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The Art of Clinical Supervision Program for Registered Nurses

Its implementation and influence on nursing staffs' knowledge and attitudes

Kylie Russell 20103191

A thesis submitted in fulfilment of the requirements for the degree of Doctor of Philosophy

School of Nursing and Midwifery

The University of Notre Dame, Australia

2013

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List of Abbreviations

ABS Australian Bureau of Statistics

AHPRA Australian Health Practitioner Regulation Agency

AKKA Aghamohammadi-Kalkhoran et al.

ANMC Australian Nursing and Midwifery Council

CINAHL Cumulative Index to Nursing and Allied Health Literature

COAG Council of Australian Governments

CPAT Clinical Placement Assessment Tool

CSP Clinical Supervision Program

CSSP Clinical Supervisor Support Program

CSSPDP Clinical Supervisor Support Program Discussion Paper

DEST Department of Education, Science and Training

DNCSCF Draft National Clinical Supervision Competency Framework

DoH Department of Health

FHHS Fremantle Hospital and Health Service

HREC Human Research Ethics Committee

HWA Health Workforce Australia

HWS Health Workforce Series

IP immediate post-program survey

JDF Job Description Format

MET Medical Emergency Team

NCSSF National Clinical Supervision Support Framework

ND Notre Dame

NHMRC National Health and Medical Research Council

NMBA Nursing and Midwifery Board of Australia

NMC Nursing and Midwifery Council

OT occupational therapist PCA patient care assistant

RCN Royal College of Nursing

RN registered nurse

SA strongly agree

SD strongly disagree

SDN staff development nurse

SOM sign-off mentor

SPSS Statistical Package for Social Sciences

SWOT Strength, Weaknesses, Opportunities, Threats

TAFE Technical and Further Education

TEQSA Tertiary Education Quality and Standards Agency

UK United Kingdom

VET vocational education and training

Abstract

Nursing students' clinical placements should provide an environment in which they can apply their nursing education in the fast-paced world of health care and develop a framework for practice. Students rely on effective teaching and supportive clinical supervisors to provide a placement in which they are not only encouraged to practice, but also to learn from this practice. This is achieved through welcoming students into the health care team by valuing their input and contributions, and consolidating their clinical practice through activities such as critical thinking and reflection.

The role of the clinical supervisor is therefore complex and often constrained by time because of the need to prioritise patient care. The role is also distant to that of providing clinical care; therefore, staff require specific education and guidance to understand and implement the role's requirements.

This research aimed to develop, implement and evaluate a new education program for nursing staff. This process was guided by the current literature in relation to the role of the clinical supervisor, the theories and principles of adult learning, and the theories of attitude and attitude change.

The effect of the program was determined using a descriptive methodology involving the collection and analysis of quantitative and qualitative data using a triangulation approach. This involved the use of pre- and post-program attendance (on the day and after eight weeks) knowledge and attitude surveys, online reflective statements for up to eight weeks after attending the program, and individual interviews.

Analysis of the data determined that participants improved both their knowledge and attitude towards students and clinical supervision. Participants viewed the program as a positive strategy for improving their attitude towards students and student clinical supervision, while also being supported with realistic strategies for promoting a welcoming environment conducive to student learning. Participants also articulated their concerns related to perceived organisational barriers to providing effective clinical supervision.

There are multiple implications of this research. The Clinical Supervision Program (CSP) for Registered Nurses is confirmed as a strategy for providing effective education for nurses involved in the role of clinical supervision. The study also articulates the importance of health care facilities and education providers in ensuring ongoing support and recognition of the role, as well as facilitating a workplace that is supportive of student placements.

Statement of Candidate Contribution

Declaration of Authorship

This thesis	is the	candidate	's own	work	k and	contains	no	material	that	has	been	accepted	l for
the award	of any	degree or	diplon	na in a	any c	other insti	tuti	ion.					

To the best of the candidate's knowledge, the thesis contains no material previously published or written by another person, except where due reference is made in the text of the thesis.

Kylie Patricia Russell	25.11.2013

In memory of Drew

Thank you for believing in me, guiding me and for always loving me.

'They shall grow not old, as we that are left grow old; Age shall not weary them, nor the years condemn. At the going down of the sun and in the morning We will remember them' (Laurence Binyon, 1914)

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There are so many people I would like to thank who have supported me, but firstly I must mention the generous support of the Western Australian Nurses Memorial Charitable Trust for their financial assistance towards this research.

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To all of my nursing colleagues, you have all, at some time in some way, shaped the nurse that I am today. We have created bonds through shared laughter, tears, successes and losses. These memories remind me of how nurses can change and affect people's lives. And also to all of the research participants, without you, this journey would simply have not been possible.

For Ann, not only do we share our passion for nursing and education, but we have been there for each other in times of personal heartache. You have and always will be my mentor.

To my mum and dad, who are always there for me, you remind me of who I am and who I want to be. To my beautiful daughter Leisa, without you, the world would simply have no meaning. You are my light, and I feel blessed to share each day with you. For Malcolm, who stands by my side, loving me despite my faults, you have helped when no one else could.

Prologue

As an educator, I have been involved with the facilitation of preceptorship and clinical supervision training for over 12 years. As a young educator who had recently completed my Masters in Health Science (Education), I presented many of the sessions included in this Clinical Supervision Program (CSP), albeit in a very different manner to my current teaching style. My sessions were individual sessions, heavy in theory, PowerPoint-orientated, and with little, if any, practical application of the material or connection to other topics and sessions of the day. Each time I presented, I received positive feedback from my participants, but I could not help but wonder how their understanding of concepts and theories—such as Kolb's Learning Model and the principles of pedagogy—really helped them when they had a graduate or student nurse to supervise. I began to question others about their study days and was surprised to find that many hospitals did not provide any education about supervising students; instead, their programs focused on supporting graduates and newly employed nurses.

At the same time that I began this journey of reflection, I transferred into the Undergraduate Coordinator role with a well-respected colleague who was passionate about students and also concerned by the deficits in nursing staff knowledge regarding student clinical supervision. In the previous year, she had been asked by the nursing executive to increase the student numbers within the hospital, and she asked if I would work with her to achieve this goal. We agreed that implementing this increase would require providing intensive support to the ward managers, staff and students. Thus, I began to rethink my approach to preceptorship education, and we rewrote the program offered to nurses at the time. Our new program focused on a team approach, with practical ideas, less theory and the implementation of ideas such as the Team Leader Model and Student Liaison Nurses to facilitate student population growth. Within two years, we had doubled the student intake, with a philosophy that there would be a student for every staff member. With this change in teaching clinical supervision, maintaining a visible presence on the ward to support staff and students, and providing ward areas with strategies to manage the increase in student numbers, we noticed that the most influential factor for staff to accept this increase in student numbers, and for students to have a positive experience, was based on attitude. If the staff had a positive attitude towards the students and their placement, they accepted more students and the students had a better placement. We confirmed these findings in our research project, 'The Team Leader Model: An Alternative to Preceptorship'.

After leaving the role and commencing as the Clinical Coordinator at the University of Notre Dame Australia School of Nursing and Midwifery, I soon realised the differences in health care sites in relation to the acceptance of student placements and the attitude towards students and student learning.

I wondered if we could develop the same culture created at one hospital across all health care sites to assist with reducing the shortfall of student placements and improve the learning experiences of students. The outcome of this was the development of the CSP, which encompassed my 12 years of experience in facilitating preceptorship study days and managing undergraduate and graduate placements. Now the time has come to implement the program and determine whether years of supporting a change in attitude in one hospital can be similarly sparked by participants attending just one day.