



Linking theory to practice in introductory practice learning experiences[☆]



Diane Fotheringham^{*}, David Lamont¹, Tamsin Macbride², Laura MacKenzie³

University of the West of Scotland, United Kingdom

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ABSTRACT

Nurse educators internationally are challenged with finding a sufficient number of suitable practice learning experiences for student nurses. This paper reports on a study which aimed to evaluate the utilisation of specialised and highly technical environments (“new” environments) as first practice learning experiences for adult nursing students in the UK. A survey was conducted on 158 first year student nurses who were allocated to either “new” or “old” (those that have been traditionally used) environments. Data analysis was conducted using Mann–Whitney *U* test and exploratory factor analysis was performed. Results have demonstrated that all environments afford novice nurses the opportunity to observe or practice the essential skills of nursing. In addition, the “new” environments have revealed greater opportunity to observe and practice aspects of practice related to governance of care.

This paper concludes that a nursing curriculum which makes clear association between the essential nature of nursing and practice based learning outcomes will help the student to appreciate contemporary nursing practice and to link nursing theory with practice. Further research is required to explain the observation that aspects of practice related to governance are more visible within highly technical areas of practice.

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Background

In order to meet the UK Nursing and Midwifery Council (NMC) Standards for Pre-Registration Nursing Education, the University of the West of Scotland and its associated Health Boards are committed to providing practice learning experiences for student nurses which maximise available learning opportunities and enhance learning and aid the application of theory to nursing practice (Nursing and Midwifery Council, 2010). In order to achieve this, students gain exposure to person centred care in a wide variety of environments, where patients access care appropriate to their needs and across the 24 h/7 day continuum of care. These practice learning experiences are designed to embody aspects of

contemporary healthcare delivery and encompass all aspects of National Health Service (NHS) environments in Scotland including ambulatory services and community healthcare provision, as well as private, independent and voluntary organisations.

However, several recent changes within the healthcare environment have acted to militate against this ambition. The NHS service reconfiguration and pay modernisation, for example, has increased staff leave entitlement and subsequent availability of mentors. Similarly, curriculum redesign and a move to a single annual intake of student nurses has caused the potential for an inundation of student nurses at specific periods in the year, thus raising the possibility of compromise in practice learning experience availability. As a result, these changes have had the effect of decreasing an already shallow capacity in some environments to critical levels. Consequently, and in common with nursing curriculum designers in many parts of the world, Faculty at the University of the West of Scotland are faced with the perennial issue of a shortage of practice learning experiences for pre-registration nursing students (National Review of Nursing Education (2002); OCNE, 2013; Smith et al., 2010; Tanner et al., 2008).

In response to this and to help ameliorate this challenge, an approach to introductory practice learning experiences has been

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^{*} Corresponding author. Tel.: +44 (0)141 849 4204; fax: +44 (0)141 849 4203.
E-mail addresses: diane.fotheringham@googlemail.com (D. Fotheringham), David.Lamont@ggc.scot.nhs.uk (D. Lamont), tamsin.macbride@uws.ac.uk (T. Macbride), laura.mackenzie@uws.ac.uk (L. MacKenzie).

¹ Tel.: +44 (0)141 201 5504; fax: +4 (0)141 201 5575.

² Tel.: +44 (0)141 849 4281; fax: +44 (0)141 849 4203.

³ Tel.: +44 (0)141 849 4322; fax: +44 (0)141 849 4203.

adopted by University of the West of Scotland and their partner service provider, NHS Greater Glasgow and Clyde which has challenged traditional local practice. This approach has involved the inclusion of acute, hospital based environments which have been, hitherto, utilised solely as a 'specialist' practice learning experience for second-year nursing students and, in some cases, requested as a final management practice learning experience. These "new" environments included emergency departments (ED), day surgery units, operating rooms (OR), outpatient departments, endoscopy units, critical care units (high dependency and intensive care units (ICU)) and radiology. "Old" environments may be defined as those which have been, traditionally, utilised as introductory practice learning experiences, such as general surgery wards, general medical wards and care of the elderly environments.

Traditionally, these "new" environments have been rarely used for introductory practice learning experiences since they have been considered to be either particularly specialised, highly technical or areas where the boundaries between nursing and other health professionals have been disputed. Nursing practice within the ICU is considered to be extremely technical in nature, coupled with the view that this highly specialised area of practice is particularly stressful due to the proximity to loss and suffering (Mealer et al., 2007). Timmons and Tanner (2004) state that both the OR and the ED are both areas where there are disputed boundaries of practice and professionalism with other healthcare professionals within the UK and internationally, often compelling nurses within these areas to validate their professional status and self-worth. The area of nursing practice that is, perhaps, the most maligned in this regard is that which occurs within the OR. In their study, McGarvey et al. (2000) concluded that there is no good basis on which to say that the work of the nurse in theatre is, indeed, nursing and conclude that clarity in role required with a view to determining new role development. Thus, it has been concluded that novice nursing students would not be able to practice the essential skills of the nurse in these areas.

The project team considered that utilising these areas for introductory and, indeed, other practice learning experiences throughout the programme of education would reflect the dynamic changes in nursing in recent years within the UK, where nurses have enhanced their roles and new services have been set up to meet the changing needs of patients (Department of Health (2006); Scottish Executive, 2006). However, it was required to evaluate the suitability of these "new" environments for novice nursing students.

The Quality Assurance Agency (2012, p. 32) states that "when considering the appropriateness of physical learning resources and the learning environment provided by a delivery organisation, support provider or partner, an evaluation is made of whether these are relevant to, and adequate for, the type, level and volume of the learning to be undertaken and whether they are appropriate to secure the achievement of the relevant learning outcomes". The practice learning outcomes concerned were closely aligned to the learning outcomes of a period of theoretical study exploring the essential nature and professional responsibilities of nursing practice, which the nursing students undertook immediately prior to this introductory practice learning experience. Therefore, the decision to incorporate these "new" environments for introductory practice learning experiences had to be based upon an assurance that the learning outcomes which the students were required to achieve during the practice learning experience could be met and that the theoretical component they had engaged in did, in fact, relate to practice.

Although there is some evidence in the literature that pre-registration nursing students are now placed in less traditional environments (Conneely and Hunter, 2012; Gillespie and McLaren,

2010; Harrison, 2010), there is a lack of research which evaluates this approach and it was deemed necessary to evaluate the impact of this local change to the student experience. In order to evaluate how well the "new" environments related to the theoretical underpinning and, thus, the suitability of the practice learning experience for this stage of nursing practice, the following question was posed: to what extent does the introductory practice learning experience help first year, introductory placement student nurses relate nursing theory to practice?

Design

This study utilised a survey method, composed of an 18 item self completion questionnaire. This questionnaire composed of one independent variable (identification of the environment), and 14 dependent variables (6-point Likert scales, where 1 = strongly agree, 6 = strongly disagree), designed to judge the participants' perceptions of whether they had been offered the opportunity in the environment to either practice or observe an aspect of nursing as defined by the learning outcomes of the module (Table 1). Finally, the participants were offered one free text opportunity, allowing for the identification of issues not covered in the questionnaire (O' Cathain and Thomas, 2004). Since all participants were to undertake their practice learning experience at the same time, piloting of the questionnaire was not possible and in order to ensure face and content validity, the questionnaire was reviewed by faculty members who had experience in this field (Parahoo, 2008).

Sample

A convenience sample of pre-registration nursing students who had completed their introductory practice learning experience in either "new" or "old" environments ($n = 158$) were invited to participate in the study. This sample was the total population of the Adult pre-registration nursing students in this cohort. Mental Health student nurses were not invited to participate since no "new" Mental Health environments were to be utilised.

Ethical considerations

Ethical approval was granted by the researchers' Institution Ethics Committee and ethical scrutiny was made by NHS and local Research and Development Department of the partner Health Board. Written information regarding the nature and purpose of the survey was given to all participants and opportunity to

Table 1
Dependent Variables My first practice placement has given me the opportunity to.

1	Work as part of the multidisciplinary team
2	Observe the role of the nurse as part of the multidisciplinary team
3	Communicate with patients
4	Communicate with relatives
5	Communicate with members of the multidisciplinary team
6	Put into practice a problem solving approach to nursing care (for example, care planning for activities of daily living)
7	Participate in the delivery of person centred care
8	Observe and participate in the correct documentation of nursing care
9	Develop therapeutic relationships with patients
10	Develop working relationships with staff
11	Find out about, and observe in practice, health and safety policies and procedures
12	Find out about, and observe in practice, risk assessment and security policies and procedures
13	Observe, in practice, the legal, ethical and professional issues related to nursing practice
14	Put into practice the clinical skills that I have learned at University

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