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Full Length Article

A conceptual framework to facilitate clinical judgement in nursing: A methodological perspective



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ABSTRACT

The South African health care and education systems are challenged to provide independent, critical thinking nurses who can cope with diversity in a creative way and define their role in a complex, uncertain, rapidly changing health care environment. Quality clinical judgement is an imperative characteristic that newly qualified professional nurses should possess. To accommodate these needs, SANC in line with the SAQA Act, advocated the development of teaching and learning strategies to balance theory and practice opportunities together with an outcome-based, studentcentred approach and appropriate clinical supervision. This resulted in a positive outcome to facilitate the integration/fusion of theory and practice. The purpose of this study was to synthesise a teaching–learning strategy for creating an enabling learning environment to facilitate clinical judgement in South African undergraduate nursing students. The proposed teaching–learning strategy is grounded in modern-day constructivist approach of learning. The conceptual or theoretical framework of this study aimed to link the central concepts that were identified from the conclusions of four (4) strategic objectives of the two preceding phases of the study into a new structure of meaning that served as a basis for the proposed strategy. The implementation of the proposed action plan to achieve the stated strategic objectives should empower the relevant role players to facilitate clinical judgement in undergraduate nursing students and thereby promote autonomous and accountable nursing care.

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1. Introduction

The changing needs of the health care environment require a shift to interactive, student-centred curricula (Potgieter, 2012).

Nurse graduates have to be able to think critically and innovatively, should be competent in reflection and self-critique, synthesise information, link concepts and become self-directed lifelong learners. They must also be able to decide

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when and why higher order thinking is essential (Frith & Clark, 2013).

This will have a positive impact on patient outcomes as required for competent, professional, patient-centred care. Conversely, if nurse graduates do not have the ability to think critically or have poor clinical reasoning skills they often fail to detect impending patient deterioration, including failure to synthesise and act on clinical information (Considine & Currey, 2014:304) resulting in a failure-to-rescue which **effects quality care and patient safety** (World Health Organisation (WHO), 2013:1; Leonard and Kyriacos, 2015:16). Nursing schools across the country are striving to meet the challenges of rapidly changing health and educational systems and are reconsidering the role of the teaching–learning approach in an increasingly complex learning environment (South African Nursing Council (SANC), 2005; Nielsen, 2009; Sturgeon, 2011).

The SANC (2005) states the purpose of nursing education as “develop[ing] the undergraduate nursing student to become an independent, knowledgeable, safe practitioner with critical thinking skills.” This goal is in default, since research indicates that the current South African nursing programmes do not adequately prepare nursing students for the professional demands they have to face after completing their basic nursing education. Nurses are thus left extremely vulnerable, as they are not fully prepared clinically or educationally to treat patients requiring these comprehensive diagnostic and curative clinical skills due to the increase in demand mentioned above (Considine & Currey, 2014:304; Department of Health, 2008a), which directs the need to investigate the most crucial interrelated concepts.

Previous research (concept analysis of clinical judgement and focus group interviews with professional nurses) done by (Van Graan, Williams & Koen, 2016) identified essential concepts that address the four (4) strategic objectives briefly stated as the creation and utilisation of potential learning experiences to facilitate reasoning and problem solving skills through accompaniment, supervision and role modelling; the application of a variety of teaching–learning methods to improve, the accommodation of students' individuality and diversity of learning needs and styles and the facilitation of role players' interactive participation to achieve fusion of theory and practice (see Table 4) within aim of a teaching–learning strategy instituting an enabling learning climate/environment, to facilitate undergraduate nursing student's higher order thinking skills that would enhance execution of sound clinical judgement.

1.1. Focus and background of the study

The role of the nurse is becoming increasingly more complex as the health care environment has come to demand an emphasis on patient-centred care, patient satisfaction and evidence-based practice (Nabors, 2012).

South Africa carries a triple burden of diseases and the country's health and education systems are therefore challenged by the need for independent, critical thinkers who are able to question, weigh evidence, make informed judgements and accept the incomplete nature of knowledge, as well as to influence change and cope with diversity in a more creative way (SANC, 2005). Problem solving has long been recognised

as central to nursing practice and this requires the development of critical thinking, reasoning and decision-making skills (see Sections 1.5.3.2; 1.5.3.3 for concept clarification). There is an expectation that nursing graduates will come to the clinical environment possessing the knowledge and thinking skills needed for nursing care (Frith & Clark, 2013).

Currently this expectation leads from the clinical environment not met, to ill-prepared nursing graduate's not coping with the diversity and reality of the nursing care environment. Nurses in general struggle with a lack of support, nurses/nurse educator shortages, complex patients' and work environment issues. This has resulted in novice professional nurses often discovering their shortcomings when arriving in the health care environment. They are reluctant to make high-level decisions in an independent manner due to a lack of competence and a fear of making mistakes and being criticised by peers (Nabors, 2012; Thomas, Bertam & Allen, 2012), all the while trying to cope with the expansion in role. Chang, Chang, Kan, and Chou (2011) support the shortcomings and indicate that newly qualified nurses lack the high levels of cognitive proficiency demanded by the health care environment.

Conversely, nurses lacking higher order thinking skills may be at risk of not detecting acute patient changes and complications and often fail to detect impending patient deterioration resulting in harm to patients and poor quality care (Frith & Clark, 2013). *Cognitive failure* was identified as a factor in 57% of adverse clinical events and involves a number of features, including failure to synthesise and act on clinical information. Thinking strategies identified are therefore obligatory of nurses' professional identity for safe and quality clinical practice (SANC, 2005; Sturgeon, 2011).

In the wake of a growing concern about nurse competence, the authors Nielsen (2009) and Pongmarutai (2010) second the concern that nursing education programmes do not adequately prepare the student for the professional demands they face after completing their studies. The focus of nursing education currently seems to be on improving clinical skills rather than refining critical reasoning and communication aptitude but developing creative programmes that promote.

The researcher's experience as a nurse educator is that nursing students are accustomed to the presence of the lecturer/educator in class. The lecturer/educator provides the theoretical component of the curriculum using traditional teaching strategies (lectures) and offering information (facts) to be memorised, with the lecturer in direct control of the content (Bruce, Klopper & Mellish, 2011; Potgieter, 2012). Potgieter (2012) and Pongmarutai (2010) accentuate the knowledge explosion over the past decade, which implies that nursing educators can no longer simply “cover” the content of a subject or discipline. Frith and Clark (2013) stress that undergraduate nursing students are expected to develop and integrate knowledge and practice to achieve conceptual understanding to make the necessary clinical decisions in preparation for their role as professional nurses.

Nursing curricula throughout South Africa is under pressure for extensive revision. The SANC (2005), in line with the South African Qualification Authority (SAQA) Act (Act 58 of 1995), as well as Frith and Clark (2013) highlight the purpose of nursing education as “develop[ing] the undergraduate nursing student on a personal and professional level within a learning

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