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Who Do You See When You Reflect?

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According to Thomas Paine ¹ "[horizontal ellipsis] there are two distinct classes of what are called thoughts: those that we produce ourselves by reflection and the act of thinking, and those that bolt into the mind of their own accord."^(p64) Reading this quote emphasized that as nurses, we often put much thought and planning into our patient care. However, we also have internalized many of our behaviors and actions such that we seem to react and act without really having to think about what we are doing. I would purport that nurses do think about what they are doing; it is the level of the nurse's experience and learning that provides the nurse with the ability to act quickly in many situations of patient care. This is highly evident in the practice of trauma nursing.

The act of thinking and reflecting means that we are seriously fixing our minds on some specific topic and contemplating it. What follows is the part of critical thinking where nurses review in retrospect what actions worked well for their patients and what actions did not work well. Nurses can reflect at almost any time; however, reflection usually requires some type of quiet environment that allows the nurse to really think and review what had occurred. The nurse might reflect on his or her actions while driving to and from work. Some nurses like to document in a journal their thoughts and analysis of specific patient care situations or interactions.

However, you may decide to reflect-it is important that you do reflect. Thinking is a key component to nursing practice, and reflection is just one way that we can review and, hopefully, improve our practice. Reflection, though, is more than just thinking about what we did or did not do. It can also be about nurses as role models when we look deeper into the reflection. Did others on your unit get involved in the patient care activities? Did you discuss the situation with others? Are students on your unit? If so, they may be observing your practice and taking it all in as you are considered the expert or the nurse with the experience.

Therefore, when you reflect-think carefully and thoroughly-as your actions truly have the ability to affect others. It may be helpful or wise to have unit discussions on patient care situations that have had impact on the actions of the care providers. In this way, all those involved in patient care may benefit from the shared reflection of the primary nurse or team members.

The definitive impact of reflective thought is that we should improve our future actions. Reflection helps us critically review and analyze how we provide care. The action(s) that we take as a result of that reflective thinking will affect our care of patients during our careers as nurses. Peter F. Drucker recommends that we "[f]ollow effective action with quiet reflection. From the quiet reflection will come even more effective action."^{2(p180)} Since healthcare is about providing the best quality outcomes for our patients, it only makes sense to think about what we do, discuss the options and choices with our team, and choose to take the best effective action possible. Reflection is one component of the critical thinking process that we can utilize to benefit our patients, our coworkers, and, ultimately, ourselves.

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