Perceptions and experiences of nursing students enrolled in a palliative and end-of-life nursing elective: A qualitative study

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SUMMARY

Background: The Carnegie Foundation has identified three professional apprenticeships in nursing that are key to helping students acquire a professional identity. These apprenticeships integrate knowledge acquisition (cognitive apprenticeship), practical experience (practical apprenticeship), and an ethical identity (ethical comportment) for guiding conduct. To ensure that patients have a good death, it is important that faculty incorporate diverse teaching strategies from all three apprenticeships into palliative and end-of life nursing education.
Objective: The purpose of this study was to examine perceptions and experiences of nursing students enrolled in a palliative and end-of-life nursing elective that was developed and implemented using the three professional apprenticeships.
Design: A qualitative research design was used to obtain data from students who completed the palliative and end-of-life nursing elective.
Setting: The study was implemented at a state supported baccalaureate nursing program located in the south eastern United States.
Participants: A purposive sample of 19 students who had completed the palliative and end-of-life nursing elective was included in the study.
Methods: After completing the course, focus groups were conducted with the student participants. Discussion was guided by questions to elicit which experiences were most helpful to student learning. Thematic analysis of the data was conducted by three researchers.
Findings: Three themes reflecting the apprenticeships were identified: learning from stories, learning from being there, and learning from caring. Students' understandings about end-of-life care were enhanced by incorporating teaching strategies addressing the apprenticeships.
Conclusion: In end-of-life nursing education, teaching strategies must provide meaningful connections between the student, course content, practical experience, and the dying patient.

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Background

A professional identity links together the roles, responsibilities, values, and ethical standards that are exclusive to a profession (Goltz, 2014). In nursing, research has found that professional identity evolves and changes throughout a person's career based on area of practice and level of education (Crigger and Godfrey, 2014; Johnson et al., 2012). Student nurses begin to form a professional identity early in their educational program and educators play an important part in socializing students to the professional role (Hensel, 2014).

The Carnegie Foundation has identified three apprenticeships in nursing that are key to helping students acquire a professional identity (Sullivan and Rosin, 2008). The apprenticeships integrate knowledge acquisition (cognitive apprenticeship), practical experience (practical apprenticeship), and an ethical identity (ethical comportment) for guiding professional conduct. Moreover, there is a societal expectation that nursing professionals seek and maintain these three apprenticeships throughout their career.

Apprenticeships integrate learning, doing, and critical self-reflection. The *cognitive apprenticeship* includes knowledge or learning about natural sciences, theory, and principles needed for practice. The *practical apprenticeship* involves actual know-how and skills for using knowledge within clinical settings. The *ethical comportment apprenticeship* is necessary for deepening one's commitment to social responsibility

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and honorable practice identity (Hamilton, 2012). Integrating all three apprenticeships into education is crucial for embedding nurses with a professional identity to meet the demands of a complex health care environment (Benner et al., 2010; Noone, 2009).

Nursing education on end-of-life care is just one example where curricula often do not keep pace with current knowledge and practices. This deficiency in academia has resulted in a lack of preparation or competence to provide quality end-of-life care (Allchin, 2006; Barrere and Durkin, 2014). Increased longevity, improved pharmacological options for symptom management, advanced technology to sustain life, and an emphasis on patient autonomy warrant the need for nursing students to enhance their understanding about end-of-life care. By providing specific knowledge, practice skills, and an ethical platform to guide conduct, students can learn to provide end-of-life care that facilitates a good death.

The Institute of Medicine (IOM) defined a good death as one that is "free from avoidable distress and suffering for patients, families and caregivers; in general accord with patients' and families' wishes; and reasonably consistent with clinical, cultural and ethical standards" (1997, p. 4). To achieve this outcome, it is vital that curricula address the nurse's role in end-of-life care through innovative teaching strategies based on the three apprenticeships. The purpose of this qualitative study was to examine perceptions and experiences of nursing students enrolled in a palliative and end-of-life elective nursing course that was developed based on the three professional apprenticeships (Hold et al., 2014).

Methods

Design and Ethics

This was a qualitative exploratory study using focus groups. Work for this study was done in accordance with the Institutional Review Board of the researchers' university. A cover letter consent form was used to protect the student's anonymity. At the beginning of each focus group, the consent was distributed and participants' questions were answered by the facilitators. Permission to audio record the focus group sessions was included in the consent. If a student chose not to participate, he or she had the opportunity to leave the group at any time.

Participants and Setting

Purposive sampling was used to recruit baccalaureate nursing students at a state university located in the southeastern United States. Only students enrolled in a Palliative and End-of-Life Care nursing elective at that university were eligible ($N = 52$). Students were assured that participation or non-participation would not affect their class grade. Nineteen nursing students volunteered to participate, 17 females and two males. The mean age was 24 years with a range from 21 to 49. The majority of students was Caucasian ($n = 15$) and reported no previous experience in caring for a dying person ($n = 14$). All participants had completed at least one semester of nursing school.

Procedure

Focus groups were formed to obtain the nursing students' opinions and experiences of the Palliative and End-of-Life Care course. Using focus groups assisted in unraveling aspects that may otherwise be less accessible in a one-to-one interview or through a survey (Doody et al., 2013). In a group setting, students are inclined to share their personal views while interacting with their peers. Most importantly, the focus group interviews prompted students to individually and collectively construct meaning related to their learning in the course.

Three focus groups were conducted during the first two academic semesters that the elective was offered. Recruitment occurred approximately two weeks before the focus groups were scheduled to happen and all eligible students were invited to participate. The invitations were extended via email, announcements in class, and flyers. Date, time, and location for the group were included in the invitation. No confirmation from the students was required. The first focus group was conducted immediately after the semester ended. Because of the number of students willing to participate during the second semester, the decision was made to conduct two focus groups at different times on the same day. Limiting the number of participants in each group allowed for more input from each student. These focus groups were conducted during the last week of the course. The room used to conduct the focus group provided privacy and confidentiality and students were asked to use fictitious names when speaking during the session.

An open ended question guide was developed as a tool to guide the focus group discussions. By using this tool, the facilitator could concentrate on the focus group dialogue and encourage participation. For the first focus group, two of the course instructors were the facilitators as the course had ended and students already received their final grades. For the second focus group, a faculty member not involved in the course facilitated the interviews as the course was in progress. Sample questions included "What components of the course were most beneficial to your learning" and "Have your perceptions in caring for dying patients changed?" Each focus group was about one hour in length. At the end of the focus group, a demographic questionnaire was distributed for students to complete.

Thematic analysis of the focus group interviews was used to cluster data and identify themes from the transcribed audio recordings. Each researcher became familiar with the data by reading the transcripts several times in their entirety. If there were any questions about the accuracy of the transcripts, comparisons were made with the audio recordings. As recommended by Braun and Clarke (2006), notes were made regarding sections of data that were significant to the researchers.

After familiarization, the researchers independently identified initial codes within each transcript. Coding was done manually by highlighting specific data excerpts and designating relevant codes beside each selection. To preserve context, the surrounding data for each code was left intact. After all data were coded, they were collated. The correlation across data sets provided a list of different codes.

Working together, the researchers reviewed and then sorted all codes to form major themes. The location of codes was adjusted to ensure that each theme formed "a coherent pattern" and similar themes were "collapsed into each other" (Braun and Clarke, 2006, p.91). Codes and themes irrelevant to the purpose of the study were discarded. At the end of the analysis, three themes strongly supported by the narrative data were identified.

Methods to Assure Rigor

Qualitative researchers evaluate the trustworthiness of the research study's data using four criteria: credibility, dependability, conformability, and transferability (Lincoln and Guba, 1985). Member checking and peer debriefing were integrated into this study's research design to establish credibility. By summarizing and clarifying students' responses during the focus groups, member checking transpired. Peer debriefing amongst the researchers occurred through reflective and collaborative dialogue (Hayes and Singh, 2012). Dependability and conformability were accomplished by having each researcher independently code the data for themes. To obtain transferability, rich and dense data from purposive sampling was used. This type of sampling permits identification and selection of participants who have information relevant to the study's purpose (Lincoln and Guba, 1985).

Findings

The researchers identified three major themes that were linked to the professional apprenticeships: *learning from stories* (cognitive apprenticeship), *learning from being there* (practical apprenticeship), and *learning from caring* (ethical comportment).