

Assignment title: A Reflective Essay on the Role of Communication in a Patient-Care Scenario

Topic: A Reflective Essay on the Role of Communication in a Patient-Care Scenario using Gibbs's Reflective Cycle

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Reflective Essay on the Role of Communication in a Patient-Care Scenario: Gibbs Reflective Cycle (1988)

Introduction

Effective communication—anchored in empathy, clarity, and trust—is foundational to safe, person-centred mental healthcare. In psychiatric settings, where perception, meaning, and threat appraisal are altered, the stakes are especially high: miscommunication can escalate distress, undermine alliance,

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planning to translate experience into improved practice (Sundgren et al., 2021).

In doing so, I draw on guidance for communication in psychosis (Hamelijnk et al., 2023), relational frameworks in nursing (Mersha et al., 2023), and evidence on cognitive distortions in meaning-making (Rnic, Dozois, & Martin, 2016).

Context of the Reflection

The event occurred in a psychiatric intensive care unit with a patient in acute psychosis marked by persecutory delusions and hypervigilance. My dual tasks

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pacing, wording, sequencing, and non-verbal signalling to maintain safety and trust (Hamelijnk et al., 2023). The scenario highlighted a recurring dilemma—completing essential assessments while preserving the relational ground on which effective care depends.

Description

During an evening shift, I initiated a mental state examination with a patient after a first-episode psychosis with prominent paranoia. As I progressed through a standardised series of questions (orientation, perceptual experiences, risk), the

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mistrust; flexible, person-centred strategies are required when cognitive distortions and threat appraisals are active (Rnic et al., 2016).

Feelings

I experienced a rapid surge of adrenaline, followed by disappointment and self-doubt—concern that my approach had precipitated harm. There was relief as colleagues supported de-escalation, coupled with guilt over the distress

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vulnerability of both patient and practitioner in high-acuity settings and reinforced the value of team containment and post-event reflection for learning and wellbeing (Sundgren et al., 2021).

Evaluation

Negatives:

- My closed, sequential questioning likely intensified persecutory interpretations, extended the interaction, and raised risk of escalation.
- Initial reliance on task completion over relational safety delayed therapeutic joining.

Positives:

- Team actions—lowered voice, simplified language, greater physical space, and removal of excess stimuli—helped settle arousal.

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Overall, the encounter exposed the limits of rigid formats and jargon, and the value of micro-adjustments—timing, tone, posture, and permission-seeking—to maintain alliance under stress.

Analysis

Peplau's interpersonal relations theory positions the nurse–patient relationship as the vehicle of therapy; communication should be phase-matched (orientation, working, resolution) and responsive to the person's current capacity (Mersha et al., 2023). My approach initially reflected the task rather than the

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pace”) can reduce persecutory appraisals by enhancing predictability and control.

From a cognitive lens, distortions bias interpretations toward threat (Rnic et al., 2016). The clinician's task is to anticipate misattributions, minimise ambiguous or technical wording, and check meaning frequently. This aligns with universal

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consolidates. The analysis also affirms that communication is a team endeavour—roles, choreography, and shared language for de-escalation matter.

Conclusion

The core learning is that assessment processes must be tailored dynamically to the patient's mental state. Beginning with relational safety—stance, tone,

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presence and voice control.

Final Conclusion

This reflection reinforces that flexible, person-centred communication is a clinical intervention in its own right—particularly in acute psychosis, where

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training, can enhance professional quality of life and improve therapeutic outcomes.

References

Hamelijnk, J., Tarbuck, A., & Kajee, S. (2023). Information gathering in psychosis. In *Communication Skills in Mental Health Care* (pp. 44–56). CRC Press.

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