Insights from Nursing Students about Patient Teaching: Are we Getting a Passing Grade?

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## Faculty Disclosure

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<td>Elizabeth Richard, MN, RN</td>
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<td>Conflicts of Interest:</td>
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<tr>
<td>Employer:</td>
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<tr>
<td>Teresa Evans, MN, RN</td>
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<td>Bev Williams, PhD, RN</td>
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Goals and Objectives

Session Goal

The goal of this presentation is to discuss how there is a perceived disconnect between the importance of patient teaching and its implementation in practice.

Session Objectives

- To identify student insights into the importance of patient teaching.
- To understand the facilitators/barriers related to patient teaching from a student perspective.
- To provide educators with strategies of how to embed/thread patient teaching into the curriculum.
- To identify how to foster patient teaching into clinical practice for students, educators, and administrators.
Research Design

**Gap:** Nurses do not believe that their education prepared them to engage in patient teaching effectively.

**Participants:** Year 2-4 BScN students and after-degree students (N=28) in a Context-Based Learning program.

**Research Methodology:** Focused Ethnography

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**Research Questions**

- How do nursing students describe their preparation to engage in patient teaching?
- How do nursing students describe their actual engagement in patient teaching?
- How can nursing programs enhance student confidence in patient teaching?
### Student Perceptions of Patient Teaching

#### Who is Responsible for Patient Teaching?
- Nurses
- Interprofessional Team
- Students
- Family

#### Contextual Issues Related to Patient Teaching
- Culture of the clinical placement
- Values: of the educational institution and the clinical staff
- Settings:
  - Community/Mental Health/Maternity
  - Acute Care
Unit Culture as Context

- Students received the impression that, on some units, getting patients “in and out” of the unit had higher importance than ensuring the patients were prepared for discharge.

- Patient teaching is not a priority for nurses in the “real world”.

- Students perceive that there is a lack of recognition of teaching as an intervention in some clinical areas.

- Slower paced clinical units/areas facilitate patient teaching.
Values as Context

Educational Values

- Faculty who place value on patient teaching enhance student confidence in patient teaching (and vice versa).
- Textbooks and classes present content and teaching theory but not how to “teach the material to patients”.
- Need to move from “telling to teaching” in class.
- Students perceive that completion of tasks and skill development is a priority for many clinical faculty.

Staff Values

- Students saw many nurses who did not seem to care about patient teaching or it is done assuming the patient understands what is being taught.
- Even if nurses value teaching, the patient load in acute care is so high that it makes it difficult.
- Leadership that values patient teaching can be seen on specific units.
Setting as Context

Community/Mental Health/Maternity

- More time for patient teaching.
- Most areas have specific charting documents related to patient teaching.
- Some areas are more laid back, less stressful, and patient acuity is lower so patient teaching is easier.

Acute Care (Med/Surg)

- Medications and treatments reduce the time available for patient teaching.
- Teaching often has to be done quickly. “If you’ve got five minutes you cover the most important things.”
- Students found they had to develop teaching aids as little were available on units.
- Students recognize that the higher stress environments make patient teaching more difficult.
Factors Affecting Patient Teaching Effectiveness

External Factors

Internal Factors
External Factors

- Time
- Patient complexity
- Opportunity

Student Quote:

“Things are complex, like diabetes management is super complex and to explain all the different aspects like insulin, diet, exercise to somebody in an acute stage, it’s really hard because you have to teach them how to use the insulin, you know, about everything.”
## Internal Factors

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<tr>
<th>Patient</th>
<th>Nursing Student</th>
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<tr>
<td>Readiness to learn</td>
<td>Knowledge</td>
</tr>
<tr>
<td>Rapport with teacher</td>
<td>Feeling prepared</td>
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<td>Experience teaching</td>
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**Student Quote:**

“It’s intimidating when you’re trying to learn yourself and having to teach somebody what you’re learning.”
Modifier of Relationship to Patient Teaching

- Student-Patient Relationship
- Student-Staff Relationship
- Student-Faculty Relationship
Student-Patient Relationship

Effect of Teaching Confidence

“Well I specifically had a patient that didn’t bother to listen to me at all because I was a student and he knew it and he felt I wasn’t adequately…[prepared]…. I felt like I did know quite a bit about his condition but he didn’t want to hear it from me. He wanted to hear it from my instructor and my instructor did her best to try to instil confidence. “She knows what she’s talking about. I’ll be here if she says something wrong or I need to correct her,” and that made it better but it’s just, if a patient doesn’t have confidence in you, you tend to lose confidence in yourself.”
Student-Staff Relationship

“I also think it’s the staff on the floor, if they’re willing to help you out and be there for you to answer your questions, it helps a lot. If they’re not, like...and like I get nervous and stuff.”

“But on the floor is where the staff hate having you and then the floor is where they love having you and like just the amount of growth that I see in myself, like on the ones who love having you is just...it’s not even a comparison.”
“I think as a student a supportive instructor helps a lot with confidence. If they are confident in you, you can be confident in yourself. Or more like a learning thing as opposed to punitive. You feel like that in the clinical setting, like, “Oh, why did you do that?” Like I don’t know, I just always feel like I’m being punished, like if you say something, like wrong or not the way they are expecting it.”
Educational Recommendations

- Students need to be responsible to generate ideas to increase patient engagement in learning.
- Standardized patients/simulation of patient teaching.
- Incorporation of patient teaching in the evaluation of clinical practice.
- Role modelling by faculty.
- Patient teaching component in lab testing.
- More patient teaching in class/seminar.
- More teaching and learning theory.
- Learning and using “teach back” strategies.
- Regular curriculum review to ensure patient teaching concepts covered.
Clinical Recommendations

- More teaching materials on units.
- Role modelling by staff.
- Instructor supervision of patient teaching.
- Use of iPads for teaching on units.
- Clinical time allotted to teaching.
- Buddy with nurse when teaching for the first time.
- Ensure clinical faculty value patient teaching.
Limitations of the Study

- Small sample size
- Self-selection bias
- Context-based learning curriculum
- Researchers taught in nursing program
What Grade Would You Give?