

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.