



Assessment of Student Nurses` Clinical Practice : A Phenomenographic Exploration

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Aim

- Explore mentors' experiences and understanding of factors influencing assessment of student nurses' clinical practice in a secure forensic mental health service in England.

Intentions

- Conceptual explanations: assessment & study site
- Motivation for the study
- Methodology: a rationale for its use
- Method: data collection
- Method: data analysis
- Study findings
- Implications of study findings
- Study recommendations
- Conclusion

Conceptual Explanation

- Assessment
 - Is a process in which evidence of performance is gathered and evaluated against **agreed criteria** in order to make a decision about learning.
- Secure forensic mental health settings
 - High
 - Medium
 - Low

Motivation: Why the Study?

- Clinical assessment: its importance
 - Clinical learning enables students to acquire skills for quality care provision.
 - Newly registered nurses do not always have adequate practical skills.
- Reasons
 - Inconsistencies in assessment practices
 - Mentors' Lack / limited motivation
- Implications
 - Patients would be at risk of being offered poor care

Scarcity of research on factors influencing
assessment of student nurses` clinical
practice

Methodological Fit

- Phenomenographic methodology
 - Developed in Sweden in 1970s
 - It focuses on experiences and understanding of phenomena
 - Phenomenographers seeks to identify:
 - Multiple experiences and understanding that a particular group of people have for a particular phenomenon. **WHY?**
 - Experiences & understanding are referred to as **conceptions**
 - Relationships between people`s conceptions

Phenomenography: Researcher's Position

- Adopts an insider perspective. Why?
 - Empathic understanding
- Adopts an outsider perspective: standing alongside of participants. Why?
 - Allows researchers to ask critical questions (Hermeneutics of questioning)
- The research aim can be achieved through this engagement and interpretive activity

Sampling and Sample Size

- Ethical clearance
- Sampling
 - Criteria-purposive and homogenous
 - Participants were recruited who were knowledgeable about the phenomenon
- Sample size
 - Five focus groups with six participants each (5x6=30)

Inclusion Criteria of the Study

- Registered mental health nurses with
 - Two or more years of experience of mentoring students in mental health settings.
 - A “mentorship in practice” qualification who are willing to share their experiences of mentoring students.

Method: Data Collection

- Focus group interviews (**Open and deep format**)
- Open indicates that there is no definite structure to the interview.
 - Researchers are prepared to follow any lines of reasoning that the interviewee might address
- Deep indicates that the interview will follow a certain line of questioning until it is exhausted.
 - Conceptions are joint products of researchers and interviewees

Seven Steps Approach to Analysis (Sjöström & Dahlgren, 2002)

- Step 1: Familiarisation: Read transcripts several times to increase familiarity of material.
- Step 2: Compilation: Search transcripts for statements that correspond to the aim of the study.
- Step 3: Comparison: Analyse identified statements for similarities and differences.
- Step 4: Grouping: Group statements with similar meanings together (formation of conceptions).

Seven Steps Approach to Analysis (Sjöström & Dahlgren, 2002)

- Step 5: Articulation: Re-examine or repeat analysis of conceptions to enhance meaning. This stage informs the formation or identification of descriptive categories.
- Step 6: Labelling: Labels the descriptive categories of conceptions to reflect their meanings.
- Step 7: Contrasting: Compare descriptive categories for similarities and differences to ensure that each has a unique character

Findings

- Four main themes
 - Learning outcomes
 - Transparency
 - Assessment
 - Clinical placements

Learning Outcomes

- To develop understanding
 - “I have been mentoring for many years, but I still find it hard to understand some learning outcomes.”
 - “Not understanding the learning outcomes equates to not knowing what to look for when assessing.”
- To be involved
 - “Working with lecturers enables us to seek clarification about issues, such as learning outcomes.”
 - “I have not seen a link lecturer for while. You cannot reach them.”

Transparency

- To be open
 - “It is hard to openly admit that you don’t know. It is even harder to admit ones limitations to a student.”
 - “I have not attended any update workshops since my mentorship training. So, I am not sure of my role as a mentor.”
- To seek support.
 - “Apart from supporting students, I have full clinical responsibility to provide care to patients.”
 - “Our workload prevents us from adequately assessing students.”

Assessment

- To get a structure
 - “I only assess students when I have time. You cannot plan assessment. It has never worked for me”.
 - “What mentors observe and the feedback they provide are influenced by the degree to which they like the students”.
- To alleviate anxieties
 - “Some perform poorly in practice. The thought of failing them sometimes makes me feel very anxious”.
 - “We should be confident to fail students who have failed to achieve the minimum competencies”

Clinical Placement

- Appropriate student population
 - “Last semester, I had three students to mentor, but hardly made contact with them.”
 - What some of us don't realise is that the number of placements have reduced.”
- Adequate placement duration
 - “The three week placement is too short for mentors to carry out comprehensive assessments.”

Implications of Study Findings

- Practice
- Training and education
- Research

Implications for Practice

- Accurate assessment of performance could be difficult task to achieve. **Why?**
 - Infinite number factors that could influence the assessment process.
 - It is practically impossible to consider all the variables influencing assessment
 - It would therefore be difficult for mentors to achieve absolute validity and reliability of students` clinical assessments

Clinical Assessment: Improving its Reliability & Validity

- Mentors to:
 - work closely with link lecturers. *Why?*
 - work closely with other members of the multi-disciplinary team
 - use “protected time”
 - Use multiple assessment methods

Implications for training, Education & Research

- Attend mentorship training and updates, focusing on
 - Coping with stress
 - Approaches to enhance reliability of assessment
 - Planning and recording of assessment
 - Sufficiency
 - Authenticity
- Limited understanding of factors influencing assessment in practice

Recommendations

- Research
 - More research on factors influencing assessment in practice
 - Suggested research methodologies
 - Interpretative Phenomenological Analysis
 - Q-methodology, Mixed methods
- Policy Development
 - Facilitate a non-judgmental and consistent approach to assess students.

Conclusion

- Clinical assessment: a complex activity
- Influential factors: multiple
- Limited understanding
- Recommendation
 - Research
 - Training

THANK YOU

References

- Fitzgerald M., Gibson F, Gunn, K 2010. Contemporary issues relating to assessment of pre-registration nursing students in practice. *Nurse Education in Practice*, 10: 158-163.
- Marton F 1981. Phenomenography: describing conceptions of the world around us. *Instructional Science*, 10 (2): 177-200.
- McSharry E, McGloin H, Frizzell AM., Winters-O`Donnell L 2010. The role of the nurse lecturer in clinical practice in the Republic of Ireland. *Nurse Education in Practice*, 10: 189-195.
- Nursing and Midwifery Council (NMC) 2008. *The code, standards of conduct, performance and ethics for nurses and midwives*. London: NMC.
- Price B 2007. Practice-based assessment: strategies for mentors. *Nursing Standard*, 21 (36), 49-56.
- Roberts D 2011. Grading the performance of clinical skills: lessons to be learned from the performing arts. *Nurse Education Today*, 31 (6): 607-610.