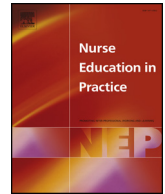




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Assessing levels of student nurse learning in community based health placement with vulnerable families: Knowledge development for future clinical practice

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ABSTRACT

Background: Community services work with vulnerable families to assist them to link with health, education and welfare services. Community placements provide nursing students with understandings of the health impacts of social circumstances on broad population's. Nurses provide health care for vulnerable populations so it is important for students to gain experience in dealing with various population groups in a variety of settings. Community placements can increase student confidence to provide care for all people in the acute care setting. **Objectives:** The research project explored the use of a community placement to assist nursing students in applying psychosocial theories to practice; determining the affect of nursing students to the community service; and if the learning achieved in the placement was applicable to their future nursing practice were also objectives of the research.

Design: The mixed methods design used placement suitability focused questionnaires, and student, staff and clinical supervisor one-to-one interviews.

Settings: In 2015 a community based homelessness service which provides a home visiting service approached the School of Nursing and Midwifery to provide a community placement for nursing students. The urban homelessness service caters for 350 homeless clients per month.

Participants: Eight second year nursing students and six fulltime homelessness staff, mainly social workers, participated in the surveys and interviews.

Methods: Nursing students were 'buddied' with a social worker and visited individuals and families recently placed in emergency housing. The student nurses (8) and homelessness staff (6) were surveyed and interviewed about their knowledge, skills and perceptions about the value of community based placements.

Results: Findings indicate student's recognition of the skills to be learned in a non-acute setting are applicable to all clinical settings and enhance student knowledge and potential future care. The staff in the homelessness service espouse the enhancement provided by the expertise of the nursing students working with vulnerable populations. This paper highlights the benefits as perceived by students on often undervalued community based placements.

Conclusions: It is essential that universities collaborate with industry and consumers to ensure that the undergraduate programs offer a high standard of care and address current trends in the health care industry. There is a growing need for workforce development in primary healthcare and an increased understanding about how adversity can lead to ill health.

1. Background

Increasingly, nurses provide care for society's most vulnerable, unwell groups (Baglin and Rugg, 2010; Gerber, 2013). Given this work, there is an awareness of the importance of community based placements for students of nursing. The placement of nursing students in a

complex social context enhances the experiential and clinical links between psychosocial theories and social environments, workplace culture, and the complexities of patient care (Papasavrou et al., 2010), while enhancing access to health services for populations with limited health care options (Parry and Willis, 2012; Parry and Grant, 2015a,b; Parry et al., 2016). Homeless families represent an increasing

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proportion of the vulnerable population with limited access to health care services (Parry et al., 2015a,b). Linking the need for practical application of psychosocial theories to the needs of vulnerable populations can enhance the learning and professional placement experience of nursing students (Baglin and Rugg, 2010; Papasavrou et al., 2010; Gerber, 2013; Parry, 2014).

Improving access to health care for homeless families is important as previous research found a lack of access to health services among homeless families led to poor health in their children (Gibson and Johnstone, 2010; Gerber, 2013; Parry and Grant, 2015a,b; Parry et al., 2015a,b). This can often lead to lifelong ill health and a lack of service utilisation (Hunter, 1993; Parry and Willis, 2012; Hitchcock et al., 2014; Hwang and Burns, 2014). The primary focus of the homelessness case manager is finding accommodation with subsequent links and referrals to other services for support. The homelessness case manager's focus is not primarily on child health development, child assessment or children's psychological and parental health issues (Gibson and Johnstone, 2010; Gerber, 2013; Parry and Grant, 2015a,b; Parry et al., 2015a,b). Therefore, gaps in health assessments at this early intervention/crisis stage are evident. Consequently, homelessness staff do not focus on families' health needs, preventative health strategies or on any of the potential health issues requiring intervention (Gibson and Johnstone, 2010; Gerber, 2013; Parry, 2014; Parry and Grant, 2015a,b; Parry et al., 2015a,b). Research has also highlighted the lack of staff knowledge regarding infants, and child development (Parry and Grant, 2015a,b; Parry et al., 2015a,b), knowledge regarding child immunisation and other normal child health needs with a notable lack of formal and informal referral pathways into health services identified (Parry et al., 2015a,b). The addition of nursing students on placement in the homeless service was recognised as addressing a need, and adding value to the services provided, while contributing significantly to students learning and workplace learning among staff (Anderson, 2009; Parry, 2014; Parry and Grant, 2015a,b; Parry et al., 2015a,b).

This research project explored the experiences of student nurses and homelessness staff during a Professional Experience Placement (PEP) within the homelessness sector. The project enabled nursing students to gain assessment skills and to apply psychosocial theories of health to the community setting. It also provided the homelessness services clients with much needed health promotion, referrals, and advice and assisted homelessness services to engage with at risk infants, children and their families.

Homelessness service providers are often the 'first to know' that children are at risk and unless the staff have skills to work across education and health care sectors, children will not receive the interventions they require. This article reports on research that used interviews with nursing students, homelessness workers and clinical supervisors to address the identified gaps in health for homeless families (Philipps, 2012; Parry, 2014; Parry and Grant, 2015a,b; Parry et al., 2015a,b; Parry et al., 2016) and to enhance future collaborative practice (Parry, 2014; Parry and Grant, 2014; Parry et al., 2016).

2. Literature review

2.1. Psychosocial theories and nursing

Internationally it is recognised that enhancing student's confidence, to meet the needs of increasingly disadvantaged populations groups, can be achieved through community placement (Anderson, 2009; Baglin and Rugg, 2010; Murphy et al., 2012). This confidence has been shown to augment care in acute care settings (Anderson, 2009; Baglin and Rugg, 2010; Murphy et al., 2012). Broader psychosocial assessments are used in community placements addressing the dearth of psychosocial assessment opportunities in acute care (Anderson, 2009; Baglin and Rugg, 2010; Murphy et al., 2012). The immediacy of physical care is often prioritised in acute care (Anderson, 2009; Baglin and Rugg, 2010; Murphy et al., 2012). As such traditionally, acute care

settings have provided limited opportunities for the application of developmental psychosocial theories and limited the understandings of the impact of broader social determinants of health on health outcomes for patients (Anderson, 2009; Baglin and Rugg, 2010; Murphy et al., 2012). In order to address this translation of theory to practice gap community placements have become an integral part of the Bachelor of Nursing curriculum. Thus providing chances for students, regardless of year level, to apply psychosocial knowledge and understandings to nursing care. To improve patient care and to understand how psychosocial characteristics impact on health it is imperative to explore the student experiences of community placements. This exploration also needs to ensure collaborative partnerships are maintained and enhanced throughout the research process.

Additionally, interdisciplinary psychosocial placements are important opportunities to apply psychosocial theories (O'Keefe et al., 2014; Smith and Grant, 2016) and provide experiences of working in an interdisciplinary team. Exposure of nursing students to the social circumstances in which families and individuals live (Parry, 2014; Parry and Hill, 2016) also confirms the impact of the living conditions on health outcomes (O'Keefe et al., 2014).

Smith and Grant (2016) point out the importance of pedagogic changes in nursing education to include psychosocial influences on health. The psychosocial paradigm places the person at the centre of good health (Parry and Hill, 2016; Smith and Grant, 2016). Theories, such as Bronfenbrenner, describing psychosocial development as a set of characteristics that impact on development, contain broader and more complex understandings of the development of factors that impact on health (Parry and Hill, 2016; Smith and Grant, 2016).

Furthermore, Papastavrou et al. (2010) highlight the close relationship between theory and practice for nursing students (Papastavrou et al., 2010), asserting that clinical learning takes place in complex social contexts that are inclusive of workplace culture and the complexities of care. Nursing student's exposure to complex social and health care delivery environments can therefore enhance the application of psychosocial theories to clinical care and future practice. Psychosocial assessment of a patient is an extremely important part of nursing care but often under prioritised in preference to immediate physical care requirements. The application of developmental psychosocial theories to clinical practice, and assessment techniques, can be difficult to achieve in traditional acute care placements.

3. The study

3.1. Design

The use of mixed methods research methods is recommended when investigating complex health sciences and health policy issues related to healthcare access (Parry and Willis, 2013). The combination of survey, demographic, epidemiological and narrative data can provide an understanding of the complexity of health access issues (Parry and Willis, 2013). Additionally, mixed methods can be used to explore complex social issues by using two or more data sets to confirm, refute, or question the findings (Parry and Willis, 2013). Understanding social actions requires the use of inductive and deductive reasoning processes in order to understand complex interactions and the appropriate applications of mixed methods (Parry and Willis, 2013). The mixed methods processes used here consisted of sequential methods. The survey data results informed the qualitative questions.

The use of correlations is important in exploring the relationships between characteristics of interest (Osborne, 2010). Here the nursing students were asked to rate their knowledge of the homelessness sector and score 1 to 3. Another questionnaire asked the nursing students to self-rate their impression of the demand for support available to homeless people, whether the homeless sector was visible on the political agenda and if homelessness was 'visible'. The correlational analysis was performed using IBM SPSS Statistics 23 program.

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