Structured reflection – EXEMPLAR

Part 1b - NQSW to complete post-observation

This section should be completed as soon as possible after the intervention and certainly within one working day. As a guideline it is expected that this will take no longer than 45 minutes. The assessment criteria for this exercise can be found in Part 2b.

Post observation structured reflection

The following are prompts to help you construct your reflection

- Reflect on your performance in the observation – what did you do well and what would you seek to develop?
- What were your emotions during the observation and how did they affect your practice?
- Critically reflect on your application of social work theory, methods, legislation and research
- Identify and critically reflect upon areas of challenge and complexity in the observation in relation to KSS/PCF

I went to visit Betty to undertake a review of her support plan. I was aware that Betty (names have been changed to adhere to confidentiality) had had a fall and had been very depressed last time I had seen her. I was anxious that this would be a difficult appointment, but had set aside time to ensure that both Betty and Bob were heard and supported. I know from previous experience that time and empathy can go a long way to making the service user feel valued. I was very relieved to see that Betty and Bob were calmer, that the house was tidier, and that they both seemed generally happier. I felt that this enabled me to relax immediately on arrival, and to be calm throughout the session. I was able to work through my agenda, and felt that it was sympathetic with their agenda.

I feel that I led this review well. I was calm throughout, which engaged Bob and Betty well. I felt that my communication skills
were good throughout: I listened to Betty and was able to understand her speech. I felt that I was able to engage them well, with humour when appropriate and I utilised non-verbal signals regularly to show I was listening.

I was organised, which showed throughout the appointment as I was able to recall facts of the case, so valuing and respecting the couple. I had done this by re-reading the case notes and familiarising myself with the couple’s situation. I had printed the assessment so that I could provide copies to Bob and Betty. I was aware that I had quite a bit of paperwork with me, which I kept on my lap and I was conscious of not wanting to refer to the paperwork too often in the appointment.

I was able to reflect on being a black worker going into a white, middle class, older couple. I felt that it was important to respect my elders, and therefore ensured that I remained respectful, demonstrated in my calm manner. I was startled by the interruption of the visitor, and unsure how to deal with it. I felt that this left me a little flustered, and I had to regain my composure after the neighbour had left. On reflection, I am able to recognise that I like to follow my agenda and plan, and that I need to develop an ability to be responsive to real life disruptions.

I felt that I came from a Rogerian person centred perspective by ensuring that I asked about and listened to Betty and Bob’s perspectives. I asked about their level of carers and how it worked to meet their needs, and I asked about Bob’s ability to go out. I ensured that all services that they have in place meet their needs. By ensuring that the support plan is an individually developed one utilising direct payments I made sure I was person centred. I also used clarifying questions and feedback to ensure I understood the involvement and scope of the different carers input.

I reflected that Betty’s loss of mobility from her fall could be seen within Kubler-Ross’s Stages of Loss (60’s). When I saw her last, she was suffering from depression, which is one of the stages of loss. Kubler-Ross argues that when face the loss of anything (in this case her mobility) the person will progress through some or all of a number of stages: Denial, Anger, Bargaining, Depression, Acceptance as they come to terms with a loss. I believe that Betty was in the depression stage when I last saw her, and was struggling to see the point in her life. However, on this visit, she appeared to have moved into the acceptance stage. I believe that putting into place support services has enabled her to construct a different reality where she is able to live with her different but equally valid new mobility.

On reflection, I was concerned that Betty told me about a more recent fall towards the end of my visit. This highlighted two things for me:
that I had not checked with the OT as to if there had been any new information that I should have been aware of and that I did not ask sooner in the interview if Betty had fallen recently. I was focused on the review, and asked generally if she was ok. In future I will ask a more direct question to avoid confusion.

Overall, I feel that I did a good review.