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# Assessment of BSN Student Attitudes Toward Patient Education & Three Patient Education Scenarios

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## Background

For healthcare providers, their educational training is organized from the perspective of illness rather than health (Spector, 2017). In 1993, the Joint Commission on Accreditation of Healthcare (JCAHO, 2001) instituted patient education (PE) standards. According to Bastable (2014), successful patient outcomes are associated with PE. Even though PE has been an integral part of nursing practice, most Registered Nurses (RN) report not having formal preparation to be a successful educator.

Bastable (2017) writes the RN present-day PE role requires competence in teaching and learning principles. Donner, Levonian, and Slutsky (2005) found many RN educational programs for the most part do not include teaching and learning principles. Musinski (1999) proposes the RN as facilitator of learning rather than using the didactic model. With the trend emphasizing the inclusion of teaching and learning principles and the facilitative model, we suggest undergraduate BSN programs include assessment of nursing student PE attitudes.

## Methods

### Study 1.

The purpose of the first educational intervention was to create the Patient Education Questionnaire (PEQ) designed to measure patient education difficulty, patient education satisfaction, and patient education apathy-boredom. Participants (N=316) were BSN accelerated, and traditional senior and junior level nursing students.

- Hypothesis 1: Exploratory principal axis factor analysis (EPAFA) would determine if patient education difficulty, patient education satisfaction, and patient education apathy-boredom were underlying common factors of patient education.
- Hypothesis 2: PEQ common factors would have acceptable coefficient alpha estimates.

## Methods (Cont'd)

### Study 2.

The purpose was to design three PE scenarios for a hypothetical patient. Scenario 1. Five RNs established a professional industry standard PE nurse-patient interaction. Scenario 2. Nurse-patient was an unprofessional PE nurse-patient interaction. Scenario 3. Nurse-patient Interaction included the first scenario as well as communication about changing long-term habits contributing to health problem (including a chart organizing healthcare recommendations). A semantic differential questionnaire (i.e., 14 adjective comparisons) was used to evaluate three scenarios. Participants (N=138) were BSN traditional students (i.e., 71 first year, first semester; 67 third year, first semester).

- Hypothesis 1: There would be a difference between scenarios 1 and 3.
- Hypothesis 2: Scenario 2 (i.e., control option) would be perceived as a statistically significant unfavorable option in comparison to scenarios 1 and 3.
- Hypothesis 3: First and third year student ratings of scenarios 1 and 3 would be a different statistically.

## Findings

### Study 1.

Using SPSS 25, the EPAFA (N=316) with an oblimin rotation and the scree test suggested three factors. The scree test indicated three factors (eigenvalues: 12.875, 3.377, and 2.465) accounting for 48% of the variance. The three factors were patient education difficulty, patient education satisfaction, and patient education apathy-boredom, respectively. Coefficient alpha reliability estimates were .885 (PED), .916 (PES), and .894 (PEAB).

### Study 2.

Using SPSS 25, the dependent *t*-test was used to evaluate the 138 participants responses to the three scenarios. The 14 semantic differential adjective comparisons were evaluated individually. With 137 df, the obtained values for the 14 adjective ratings comparing scenarios 1 and 3 ranged from 11.96 to 23.67; therefore, a significant difference ( $p=.001$ ) was found favoring the third scenario.

## Findings (Cont'd)

Data analysis found scenario 2 was significantly rated the least favorable option ( $p=.001$ ). Dependent *t*-test comparisons (per adjectives) found no significant differences based on the participants first or third year levels of educational experience.

## Conclusions

The findings for the two studies suggest the PEQ common factors (i.e., patient education difficulty, patient education satisfaction, and patient education apathy-boredom) have acceptable psychometric properties which can be used to evaluate nursing students perception of patient education scenarios. Preference for scenario 3 may create cognitive dissonance for nursing students as they are faced with the time available for patient education.

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