

Clinical Faculty Preceptors and Mental Health Reflections: Learning Through Journaling

Monika L. Wedgeworth, EdD, RN, Sheree C. Carter, PhD, RN, and
Cassandra D. Ford, PhD, RN

ABSTRACT

Evolving practice environments have increased the need for advanced practice nurses to serve as clinical faculty preceptors at both the undergraduate and graduate levels. Guided clinical journaling allows students to reflect and retain their clinical experiences and become an active participant in the learning process. The journal presents opportunities for both evaluation and critical reflection of clinical performance and previously held assumptions related to mental health. Through careful consideration of components, clinical educators have the opportunity to ensure that student learning has occurred as well as provide prompts for guided reflection of the learning experience.

Keywords: clinical faculty preceptors, mental health nursing, nursing clinical education, reflective journal

© 2017 Elsevier Inc. All rights reserved.

Evolving health care and educational environments have highlighted the need for nurse practitioners (NPs) in providing robust educational and clinical experiences for both undergraduate and graduate nursing students. Competition for clinical sites, large numbers of students requiring placements, and the limited number of qualified nursing faculty are among the driving forces behind the increasing number of NPs serving as clinical faculty. However, challenges exist that complicate supervision of clinical students at all levels. Clinical learning in nursing education is a complex process involving a variety of cognitive, emotional, and behavioral components. Given the limited amount of clinical hours and the inherent nature of the clinical unit, it is often difficult for NP students to find time to think and process their clinical learning experience, risking that those experiences will not become fully integrated into memory. Similarly, it may be difficult for clinical faculty to properly determine that each NP student has met the predefined clinical learning outcomes and has assimilated critical concepts into learning.

Clinical journaling enables NP students to reflect and retain their clinical experiences and become an active participant in the learning process and reinforcing theoretical content. In addition, the student has the opportunity to express thoughts, feelings, questions, and beliefs they may have not been able or willing to express verbally during the clinical day. Utilizing careful and purposeful guidance, the clinical journal presents opportunities for both evaluation and critical reflection of clinical performance and previously held assumptions related to mental health, thereby engaging students in the learning process. Journaling is a mechanism for self-awareness and awareness of others in which the student can demonstrate empathetic understanding and humility, providing for a deeper meaning of their experiences. It helps NP students to reflect on complex issues including cultural and societal issues about mental health, social justice, and patient rights. It is also a mechanism by which clinical educators can incorporate and reinforce critical nursing concepts and engage with students on significant learning experiences while evaluating course- and site-specific learning objectives.

REVIEW OF LITERATURE

In their seminal texts, Dewey¹ and Schön² identified reflection as an active process, an operationalization of thoughts followed by a rationalization to reject or accept those thoughts in the future. Schön² further validated reflection-in-action and reflection-on-action as 2 important concepts specifically suited for nursing. Reflection-in-action refers to a concurrent critical analysis of an action or event and evaluating for the most effective intervention. Reflection-on-action is more of a retrospective critical analysis of an action or event after it has occurred to explore alternative ways of response in similar situations.² Nursing research early this century suggested nursing students benefit the most from instructor orientation and guidance when utilizing reflective journaling for evaluation and critical reflection of clinical performance.³⁻⁶ Additional early research asserted student nurses in a psychiatric rotation must be aware of self and personal bias to establish a therapeutic relationship with patients. Through clinical journals, students reflected upon personal preconceived bias that caused them to explore attitudes and foster change for personal growth.⁷

In the current nursing educational climate, there are some geographic areas replete with nursing students vying for clinical experiences to practice skills and hone clinical judgment. Therefore, some nursing curricula use high-fidelity simulation to augment or even replace clinical experience. Use of reflective journaling with progressive high-fidelity simulation scenarios in a diploma medical-surgical course identified 8 positive themes, including confidence, improved clinical judgment, and transfer of knowledge to the clinical setting.⁸ Ross et al⁹ recognized clinical experience alone in the field of mental health does not accomplish all desirable learning objectives and critical self-reflection necessary for growth in practice. Students in a mental health course using reflective journaling augment knowledge, personal attitude exploration, and skills development. Moreover, the strategy of incorporation of reflective journaling provides an individualized tool for the instructor to evaluate experience, logical thought processes, and a focused needs analysis for the student in a mental health setting. Ross et al⁹ concluded that,

within a welcoming atmosphere in a community mental health course, students reflected more compassion and understanding toward the mental health community, as well as transforming negative feelings of the students. Recently, Raterink¹⁰ examined the use of reflective journaling in an NP program to guide the student to identify certain critical thinking habits of the mind for a deeper understanding of how students think and feel during a clinical scenario. The results from this qualitative study were favorable as students expressed an enhancement of their clinical decision skills by honing their critical thinking processes over time.

Allan and Driscoll¹¹ reported a 3-fold benefit of reflective writing in general education as both the improvement of student learning and program assessment, and the opportunity for the professional growth of faculty. In their study, using a triangulation method for the assessment findings from student papers, reflective essays, and instructor course materials, the method naturally highlighted the students' learning needs and processes. Faculty members were then able to set their own learning needs agenda to participate in continuing education or self-directed learning activities to further develop and stay current with their personal teaching skills. In most of the recent literature, reflective journaling stands the greatest chance of being a successful pedagogy with strong orientation, expectations, and goals for the student, as well as a rubric for guidance and feedback from the instructor.^{6,12-14} Reflective journaling has become a more commonplace pedagogy used in nursing education to highlight learning and critical thinking development.

JOURNALING IN A PSYCHIATRIC CLINICAL COURSE

Mental health is a field of nursing in which many students, undergraduate or graduate, may be initially hesitant and uncomfortable. Because the patient population can be unpredictable and media portrayals of mental illness are sensationalized, the student is often anxious yet curious about attending the clinical site. The ideal clinical psychiatric practicum contains a variety of clinical experiences, ranging from pediatric to adult and acute inpatient to outpatient. Before the start of the clinical rotation, students

complete a quiz essay titled, “A Letter to Myself: How I Feel About Mental Health Nursing.” Beginning with thoughts about mental health nursing and personal course goals and concluding with their thoughts about mental illness, culture, and stigma, both personally and in society, this essay forms the basis of the clinical journal and serves as a point of reference for the final journal entry.

THE MENTAL HEALTH NURSING ASSESSMENT

The mental health nursing assessment presented (see [Box 1](#)) is generally based on the course textbook and conducted in undergraduate students’ clinical rotations on acute inpatient psychiatric units with a variety of mental illnesses; however, it can be

modified by faculty for a variety of outpatient settings and for the advanced practice student. Privacy is maintained as each student adheres to policies of the Health Insurance Portability and Accountability Act from both the university and clinical agency. In addition, no identifying patient information is collected during the assessment or interview. The contents of the clinical journals are kept confidential between the student and faculty. The student lists the patient’s diagnosis according to the *Diagnostic and Statistical Manual of Mental Disorders-5*, along with a description of the milieu in which the assessment was completed. For novice nurses, the mental health assessment utilizing a preset number of prescribed questions on the assessment decreases the students’

Box 1. Assessment Form

1. Assess orientation to time, person, and place.
2. Assess recent and remote memory, judgment, and affect. Ask them simple recall questions.
3. What brings you to the hospital today (ie, at this time)? What happened to bring you here? (Ask this to assess if the patient has insight into their illness.)
4. Have you been hospitalized or treated for a psychiatric illness before? What happened?
5. What medications are you currently taking? Who prescribed them and when? Are you experiencing any side effects?
6. Are you taking your medications as prescribed? If not, why?
7. Are you now using or have you used street drugs? Which ones?
8. Do you drink alcohol? What kind, how much, how often?
9. Do you smoke? How much?
10. Do you have difficulty putting your thoughts together? How?
11. Do you hear voices that other people do not hear? If so, do they seem to come from within your head or from outside your head? What do they tell you?
12. Do you see things that other people do not see? Describe?
13. Do you feel as if you have special powers? Explain.
14. Do you feel like other people are out to get you? Do you get along well with other people?
15. Do you have thoughts of harming yourself or others? Explain. Do you have a plan? Will you agree to let a staff person know if you feel you will hurt yourself or someone else? (Contract with patient and notify RN immediately.)
16. Were you abused physically, sexually, emotionally as a child? (Ask each separately.)
17. Tell me a little about your family. (Significant other) Who are you closest to? Who do you trust the most?
18. Have you been eating regular meals? How is your appetite?
19. Do you have difficulty falling or staying asleep? How many hours do you sleep each night?
20. Do you have any medical problems that I need to be aware of (hypertension, diabetes, seizures, problems with your heart or lungs)?
21. What do you want to get out of this hospitalization?

anxiety while encouraging further exploration of pertinent mental health topics, allowing for the practice of therapeutic communication skills. Assessment scripts can be adapted from a variety of sources to meet the needs of the patient population at the clinical location. After the clinical interview, the student completes an assessment of the patient's appearance, behavior, speech, mood, disorders of the form of thought, perceptual disturbances, cognition, and ideas of harming self or others, utilizing descriptive terminology found in their course textbook or assigned readings. The student lists the patient's psychiatric medications, including the classification of the medication, the reason the client is taking the medication, and any associated major side effects or drug levels. The assessment concludes with the student demonstrating synthesis of knowledge via a comprehensive shift note based on their findings.

THE MENTAL HEALTH CLINICAL JOURNAL

Reflection of Assessment Experience

Each mental health assessment is filed in the student's clinical journal. Immediately after the assessment the student enters 4 reflective components related to their clinical experience. The student is asked to reflect honestly about their patient and their assessment experience through a variety of reflective questions (see [Box 2](#)). Utilizing analytical skills, the

student reviews the assessment and considers various community resources the patient may require after discharge or to assist them in the outpatient setting. Emphasizing therapeutic use of self and therapeutic communication techniques, students are also asked to reflect on what went well and did not go well during the clinical interview. In addition, students provide examples of communication techniques found in their course textbook that could have enhanced the effectiveness of their interview.

An additional journal assignment is the reflective analysis of the student's clinical performance based on the college's unique clinical behaviors, a set of clinical expectations on which all students are evaluated by their clinical faculty during midterm and final evaluations. The clinical behaviors include, for example, caring behaviors, respecting patient rights, responsibility and accountability, and promoting safety, as well as organizational skills, punctuality, appearance, and technology skills. Clinical behaviors may also be determined by the faculty preceptor, or be a unique set of clinical expectations of that site or course. This review not only allows reflection, it reinforces the clinical expectations of the faculty.

After clinical behavior reflection, the student is asked to research a member of the interdisciplinary mental health treatment team encountered during the clinical day. The student researches the following questions: (1) What is their job responsibility? How

Box 2. Acute Care Reflection

What is the patient's diagnosis?

1. Was the psychosocial assessment tool you used appropriate for the patient? Explain your answer (diagnosis, communication issues, etc.). If not, what other assessment tools might be appropriate for this patient? Why?
2. What interventions or community resources might be necessary to assist this patient after discharge?
3. What was your first thought about your patient? (BE HONEST). What were your thoughts of your patient after your assessment?
4. Identify 2 therapeutic communication techniques (found in your textbook) that were effective and utilized during the conversation with your patient.
5. Describe a portion of your conversation that was ineffective. Which therapeutic communication technique (from your textbook) could have been utilized to increase effectiveness?
6. Reflect upon the main site clinical objectives. Did you meet or not meet the objectives? Why or why not?

do they interact with patients or the nurse? How do they contribute to the interdisciplinary team? (2) What education is required to obtain the job? (3) What are the licensure or certification requirements for the job? This investigation emphasizes that mental health nursing is a highly collaborative and inter-professional discipline.

The final portion of the journal assignment is to research evidence. The student researches one current, innovative, evidence-based article related to their patient's diagnosis, medications, treatment, or new/novel therapies. In the journal they provide a half-page summary of the article's research methods and important findings. After the summary, the student reflects on the article's importance to them as a nurse as to the patient in their assessment. This emphasizes evidence in nursing while allowing the student to embed the information into memory by projecting forward the importance of the information to their future professional career. The summary concludes with the article's reference.

Community-based Assignments

In addition to acute-care clinical experiences, students in a mental health practicum may have the opportunity to attend a variety of community-based mental health clinical sites, such as adult daycare for

cognitively impaired older adults, a day program for developmentally disabled adults, or group therapy for adults and adolescents with dual diagnosis. After these experiences, the student is required to write a short directed reflective assignment (see **Box 3**). The purpose of the reflection is to ensure evaluation of the clinical site for critical nursing concepts, such as patient-centered care, informatics, interdisciplinary teamwork, and the use of evidence-based practice in the clinical setting. Based on the limited time and scope of care in community-based clinical sites, a full mental health assessment is not completed.

Final Reflective Assignment

The final component of the clinical journal is a reflective assignment similar to the first quiz essay entry. The final entry begins with a reflection of their initial thoughts about the mental health practicum and personal learning objectives. The student reflects upon change that may have occurred after taking the mental health course, such as change in thoughts about mental illness/wellness or thoughts about the cultural and societal aspects of mental health. The student also reflects upon each set of site-specific learning objectives. Finally, the student explains their most valuable learning experience during the clinical practicum.

Box 3. Community Assignment Reflection

Summarize your clinical day (areas where you were involved, the types of patients you saw, what you did, what you thought about the site). Provide an example of each of the following:

- a. The provision of patient-centered care. (How involved were staff in the patient's care? What kinds of activities did you see? How did you spend your day interacting with the patients?)
- b. The exhibition of teamwork and collaborative care across medical disciplines. (Who was there besides the nurses? What did they do for the patients? How is the care they provide different from what the nurses did?)
- c. The incorporation of evidence-based practice. (What types of therapies did you see being implemented [eg, cognitive/behavioral, pharmacologic, music, group, occupational, art, etc.]?) Was there anything new or interesting being done to treat the patients at the site?
- d. The utilization of informatics tools. (Did you see computers? What type of charting did you see? Any use of electronic tools, iPads, etc.?).

CONCLUSION

When journaling is utilized early in the learning process, faculty have the opportunity to evaluate the NP student's critical thinking processes and judgment. Clinical practice, no matter the course or level of the student, may be a source of stress and anxiety for students. Students experience high levels of anxiety during clinical practice to the point of interfering with learning and negatively impacting mental health.¹⁵ Although privacy is respected and journals are only read by supervising faculty, students who are identified as having difficulties can be supported by the faculty preceptor before a significant issue occurs, potentially decreasing student attrition from nursing programs. Similarly, students who are misunderstanding information can be corrected early through additional guided readings and intervention from faculty. Journaling allows for a safe space for expression of thoughts and feelings while allowing the student to attach meaning to experiences. This enhances the feeling of "caring for ourselves" when uncomfortable encounters and experiences occur, allowing the student to alleviate stress through writing. In addition, journaling allows for a new perspective, enhancing transformation of previously held thoughts or beliefs and encouraging self-awareness. By understanding their false assumptions about mental illness, students begin to demonstrate empathy and understanding in their journal entries.

The format of a journal can encompass a wide variety of possibilities, depending on the learning objectives related to the course or clinical site. For this example, this journal format is guided and directly reflective of the mental health clinical assessment and clinical experiences of the undergraduate student. The journal is also used in the evaluation of students' clinical competence as well as the assessment of a variety of nursing concepts. In this respect, each and every journal assignment created by faculty can be tailored specifically to meet the needs of course and/or clinical objectives. The clinical site reflections provide faculty preceptors with valuable input about the individual site and their experiences, including how the experience at that site could be improved. Through the students' research for new evidence, faculty are also kept informed and up to

date on the newest practices related to psychiatric nursing. Journaling with NP students could incorporate specific competencies, including collaboration, consultation, ethical decision-making, and direct clinical practice, as well as role transition.¹⁶ In addition, practicing NPs can utilize journaling to analyze their skills, accomplishments, and implications and actions about specific incidents, fostering the development of lifelong learning.¹⁷

Because psychiatric nursing is often a specialty area of nursing care that is uncomfortable to students—in part due to its unfamiliarity, stigma, and care for patients who may have unpredictable behavior—it presents the ideal opportunity for faculty to incorporate reflection. However, the benefits of journaling are not limited to mental health education. The journal as outlined in this study can be applied to a variety of courses and settings. The inclusion of journaling in new nurse training programs can help to identify and assist newly licensed nurses during their transition to professional practice, potentially ameliorating negative financial, staffing, and patient-care effects for all stakeholders involved in the training and staffing of nurses. Journaling in education is not a new educational strategy; however, when employed in a variety of courses or settings, it can be exceptionally valuable for all those involved. Our own future research includes implementation of a large-scale qualitative analysis of student mental health clinical journals. **JNP**

References

1. Dewey J. *How We Think*. Buffalo, NY: Prometheus Books; 1991.
2. Schön DA. *Educating the Reflective Practitioner: Toward a New Design for Teaching and Learning in the Professions*. San Francisco, Ca: Jossey-Bass; 1987.
3. Bilinski H. The mentored journal. *Nurse Educ*. 2002;27:37-41.
4. Craft M. Reflective writing and nursing education. *J Nurs Educ*. 2005;44(2):53-57.
5. Kuiper RA, Pesut DJ. Promoting cognitive and metacognitive reflective reasoning skills in nursing practice: self-regulated learning theory. *J Adv Nurs*. 2004;45(4):381-391. <http://dx.doi.org/10.1046/j.1365-2648.2003.02921.x>.
6. Lasater K, Nielsen A. Reflective journaling for clinical judgment development and evaluation. *J Nurs Educ*. 2009;48(1):40-44. <http://dx.doi.org/10.3928/01484834-20090101-06>.
7. Landeen J, Byrne C, Brown B. Journal keeping as an educational strategy in teaching psychiatric nursing. *J Adv Nurs*. 1992;17(3):347-355.
8. Bussard ME. Clinical judgement in reflective journals of prelicensure nursing students. *J Nurs Educ*. 2015;54(1):36-40.
9. Ross C, Mahal K, Chinnapen Y, Kolar M, Woodman K. Evaluation of nursing students' work experience through the use of reflective journals. *Mental Health Pract*. 2014;17(6):21-27.
10. Raterink G. Reflective journaling for critical thinking development in advanced practice registered nurse students. *J Nurs Educ*. 2016;55(2):101-106.

11. Allan EG, Driscoll DL. The three-fold benefit of reflective writing: improving program assessment, student learning, and faculty professional development. *Assessing Writing*. 2014;21:37-55. <http://dx.doi.org/10.1016/j.asw.2014.03.001>.
12. Cowan J. Noteworthy matters for attention in reflective journal writing. *Active Learn Higher Educ*. 2014;15(1):53-64. <http://dx.doi.org/10.1177/1469787413514647>.
13. Ruiz-López M, Rodríguez-García M, Villanueva P-G, et al. The use of reflective journaling as a learning strategy during the clinical rotations of students from the faculty of health sciences: an action-research study. *Nurse Educ Today*. 2015;35(10):e26-e231. <http://dx.doi.org/10.1016/j.nedt.2015.07.029>.
14. Sherwood G, Horton-Deutsch S. *Reflective Practice: Transforming Education and Improving Outcomes*. Indianapolis, Ind: Sigma Theta Tau International; 2012.
15. Melo K, Williams B, Ross C. The impact of nursing curricula on clinical practice anxiety. *Nurse Educ Today*. 2010;30:773-778. <http://dx.doi.org/10.1016/j.nedt.2010.02.006>.
16. Stewart JG, Johnson MI. Clinical education in nurse practitioner programs. In: Stewart JG, DeNisco SM, eds. *Role Development for the Nurse Practitioner*. Burlington, Ma: Jones & Bartlett; 2013:133.
17. Beauvais A. Role transition: strategies for success in the marketplace. In: DeNisco SM, Barker AM, eds. *Advanced Practice Nursing: Evolving Roles for the Transformation of the Profession*. 2nd ed. Burlington, Ma: Jones & Bartlett; 2013:626.

All authors are affiliated with the Capstone College of Nursing at the University of Alabama in Tuscaloosa. Monika L. Wedgeworth, EdD, RN, is an Assistant Professor of Nursing at the Capstone College of Nursing. She can be reached at mwedgeworth@ua.edu. Sheree C. Carter, PhD, RN, is an Assistant Professor of Nursing at the Capstone College of Nursing. Cassandra D. Ford, PhD, RN, is an Associate Professor at the Capstone College of Nursing. In compliance with national ethical guidelines, the authors report no relationships with business or industry that would pose a conflict of interest.

1555-4155/17/\$ see front matter
 © 2017 Elsevier Inc. All rights reserved.
<http://dx.doi.org/10.1016/j.nurpra.2017.01.011>