

Students' Perceptions of Front-end Loading of Didactic and Simulation Classes in a Maternal Child Course

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INTRODUCTION

Teaching undergraduate nursing students maternal child concepts is both challenging and rewarding. Preparing lectures to stimulate students while maintaining their interest in the content is difficult. The students need to be able to apply the knowledge acquired from the classroom and textbooks to inpatient clinical settings. Empowering students to become self-directed learners and promoting the development of critical thinking skills is a key component of teaching. Providing students with the resources to be successful in the classroom while holding them accountable for their own learning leads to academic success (Yang & Jiang, 2014). Utilizing innovative methods of instruction to accommodate the diverse learning skills of individuals' aids in promoting confidence and success in the clinical setting (Davis, 2013). Students need to be engaged in their learning; they need to actively participate in classroom and simulation experiences (Brannan, White, & Long, 2016; Sin, Sok, Hyun, & Kim, 2015).

PURPOSE

The purpose of the presentation is to share an innovative approach to teaching undergraduate Bachelor of Science in Nursing (BSN) students concepts and practices essential to maternal child nursing prior to inpatient clinical experiences. In an effort to improve confidence and ensure acceptable skill level in the maternal child specialty areas, all didactic and simulation experiences are front-end loaded during the first two weeks of the semester.

METHODS

A six question qualitative survey evaluated students' perceptions of teaching methods employed by maternal child faculty. The anonymous survey was administered at the end of the two courses. Data were collected at the end of fall and spring semesters.



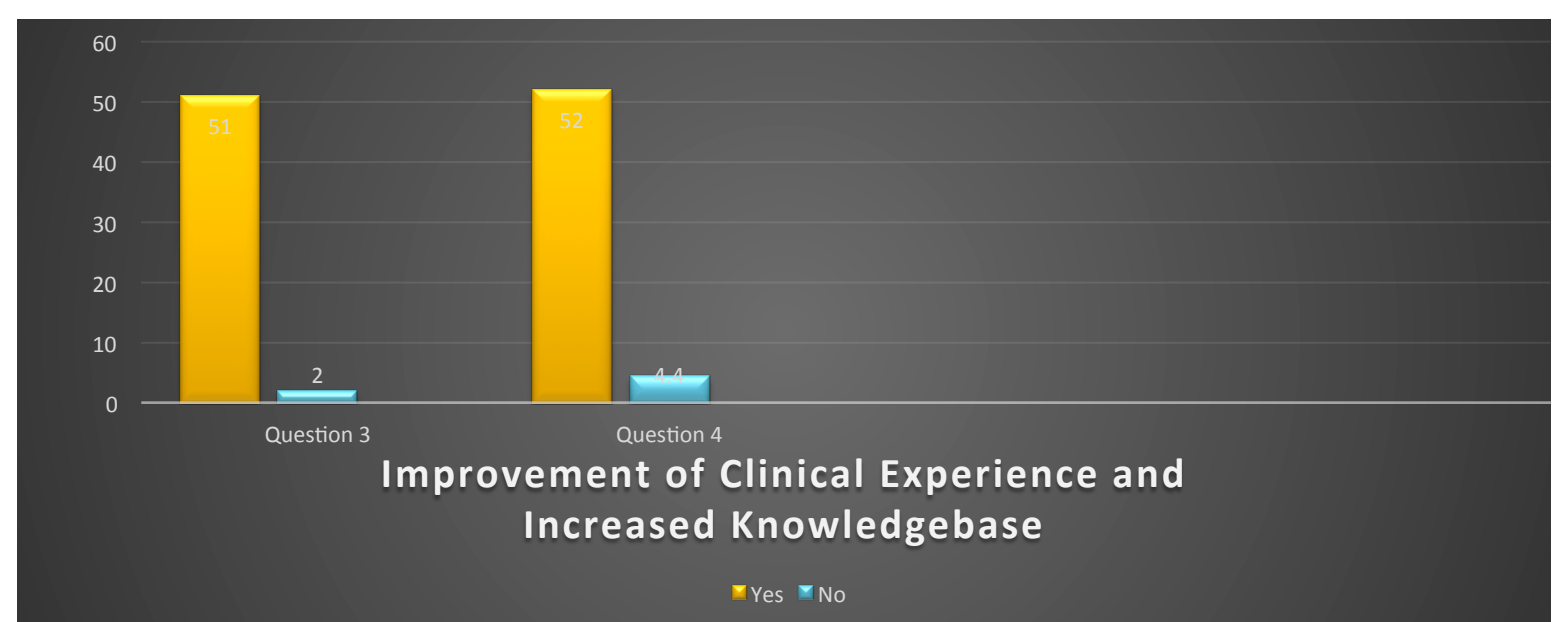
RESULTS

Emerging themes from students on their feelings about front-end loading classroom content prior to participating in clinical settings was *"liked"* overall by most students and many expressed it was *"more work upfront, but worth it."*

Students expressed more confidence after participating in simulation activities prior to clinical experience. When asked about their feelings, students responded that they felt more *"prepared."*

Students answered two questions about front-end loading and their perceptions of improvement:

3. Would you say that front-end loading (simulation and classroom teaching) improved your experience in the hospital?
4. Compared to other classes, did front-end loading increase your knowledge in the subject area?



Students voiced the benefits of front-end loading as *"eliminating the fear"* of new practice areas and *"feeling well-prepared."*

Emerging themes of the recommendations to improve the process were to *"add more lectures with shorter class time,"* or to *"not make any changes to the current teaching plan."*

CONCLUSIONS

Clinical readiness after simulation activities is essential to success and deeper understanding of nurses' processes of the maternal child settings. Students expressed an increase in knowledge and confidence prior to entering the specialty areas. The didactic portion of the classes afforded the opportunity to understand the evidence-based concepts prior to simulation experiences. The simulation activities led to increased confidence in the students' abilities to apply safe quality best practices in the clinical setting.

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