

Introduction



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- 1 Study skills
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Don't forget to visit www.palgrave.com/glasper for additional online resources relating to this chapter.

This book addresses the skills and competences for practice that you will need in order to make the transition towards your chosen healthcare career. There is a companion volume to this book called *Foundation Studies for Caring* which covers the theoretical components of healthcare education, and the books share a companion website featuring many resources that will help you to acquire the knowledge and skills needed over the foundation component of your programme. At the heart of this *Skills* book is the quest to link theoretical knowledge to the real world of practice in which the patient or client holds primacy.

Foundation Skills for Caring is predicated on 'student-centred learning' (SCL) in which you, the reader, will take centre stage in the learning processes. If you are also working with the *Studies* book, you will be familiar with this approach and can move straight on to the next chapter. If you are new to SCL, read on to discover more about it, how it will help you learn and develop, and how you should use this book to your best advantage.

What is student-centred learning?

In this SCL-based book you will be asked to engage in scenarios and activities which encourage you to investigate, question and interact with new ideas and practices. Sometimes short case studies will be utilised to facilitate your learning. Often you will work and learn together with others on these activities in 'learning groups', some of which will be uniprofessional (such as mental health nursing) and some interprofessional, where you will learn with others such as physiotherapists or dieticians.

Exploring the patient's experiences to help you learn

Some of the healthcare skills detailed throughout this book use scenarios involving actual patient experiences; we call this a client-focused approach, and, in this book, it is done from an interprofessional perspective. This means that you can explore the scenarios (where used) and the clinical skills required by all healthcare professionals (such as hand hygiene) within the context of either nursing or other healthcare professions. Therefore, whichever healthcare path you choose to follow, these skills will have direct relevance for you and you will be able to apply them in your own practice setting.

Because this book takes a student-centred learning approach, it *involves* you in the learning process at every step, rather than simply listing facts. It is characterised by:

- Active learning: you will be invited to explore issues and gain further insights through local practice observations.
- Studying individually and in groups: debating issues with colleagues enriches and diversifies your understanding.
- Working through activities and seeking out and responding to questions and dilemmas, many of which you are encouraged to pose for yourself.

The aim of this and the companion book is to help you to embark on the road to becoming a professional nurse or other healthcare practitioner. For this reason the questions and activities that will guide your learning frequently place you in the role of, for example, the qualified nurse rather than of a student or care assistant.

This book and its sister volume will introduce you to a new and refreshing approach to learning about healthcare theory and practice. It is the ability of the healthcare professional to seek out answers and provide the best possible care that separates the registered practitioner from non-professional colleagues. Nurses and other health professionals need to be constantly aware of practice developments, often brought about by research findings, so their knowledge is ever-evolving. Developing the skills to access current information is key to professional practice, and it is these skills of enquiry that we hope to promote through the chapters in this book. They will help you understand and deliver evidence-based care to your clients.

The delivery of clinical skills in practice settings is underpinned by Florence Nightingale's

constant rhetoric to her probationer nurses that they must ‘first do the patient no harm’. ‘Doing the patient no harm’ reflects the mission of the national healthcare professional regulators (such as the Nursing and Midwifery Council) who are committed to public protection. The editors and authors of this book have endeavoured to ensure that regulatory educational skills requirements for healthcare students are fully embodied within its pages.

Learning through enquiry

In taking a client-focused approach we want you to be able to visualise the bigger picture – that is, the full healthcare environment – before being tempted to examine each piece of the jigsaw. This, we believe, is fundamental to appreciating the holistic and integrative nature of contemporary healthcare practice, which crosses professional boundaries in order to provide the best possible patient care. This places learning in context; it gives you the opportunity to experience the excitement and challenge of professional practice from a position of safety, whilst also acknowledging the frustrations that some days can bring. This reality, together with your own experiences drawn from practice, will enable you to seek out and understand the background and detail behind each application of a clinical skill event. Additionally we have prepared through the companion web pages other resources such as sequential photographs to allow you to see skills and their delivery within the context of healthcare practice. The process of investigation is often called being ‘reflective’, and this can be shown in a ‘reflective cycle’. There are several examples of the reflective process, but the figure below shows an adaptation from Gibbs (1998).

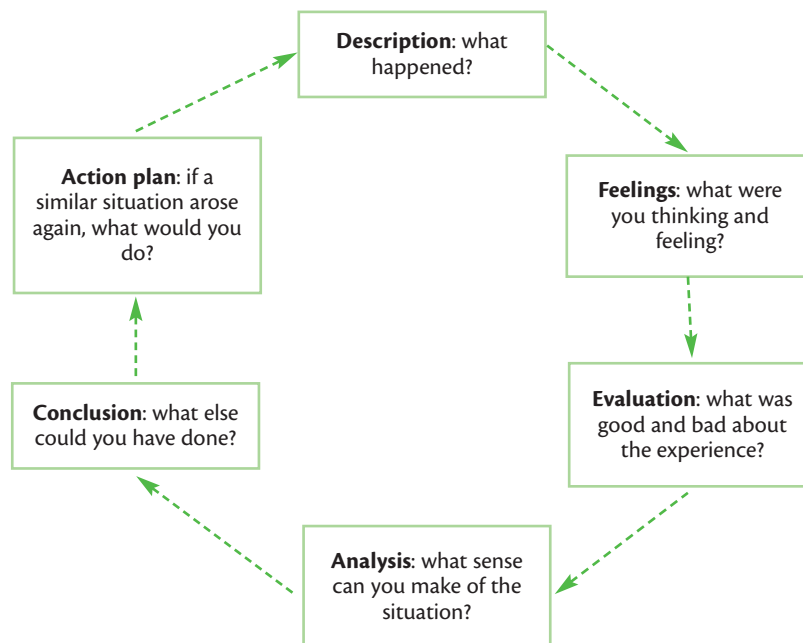


Figure 1.1 The reflective cycle

It would be helpful to keep these reflective stages in your mind as you explore and make sense of the different scenarios, and the complex world of healthcare which unfold in the chapters of this book. Being reflective means getting in touch and keeping in touch with the way you and others practice.

Student-centred learning is an umbrella term which incorporates the following approaches:

- enquiry-based learning (EBL)
- problem-based learning (PBL)
- case studying
- action learning.

So what are these approaches to learning?

The modern history of the SCL movement began at the medical school at McMaster University in Hamilton, Canada. EBL/PBL found favour there as it was perceived by teachers to be an ideal medium for exploring the real world of patient care, where students could learn how to 'solve problems' and think critically. It is, however, important to understand that the term 'problem' encompasses 'enquiry', or the asking of questions about a particular subject. The enquiry may or may not be directly related to a patient problem as such (for example the specific illness or disease), but rather the learning issues to be explored.

This is particularly pertinent in higher education, where the emphasis has moved away from direct teaching to a more holistic use of the term 'learning'. Hence strategies to enhance learning opportunities, such as the use of EBL/PBL, have been adopted by many disciplines, including nursing and the other health professions. Additionally, many traditional boundaries between the healthcare professions are becoming increasingly blurred in response to changes in healthcare delivery (Humphris and Masterson, 2000) and students are expected to work flexibly across these interprofessional boundaries. This changing workplace environment now requires an innovative approach to healthcare education that facilitates greater understanding of the roles of different members of the interdisciplinary healthcare team. SCL is an innovative learning method which is suited to interprofessional healthcare education, as it challenges students to identify the ideas and skills they will need to tackle the complexities of healthcare delivery (Duch, Groch and Allen, 2001).

All of the learning approaches mentioned here are enquiry based. Whichever approach your particular university or institution favours, all will invite you to explore and learn through practice. They will not give you all the answers, but don't worry – they are not intended to.

EBL shares similar principles to PBL and for the purposes of this book it is not necessary for you to be able to distinguish between the two. The case-studying approach uses the principles of EBL/PBL to explore real but anonymised patient case studies. Action learning takes place similarly in a learning group and is characterised by individuals learning with and from each other by analysing real issues from the world of healthcare. McGill and Brockbank (2004) believe that learning occurs when an individual or groups of individuals learn from reflection and that this reflective learning in turn facilitates new learning from effective action.

Some reasons for adopting a model of SCL

Since the publication of *Fitness for Practice* (UKCC, 1999) many pre-registration nursing curricula have embraced the principles of SCL as a method of educating students. SCL based on enquiry uses genuine, real-life client scenarios, which provide the students with an opportunity to explore a range of issues directly pertaining to client care in a variety of contemporary nursing settings (Long, Grandis and Glasper, 1999). Exploration follows a systematic approach to enquiry, reflection and evaluation (Long and Grandis, 2000).

Learning is often undertaken as a group, with individual students taking on specific responsibilities for researching and gathering evidence to bring back to the team. This contributes to the group's overall collective understanding of the issue or problem being explored.

In a recent Canadian study of second year nursing students, Morales-Mann and Kaitell (2001) demonstrated that the factors which most influenced the levels of learning within the group were positive attitudes and group effort. Rhem (1998) believes that the reason why this method is prevailing within higher education institutions is that it orientates students towards strategies of 'meaning making' over simple fact collecting.

In this way the product of the group is greater than the sum of the parts, resulting in higher levels of attainment in which prior learning is valued and built upon. Additionally, this type of cooperative learning brings with it enhanced social skills (Connolly and Seneque, 1999) which are highly valued in the healthcare professions.

Perhaps more importantly, the linking of clinical skills (prized by practitioners) and theoretical knowledge (prized by academics) through the medium of SCL (O'Neil, Morris and Baxter, 2000) may bridge the theory–practice gap which has bedevilled the profession for so long. Morales-Mann and Kaitell (2001) have described this type of learning strategy as liberating the academic from the traditional roles associated with teaching. This is good news for you and your lecturers as you will both enjoy the process!

Acknowledging some challenges

Not all students find the approach easy; indeed some prefer a more structured didactic approach whilst others thrive on the freedom to explore, share and learn in a way that they feel reflects the way in which they will practise as professionals. A study by Glasper (2001) looked at a UK cohort of 15 children's nurses on completion of their three-year pre-registration programme. Using a nominal group technique, he identified five areas which students liked most about SCL and five that they liked least. Students valued the friendships and support generated by working as a group, and believed that SCL enabled them to share experiences, exchange views and gain confidence. They saw SCL as having made the group work 'exceptionally well'. Conversely, students also voiced their frustrations about a lack of structure, having to rely on others to pull their weight and then being provided with poor quality feedback by their peers from what they had researched.

Groups are usually led by tutors but can be led by students. Steele, Medder and Turner (2000), in a comparison of student-led versus tutor-led group work, identified a preference for student facilitators. In this study of second-year medical students, peer facilitators were given slightly higher ratings than academics, but it was noted by the investigators that peer-facilitated groups often took shortcuts in the SCL process.

You will need to use your skills in reflection to assess your own views of SCL, and take steps to address any problems.

Getting the most from this book

Because this is a different kind of textbook from many others, it is not encyclopaedic. We have selected certain clinical skills which we believe you are most likely to need to acquire during the foundation component of your healthcare programme and which will help you to address each of the Nursing and Midwifery Council (NMC) and other regulatory body outcomes (for entry to a particular field of practice programme). This book provides you with the opportunity to identify what you need to learn and to equip yourself with the necessary clinical skills foundations on which to build your own professional practice. It will help you explore and experience new ways of learning and to seek out pathways, whilst pointing you towards those resources which will help you to make sense of complex clinical issues. This is student-centred learning and we hope you enjoy the challenge. We think you will.

Getting started

In order to maximise and enjoy your learning and make the best use of your study time, read the next section carefully.

Each chapter in this skills book has expected learning outcomes; however, as an enquiring student, it is likely that you already have many questions about healthcare practice and how this relates to the practice of colleagues from other disciplines. When you start to read each chapter, you may identify with particular clinical or personal experiences which prompt you to question why you thought or reacted in a particular way, so make sure you note these. You may be exploring some topics for the first time with little or no previous experience, therefore not knowing what you do not know! For many students in healthcare this can initially raise some anxieties, but you are not alone! This is usual and part of the learning process.

There are prompts for learning in the form of questions and activities at regular points within each chapter. Some of these are best attempted before you read on as they will help you to identify how much you currently know, as well as the level and accuracy of existing knowledge. Sometimes, we do not appreciate what we have previously taken for granted until it is clearly brought to our attention – better in a book than in the clinical environment! The companion textbook to this volume, *Foundation Studies for Caring*, has been written to let you see the relationship between theory and practice, and by dipping into each you will begin to build up a picture of your world of healthcare. Additionally, the companion website allows you to further explore each chapter topic. The chapter writers have placed kite marked websites on each of the web-based presentations to allow you access to other types of learning material which you will find extremely helpful in your learning groups or action learning sets.

Your most important role as a healthcare student is to constantly question, to gain knowledge and to identify the evidence base that underpins accepted professional practice. Sometimes, you might discover that care might be based more on 'custom and practice' than evidence, and that there is a need to seek out the most informed sources rather than following tradition.

This book helps you to identify the areas of knowledge underpinning clinical skills that you may need to explore and the kinds of questions that you might choose to ask. Developing the confidence to ask questions is a very important part of being a healthcare professional who needs to be able to seek out information from patients and their relatives, often about sensitive or potentially embarrassing topics. All healthcare professionals need also to possess assertiveness and interpersonal skills so as to be able to appropriately question and sometimes challenge colleagues, whether they are from the same or other disciplines. Clearly, effective communication is immensely important both now as a student and in your future career.

Deciding what to focus on

It is also acknowledged that knowledge is constantly changing. This can be a troublesome idea when starting a new career with a vast amount to learn. However, once the overall picture is grasped and the foundations are laid, more complex issues can be tackled. This comes through reading and accessing other resources, and also from being an active observer and participant in clinical practice. Soon you will feel more comfortable in questioning accepted practice. As a student you are privileged to experience a wide range of practice environments and you will observe that care might differ between practitioners. Questioning the rationale for those differences, rather than accepting that this is 'just the way that it is done', will add to your repertoire of knowledge and skill. The manner in which questions are asked is likely to influence the response you receive!

Key points you may like to consider:

- Is this the appropriate time?
- Is this person likely to have the correct information or appropriate experience?
- Do I need permission to ask this person?
- How do I phrase the question; for example, to avoid offence or to ensure the question elicits a relevant answer?

Throughout the book you will be invited to seek the opinions of friends, relatives, patients and others, finding out their views related to different health issues. Getting into the habit of seeking others' opinions will help to develop the skills you will need throughout your professional career. Working in healthcare is a lifelong learning experience, which requires you to remain open to others' views and opinions.

Most textbooks are studied in isolation. However, it is well established that learning with others can contribute very positively to the learning experience, not only in being more interesting and satisfying, but also in extending ideas. Spending time thinking about practice is useful, but it is likely to be yet more productive if you can engage with others. They may

identify aspects which you haven't thought about. Your views may be questioned and this may prompt you to think more laterally – to think the unthinkable!

As discussed, your university or college centre will normally provide you with opportunities for small-group learning in the form of a learning group or action-learning set and you may have additionally an interprofessional group in which you have membership. Perhaps you are also a member of an online learning group facilitated through one of the virtual learning platforms such as Blackboard or WebCT. You will certainly have access to email, and much of your collaborative learning will be facilitated through this medium. Each chapter also presents a set of concepts. This list is not definitive. Again, as you approach the topic area in each chapter, you may have your own concepts to add to the list. When reviewing the concepts embodied within the chapters, view them as broadly as possible as this will enhance your understanding. For example, the concept of 'care' will be viewed differently depending on whether you are a patient, client, husband/wife, child, parent, friend, nurse, manager, doctor, physiotherapist, chaplain, undertaker or employer. Accessing the literature will also broaden and deepen your current understanding of each concept. Continually reflect on your personal experience, your current understanding and how new knowledge can change practice. It is through this process that improvements in practice are made.

Practising in a changing world of healthcare

The ways in which new healthcare practitioners are prepared for their unique role within health services has changed radically over the last few years. Different health professions now often learn together. There is now more flexible access as well as opportunities to 'step on' and 'step off' courses, as your individual learning needs dictate. This book hopes to introduce you to a way of learning that reflects and complements the diversity of this approach. Whether you embark on your studies in a college of further education or at university, we intend this book to act as an effective resource as you begin a career in healthcare.

Although the fundamental principles upon which healthcare is founded remain unaltered, the ways in which professionals practise, the roles they occupy with others and the public's expectation are constantly changing. In this century more than ever before, healthcare practitioners will have to adapt their practice to meet the needs of the increasing number of people who are living longer, well into old age. Nurses among others must find ways of providing the best care possible, yet be constrained by tighter costs and account for their every action.

Whilst research and new technologies will enable more and more dreams to be realised, lives to be saved and health to be optimised, some of the longer-established treatments will, as now, be found wanting. We have already entered the arena of the 'super bug'. There are new challenges; old diseases over which we previously had control are increasing again (for example tuberculosis), and the full impact on health from environmental change is yet to be realised. Smoking has increased dramatically amongst young women and we are yet to see the full impact of the rising tide of obesity in children and adults. The expectations and demands of modern living are leading to increased levels of stress, mental illness and suicide in all age groups. Conversely, many people who develop cancer are living much longer after treatment than they previously did and there is improved use of transplants and organ donation. No wonder public expectation constantly rises as the media proclaims that more and more is possible!

Aside from all this, new ways of caring for people within the community aim to more effectively support independence. This brings with it the challenge of taking acceptable risks when public protection must always be paramount. Healthcare professionals have to be able to make such difficult decisions daily. When things go wrong, more people than ever before will know their rights and will have the confidence to seek redress but, because the gap between wealth and poverty continues to widen, the professional's role in safeguarding the interests of the more vulnerable becomes ever more important.

As the boundaries of practice change, nurses and others will choose to extend their skills into new areas. Some will overlap with the skills of other professionals, and yet all will continue to use those skills which the public recognise and know as 'nursing', 'occupational therapy', 'physiotherapy' and so on. It is this mix of essential skills, knowledge and attitudes that is woven into the fabric of the healthcare professional and which is central to lifelong professional practice. It is these fundamental principles which will be introduced during the initial period of this book, and the way you understand them will influence the way you will practise in the future.

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