

Developing Competency: Integrating Community Health Nursing Standards of Practice Within Baccalaureate Nursing Education

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Background

- Community Health Nursing Standards of Practice (CHNSoP) launched in 2003 measure practice after two years experience (CHNC 2008)
- Standards taken up and implemented by practicing community health nurses across Canada in a variety of ways
- Limited documentation of the use of CHNSoP as benchmarks for achieving educational objectives or evaluating clinical experiences within Schools of Nursing (Cohen & Gregory, 2009b).

CHN Standards of Practice Support Student Learning

- CASN supports the standards of practice in nursing education (2010)
 - Facilitate students' understanding of the scope of CHN practice (CASN, 2010).
 - Assist in developing a community health nursing identity (CASN, 2010).
- CASN recently developed guidelines for undergraduate community health nursing placements (CASN, 2010).
 - Standardize educational quality of the community health clinical placements
 - Prepare student to meet entry to practice levels

Innovative Practice Learning Environments

- Nursing education programs should strive to
 - Provide innovative practice learning environments
 - Evaluate teaching methods (CRNNS)
- Critical reflective writing
 - Supported by many educators and researchers as an effective learning tool
- How do students apply CHNSoP to clinical practice?
- How do critical reflections support student learning of CHNSoP?

Purpose

- To explore how fourth year nursing students critically apply the Community Health Nursing Standards of Practice through the use of reflective writing in the clinical component of a Community Health Nursing course.

Questions

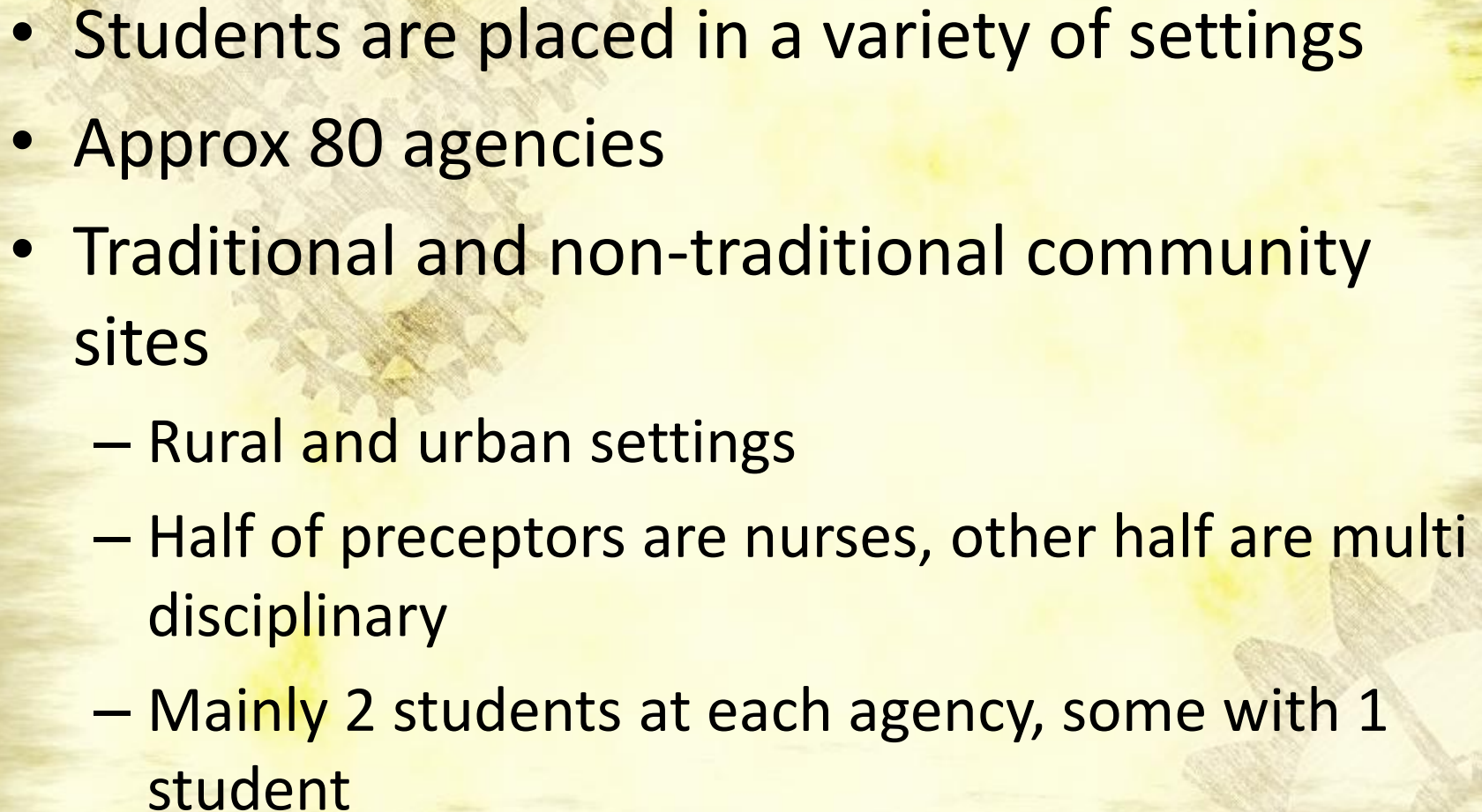
- 1) What standards of practice do students reflect upon during their community clinical experience?
- 2) How do students critically apply the standards in various settings?
- 3) What is the usefulness of reflective writing as a learning tool?

Context

- Community Health Nursing in 4th year
 - Two 3 credit courses run sequentially during Fall/Winter semesters
 - N4250 Assessment and planning
 - N4260 Implementation and evaluation

Course Format

- Weekly Lecture 2 hours (20 weeks over 2 terms)
- Clinical 20 weeks (over 2 terms):
 - 6 hours at agency, 1 hr clinical conference
 - 140 clinical hrs

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- The background of the slide features a light beige, textured surface. A large, faint watermark of a gear is visible on the left side, and a faint watermark of a flower is on the right side.
- Students are placed in a variety of settings
 - Approx 80 agencies
 - Traditional and non-traditional community sites
 - Rural and urban settings
 - Half of preceptors are nurses, other half are multi disciplinary
 - Mainly 2 students at each agency, some with 1 student

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- Public health – Youth health centres, Healthy Beginnings, Communicable disease
 - VON
 - Community resource centres
 - Community health boards
 - Addictions
 - New immigrant support services
 - Homeless shelters
 - Supportive housing
 - Needle exchange
 - Daycares
 - Senior centres
 - Mental health
 - Chronic diseases
 - Environmental/occupational health

Reflective Writing Assignment

○ 5 in first term, 3 in second term

○ Purpose

- Professional critique
 - Personal practice
 - Agency practices
 - Issues related to target population

○ Student is required to include:

- Amount of time spent with agency
- Activities completed during clinical
- Plans for next clinical day
- Discussion of how they implemented one CHNC Standards of Nursing Practice
- Critically reflect on clinical experience
 - Kolb Action Reflection Model suggested to guide critical reflection

Reflective Writing Assignment

- Reflective writing completed individually
- 2-4 pages submitted every two to three weeks to clinical faculty and preceptor
- Clinical faculty provides written feedback and a letter grade for each reflection
 - Purpose of feedback
 - Guide and support professional critique
 - Encourage development of critical thinking
- Submitted to preceptor to keep informed of progress and learning
 - Preceptors are not required to respond in writing however some do

Purpose of Reflective Writing

- Professional learning and growth
- Facilitates communication between student, clinical faculty and preceptor
- Clinical faculty and preceptor are informed of
 - What student is doing
 - How standards are being applied
 - How student is understanding community clinical practice
 - Ability to apply critical thinking to community health nursing

Recruitment

- Dalhousie ethics approval obtained
- **14** Participants – 4th year nursing students who completed the Community Health Nursing course Feb 2011
 - A letter of introduction and consent emailed to all eligible nursing students explaining study
 - Consent implied by submitting reflective writing papers to the research coordinator.
 - All names and identifying information removed by research coordinator
- **105** Reflections

Standards Used in Reflections

Student		Promoting health	Building individual and community capacity	Building relationships	Facilitating access and equity	Demonstrating professional responsibility and accountability
1	School	xx	xxx	Xx		x
2	Seniors Centre	x	xxx	Xx	xxx	x
3	Daycare	xx	xx			x
4	Women's shelter	x	xx	X	xx	xx
5	Women's shelter	xx	xx	x	xx	x
6	Youth and Mental Health	x	xxx	xx	x	x
7	Addictions Outreach	xxxxxx		x	xxxxxx	
8	Public Health Early Home Visiting	xxx	xxx	xx	x	x
9	Youth Health Centre		x			xx
10	Youth Health Centre	x	x	xx	x	x
11	Cancer Care	xxxx	x	xxxx	x	xxx
12	Community Resource Centre	xxx	xxx	xxx	xx	xx
13	VON	xxxx		xxx	x	x
14	Family Resource Centre	xxxxx	xxxx	xx	Xxxx	x
	Total	35	28	25	23	18

Methodology

- Qualitative thematic analysis
- Research questions guided analysis
- Emerging themes

Findings

- Applying Standards
- Critical Reflection
- Usefulness of Reflective Writing

Applying Standards

- “Application” referred to students describing in detail
 - how they implemented a standard in their practice
 - Personal application
 - Observing another nurse apply the standards
- All students gave clinical examples of how they applied the standards
- Ability to critically apply standards differed between students

Critical Reflection

- There were different levels of student critical reflection and growth
- “Critical reflection” referred to students who implemented some or all of the following:
 - Identify an issue connected to a standard
 - Discuss how they would address the issue (actual or hypothetical)
 - Raise more questions if they were unsure of how to address the issue
 - Suggest next steps

Successful Critical Thinking

- Student
 - Identified own learning needs/gaps
 - Identified personal beliefs, values, practices
 - Used a social justice lens
 - Explored and/or applied ideas during clinical practice
 - Explored relationship with clients, preceptor and others at agency
- Students who identified key standards and issues in first two reflections continued to build on these ideas to further their learning and growth

Reflection and Growth

- How students identified standards/issues contributed to successful learning
 - Preceptor led
 - Personal observations of clients
 - Personal research (reading, asking questions)
 - Specific activities at the agency

Promoting Health

- One student described how ‘setting up an apartment’ for a woman who had been homeless was important from the perspectives of safety, social justice, and empowerment.

“Cleaning and preparing an apartment unit for an upcoming participant was rewarding as I was thinking about how this unit could be potentially a safe and empowering environment”.

(student # 5)

Building Individual and Community Capacity

- *Collaboration*

“Hurdles can get addressed, new ideas surface and if there are tasks associated with these, then the work is allocated, and it gives everyone a set of reference as to what the big picture is looking like. Decisions are made by consensus, but they aren’t always decided easily” (student # 14)

Building Relationships

- Power differentials

“I was most aware of how being in people’s homes completely shifted the power differential that sometimes marks the nurse-client relationship in a hospital. Here, they welcomed us into their homes, where we were a guest, and we treated their space and wishes with great respect. This was very different than the hospital, where our clients are intruded upon at all hours of the day and night, whenever we needed to perform a procedure or task”. (student # 13)

Facilitating Access and Equity

- Stigma of marginalized populations

“ I find it extremely disheartening to know that some of these women have been turned away from primary care services because of the complexity of their health issues. I find this is discriminatory and promotes inequity, as these women as a result, have limited points of access to receive health care. As a consequence, it seems to me that this would ultimately lead to poorer health outcomes for this population” (student #4)

Demonstrating Professional Responsibility and Accountability

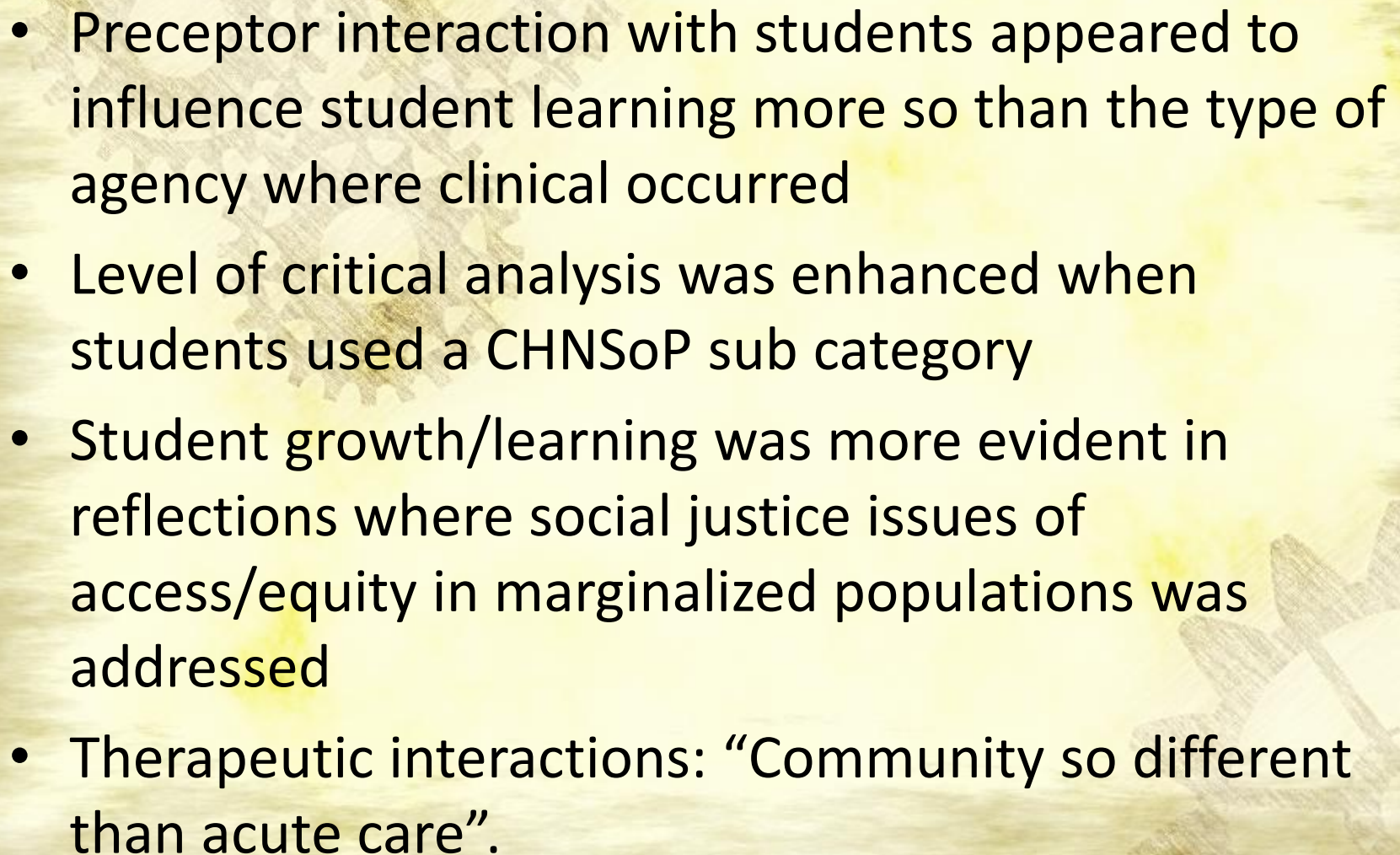
- One student recognized that own personal beliefs and values about early childhood education were different from agency's. The student wrote about how these different ideas contributed to personal learning, growth, and change in perspective about play based environment on school readiness

“Are my personal experiences a strength or a bias”

(student #3)

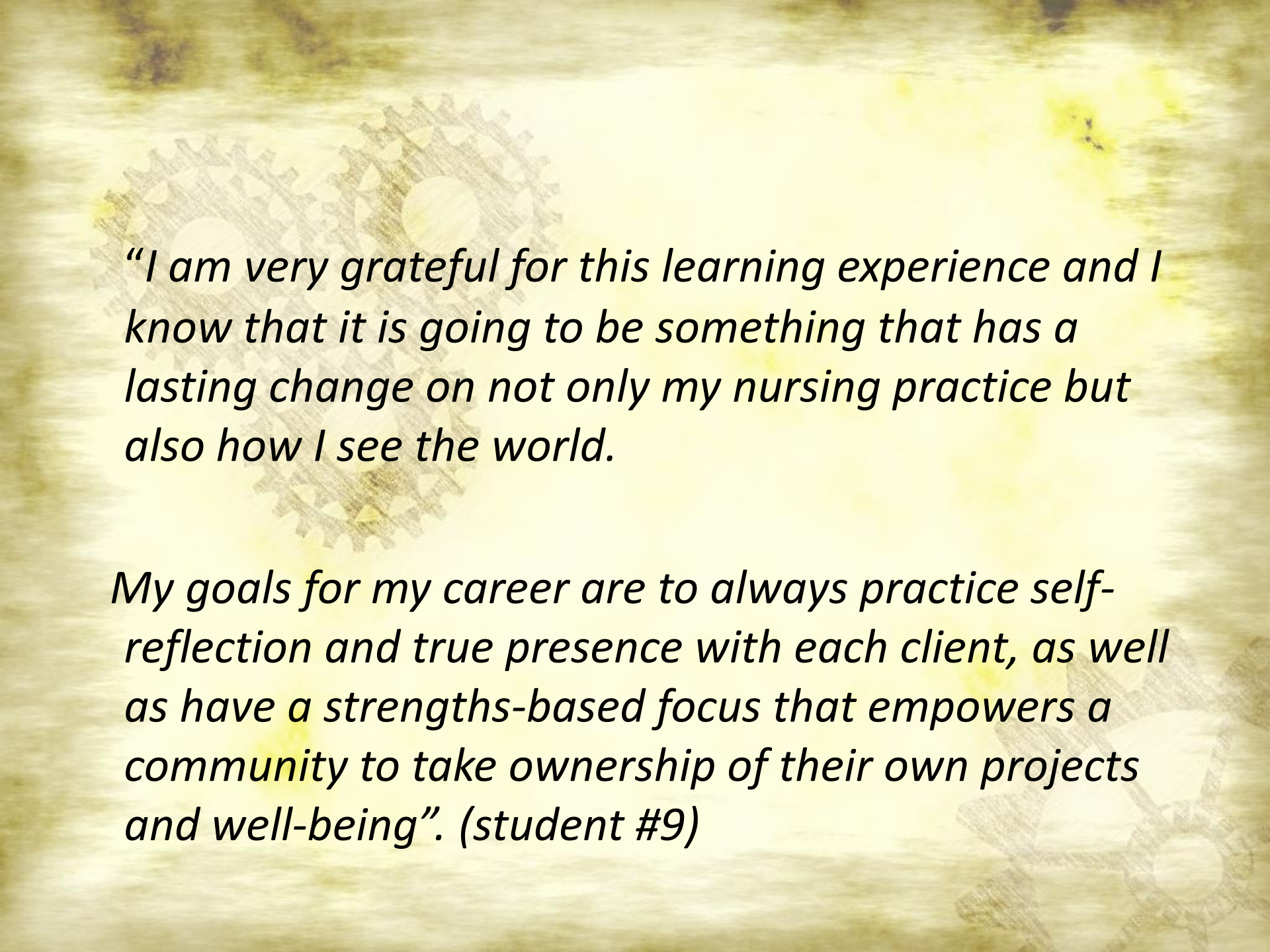
Usefulness of Reflective Writing

- In this study, reflective writing appeared to be a useful communication tool that allowed students to critically explore and express how they applied CHNSoP to community clinical
 - Communicate in a professional manner to clinical faculty and preceptor
 - Receive constructive critique from clinical faculty
 - In-depth exploration of personal growth
 - Identification and reflection on three levels
 - Personal beliefs and practices
 - Community/client relationships
 - Issues of social justice

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- Preceptor interaction with students appeared to influence student learning more so than the type of agency where clinical occurred
 - Level of critical analysis was enhanced when students used a CHNSoP sub category
 - Student growth/learning was more evident in reflections where social justice issues of access/equity in marginalized populations was addressed
 - Therapeutic interactions: “Community so different than acute care”.

Further Research Questions

- What are the perceptions of preceptors, clinical faculty and students about reflective writing as a learning tool?
- How did clinical faculty feedback on reflections affect students' ability to apply standards, critically reflect and grow?



“I am very grateful for this learning experience and I know that it is going to be something that has a lasting change on not only my nursing practice but also how I see the world.

My goals for my career are to always practice self-reflection and true presence with each client, as well as have a strengths-based focus that empowers a community to take ownership of their own projects and well-being”. (student #9)

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