Developing critical thinking, self-awareness & reflection towards Positive Practice @Health Sciences Faculty, University of Cape Town Holding Up Dignity as competent, aware and empowered health practitioners using the Six Step Spiral for Critical Reflexivity (SSS4CR)

1. Describe a significant experience

What happened?

Describe a factual narrative account of the event avoiding any explanations or possible links

2. Individual Impact

Consider your own response, thoughts and feelings

What did you do at the time, or could have done? What were you thinking at the time? Did you discern any possible causes or associations? What were the positive and negative emotions that you felt? How did your own morality, culture, gender, class, ethnic background, spiritual and religious, beliefs affect the situation? How did your past experiences, your background and beliefs impact on your perspective of the event?

If the experience was helpful, what changes did you pick up in yourself?

If difficult, did your feel angry, sympathetic, frustrated or helpless?

3. Analyse and Evaluate

In terms of human rights, which rights were upheld / violated? Was your experience an example of good practice or an incident in which professional standards were compromised? What was good and what was bad about this experience? What consequences did it have for you, the patient, the provider and other parties? What implications do you foresee for now and in the future?

What behaviours and attitudes contributed towards your growing professionalism?	If detrimental consequences, how would they be harmful or threatening to you or to the patient? How could you amend these consequences? What support is available to reduce the adverse effects? Based on the above, what could have
	been done differently by you, the patient, the provider?

4. Interpret with a wide vision perspective

What meanings do you draw from this one experience to broader systemic issues? What structural influences seemed to impact on the situation in a positive or negative way? Consider personal, historical and environmental factors that may be relevant in influencing this event. What alternative perspectives may be playing out in this situation?

5. Plan the strategy that you consider appropriate

What options are open to you as a result of this experience? Whether a compliment or a complaint, the name of the health care provider, date and time are all helpful. Identify different perspectives that may be brought to the experience. Consider the impact of comments made by your critical friend. In your position of leadership, what changes could you recommend to the University or Health Service to ensure follow through for good practice or to respond to an abusive incident in a way that it does not happen again?

How will you transfer the

good role

modeling into

your practice?

What evidence is available to follow through on the incident? Have you adequately documented the event? What options are open to you to respond to a negative clinical encounter? Is protection needed to prevent further abuse? Are there monitoring and reporting channels in the educational institution or health facility? Ought you to raise awareness about your experience?

6. Choose your action plan

What factors can facilitate or hinder your plan? Make your reasoned choice then follow through with your decision.

Recognize that your action will move into a new spiral.



Thanks to Dr Kevin Williams, Nariman Laattoe, Dr Simone Honikmon Sarah Crawford-Browne and Prof Leslie London

Tips for difficult situations:

Ensure that facts are not distorted with opinions especially in challenging Instances.

Draw on your own expertise and confidence so that you do not feel disempowered. By maintaining your equanimity you can avoid over responding or compensating.

Build your resilience to overcome the stressful impact of your challenging encounter. Sometimes it is tempting to abandon the situation. Try and engage with the challenge.

If you criticize a team member this can undermine collaborative efforts. Seek support from colleagues and other available channels.





http://web.uct.ac.za/depts/hhr/ documents/Toolkit_final%20v ersion.pdf (CC BY-NC-SA)

http://www.ifhhro.org/images/stor ies/ifhhro/manuals_and_guidelin es/stepsforchange_EN.pdf



References

Bozalek, V. & Matthews, L. 2008. E-Learning: A cross-institutional forum for sharing sociio-cultural influences on personal and professional identity. International Social Work. 52:2:235-246.

Equitas. 2011 International Human Rights Training Program. Montreal. http://equitas.org/wp-content/uploads/2011/07/IHRTP-2011-ENG-FAC.pdf "The learning spiral", Arnold, R., et al. (1991). Educating for a Change. Toronto: Between the Lines. Adapted with permission from the Doris Marshall Institute for Education and Action

Gibbs, G. 1988. Learning by Doing: A guide to teaching and learning methods. Oxford: Further Education Unit, Oxford Brookes University

Thomas, J. 2004. Using Critical Incident Analysis to Promote Critical Reflection and Holistic Assessment, in Gould, N & Baldwin, M. (Eds) Social Work, Critical Reflection, and the Learning Organization. Aldershot. Ashgat

Compiled by Veronica Mitchell, Health Sciences Faculty, University of Cape Town, South Africa (<u>Veronica.mitchell@uct.ac.za</u>). Licensed under a <u>Creative Commons Attribution-NonCommercial-ShareAlike license</u>. Unless otherwise referenced, all images belong to Stacey Stent Illustrations UCT @2012 CC BY NC SA 2.5