

# On Site Community Clinical Experience







# Who We Are



### Community health is introduced in year 3

 Students complete two - 72 hour community clinical rotations (one each in the fall and winter semesters)

2 clinical days per week

# Factors impacting our ability to secure quality community clinical placements:

- Small number of community health agencies in Timmins
- Preceptor fatigue
- Competition from other colleges and universities
- Cancellation by an agency
- Geographic isolation from other communities

#### **Our solution**

#### Create an in-house community clinical experience

 Goal: to provide a meaningful community clinical environment where students engage in praxis, developing skills and confidence in community health nursing

#### Incorporate:

- CHNC Standards of Practice
- Values and principles of PHC and the OC strategies and processes

 Target population is the Northern College student body (Porcupine Campus) – median age is 27

One faculty member assigned to create and deliver the program

# Faculty Member's Roles & Responsibilities

 Develop a program that provides weekly structure yet enables students creativity in developing and implementing peer focused health communication and education initiatives

- Serve as both faculty advisor and clinical instructor
- Establish community partnerships and work with partners as needed throughout the year

#### What We Did

#### Started small

- Six students, placed in pairs:
  - Each pair was assigned a program related to a major health related-risk factor for college/university youth
    - 1. Smoking prevention and cessation
    - 2. Eating well
    - 3. Alcohol and risky behaviours
- Group tasks were also assigned and group discussion was encouraged

Orientation

Required readings focusing on target aggregate

Community assessment

Start analyzing assessment data

- Required readings
- Complete assessment data analysis
- Each student pair develops a community health dx
- Identify health education and communication initiatives to focus on for the remainder of the clinical rotation:
  - Based on community analysis, dx, and required readings

Start developing initiatives and gathering/creating resources

 Identify potential community partners who may provide advice/resources and contact same

- Produce a program logic model
  - Utilize SMART criteria

Required readings

Meet with community partners

Continue preparations for the initiatives

Midterm student evaluation

Implement the initiatives

Follow up on any client needs that may arise from the initiatives

 Begin preparations to write a media item related to the clinical work done during the rotation

- Complete and submit the media item
- Summative evaluation of the work completed
- Suggested next steps / ideas for incoming clinical group
  - Prepare a jump drive
- Final student clinical evaluation
- Evaluate the clinical program

# **Students Took Ownership**



# **Smoking Prevention**and Cessation



# **Highlights**



Family Health Team

SUBJECT

Collaborative Clinical Student Experience Smoking Cessation – Leave the Pack Behind (LTPB)

#### **BACKGROUND**

Departmental policies/procedures reflect the intent of Northern College-wide policies.

1. In collaboration with Northern College and the East End Family Health Team (EEFHT), the third year BScN students will be given an opportunity to offer smoking cessation counseling under the Leave The Pack Behind (LTPB) program. This experience will provide students an opportunity to apply theoretical learning in a community health setting. The EEFHT embraces the opportunity to assist nursing students in their learning journey and are determined to provide a suitable environment to facilitate this knowledge building.

#### POLICY

Departmental policies and procedures will apply to all support and administrative staff within the department.

#### **PROCEDURE**

 All nursing students are required to meet the clinical placement medical requirements as stated by Northern College and will be confirmed by their clinical coordinator prior to

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## Highlights

• Deficient knowledge among students about the Porcupine Campus food bank r/t to low visibility, AMB an NC student survey that revealed 82% of students surveyed were unaware of the food bank, and 24% of those who did not know stated they would use the food bank.







# Alcohol & Risky Behaviours

## **Highlights**



#### Directive

Teaching Preventative Measures to Reduce Risk for Alcohol Related Harm to Students Living in the Porcupine Campus Residence

#### BACKGROUND

A 2004 Canadian Campus survey conducted by the Centre for Addiction and Mental Health (CAMH) reveals that of 6,282 full-time Canadian undergraduate university students surveyed, 32% reported hazardous or harmful patterns of drinking. Heavy-frequent drinking, indicated by the usual consumption of more than five drinks on the days they drink and weekly drinking, was significantly higher among students living on campus (24.1%) compared to those living off campus on their own (16.8%) and those living with family (12%) (CAMH, 2004).

Baccalaureate nursing students at Northern College completed an informal survey of 118



#### **Recovery Position**

 Put the person on their back. Raise the person's arm closest to you straight above the head. Place the other arm across the chest. Straighten the leg closest to you. Bend the other leg at the knee.



Grab the person's far shoulder and raised knee. Roll the person towards you. Make sure the knee touches the ground.



3. Place the person's nearest hand under the side of the face to support the head.

Save a life - use the recovery position to reduce the risk of choking. According to a Northern College Student Survey (2011):

- 64% of females have vomited due to drinking
- 68% of males have vomited due to drinking
- 22% of females have lost consciousness due to drinking
- 27% of males have lost consciousness due to drinking

**Call 911:** when you can't wake your friends up; breathing is slow or irregular; and skin is cold, clammy or blue.





# **Program Benefits**

- Students gain a better appreciation for and understanding of CHN roles and responsibilities, the importance of community partnerships and inter/intraprofessional collaboration
- Students are considering and applying CHNC standards of practice, the social DOH, PHC values and principles, and OC processes and strategies
- We are reaching a traditionally hard to reach aggregate

We created 24 clinical placements at Northern this year!!

# **Program Benefits**

- BScN students gain an appreciation for research
  - The students' clinical work is evidence based and informed

 Survey data gathered by students was used in one of their research courses - demonstrated simple descriptive and inferential statistics with meaningful data. Data can also be turned into numerical data via SPSS, generating tables and graphs

# **Program Challenges**

- Theory does not always precede clinical experience
- 5 -6 week clinical rotations
- Sufficient assigned faculty hours
- No other community clinical instructor is paid
- Perceived inferior experience may influence student choice of placement
- No budget or dedicated workspace

### **Lessons Learned**

- Program provides a valuable student learning experience.
- The college/university student association is an essential community partner

- Peers are receptive to one another
- Community partners are eager to work with students and faculty
- A lot can be accomplished with very little to no money!

Thank you.

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