Clinical Conundrum? An Innovative Clinical Makeup Approach

A core component of baccalaureate nursing education is the clinical experience that occurs in a variety of settings. Finding clinical placements continues to be one of the most challenging issues facing undergraduate nursing education. Clinical absences are difficult for all parties involved, which include students, faculty, and organizations. The shortage of clinical sites affects the nursing profession as nursing education programs need to limit their enrollment due to clinical availability (American Association of Colleges of Nursing, 2017). Nursing programs are saddled with finding adequate alternative assignments when students miss their clinical day, regardless of the reason.

Methodology of Clinical Alternate Strategies

The authors of this article sought to answer the following question: What is the effectiveness of the innovative clinical all-in-one make-up policy and session on baccalaureate nursing degree students’ incidence of clinical absences? Using an innovative evidence-based practice strategy to address this challenge, a two-prong approach was developed that included a uniformed program policy and a clinical make-up day tailored to meet the clinical specialty missed. The clinical policy outlined consequences of a certain missed number of absences, required make-up activity, and the $100.00 fee associated with required missed clinical sessions. The make-up session was developed as a 1-day session in the nursing laboratory that was a robust alternative to replace a full day of clinical, aligned with student learning objectives for the specific specialty, and was fiscally responsible. The design of the make-up clinical day included one instructor providing oversight in the laboratory.

Implementation

A simulation experience focusing on safe medication administration and focused health assessment, a delegation and prioritization exercise, and a virtual clinical scenario related to the clinical specialty course was implemented as the clinical make-up session. The clinical instructor-to-student ratio was not to exceed 1 to 8. The instructor completed a formative evaluation on the student at various different stages of the experience, as well as at the completion of the make-up session, and this was included as part of the student’s final grade. The design of the simulation experiences was intentional to meet critical clinical objectives, which focuses on generalist nursing abilities essential to safe nursing practice. The three learning objectives were:

- Apply safety and infection control principles during patient-centered care.
- Administer medications using the rights of safe medication administration.
- Applies knowledge of pathophysiology, pharmacology, and nutrition when providing care to patients and families across the life span.

Virtual simulation was purposefully chosen as it provides the ideal mechanism to tailor the missed clinical hours in a certain specialty. Virtual learning experiences support critical thinking and decision making while increasing student engagement (Ewens et al., 2016).

Results and Conclusions

Data revealed that a significant decrease existed over a 3-year period of time of students incurring two absences within a semester. Clinical absences ranged from six to eight students per 60 students per clinical course, a 10% to 15% preimplementation compared with postimplementation of less than one student per 100 students per clinical course, with 1% of students having a second clinical absence. As the student enrollment increased, having a significant decrease in clinical absences was a secondary benefit. Student feedback was overwhelmingly positive regarding the ease, convenience, and comprehensive delivery of the learning strategy. Additionally, all students met the objectives who participated in the make-up clinical day.

Contemporary nursing curricula must embrace change and be forward thinking in order to address the conundrum of missed clinical days. This article discusses one college of nursing’s development and implementation of an innovative, structured process that incorporates a well-defined policy for missed clinical days and make-up sessions, providing an evidence-based practice solution for other nursing programs’ clinical conundrum of missed clinical experiences.

References


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