



## Clinical education

# ‘I didn't expect teaching to be such a huge part of nursing’: A follow-up qualitative exploration of new graduates' teaching activities

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## ABSTRACT

**Background:** Teaching has long been recognised as an important role for nurses. In addition, much has also been written about new graduates' transitions to professional practice. However, the role of new graduates in teaching is unclear, and at what point they are required to teach others as part of their practice.

**Objectives:** To explore the teaching activities undertaken by new nursing graduates, and their readiness for this role following a semester-long education subject in their undergraduate degrees.

**Design:** A qualitative descriptive design

**Settings:** All participants were undertaking graduate nurse programs and working in different hospitals across Melbourne, Australia. Five were working in public hospitals, and one in a private hospital.

**Participants:** Six graduate nurses who had completed the education subject at one Australian university and were between four and six months into their graduate year program.

**Methods:** Semi-structured interviews guided by key questions were conducted by telephone. Transcripts were analysed using thematic analysis.

**Results:** Three themes emerged: *expectations and the nature of teaching*, *nature of learners*, and *attitudes to teaching role*. All participants were engaged in some teaching activity early in their graduate programs. This included students of nursing and other disciplines, and qualified staff, as well as patients and their families. Participants reported feeling more confident and better prepared for their roles having completed the education subject than those of their peers, educated at other universities, who had not covered such content.

**Conclusions:** New graduates are required to teach others, both formally and informally, early after registration. This requirement of professional practice is assisted by the inclusion of an education subject embedded in the undergraduate nursing degree.

## 1. Introduction

Teaching is an important role for nursing practice. Nursing roles encompass the expectation to support students in practice, largely through mentor and preceptor relationships. However, mentors and preceptors not only provide teaching in the clinical setting, they are key to facilitating professional socialisation whereby “the student internalises the professional values, technology and language of the profession, which is visible in how the nurse performs the daily nursing activities” (De Swardt et al., 2017, p.1.). Learning through such clinical experiences may directly influence a student's subsequent employer preference as a new graduate (Lamont et al., 2015). Furthermore, preceptors and mentors play an important role in supporting the transition of new nurse graduates to the workforce (Walker et al., 2017).

While they have been identified as being vitally important for health care organisations, preceptors may not be appropriately educated and prepared for their roles (Broadbent et al., 2014; Senyk and Staffileno, 2017; Valizadeh et al., 2016). In Korea, Kim and Shin (2017) used a cross-sectional survey to examine nurses' clinical teaching efficacy, finding higher efficacy in nurses with previous clinical careers of more than ten years in length. The researchers suggested a need for more support for those nurses with less experience expected to undertake clinical education. Furthermore, registered nurses may be required to assume less formal ‘buddy’ roles to work alongside students, and support their learning despite having little teaching preparation (Rebeiro et al., 2017).

Recently, the United Kingdom Nursing and Midwifery Council (2018) has identified that all registered nurses have a responsibility for

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engaging in supervision of students in practice, as well as health promotion activities for patients. There is an expectation that nurses are at the forefront of teaching the patients for whom they care, and it is argued that the 'pedagogical proficiency' of nurses directly impacts on patient education (Beta, 2013). However, many factors impact on nurses' abilities to provide education, including lack of knowledge, communication skills and educational facilities (Ghorbani et al., 2014). A review of conditional factors impacting on nurses' work in education, patients identified that there were both internally and externally focused associated factors. In particular, internal factors relate to personal beliefs about the nurse's role in education, and the nurse's perceptions of their own knowledge and competence to deliver required teaching (Friberg et al., 2012). These findings reinforce earlier findings from Turner et al. (1999) who explored nurses' perceptions of their patient teaching roles, finding nurses were considered to be champions for patient teaching but unprepared for assuming the role. However, whether nurses have the skills required to undertake this component of their roles is unclear. Fidyk et al. (2014) reported on a program developed in response to an identified need for improved communication with patients in a large medical facility in Philadelphia, US. A lack of resources to teach nurses how to teach prompted the development and regular introduction of an education program to support such development. Similarly, a two-day workshop on patient education was offered to develop nurses' teaching skills in northeast U.S., reportedly improving their sense of preparedness for this aspect of their roles (Lamiani and Furey, 2009).

Through effective education, nurses provide empowerment for individuals to manage their own health and independence (Virtanen et al., 2007; Crawford et al., 2017). Effective education by nurses has potential to reduce presentation of non-urgent cases in the emergency department and assist with patient understanding of their illnesses and recovery (Gozdzialski et al., 2012). In a study by Ghorbani et al. (2014) in Iran, 25.5% of nurses and 60% of nursing students surveyed identified that lack of knowledge of teaching and learning principles impeded their delivery of patient education. Anecdotally, new nursing graduates are not necessarily expected to undertake teaching support for students. Yet little is formally known about this aspect of the graduate role. This is despite much having been written about issues in graduates' readiness for practice (El Haddad et al., 2013, 2017; Missen et al., 2016a, 2016b) and identification that few education programs have such learning embedded in curricula (Irvine et al., 2017).

At the authors' university, final year nursing students undertake a semester-long subject, *Education for Clinical Practice*, which aims to equip them to teach in their future practice. The subject includes a peer-assisted learning activity whereby they teach first year students the skills of vital signs measurement. Evaluation of the subject has proven to be very positive (McKenna and French, 2011; McKenna and Williams, 2017). However, we were unclear as to the extent of teaching undertaken by graduates and the impact of such learning on graduates within their first year as Registered Nurses (RN). Hence, this study aimed to explore:

1. The nature of teaching activities undertaken by new nursing graduates
2. The value of a teaching-focused subject on preparing graduates for their teaching roles

## 2. Methods

A qualitative descriptive design using semi-structured interviews was chosen as the most appropriate for addressing the study aims. Interviews were conducted with six graduate nurses who had completed the education subject the prior year. All were between four and six months into their graduate year program. All were working in different hospitals across Melbourne, Australia. Five were working in public hospitals, while one was working in a private hospital.

**Table 1**  
Key interview questions.

Interview schedule
<ul style="list-style-type: none"> <li>• Can you please explain the impact that the unit/subject NUR3003 and/or the peer teaching experience has had on your professional work?</li> <li>• Can you describe how you have used this learning in your graduate practice to date?</li> <li>• From your experience, can you suggest ways to extend this unit/subject and the peer teaching experience?</li> </ul>

Prior to commencement of interviews, ethical approval was obtained from the relevant university ethics committee. Participants had previously participated in evaluation of the peer-assisted learning component of the subject while students, and had voluntarily provided the researchers with their email contact details for follow-up 12 months later. Emails inviting students to participate in interviews were sent to all students who had consented to being contacted the previous year, inviting them to contact the researchers if they were interested in participating in an interview. On making contact with the lead researcher, interested individuals were provided with a verbal overview and written explanation of their participation. Written consent was obtained prior to commencement of each interview.

Interviews were guided by key questions (Table 1), conducted by telephone, audio-recorded and subsequently transcribed verbatim. Interviews lasted between 14 and 22 min in duration. No new data patterns emerged after interview six. Participants were invited to review their transcript for accuracy, however none requested this. Data were analysed using thematic analysis informed by Grbich (2013). This process involved careful repeated reading of transcripts to identify meaningful words and phrases, grouping similar words and phrases, and applying overarching themes. Emerging themes were reviewed by the research team members.

## 3. Findings

Interviews yielded rich data about the graduates' engagement in teaching and how prepared they felt for the role. Three main themes emerged from the data analysis: *expectations and the nature of teaching*, *nature of learners*, and *attitudes to teaching role*.

### 3.1. Expectations and the nature of teaching

The first theme highlighted that these graduate nurses were required to undertake a variety of teaching activities. Furthermore, despite not considered as a key role for new graduates, teaching expectations commenced early in participants' RN roles:

I think three months in they started putting me with the students ... But before that ... I was still involved when we had like a dressing or we had something that they would be interested in, like - all the nurses on the ward do that; if they're doing something interesting, they go and grab one of the students. So I was doing that before I actually had full responsibility for one of them. (#5).

Despite adjusting themselves to the graduate role, reported teaching engagement was not necessarily limited to nursing students. Interestingly, participants found themselves teaching students from other health professions, such as medicine, physiotherapy and pharmacy. One graduate identified that her first teaching encounter was with medical students in her first month as a new graduate:

That [first teaching] probably happened ... a few weeks in actually, I had the medical students - I think about a month in, I'd say. Because I think the first month I was more just focusing on learning it myself, and then after that it's like - I guess seeing that you're a student as well, they felt that relatability. So they're like oh, what are you

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