Co-Creative Partnership for Practice: An Application of Dedicated Education Units (DEU)

Mary-Anne Spence: Waikato District Health Board
Glennis Birks: Waikato Institute of Technology
Angela Stewart: Waikato Institute of Technology
Belinda Macfie: Waikato District Health Board
Morag MacKenzie: Waikato Institute of Technology
This presentation identifies how utilising Dedicated Education Units (DEUs) as a situated learning approach within clinical teaching enhances both student and clinical practice experiences.
Background

• Learning in authentic clinical practice environments is an integral component of undergraduate nursing programmes at the Waikato Institute of Technology (Wintec).

• Moving from a preceptorship model of individualised one-on-one support to a focus that includes the social components of the placement where student nurses learn through engaging; formally, informally and socially, and by communicating regularly and meaningfully, with tutors, interdisciplinary team members, managers and peers.
Strategic Aims

• Build workforce capability, readiness and capacity
• Advocate for high quality best practice in nursing through judicious use of evidence, research and practice development
Best of both worlds

The partnership brings the best of the academic theoretical application of learning into the reality of the practice environment.
Dedicated Education Units

- A DEU facilitates learning by situating students within a community of practice.
- Membership of a community of practice enables learning within authentic real world contexts to occur and this is believed to be essential for meaningful and relevant learning.
- The DEU learning environment also provides students with increased opportunities to perform tasks, learn safe practice and collaborate with interprofessional teams as a part of this community of practice.
Evaluating how we went....

- The Clinical Learning, Environment, Supervision, and Nurse Teacher (CLES+T) instrument was used to evaluate the effectiveness of the clinical learning environment.
- Recent studies in New Zealand maintain that the CLES+T scale provides a reliable and valid tool to evaluate the quality of clinical learning environments, including those created by a DEU (Watson et al., 2012).
The Clinical Learning, Environment, Supervision, and Nurse Teacher (CLES+T) instrument

This tool investigates
• the supervisor relationship,
• pedagogical atmosphere,
• role of nurse teacher,
• leadership of manager,
• premises of nursing.
CLES+T Findings

• The scores for each scale had high means of 4.45 – 4.93.

• Respondents were very positive regarding their clinical experience, felt well supported by staff and nurse teachers, they found the environment supportive and felt that their learning needs were the focus of their experience.
The effect of DEUs on the service

• First came socialising the notion and engagement in decision-making. Important step towards ownership.
• Every ward wanted this. Staff involved in every step since
• Learning/teaching environment has become the new normal. Staff understand different learning needs
• Debunks myths as staff see awesome potential of students
• Nurses have been re-inspired about their nursing practice through coaching/precepting
• Staff articulate practice more
What does it mean for Patients?

• Evidence of better patient outcomes
  – Less falls
  – Shorter time to respond to call bells
  – Call bells ring less often as needs anticipated / negotiated
  – Attendance/attention

• Team effort to meet all needs
• Increased patient satisfaction
• High number of compliments about students
What does it mean for staff

• “This model is what’s best for patients”
• “(The DEU model has)...become the driver of best practice and high quality communication”
• “Part of the foundation of who we are now”
• “The team feels incomplete without students now”
• “When are the students back, we miss them”
• “The DEU encourages transparency of practice and excellent teamwork. Everything we do is role-modelling so we have to get it right. It raises everyone’s standards of practice”
Staff stories

• Nursing – active and enthusiastic involvement with the students
• Cleaner/housekeeper – IFC specialist and observer
• Health Care Assistants – care and advocacy
• Allied health team – clinical support, training and hands-on advice
• Medical Staff – feedback and invitations and encouragement to voice student perspective of patient care
• Wider IDT – encouragement of students to articulate and participate in patient care and discussions
Student stories

• “The staff were amazing and really seemed happy to have me there as a student...”

• “I felt like I was one of them and had something important to contribute...”

• “This was my final placement in the BN and I received an email welcoming me, my rosters in advance and then we had a powhiri...”

• “This was my very first proper clinical placement and I was terrified.... My tutor talked me through it and by the end I could even discuss it with the discharge team...”
Future Directions

• Explore opportunities to facilitate student learning across a range of clinical specialities and health care professional groups using a DEU model

• Discuss possibilities for collaborative on-site interprofessional simulation to enhance student learning.