The Analysis of Professional Practices: A Tool for Growth

By Margot Phaneuf, R.N., Ph.D.

Introduction

Nurses, like teachers, are considered to be professionals, the former in caregiving and the latter in education. Being a professional entails certain qualities and responsibilities such as commitment, consistency, judgement as well as an identity or sense of belonging. Teachers are accountable for the quality of their work and for the services they render to society in general.

Patients and the parents of students have high, clearly defined expectations regarding the theoretical and practical skills of professionals and how they show respect to their clients. Generally speaking, users expect professionals to refer to an ethical framework which guides their values, commitment, critical thinking and evolution.

Requirements

Being a professional entails certain requirements. This status confers upon the individual relative autonomy in carrying out his duties and in expressing his behaviour, in conformity with certain rules or guidelines. However, there are no specific rules governing every situation. Nurses and teachers must evaluate a given situation and use their judgment to proceed with the appropriate intervention and attain their objectives.

Even properly understood, professionalism is demanding. Not only does it require exemplary performance, it also entails ongoing questioning about the nursing profession and nursing practices, and adapting to new knowledge or trends in the healthcare system. Basically, nurses need to be guided and motivated in their professional evolution. This is what gives meaning to
our work while allowing us to confront our core values with the reality of our environment so that we may adapt them to provide increasingly improved services.

Caregiving and education professionals have a clearly defined role which they assume under the title of nurse or teacher and which they grow into through their overall vision, duties and acts of human compassion towards patients and students alike.

**Essential components of professionalism**

The term *professional* is in itself a difficult concept to grasp. Often overused, it can mean belonging to a specialized group of workers or to an order which regulates the activities of individuals working in a highly skilled sector potentially requiring both responsibility and accountability. A professional, used derogatively, can also mean a sex trade worker. However, to make matters complicated, the teachers and educators who provide a very important service to society and to our future workers are not legally designated *professionals*. Yet one cannot refer to *professionalism* without including teachers in this perspective because of their specific and valuable role to society as a whole.

*Professionalism* is exercised in accordance with two major components: skills and image. As regards image, we assume that the teacher will be charismatic and exercise the leadership required by her institution. The nurse who deals directly with the patient, who listens to his suffering and who soothes him by extending her hand and touching his forehead is showing a positive image. The teacher casts a positive image when she demonstrates commitment, pays attention to the student and helps him evolve personally and professionally. The image we have just described is perhaps a bit idealistic, but it must be upheld as it is the very essence of these helping professions.

As for skills, this component refers to the requisite knowledge to exercise the teaching or nursing professions. Skills are practical, organizational and technical. They allow the individuals exercising these professions to deal with a complex web of situations that can and will arise and to respond accordingly. The skills-based approach also encompasses knowledge, know-how, interpersonal skills and ethical values. As stated by the *Council of European Professional Informatics*, “professional skills are successively linked by circumstances to:
- **Know-how**: techniques, experience;
- **Know-what**: the complexity of a problem and understanding its aspects and structure;
- **Know-whom**: networking, knowing who is the gatekeeper to knowledge or other skills;
- **Know-how-much**: knowing one’s personal and professional limits;
- **Know-why**: knowing the purpose of one's actions;
- **Know-when**: being able to detect opportunities.”

*(Jean-Gilles Boula, Comment renforcer le processus de professionnalisation dans la pratique soignante? [http://www.gfmer.ch/Presentations_Fr/processus_professionnalisation.htm]).*

### The need to question one’s actions

Professional requirements force us to critically analyze our actions in order to continuously upgrade our skills and knowledge in view of offering better services. In nursing and education, assessing professional practices is a strategy which allows us to review our methods at the individual and team levels without compromising our methodology. Various institutions, including government departments or the OIIQ, provide highly developed scorecards or self-assessment tools. Although beneficial, these systems are hard to implement. They are often perceived negatively and can be superficial or have little effect at the individual level.

Our fast-paced society, technological improvements, emerging organizational trends, and the requirements of patients and students who are increasingly aware of their own needs and rights are all strong incentives to question our actions in order to evolve personally and professionally.

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### Analysis of professional practices

- A metacognitive undertaking of professional training carried out in the work group.
- An informal method to evaluate the quality of care offered on a modest scale without methodological complications.
- Casts a critical glance on certain elements of our work to analyze and improve them.

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### What is analysis?

- A thoughtful undertaking, a way of seeing what we are doing and gaining in-depth knowledge of our actions in order to dissect their competents and examine them in detail to evaluate their strengths and weaknesses to be corrected.
- In this approach, analysis is an intellectually responsible method.
after the English psychiatrist who used this method to train the physicians who fell under his responsibility. Since then, this analysis has become popular among various groups of health and social sector professionals who have adapted it in various forms to their needs.

**Terminology**

It is important to first understand what we mean by *practice*. Contrary to the popular and superficial use of the term, "practice, even though it encompasses the idea of application, does not immediately refer to acts, but rather to the procedures to fulfill them. *Practice* is at once a procedural rule (technical, moral, religious) and its implementation or application. It is the dual dimension of the concept of *practice* which makes it valuable. On the one hand, there are the behaviours and languages; on the other, through rules, objectives, strategies and ideologies are invoked.” (Jacky Beillerot [http://www.cahiers-pedagogiques.com/article.php3?id_article=143](http://www.cahiers-pedagogiques.com/article.php3?id_article=143))

Thus, through its application by and for human beings, *practice* encompasses a social component which acts deeply upon the targeted subjects, patients or students; that it why the use of the term *practice* should not be restricted to its purely materialistic and technical meaning. Instead, one should view it as an accepted way of acting through clearly identified values, principles and ethics.

The meaning of the term *analysis* might appear obvious, yet it is still worth examining. *Analysis* means undertaking a thought process, reflecting upon our actions, deepening their meaning, and dissecting and evaluating their components to assess their strengths and weaknesses. To analyze our practices is to examine our everyday actions, our manner of dealing with others at the interpersonal, organizational and technical levels. The method of analyzing professional practices involves examining our behaviour, comparing results with set objectives, putting our interventions into perspective with the established values of our profession or the humanistic, scientific or professional principles which regulate it.

“Analyzing is an undertaking and a thought process which involves the division, fragmentation and compartmentalization of a subject. Tools or procedures to fragment or dissect the subject are essential; without them, there would be no analysis (TRANSLATION).”

Analysis therefore involves recognizing the components as a whole and examining them as separate ideas. As Beillerot noted, what makes analysis difficult is that in human exploits, the whole is greater than its components. Therefore, it must be remembered that analysis is a broad undertaking and a thought process. (Beillerot, Jacky. *L’analyse des pratiques professionnelles pourquoi cette expression?* [http://www.cahiers-pedagogiques.com/article.php3?id_article=143](http://www.cahiers-pedagogiques.com/article.php3?id_article=143)).

**Intervention method in the analysis of professional practices**

The intervention method in the analysis of professional practices consists of simply forming a reflective work group, much like that proposed by Donald Schön. The difference is that a reflective practitioner continuously exercises the ability to judge and evaluate situations whereas the analysis of professional practices is carried out during periodic meetings. It might be said the analysis helps professionals develop reflective, critical-thinking abilities.
The reflection carried out in the analysis of professional practices positions nurses and teachers in relation with their profession, knowledge, know-how, interpersonal skills and self-identity. It can also be seen as a reaction to hyper-technologization, especially in healthcare.

Developing an retrospective analysis of our actions can be considered developing a knowledge tool which must accompany teachers and nurses in their duties. As professionals accountable for our actions, we must be able to foresee methods to solve problems, to acknowledge our own doubts and shortcomings, and to see what we need to improve. That is why we must resort to a self-analysis method. Here is another way of putting it:

Reflecting upon our practices allows us to develop an insightful way of carrying our duties which not only calls upon awareness of our actions but also brings our professional trajectory into our own hands.

The analysis of professional practices is not void of common-sense reasoning; in fact, it enhances it by reviewing an individual or team’s actions, by putting practical data into question, and by scrutinizing events, accomplishments and omissions. This analysis is not limited to data-mining as it also favours methods for seeking improvement through benchmarking and the gathering of conclusive data for past interventions or resolved problems whose methodology one wishes to improve. The coaching or mentoring of an individual or the team members might be the next step. Analysis might also lead from thought to action. (Phaneuf. Coaching: a Tool for Teachers. Infiresources, under the rubric "Being or Becoming a Teacher" in the Educational Crossroad.: http://www.infiresources.ca/fer/Depotdocument_anglais/Coaching-Tool_for_Teachers.pdf

**Requirements of analysis**

Becoming a reflective practitioner or analyzing one’s practices is demanding. “Not giving a damn” is not an option in such a context. Confronted with a substandard action or an unresolved problem, the nurse cannot state: “The patient was uncooperative” or “I couldn’t do any better under the given circumstances.” The teacher cannot simply get away with: “The student refused to work.” An analysis forces nurses and teachers to examine how they acted and how the persons they dealt with reacted. Nurses and teachers must assume their responsibility and seek alternate behaviours for future actions.
Who should participate in the group analyzing professional practices?

All members of a teaching or nursing team should meet to form a group to analyze professional practices. The decision to form the group should be voluntary, absolutely free of social pressure from other team members or authorities. Evolution and obligation do not go hand-in-hand.

There are many ways in which these groups can function to adapt to the nature and needs of their environment. Some can be carried out after hours; others are led by an external resource person. Some groups are founded on a psychoanalytical or technical approach. Some consist only of members belonging to the same profession while other groups are multidisciplinary and are composed of individuals evolving in various professions.

Organizing meetings

Professional meetings are practical in helping a group evolve. They must be carried out in a sustained manner, once or twice per month, according to the wishes and availabilities of group members. The duration of meetings must be limited to predetermined schedules. Self-discipline can make the meetings efficient in a one-hour period. It is important that these meetings be agreeable and friendly, and that individual members never be singled out for their actions. Meetings are a time for assistance, and individual and team growth carried out in a comfortable setting.

To guarantee that the group functions properly, be it in healthcare or education, members must meet periodically with a predetermined schedule and agenda. Exchanges must remain democratic. Roles such as moderator or secretary should be assigned beforehand and should also be alterable within the group. The assignment of these duties might appear unrewarding, but they play a significant role. Personal evolution can result from such an experience. The moderator can be, depending on the members’ preference, the team leader or any other person who has higher training or a defined status within the group as a result of an occupied position or of demonstrable leadership.
Which subjects should be covered?

During analysis meetings, nurses and teachers can cover a broad range of subjects. Although not essential, problematic situations can be identified and monitored. The team's operating methods can be scrutinized by each member. A single topic is covered in depth during the meeting, and improvements should be sought. If the topic is not fully covered or further research is required, it can be brought up again in a subsequent meeting. It is essential to reach a conclusion regardless of the time it may take to do so. An unresolved topic will fail to generate results and might affect the team motivation. It is important to keep records of the subjects covered, of the main arguments that are invoked, and of applied solutions for referential or monitoring purposes, if necessary. The subjects that are covered should focus on problems which can be solved. Dealing with a subject that cannot be solved is inevitably a waste of time.

Below are a few examples of situations that can be dealt with.

For teachers:

- How do we welcome a new student admitted during the academic year?
- How do we teach in a clinical setting? What needs to be improved?
- How is teaching carried out in a laboratory? How can students be motivated to apply their skills/techniques?
- Are we focusing too much on student submission to the detriment of the development of leadership skills? Why? How can we change this practice?
- How can we integrate ICTs in our teaching? How do we go about doing so?
- Does our use of ICTs serve a valuable purpose or is it just a gadget in vogue?
- How does the team view ongoing training and what should we do?
- How do we notice that a student is experiencing learning problems?
- How do we integrate research into our teachings?
- How can we get a better grasp of classroom dynamics? How can we identify natural leaders among our students, including those with either a positive or a toxic influence?
- Do we grant sufficient importance to ethics in caregiving? What are our greatest weaknesses?
- What do we do for a teacher who must teach a new course in a field in which she is less knowledgeable?
- What do we do when the team is dysfunctional?
- How do we react to the undesirable behaviour exhibited by certain students? How do we manage classroom discipline?
- Are there skills, organizational principles or theories which we need to improve?
- Is there anyone on the team who can help others upgrade their skills?
I’d like to go over physical examinations.

I’d like to cover interactions with the patient and his family.

We need to review how we welcome patients.

Do you have any idea which subject should be covered?

What do you make of the notes to the records?

Choice of subjects

For the caregiving team:

- How do we welcome new patients?
- How do we welcome their families?
- How do we foster a sense of belonging within the team and create room for personal growth?
- How do we behave in a multidisciplinary team?
- How do we assume our leadership?
- How do we integrate a new nurse to the team? A recent graduate?
- What kind of support will we give her?
- What importance do we give to research in nursing?
- How can we implement and sustain research?
- How do we evaluate our handling of records?
- How do we assess our way of educating the patient and his family?
- Do we master observation and clinical examinations?
- How can we improve our way of acting during a conversation?
- How do we broaden our knowledge of the patient and his family?
- How does the team accept a complaint or criticism from the patient or his family?
- How do team members transmit information among each other about the patient when changing shifts?
- Are we seeking factual data which can help us when seeking improvements?
- Are there skills, organizational principles or theories which we need to improve?
- Is there anyone in the team who can help others upgrade their skills?
I enjoy the festive mood of these meetings. Each must assume his or her place. What's today’s topic? The mood should be democratic. I think that… I’ve found something of interest…

**Functioning of professional practices analysis meetings**

Carrying out a meeting

The meeting should ideally be carried out in a quiet setting in which a festive mood can be established with coffee and sweets. Each member should have an alternating role among the following:

- Preparing written or verbal invitations to the meeting;
- Reserving the room;
- Preparing the room, if necessary;
- Ensuring that snacks are available;
- Identifying topics which group members can cover;
- Taking minutes of the meeting;
- Summarizing the meeting;
- Moderating the meeting;

Roles within the team

- Moderator
- Secretary
- Researcher
- Taking a subject
- Responsible for finding a subject
- Responsible for preparing the room
- Responsible for invitations
- Responsible for preparing the room
- En alternance
Functioning

During the meeting, the moderator introduces the problem or topic and allows every member to speak in order to define and analyze it in depth. Discussions are led by the moderator. Strategies such as using case studies, critical incident studies, simulations, comparisons, benchmarking, circept (team mapping) for dialogue analysis, lifelines, genograms, or sociograms will enliven the debate. (Phaneuf. *Le circept, le génogramme, le sociogramme et la ligne de vie*. Infiresources, Carrefour clinique, section Santé mentale et communication: http://www.infiresources.ca/MyScriptorWeb/scripto.asp?resultat=961266).

- Does everyone attempt to identify what needs to be improved? How is this accomplished?
- Who should act? Do we have all the necessary information?
- Is a library search necessary?
- Is an on-line search required?
- Who will carry it out?
- What will our subsequent action plan be?
- Are further meetings or undertakings necessary?
- Should the topic be covered again in a subsequent meeting?
- To whom will roles be assigned?

In certain environments, the participant prepares the topic selected by the group and provides valuable information for the ensuing discussion. There are no set rules for meetings covering the analysis of professional practices. Each group determines its operating methods according to its needs and possibilities.

Implementing improvements

Analyzing, comparing and making suggestions for improvements are insufficient in themselves; action is required. Many means are available. The team can decide to carry out action research to implement the changes that it deems necessary. Action research favours evolution through the integration of a systemic research process which involves the entire team. Teaching a concept or skill is also a possibility. Coaching and mentoring by a team member or external resource person can also be carried out. Some *simple* improvements might require consent from the appropriate authorities.
What should be avoided?

The professional practices analysis group is not intended for blathering or individual or group therapy. It is not a social gathering intended to spread rumours. The team should be able to listen to its members and demonstrate support and empathy while keeping in mind that emotional support is not its purpose. The group is built for evolution and professional assistance; an occasional reminder might be necessary. Meetings are not intended to produce piles of documents or to evaluate individuals. The group should strive to stay on topic.

The meeting is not a place to raise subjects that can anger or lay blame among individuals. The moderator should strive to keep the team in line with facts, not judgments. Tact and diplomacy are essential to the meeting. However, if problems or conflicts emerge during the meeting, one must be prepared to deal with it with a team member acting as a mediator.

Conclusion

The analysis of professional practices makes it possible to shed light on everyday activities and nursing and education theories. It helps build awareness and allows members to gain a deeper understanding of the meaning of their activities. Work transformation strategies can thus be implemented, leading to creativity and evolution. Such accomplishments reinforce the participants’ professional identity. Anything which underscores and makes our actions, their meaning, our responsibilities, and underlying ethics clearer and more acceptable, is constructive at the professional identity level.

It is a time to reflect upon the meaning we ascribe to our work, to how we seek to better understand the rationality of our actions and why we act the way we do. This allows us to identify our attitudes, strengths and weaknesses (http://probo.free.fr/ecrits_app/A_propos_APP_Vie_Pedagogique.htm - ftnt5). Distancing ourselves from our everyday tasks allows us to see things more clearly.

The analysis of professional practices is a group undertaking. As such, it allows the group to identify skills which are commonly shared and which improve task delivery. The overall effect contributes to developing professionalism. (Marguerite Altet, Développer le «savoir analyser » à l’aide de «savoir-outils» http://eduscol.education.fr/D0126/analprat_2.htm )

Group dynamics play a critical role. Respectful comments, exchanging suggestions, valuable input – all contribute to a positive and educative experience inspired from the buddy system. This favours the transmission, mutualisation and assimilation of knowledge and skills upgrading. Being competent, however, is not a choice; it is an ethical obligation. The informal analysis of professional practices reinforces it. (Le syndic de l’Ordre des Infirmières et infirmiers du Québec : http://www.oiiq.org/uploads/periodiques/Journal/vol2no4/ss01.htm).

One may wonder if minute action can generate results. In caregiving as in other professions or circumstances, a minor variation can lead to greater than anticipated results. This occurrence in meteorology is known as the butterfly effect. In caregiving and teaching, this can mean that changing ordinary behaviour among certain individuals can have a snowball effect at a much larger scale.
Once upon a time, there was a butterfly who provoked a storm by battering his wings…

Once upon a time, there was a nurse who changed the mood in her hospital for the better by putting her hand on her patients foreheads…

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These texts will be soon available in English.

