# Nursing Students' understanding of the Fundamentals of Care: A cross-sectional study in five countries

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# Introduction

- The research group are all members of the ILC (International Learning Collaborative *Connected to Care*) http://intlearningcollab.org/

- ILC is a member-based organisation, set up in 2008 to bring together like-minded healthcare and nursing professionals, academics and leaders in order to transform the way we deliver care in high tech environments and to elevate the standard of fundamentals of care around the world.

# The Research Team

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# Fundamentals of Care



(Feo et al 2016a)
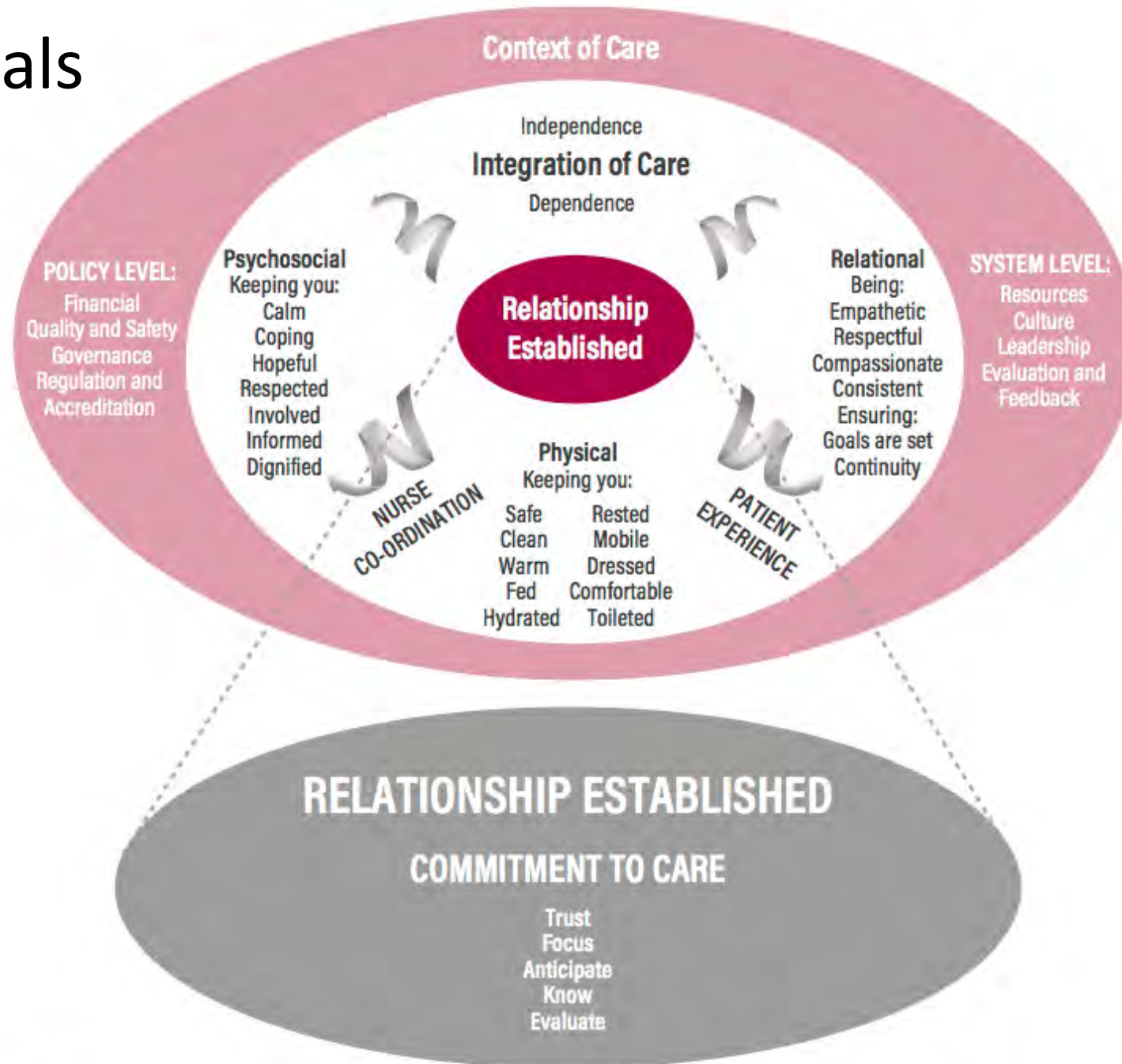
# Fundamentals of Care

- Challenge facing the nursing profession is ensuring that the fundamentals of nursing care are carried out in a timely manner, and with care and compassion. These fundamental care (FoC) needs – include ensuring appropriate nutrition, hydration, hygiene, sleep and dignity, among others.

- Identifying FoC is not straightforward. Kitson et al (2010) identified marked variation in the terms and language used to refer to the FoC. Also identified were substantial differences in the level of guidance for assessment and actions required following the description of a particular FoC.

- Without question, the FoC are an integral part of nursing education, at both pre and post registration level. MacMillian (2016) has highlighted how nursing students perceive the importance of fundamental care may be influenced by the nursing curriculum and the manner with which educators and practicing clinicians teach.

- Given the issues with care delivery and inconsistencies in descriptors used for the FoC that have been identified, it is important to assess the ability of nurses to perceive these needs across the nursing education spectrum.

# Research Questions

1. Which FoC are detected by participants when presented with different care scenarios?

2. How do participants' abilities in detecting FoC compare based on their level of study?

# Method and Data Collection

- A cross-sectional, descriptive study design was used in 5 universities in 5 different countries

- All nursing students (pre and post registration) were invited to participate and data included previous nursing experience, program of study, and year of study data was collected from all participants

- Survey involving 3 patient scenarios were developed by the research team and provided in English, Swedish and Japanese. The scenarios underwent a content validity process

- For each care scenario, participants were required to identify and indicate the FoC relevant to the scenario

- 3248 nursing student were invited to participate and 371 fully completed the survey. Data was collected between February and November 2016 either electronically or by classroom survey

# Results-Demographics

| Country | Canada | Australia | Sweden | Japan | UK |
|---|---|---|---|---|---|
| Number of Participants (%) | 30 (7.5%) | 67 (16.8%) | 118 (29.6%) | 147 (36.9%) | 36 (9.0%) |

| Programme | Bachelors 3-Year program / Master of Clinical Nursing Pre-Registration | Bachelors 4-Year program | Post-Graduate / Post-Registration | Masters Program | PhD Program |
|---|---|---|---|---|---|
| Number of Participants (%) | 118 (29.6 %) | 167 (42.0%) | 79 (19.8%) | 32 (8.0%) | 2(0.5%) |

| Previous Experience | No Experience | Care or Nurse Assistant | 1-3 yrs as a RN | 4-6 yrs as a RN | More than 6 yrs as RN |
|---|---|---|---|---|---|
| Number of Participants (%) | 237 (59.5%) | 29 (7.3%) | 30 (7.5%) | 39 (9.8%) | 63 (15.8%) |

# Scenario 1- Reza Results

Reza is an 85 year old Iranian man who was admitted to a busy Emergency Department 4 hours ago with abdominal pain for investigation. A family member accompanies him. He has been fasting since he arrived and he has not been to the toilet since he was admitted. He is now becoming restless and has been trying to get out of bed by climbing over the bedrails. He speaks Persian only.

Number of Participants Completed Scenario =398

| | | | |
|---|---|---|---|
| 1 | Safety, prevention and medication n=178 45% | 8 | Rest and sleep |
| 2 | Communication and education n=338 85% | 9 | Comfort (including pain management) n=269 68% |
| 3 | Respiration | 10 | Dignity n=20 5% |
| 4 | Eating and drinking | 11 | Privacy |
| 5 | Elimination n=266 67% | 12 | Respecting choice |
| 6 | Personal cleansing and dressing | 13 | Mobility |
| 7 | Temperature control | 14 | Expressing sexuality |

# Scenario 2- Katarina Results

Katarina is a 42 year old woman who suffered a stroke ten days ago. She has right-sided weakness and it is difficult for her to express her needs verbally (aphasia). Due to her weakness, she requires two people to assist with standing and can do a step transfer from bed to chair. She is able to eat and drink safely, but is embarrassed by her facial weakness which is causing her to dribble when drinking fluids. She is increasingly frustrated by her communication difficulties but is extremely motivated to participate in her rehabilitation.

Number of Participants Completed Scenario =385

| # | Category | # | Category |
|---|---|---|---|
| 1 | Safety, prevention and medication n=59 15% | 8 | Rest and sleep |
| 2 | Communication and education n=291 76% | 9 | Comfort (including pain management) n=110 29% |
| 3 | Respiration | 10 | Dignity n=32 8% |
| 4 | Eating and drinking n=182 45% | 11 | Privacy n=22 6% |
| 5 | Elimination | 12 | Respecting choice N=290 76% |
| 6 | Personal cleansing and dressing n=79 20% | 13 | Mobility |
| 7 | Temperature control | 14 | Expressing sexuality |

# Scenario 3-Cindy Results

Cindy is a 13-year-old teenager who is performing poorly in her studies. Her mother brought Cindy to the Health Clinic because Cindy has lost 10 kg in the last four months due to her poor eating habits. Cindy is afraid that if she eats, she will become obese. Cindy tells the nurse that she is only trying to stay fit and do what all of her friends are doing. Since Cindy's boyfriend is always talking about slim girls on TV, Cindy wants to become slimmer. To achieve this goal, Cindy has started to skip breakfast and lunch. Cindy also tells the nurse that she has difficulty sleeping due to hunger, and that she eats some popcorn and chocolates every time her hunger gets out of control.

Number of Participants Completed Scenario =383

| # | | # | |
|---|---|---|---|
| 1 | Safety, prevention and medication n=45 12% | 8 | Rest and sleep n=44 11% |
| 2 | Communication and education n=211 55% | 9 | Comfort (including pain management) n=135 55% |
| 3 | Respiration | 10 | Dignity n=112 35% |
| 4 | Eating and drinking n=247 64% | 11 | Privacy n=3 1% |
| 5 | Elimination | 12 | Respecting choice n=21 5% |
| 6 | Personal cleansing and dressing | 13 | Mobility |
| 7 | Temperature control | 14 | Expressing sexuality |

# How do participants' abilities in detecting FoC compare based on their level of study?



Katarina
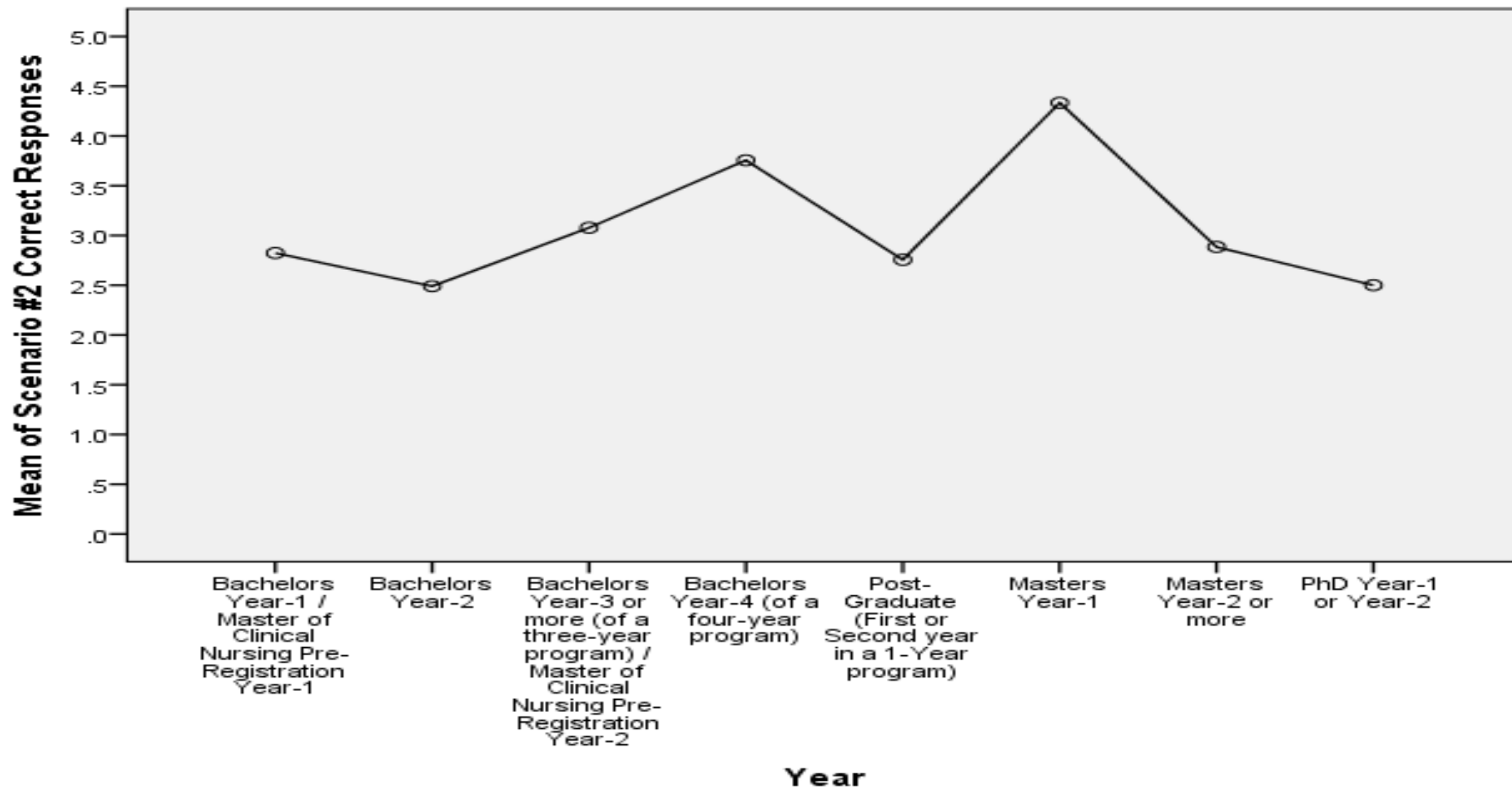
# How do participants' abilities in detecting FoC compare based on their level of study?

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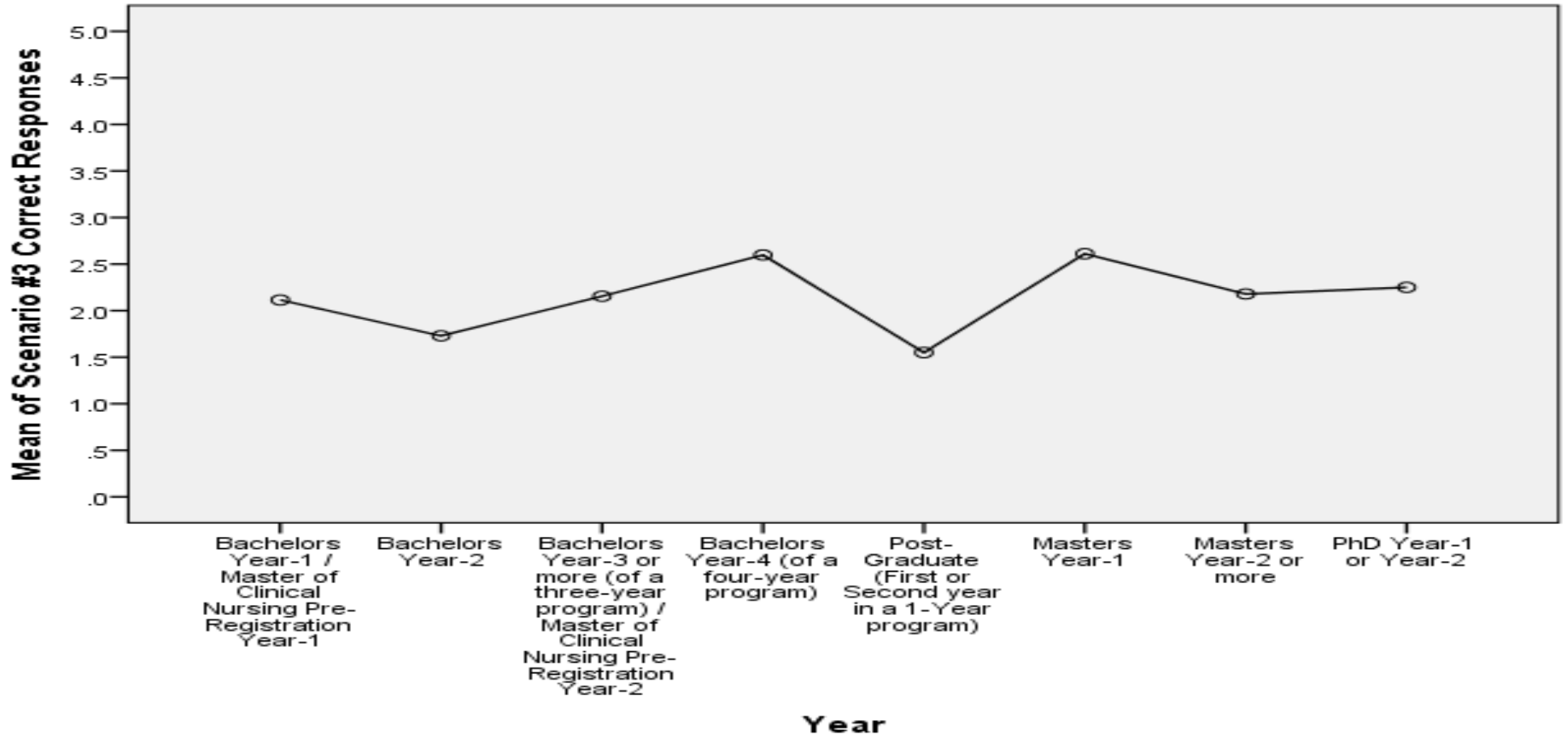
# Discussion

- Communication and education was identified frequently in all scenarios, does this reflect the prominence of this in the curriculum?

- Some FoC had a broad scope did this mean that they were identified more frequently as they covered several care needs?

- The FoC Comfort (including pain management) referred to either physical or emotional but was coded to the same FoC would having 2 categories be more helpful?

# Discussion

- Why was the FoC *Dignity, Privacy,* and *Respecting choice* not consistently identified?

- Does the drop in 2$^{nd}$ year students reflect the phenomena of the 'learning curve dip?

- Does the data indicate that post-registration students focus more on physical aspects of care has they get more experience in practice?

- Why did the (Masters Year 1) post-registration students identify more correct FoC for scenario 2?

# References

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