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**Assessment 2**

Using an appropriate Model of Reflection reflect upon your placement/work opportunity. Your professional reflection should reference relevant theories (e.g., career development, personal development, social sciences, and sector leading practice as appropriate).

As Mezirow (1999) suggest, adults' perception of humanity- reflective practice are learned by their judgment, beliefs, and feelings. Mezirow (1999) also emphasises the importance of dialogue and communication in reflective practice and the need for support and guidance from others who can provide different perspectives and insights. However, Jasper (2003) suggests reflective practice is a method of self-awareness and self-evaluation that entails analysing one's own experiences and deeds to learn from them and perform better in the future (Jasper, 2003). Reflection and learning through experience are related. It is a crucial tactic for experts who prioritise lifelong learning. (Jasper, 2013).

Moreover, Donald Schön was the first who establish a meditative practice in his book *'The Reflective Practitioner'* (Barker *et al*.,2016). Schön (1983) argued that professional abilities and competence need always be able to analyse and reflect on their experiences. The author distinguished between two kinds of reflection: "reflection-in-action," which takes place while performing an activity, and "reflection-on-action," which happens after the movement is finished (Schön, 1983). As Barker *et al*. (2016) declare, 'if you reflective regularly – in a reflective diary – it can provide a log of your activities and allow you to consider if there are recurrent issues that need to be considered in more depth' (Barker *et al*., 2016, p. 164).

This essay critically examines employability skills and how they align with those necessary for professional activity. Also, it will create professional development and market for a professional image for a particular opportunity. Also, I will talk about practice placement reflections, especially those related to a detailed case study. It will begin by describing the specifics of the case study and my practice settings. After that, I will discuss reflections and how reflective practice helped implement the theory. Finally, I would like you to look at the examinee approach and suggest improving Gibbs's (1988) reflective model to help understand the meditative practice Gibbs' Reflective Cycle, which contains six steps, allows the object

being reflected to consider all the stages of an activity or occurrence. Six steps make up Gibbs' Reflective Cycle, which enables the reflector to think about all the phases of an action or event (Gibbs, 1998). The model is distinctive since it contends that experiences are repeated and involve thoughts, deeds, and feelings.

My placement was based in Care Home (Residential Care), specialising in Autism/ASD, Challenging Behaviour, Down Syndrome, Epilepsy, Hearing Impairment & Deafness, Prader – Willi Syndrome. This Care Home offer 24-hour care, support, and activities such as pottery, art & crafts, woodwork, and touch trust sessions. They are providing day-care and independent living training. They have 16 residents there. They are called People We Support (PWS). PWS are aged 18 – 65. PWS is treated individually with respect and person–centred approach to fulfilling their potential.

**DESCRIPTION**

I will reflect on the incident when I was placed in the Care Home. On my first shift in the morning, I was allocated one of the PWS by a Team Leader (TL). First, I read the Care Plan of the PWS (Social Care Institute for Excellence,2017), along with '*Managment of Behaviour that Challenges including Violence and Aggression – Wales'* policy (Swanton Care and Community, 2019) and then TL introduces me to the PWS. It was an elderly Welsh woman with autism spectrum, who could barely communicate but understand what is being said to her in English and Welsh. She can ask about drinks and food. She does not have capacity (Mental Capacity Act, 2005), and she is supported by 1:1 staff on daily basis. Staff must follow PWS routine, which is placed in Care Plan, otherwise that can cause distress and agitating behaviour. That person does not like crowded places and loud environments but does like walking with her 1:1 staff support, listening to music and watching horror movies.

First, I introduced myself to the PWS again and then asked her what she wanted for breakfast (between two choices). I fully supported that person in making her breakfast. After that, I prompted her to wash the dishes, which she did. After, we started the morning routine, which went smoothly. I assisted, prompted, and encouraged this person through the morning routine. According to Care Plan, this person should have activities, so I offered her two choices (going for a walk or going to the community) about what she would like to do. The PWS chose to go to the community for lunch.

After talking with the TL of the shift, the PWS I was supporting and another staff with another PWS went for lunch at the restaurant. We chose to go to a place that was quiet and calm. We all sat separately to make sure our PWS would feel comfortable. However, we were close to each other if anyone needed help; we all decided what we would like to eat. I helped the person I was supporting choose her meal and drink, and then food came to the table after a while. The PWS I supported started gobbling her dinner. I use talk down to the person and asked her to eat slowly, which can prevent choking rushing eating food. However, she did not listen and still put too much food in her mouth. After a while became distressed and started demanding for a drink. I calmly explained to her that the coffee (her choice) was too hot, but she stood up and started pushing me (the coffee was on the side as it was sweltering), so I asked her calmly to sit down and passed her drink. I also asked her to drink slowly. Unfortunately, she did not listen and quickly finished her coffee. In the end, she became very red and seemed shocked. I asked her if she was ok a few times, and she answered yes. However, she appeared agitated as she started demanding about more coffee and attempted to take other PWS coffee. I used the talk down and asked if she would like a cold drink, but she declined and still asked about coffee, so I explained to that person that we would buy her another coffee on the way home, so she decided to go to the bus. I used my skills (Cottrell, 2021) like, body language, verbal prompt, talk down, I also let the person express her feelings

**FEELINGS**

Before the incident, I was mindful that we were surrounded by few members of the public and around the environment, which none of us knew. As my duty of care, I had to keep the PWS as safe as possible. I was anxious, scared, and nervous, but I had to overcome my feelings and use all my skills to calm the PWS down. However, I felt like another staff, and I failed as we did not consider that my PWS first trigger is drinking. Ultimately, I was not confident enough to deal with this challenging situation independently and felt guilty and frustrated (Koshy, 2017) with my failure (Jaspar, 2003). However, knowing that there was a second staff with me in that situation made me feel calmer and more collected, which helped me think of a way to take the client out of the situation, so it did not escalate further.

**EVALUATION**

I can now better understand PWS and my role as a support worker because the experience had both good and bad sides to it. My PWS had an excellent care experience and outcomes because of effective communication (Barnard, 2011), good inter-professional collaboration, partnership

(Weinstein, Whittington and Leiba, 2003) and patient-centred care (Social Care Institute for Excellence, 2019). I actively listened (Barnard, 2011) to the PWS to make sure that the PWS I was supporting voice was heard (Brandon, 2001), and I helped her decide what she would like to do. Also, I was followed company policies and procedures. However, I did not fulfil the latter responsibility entirely as I did not consider other people involved in this incident (Jaspar, 2003), and triggers, which cost my PWS distress. Also, I was not self–aware (Bassot, 2023) of the situation.

## ANALYSIS

As Sinclair (2010) states, the perception of autistic persons is that they cannot connect with others over shared interests, are cut off from social interaction and fellowship, and are not susceptible to the social transmission of attitudes and behaviour (Sinclair, 2010). Aylott (2010) suggest that those with autism pay attention to the details. However, informed decisions about care and assistance for autistic adults can be made with the help of good person-centred interactions that explore strengths and differences SCIE (Social Care Institute for Excellence, 2019) suggests as the Care Council for Wales (2016) state professionals in social care should enforce limits in a fair, transparent, consistent, and precise manner, so when we came back home, I made sure that my TL of the shift was aware of the situation; We talked about the incident, and then I wrote the whole situation in my diary, where I provided factual recordings of the incident's location, date, and time (Moon, 2006) to reflect (Cottrell, 2021) on this incident in the future. However, also as the National Institute for Health and Care Excellence (2015) states, all incidents must be documented as soon as possible to take action to assist people in changing their behaviour and enhancing their quality of life. Identifying the root causes of challenging behaviour and conducting extensive assessments is crucial (NICE, 2015). I recorded this incident in the company's app.

## CONCLUSION

To conclude this experience, as Jaspar (2003) states, when thinking about challenging events, we frequently concentrate solely on the bad things that occurred to us or the things that went wrong, and they tend to stick in our thoughts for extended periods (Jaspar, 2003). Bad experiences might lead us to believe that we are not excellent or unable to handle certain situations (Jaspar, 2003). I am now more aware of the significance of demonstrating professionalism in practice if similar issues emerge due to this experience. I would make a few

different decisions in hindsight; however, I am glad that despite my fear, I managed to control the whole situation, and thanks to that, I increased the relationship between me and PWS.

**ACTION PLAN**

As the Moon (2006) declares, writing a diary enables us to reflect on events and demonstrate what we have learned. To consider this, I will still use the journal to reflect on my work in the future. I would take it with a grain of salt that other staff members will always be conscious of a service user's unique requirements and triggers or that they will act entirely professionally. I will keep doing professional reflection extensively using the Gibbs (1988) continuing approach.

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