

Students' experiences of initial clinical placements:

Nursing and Audiology – findings
from Southampton – Stuart Ekberg

Research questions (Southampton)

1. How do healthcare students experience the transition from classroom-based learning into the clinical work place context?
2. How is the workplace changing and what is the impact of these changes on workplace learning opportunities?
3. What strategies do students employ to cope with the transition? How do these differ between student groups (both inter- and intra cohort)?
4. What approaches and strategies are particularly common to thriving / struggling students?

How did we find out?

- From students on their first placement:
 - Interviews
 - Focus group (with nursing students)
 - Self-report diaries
 - Survey
- From staff (supervisors, mentors, etc):
 - Interviews

Students' representations of learning

- Working alongside practitioners provides a range of potential learning experiences
- Characteristics of individual practitioners and teams of practitioners shapes learning opportunities
- Practices of learning:
 - By observing
 - Under supervision
 - Through independent practice
- Accessing learning
- *Not* learning on placement

Practices of learning: From observation to independent practice

Amy (audiology): We started off just purely watching and making notes. And then we started helping out with individual parts of the appointment. And then we started doing more of the appointments on our own, if there was anything we came across we'd sort of look frantically at the supervisor who was sat in the corner, and they would usually step in and help us out. And then eventually we were doing it on our own.

Learning by observing

Christina (nursing): ...I'd watch and learn, sort of thing. And it was quite funny, 'cos I watched one of the scrub nurses laying out her trolley, and then she was talking me through it, and then when I came to do it with my mentor, she was saying, "Can you find this?" and I could find everything. And she was going, "When did you learn this?" And I was just like, "Oh you know." ...

Stuart: And was that just from watching her doing it?

Christina: And talking, she sort of talked through it yeah, yeah.

When observation is optimal

Erin (audiology): So balance patients, it's good to observe them, if we do some of the appointments that's good. But I think that the university are aware that it very much depends what centre you go to, because it depends how much balance they do...I do mostly observing, purely because I'm just not in the sessions enough to be able to lead an appointment.

Learning under supervision

Angela (nursing): ...their general policy, was, “Right, I’m going to show you how to do an enema and then you can do them next time,” which was what I did, and whatnot. And, you know, you get supervised just to make sure you’re doing it right and correctly and professionally as well.

Megan (nursing): ...on my first day like one of the nurses were like, “Oh this patient needs a cannula taken out, do you want to do it?” And like she didn’t show me, she was like, “No I’m just going to talk you through.” So it was like you were literally just learning as you were doing it...after like two or three weeks that was just OK on my own.

Learning through independent practice

Stuart: Are there advantages to sometimes not having someone else in the room?

Amy (audiology): Yes, yes there are. You don't sort of feel so – like well you don't feel that someone is watching your every move...And sometimes you say something, and you realise you've said it, and you don't need someone else pointing it out to you, you can take that and you think, "Right, I won't say that next time, I'll say it this way."

Accessing learning: Staff-facilitated

Amber (nursing): If there was something going on, I was with someone, and there was something more interesting going on with someone else in the afternoon, they'd be like...“Oh have you seen this? Have you taken the staples out of someone's knee?” Like, “No.” “Go and do that.” So they were pushing the opportunities towards you, so that was really good...And also, when you're out with different people, you get to see how different people work as well.

Accessing learning

Lisa (nursing): ...my mentor...she'd know what I was capable of and what I wasn't, whether I was, you know, really untrustworthy or a capable student. And then so that's when she started showing me like the IV stuff and the drugs and that. But if I was – if she wasn't there and I was just put with anyone, that was like – that was when you had really rubbish days, because they don't know you.

Supervisor -supported stages of learning

Supervisor(s)

Student

Identifying opportunities

Articulating clinical reasoning



‘Spare Part’

Learning by observation



Learning under supervision



Learning through independent practice

The 'spare part' experience

Christina (nursing): ...when I was in the anaesthetic room...I was just put on the monitoring and there's not a lot else I felt I could do, and I'd just sort of feel a bit of a spare part watching all the time...when I was in theatre, there's like healthcare assistants who go and fetch things...and sometimes they'd ask me to go and get something and I wouldn't know where it was or what it was...

Summary

- Students do not describe being passive learners
- They articulate a desire to take charge of their learning, and to become as independent in this as possible
- They report benefits of key signposting from the professionals that supervise them:
 - Identifying learning opportunities
 - Articulating clinical reasoning
- This is especially pertinent for first/early placements

What did we learn about medical education?

Findings from Southampton – Faith Hill

How did we find out?

- Student interviews
- Focus groups
- Self-reported data
- Survey with a 45% response rate (n=123)
- Interviews with clinical teachers

Key areas

- Importance of preparation for clinical placement
- The place of structure and guidance on placement
- Transition to independent learning
- Feeling part of the team and the clinical environment
- Learning from clinicians - teachers, role-models & mentors
- Working with and learning from patients
- Working and learning together
- Emotional and personal responses

Role models and mentors



What doctors actually do...

And having that knowledge to help someone is just, you know, I think it's amazing. And I just can't wait to do that. And I never got to see that in the first and second year, like hands on. I knew what it was about, I knew why I wanted to do it, but having fully appreciated now what they actually do, um it's amazing.

Junior doctors

And that's why talking to F1 doctors is quite good, because they haven't got like a doctor that's been around for so long that he just does his own thing, you've got a doctor that still kind of does what you've taught in medical school. So it's kind of like, "Oh this is what I need to be like."

Multidisciplinary teams

Well what really happens on placement is you do see how teams work and you do see individual characters, so you see doctors as people, and you see the nurses interacting with each other... And you go into multidisciplinary meetings and you see them all talking to each other...

Making mistakes

In some ways we've probably – you're more comfortable about the fact that doctors do make mistakes and doctors aren't – don't know everything. So you see that on a day to day basis, and that's quite comforting.

Not how they have been taught...

And how do doctors actually approach to talk to the family and stuff... It's very different compared to how they tell you in lectures, you know, this is the way you are supposed to talk. But when you are actually there it's – it's – it's not a really nice feeling. And apparently like this happens every – people die often.

Not such good role models?

Little things like, yeah, not drawing the curtains round, just little things, you know, not introducing the people that are with, and you've got like six people there, waking a patient up with six of us, and telling us all to come in and draw the curtains round when they're asleep, and this poor woman wakes up to all these heads. And I wanted – I did, I said it under my breath, I said, "I absolutely hate that." I would have hit him.

Mentoring

And she [the consultant] was really nice about it [dealing with bad news] and, you know, she just gave me that time off, and it was really good of her, and she just talked me through it, and it was really nice of her. I mean I'm a lot better equipped to deal with it now.

All it takes...?

...I got to my last week in paediatrics and I was like, “I really haven’t grasped this,” so I emailed her [clinical skills tutor]. And ... she was like, “Well I’ve got half an hour, I’ll take you on the ward and we’ll go and do an assessment”. And it was just having that someone there who was willing to take me on the ward and examine a child and be like, “You can do it, it’s absolutely fine.” That’s all it took.

Not such good mentors?

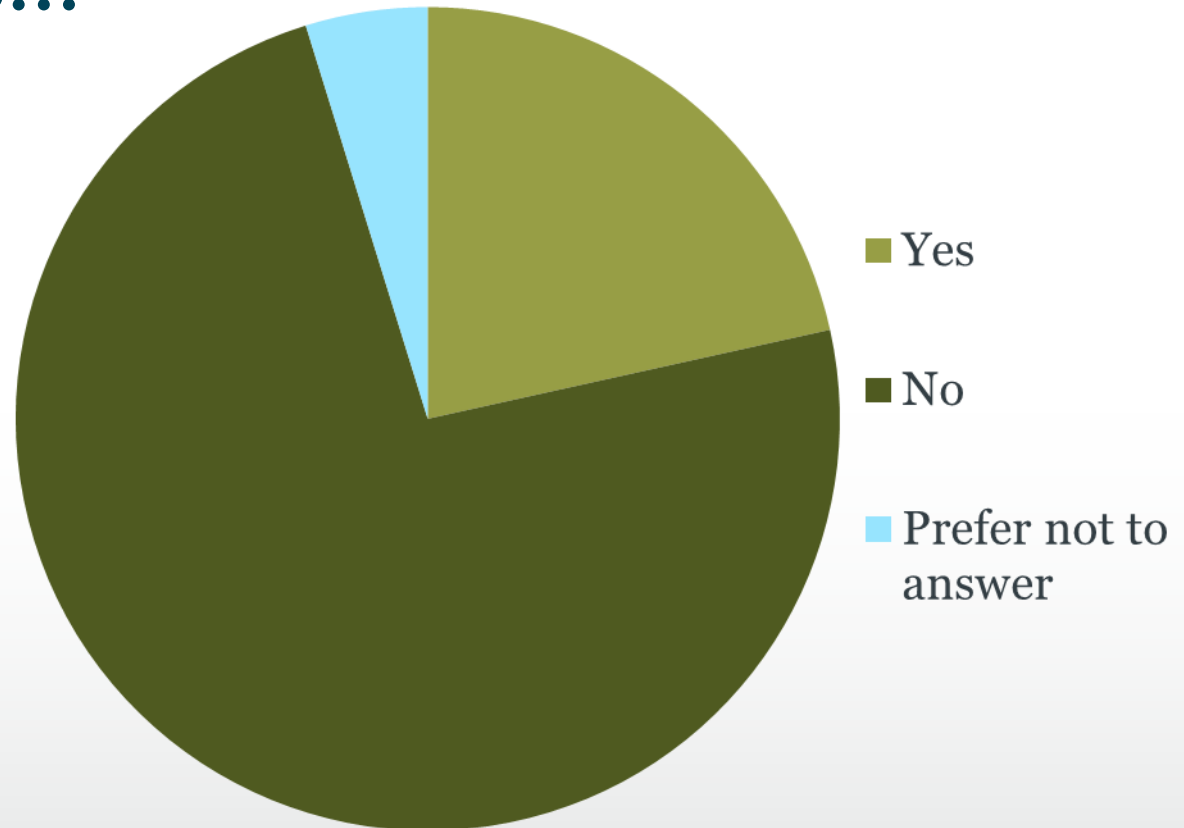
And then I went back to the doctor and he was like, “OK there’s the notes, write them up.” And I was like, “I don’t know what to do. I don’t know, what do I – do I put this bit in this section?” And I was just like – and so by this point I was actually physically shaking.

Forgetting what it's like...

...what I find difficult is um consultants; they're difficult people – not all of them. ...But in general the difficulties are the consultants who seem to forget that they were once medical students. And that sounds quite stereotypical, but actually it is quite true. Quite a few do just seem to have forgotten.

Survey findings...

Thinking about all your placements, have you witnessed or experienced any incidents of bullying or harassment either towards yourself or other people?



79% = No; 18% = Yes;
3% = prefer not to answer

Who students talk to when challenges arose during placements

	Medicine
Fellow student	85%
Friend/family member	44%
Clinical supervisor / mentor	26%
Recently qualified member of own profession	23%
Personal tutor at the University	15%
Senior member of own profession	13%
Did not experience any challenges	10%
Staff member from another profession	3%
Personal counsellor	2%

What the clinical teachers say...

I'm absolutely certain that they find me unbelievably intimidating, even though I try not to be.

I think relationships with people are really important. The people that I've learnt the most from are the people that were interested in me as a person, and were good role models for me.

Thank you!

And now...

Refreshments

&

Workshops

