



NURSE EDUCATORS' AND MANAGERS' PERCEPTIONS ON COLLABORATION IN IMPLEMENTING PBL IN NURSING EDUCATION IN RSA

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- **IMRD approach.**
- Introduction
- Methodology
- Results
- Discussions/ Guidelines .

INTRODUCTION

- High disease profiles
- Overcrowding
- Workforce Shortages
- Medical & technology Advances
- Moral Distress
- Conflicts Among Teams
- Quality & Safety Issues



NB : SOBERING FACTS ABOUT HEALTH

Mandate to HEI's



- Adopt TL modalities to develop the following competencies : SAQA CCFO's)
 1. Critically and laterally think,
 2. Make effective decisions
 3. Analyse and solve complex real world problems;
 4. Find, evaluate and use appropriate learning resources and evidence for best clinical practices;
 5. Work cooperatively in teams and small groups;
 6. Communicate effectively verbally & in writing
 7. Become life-long learners

PBL

- PBL **provides an environment for promoting these skills** (Duch et al 1999; Rideout et al 2002; Tompkins 2001)
- PBL can be an innovative pedagogy for **sustainability education** (Lehmann et al., 2008).
- There are interwoven relationships between **PBL, innovation, collaboration, interdisciplinarity**, and **sustainability** (Du, Su & Liu 2013)
- 2002 : Introduction of PBL by NWU
- 2008 : evaluation of PBL from students perspective(Strengthening & collaboration)
- 2008 EPE (External Programme Evaluation)

PROBLEM STATEMENT

Introduction of PBL 2002 (3rd & 4th Year)

- created some challenges across several levels in the department.

At the departmental level,

- lack of coordination for class teaching, clinical learning, mentoring, sharing of information, and
- lack of capacity as some educators were not trained in PBL.

At student level, an exploratory study (Rakhudu, 2008:68) **Strengthening of PBL**

- **Coordination and collaboration between academia and clinical practice**

PS...

EPE found in 2008 similar challenges & recommended:

1. PBL needs to be introduced at all levels of training:
2. Students, facilitators, nurse educators, nurse managers, preceptors and all staff members involved in the nursing education;
3. Collaboration with other centres offering PBL should be developed;
4. Improvement of clinical learning and
5. Attitudes of professional nurses towards the students.



Development
a collaboration
model for
effective
implementatio
n of PBL in
NE

1. Explore and describe the opinions NE, & NM, regarding collaboration in implementing PBL in nursing education;
2. Explore the emerging concepts derived from data analysis;
3. Develop a conceptual framework for model development;
4. Develop a collaborative model for effective implementation of PBL in nursing education.



- **Approach** : Mixed method
- **Design**: Exploratory sequential
- **Population and sampling** : 3/5 HEIs offering PBL in RSA;
3 x HC institutions in NWP for PBL students placement.

Sample: *Purposive and Convenient*

- Inclusion criteria
 - ✓ **Institutions** offering PBL nursing education in RSA (n=3).
 - ✓ **Nurse educators**: 2 years and above and registered with SANC as Nurse educators.
 - ✓ **Nurse managers** from clinical facilities in NW Province where PBL students are placed for PBL from clinical learning(n=3)



Qual-component	Quant-component	Integrated findings
<u>Individual interviews</u> n= 11 FGD n=33 N = 44	n = 96	N =140

Interviews and Characteristics of the Participants

Position	FGD	Individual Interviews
Nurse Educators	n=6 X 3 groups = 18	n=4
Nurse Managers	n= 8, and n=7 = 15	n=7
Total	33	11
n=44		
Females	28	10
Males.	5	1
Total.	33	11

PHD=9%; Master's Degree =25%;

Post Basic Dipl =44%: Bachelor's degree= 28%:

Themes

1. Need for various types of collaboration;
2. Benefits of collaboration
3. Factors for a successful collaboration in implementing PBL.

Need for collaboration

"Collaboration is long overdue..... Nurses in academia and clinical services need to work together" Ka setswana ngwana ke sejo o a tlhakanelwa. (Means Bringing up a child needs collaboration). We need to collaborate from planning of the PBL curriculum to the end.. I mean evaluation.(Manager 1)

*"As nurses we need to work together even in placement of students, we should not just receive placement lists without involvement
(Manager 2)*

*"In the clinical services, we have people who have specialized in different areas, e.g. theatre, orthopaedic, paediatric, trauma and critical care. These are people who can assist in development of scenario and can also be invited to the classes to teach on those specialized area"
Manager 3*

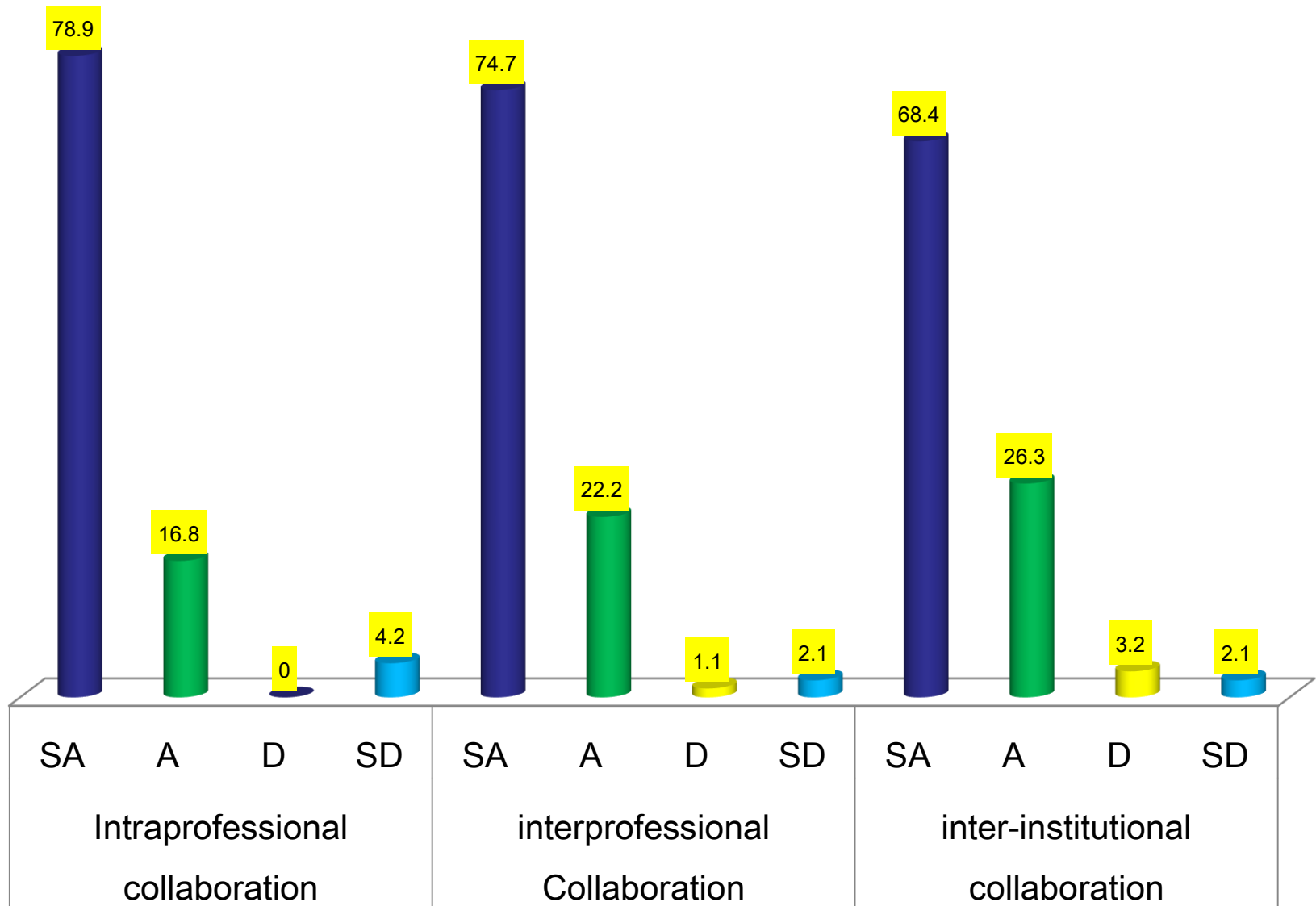
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Quotes from educators

- *We can do well if work together with clinical staff, their expertise in clinical skills and conditions in developing scenarios and triggers "(educator 1*
- *"I also believe that if those people in the clinical areas can be invited to collaborate in planning clinical learning and evaluation of PBL studentsit will be beneficial to our products. The students will greatly benefit from such a partnership. The nurse educators may also learn a lot from the clinical staff who have up to date information on health trends and expertise" (Educator 2)*
- *We need each other to stop the blaming game when students are not doing well, and the student blaming both of us . I mean the educators and clinical staff.*

quantitative component



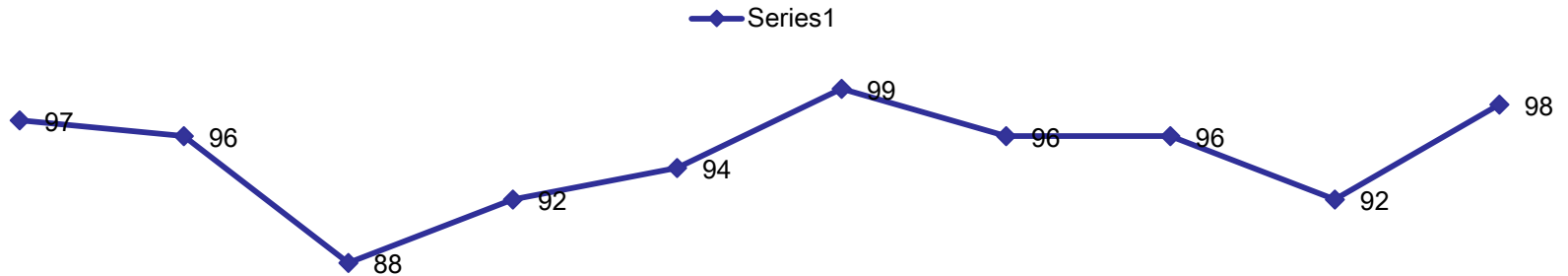
Benefits of collaboration.

- *Specialized nurses from different unit can be invited for scenario development, teaching in class and evaluation of students. In this way, the students will be benefiting from expertise of both clinical and teaching staff. (Educator)*
- *The students will greatly benefit from such a partnership. Students will also learn about collaboration as we would be role modelling collaboration to them. They will learn by imitation. It is professional socialization (Manager)*
- *I think as collaborators we will be able to share information and resources, both at individual and institutional level as well as team level. Institutions will share the limited resources and thus promoting effective utilization of the resources (Educator)*

Benefits

- *"This will benefit usin effective use of time resources, talents and expertise. I am saying this because at times we work in isolation as mental health and midwifery lecturers, as clinical managers and as educators*

Benefits of Collaboration



Information and expertise sharing Personal and professional... Mentoring from centres of excellence Staff Benefits	Professional socialization Obtaining the best from experience of... quality education students benefits	resource sharing effective utilization of resources Organizational benefits	quality care team approach health care users benefits
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Factors contributing success

Managerial commitment

- *.....our top management should know about this collaboration. If possible..... they should also be trained on PBL. They should inform about PBL so that they know and be able to support at operational level. I agree and acknowledge that they know that students are being placed in the wards for clinical learning.*
- *They should also avail time and transport for us to be there when planning and evaluations are done*
- ***COMMON GOAL***

Common goal in collaboration is very important in any collaboration. In this instance, our common goal will be training a nurse through PBL implementation. If we have shared mission, vision and goals, our collaboration will be in the right direction. We must see the same hill and move toward it. This, I mean we must have a common goal as collaborators.

Contract/agreement

- *I think there is to be an understanding between departments ehm...ehm... I don't know if you call that a MOU.... There has to be some agreements...eh...some understanding of what you expect from your counterparts... I think that is very important.*
-
- *Generally, for collaboration to be formalized..... It's basically for people to come together. Either coming together or engaging new issues of LSA, that is, level of service agreement....*

Communication

- *Communication is a very important tool in any partnership. There must be open and regular communication between the collaborators. It can be through regular meetings, written communication, for example through memos, e-mails. But schedule meetings with clear agendas will contribute to success.*

Factors....

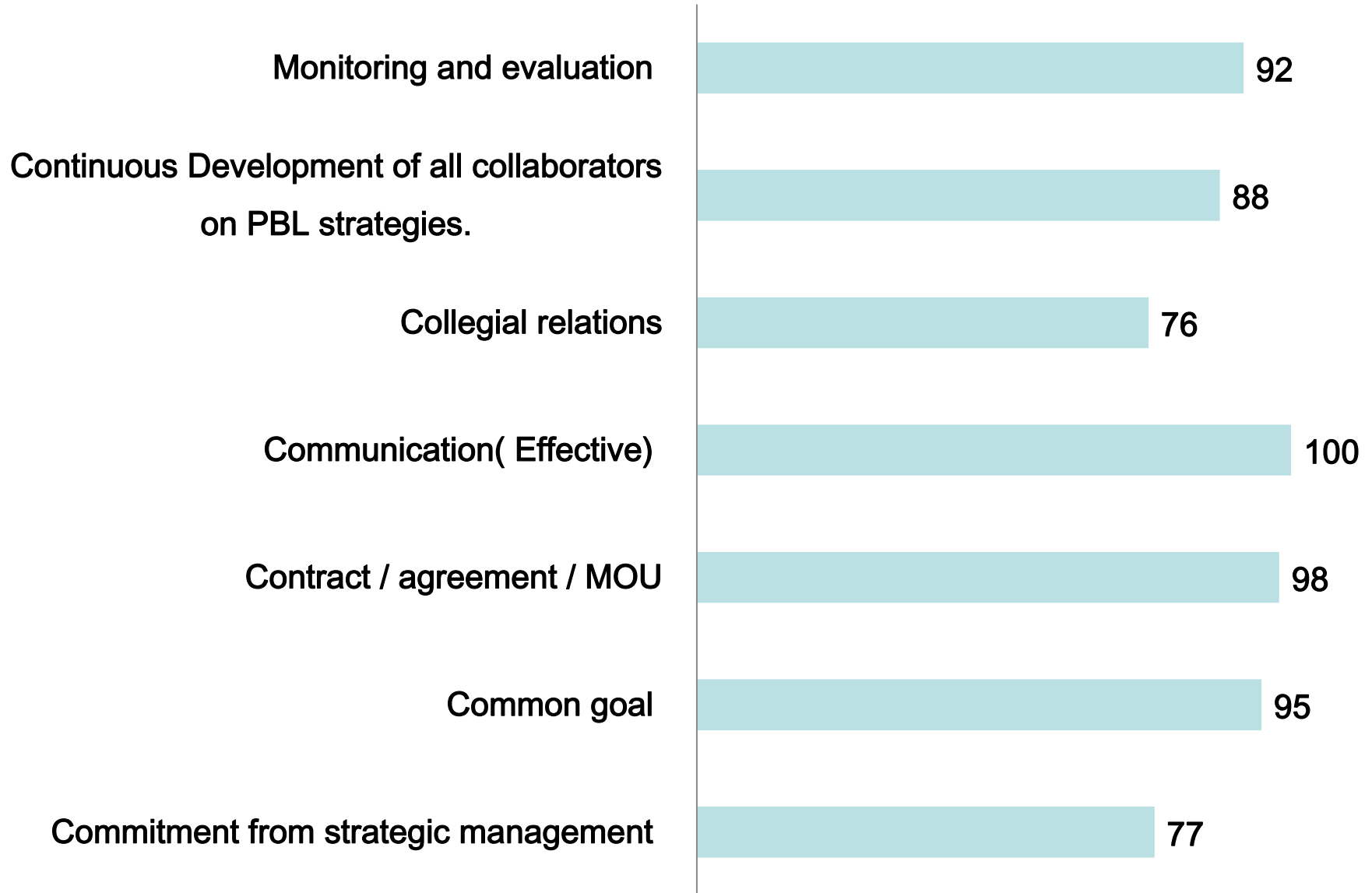
Continuous training in PBL

"We should all be trained on PBL. We should be informed about PBL so that they know and be able to offer support at operational level. Education and training on PBL will empower all collaborators to effectively implement PBL at both clinical and classroom setting"

Monitoring and evaluation

"Another critical aspect for a successful collaboration is a continuous monitoring and evaluation to assess the progress and success of the collaborative partnerships in implementing PBL. The collaboration can be assessed regularly by the collaborators including the recipient of collaboration, namely, the students, clients' satisfaction interview, and self-evaluation using partnership tool."

Factors contributing to successful collaboration



Conclusions

- Collaboration is **needed in all educational activities** including implementation of PBL
- **Commitment and support** (organization and individual levels)
- Commitment of time, energy and resources, and unequivocal support from institutional authorities
- Communication in **collaborative work underpins how people understand each other and how knowledge is transferred** (Patel et al 2012:9).
- Communication should **be frequent, balanced and multilevel**, and this can be telephonic, printed information, electronic, and face-to-face (Meunie- FitzHugh & Piercy 2010: 295).
- Respect for **each other's knowledge, skills and expertise** should be evident at all times (Hendrix et al., 2011:150).
- Clinical nursing education is core to nursing profession, and therefore **collaboration of academia and clinical services** must be upheld in implementing PBL.

Recommendations

Practice :

Accredited providers of practical component of PBL programme must be **educated and trained on PBL and collaboration** as this has a significant implication for collaborative practice

Much is **documented on collaboration**, but a great deal is not yet clearly understood and requires **more research**, such as:

1. Collaboration in implementing PBL at different levels of operations;
2. Cultural influences on collaboration;
3. Criteria to assess effectiveness of collaboration

Limitations of the Study

- Restriction of the study to nursing education of pre-registration programme, which implies limited generalizations.
- The sample of nurse managers and preceptors was confined to the NW-Province hospitals and clinics where PBL students are placed for clinical learning
- as compared to nurse educators from three South African universities offering PBL

Conclusion

- *Tau tsa hloha seboka, di fenywa ke nare e hlotsa . (If not collaborate in their hunts, pride of lions will be defeated by an ailing buffalo)*



- **Thank you All**

