



## Educating registered nursing and healthcare assistant students in community-based supportive care of older adults: A mixed methods study<sup>☆</sup>



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### SUMMARY

**Background:** Collaborative education that prepares nursing and healthcare assistant students in supportive care for older adults living at home with advanced chronic illness is an important innovation to prepare the nursing workforce to meet the needs of this growing population.

**Objectives:** To explore whether a collaborative educational intervention could develop registered nursing and healthcare assistant students' capabilities in supportive care while enhancing care of clients with advanced chronic illness in the community.

**Design:** Mixed method study design.

**Setting:** A rural college in Canada.

**Participants:** Twenty-one registered nursing and 21 healthcare assistant students completed the collaborative workshop. Eight registered nursing students and 13 healthcare assistant students completed an innovative clinical experience with fifteen clients living with advanced chronic illness.

**Methods:** Pre and post-test measures of self-perceived competence and knowledge in supportive care were collected at three time points. Semi-structured interviews were conducted to evaluate the innovative clinical placement.

**Results:** Application of Friedman's test indicated statistically significant changes on all self-perceived competence scores for RN and HCA students with two exceptions: the ethical and legal as well as personal and professional issues domains for HCA students. Application of Friedman's test to self-perceived knowledge scores showed statistically significant changes in all but one domain (interprofessional collaboration and communication) for RN students and all but three domains for HCA students (spiritual needs, ethical and legal issues, and inter-professional collaboration and communication). Not all gains were sustained until T-3. The innovative community placement was evaluated positively by clients and students.

**Conclusions:** Collaborative education for nursing and healthcare assistant students can enhance self-perceived knowledge and competence in supportive care of adults with advanced chronic illness. An innovative clinical experience can maximize reciprocal learning while providing nursing services to a population that is not receiving home-based care.

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### Introduction

Nursing education programs must prepare students for today's healthcare realities while anticipating nursing care needs of future

populations (Pijl-Zieber and Kalischuk, 2011). Today's healthcare realities are shaped by the needs of a population that is aging with multiple and complex chronic illnesses, needs that are expected to increase in future. Some would argue that sustainability of healthcare systems depends upon finding innovative ways to meet the needs of this population (Payne, 2014). Nursing education programs can contribute to this reform by ensuring that future nurses are well-prepared to address care needs and by designing innovative clinical experiences to improve services for this population. In this project, we trialled an educational innovation that consisted of (i) a collaborative workshop for registered nursing (RN) and healthcare assistant (HCA) students in a palliative

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approach to care and (ii) an innovative clinical experience where selected RN and HCA students were partnered to provide care to older adults living in the home with advanced chronic illness who were not yet eligible for home-based nursing services.

## Background

Populations aging with multiple chronic illnesses are changing the landscape of healthcare around the world. The long illness trajectories that blur distinctions between chronic illness and palliative care are creating new care needs (Stajduhar, 2011). To address these needs, there has been increasing emphasis on a palliative approach to care which includes (1) an upstream application of palliative care principles for those living with life-limiting chronic illness and (2) adaptation of palliative care knowledge to a variety of chronic illness conditions (Sawatzky et al., 2014a). A palliative approach is less about prognosis and more about interventions implemented early on to support patients and families in achieving their goals of care (Stajduhar and Tayler, 2014). This shift to a palliative approach has in turn produced new educational needs for nurses. Traditionally, nurses have been educated in chronic illness care and palliative care as separate bodies of knowledge. They must now learn a new body of knowledge that adapts and synthesizes chronic illness and palliative knowledge to better meet the needs of this population. Further, this education needs to be provided to all members of the team who provide care to older adults. Despite acknowledgement of the importance of teamwork for supportive care of the elderly (Head et al., 2014), HCAs are rarely recognized as integral team members outside of the long term care context. HCAs play a central role in home-based care of older adults, and yet, many feel under-prepared in chronic and palliative care (Lunn et al., 2010; McDonnell et al., 2009). Providing collaborative education between registered nursing and healthcare assistant students can help to address these knowledge deficits, promote teamwork in the home setting, and contribute to better care of this population.

Further, a palliative approach to care must be embedded within care delivery systems across contexts (Sawatzky et al., 2014a). Too often there is a mismatch between the needs of this population and the services provided. For example, older adults struggle at home with burdensome symptoms as a result of their advancing chronic illness, (Mason et al., 2014) but may not yet qualify for home-based nursing services. This is particularly true in countries such as Canada where the shift from hospital-based to community-based care varies by jurisdiction. In British Columbia, the site of this study, older adults qualify for government-funded home services only when they require task-related care. As a result, older adults are left to struggle independently with chronic illness symptoms such as fatigue, pain, and diminishing mobility—resulting in poor quality of life (Parker et al., 2014).

This mismatch between needs and services provides important opportunities for innovative educational experiences. In Canada, innovative clinical experiences have often been developed to better serve vulnerable populations (Hoe-Harwood et al., 2009). Older adults living in the home with advanced chronic illness can be considered a vulnerable population because of heavy symptom burden and limited home-care services. There is evidence to suggest that such clinical placements in which older adults are visited in the home by nursing students are both feasible and beneficial. In a study conducted in the rural United States nursing students visited older adults in the home conducting home safety assessments, health histories and holistic assessments. Positive outcomes were cited by both students and older adult participants (Walton and Blossom, 2013).

The purpose of this study was to explore whether an educational workshop in a palliative approach and an innovative clinical placement could develop RN and HCA students' capabilities in supportive care<sup>1</sup>

while enhancing care of clients living with advanced chronic illness in the community. Objectives of the study were twofold: (1) to develop and evaluate a collaborative educational workshop for RN and HCA students to prepare them for supportive care for adults living with advanced chronic illness. (2) To pilot an innovative clinical placement for RN and HCA students in which they jointly provided supportive care for adults living with advanced chronic illness in the home. This paper will report on the outcomes of the workshop and on the student and client experiences of the innovative clinical experience. Student experiences of receiving collaborative education will be reported in another publication.

## Method

This was a mixed methods convergent study design (Cresswell and Plano Clark, 2011). To evaluate student outcomes, pre and post-test measures of self-perceived competence and knowledge in supportive care were collected prior to the workshop (T-1), immediately after the workshop (T-2) and three months after the workshop (T-3). A sub-set of students who completed the workshop also took part in an innovative clinical placement with adults living with advanced chronic illness in the community. Qualitative semi-structured interviews were conducted with students and clients to evaluate the education and clinical placement.

## Setting

The study was conducted in a college in a rural community with a population of approximately 10,000. The college prepares HCAs through a six month program of study and RNs through a four year program of study in partnership with a university.

## Participants

Student participants included HCA students who had completed the theory requirements of their program and were now entering the practicum requirement and registered nursing students in their third or fourth year. Students were recruited through advertising and word of mouth at the College. Twenty-one RN and 21 HCA students completed the workshop. Of those, 8 RN and 13<sup>2</sup> HCA students went on to complete the innovative clinical experience. Fifteen RN students (8 from the innovative clinical experience) and 18 HCA (12 from the innovative clinical experience) students returned completed measurements for all three time points. Community client participants (n = 15) included adults living with an advanced chronic illness in the community who were not currently receiving home-based nursing services. Clients were recruited through community advertising and word of mouth. Clients were informed that this was an opportunity for students to learn more about client illness experiences and for clients to learn more the management of their illness and the resources available to them. Ethical approval for the study was obtained from the University, College and Health Region Ethical Review Boards. Students and clients signed research consent forms. Students were instructed on research ethics and confidentiality. Client data was anonymized through the use of study numbers.

## Study Period

Data collection took place between January and June 2014.

<sup>1</sup> We are using the term supportive care in this study out of respect for clients who have serious advancing chronic illness but who may not yet be ready for the use of palliative terminology.

<sup>2</sup> Fifteen HCA students entered the clinical experience, but not all students completed minimal requirements for various reasons.

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