Further development of the reflective practice questionnaire

Shane L Rogers [Corresp., 1] **, Lon Van Winkle** [2] **, Nicole Michels** [2] **, Cherie Lucas** [3] **, Hassan Ziada** [4] **, Eduardo Jorge Da Silva** [5] **, Amit Jotangia** [6] **, Sebastian Gabrielsson** [7] **, Silje Gustafsson** [7] **, Lynn Priddis** [8]

1 Psychology, Edith Cowan University, Perth, Western Australia, Australia

2 Medical Humanities, Rocky Vista University, Denver, Colorado, United States of America

3 Pharmacy, University of Technology Sydney, Sydney, New South Wales, Australia

4 Dental Medicine, University of Nevada, Las Vegas, Nevada, United States of America

5 Physical Education and Sport, University of Lusofona, Lisbon, Portugal

6 Cygnet Health Care, Stevenage, United Kingdom

7 Health, Education and Technology, Lulea University of Technology, Lulea, Sweden

8 Law School, The University of Western Australia, Perth, Western Australia, Australia

Corresponding Author: Shane L Rogers
Email address: shane.rogers@ecu.edu.au

Background. This paper provides an update of the Reflective Practice Questionnaire (RPQ). The original RPQ consisted of 40-items with 10-sub-scales. In this paper, the RPQ is streamlined into a 10-item single reflective practice construct, and a 30-item extended version that includes additional sub-scales of confidence, uncertainty/stress, and work satisfaction.

Methods. 501 university students filled out an online questionnaire that contained the original Reflective Practice Questionnaire, and two general measures of reflection: The Self-Reflection and Insight Scale, and the Rumination-Reflection Questionnaire.

Results. Based on factor analysis, the RPQ was streamlined into a brief 10-item version, and an extended 30-item version. Small positive correlations were found between the RPQ reflective practice measure and the two measures of general reflection, providing discriminant validity evidence for the RPQ. The RPQ was found to be sensitive to differences among industries, whereas the general measures of reflection were not. Average reflective practice scores were higher for health and education industries compared to retail and food/accommodation industries.

1 Further development of the reflective practice
2 questionnaire

4 Shane L Rogers[1], Lon Van Winkle[2], Nicole Michels[2], Cherie Lucas[3], Hassan Ziada[4], Eduardo
5 Jorge Da Silva[5], Amit Jotangia[6], Sebastian Gabrielsson[7], Silje Gustafsson[7], Lynn Priddis[8]

7 [1] Psychology, Edith Cowan University, Perth, Western Australia, Australia
8 [2] Medical Humanities, Ricky Vista University, Denver, Colorado, U.S.A.
9 [3] Pharmacy, University of Technology Sydney, Sydney, New South Wales, Australia
10 [4] Dental Medicine, University of Nevada, Las Vegas, Nevada, U.S.A.
11 [5] Physical Education and Sport, University of Lusofona, Lisbon, Portugal
12 [6] Cygnet Health Care, Stevenage, U.K.
13 [7] Health, Education and Technology, Lulea University of Technology, Lulea, Sweden
14 [8] Law School, The University of Western Australia, Perth, Western Australia, Australia

16 Corresponding Author:
17 Shane L Rogers[1]
18 270 Joondalup Drive, Perth, Western Australia, 6027, Australia
19 Email address: shane.rogers@ecu.edu.au

22 Abstract

24 **Background.** This paper provides an update of the Reflective Practice Questionnaire (RPQ). The
25 original RPQ consisted of 40-items with 10-sub-scales. In this paper, the RPQ is streamlined into
26 a 10-item single reflective practice construct, and a 30-item extended version that includes
27 additional sub-scales of confidence, uncertainty/stress, and work satisfaction.
28 **Methods.** 501 university students filled out an online questionnaire that contained the original
29 Reflective Practice Questionnaire, and two general measures of reflection: The Self-Reflection
30 and Insight Scale, and the Rumination-Reflection Questionnaire.
31 **Results.** Based on factor analysis, the RPQ was streamlined into a brief 10-item version, and an
32 extended 30-item version. Small positive correlations were found between the RPQ reflective
33 practice measure and the two measures of general reflection, providing discriminant validity
34 evidence for the RPQ. The RPQ was found to be sensitive to differences among industries,
35 whereas the general measures of reflection were not. Average reflective practice scores were
36 higher for health and education industries compared to retail and food/accommodation industries.

37
38
39

Introduction

The reflective practice questionnaire (RPQ) was first introduced to the research community as a 40-item questionnaire that contains several sub-scales for assessing self-reported reflective practice and confidence, stress, and work satisfaction (Priddis & Rogers 2018). Following publication, it became apparent from emails of inquiry that many people interested in the measure were practitioners seeking to make use of the RPQ as part of reflective practice initiatives within the workplace. With 40-items across 10 subscales, the original RPQ provides a broad range of information that can be useful for research studies, however in applied settings people have time and resource constraints that can make such a lengthy questionnaire unwieldy.

Therefore, the primary aim of the current study is to conduct further refinement of the RPQ to reconceptualise the questionnaire as a brief 10-item measure of reflective practice, while also maintaining a longer version of the questionnaire which we re-label as the Reflective Practice Questionnaire - Extended version (RPQ-E). A secondary aim of the study is to examine associations between the RPQ and other general reflection measures to provide evidence that the RPQ provides measurement of reflective practice rather than more generalised reflective tendencies.

Measuring self-reported reflective practice

The notion of reflective practice is broad, and conceptualisations can vary based on the focus of reflection (e.g., task-focused and/or relational-focused), the context of reflection (e.g., work context versus learning context), when it occurs (e.g., during action versus after action), with who it occurs (e.g., self-reflection versus reflection with others), and how it occurs (e.g., meditative versus critical reflection) (Greenberger 2020; Hebert 2015; Mezirow 1991; Ooi et al. 2021; Schon 1995; Thompson & Pascal 2012; Tsingos et al. 2014). In this paper our conceptualisation of reflective practice as measured by the reflective practice questionnaire can be described as the tendency to actively reflect upon the thoughts and actions that occur when working with clients. These reflections might be about relational aspects of working with clients (e.g., Are they or I frustrated?), or more task focused (e.g., Are we making good progress?). Reflections can potentially occur in-the-moment during interaction (i.e., reflection-in-action) or sometime after the interaction has occurred (i.e., reflection-on-action). Reflections can be about one's own thoughts/actions and/or those of the client/s. The reflections can be either more meditative in nature (i.e., wondering with simple curiosity) or more critical (i.e., critically questioning ways of thinking/doing).

The Reflective Practice Questionnaire (RPQ)

The RPQ was originally designed as an instrument to measure self-reported reflective practice alongside several other variables that have relevance for reflective practice: desire for improvement, general confidence, communication confidence, uncertainty, stress, and work satisfaction (Priddis & Rogers 2018). The RPQ sets itself apart from other self-report reflection measures by predominately focusing on working with clients, and by utilising broad phrasing so that the measure can be used across a wide range of professions where reflective practice is relevant (For a discussion, see: Priddis & Rogers 2018).

86

87 Studies have been conducted utilising the RPQ with medical students (Bari et al. 2021; Horst et
88 al. 2019; Khoshgoftar & Barkhordari-Sharifabad 2023a; Khoshgoftar & Barkhordari-Sharifabad
89 2023b; Lee et al. 2023; Rogers et al. 2019; Schwartz et al. 2020; Van Winkle et al. 2021; Van
90 Winkle et al. 2022), surgeons/physicians (Aitken et al. 2021; Whelehan et al. 2021), nurses
91 (Aitken et al. 2021; Al-Osaimi 2022; Gabrielsson et al. 2022; Gustafsson et al. 2020; Khalil &
92 Hashish 2022), psychologists (Sadusky & Spinks 2022), allied health professionals (Aurora et al.
93 2023; Or & Golba 2023; Parrott et al. 2023), pre-service teachers (Day et al. 2022; Fuertes-
94 Camacho et al. 2021), qualified teachers (Chen & Chen 2022; Gross 2020; Moeder-Chandler
95 2020), and sport coaches (Da Silva et al. 2022). In these studies the RPQ has been used for a
96 range of purposes, such as assessment of the reliability of the RPQ scales (e.g., Gustafsson et al.
97 2020), comparison between different sub-groups of participants (e.g., Day et al. 2022), and
98 comparison across different time points to explore student development (e.g., Van Winkle et al.
99 2021).

100

101 Van Winkle and colleagues have published work that demonstrates how the RPQ can be used as
102 part of an evaluation of teaching methods (Horst et al. 2019; Schwartz et al. 2020; Van Winkle et
103 al. 2021; Van Winkle et al. 2022). For example, Van Winkle et al. (2021) found that self-
104 reported reflective practice and a self-report empathy measure significantly increased for most
105 medical students enrolled in a 4-month online course that included activities designed to
106 facilitate the development of reflective practice. In another example, Van Winkle et al. (2022)
107 found that the magnitude of increase in self-reported reflective practice and empathy was higher
108 for prospective medical students who completed a course that included reflection specifically on
109 their service-learning activities compared to students that completed a similar course with
110 reflection only conflict interactions outside of their work environment.

111

112 Several other scholars have also made use of the RPQ when evaluating learning activities (Da
113 Silva et al. 2022; Khalil & Hashish 2022). Da Silva et al. (2022) found that self-reported
114 reflective practice was higher for a group of sport coaches that underwent a reflective journalling
115 intervention compared with a control group. Khalil and Hashish (2022) found that average self-
116 reported reflective practice increased after reflective practice training, and that self-reported
117 reflective practice was positively associated with self-reported critical thinking tendencies.

118

119 *The present study - Considerations for further development of the reflective practice*
120 *questionnaire*

121

122 Since the initial publication of the RPQ in 2018, correspondence received from researchers and
123 practitioners has informed our reflections on how the RPQ might best serve the community that
124 uses it. In our initial development of the RPQ we were interested in developing a comprehensive
125 questionnaire. The RPQ was published with ten sub-scales, five that were focused on elements of
126 reflective practice (i.e., reflection in action, reflection on action, self-appraisal, and reflection
127 with others) with the remaining six sub-scales focused on other constructs of relevance to
128 reflective practice (i.e., desire for improvement, general confidence, confidence in
129 communication, uncertainty, stress interacting with clients, and job satisfaction).

130

131 Something that became apparent to us was that perhaps the RPQ contained too many sub-scales.
132 Both researchers and practitioners were most interested in a simple and clear measure of self-
133 reported reflective practice. In response to this we published a follow up paper in 2019 proposing
134 a single reflective practice score by averaging across the four reflective practice sub-scales of the
135 RPQ (Rogers et al. 2019). We were not surprised to see most of the subsequent studies utilising
136 the RPQ made use of this more simplified conceptualisation of the reflective practice measure
137 (Al-Osaimi 2022; Bari et al. 2021; Da Silva et al. 2022; Day et al. 2022; Gabrielsson et al. 2022;
138 Gross 2020; Gustafsson et al. 2020; Horst et al. 2019; Khalil & Hashish 2022; Or & Golba 2023;
139 Schwartz et al. 2020; Van Winkle et al. 2021; Van Winkle et al. 2022; Whelehan et al. 2021).
140
141 Considering that the use of an overall single reflective practice score has emerged as the most
142 popular usage for the RPQ, we felt that it would be worthwhile investigating the scope for a
143 shorter version of the combined RPQ reflective sub-scales. We also felt it was desirable to revisit
144 the other sub-scales within the original RPQ to explore if some aggregation across the sub-scales
145 might be statistically justifiable. Therefore, a primary aim of the present study was to explore if
146 the RPQ structure could be simplified. We utilised factor analytic techniques to achieve this aim.
147
148 A secondary aim of the present study was to examine if the measure of self-reported reflective
149 practice obtained by the RPQ is best conceptualised as a distinct and separate construct from a
150 broader notion of self-reflection. The RPQ was designed as a measure specifically targeted on
151 the act of reflection in work practice with clients. However, the RPQ has not previously been
152 compared to more general trait-based measures of self-reflection. In the present study we
153 compare the RPQ with two well-cited general measures of self-reflection, the Self-Reflection
154 and Insight Scale (Grant et al. 2002), and the Rumination-Reflection Questionnaire (Trapnell &
155 Campbell 1999).
156

Materials & Methods

157

158

159 *Participants*

160

161 Prior to conducting this research ethical approval was obtained from the Edith Cowan University
162 ethics review board. Ethics reference number: 2019-00741-ROGERS. Five hundred and one
163 undergraduate psychology students participated in this study for 0.5 credit points for a research
164 participation component in a statistics unit. A requirement for participation was that the person
165 must be currently employed in paid work in addition to their university studies. Research consent
166 was obtained in a check box as part of the online survey. The main industries that participants
167 indicated they worked in were Retail (25%), health care and social assistance (19%), education
168 and training (13%), and accommodation and food services (13%). The remaining 30% worked in
169 other miscellaneous industries. All participants indicated that they interact with clients at least
170 once a month, with a specific breakdown: Every day (81%), every few days (14%), about once a
171 week (3%), about once a fortnight (1%), and about once a month (1%).
172

173 *Measures*

174

175 Each participant answered the 40-item *Reflective Practice Questionnaire* (Priddis & Rogers
176 2018). In this study we changed the response scale from the original 6-point Not at all –

177 Extremely scale to be a 6-point Very rarely – Almost always scale (scoring: 1. Very rarely 2.
178 Rarely 3. Sometimes 4. Often 5. Very often 6. Almost always). Some minor modifications were
179 made to the individual items of the questionnaire to account for the change in response scale.
180 After sub-scales were determined via the factor analysis, sub-scale scores were calculated via
181 averaging across relevant items. A brief evaluation study examining the change of response scale
182 from the original RPQ can be found as document titled 'RPQ response scale evaluation'
183 alongside the raw data for this article at: https:/doi.org/10.6084/m9.figshare.22776251.v1.
184
185 Two other questionnaires were used in this study: The 20-item *Self-Reflection and Insight Scale*
186 (SRIS) (Grant et al. 2002), and the 24-item *Rumination-Reflection Questionnaire* (RRQ)
187 (Trapnell & Campbell 1999). Prior studies have consistently reported good reliability values for
188 both questionnaires (DaSilveira et al. 2015; Grant et al. 2002; Harrington & Loffredo 2010;
189 Trapnell & Campbell 1999).
190
191 The SRIS contains two sub-scales, Self-reflection sub-scale (Note, this sub-scale is comprised of
192 two strongly correlated sub-facets: Engagement in self-reflection, for example: "I frequently take
193 time to reflect on my thoughts", and need for self-reflection, for example "It is important for me
194 to evaluate the things that I do"), and Insight sub-scale, for example "I usually have a very clear
195 idea about why I've behaved in a certain way" (Grant et al. 2002). When answering the SRIS
196 participants were asked "Please rate your level of disagreement/agreement for each statement on
197 a scale that ranges from (1) Strongly disagree to (6) Strongly agree". In between the two poles
198 (i.e., 1 and 6) the numbers (2), (3), (4), and (5) were presented as options. Sub-scale scores were
199 calculated by averaging across relevant items.
200
201 The RRQ contains two sub-scales, Rumination, for example "I often reflect on episodes of my
202 life that I should no longer concern myself with", and Reflection, for example "I love analysing
203 why I do things" (Trapnell & Campbell 1999). When answering the RRQ participants were
204 asked "Please rate your level of disagreement/agreement for each statement". The response scale
205 used was (1) Strongly disagree (2) Disagree (3) Neutral (4) Agree (5) Strongly agree. Sub-scale
206 scores were calculated by averaging across relevant items.
207

Results

208 **Results**
209
210 *Factor analysis of the updated RPQ – The reflective practice scale*
211
212 The raw data for this manuscript is available at: https:/doi.org/10.6084/m9.figshare.22776251.v1.
213 An exploratory factor analysis was conducted on the 16-items of the RPQ that prior studies have
214 previously combined to provide a 'reflective capacity' measure. These items consisted of the
215 reflection-in-action, reflection-on-action, reflection-with-others and self-appraisal sub-scales
216 from the original RPQ. The exploratory factor analysis was conducted using the statistical
217 software Stata, using the principal factors method, applying an oblique Promax rotation. Two
218 factors had an eigenvalue greater than 1 (i.e., factor 1 = 6.19, factor 2 = 1.32). The factor
219 loadings from this analysis are presented in Table 1.
220
221 <Insert Table 1 here>

222

223 The reflection-with-others (RO) items loaded onto the second factor. There are two reasons we
224 suggest this might be the case. First, a point of difference between the RO items and all others is
225 that the wording of the RO items lacks specific reference to working with clients, and instead
226 refers simply to 'work'. This may lead some participants to interpret these items in a broader
227 sense in comparison to other items. Second, the RO items are specific to the notion of reflecting
228 with others, whereas all other items make no explicit mention of others. Based on the factor
229 analysis result, we made the decision to cut-down the RPQ reflection measure by removal of the
230 RO items.

231

232 The removal of the RO items reduces the item count from 16 to 12. We noticed an item from the
233 self-appraisal scale had a lower than ideal factor loading of 0.31 (i.e., "I think about my strengths
234 for working with clients"). Therefore, we decided that removal of that item was justifiable, and
235 we also decided on removal of the other self-appraisal item about weaknesses (i.e., "I think about
236 my weaknesses for working with clients") so that the remaining two self-appraisal items contain
237 consistent general phrasing (i.e., "I think about how I might improve my ability to work with
238 clients" and "I critically evaluate the strategies and techniques I use in my work with clients").
239 This results in 10 items for our proposed 'reflective practice' scale to represent the core scale of
240 the reenvisaged RPQ.

241

242 *Factor analysis of the updated RPQ – The extended version of the RPQ*

243

244 A follow up exploratory factor analysis was conducted to further examine consolidation of the
245 extended form of the RPQ. In this analysis we included the 10 reflective practice items from the
246 prior analysis alongside all other items from the original RPQ. An exception was the desire for
247 improvement items that we left out of the analysis. This was left out because after careful
248 consideration we determined that the original RPQ sub-scale does not provide a measure that is
249 nuanced enough to adequately cover this complex motivational construct (Breckenridge et al.
250 2019; Leach & Iyer 2023).

251

252 The same type of exploratory factor analysis was conducted as the prior analysis, using the
253 principal factors method, applying an oblique Promax rotation. Four factors had an eigenvalue
254 greater than 1 (i.e., factor 1 = 5.93, factor 2 = 5.48. factor 3 = 2.53, factor 4 = 1.15). The rotated
255 factor loadings from this analysis are presented in Table 2. These factors represent reflective
256 practice, confidence, uncertainty/stress, and work satisfaction.

257

258 <Insert Table 2 here>

259

260 *Comparisons among industry means.*

261

262 For all measures we compared across the different industry groups by running a series of one-
263 way ANOVAs with Follow up Bonferroni adjusted comparisons. We excluded the 'other'
264 category when running the analyses. An overall difference among reflective practice means was
265 found, $F(4,405) = 6.60$, $p < .001$, $\eta_p^2 = .06$, see Table 3. Follow up comparisons revealed that this
266 result was due to the Health and Education profession means being significantly higher than the
267 retail and accommodation & food means ($ps < .05$, although note education & retail comparison

268 *p* = .08). There was no difference among the administration, retail, and accommodation & food
269 groups (*p*s > .05). Nor was there any difference between the health and education groups (*p* >
270 .05).
271
272 There was an overall difference found among RPQ confidence means, $F(4,405) = 2.88$, $p = .02$,
273 $\eta_p^2 = .03$, however this was due to a marginally significant difference only between the retail and
274 accommodation/food mean (*p* = .04). There was no significant difference among RPQ
275 uncertainty/stress means, $F(4,405) = 1.20$, $p = .31$. There was an overall difference found among
276 RPQ work satisfaction means, $F(4,405) = 23.13$, $p < .001$, $\eta_p^2 = .19$, with follow up comparisons
277 revealing statistical differences among means followed the pattern: Health = Education >
278 Administration > Retail = Accommodation/food.
279
280 For SRIS self-reflection there was no difference among the industry means, $F(4,405) = 0.99$, $p =$
281 .41. There was an overall difference among means for SRIS insight, $F(4,405) = 6.01$, $p < .001$,
282 $\eta_p^2 = .06$, with follow up comparisons revealing that this result was due to the Administration
283 industry mean higher than the retail and accommodation & food means (*p*s < .001), with all other
284 comparisons non-significant. There was no difference among profession means for RRQ self-
285 reflection ($F(4,405) = 0.10$, $p = .98$), or rumination, $F(4,405) = 0.32$, $p = .87$.
286
287 <Insert Table 3 here>
288
289 *Correlations between the RPQ, SRIS, and RRQ.*
290
291 Correlations among all measures are presented in Table 4. Of particular interest are the
292 correlations between the RPQ reflective practice measure with the SRIS self-reflection ($r = .32$, p
293 < .05) and RRQ self-reflection ($r = .23$, p < .05) measures. Both associations are of relatively
294 weak magnitude. To double check that these associations are not the result of analysing a sample
295 where people from different industries are lumped together, we checked the correlations after
296 splitting the datafile by industry group. This did not change the overall result, with the
297 correlation between RPQ reflective practice and SRIS self-reflection ranging from .12 – .48, and
298 the correlation between RPQ reflective practice and RRQ self-reflection ranging from .09 – .45,
299 across the industry groups.
300
301 <Insert Table 4 here>
302
303 **Discussion**
304
305 In this study we propose a revision of the Reflective Practice Questionnaire (RPQ) that was
306 originally published by Priddis and Rogers (2018). Guided by factor analysis results, we propose
307 a revised 10-item version of the RPQ that provides a self-report measure of reflective practice,
308 see Table 5. We also propose a 30-item version of the questionnaire that we call the RPQ
309 extended (RPQ-E), see Table 6. This version contains the 10-item reflective practice scale along
310 with additional sub-scales for confidence, uncertainty/stress, and work satisfaction. A secondary
311 aim was to compare the RPQ with two general measures of self-reflection to test if the RPQ can
312 be considered as providing a measure of reflective practice that is distinct from general reflection

313 measures. We found low correlations between the RPQ and the general self-reflection measures
314 that provides support for this assertion.
315
316 *Modification of the RPQ*
317
318 An initial overall change from the original RPQ is to change the response scale from a 6-point
319 'Not at all – Extremely' to a 6-point 'Very rarely – Almost always' Likert-type scale. The
320 reasoning behind this decision is that asking participants the extent that they engage in reflective
321 practice might be confusing for some participants. For example, a participant might not fully
322 understand the difference between being reflective 'moderately' versus 'very much'. It should be
323 easier for a participant to decide upon how often they reflect on their thought and behaviours.
324 We concede there might still be some uncertainty, for example deciding between 'sometimes'
325 versus 'often', however we believe this still constitutes an improvement over the original
326 response scale.
327
328 Most research studies to date using the RPQ have averaged across the original RPQ sub-scales
329 'reflection-in-action', 'reflection-on-action', 'reflection with others', and 'self-appraisal' for a
330 16-item measure of reflective practice (Al-Osaimi 2022; Bari et al. 2021; Da Silva et al. 2022;
331 Day et al. 2022; Gabrielsson et al. 2022; Gross 2020; Gustafsson et al. 2020; Horst et al. 2019;
332 Khalil & Hashish 2022; Schwartz et al. 2020; Van Winkle et al. 2021; Van Winkle et al. 2022;
333 Whelehan et al. 2021). In the present study, an exploratory factor analysis revealed that the
334 'reflection with others' items loaded onto a separate factor, so these were dropped. We also made
335 the decision to drop an item from the 'self-appraisal' items with a low loading on the reflective
336 practice primary factor. We also dropped one more of the 'self-appraisal' items to bring the
337 measure down to 10 items to make it easier for averaging items to create the overall score. We
338 expect these changes will make using the RPQ more user friendly, especially in applied settings.
339
340 We also used factor analysis results to inform decision making to simplify the sub-scales of the
341 extended version of the RPQ to include 'confidence', 'uncertainty/stress', and 'work
342 satisfaction', alongside the 10-item 'reflective practice' component. The full extended version of
343 the RPQ has therefore changed from the original 40-item questionnaire with 10 sub-scales to a
344 30-item questionnaire with 4 sub-scales. We expect these changes will make the extended
345 version of the RPQ more user friendly.
346
347 *Comparing the RPQ with general measures of reflection*
348
349 Testing for discriminant validity (also called divergent validity) is an important part of
350 questionnaire evaluation (Fiske 1982; Lucas et al. 1996). Evidence for discriminant validity is
351 obtained when one measure has only weak association with another measure that is theoretically
352 not expected to overlap with the main measure of interest. For example, in an evaluation study of
353 the Self-Reflection and Insight Scale (SRIS), Banner et al. (2023) tested for discriminant validity
354 by comparing the SRIS with the perceived knowledge subscale from the short form of the Career
355 Futures Inventory (McIlveen et al. 2013). Banner et al. (2023) reported no statistically significant
356 correlation between these measures, concluding this represented some discriminant validity
357 evidence for the SRIS.
358

359 An additional aim of the present study was to contrast the RPQ, a measure designed to
360 specifically measure self-reflection upon one's work, with more general measures of self-
361 reflection. The goal was to provide some evidence that the RPQ reflective practice measure
362 provides a measure that can be differentiated from more general self-reflective tendencies of an
363 individual (i.e., discriminant validity evidence). We therefore included two well-cited general
364 measures of self-reflection in our study, the Self-Reflection and Insight Scale (SRIS) (Grant et al.
365 2002), and the Rumination-Reflection Questionnaire (RRQ) (Trapnell & Campbell 1999). As
366 expected, the RPQ reflective practice score was found to only have weak positive associations
367 with these measures, suggesting that it does measure a different construct.
368
369 Additionally, the RPQ reflective practice mean was found to be significantly higher for
370 participants in the healthcare and education industries compared with other industries such as
371 retail and food/accommodation. This is consistent with Priddis and Rogers (2018) original
372 findings and is consistent with the intuitive notion that reflective practice would be higher in
373 workplaces where reflective practice is encouraged and/or explicitly taught as part of
374 qualifications. The SRIS and RRQ general self-reflection measures did not differ across the
375 industry groups. This provides some further evidence for the validity of the RPQ as a measure of
376 reflective practice.
377
378 *Limitations and future research*
379
380 An inherent limitation associated with the RPQ is the self-report nature of the measure. Just
381 because a person thinks they are very reflective, does not guarantee this to be true. Any self-
382 report measures of reflection should be used with this in mind, and thus used with caution.
383 However, this does not invalidate the use of such measures. As reviewed in our introduction to
384 this paper, evidence does exist suggesting that the RPQ can be sensitive to changes in reflective
385 practice tendencies of individuals (Aitken et al. 2021; Da Silva et al. 2022; Horst et al. 2019;
386 Khalil & Hashish 2022; Schwartz et al. 2020; Van Winkle et al. 2021; Van Winkle et al. 2022).
387
388 Another limitation of the present study is the reliance on a convenience sample of university
389 students. We were originally planning on having several participant groups, however the
390 COVID-19 pandemic introduced challenges for that data collection. Regardless, the sample we
391 obtained is serviceable for the purposes of the current paper. In future research we will continue
392 validation work of the RPQ across different samples, and for different applications of the RPQ.
393 Introducing the more user-friendly version of the RPQ in this current paper we expect will help
394 facilitate that process.
395
396 While we believe the refinement of the RPQ as presented in this paper is a step forward in the
397 development of the questionnaire, we also recognise that simplifying the questionnaire may not
398 be beneficial for all potential applications of the questionnaire. For example, Sadusky and Spinks
399 (2022) reported that burnout was associated with the stress sub-scale of the original RPQ, but not
400 with the uncertainty sub-scale. Therefore, research questions that dig deeper into the sub-aspects
401 contained with the RPQ may benefit from using the original version of the RPQ or breaking
402 down the combined sub-scales of the updated RPQ (e.g., separating the uncertainty/stress subs-
403 scale into separate uncertainty and stress scores).
404

Conclusions

The purpose of the current study was to further refine the reflective practice questionnaire with the intention of making it more streamlined. In this article we provide a slightly modified version of the RPQ (see Tables 5 and 6 below) that we believe will make it a more user-friendly questionnaire for both researchers and practitioners. The RPQ is free to use and there is no requirement to obtain permission from the authors for use. However, we do enjoy hearing from people about how they are using it and are always happy to receive emails letting us know what you are using it for, or any questions you may have.

<Insert Table 5>

<Insert Table 6>

References

Aitken JA, Torres EM, Kaplan SA, DiazGranados D, Su L, and Parker SH. 2021. Influence of simulation-based training on reflective practice. *BMJ Simulation & Technology Enhanced Learning* 7:1-7. 10.1136/bmjstel-2021-000870

Al-Osaimi DN. 2022. Saudi nursing student satisfaction and evaluation of reflective practice: a cross sectional study. *Nursing Forum*:1-7. 10.1111/nuf.12707

Aurora M, Mawren D, and Fullam R. 2023. An exploratory evaluation of the impact and acceptability of a structured reflective practice program piloted with staff in a forensic mental health setting. *International Journal of Forensic Mental Health*. 10.1080/14999013.2023.2174213

Banner SE, Rice K, Schutte N, Cosh SM, and Rock AJ. 2023. Reliability and validity of the Self-Reflection and Insight Scale for psychologists and the development and validation of the revised short version. *Clinical Psychology and Psychotherapy*:1-13. 10.1002/cpp.2932

Bari A, Imran I, Ullah H, Arshad A, Naeem I, and Sadaqat N. 2021. Reflection as a learning tool in postgraduate medical education. *Journal of the College of Physicians and Surgeons Pakistan* 31:1094-1098. 10.29271/jcpsp.2021.09.1094

Breckenridge JP, Gray N, Toma M, Asmore S, Glassborow R, Stark C, and Renfrew MJ. 2019. Motivating Change: a grounded theory of how to achieve large-scale, sustained change, co-created with improvement organisations across the UK. *BMJ Open Quality* 8:e000553. 10.1136/ bmjoq-2018-000553

Chen Z, and Chen R. 2022. Exploring the key influencing factors on teachers' reflective practice skill for sustainable learning: A mixed methods study. *International Journal of Environmental Research and Public Health* 19:11630. 10.3390/ijerph191811630

Da Silva EJ, Mallett CJ, Sanchez-Oliva D, Dias A, and Palmeira A. 2022. A coach development program: A guided online reflective practice intervention study. *Journal of Sports Sciences* 40:1041-1053. 10.1080/02640414.2022.2045795

DaSilveira A, DeSouza ML, and Gomes WB. 2015. Self-consciousness concept and assessment in self-report measures. *Frontiers in Psychology* 6:930. 10.3389/fpsyg.2015.00930

Day SP, Webster C, and Killen A. 2022. Exploring initial teacher education student teachers' beliefs about reflective practice using a modified reflective practice questionnaire. *Reflective Practice*. 10.1080/14623943.2022.2048260

450   Fiske DW. 1982. Convergent-discriminant validation in measurements and research strategies. In:
451   Brinberg D, and Kidder LH, eds. *Forms of validity in research: New directions for methodology in*
452   *social and behavioral science*. San Francisco: Jossey-Bass, 77-92.
453   Fuertes-Camacho MT, Dulsat-Ortiz C, and Alvarez-Canocas I. 2021. Reflective practice in times of covid-
454   19: A tool to improve education for sustainable development in pre-service teacher training.
455   *Sustainability* 13:6261. 10.3390/su13116261
456   Gabrielsson S, Engstrom A, Lindgren B-M, Molin J, and Gustafsson S. 2022. Self-rated reflective capacity
457   in post-registration specialist nursing education students. *Reflective Practice*.
458   10.1080/14623943.2022.2071245
459   Grant AM, Franklin J, and Langford P. 2002. The self-reflection and insight scale: A new measure of
460   private self-consciousness. *Social Behavior and Personality: An International Journal* 30:821-836.
461   10.2224/sbp.2002.30.8.821
462   Greenberger SW. 2020. Creating a guide for reflective practice: applying Dewey's reflective thinking to
463   document faculty scholarly engagement. *Reflective Practice* 21:458-472.
464   10.1080/14623943.2020.1773422
465   Gross TL. 2020. Building the best: A quantitative evaluation of a state-level teacher retention strategy
466   designed to increase self-efficacy, reflective capacity, and job satisfaction through effective
467   professional development Doctor of Education. University of Missouri-Columbia.
468   Gustafsson S, Engstrom A, Lindgren B-M, and Gabrielsson S. 2020. Reflective capacity in nurses in
469   specialist education: Swedish translation and psychometric evaluation of the reflective capacity
470   scale of the reflective practice questionnaire. *Nursing Open* 8:546-552. 10.1002/nop2.659
471   Harrington R, and Loffredo DA. 2010. Insight, rumination, and self-reflection as predictors of well-being.
472   *The Journal of Psychology* 145:39-57.
473   Hebert C. 2015. Knowing and/or experiencing: a critical examination of the reflective models of John
474   Dewey and Donald Schon. *Reflective Practice* 16:361-371. 10.1080/14623943.2015.1023281
475   Horst A, Schwartz BD, Fisher JA, Michels N, and Van Winkle LJ. 2019. Selecting and performing service-
476   learning in a team-based learning format fosters dissonance, reflective capacity, self-
477   examination, bias mititgation, and compassionate behavior in prospective medical students.
478   *International Journal of Environmental Research and Public Health* 16:3926.
479   10.3390/ijerph16203926
480   Khalil AI, and Hashish EA. 2022. Exploring how reflective practice training affects nurse interns' critical
481   thinking disposition and communication skills. *Nursing Management* 29.
482   10.7748/nm.2022.e2045
483   Khoshgoftar Z, and Barkhordari-Sharifabad M. 2023a. Medical students' reflective capacity and its role in
484   their critical thinking disposition. *BMS Medical Education* 23:Article number 198.
485   10.1186/s12909-023-04163-x
486   Khoshgoftar Z, and Barkhordari-Sharifabad M. 2023b. Translation and psychometric evaluation of the
487   reflective capacity scale in Iranian medical education. *BMC Medical Education* 23:809.
488   10.1186/s12909-023-04791-3
489   Leach CW, and Iyer A. 2023. Moral improvement of self, social relations, and society. *Annual Review of*
490   *Psychology*:21.21-21.16. 10.1146/annurev-psych-032420-031614
491   Lee YJ, Kim YR, Lee HH, Kyung SY, Jung SR, Park KH, and Yune SJ. 2023. Validation of the Korean version
492   of the Reflective Practice Questionnaire in clinical clerkship of Korean medical students. *Korean*
493   *Journal of Medical Education* 35. 10.3946/kjme.2023.256
494   Lucas RE, Diener E, and Suh E. 1996. Discrminant validity of well-being measures. *Journal of Personality*
495   *and Social Psychology* 71:618-628. 10.1037/0022-3514.71.3.616
496   Mcllveen P, Burton L, and Beccaria G. 2013. A short form of the career futures inventory. *Journal of*
497   *Career Assessement* 21:43-52. 10. 1080/00223891.2017.1281286

498   Mezirow J. 1991. *Transformative dimensions of adult learning*. San Francisco, U.S.A.: Jossey-Bass.
499   Moeder-Chandler M. 2020. Teacher reflective practice and perceptions on overall job satisfaction
500   Doctor of Education in Educational Leadership PhD thesis. Trident University International.
501   Ooi SM, Fisher P, and Coker S. 2021. A systematic review of reflective practice questionnaires and scales
502   for the healthcare professionals: a narrative synthesis. *Reflective Practice* 22:1-15.
503   10.1080/14623943.2020.1801406
504   Or J, and Golba E. 2023. A correlational study on reflective capacity and ethical engagement in adult
505   learners of health professions. *Adult Learning*. 10.1177/10451595231178279
506   Parrott J, Speerhas T, Klick BD, Vazifedan T, and Guins T. 2023. Interprofessional reflective practice to
507   improve pediatric healthcare outcomes. *Reflective Practice*. 10.1080/14623943.2023.2235585
508   Priddis L, and Rogers SL. 2018. Development of the reflective practice questionnaire: preliminary
509   findings. *Reflective Practice* 19:89-104. 10.1080/14623943.2017.1379384
510   Rogers SL, Priddis L, Michels N, Tieman M, and Van Winkle LJ. 2019. Applications of the reflective
511   practice questionnaire in medical education. *BMC Medical Education* 19:47. 10.1186/s12909-
512   019-1481-6
513   Sadusky A, and Spinks J. 2022. Psychologists' engagement in reflective practice and experiences of
514   burnout: a correlational analysis. *Reflective Practice* 23:593-606.
515   10.1080/14623943.2022.2090326
516   Schon DA. 1995. *The reflective practitioner: How professionals think in action*. England: Bookpoint.
517   Schwartz BD, Horst A, Fisher JA, Michels N, and Van Winkle LJ. 2020. Fostering empathy, implicit bias
518   mitigation, and compassionate behavior in a medical humanities course. *International Journal of
519   Environmental Research and Public Health* 17. 10.3390/ijerph17072169
520   Thompson N, and Pascal J. 2012. Developing critically reflective practice. *Reflective Practice* 13:311-325.
521   10.1080/14623943.2012.657795
522   Trapnell PD, and Campbell JD. 1999. Private self-consciousness and the five-factor model of personality:
523   Distinguishing rumination from reflection. *Journal of Personality and Social Psychology* 76:284-
524   304. 10.1037/0022-3514.76.2.284
525   Tsingos C, Bosnic-Anticevich L, and Smith L. 2014. Reflective practice and its implications for pharmacy
526   education. *American Journal of Pharmaceutical Education* 78:18. 10.5688/ajpe78118
527   Van Winkle LJ, Schwartz BD, Horst A, Fisher JA, Michels N, and Thornock BO. 2021. Impact of a pandemic
528   and remote learning on team development and elements of compassion in prospective medical
529   students taking a medical humanities course. *International Journal of Environmental Research
530   and Public Health* 18:4856. 10.3390/ijerph18094856
531   Van Winkle LJ, Thornock BO, Schwartz BD, Horst A, Fisher JA, and Michels N. 2022. Critical reflection on
532   required service to the community propels prospective medical students toward higher
533   empathy, compassion, and bias mitigation but are these gains sustainable? *Frontiers in Medicine*
534   9. 10.3389/fmed.2022.976863
535   Whelehan DF, Conlon KC, and Ridgway PF. 2021. If in doubt don't act out! Exploring behaviours in
536   clinical decision making by general surgeons towards surgical procedures. *World Journal of
537   Surgery* 45:1055-1065. 10.1007/s00268-020-05888-2

538

Factor loadings from exploratory factor analysis on the reflective practice items from the original reflective practice questionnaire. Loadings less than 0.40 are omitted for clarity.

*Note, sub-scale items from the original RPQ: RiA = Reflection-in-action, RoA = Reflection-on-action, RO = Reflection-with-others, SA = Self-appraisal.

Item	Factor 1.	Factor 2.	Uniqueness.
1 (RiA). During interactions with clients I recognize when my pre-existing beliefs are influencing the interaction.	0.59		0.69
2 (RiA). During interactions with clients I consider how my personal thoughts and feelings are influencing the interaction.	0.77		0.46
3 (RiA). During interactions with clients I recognize when my client's pre-existing beliefs are influencing the interaction.	0.60		0.60
4 (RiA). During interactions with clients I consider how their personal thoughts and feelings are influencing the interaction.	0.68		0.54
5 (RoA). After interacting with clients I spend time thinking about what was said and done.	0.65		0.57
6 (RoA). After interacting with clients I wonder about the client's experience of the interaction.	0.75		0.52
7 (RoA). After interacting with clients I wonder about my own experience of the interaction.	0.71		0.47
8 (RoA). After interacting with clients I think about how things went during the interaction.	0.80		0.37
9. (RO) When reflecting with others about my work I become aware of things I had not previously considered.		0.63	0.61
10. (RO) When reflecting with others about my work I develop new perspectives.		0.79	0.42
11. (RO) Reflecting with others about my work helps me to work out problems.		0.68	0.50
12. (RO) I gain new insights when reflecting with others about my work.		0.83	0.35
13. (SA) I think about my strengths for working with clients.	0.31		0.74
14. (SA) I think about my weaknesses for working with clients.	0.56		0.61
15. (SA) I think about how I might improve my ability to work with clients.	0.44		0.52
16. (SA) I critically evaluate the strategies and techniques I use in my work with clients.	0.58		0.51

Exploratory factor analysis of the Reflective Practice Questionnaire - Extended (RPQ-E). Loadings less than 0.40 are omitted for clarity.

*Note, sub-scale items from the original RPQ: RiA = Reflection-in-action, RoA = Reflection-on-action, RO = Reflection-with-others, SA = Self-appraisal, CG = Confidence-General, CC = Confidence-Communication, UNC = Uncertainty, STR = Stress, JS = Job satisfaction.

Item	Factor loadings				Uniqueness
	1.	2.	3.	4.	
1 (RiA). During interactions with clients I recognize when my pre-existing beliefs are influencing the interaction.	0.48				0.71
2 (RiA). During interactions with clients I consider how my personal thoughts and feelings are influencing the interaction.	0.69				0.51
3 (RiA). During interactions with clients I recognize when my client's pre-existing beliefs are influencing the interaction.	0.63				0.59
4 (RiA). During interactions with clients I consider how their personal thoughts and feelings are influencing the interaction.	0.77				0.48
5 (RoA). After interacting with clients I spend time thinking about what was said and done.	0.63				0.58
6 (RoA). After interacting with clients I wonder about the client's experience of the interaction.	0.69				0.52
7 (RoA). After interacting with clients I wonder about my own experience of the interaction.	0.72				0.48
8 (RoA). After interacting with clients I think about how things went during the interaction.	0.80				0.38
9. (SA) I think about how I might improve my ability to work with clients.	0.53				0.52
10. (SA) I critically evaluate the strategies and techniques I use in my work with clients.	0.67				0.44
11. (CG) I feel like I have all the experience I require to effectively interact with clients.		0.78			0.46
12. (CG) I feel like I have all the practical skills I require to effectively interact with clients.		0.86			0.32
13. (CG) I feel like I have learnt everything I need to know in order to effectively interact with clients.		0.66			0.61
14. (CG) I feel like I have all the theoretical knowledge I require to effectively interact with clients.		0.72			0.53
15. (CC) I feel able to communicate so that a client can understand me easily.		0.60			0.52
16. (CC) I feel confident when communicating my ideas with a client.		0.46			0.49
17. (CC) I feel that I provide clear messages to my clients.		0.58			0.48
18. (CC) I feel capable in my ability to communicate with clients.		0.63			0.35
19. (UNC) I am uncertain that my planning for a client is the best possible way to proceed.			0.47		0.75
20. (UNC) I am uncertain that I am interpreting the needs of a client correctly.			0.50		0.61
21. (UNC) I am uncertain about how to handle the needs of a client.			0.61		0.48
22. (UNC) I am uncertain that I properly understand the needs of a client.			0.51		0.64
19. (STR) After interacting with clients I feel exhausted.			0.65		0.59
20. (STR) I find interacting with a client to be stressful.			0.75		0.42
21. (STR) I feel distressed after communicating with a client.			0.70		0.52

22. (STR) The pressure to meet needs of a client can feel overwhelming.			0.62		0.58
27. (JS) My work provides me with a sense of fulfilment.				0.87	0.23
28. (JS) I feel like my work means more to me than simply earning money.				0.79	0.33
29. (JS) I enjoy my work.				0.89	0.22
30. (JS) I find my work rewarding.				0.59	0.57

Means (with standard deviation in brackets) for the sub-scales of the RPQ-E, SRIS, and RRQ separated by industry groups.

	Health	Education	Admin.	Retail	Acomm./ Food	Other	Total	Cronbach's Alpha
RPQ. Reflective Practice	4.03 (0.78)	3.98 (0.74)	3.67 (0.90)	3.65 (0.86)	3.46 (0.89)	3.77 (0.82)	3.76 (0.85)	.89
RPQ. Confidence	4.08 (0.75)	4.19 (0.74)	4.25 (0.93)	4.37 (0.84)	4.01 (0.76)	4.26 (0.78)	4.21 (0.81)	.87
RPQ. Uncertainty/ Stress	2.67 (0.77)	2.77 (0.83)	2.52 (0.73)	2.75 (0.75)	2.71 (0.75)	2.66 (0.78)	2.69 (0.77)	.83
RPQ. Work Satisfaction	4.61 (1.00)	4.72 (0.94)	4.13 (1.11)	3.61 (1.14)	3.53 (0.93)	3.92 (1.18)	4.05 (1.15)	.86
SRIS. Self-reflection	4.85 (0.82)	4.73 (0.96)	4.92 (0.88)	4.68 (0.99)	4.68 (1.03)	4.92 (0.82)	4.79 (0.92)	.93
SRIS. Insight	4.28 (0.86)	4.30 (0.94)	4.64 (0.87)	4.02 (0.92)	4.01 (0.89)	4.44 (0.89)	4.25 (0.92)	.85
RRQ. Reflection	3.58 (0.68)	3.53 (0.79)	3.61 (0.90)	3.59 (0.76)	3.57 (0.67)	3.82 (0.79)	3.62 (0.77)	.93
RRQ. Rumination	3.59 (0.68)	3.65 (0.90)	3.69 (0.81)	3.69 (0.73)	3.70 (0.74)	3.57 (0.83)	3.65 (0.77)	.93

Pearson correlations among the sub-scales of the RPQ-E, SRIS, and RRQ.

Note: *p < .05

	RPQ. Ref. Prac.	RPQ. Conf.	RPQ. Unc./ Stress	RPQ. Work Satisfaction	SRIS. Self-reflection	SRIS. Insight	RRQ. Reflection	RRQ. Rumination
RPQ. Ref. Prac.	1							
RPQ. Conf.	.17*	1						
RPQ. Unc./Stress	.26*	-.40*	1					
RPQ. Work Satisfaction	.30*	.21*	-.22*	1				
SRIS. Self-reflection	.32*	.13*	-.06	.09*	1			
SRIS. Insight	.06	.27*	-.40*	.20*	.32*	1		
RRQ. Reflection	.23*	.03	-.03	.10*	.71*	.26*	1	
RRQ. Rumination	.14*	-.19*	.38*	-.22*	.19*	-.36*	.11*	1

The Reflective Practice Questionnaire (RPQ).

Note: Scoring instructions, average across all items to obtain a score that can potentially range from 1 – 6.

1   Please rate how often each statement applies to you:

	(1). Very Rarely	(2). Rarely	(3). Sometimes	(4). Often	(5). Very Often	(6). Almost Always
1. During interactions with clients I recognize when my pre-existing beliefs are influencing the interaction.	☐	☐	☐	☐	☐	☐
2. During interactions with clients I consider how my personal thoughts and feelings are influencing the interaction.	☐	☐	☐	☐	☐	☐
3. During interactions with clients I recognize when my client's pre-existing beliefs are influencing the interaction.	☐	☐	☐	☐	☐	☐
4. During interactions with clients I consider how their personal thoughts and feelings are influencing the interaction.	☐	☐	☐	☐	☐	☐
5. After interacting with clients I spend time thinking about what was said and done	☐	☐	☐	☐	☐	☐
6. After interacting with clients I wonder about the client's experience of the interaction.	☐	☐	☐	☐	☐	☐
7. After interacting with clients I wonder about my own experience of the interaction.	☐	☐	☐	☐	☐	☐
8. After interacting with clients I think about how things went during the interaction.	☐	☐	☐	☐	☐	☐
9. I think about how I might improve my ability to work with clients.	☐	☐	☐	☐	☐	☐
10. I critically evaluate the strategies and techniques I use in my work with clients.	☐	☐	☐	☐	☐	☐

The Reflective Practice Questionnaire Extended (RPQ-E).

Note: Scoring, all measures provide a score that can range from 1 - 6. Reflective practice score = Average across items 1 - 10. Confidence score = Average across items 11 - 18. Uncertainty/Stress score = Average across items 19 - 26. Work satisfaction score = Average across items 27 - 30. *Also note: There is scope for the confidence sub-scale to be further broken down into ''general confidence' (items 11-14) and 'communication confidence' (items 15-18) sub-scales. There is scope for the uncertainty/stress sub-scale to be further broken down into 'stress' (items 19-22) and 'uncertainty' (items 23-26) sub-scales.

1   Please rate how often each statement applies to you:

	(1). Very Rarely	(2). Rarely	(3). Sometimes	(4). Often	(5). Very Often	(6). Almost Always
1. During interactions with clients I recognize when my pre-existing beliefs are influencing the interaction.	☐	☐	☐	☐	☐	☐
2. During interactions with clients I consider how my personal thoughts and feelings are influencing the interaction.	☐	☐	☐	☐	☐	☐
3. During interactions with clients I recognize when my client's pre-existing beliefs are influencing the interaction.	☐	☐	☐	☐	☐	☐
4. During interactions with clients I consider how their personal thoughts and feelings are influencing the interaction.	☐	☐	☐	☐	☐	☐
5. After interacting with clients I spend time thinking about what was said and done	☐	☐	☐	☐	☐	☐
6. After interacting with clients I wonder about the client's experience of the interaction.	☐	☐	☐	☐	☐	☐
7. After interacting with clients I wonder about my own experience of the interaction.	☐	☐	☐	☐	☐	☐
8. After interacting with clients I think about how things went during the interaction.	☐	☐	☐	☐	☐	☐
9. I think about how I might improve my ability to work with clients.	☐	☐	☐	☐	☐	☐
10. I critically evaluate the strategies and techniques I use in my work with clients.	☐	☐	☐	☐	☐	☐
11. I feel like I have all the experience I require to effectively interact with clients.	☐	☐	☐	☐	☐	☐
12. I feel like I have all the practical skills I require to effectively interact with clients.	☐	☐	☐	☐	☐	☐
13. I feel like I have learnt everything I need to know in order to effectively interact with clients.	☐	☐	☐	☐	☐	☐
14. I feel like I have all the theoretical knowledge I require to effectively interact with clients.	☐	☐	☐	☐	☐	☐
15. I feel able to communicate so that a client can understand me easily.	☐	☐	☐	☐	☐	☐
16. I feel confident when communicating my ideas with a client.	☐	☐	☐	☐	☐	☐
17. I feel that I provide clear messages to my clients.	☐	☐	☐	☐	☐	☐
18. I feel capable in my ability to communicate with clients.	☐	☐	☐	☐	☐	☐
19. After interacting with clients I feel exhausted.	☐	☐	☐	☐	☐	☐
20. I find interacting with a client to be stressful.	☐	☐	☐	☐	☐	☐
21. I feel distressed after communicating with a client.	☐	☐	☐	☐	☐	☐
22. The pressure to meet needs of a client can feel overwhelming.	☐	☐	☐	☐	☐	☐
23. I am uncertain that my planning for a client is the best possible way to proceed.	☐	☐	☐	☐	☐	☐
24. I am uncertain that I am interpreting the needs of a client correctly.	☐	☐	☐	☐	☐	☐
25. I am uncertain about how to handle the needs of a client.	☐	☐	☐	☐	☐	☐
26. I am uncertain that I properly understand the needs of a client.	☐	☐	☐	☐	☐	☐
27. My work provides me with a sense of fulfilment.	☐	☐	☐	☐	☐	☐
28. I feel like my work means more to me than simply earning money.	☐	☐	☐	☐	☐	☐
29. I enjoy my work.	☐	☐	☐	☐	☐	☐
30. I find my work rewarding.	☐	☐	☐	☐	☐	☐