Overview of Critical Reflective Work Behavior in Internship Nursing Students

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Abstract

Informal learning in the work/practice environment can be seen through critical reflective work behaviour, namely a series of activities to optimize individual and group practice. This study aims to describe critically reflective work behaviour(CRWB) and its dimensions, namely individual CRWB, CRWB insocial interaction, openness to new findings and cross-checking information on internship nursing students of the Faculty of Nursing, Universitas Padjadjaran. This research design is descriptive quantitative with a modified critically reflective work behaviour questionnaire instrument. The instrument test is a content test through expert judgment, face validity on 23 respondents with good test results, construct test (r = 0.41), and reliability test (Cronbach's Alpha = 0.765). The study population was internship nursing students from the Faculty of Nursing, Padjadjaran University (N=208). A total sampling technique did sampling with a response rate of 74.5% (n=155). Ethics permit number 513/UN6.KEP/EC/2021 from the Research Ethics Commission of Padjadjaran University Bandung. The results showed that the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran, tend to have high PKRK (56.1%). Social interaction is in the moderate category (69%). When viewed on each dimension, high results were also obtained on the individual CRWB dimension (72.4%), the openness dimension to new findings (56.8%), and the information cross-check dimension (72.9%). A high CRWB shows that students can adapt to changing circumstances and construct knowledge actively and personally. Suggestion: It pays attention to the peer evaluation method because it relates to the CRWB dimensions in social interactions, including sharing critical opinions, asking for input from others, challenging group thinking, and being open about one's mistakes.

Keywords: Critical reflective work behaviour, informal learning, self-reflection.

Introduction

Nursing is a form of professional service that is an integral part of health services. Professional nurses are synonymous with quality nurses, who provide services by nursing professional standards and can be accepted by patients/clients. Nurses' professional abilities can be improved through continuing education, research activities, and research results in practice (Association of Indonesian Nurses Educational Institutions. 2016). Continuing nursing education is an extension of a continuous professional development program. This program is at the core of lifelong learning and is a vital aspect of updating the knowledge and skills of nurses (Mlambo, Silén, & McGrath, 2021). This program can be applied both in formal and informal learning.

Different from formal learning, which is generally done in the classroom, informal learning is often initiated and managed by each individual in a work/practice environment with the primary objective of developing knowledge and skills (Noe, Tews, & Marand, 2013; Rijn, Yang, & Sanders, 2013; Tews, Michel, & Noe, 2017). Informal learning occurs more or less as an unintentional by-product of work activities or becomes 'deliberate' through reflection on an event (Groot et al., 2012). One of the benefits of informal learning is the development of cultural competence in health workers (Watt, Abbott, & Reath, 2016). Given the results of research from Muhammad (2018), which found that the knowledge and level of cultural competence in nursing professional students at the Faculty of Nursing, Universitas Padiadiaran is still low. The authors feel that there is a need for attention to informal learning, especially for professional nursing students at the Faculty of Nursing, Universitas Padiadiaran.

Deliberate informal learning is generally carried out in a work/practical environment through self-reflection, mutual feedback and scientific literature (Brekelmans, Poell, & Wijk, 2013; Gallagher, 2007; Govranos & Newton, 2014). Groot et al. (2012) developed a concept called critical reflective work behaviour, following informal learning in the work environment, especially in health

services. Critical reflective work behaviour is a series of activities to optimize individual and group practice (Van Woerkom & Croon, 2008). Practice optimization is how nurses critically evaluate scientific findings in their nursing care plans. According to Groot et al. (2012), critical evaluation of scientific findings is realized by the use of evidencebased practice (EBP), which is a framework used to test, evaluate and apply scientific improve nursing services findings to (Carlson, 2010, in Harun, Herliani, & Setyawati, 2019). The use of EBP will offer the nurse or nursing student the opportunity to see different perspectives on a problem and alternative options for action, as well as evaluate whether the scientific evidence supports the existing approach. Besides applying EBP in practice, critical reflective work behaviour can also be used to see how nurses/nursing students conduct informal learning by making the work environment a learning environment. So that views or perceptions are formed about something that happens through learning experiences (Billett, 2008, Groot et al., 2012).

The Faculty of Nursing, Padjadjaran University, is one of the institutions that organize professional-level nursing education. Critical reflective work behaviour is related to constructivism in competencynursing professional education. Constructivism provides a clear perspective on the occurrence of informal learning (Noy, James, & Bedley, 2016). Constructivism views learning activities as not just receiving and processing information conveyed by the teacher or text. However, learning is an active and personal knowledge construction process (de Kock, Sleegers, and Voeten, 2004, in Supardan, 2016). The Faculty of Nursing, Universitas Padjadjaran, has incorporated critical reflective work behaviour into the learning evaluation method. This can be seen from the use of critical reflective work behaviour dimensions, namely individual critical reflective work behaviour, critical reflective work behaviour in interactions, openness to new findings and cross-checking information in the evaluation method. For example, the dimensions of individual critical reflective work behaviour through self-reflection as outlined in the logbook evaluation method, dimensions of critical reflective work behaviour in social interactions through providing feedback are outlined in the peer evaluation method, the dimension of openness to new findings and the dimension of cross-checking information through the use of evidence. Scientific evidence is contained in the application of EBP in case reports.

In nursing education, the logbook can assess the clinical competence of students who are practising (Komsiyah & Indarti, 2019). In addition, the logbook can be a means for students to explain difficulties in providing nursing care and the actions they take to overcome them. The peer evaluation method can benefit the rater and the assessed if trust and feedback reflection can be integrated (Boye & Meixner, 2010, Mager et al., 2014). Implementing EBP is fundamental for clinical nurses to communicate care plans effectively and make decisions with patients and other health professionals (Oh, Yang, Sung, Park, & Chang, 2016, Harun et al., 2019).

Findings from the research of Harun et al. (2019) showed that the nursing profession program students at the Faculty of Nursing, Universitas Padjadjaran had good knowledge (68%) about the concept of EBP, had a positive attitude (85%) towards the implementation of EBP, and had good readiness (60%) to apply EBP. Despite this, no research has been conducted on how students apply EBP in case report assignments. Thus, it is necessary to conduct a study to see the extent of informal learning in applying EBP in case reports, logbook assignments, and peer evaluations. Therefore, the main objective of this study was to describe the critical reflective work behaviour of nursing professional students at the Faculty of Nursing, Padjadjaran University. Meanwhile, the specific purpose of this study is to describe the dimensions of critical reflective work behaviour.

Research methods

This research was conducted with a quantitative descriptive method. Critical reflective work behaviour in nursing professional students of the Faculty of Nursing, Universitas Padjadjaran, as measured

by the dimensions of individual critical reflective work behaviour, critical reflective work behaviour in social interactions, openness to new findings, and cross-checking information. The questionnaire used is a modified Critically Reflective Work Behavior Questionnaire developed by Groot et al. (2012), using an ordinal scale, and the back-translation method has been carried out. This research instrument has been conducted with face validity on 23 respondents with the same characteristics and will not be included in the study later. Besides that, it is also done construct test (r = 0.41) and reliability test (Cronbach's Alpha = 0.765).

Data collection was carried out on 15 – 22 July 2021 through a digital form, namely the Zoho Form, and data processing with SPSS statistics 26. The stages of data processing were editing data (editing), coding (coding), entering data (entry), and tabulating data. (tabulation). The sampling technique is total sampling with a population of 208 respondents and a response rate of 74.5% (excellent), which means that 155 respondents participated in this study. Data analysis used descriptive statistical analysis, and categorization was made based on criterion-referenced because this study aimed to describe the population score against the criteria. This research has received ethical approval number 513/UN6.KEP/EC/2021 from the Research Ethics Commission of Padjadjaran University Bandung. The ethical principles that have been applied include the principle of respecting human rights, the principle of benefit, the principle of no harm, and the principle of justice.

Results

Table 1. Description of the characteristics of respondents (n=155)

Characteristics	Frequency	Percentage (%)
Gender		
Man	19	12.3
Woman	136	87.7
Age		
21 – 22	40	25.8
23 – 24	107	69.1
25 – 26	8	5.1
Class		
XL	32	20.6
XLI	123	79.4
Experience as a nurse		
0 years	152	98.1
1 year	1	0.6
2 years	2	1.3
Total	155	100

Source: Primary data (2021)

Table 1 shows that most of the respondents in this study were female (87.7%). This may be because women are more dominant in the nursing field. Most of the respondents in this study were in the age range of 23 - 24 years (69.1%). This may be related to the respondent being a class A student, namely undergraduate students who directly follow the professional education program. This can also be attributed to the fact that most students do not have experience as nurses (98.1%). It is also known that most respondents are students of class XLI (79.4%).

Table 2. Description of critical reflective work behavior in nursing professional students based on respondent characteristics (n=155)

Critical Reflective Work Behavior										
_	Low		Medium		Н	igh	Total			
	f	%	f	%	f	%	f	%		
Gender								100		
Man	0	-	8	42.1	11	57.9	19	100		
Woman	0	-	60	44.1	76	55.9	136	100		
Age								100		
21 - 22	0	-	14	35	26	65	40	100		
23 - 24	0	-	51	47.7	56	52.3	107	100		
25 - 26	0	-	3	37.5	5	62.5	8	100		
Class								100		
XL	0	-	18	56.3	14	43.8	32	100		
XLI	0	-	50	40.7	73	59.3	123	100		
Experience as a nurse								100		
0 years	0	-	67	44.1	85	55.9	152	100		

1 year	0	-	0	-	1	100	1	100
2 years	0	-	1	50	1	50	2	100
Total			68	43.9	87	56.1	155	100

Source: Primary data (2021)

Based on table 2, it was found that most of the 87 respondents (56.1%) had a high level of critical reflective work behaviour, while 68 respondents (43.7%) were in the medium category. Based on the characteristics of the respondents, it was found that the male (57.9%) and female (55.9%) sex groups tend to have a high critical reflective work behaviour category. The group of respondents with an age range of 21 – 22 years (65%), an age range of 23 – 24 years (52.3%), and an age range of 25 – 26 (62.5%) tend to have a high category of critical reflective work behaviour. Respondents of class XLI tended to be in the high category (59.3%), while respondents of class XL tended to have critical reflective work behaviour in the medium category (56.3%). The respondents who did not have work experience as a nurse (55.9%) and one year of work experience (100%) tended to have a high category of critical reflective work behaviour. Meanwhile, the respondents with two years of work experience had critical reflective work behaviour in the high category (50%) and the medium category (50%).

Table 3. Frequency distribution of critical reflective work behavior dimensions on logbook work, peer evaluation and EBP (n=155)

		Critical	Renective	Work Beh	avior					
	Low		Medium		High		Total			
	f	%	f	%	f	%	f	%		
	Individual Critical Reflective Work Behavior Dimensions									
Logbook work after practice										
Never	0	-	1	50	1	50	2	100		
Seldom	0	-	8	50	8	50	16	100		
Sometimes	0	-	8	25.8	23	74.2	31	100		
Often	0	-	7	17.5	33	82.5	40	100		
Always	2	3	9	13.6	55	83.3	66	100		
Total	2	1.3	33	21.3	120	77.4	155	100		
	Di	mensions of	f Critical R	eflective W	ork Beha	vior in Soc	ial Interac	tion		
Peer evaluation work after practice				,		,				
Never	0	-	1	100	0	_	1	100		
Seldom	0	-	24	85.7	4	14.3	28	100		
Sometimes	0	-	19	65.5	10	34.5	29	100		
Often	0	-	31	67.4	15	32.6	46	100		
Always	3	5.9	32	62.7	16	31.4	51	100		
Total	3	1.9	107	69	45	29	155	100		
			Dimension	s of Openn	ess to Nev	v Findings				
EBP work in case reports										
Never	0	-	0	-	0	_	0	-		
Seldom	0	-	1	33.3	2	66.7	3	100		
Sometimes	0		7	63.6	4	36.4	11	100		

Often	0	-	24	47.1	27	52.9	51	100
Always	0	-	35	38.9	55	61.1	90	100
Total	0	-	67	43.2	88	56.8	155	100
			Dimensio	ons Cross-c	heck Info	rmation		
EBP work in case reports								
Never	0	-	0	-	0	-	0	-
Seldom	0	-	1	33.3	2	66.7	3	100
Sometimes	0	-	5	45.5	6	54.5	11	100
Often	0	-	12	23.5	39	76.5	51	100
Always	0	-	24	26.7	666	73.3	90	100
Total	0	-	42	27.1	113	72.9	155	100

Source: Primary data (2021)

Based on table 3, it is generally known that respondents tend to have individual critical reflective work behaviour dimensions (77.4%), openness to new findings (56.8%), and cross-check information (72.9%) in the high category. Meanwhile, in the dimension of critical reflective work behaviour in social interaction, respondents tend to be (69%) in the moderate category. In addition, looking at the frequency distribution of work, respondents tend to continuously work on logbooks and peer evaluations after clinical/field practice and always do EBP in clinical/field practice case reports. In more detail, it is known that respondents who constantly work on a logbook after clinical/field practice tend to have a high category of individual critical reflective work behaviour (83.3%). Respondents who always do peer evaluation after clinical/field practice tend to have reflective work behaviour in the moderate category of social interactions (62.7%). Respondents who continuously work on EBP in clinical/field practice case reports tend to have a high level of openness to new findings (61.1%) and a high category of information cross-check behaviour (73.3%).

Discussion

Critical reflective work behaviour is a series of activities to optimize individual and group practice (Van Woerkom & Croon, 2008). The concept of critical reflective work behaviour is an extension of the concept of critical reflection and reflective practice. Groot et al. (2012) define critical reflection as part of reflection, which includes a critical analysis of work experience to make supporting evidence, and explicit assumptions help interpret and understand something more deeply. Reflective practice refers to a person's capacity to reflect on action to be involved in a continuous learning process (Schön, 1983 in Pacho, 2015).

Based on the data collected, it is known that the respondents in this study were primarily women, were in the age range of 23 – 26 years, were students of class XLI and had no work experience as a nurse. Respondents tend to constantly work

on logbooks and peer evaluations after practice, as well as EBP in clinical/field practice case reports. It is known that the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran, have high category results on critically reflective work behaviour, individual critical reflective work behaviour dimensions, openness to new findings, and cross-checking information. However, it has a moderate category on the critical reflective work behaviour dimension in social interaction.

Based on the research results, it is known that most of the respondents have high category critical reflective work behaviour. The author assumes that the high critically reflective work behaviour of nursing professional students of the Faculty of Nursing, Padjadjaran University occurs because the constructivism learning strategy has been implemented in the nurse's professional education in an online environment as suggested by Legg, Adelman, Mueller, & Levitt (2009), for example

with the use of real case scenarios, student involvement in project group activities, discussions, and application of EBP in case reports. According to constructivists, the practice environment can shape the thinking schemes of professional nursing students, which in turn form their views or perceptions about something. When the learner gets information, then the information will be adjusted to the perceptions that were previously owned (Germas et al., 2019). Therefore, nursing professional students of the Faculty of Nursing, Universitas Padjadjaran, who have implemented constructive learning strategies, can adapt to changing circumstances and construct their knowledge actively and personally.

Based on personal characteristics, male and female respondents tend to have high critical reflective work behaviour. This follows research from Wallman, Lindblad, Gustavsson, & Ring (2009), which found that gender did not affect reflection. In contrast to the results of research from Khan, Saeed, Yasmin, Butt, & Khan (2018) found that the female sex was more reflective than the male. Based on age, both the age groups of 21 - 22years, 23 - 26 years, and 25 - 26 years both have high critical reflective work behaviour. This finding follows the theory of cognitive development of the net model developed by Fischer, Yan, & Stewart (2003), namely, the ability of adults to make reflective judgments cannot be standardized based on age because these developments tend to be caused by support or guidance. The results of the analysis from Tricio, Woolford, & Escudier (2015) show that students aged 22 and under are an age group that can accept reflective habits well. Therefore they recommend that the focus of mentoring is on students aged 23 years. However, guidance on other age ranges still needs to be done, considering the theory from Fischer et al. (2003) previously described. Based on the study class, respondents from class XLI tend to be in the high category.

In contrast, respondents from class XL tend to have critical reflective work behaviour in the medium category. In addition, based on work experience as a nurse, inexperienced respondents have high critical reflective work behaviour. This finding can be explained by

the results of research from Wallman et al. (2009), who found that years of education (semesters) and work experience did not affect reflection.

Nursing students at the Faculty of Nursing, Universitas Padjadjaran, have high critical reflective work behaviour. It is necessary to discuss each dimension. Judging from each dimension, respondents have individual critical reflective work behaviour, openness to new findings, and high information cross-check behaviour. Meanwhile, critical reflective work behaviour in social interaction is moderate. The dimensions of individual critical reflective work behaviour are related to self-reflection, which goes beyond cognition and deals with behaviour. This dimension refers to experimental activities, namely individual learning through trying new ways of working (Van Woerkom & Croon, 2008). The notion of experimentation is close to the concept of reflection-in-action offered by (Schon, 1991). The reflection-in-action is a functional evaluation of thoughts, behaviours and practices during an activity. The habit of doing reflection-in-action can be improved through a reflective learning journal (Erginel, 2006, in Iqbal, 2017). In nursing education in Indonesia, the use of reflective journals is often exchanged for the use of logbooks. Logbooks can be used as a tool to assess the clinical competence of students who are practising (Yousefy et al. 2010, in Komsiyah & Indarti, 2019), document the record of the achievement of technical skills of nurses during clinical practice in hospitals, and guide nursing professionals in recording and updating any activities (Komsiyah & Indarti, 2019), and can be a means for students to explain difficulties in providing nursing care and the actions they take to overcome them. Therefore, the authors associate this dimension with the use of logbooks.

This study found that nursing profession students at the Faculty of Nursing, Universitas Padjadjaran, tend to have high individual critical reflective work behaviour dimensions. In addition, it was also found that students who always worked on logbooks tended to have a high category of individual critical reflective work behaviour. Filling in the logbook is vital in nursing because it is related to the competence of nurses. Komsiyah &

Indarti (2019) identified three functions of the logbook for nurses in hospitals, namely as evidence of competency implementation, career path requirements, and personal notes. However, it was found that the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran, tend to work on the logbook after practice constantly; some never do it. Komsiyah, Suhartono, & Rofi'i (2018) research identified eight inhibiting factors for filling out logbooks for nurses, namely lack knowledge of nurses, no socialization on how to use logbooks, busy nurses, nurses' fatigue, lack of enthusiasm, leaders only providing directions, filling out that did not work. Easy, and there is no special reward for filling out the logbook.

The dimension of individual critical reflective work behaviour shows high possible results. which is because professional nursing students at the Faculty of Nursing, Universitas Padjadjaran, tend to work constantly on logbooks, so they are accustomed to doing reflection-in-action. In a health care setting, such as a hospital, although a logbook can improve the competence of nurses, it does not necessarily mean that this logbook always facilitates reflection. In hospitals, the completeness of filling out the logbook is only limited to the time of providing nursing care, documentation of activities, official statements, documentation of guidance activities, documentation of education and training activities (dictation), and containing evidence of signatures from the head of the room (Komsiyah & Indarti, 2019). This differs from the logbook carried out during the nurse's professional education. It added students' reflections during practice by explaining the difficulties in providing nursing care and their actions to overcome them. Based on this, the ability of individual critical reflective work behaviour in nursing professional students cannot be ascertained as when they have become nurses at the hospital, which incidentally fills the logbook without loading self-reflection.

Groot et al. (2012) developed the concept of critical reflective work behaviour, which was previously initiated by Van Woerkom & Croon (2008) by adding research results as outlined in the dimensions of openness to new findings and cross-checking information. The

utilization of research results is considered necessary because it cannot be separated from the practice of health professionals (De Groot, 2012). The utilization of research results in nursing is known as EBP; a framework used to test, evaluate and apply scientific findings to improve nursing services (Carlson, 2010, Harun et al., 2019). EBP implementation is fundamental for clinical nurses to communicate care plans effectively and make decision-making with patients and other health professionals (Oh, Yang, Sung, Park, & Chang, 2016, in Herliani, Harun, Setyawati, & Ibrahim, 2018).

From the results of this study, it is known that nursing professional students at the Faculty of Nursing, Universitas Padjadjaran tend to constantly work on EBP in clinical/ field practice case reports. In addition, it is also known that students who constantly work on EBP tend to have a high degree of openness to new findings and cross-check behaviour on the information. The author assumes that nursing professional students at the Faculty of Nursing, Padjadjaran University, have high openness to new findings and crosscheck information behaviour because they are used to working on EBP in clinical/ field case reports. In addition, given that the research from Harun et al. (2019) shows that the nursing profession program students at the Faculty of Nursing, Universitas Padjadjaran have good knowledge (68%) about the EBP concept positive attitude (85%) towards the implementation of EBP, and have good readiness (60%) to apply EBP.

In contrast to the other dimensions, which show that nursing profession students at the Faculty of Nursing, Universitas Padjadjaran tend to be in the high category, the dimension of critical reflective work behaviour in social interaction shows that students tend to be in the medium category. The dimension of critical reflective work behaviour in social interaction refers to sharing critical opinions, asking for feedback from others, challenging group thinking, and being open with others about one's mistakes (Van Woerkom & Croon, 2008). The dimensions of critical reflective work behaviour in social interactions are essential for exploring informal learning through experience in a collaborative health care work environment. Each professional

needs to work together in a collaborative work environment, such as in health care. In these conditions, feedback may be necessary for improving work effectiveness, trust, and work quality. Peer evaluation can be a means to achieve these things; peer evaluation can also increase reflection or metacognitive aspects (Lerchenfeldt, Mi, & Eng, 2019). Based on this, peer evaluation is related to the critical reflective work behaviour dimension in social interaction because it requires other people to develop their practice. In nursing professional education, peer evaluation is a formative evaluation method, namely, evaluation carried out during the educational process. This method can improve group and interpersonal skills (Cestone, Levine, & Lane, 2008, Lerchenfeldt, Mi, & Eng, 2019). This method is also essential in nursing education because it can improve the competence of nursing students, especially in emergency clinical skills, through the Objective Structured Clinical Examination (OSCE) (Herlianita, Indah, & Pratiwi, 2012).

Students who always do peer evaluations after clinical/field practice tend to be in the critical reflective work behaviour dimension in the moderate category of social interaction. According to the results of a systematic review from Lerchenfeldt et al. (2019), the results obtained were possible because of the inconvenience between students in providing feedback because this feedback was not anonymous, scores were biased due to personal relationships between students, and students' lack of ability to make assessments. This is in line with Burchett & Spivak (2014), who identified several obstacles or challenges that caused the lack of benefits of peer evaluation, including anxiety, lack of student involvement in assessments, providing feedback and filling out questionnaires that take time, the effectiveness of the measuring tools used. Communication made during the process, lack of knowledge about peer evaluation, and lack of supervisor support. To overcome these obstacles, Burchett & Spivak (2014) recommends conducting research that focuses on quality indicators, professional improvement, and nurse development. Future research on peer evaluation could focus on, but not be limited to, assessing bestpractice forms, quality improvement, student resilience, decisions and involvement in peer evaluation.

Conclusion

This study identified that the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran, had a high critical reflective work behaviour category. Likewise, the dimensions of individual critical reflective work behaviour, openness to new findings, and cross-checking of information indicate the high category. However, the nursing profession students of the Faculty of Nursing, Universitas Padjadjaran, are in the moderate category on the dimensions of critical reflective work behaviour in social interaction. High critical reflective work indicates that nursing profession students of the Faculty Nursing, Universitas Padjadjaran, through informal learning through logbook assignments, peer evaluation, and the application of EBP in case reports. They can adapt to changing circumstances and construct knowledge actively and personally in the work environment.

It is recommended for further research to use some evaluation techniques such as interviews, rubrics, and observation methods as a companion to the questionnaire to obtain more accurate data, as well as conduct research on the factors that influence critical reflective work behaviour, especially those affecting critical reflective work behaviour in social interactions.

Research Limitations

Although this study describes critical reflective work behaviour and its dimensions. the researcher realizes that it only uses student self-reports and does not complexly describe students' abilities to perform critical reflective work behaviours. As for knowing the ability, Williams et al. (2019) suggested that two additional instruments be used, namely the assessment rubric and behavioural observation. They do not recommend using instruments to get an idea of reflection ability. The second weakness of this study is that the researcher cannot see the respondent's reaction when providing information, and there is a possibility that the respondent may

not take it seriously. **References**

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