



The impact of a mental health clinical placement on the clinical confidence of nursing students in Jordan



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SUMMARY

Objectives: To examine the impact of clinical placement in a mental health setting on the clinical confidence of nursing students in Jordan.

Design and setting: A non-experimental descriptive survey design was used. Data was collected using the Mental Health Nursing Clinical Confidence Scale (MHNCCS) in Jordan.

Results: Data indicates that, as a result of clinical placement, nursing students had improved perceived confidence regarding the concept of mental health and mental illness, felt better able to conduct a mental health status examination, create nursing care plans, administer medication and provide health education to patients in mental health settings.

Conclusions: Improving the clinical confidence among Jordanian nursing students in relation to mental health nursing skills may provide a safer environment for students and patients as well as lead to enhanced well-being and function of patients. In addition, the results of this study may have practical implications for positive changes to the mental health nursing curriculum clinical placement goals.

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Introduction

It has been widely acknowledged in the nursing literature that clinical placements are an important component of the nursing curriculum (Eick et al., 2012; Jokelainen et al., 2011; Sharif and Masoumi, 2005). Theory, which is learned at university but applied in the clinical setting, provides information that assists nursing students to develop an understanding and appreciation of the nurse's role and patients' needs (Townsend and Scanlan, 2011). Thus, theory informs practice, but theory alone does not provide the variety of professional opportunities afforded by clinical practice. Clinical placement, also known as work integrated learning (WIL) (Keleher et al., 2007) and internationally as clinical clerkships, provides students with the opportunity to apply theory to clinical practice competently and confidently in a hospital setting. Consequently, nursing theory can be applied and further understood in conjunction with clinical placement (Walker et al., 2012). Hagbaghery et al. (2004) argues that competence and self-confidence are the most

important factors that enable nursing students to make appropriate decisions related to patient care. Undertaking a clinical placement requires students to translate theoretical knowledge to real world clinical situations, in numerous clinical jurisdictions and discipline areas. For some students, this transition can be both frightening and filled with self-doubt (O'Connor, 2006). Lack of self-confidence in student nurses can interfere with their ability to acquire new knowledge and hinder their ability to deal with difficult and challenging situations. Students can experience a lack of confidence because individuals are typically guided by their beliefs and perceptions rather than reality (Pajares, 2007). Clinical nursing instructors both in the academy and in the workplace need to be cognizant of this phenomenon and intervene promptly to promote student confidence. Instilling confidence in student nurses early provides a foundation for the acquisition of knowledge and the successful implementation of newly acquired skills. According to Holland et al. (2012), professional confidence can be described as a dynamic, maturing personal belief held by a professional or student. This includes an understanding of and a belief in the role, scope of practice, and significance of the profession, and is based on their capacity to competently fulfill these expectations, fostered through a process of affirming experiences.

Confident students will engage in challenging opportunities and skills, whereas their less confident peers will avoid the same tasks (Townsend and Scanlan, 2011). Confident students will also approach difficult skills and tasks with lower anxiety, perceive that particular

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skill as important, and possess a firmer commitment to use their clinical skills (Clark et al., 2004). Clinical confidence is difficult to gain in the classroom. Rather, it is enhanced in the clinical setting by applying and then mastering newly learned skills and experiencing success. Therefore, it is the role of clinical educators to foster confidence in their students through creating a more positive confidence-rich learning environment (Pajares, 2007). Educators need to be able to recognize a lack of confidence in individual students and plan appropriate teaching strategies that will enhance self-confidence.

Like all nursing specialties, mental health nursing involves interaction between the nurse and patient. In mental health nursing, the nurse patient relationship is vital (Moxham et al., 2013). This inherently humanistic perspective enhances the importance of learning theory and mastering clinical practice. It is necessary for students to experience mental health clinical practice first hand, working with people who have lived experience of mental illness. With the opportunity to learn the nuances of psychiatric nursing afforded by a mental health clinical placement, students can implement theoretical learning and practice skills such as therapeutic communication techniques and relationship building and mental health assessments. Effective communication skills need to be refined in clinical practice with real patients (Arthur, 1999). These crucial skills, which underpin all components of effective mental health nursing practice, are one which students require in order to be able to effectively assess the needs of patients and demonstrate unconditional positive regard. Secker et al. (1999) have argued that well developed communication skills increase competency in the care of psychiatric patients and assist in developing therapeutic relationships. Within the population who use health care systems, people who present with mental illness present a challenge to the nursing profession (Chadwick and Porter, 2014) and given that statistics indicate that mental health issues are on the rise, a clinical placement in a mental health setting is an important component of mental health nursing education all over the world.

There is substantial evidence regarding the importance of measuring and evaluating clinical skills for nursing students who undertake clinical placements (Townsend and Scanlan, 2011; Yanhua and Watson, 2011; Cant et al., 2013). With regard to evaluating clinical skills in mental health settings there is less evidence and none at all in Jordan, which is the study site of the research reported in this paper.

The purpose of this study was to examine the clinical confidence of undergraduate mental health nursing students in Jordan. Examining the clinical confidence among Jordanian nursing students with regard to mental health nursing clinical skills provides an understanding of the areas in which students lack confidence, as well as those where they perceive their confidence to be high. As a result of this understanding, modifications can be made to curricula both theoretical and clinical, and core competencies can be evaluated and reinforced.

Methods

Design and Sample

A descriptive, cross-sectional research design was used in this study. A purposive, non-probability sample of third-year level nursing students who were enrolled in a mental health nursing course in Jordan in the second semester 2013–2014 were invited to participate. The participating students completed a pre-test prior to attending their clinical placement and then a post-test questionnaire after attending 19 days of mental health clinical placement.

Ethical approval was granted from the Research Ethics Committee in the Faculty of Nursing, Mu'tah University, Jordan. After that, recruitment of students was undertaken by research assistants who provided information about the study purpose and procedures to potential participants. In addition, a participant information sheet (PIS) was provided to each potential participant. The PIS clearly elucidated that participation was voluntary, participants could withdraw at any time without

prejudice and that anonymity was assured. The PIS identified the researchers' contact details for availability to answer any questions or to clarify any salient aspects of the study. Nursing students were also assured that their non-participation, participation, or withdrawal from the study would not in any way affect their current or future relationship with the Faculty of Nursing of Mu'tah University in Jordan. Seventy two students consented to participate in the study.

Inclusion Criteria

The inclusion criteria required that participants be enrolled in the second semester of their third-year of the mental health nursing course within the Faculty of Nursing, Mu'tah University, Jordan. The participants were also required to be enrolled to complete the mental health clinical placement at the end of the same academic semester.

A 'research pack', assembled by the research team included the participant information sheet, a consent form, and the mental health nursing clinical confidence scale (MHNCCS). The packs were distributed to nursing students by the research assistants. Although Arabic is the native language in Jordan, English is the official language for hospital documentation and for teaching in nursing schools. Therefore, English versions of the questionnaires were used.

Study Instrument

The Mental Health Nursing Clinical Confidence Scale (MHNCCS) (Bell et al., 1998) was used as the data collection instrument for this study. The MHNCCS is a self report questionnaire comprising 20 questions related to the evaluation of confidence in mental health nursing skills among undergraduate students. The 20 item questionnaire includes six domains covering areas such as, assessment, communication, education, medication knowledge, self-management and team work. It has to be acknowledged that these 20 items formed a single scale and not divided into multiple subscales (Bell et al., 1998). Responses to the 20 items are measured on a 4-point scale from 1 (not at all confident) to 4 (completely confident) (see Table 1 for MHNCCS individual item component).

Process of Data Collection

Like many countries, the mental health nursing course in Jordan consists of two components (i.e. the theoretical component and the clinical component). The clinical component requires students to attend 19 days (8 h per day) over ten weeks of the clinical practice. To commence data collection, the MHNCCS was completed by the mental health nursing students prior to the commencement of their clinical placement. Upon completion the questionnaires were returned to the research assistant for coding. The second round of data collection saw the research assistants distribute the questionnaire to the same students after they have completed their mental health clinical placement. The completed questionnaires were returned to the research assistant within one week after the completion of the clinical placement. All the participants were asked to complete the MHNCCS within 20 min. Any participant who requested assistance was supported by the research assistants to complete the questionnaire. In order to be able to match pre- and post-clinical responses, the students were instructed to provide a unique identification number and were reassured that the numbers would not be able to be linked to individual students. Completed questionnaires were returned by the participants to a sealed box which was placed in the main hall of the Faculty of Nursing at Mu'tah University, Jordan.

Data Analysis

The Statistical Package for the Social Sciences (SPSS-21) software was used for data entry and analysis. Only the primary researcher entered the data to ensure consistency.

Measures of central tendency were used to describe the characteristics of the sample. Descriptive statistics were used to analyze demographic

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