

Learning and teaching in clinical practice

## Development and implementation of a clinical needs assessment to support nursing and midwifery students with a disability in clinical practice: Part 1



Frances Howlin<sup>\*</sup>, Phil Halligan<sup>1</sup>, Sinead O'Toole<sup>2</sup>

School of Nursing Midwifery and Health Systems, University College Dublin, Dublin 4, Ireland

### A B S T R A C T

#### Keywords:

Students with a disability  
Reasonable accommodations  
Support in clinical practice  
Clinical needs assessment

Equality and disability legislation, coupled with increasing numbers of students with a disability, and inadequate supports in clinical practice, acted as catalysts to explore how best to support undergraduate nursing and midwifery students on clinical placements. Historically, higher education institutions provide reasonable accommodations for theoretical rather than clinical modules for practice placements. This paper describes the development and implementation of a Clinical Needs Assessment designed to identify the necessary supports or reasonable accommodations for nursing and midwifery students with a disability undertaking work placements in clinical practice.

The existing literature, and consultation with an expert panel, revealed that needs assessments should be competency based and clearly identify the core skills or elements of practice that the student must attain to achieve proficiency and competence. The five Domains of Competence, advocated by An Bord Altranais, the Nursing and Midwifery Board of Ireland, formed the framework for the Clinical Needs Assessment. A panel of experts generated performance indicators to enable the identification of individualised reasonable accommodations for year 1 nursing and midwifery students in one Irish University. Development and implementation of the Clinical Needs Assessment promoted equality, inclusion and a level playing field for nursing and midwifery students with a disability in clinical practice.

© 2014 Elsevier Ltd. All rights reserved.

### Introduction

Despite national and international drivers to increase inclusion and equality, people with a disability experience barriers and obstacles to services and daily living (World Health Organisation (WHO), 2011). Notwithstanding such barriers, international evidence from developed countries, including the United Kingdom (UK), Ireland and the United States of America (USA), indicates a steady increase in the number of students with a disability entering higher education institutions over the last decade (Association for Higher Education Access and Disability (AHEAD), 2013; National Centre for Education Statistics 2013; Higher Education Statistics Agency, 2014). In the UK, approximately 6.5% and 3.5% of full and part-time undergraduate students, respectively, are in receipt of

the Disabled Students Allowance a more robust measure which is actually lower than the numbers of students recorded as having a disability (Higher Education Statistics Agency, 2014).

These trends are reflected in Ireland as numbers of students registering with a disability in higher education have risen from 1.1% in 1998 to 4.6% in 2012/2013 (AHEAD, 2013). Similarly, within the University, numbers of nursing and midwifery students registering with a disability have increased from 3.1% in 2008 to 6.2% in 2013/2014.

National and international equality legislation, although difficult to implement in a healthcare environment, obliges higher education and healthcare institutions to provide universally designed environments that remove disadvantage and facilitate equity and inclusion for students and health professionals (Hargreaves et al., 2014). The legislation prohibits discrimination against individuals with a disability, in terms of access to education and employment, and requires higher education and healthcare institutions to provide prospective students with reasonable accommodations, or adjustments, to increase access and engagement in educational programmes (Government of Ireland, 1998, 2000, 2004, 2005; Disability Discrimination Act, 1995; Americans with

<sup>\*</sup> Corresponding author. Tel.: +353 1 7166563; fax: +353 1 7166450.

E-mail addresses: [frances.howlin@ucd.ie](mailto:frances.howlin@ucd.ie) (F. Howlin), [phil.halligan@ucd.ie](mailto:phil.halligan@ucd.ie) (P. Halligan), [sinead.otoole@ucd.ie](mailto:sinead.otoole@ucd.ie) (S. O'Toole).

<sup>1</sup> Tel.: +353 1 7166420; fax: +353 1 7166450.

<sup>2</sup> Tel.: +353 1 7166431; fax: +353 1 7166450.

Disabilities Act of 1990; Americans with Disabilities Amendments Act of 2008). This legislative mandate, coupled with increasing numbers of students registered with a disability, highlights the need to improve supports for this vulnerable group of students within the University and healthcare settings.

This article outlines the development and implementation of a Clinical Needs Assessment (CNA) tool designed to assist with the identification of supports for nursing and midwifery students with a disability in clinical practice. A follow up article presents an evaluation of the CNA from the students' perspective and explores the students' experience of disclosure, support and the reasonable accommodations specified by the CNA while on clinical placement (Howlin et al., 2014).

## Background

The UCD School of Nursing, Midwifery and Health Systems, in University College Dublin, has a nursing and midwifery student population of approximately 920 students and provides a range of undergraduate Bachelor degrees in General, Children's and General, Psychiatric nursing, and Midwifery. Clinical practice placements comprise fifty percent of each programme and are delivered by six public healthcare institutions in conjunction with a number of private and specialist healthcare sites.

Clinical learning and the development of competence is guided by an undergraduate team of University and clinical staff, including personal tutors, programme and year coordinators, Clinical Placement Coordinators (CPC) and preceptors on clinical placement. Successful students must meet regulatory requirements specifying the competencies and standards for the delivery of safe, effective and competent nursing or midwifery care, during placements and, at the point of registration (Nursing and Midwifery Council (NMC), 2010a, 2010b; An Bord Altranais (ABA), 2005, 2010). Knowledge of regulatory requirements for clinical practice, coupled with concerns regarding disclosure, competence and fitness to practice led the undergraduate team to highlight concerns regarding the provision of support for students registered with a disability on clinical placements. Similar concerns have been echoed by university educators, both in Ireland and the US, who questioned the skills of students with a disability and alluded to possible risks to patient safety (Sowers and Smith, 2004; Evans, 2013a). Disabled healthcare practitioners in the UK have been viewed as risks, with these views being based on perceived rather than actual risks (Walker et al., 2013). Although Sowers and Smith (2004) argue that there is no evidence of reported episodes of harm to patients or the delivery of sub-optimal care by students with a disability there is a need to differentiate between perceived and actual threats to competence and patient safety to ensure inclusion and support for students with a disability (Walker et al., 2013; Hargreaves et al., 2014).

Evidence is also available that disability specific challenges may occur for some individuals with a disability (Office of Disability Employment Policy, 2013). The nursing and midwifery literature to date has concentrated on the challenges experienced by students with dyslexia, the commonest disability disclosed in nursing and midwifery, rather than addressing a broader range of disabilities (Sanderson-Mann and McCandless, 2006; Price and Gale, 2006; White, 2007). Some students with dyslexia, in these studies, experienced difficulties with literacy and organisation of care that could potentially impact on clinical performance thus highlighting the need for support measures on clinical placement. Generally, academic and clinical educators have endorsed the view that reasonable accommodations should be provided to support learning for all students with a disability on clinical placements regardless of the type of disability (Tee et al., 2009; Ashcroft and Lutfiyya, 2013). In higher education, learning and assessment for

students who chose to register with a disability is supported by disability services who conduct an individual academic and examination needs assessment. This assessment aims to identify supports, or reasonable accommodations, to provide a level playing field and equal access and engagement with the programme. However, many professional degree programmes have work placements in environments that pose unique challenges that may remain unaddressed by needs assessments completed by disability support services. This was particularly evident for Irish nursing and midwifery students where many University supports were not directly transferable, or indeed appropriate, for use on clinical placements (Howlin and Halligan, 2011). Accommodations such as spelling and grammar waivers and extra time in examinations were not relevant to the development of proficiency and competence in a pressurised, diverse and complex clinical environment. Thus, it was timely that a needs assessment be developed to support the students' learning needs while on clinical placement.

## Development of the clinical needs assessment

Against the backdrop of such concerns and debates, a Disability Liaison Team (DLT) was formed within the School to address the development of a clinical needs assessment and the provision of support for nursing and midwifery students with a disability in clinical practice. These areas were addressed in three interrelated phases illustrated in Fig. 1.

### Phase 1

A review of the literature was undertaken to explore needs assessments and the provision of support for students with a disability within higher education and healthcare institutions. Searches of relevant databases, included the Cumulative Index to Nursing & Allied Health Literature (CINAHL) and education related literature via ERIC. Grey literature, from regulatory and advocacy organisations, and reference lists from relevant articles, were also searched. Key search terms included: *needs assessment, nursing, midwifery, disability, and disabled college students*.

Literature, within the context of higher education, identified the importance of proactively identifying and providing support for students with a disability accessing and undertaking degree programmes. Areas of relevance within this context included managing the transition to university (Taylor et al., 2010); achieving inclusive assessment policies (Weigert, 2012); promotion of disability friendly university environments (Stodden et al., 2011;

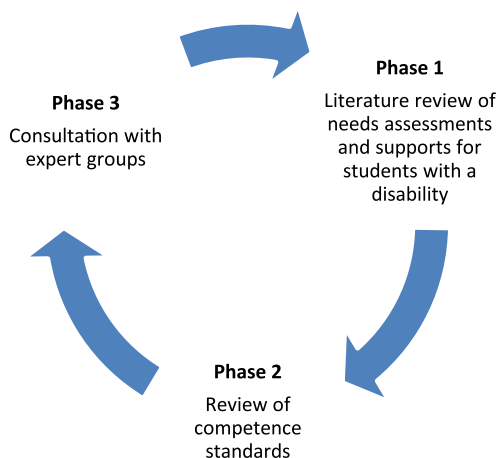


Fig. 1. Development of a clinical needs assessment.

Download English Version:

<https://daneshyari.com/en/article/367079>

Download Persian Version:

<https://daneshyari.com/article/367079>

[Daneshyari.com](https://daneshyari.com)