

Module Title: Coaching and mentoring in health and social care

Assignment: Critical Reflection

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Part 1: 1654

Part 2: 1853

Part One: Using a Reflective Model

Introduction:

I am a registered nurse in the child and adolescent psychiatry department, with over seven years of experience. My multifaceted role includes direct patient care, working as part of multidisciplinary teams, and mentoring newly qualified nurses. The shift from academic training to professional practice can sometimes be intimidating for new nurses in today's fast-changing healthcare world. Ko and Kim (2022) state that nursing students experience emotional shock following this transition. This has seen me take on a mentorship and coaching role, guiding new nurses as they join psychiatric nursing.

Recently, I held a coaching session with a nurse who had been clinically practising for only six months. Since structured support is integral to the development of professionals, I used the GROW model, a prevalent coaching framework, as shown in the figure below. The GROW model—Goal, Reality, Options, Way forward—allowed a structured approach to the identification of the goals the coachee had, the reality of her current situation, options she could consider, and the way forward in terms of action planning (Mogonea, 2022).



Figure 1: The GROW model (Mogonea, 2022).

I will critically evaluate this coaching experience and improve my future practice using Gibbs' Reflective Cycle. This is one of the most comprehensive models for reflection, as it helps assess experiences in six stages: description, feelings, evaluation, analysis, conclusion, and action plan (Galli and New, 2022).



Figure 2: The Gibbs' Reflective cycle (Harithuddin, 2021)

Description:

The first stage of Gibbs' reflective cycle is description (Ezezika and Johnston, 2023). This stage is critical because it provides a detailed description of how most of the events unfolded. The setting for the coaching session was a quiet meeting room, which lasted for about an hour. The coachee was a newly qualified nurse who had practised for only six months. While in the line of duty, she confessed to facing several challenges. She struggled with managing her workload

balance, clinical judgment development, and self-confidence. During the session, I based my guidance on the GROW model—Goal, Reality, Options, Way Forward.

The session started by establishing a contract defining roles, expectations, and objectives. This set the basis for trust and created a mutual understanding of the purpose of the session. The objective at the beginning of the session was clear: to enable the nurse to become aware of her

[REDACTED]

are concerned about (Cruz Araújo et al., 2022). We then brainstormed options for addressing these challenges together, such as appealing for help from other, more senior staff members or time for self-study. This session ended with clear, specific actions that the coachee could undertake to improve her skills and performance.

Feelings:

The second stage of Gibbs' cycle focuses on feelings. Before the coaching session, I felt quite tense, mainly because this was only the second time I had ever worked with the GROW model in reality. I had worked hard preparing, but the pressure to ensure the session went well rested on me. I was particularly concerned about the effectiveness of how I could guide the coachee

[REDACTED]

As the session progressed, my initial nervousness began to fade, and I felt more comfortable. How receptive she was to self-reflection and speaking about her challenges helped raise my confidence. Yet, there were times when I lost confidence, especially when I was unsure whether I was adequately facilitating autonomy. This way, I was unsure whether I was fulfilling my role as

a mentor to build self-confidence in the coachee, as highlighted by Ismail et al. (2015). I further found myself getting nervous, on and off, about keeping the session on track without rushing the coachee through her process of thinking. Despite such moments of uncertainty, this fulfilment kept growing inside me as the coachee began to take responsibility for her development. This reassured me that the session was having a positive effect.

Evaluation:

In the evaluation phase of Gibb's cycle, one is expected to reflect on what went well and what could have gone better. Upon reflection on the coaching session, many elements worked well, and some could have been done better. One of the strengths of the session was the structured use of the GROW model, and because of this, the conversation flowed logically. This model supported the coachee in identifying her goals, assessing where she was, exploring available

[REDACTED]

from the conversation about her professional development. Such questions allow the respondent to think of the most applicable answer rather than guesswork (Abdolreza et al., 2022).

There were, however, some aspects which could have been improved. While the coachee was very appreciative of the space to think and for being given the time to look and make her

[REDACTED]

[REDACTED] guidance when she seemed uncertain. This brought home the need for balance in the coaching role: guiding without taking away from the coachee a sense of ownership over her development. The timing of the session was also not good. Conducting the session after the coachee's shift most likely

impacted her energies and total engagement. Being an area for future improvement, I will schedule coaching conversations when both the coachee and I are most likely fully conscious and focused.

Analysis:

The analysis stage of Gibbs' cycle is where the experience is made sense of, and it is understood why parts of the session went well or proved difficult. One of the critical factors that helped make the session successful was utilizing the GROW model. This model provided a

[REDACTED]

2024), and it helps in building rapport to ensure that the coachee feels heard. There were periods during the session when I felt this balance was not held. I realized that I could have been more attentive to the coachee's needs and provided more direction when she expressed uncertainty.

Another critical aspect of the session that I reflected on was the timing—conducting the session after the coachee's shift was not ideal, as this likely impacted her focus and energy. In the future, I will be more reflective about scheduling coaching sessions when the coachee and I are fully alert and engaged.

Conclusion:

This coaching session has taught me several lessons, the most important being finding a balance between supporting the coachee to derive her autonomy and providing clear guidance whenever needed. Although the GROW model gives a structured format that helped facilitate

self-reflection and solutions from the coachee, there were times when some more direct input from me might have been helpful. The session also brought up the genuinely critical role of active listening. One can build trust and rapport with the client to ensure he feels understood and supported throughout the process (Tennant, Long, and Toney-Butler, 2017).

Timing was another prominent factor that became a consideration for future coaching sessions.

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[REDACTED]. Going

forward, I will improve my coaching practice by improving my listening skills, giving more explicit guidance and direction where appropriate, and scheduling sessions at the right time for maximum benefit.

Action Plan:

The last stage of Gibbs' cycle is creating an action plan for future improvement. From my reflection, some of the steps that will apply in enhancing my coaching practice are:

1. **Attend an advanced coaching workshop:** I will ensure that I have attended advanced coaching workshops in psychiatric nursing within the next 12 months. Coaching workshops are non-formal learning opportunities (Falcão et al., 2017). These will further improve my knowledge regarding the different coaching frameworks.

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3. [REDACTED]

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beginning of each session and using the GROW model as a flexible guide rather than a rigid structure.

4. **Better timing of sessions:** In the future, I will exercise greater care in the timing of sessions so that they are organized when both the coachee and I are fully present. This will ensure that the coachee is engaged and able to make full use of the session.

By following these steps, I am optimistic that my coaching capability will be enhanced, and I will be better placed to offer more effective support to newly qualified nurses.

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Part 2: Professional and Personal Development

Introduction

As a practising child and adolescent psychiatry nurse with seven years of experience and very active in training and mentoring new nurses, I believe that coaching competence is essential for me in such a fast-moving healthcare environment. The competency to coach and mentor new nurses well has implications for ensuring patients get high-quality care and also contributes toward staff development (Richardson et al., 2023). This professional development plan outlines how I will focus on the enhancement of coaching techniques tailored specifically to psychiatric nursing, the anticipated challenges in overcoming these, and the strategies that will be used within the next 12 months.

Enhancing Coaching Competence

The main aim of my professional development plan is to improve my coaching competence by developing high-level coaching techniques that address the specific demands of nursing psychiatric patients. In this regard, coaching goes beyond mentoring new nurses in clinical

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[REDACTED], most importantly, empathetic (Diller et al., 2021).

To help with this, I will contribute to my existing knowledge base by increasing my understanding of coaching methodologies relevant to mental health settings. This will include exploring cognitive-behavioral coaching techniques that might facilitate nurses' development of

[REDACTED]

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to overcome many challenges. This form of coaching is equally critical for developing evidence-based practices (Grant and Gerrard, 2020).

Feedback from the previous coaching session has highlighted some areas of improvement, particularly finding the right balance between support and clear guidance. During the next 12 months, I will incorporate this feedback into my development plan by setting goals for actions

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[REDACTED]

appropriately used, feedback leads to positive growth for both parties (Atkinson, Watling, and Brand, 2022). By improving these skills, I will have a better ability to mentor new nurses. In the end, the new nurses will build confidence and competence to work in this challenging field. I will familiarize myself with these techniques by attending workshops, researching, and practising cognitive-behavioral and solution-focused coaching in real-life scenarios. Understanding these coaching techniques will enhance my ability to provide targeted and empathetic guidance to coaches, allowing them to develop emotional resilience and practical solutions for complex psychiatric nursing challenges.

Justification

Advanced coaching techniques focusing on psychiatric nursing are of interest for several reasons. First and foremost, at the very core of psychiatric care, a nurse ought to be flexible, compassionate, and resilient (Labrague and de Los Santos, 2021). The place of coaching in

[REDACTED]

[REDACTED]

[REDACTED]

Secondly, as a mentor, my ability to coach well is directly related to the professional development of the nurses I work with. By focusing on advanced coaching techniques, I could guide new nurses through the complexities of psychiatric care, build their confidence (Ismail et al., 2015), and develop skills relevant to tending to and dealing with difficult situations. This, in

turn, will contribute to a more skilled and confident nursing workforce essential for maintaining high standards of care in the mental health field.

Finally, this focus on enhancing coaching competence aligns with the broader goals of my department and the healthcare organization. Enhancing my availability to mentor and guide new nurses will help me contribute to building a more integrated, helpful environment for all staff members. It aids not just the nurses I coach but raises general staff morale and patient outcomes.

Anticipated Challenges

While enhancing coaching competence is very important, I must deal with some challenges to achieve my development goals. These can be divided into two broad headings: internal and external factors.

Internal Challenges: Time Management

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time and attention. Therefore, I must find time management strategies that enable me to fulfil my clinical and coaching roles without compromising. This may arguably be operationalized with clear priorities, delegation of tasks where appropriate, or an intentional decision about how I use my time. I will be required to allocate time for coaching sessions so they are not regarded as a second priority.

External Challenges: Limited Departmental Support

Conversely, one of the significant external threats I might face is the relative lack of support for coaching professional development activities in my department. While there is a general belief

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experts in coaching, and more.

According to Jansen et al. (2024), coaching is a critical job resource. Therefore, this challenge will have to be met through advocacy and collaboration. I will have to engage departmental leadership about the importance of coaching competence and the difference it will make in patient care and staff development. I hope to secure the needed resources and backing to pursue my development goals through such collaborations.

Development Strategies

These challenges will be overcome, and my professional development goals will be achieved through the implementation of various strategies that are both person-centered and focused on broader departmental engagement.

1. Advocate for Structured Coaching Support

I am going to establish structured coaching support in my department. This could include recommending establishing a formal coaching program with regular training sessions and peer

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[REDACTED]

[REDACTED]

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from prior coaching sessions. Furthermore, I will be able to demonstrate that investment in

coaching pays off through long-term departmental benefits associated with increased staff retention, heightened job satisfaction, and better patient outcomes (Jansen et al., 2024).

2. Enroll in Professional Courses

I will also take courses offered by professionals dealing with coaching in a healthcare setting, particularly psychiatric nursing. Through the courses, I expect to have the opportunity to learn from the best in the profession and explore new models that give practical coaching skills for application in work. I will seek out courses that offer a mix of theoretical knowledge and practical experience so that the concepts learned can hopefully be immediately integrated into coaching sessions.

[REDACTED]

3. Join Peer Coaching Groups

Another primary strategy I will engage in is joining peer coaching groups, whether they are organized within my organization or externally. These provide a forum for sharing experiences, discussing challenges, and learning from others who similarly focus on developing coaching skills. Engaging with peers with similar goals allows me to gain new perspectives and receive constructive feedback that helps keep me going with my competence (Hardavella et al., 2017).

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improving their coaching competencies. Through regular meetings to discuss and learn from one another, I am better able to continue building my skills while remaining accountable for the fulfilment of my development goals.

4. Implement Regular Self-Reflection and Feedback

I will incorporate regular self-reflection and feedback into my development plan, as well as formal training and peer support. At the end of every coaching session, I will reflect on what went well, what challenges I faced, and how I could do better next time. This reflective practice, guided by models such as Gibbs' original reflective cycle, will help me continue to refine my coaching techniques and be sure of learning from that experience. After all, reflection is recommended for coaches to learn from their experiences adequately (Hall and Gray, 2016).

[REDACTED]

open and reflective attitude toward my coaching practice. I will be better equipped to make meaningful progress in my development. The reflective attitude will also cause me to develop reflective coaches, which is critical in coaching education (Costello, Jewitt-Beck, and Leeder, 2023).

5. Practice Active Listening and Tailored Feedback

Improvement areas I have noticed and want to rework include a better balance between active listening and providing customized feedback. I will practice active listening by maintaining eye contact, asking open-ended questions, and summarizing the coachee's words for clarity (Bergeron and Loignon, 2024). I would ensure that feedback to a coachee is specific, actionable, and goal-oriented because learning, regardless of the context in which it takes place, rarely occurs without significant practice and guidance (Gjerde, Skinner, and Padgett, 2022).

I shall practice these techniques through role-plays in a safe, supportive environment with peers or mentors. Through feedback, I will understand how well that approach worked and develop the confidence one needs to coach well.

Conclusion

In conclusion, this Professional Development Plan aims to improve my coaching competency by addressing the advanced coaching techniques that deal with specific challenges in psychiatric nursing. I will do so by advocating for structured coaching support, taking professional courses, joining peer coaching groups, and implementing reflective practices to help overcome anticipated challenges of time management and departmental resources. This develops me as

[REDACTED]

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learning environment for most people at this critical stage of their professional training. For the following 12 months, I wish to make a positive and measurable impact on my coaching competence and the broader psychiatric nursing community for better outcomes for staff and patients.

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Appendix

Self-Assessment Form 1 - Skills Assessment Form

A Coach's Self-Evaluation Checklist		
<p>The questions below relate to the skills and qualities needed to be an effective coach.</p> <p>Use this tool to evaluate your own effectiveness as a coach</p>		
Question	Yes/N o/ Maybe	Action
1. Do you show interest in career development, not just short-term performance?	Yes	
2. Do you provide both support and autonomy?	Maybe	I aim to balance support with allowing the individual to find their own solutions, but I recognize that I sometimes provide more guidance than needed.
3. Do you set high yet attainable goals?	Yes	
4. Do you serve as a role model?	Yes	
5. Do you communicate business strategies and expected behaviours as a basis for establishing objectives?	No	<p>I realize that I need to improve in this area.</p> <p>I plan to spend more time communicating strategies and aligning objectives to help guide my coachee.</p>

6. Do you work with the individual you are coaching to generate alternative approaches or solutions that you can consider together?	Yes	
7. Before giving feedback, do you observe carefully and without bias, the individual you are coaching?	Maybe	I attempt to observe without bias, but I have noticed moments when personal assumptions influenced my feedback. I will work on being more objective.
8. Do you separate observations from judgements or assumptions?	Yes	
9. Do you test your theories about a person's behaviour before acting on them?	Maybe	This is an area I recognize needs attention. I aim to ensure I test my assumptions more thoroughly before making decisions.
10. Are you careful to avoid using your own performance as a yardstick to measure others?	Yes	
11. Do you focus your attention and avoid distractions when someone is talking to you?	Yes	
12. Do you paraphrase or use some other method to clarify what is being said in a discussion?	Yes	

13. Do you use relaxed body language and verbal cues to encourage a speaker during conversation?	Yes	
14. Do you use open-ended questions to promote sharing of ideas and information?	Yes	
15. Do you give specific feedback?	Yes	
16. Do you give timely feedback?	Maybe	While I strive to offer timely feedback, there are instances where I delay, especially when balancing multiple responsibilities.
17. Do you give feedback that focuses on behaviour and its consequences (rather than vague judgements)?	Yes	
18. Do you give positive as well as negative feedback?	Yes	
19. Do you try to reach agreement on desired goals and outcomes rather than simply dictate them?	Yes	
20. Do you try to prepare for coaching discussions in advance?	Yes	
21. Do you always follow up on a coaching discussion to make sure progress is proceeding as planned?	No	I recognize that I do not always follow up as consistently as I should. I plan to

		establish more structured follow-ups moving forward.
Totals	Y- 15 N- 2 May be- 4	

When you have these characteristics and use these strategies, people trust you and turn to you for both professional and personal support. If you answered “**yes**” to most of the questions, you are probably an effective coach. If you answered “**no**” or maybe to some or many of these questions, you may want to consider how you can further develop your coaching skills.

Adapted from: Coaching People (2006) Harvard Business School Press. Harvard Business School Publishing. Boston. Massachusetts

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Self-Assessment Form 2 – Coaching / Mentoring Session Form

Review of coaching experiences

Recall what coaching experience that you have had in the past and assess yourself utilising the following questions.	
1.	Describe the coaching experience
<p>I coached a newly qualified nurse who had been in the role for just 6 months. The session was held in a quiet meeting room, and we used the GROW model as the framework for guiding the conversation. I initially felt anxious, but as the session progressed, my confidence grew.</p>	
2.	What did YOU do that was effective (either as the coach or coachee)
<p>I effectively applied the GROW model by listening attentively, offering support, and helping the coachee identify key areas for development.</p>	
3.	What could YOU have done that would have been even better?

I could have improved by offering more clear and concise guidance, as the coachee expressed some confusion during the feedback portion of the session.

Thinking about your current coach mentoring experience assess yourself against these two core skills.

1. What questions might you want to try in a coach – mentor session?

I plan to try more open-ended questions, such as "What challenges have you encountered this week?" or "How do you feel you have grown in the past month?"

2.What can you do to enhance your questioning skills?

I can practice formulating questions that encourage deeper reflection by reviewing coaching techniques and experimenting with different questioning styles during practice sessions.

3. What listening skills do you want to develop?

I want to improve my ability to listen without interjecting too soon and to enhance my understanding of non-verbal cues.

4. What can you do to enhance your listening skills?

I can attend workshops on active listening, practice mindfulness to remain fully present, and request feedback from peers on my listening performance during coaching sessions.

Reflecting on the self-assessment exercises review your personal objectives.

Think about the specific objectives that you want to get from this module (that complement or are in addition to the module learning outcomes) and write them below for your own reference.

1. To develop advanced coaching techniques specific to psychiatric nursing.

2. To enhance my active listening and questioning skills through structured practice and feedback.

3. To establish more consistent follow-up routines for coaching discussions.

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