As part of the program philosophy, Creighton University emphasizes narrative reflections in various parts of their entry level and residency programs. Beyond their 1:1 mentoring, the resident completes a weekly mentoring guide form which promotes dialogue with the mentoring during the session.

Residents also complete 4 clinical narratives during their residency program. Clinical narratives allow one to “see the resident’s thinking” and help assess and facilitate the clinical reasoning process. Narrative reasoning allows an understanding of the patient’s illness, experience, story, context, belief, and culture. This is necessary to interpret the actions of others and respond to the social context.

Residents present 2 case presentations where the resident presents patient history and presentation, differential diagnosis/clinical reasoning, plan of care, and how to proceed with this patient.

Residency coordinators and faculty are invited to attend both the clinical narratives and case presentations to provide feedback and thought-provoking dialogue and grading rubrics are used for providing faculty and peer feedback.

Within residency, we address ethics and advocacy as well as political advocacy, as two different topics. The assignment for ethics is:

*Reflect upon and be prepared to discuss one patient/client that has taught you about the benefits and limitations of the social response to their disability. Explain this person’s experience with disablement.*

Below is the Gibbs Reflective Cycle which describes the elements of the narrative reflection process. The reference at the end of this document is an article which describes the theory behind the teaching and learning of narrative reflection and how the faculty unbundle and score the assignments.

BACKGROUND:
Post-professional residency educational programs aim to advance the knowledge and skills of therapists in a clinical specialty area, however, little is known about the process, outcomes, or effectiveness of residency education.

PURPOSE:
The purpose of this study was to use narrative as a teaching and learning tool to gain insight into the progressive development of the residents’ learning process.

DESIGN:
Qualitative methods including a retrospective analysis of residents’ narratives were used to explore the professional development and thought process of residents.

METHODS:
Six physical therapy residents wrote reflective narratives across 4 time placements during their one-year residency. Qualitative content analysis was used to analyze the data for types of reflection across time frames and to construct themes based on meaning statements.

RESULTS:
Four main themes evolved from the residents' clinical narratives: 1) developing clinical reasoning skills; 2) developing professional formation and identity; 3) moral agency; and 4) emerging characteristics of expertise Conclusions: In this study, clinical narratives served as a pedagogical tool to enhance aspects of clinical expertise. The utilization of clinical narrative may be used as one tool to help to create reflective practitioners with improved skills foundational to clinical practice.