Gibbs Reflective Cycle in Nursing Education

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Introduction:

The education and training system of the country polishes multiple personality traits of the candidates that help in their nursing career and professional life (Doubeni et al., 2020). In this way, the Gibbs Reflective Cycle (1988) is beneficial, as it helps people improve their understanding of any situation or experience. It is a valuable tool that allows participants to reflect on any incident or experience and comprises six stages (Markkanen et al., 2020). Regarding any situation or experience, these stages include description, feelings, evaluation, analysis, conclusion, and plan of action (Delves-Yates, 2021). During my training as a nurse student, I gained immense experience that boosted my professional aptitude. In this regard, I recall an incident that took place during training.

Stage 1- Description:

The other day, I was assigned to perform duties in the mental health ward. There arose an emergency, and the patient was in dire need of surgery for survival. However, the surgery team comprised senior specialists, two assistants, and a few nurses. I was included in the group as a trainee nurse student, and we made all arrangements according to the given instructions. After completing the initial procedure, I was told to move towards the information desk to motivate and encourage the patient's family members. However, the surgery was very critical, and I was also worried about the condition of the patient and the results of the surgery. Still, I tried to make the family satisfy and boost their courage. They were praying and feeling well about the patient. They became satisfied and moved to the waiting lounge of the ward. Meanwhile, a man came; he talked to me very nicely and behaved very well. I felt somewhat relaxed and comfortable. A few minutes later, he tried to probe about the patient under surgery and tried to get information about his health. He asked me about the details of the patient. I hesitated a little bit, but I disclosed the identity of the patient.

Stage 2 – Feelings:

Furthermore, I felt stressed due to complications in the surgery; the person made me relaxed, and I felt well due to his presence. But his intention made me very upset, and I felt bad about such an incident. The person to whom I disclosed the patient's identity was unknown to me; I had never met him before. It was the first time in the training period that I confronted such a situation. I felt terrible about this disclosure as I had not consulted any senior before giving information to a stranger.

Stage 3 – Evaluation:

After some time, I realized that it was just a blunder. I evaluated the whole situation and found myself in the wrong position. If the person misuses that information for any purpose, it can become a terrible situation for me and also for the patient. I told the senior about the whole incident, and the whole team knew the situation. The confidentiality of patients must be secured and safe (Vora et al., 2018). Moreover, I was on the managing side of the patient's information, so it was tragic as I was not supposed to do so. However, my seniors did not blame me and encouraged me to continue working with full zeal and zest.

Stage 4 – Analysis:

I analyzed the situation and realized that such people get benefits from the condition. The said incident gave me a lifetime experience in the nursing practice and profession. The misuse of such information can lead to fatal consequences of any type. I learned to make others' privacy and confidentially a top priority in the medical profession. To stop such hideous things, a nurse's responsibility is to secure and save the patient's identity, medical records, treatment details, and allied documents in safe custody.

Stage 5 – Conclusion:

The patient recovered and remained in the ward for many days. Nothing bad thing happened regarding his identity details. For a few weeks, I remained frightened. If anything bad had happened to the patient due to this disclosure, my nursing career would have been ruined. But all went well with this incident.

Stage 6 – Plan of Action:

Moreover, as a result of such experience, I can improve my practice. The strangers who need to acquire such information try to deceive nurses in one way or another way. Such personnel should be handled discreetly to make them bound to their respective positions. During nursing practice, one should not disclose any information regarding seniors, colleagues, staff, and patients to avoid discrepancies (Poorchangizi et al., 2017).

I planned to ensure the confidentiality of the patients as a top priority and polish my interpersonal communication skills. Meanwhile, it is noteworthy that such experience is very relevant to the NMC code (2018). The code teaches and guides medical practitioners to show sincerity to patients and allied people. Trust can only be built when one respects the privacy of patients and secure their confidentiality from others. Social ethics and professional norms strictly demand these aspects with

excellent communication skills in professional life from nurses (Dudzik, 2021).

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