



## A qualitative exploratory study of nursing students' assessment of the contribution of palliative care learning



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### SUMMARY

**Objective:** We explored the contribution of optional palliative care (PC) learning to the training of undergraduate nursing students.

**Design:** This is a qualitative, exploratory study.

**Participants:** PC students from two universities (n = 236) responded to the open question: What was the contribution of the PC course to your training?

**Methods:** A thematic analysis of the respondents' answers was performed with investigator triangulation.

**Findings:** Four themes were identified. Firstly, the PC course provided a comprehensive view of the nursing discipline. Secondly, the course helped the students to know how to interact with, communicate with and better understand patients. Thirdly, the contribution of the course to the students' personal growth prompted them to reflect personally on death, thus promoting self-awareness. Finally, the students considered the PC course to be of great importance in the nursing curriculum.

**Conclusion:** Nursing students believed that a PC course was an essential component in their training, which contributed favourably to their personal and professional development.

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### Introduction

Learning about palliative care (PC) should form part of the basic training of all healthcare professionals, and the core competencies that have been identified can provide guidance for all professionals undertaking education in palliative care (Gamondi et al., 2013). However, the nurse is the professional who spends the most time with patients; therefore, it is particularly important that all nurses receive basic training in PC as part of their university courses (Barrere et al., 2008).

Palliative or end-of-life care education provided to nursing students has rarely been studied (Wilson et al., 2011). Fifteen years ago, in countries where PC had been introduced, the attention given to PC in nursing schools was insufficient: few programmes and only a small number of hours were devoted to this subject, little attention was paid to healthcare services and the teaching staff often lacked specialised qualifications (Lloyd-Williams and Field, 2002). Nonetheless, this situation has undergone rapid transformation. By 2006, all UK nursing schools had some provision for palliative and end-of-life care, and more than

95% of students participated in these courses (Dickinson et al., 2008). Recent data from other countries have confirmed that in the USA (Dickinson, 2007) and Canada (Wilson et al., 2011), PC education has gradually been incorporated as part of the basic training programme. In Spain, PC teaching has now been included in the undergraduate curriculum in almost all schools of nursing as a mandatory subject in 46%, an optional subject in 14% or a specific module within other subjects in 37% (Valles and García, 2013). In Spain, the average number of European Credit Transfer System (ECTS) for a PC course is 4.5.

Teaching PC has certain special characteristics because providing PC means 'caring for people at the end of their lives in terms of the whole person'. That is, PC offers a model of whole-person care (Mount, 2013) because all-around care is provided to the ill person and his/her family. This provision requires professional care but also quality personal presence as, particularly at the end of life, the professional is the 'most frequently used drug' (Balint, 1957).

A recent review article showed how end-of-life care education has been delivered to undergraduate nursing students, focusing on the modes of delivery and teaching strategies (Gillan et al., 2013). One consequence of the special characteristics of PC education that this review noted was that lecturers often apply innovative methods when they teach the subject as a specific course. These methods include high-fidelity simulation scenarios (Moreland et al., 2012); companion programmes (Kwekkeboom et al., 2005); courses based on literature,

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art and the humanities; and interdisciplinary courses (Ellman et al., 2012). As holistic principles actually have a bearing on any type of care, some universities prefer to integrate these contents throughout the nursing curriculum (Wallace et al., 2009; Ramjan et al., 2010). In basic PC education, it is also surprising how well this type of instruction has been received: nursing students enjoy learning about this topic and have requested that it be made a mandatory topic in their curriculum (Mutto et al., 2012).

Evaluating PC presents a challenge because it requires taking the special characteristics of this subject matter into account. However, until now, most studies have assessed the learning experience using closed questions and quantitative methods, while in addition, they have focused on exploring particular knowledge (Tishelman et al., 2008), skills (Arantzamendi et al., 2012a; Bush and Shahwan-Akl, 2013) or attitudes (Barrere et al., 2008; Mutto et al., 2010). As Gillan stated, the lack of qualitative research into teaching strategies for end-of-life care has prompted the question of how to assess learning strategies effectively in terms of depth of the learning experiences in end-of-life care education (Gillan et al., 2013).

One problem is that when such methodologies are used, it is possible that more profound personal experiences might remain unexplored. More open qualitative methodologies would be appropriate if we aim to determine the potential personal impact and special meaning that courses on PC have for future nurses (Brajtman et al., 2009).

### Study Objective

The objective of the study was to conduct an exploratory study that would allow students to voice unexpected or surprising aspects that have arisen by inviting the students to reflect directly on what they feel PC learning has contributed to their training.

### Materials and Methods

Because qualitative methods are useful in disclosing the visions, experiences and perspectives of participants, we decided that a qualitative methodology would be appropriate in this case (Arantzamendi et al., 2012b; Green and Thorogood, 2009).

#### Participants

The study participants were undergraduate nursing students who had taken a course entitled Palliative Care ( $n = 306$ ) at the Nursing School of the University of Navarra and the Nursing School of the University of Valladolid in Soria. The first school is a private university, while the second is a public university.

From a total of 306 students enrolled in PC courses, we obtained responses from 236 students, all of whom were approximately 20–21 years of age and 94% of whom were female.

#### Characteristics of the Palliative Care Course

In both schools, the PC course was offered as an optional course, and it did not include any clinical practice. In the Nursing School at the University of Navarra, the course was offered to 2nd and 3rd year nursing students with 45 teaching hours (using formal lectures, small group discussions and audio-visual aids), while in the University of Valladolid, it was only offered to 3rd year students and consisted of 60 teaching hours (formal lectures, small group discussions and audio-visual aids). At the Nursing School of the University of Valladolid, a nurse-professor from the school mainly taught the syllabus and enlisted individual collaborations from other PC professionals. In Navarra, the course was taught mainly by nurses (faculty and hospital), with the collaboration of other professionals (clinicians, psychologists) who worked mainly in terminal patient care. The contents of the subject included PC principles and their evolution, team work in PC, patient needs assessment, control

of pain and other symptoms, psychological and social support and spiritual needs.

#### Data Collection

Data were collected at the School of Nursing of the University of Navarra over a 4-year period (from 2006 to 2010) and at the School of Nursing of the University of Valladolid over a 6-year period (from 2005 to 2011). On the last day of each course, the students were asked to respond to a written, open-ended question regarding the PC course: "What was the contribution of the PC course to your training?" The responses were submitted anonymously. This data collection method enabled us to obtain information from a majority of the students, using a very open approach that encouraged students to express themselves in their own words. In this manner, we focused not only on knowledge or attitudes but on anything that the students wanted to mention.

#### Analysis and Rigour

A thematic analysis of the students' comments was performed to determine the key elements of the respondents' accounts (Green and Thorogood, 2009). An inductive process, whereby there were no predefined categories, was used. Initially, the main author and the co-authors performed independent analyses of 10 students' assessment documents each, and they then met to compare which categories were emerging. This process was undertaken until the main author, who was inexperienced in qualitative analysis, became familiar with the analytical process. Subsequently, two authors continued to analyse the findings independently and to collate the emerging categories. Then, all of the authors held periodic meetings, at which the categories and the data included in each response were checked, and the answers' coherence was tested. For occasional cases in which there were discrepancies or nuances, each author explained his or her category, and then all of the authors returned to the original data to review the text and agree on the category that represented the data most faithfully.

The assessments from each school of nursing were analysed separately, and the findings from each population were later compared to identify a common core and some subtleties (using Na as an abbreviation for the Nursing School of the University of Navarra and So for the Nursing School of the University of Valladolid).

The full study was approved by the Research Ethics Committee of the University of Navarra, and the committee's approval was communicated to the Nursing School of the University of Valladolid.

### Findings

Four themes were identified as being the primary contributions of the PC course. Firstly, the course provided a comprehensive view of the nursing discipline. Secondly, it helped students to know how to act, communicate with and better understand patients. Thirdly, the contribution of the course to the students' personal growth prompted them to reflect personally on death, thereby promoting self-awareness. Finally, the students commented on the importance of the PC course in the nursing curriculum.

#### The Palliative Care Course Provides a Comprehensive View of the Nursing Discipline

The students indicated that the course was of great value to them because it provided them with a more comprehensive view of the nursing discipline (Table 1). They said that nursing care had a different meaning for them since they took the PC course, along with other objectives. The students stated that the course helped them to realise that 'taking care of people is the essence of the profession'. The students felt that the subject helped them to become more sensitive to the

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