

EPBS Athens 6th October 2016

Reflective practice



European Association for Professions
in Biomedical Science



dbio - Danish Association of
Biomedical Laboratory Scientists

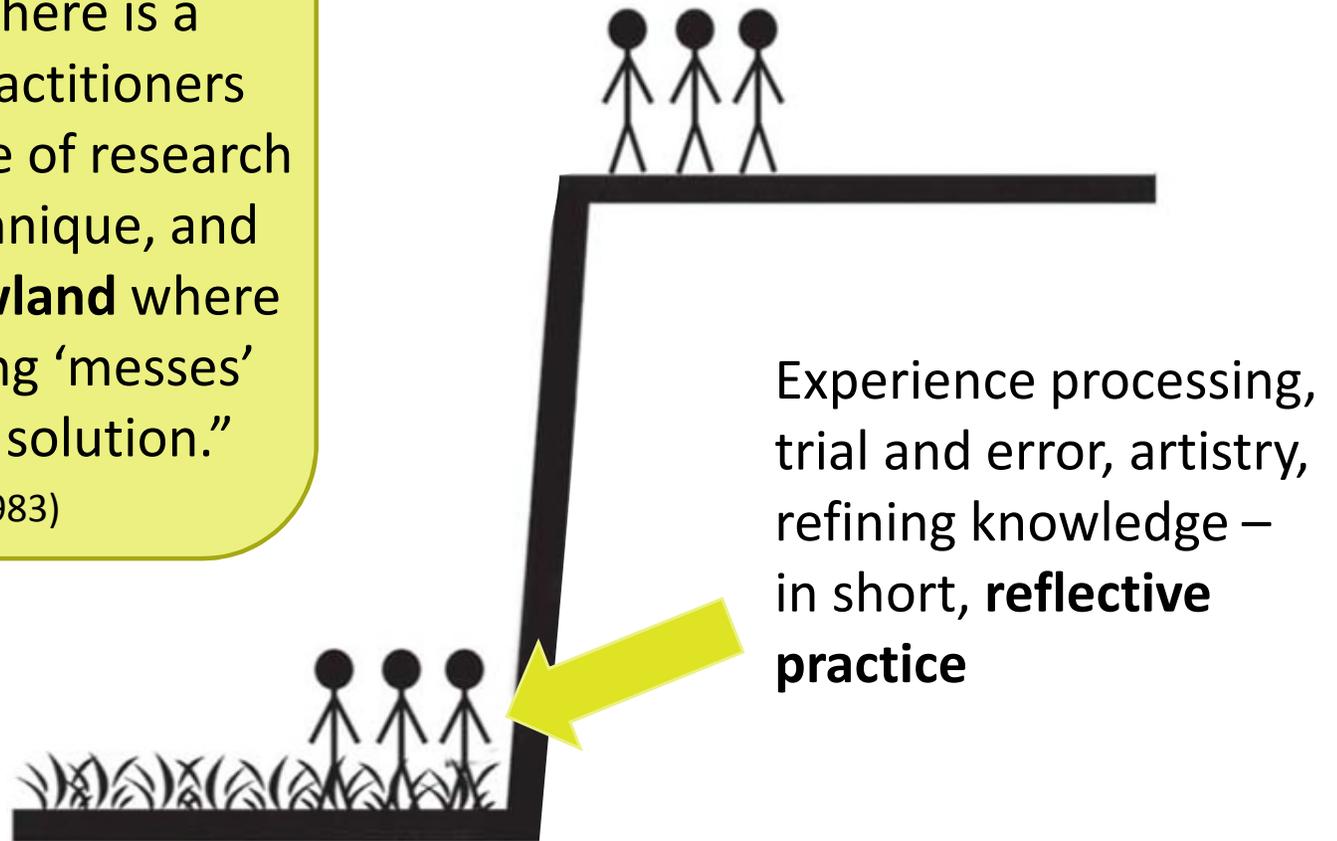
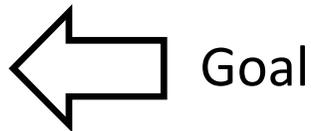
Focal points of presentation

- Reflection situated in the real-life practice of professionals
(not formal education nor a measurable set of skills)
- The inherent social, collaborative character of reflective practice
(not an individual, atomised focus)
- Systematic reflection as part of the job and the workplace culture
(not a separate task nor a 'nice to have' activity)

The swampy lowland of professional practice calls for reflection

“In the varied topography of professional practice there is a **high ground** where practitioners can make effective use of research based theory and technique, and there is a **swampy lowland** where situations are confusing ‘messes’ incapable of technical solution.”

» Donald Schön (1983)



Learning is distributed across the members of a community of practice

Practice is always social practice

- Practice resides in a community of people and the relations of mutual engagement: The concept of practice connotes doing, but not just doing in and of itself. It is doing in a historical and social context that gives structure and meaning to what we do.

Learning is the engine of practice

- Change and learning are in the very nature of practice: That members interact, do things together, negotiate new meanings and learn from each other is inherent in practice – that is how practice evolve.

» Etienne Wenger (1998)

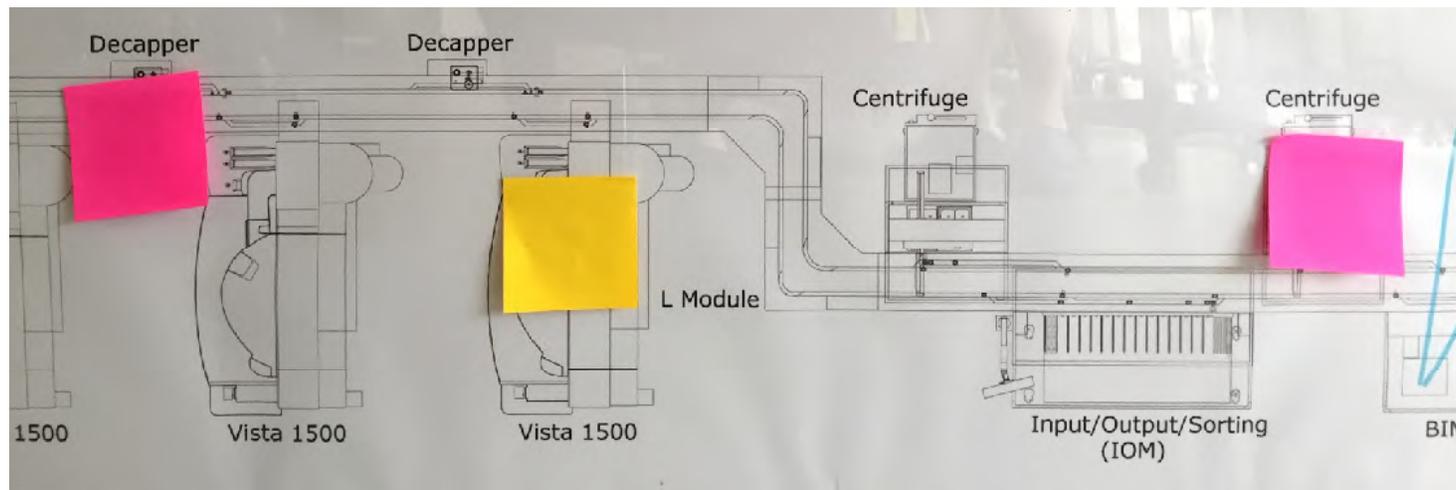
Example of reflective practice in action

- Department of Clinical Biochemistry at North Zealand Hospital
- STARlab: The world's first fully automatized laboratory system - from the blood test is taken to the result is given
- Integrated air tube system + unpacking and sorting robot



Systematic reflection

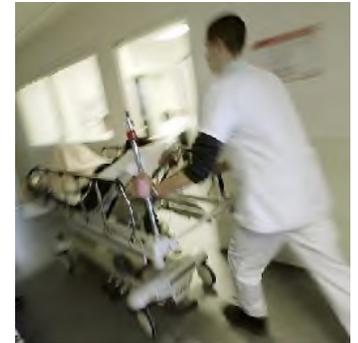
- Training lessons
 - Going into depth with problems in different sections
 - Analysing and designing the flow
- Two short meetings every day at 10am and 14.30pm
 - Reporting errors and asking clarifying questions
- Staff meetings once a month
 - Reflection on the patterns and theoretical perspectives
- Adjusting guidelines



Analysing and designing the flow

It is essential to understand for example:

- The diagnostic work of the departments/GP's in order to prioritise the flow of tests from the different patient groups
- The quality and the purpose of the different analyses in order to prioritise the flow
- How and when to handle tests in the “problem” trays



A few reflections on the case

- Staff and laboratory make up a system
 - Change in one part of the system will affect the other parts, eg. implementing a new flow will foster learning and change behaviour in the entire group.
 - Some members are very active and contribute more to the reflective processes than others, but every contribution is an important piece of the puzzle and learning is shared by everyone.
 - Reflective practice is social.
- The manager has a vital role
 - Devote time for systematic reflection, step back and observe the discussions, watch out for patterns and discuss them with the group, follow up on guidelines and adjusted actions, integrate reflection in new projects.

