14.

Scoles, J., Webb, C., Endacott, R., Miller, C., Jasper, M. and McMullan, M. (2004). Making Portfolios Working in Practice. *Journal of Advanced Nursing*. Vol 46. No 6. PP563-603.

Silvia, B., Valerio, D. and Lorenza, G., (2012). The Reflective Journal: A tool for Enhancing Experience Based Learning in Nursing Students in Clinical Practice. *Journal of Nurse Education Practice*. Vol 3. No. 3. PP 3.

Vygotsky, L. (1962). *Thought and Language*. Cambridge MA: MIT Press