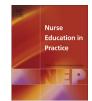
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# Primary care clinical placements: The views of Australian registered nurse mentors and pre-registration nursing students (part 2)



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#### ABSTRACT

An increased burden of chronic and complex conditions treated in the community and an aging population have exacerbated the primary care workload. Predicted nursing shortages will place further stressors on this workforce. High quality clinical placements may provide a strategic pathway to introduce and recruit new nurses to this speciality. This paper is Part 2 of a two part series reporting the findings of a mixed methods project. Part 1 reported on the qualitative study and Part 2 reports on the quantitative study. Forty-five pre-registration nursing students from a single Australian tertiary institution and 22 primary care Registered Nurse (RN) mentors who supervised student learning completed an online survey. Students largely regarded their primary care placement positively and felt this to be an appropriate learning opportunity. Most RNs were satisfied with mentoring pre-registration nursing students in their setting. Furthermore, the RNs desire to mentor students and the support of general practitioners (GPs) and consumers were seen as key enablers of pre-registration nursing placements. Findings from this study provide a preliminary impression of primary care clinical placements from the perspective of pre-registration nursing students and registered nurse mentors. Further research should examine whether a broader scope of non-traditional health settings such as non-government organisations, charities, pharmacies, welfare and social services can also provide appropriate learning environments for pre-registration nursing students.

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#### Introduction

The declaration of Alma Ata initiated an international shift towards the delivery of primary care (World Health Organization, 1978). To strategically prepare a workforce for an increase in chronic and complex illness, nursing education in Australia was progressively transferred out of hospitals and into higher education institutions (HEI's) capable of educating large numbers of nurses (Reid, 1994).

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Whilst the transition into HEIs was largely completed by the late 1980's, the new nursing curriculum continued to focus on a medical model of illness and was vague in its approach to preparing a primary care workforce (Keleher et al., 2010). To streamline costs and supervision, competing HEIs sought clinical placements with tertiary hospitals providing acute care services and capable of accommodating large volumes of students within a single setting (Halcomb et al., 2012). Access to a constant stream of beginning nurses ensured this strategic alliance was beneficial to both the HEI's and the acute care facility (Lamont et al., 2015). It is evident however, that this long standing arrangement has limited the preparedness of pre-registration nurses for work in primary care (Albutt et al., 2013) The evidence further suggests that nurses transitioning from a task orientated acute care facility into a case management position in primary care have concerns around their roles and scope of practice (Al Sayah et al., 2014).

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Over the past decade, the Australian Federal government has invested in initiatives to expand and enhance the role of nurses working in primary care (Mason, 2013). As the number of career opportunities open up in this evolving speciality, it is vital to expose pre-registration nurses to these new roles within their nursing education (Parker et al., 2010). Clinical experience in primary care facilities will help ensure that pre-registration nurses are equipped with the necessary skills to perform health assessments and patient education around preventative health and health promotion (Australian General Practice Network, 2009; Mckenna et al., 2014).

#### Background

To date, contemporary literature around pre-registration nursing clinical placements is predominately focused on the acute care sector or aggregates placement locations within single studies (Bjørk et al., 2014). Despite this dominance, such literature does provide generic insight into factors which influence the quality of clinical learning. With a shortage of placements across all settings, it is vital to explore how learning experiences are optimised in different clinical learning environments (Brown et al., 2011).

Relationships with the nurse mentor (Papastavrou et al., 2010; Saarikoski et al., 2005), welcomingness and belongingness (Levett-Jones et al., 2008); opportunities to practice clinical skills (Newton et al., 2009); and nursing culture (Nash et al., 2009) are each known to influence the clinical learning environment (CLE). Conversely, a busy workplace (Stayt and Merriman, 2013) and multiple mentors are not conducive to learning during clinical placements (Andrews et al., 2005).

Although common nuances are likely to exist in many aspects of the clinical learning environment, primary care placements have a number of different features that may impact on the placement experience. In particular, the model of supervision differs significantly between acute and primary care placements. During acute care placements, it is common for a HEI employed facilitator to have overarching responsibility for the clinical supervision and assessment of up to eight students (HWA, 2010). At the ward level, individual students are largely supported by a registered nurse who aids practical learning and ensures patient safety (Andrews et al., 2006). The registered nurse is often not involved in the process of student assessment. Depending on shift rotations, students are likely to work with a range of registered nurses during their acute care placement (Walker et al., 2013).

In contrast, primary care placements are often only able to accommodate either single students or small groups of students at a particular time (Halcomb et al., 2012). University employed facilitators are less common in the primary care setting (Peters et al., 2013). Instead, pre-registration nurses are largely mentored by a registered nurse from the individual placement location who has the dual responsibility of a full clinical workload and support of student learning (Peters et al., 2013). As primary care nurses tend to work more regular shifts, the student is likely to have continuity of the nurse mentor for the duration of the placement.

Given the important role of the mentor in shaping the clinical placement experience (Papastavrou et al., 2010; Saarikoski et al., 2005) it is important to understand if the model of supervision largely employed during primary care placements influences the learning experience of pre-registration nursing students. Such an exploration will determine if the students learning needs are met and provide evidence based knowledge to inform policies to enhance the experience.

#### Methods

#### Research design

This project adopted a concurrent mixed methods approach. Findings from the qualitative study are reported as Part 1 of this series (McInnes et al., 2015). This paper reports on the quantitative study. Quantitative data were collected via two separate online surveys. One survey collected data from pre-registration nursing students who had completed a placement in primary care and the other from the registered nurses who had supported these placements.

#### Survey instruments

The Student survey comprised 54 items, including 15 demographic items, the 19 item Clinical Learning Environment Inventory-19 (CLEI-19) (Salamonson et al., 2011) and 17 item's from the Quality Clinical Placement Inventory (QCPI) student survey (Courtney-Pratt et al., 2012). A further 3 items assessed the perceived appropriateness of primary care placements.

All items in the CLEI-19 pertain to the respondents' actual experiences and were rated on a four point Likert scale ranging from strongly agree to strongly disagree. Ten items were worded positively and nine items were worded negatively (Salamonson et al., 2011). Respondents rated all QCPI items on a five point Likert scale, ranging from strongly agree to strongly disagree (Courtney-Pratt et al., 2012). Two free text fields provided respondents with the opportunity to describe enablers or barriers effecting the quality of their placement experience.

The Registered Nurse survey comprised 20-items. 13-items explored the nurses' demographics and the setting in which they worked. The remainder of the items focused on their experience in supervising pre-registration nursing students within their practice. As no suitable instrument existed, this tool was developed from a review of the literature around clinical placement evaluation.

Both tools were checked for face and content validity by consulting experts in nursing, primary care and research (Portney and Watkins, 2009). Prior to launching the survey online, a pilot test was performed by a non-research member of staff to assess overall structure and readability of the online tool. The survey was powered by Qualtrics software (Qualtrics Labs Inc., 2009).

#### Participants

Pre-registration nursing students were enrolled into either a graduate entry/master of nursing program or a combined degree/ master of nursing program offered by an Australian research intensive university. Graduate entry/master of nursing students were entering their final year of study and had the scope to participate in full patient assessments and administer medications. Combined degree/master of nursing students were in the first year of their nursing program. This group of respondents had a limited scope of practice which largely followed a communication-based framework focussing on therapeutic listening and nurse—patient interactions. Placement sites included general practices, schools, ambulatory care, community health centres, Aboriginal health and refugee health centres. Placements were located in metropolitan and regional areas of New South Wales and the Australian Capital Territory.

Various terms are used to describe the roles related to the oversight and assessment of the students' performance during clinical placements, these include: mentor, supervisor/supervision and facilitation (Health Workforce Australia, 2010). In this study, supervising nurses were registered nurses recruited from the Download English Version:

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