



## Effects of a service learning experience on confidence and clinical skills in baccalaureate nursing students

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### ABSTRACT

**Background:** Camp programs yield positive and lasting benefits for children. Integrating a summer camp into a nurse course with a service learning design fosters learning beyond the classroom and enhances community engagement.

**Objective:** The purpose of this study is to describe the nursing students' experience and perceived confidence after completing a service learning nursing course.

**Design:** This is a descriptive, qualitative research study that used reflection and a perceived confidence questionnaire.

**Setting:** The study was conducted in a school of nursing and surrounding university campus facilities during the diabetes camp.

**Participants:** The participants ( $n = 23$ ) were nursing students who enrolled in the nursing course.

**Methods:** As part of the course requirements, students completed an eight item question confidence survey before and after the diabetes camp related to diabetes and camp management, and interpersonal abilities with patients, families, and healthcare professionals. Within 48–72 h after diabetes camp, the students completed the reflection paper. The pre and post Confidence Surveys were analyzed using a *t*-test and thematic analysis was used to analyze the reflection paper.

**Results:** Overall, perceived confidence levels increased after completing the service learning course ( $t = -9.91$ ,  $p = 0.001$ ). Four themes emerged from the qualitative analysis: pre-camp assumptions and fears, growth in confidence, understanding diabetes management in the community, and appreciation for learning beyond the classroom and hospital setting.

**Conclusions:** This service learning course provided nursing students the ability to not only develop diabetes clinical skills and perceived confidence, but also life skills including teamwork, leadership, and conflict resolution.

### 1. Introduction

In the United States, more than 14 million children and adolescents attend summer camp each year (American Camp Association, 2017). Currently, camp programs are available based on interest, location, and different populations. For children with chronic illness, the camp experience has shown to have a lasting effect on psychosocial development, including significant effects on self-esteem, peer relationships,

independence, leadership, values, and willingness to experience new things (American Academy of Pediatrics [AAP], 2011; Bultas et al., 2015). For children with Type 1 diabetes (T1D) experiencing a summer camp specialized for a child with T1D facilitates positive experiences as well as a traditional camp, but in a medically safe environment (AAP, 2011; American Diabetes Association [ADA], 2012). An equally important goal is to enable children with T1D to meet and share their experiences with one another while they learn to be more responsible

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for their condition. For this to occur, medically trained camping staff must be available to ensure optimal safety as well as an integrated camping/educational experience (AAP, 2011; ADA, 2012). Camp for children with T1D, therefore, provides vital education in a setting that gives each child the best chance of seeing an improvement in knowledge and self-management of the disease (AAP, 2011; Bultas et al., 2015). For the nursing students, experientially, a summer camp provides hands on involvement with diabetic management in a more relaxed “real world” setting.

Diabetes and You: Kamp for Kids (K4K) provides education, camaraderie, and support to children with T1D. K4K typically has 65–85 campers between the ages of 4 and 17 that attend each year, 50–60% of whom have T1D. Unique to this summer camp is the incorporation of the concept of service learning, which has various definitions. Service learning is a well-established andragogy, with the primary purpose of translating information presented in didactic courses to real-world situations (Dewey, 1938). The Corporation for National Service (1990) defines service learning as a “method under which students learn and develop through active participation in thoughtfully organized service experiences that meet actual community needs, that [are] integrated into the students' academic curriculum or provide structured time for [reflection, and] that enhance what is taught in school by extending student learning beyond the classroom and into the community...” According to Kazemi and colleagues, service learning can provide nursing students the opportunity to participate in a learning environment pertaining to a specific population (Adegbola, 2013; Kazemi et al., 2011; Helms et al., 2016). When integrated into the nursing curriculum, service learning not only reinforces academic coursework, but also strengthens critical thinking, responsibility, and personal development (Savage et al., 2015; Waterman, 2013). In developing a three-phased model for service learning course design for faculty, Coleman et al. (2014) found that a concentrated learning experience increased confidence as students learned about their own skills. Other researchers found that service learning fostered personal development (Bamber and Hankin, 2011; Helms et al., 2016; Wilson, 2011).

The nursing elective course NURS411: “Topics in Healthcare Delivery: Teaching Wellness to Children” provides students opportunity to expand their knowledge of diabetes management beyond the classroom or hospital. This course has an on campus classroom and clinical component, K4K. The purpose of this study then is to describe the nursing students' experience and perceived confidence in their nursing skills after completing a service learning nursing course. Also, overviewed will be the importance of service learning and its integration into the nursing curriculum.

## 2. Background

### 2.1. Course Classroom Component

The college classroom component occurs six weeks before the clinical component, K4K, of the course. During the classroom portion of the course, students attend five instructional classes centered on the care and management of children with T1D and also develop and implement K4K. The students are randomly assigned into five groups and each group organizes and manages K4K for one day. Students not only learn concepts to manage a group event such as a camp, but also the translation of these concepts into clinical practice. These concepts include glucose management, leadership skills, team building, and conflict resolution. Campus classes focus on teamwork, leadership, and conflict resolution as each group of students plans for K4K (see Table 1). The evaluation methods used in the classroom include quizzes, direct observation, group discussions, and reflective journals (see Table 2).

One campus classroom day is dedicated to an interprofessional education day to understand the role varies health care roles in diabetes management. A pediatric nurse practitioner highlights current diabetes research trends, insulin therapy, and camp management. The students

have the opportunity to practice insulin injections, operate insulin pens and pumps, and manage continuous glucose meters. Also, a registered dietitian and clinical psychologist spoke about diabetes management related to their specific profession. In unison, the interprofessional healthcare team provides a full view of the needs of a child with a chronic condition in the classroom as well as guidelines for problem solving with certain scenarios during K4K.

### 2.2. Course Clinical Component

The clinical component is similar to a study abroad as the students apply classroom knowledge to the community (Root and Ngampornchai, 2012). During the week of K4K, a pre-conference briefing is held before the campers' arrival. The faculty and camp staff utilize critical thinking with the students to discuss clinical aspects of diabetes management in order to influence positive outcomes each day (Kazemi et al., 2011). Throughout the day, students learn through experiencing family interactions between and among siblings and parents at drop off. Students interact directly with the nursing and psychology staff regarding diabetes management and psychological aspects associated with children. Interprofessional responsibilities during camp are listed in Table 3. Besides hands-on diabetes management, this course provides essential “life skills” including teamwork, conflict resolution, management, and interpersonal communication across the lifespan. K4K concludes with a post-conference briefing and the students work in their small groups to identify issues or concerns related to diabetes management, psychosocial interactions, logistics of camp for the next day, or conflicts among the nursing students.

## 3. Methods

### 3.1. Research Design

This descriptive qualitative research study used open ended questions to describe nursing students' experience and perceived confidence in their nursing skills after completing a service learning nursing course.

### 3.2. Participants

Using a purposeful sample, a total of 23 students enrolled in the summer 2016 course; all completed the on campus classroom and camp successfully. The majority of the students (87%) in this study are in a second degree nursing program, which requires completion of a baccalaureate degree in another field. The student sample is comprised of a range of age, life skills, and previous life experience in education, sciences, health related degrees, music, and law.

### 3.3. Data Collection

As part of the students' course assignments, the students were asked to complete an eight item Perceived Confidence Survey in diabetes management. This survey took 5–10 min to complete and was administered in class the week preceding K4K and repeated after K4K. The adapted Perceived Confidence Survey used a four-point Likert scale, which included the following confidence areas: communication with campers and families, hypo- and hyperglycemic assessment and treatment, insulin pump therapy, and empathy (Johnson, 2007). All data was de-identified and answers were unable to be linked back to a student. Along with the survey, students wrote a reflective analysis paper about the on campus classroom and K4K that was due 48–72 h after the camp. This paper essentially was a response to six open-ended questions adapted from course objectives (Johnson, 2007). After reflective analysis papers were graded, a research assistant removed student names to de-identify the qualitative data prior to thematic analysis.

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