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Students' Perceptions of the Operating Room as a Clinical Learning Environment

Rhoda Meyer

MPhil HSE (Health Sciences Education), BA (Cur) Education & Management, Diploma (Operating Room Nursing), RN, RM
Supervisor

Prof S van Schalkwyk



Sentrum vir Gesondheidsberoepse Onderwys • Centre for Health Professions Education
Fakulteit Geneeskunde en Gesondheidswetenskappe • Faculty of Medicine and Health Sciences





Faculty Disclosure



Faculty Name	Rhoda Meyer Mphil HSE, BA Cur, Dip (OR Nursing), RN, RM
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I. Goals & Objectives



- Session Goal
 - To promote awareness of the learning challenges faced by students in an operating room in a private hospital context.
- Session Objectives
 - Examine the conditions impacting on clinical learning in an operating room environment.
 - Analyze the enablers and constraints to clinical learning in the operating room.
 - Explore ways to improve clinical learning in an operating room context.



2. Background

- Clinical placement - critical component of nursing education to:
 - prepare student for his/her future role as a graduate (Jonsen et al., 2013).





Extensive research has been undertaken to explore the clinical learning environment in a variety of health care settings.

(Dunn & Hansford 1997; Sharif and Masoumi 2005; Edwards, Smith, Courtney, Finlayson & Chapman 2004; Papp, Markkanen & von Bonsdorff 2003; Lydon & Burke 2012).



Findings foregrounded in the literature...



- Students' experiences of clinical learning contexts varies.
- A major focus: factors affecting learning during clinical placement:
 - **Clinical environment:**
 - positive clinical environment fosters learning, (Dunn & Hansford 1997; Sharif & Masoumi 2005).
 - **Perceptions of students:**
 - Has an influence on the quality and degree of learning taking place (Findik et al. 2015).



- **Context**

- It is the context within which clinical learning takes place that is most influential in developing the necessary skills. (Clare, Brown, Edwards & Van Loon 2003)
- Yardley, Tuenissen and Dornan (2012:e102) support this: 'learning is situated',



Of relevance to my study was:

Research conducted on experiences of student nurses during the operating room placement:

- Highlighted: Student nurses' dissatisfaction with clinical experiences, due to specific challenges, e.g.:
 - decreased patient interaction in the intra-operative environment
 - lack of mentoring
 - high complexity of nursing practice (Hughes 2006; Callaghan 2010).



3. Research Methodology



- An exploratory, interpretive and descriptive design generating qualitative data was utilized (De Vos et al., 2011).



3. Research Methodology

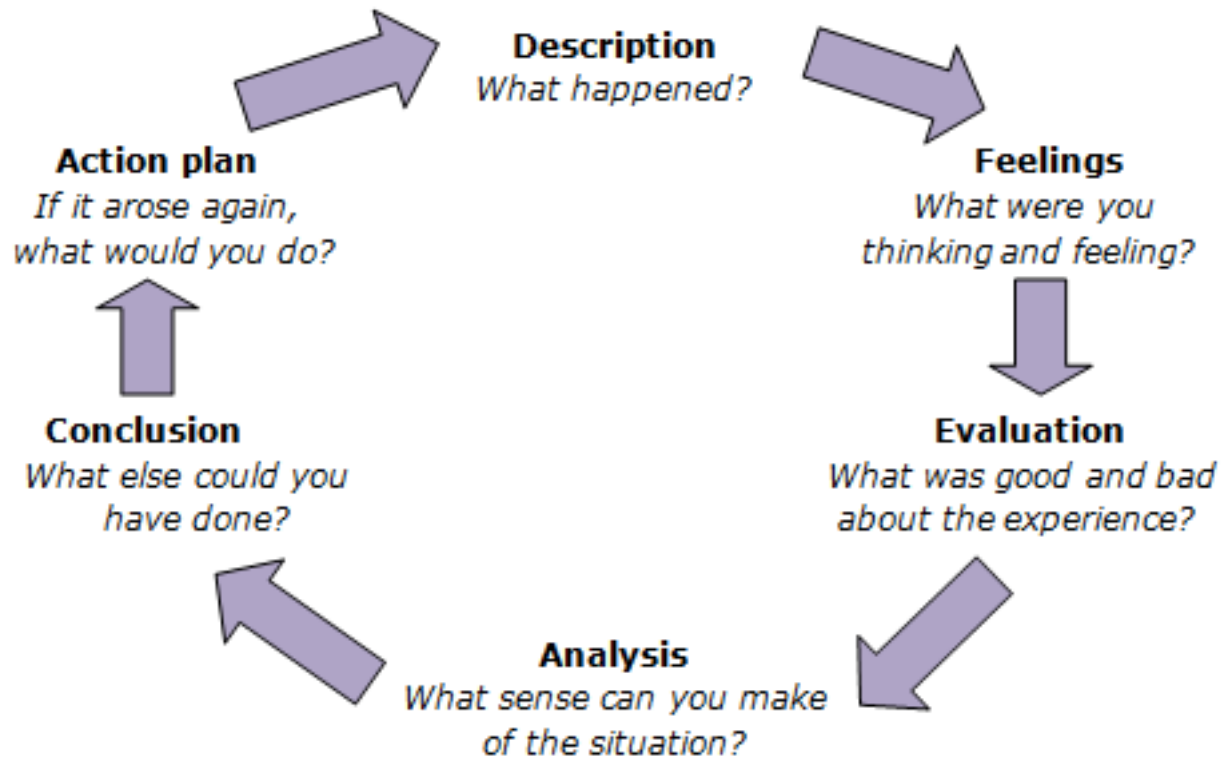


Strategy

- focus group interview & a survey in the form of a questionnaire (Bulman & Schutz 2004:24)
- both based on Gibbs cycle of reflection
- which was adapted, by studying the relevant literature through exploratory analysis (Burns and Grove 2005)



3. Research Methodology



Gibbs cycle of reflection (Palmer et al., 1994)



3. Research Methodology



Rationale for methodology

- An open-ended questionnaire - encourages the participant to 'think things through' (Bolton 2005)
- the process of writing facilitates the act of contemplation (Forrest 2008).
- Focus group interview allowed further exploration by delving deeper into issues



3. Research Methodology



- This study was conducted at a private nursing education institution located in a metropolitan area in the Western Cape
- Total number of the 4th-year bridging course nursing students was 65
 - selected as the population because
 - their intense training through the different disciplines
 - helps them determine the quality of the learning environment.(Meyer, van Schalkwyk & Prakaschandra .,2016)



Population and Sampling

- Purposive sampling - students from each of the 5 hospitals (where the clinical placements are undertaken) were selected.
- Recruitment targeted those participants who had exposure to the operating room.
- From the students who were selected ($n = 40$) for the focus group discussion & the questionnaire, 22 were willing to participate and were included in the study.



3. Research Methodology



Population and Sampling

- After a routine lecture, the researcher, explained the study, research process, reflective cycle and questionnaire to the students.
- Followed up by additional sessions where students were given opportunities to enhance understanding of reflection (Edwards et al., 2013).



3. Research Methodology



Data Collection

- The questionnaires were handed out to the 10 participants who were willing to participate.
- Completion of the questionnaire
 - took place in the absence of the researcher.
 - took approximately 45 min.
- Only 8 questionnaires were returned.



3. Research Methodology



- To further probe issues that were described in the questionnaire, a focus group discussion, conducted by the researcher, was undertaken a week after receiving the completed questionnaires.
- Questions in the focus group discussion were similar to those of the questionnaire.
- (Polit and Beck, 2012)



3. Research Methodology



Data Analysis

- Data gathering and analysis was conducted iteratively.
- Typically, data analysis for qualitative studies occurs in three phases:
 - description, analysis and interpretation (Burn & Grove 2005:452)
- Description - researcher familiarized herself with the data by reading and capturing its essence.
 - The information was then be prepared and analyzed.
- Analysis : open coding, categorizing of data, & identification of themes (DeSantis & Ugarriza 2000).
- Themes were then classified and reduced to reflect relationships (Burns & Grove 2005).



4. Results & Discussion



- 4 themes.
 - ‘interpersonal factors’,
 - ‘educational factors’,
 - ‘private operating room context’,
 - ‘recommendations’,
- relate to context, which is the overarching theme in this study.



- The themes are reflective of the factors that influenced the quality and degree of learning encountered in the operating room, and whether, ultimately, the operating room provided an environment conducive to meaningful clinical learning.



Theme 1: interpersonal factors

- Reflects the interpersonal factors in the operating room
- the operating room presents both enablers and constraints to learning
- Interpersonal factors which served as enablers to learning:
 - acknowledgement and respect from doctors
 - contributing to feelings of inclusiveness as team members
 - Displays of teamwork and coping with stress



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- Constraints to learning:
 - feelings of inadequacy
 - anxiety before clinical placement, attributed to fear of the unknown and previous negative encounters.



Theme 2: educational factors

- Elucidated participants' educational experiences and opportunities
 - positive learning outcomes:
 - better understanding of anatomy, pain management, understanding doctor's orders, pharmacology
 - assertiveness which ensured survival and may have enabled a better learning experience.



- Constraints:
 - The extent to which operating room staff engaged in teaching and learning activities with the participants
 - Support offered



Theme 3: private operating room context

- Reveals participants' perceptions of specific experiences in the private operating room context, which may have influenced their learning experience.
 - The unpredictable nature of the operating room (which could exist both in private and public sectors) was perceived as an enabler to learning



- Constraints:
 - lack of time, fast pace, and stressful nature within the private operating room
 - the lack of mentoring and teaching in the private hospital operating room
 - might be as a result of the focus on profitability and cost to patient.



Theme 4: recommendations

- Reflects the opinions and suggestions made by participants that may enable learning in the operating room in future
 - the need for future students to be more positive about the operating room placement
 - need for designated mentors in the operating room, proper orientation, guidance, preparation, involvement from staff, and improved communication.



5. Findings from research related to my study



- Lydon and Burke (2012) and Espiritu et al. (2012) - poor preparation of students before clinical placement often led to negative learning experiences.
- (Sharif and Masoumi, 2005), (Mabuda et al., 2008; Mogale, 2011) - feelings of inadequacy & exclusion by participants , emanating from negative attitudes and behaviors of operating room staff towards their teaching role.



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- Yardley et al. (2012) emphasized the lack of support as a prominent factor in inadequate conceptualization of learning experiences.
 - Henderson et al., 2009 - The development of critical knowledge and skills may be dependent on supportive staff-student interactions



6. Conclusion & Recommendations



- To address the challenges encountered in this study
 - Exploration into the specific preparatory needs of students specific to learning outcomes before operating room placement
 - improve collaboration and communication between lecturers, mentors and theatre managers



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- The appointment of designated preceptors to increase support for students while on clinical placement
 - Explicating the learning objectives of the students undertaking clinical placements (Callaghan, 2010).



7. Limitations



- Limitations
 - Extrapolation of data
 - Small sample size



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QUESTIONS

