Service-eLearning: Meeting the Objectives of Community-Based Nursing Education

by Christopher W. Blackwell

Community-based nursing education (CBNE) programs have emerged across the United States over the past decade, shifting the clinical education of nurses from a traditional inpatient setting to outpatient, ambulatory, and community-centered treatment facilities (Ervin, Bickes & Myers Schim, 2006). Beyond care provided to diverse client bases, CBNE also provides an opportunity for nursing students to experience service-learning as they meet course objectives within the community. According to Laurie DiPadova-Stocks, (2005), service-learning is "[a]n academically rigorous instructional method that incorporates meaningful community service into the curriculum. Focusing on critical, reflective thinking and civic responsibility, service-learning involves students in organized community service that addresses local needs, while developing their academic skills, respect for others, and commitment to the common good" (p. 345). A service-eLearning approach enhances students' ability to meet course objectives while also promoting achievement of course and service-learning outcomes. This chapter examines the role of a hybrid, Web-mediated physical and mental health course within a CBNE curriculum and explores how online components of the course enhanced student learning outcomes.

SERVICE-LEARNING IN COMMUNITY-BASED NURSING EDUCATION (CBNE)

CBNE programs concentrate clinical nursing education experiences in community and public health settings and focus on primary and secondary prevention and treatment strategies (American Association of Colleges of Nursing, 2002). The CBNE curriculum was created as a result of data emerging in the early 1990s that suggested advances in healthcare, cost containment, health financing, and reimbursement shifts were driving patient care from inpatient

to outpatient ambulatory and community-based settings (Ervin, Bickes & Myers Schim, 2006). In 2002, the American Association of Colleges of Nursing (AACN) authored a guide entitled "Moving Forward with Community-Based Nursing Education" to help ease the transition from a traditional hospital-based nursing education curriculum to a community-based nursing education program.

These programs enrich the learning experience of nurses by fulfilling many of the objectives of service-learning. DiPadova-Stocks (2005) identified objectives of service-learning. These include: 1) placing students in organized community service that addresses local needs; 2) developing academic skills, and 3) fostering respect for others. The following discussion assesses the role of a service-eLearning physical and mental health course in a community-based nursing education program in meeting these three objectives. Strong partnerships among academia, community agencies, and service providers are needed to meet healthcare needs of underserved populations (Beauchesne & Meservey, 1999). This trinity serves as the infrastructure of CBNE and is also a distinctive characteristic of service-learning.

Many researchers have supported a strong service-learning connection with nursing education. The National Service-Learning Clearinghouse (2004) published a bibliography of works examining the role of service-learning in nursing education. As of this writing, the database contained 55 published writings on the subject. More work is needed to explore the benefits of service-learning in CBNE, in particular the ways that eLearning can enhance these pedagogies.

SERVICE-eLEARNING IN A HYBRID CBNE COURSE

In the undergraduate nursing program at the University of Central Florida, the required course "Promoting Physical and Mental Health in the Community" is a hybrid course wherein

some of the in-person classroom meetings are substituted for participation in online learning activities. The course is a total of nine credit hours, five of which are classroom-based and four of which are clinical-based. Classroom instruction is enhanced with an extensive online component. Students access the eLearning, Web-based portions of the course through the University's online teaching interface (WebCT) and are able to download the course syllabus, assignments, and laboratory outlines. Clinically, students complete rotations in community and public health nursing, community mental health nursing, and long-term care and submit selected assignments via the WebCT interface.

Examples of community and public health nursing experiences include working in screening and primary care clinics in public schools and health departments and administering immunizations to pediatric and special-needs populations within the community. Community mental health experiences might include such activities as working in psychiatric crisis units within a county health department; assisting addicted clients in short-term residential treatment facilities; and providing mental health assessments for high-risk student populations within the public school system.

Long-term care clinical settings include both nursing homes and skilled nursing facilities. During these clinical experiences, students work with short- and long-term residential clients in both private and public facilities and nursing homes. While the timing of the placement of students within these clinical rotations varies throughout the academic semester, all rotations have online interaction requirements designed to reinforce the concepts being taught. Students electronically submit weekly journals in which they demonstrate personal insight into their clinical experiences and progress in meeting course objectives.

Students also use the WebCT discussion boards to discuss specific client encounters and issues with their peers, to critically analyze instructor-posted case studies, and to provide evidence-based nursing interventions and rationales for client care. Each clinical instructor for the course has full access to the online components through WebCT and uses the online components to maximize communication with students through group discussion and email. Utilizing service-eLearning in a hybrid physical and mental health course met the three primary aims of service-learning, while also addressing the complementary goals of CBNE.

Placing Students in Organized Community Service that Addresses Local Needs. Community-based nursing centers (CNCs) are an integral component of many community-based nursing education programs (Wink, 2001). CNCs serve to educate nursing students in community settings while also providing outreach efforts to often times underserved client populations. These clinical settings are not necessarily nurse-managed clinics (Wink, 2001) but instead are directed activities within a given community that are based from a centralized location (such as a senior citizen center or a school). CNCs have a strong primary care and preventative focus (Tagliareni & King, 2006). A recent study assessing the makeup of clients served through CNCs found that: "Although the location for the health promotion and disease-prevention activities varied, 21% of group activities occurred in schools, ranging from preschools and head start programs (9%) to elementary (6%), middle (4%), and high school (2%), and 26% were conducted in a nursing center or senior citizens' facility, with the remaining 50% conducted in various community locations, including public housing facilities. In contrast, only 5% of individual encounters occurred in school settings, with the majority conducted in the nursing wellness centers or in senior citizens' housing facilities" (Tagliareni & King, 2006, p. 25).

This research also highlighted the impact CNCs have on minority populations, many of which suffer from a variety of health disparities. M. Elaine Tagliareni & Eunice S. King (2006) found considerable variation in their analysis of clients served in the CNCs they sampled: "Slightly more than half of the participants in the group programs were of African American ethnicity (54%), followed by white (24%), Asian (3%), and other (19%). Among the individual encounters assessed by the researchers, almost half (49%) were with white clients, followed by African American (26%), Asian (5%), and other races or combinations (20%)" (Tagliareni & King, 2006, pp. 20-26). These statistics solidify the role CNCs have in meeting the needs of a particular local community as well as fostering respect for others through student exposure to cultures that may be different from their own. Both of these outcomes are identified objectives of service-learning (DiPadova-Stocks, 2005).

Two of the objectives for the hybrid physical and mental health course are: 1) To provide holistic nursing care for clients of all ages with physical and mental health problems in rehabilitation, long term care and mental health settings based on a biopsychosocial approach; and 2) to practice delivery of care to groups, utilizing concepts of group dynamics and educational principles.

An eLearning-based evaluation method employed by clinical instructors to ensure students are completing these objectives is the completion of a weekly journal. Students submit an online journal for their clinical instructor to review, which assesses whether or not students are meeting the objectives of the course, identifies which objectives are not being met, and also establishes a plan of how the student will meet the objective in future clinical experiences. Beyond online clinical journals which students are required to complete weekly, students also participate in discussion board postings regarding their clinical experiences for the week.

Students identify and discuss some of the implications for nursing care they learned from their clinical experience during the week. Because students are often separated and placed in various clinical sites throughout the community, they benefit from reading the online discussion boards regarding the clinical knowledge and advice gained by their cohorts who might have been providing services to an entirely different group of clients in an entirely different clinical setting.

CBNE and clinical exposure to diverse populations affords student nurses the opportunity to address needs of local residents within a particular community. Online networking with peers also advances the students' perceptions and comprehension of health disparities among specific minority groups within a particular community. Lynn Clark Callister and Debra Hobbins-Garbett (2000) supported this in their study which assessed how nursing students achieve service-learning objectives. Students assessed by the researchers indicated that one of the strongest benefits of service-learning was an increased awareness of unmet needs in clients, families, communities, and populations.

Developing Academic Skills

CBNE programs extrapolate the skills necessary for appropriate health assessment of pediatric, adult, and geriatric clients while also extending assessment skills into the community setting. Nursing students enrolled in the "Promoting Physical and Mental Health" Hybrid course discussed in this chapter complete a family case study, which emphasizes assessment techniques for a family living within a particular community. The case study is downloaded from the WebCT platform and students are able to download the document and manipulate their input via a word processing program. Making the document electronically accessible from the course's WebCT component allows students to augment their computing skills by increasing their exposure to computer-based data retrieval.

Jane Eshelmann and Ruth Davidhizar (2000) highlighted the significance of community assessment projects in developing nursing students' overall assessment skills. The experiences gained from these types of assessment projects enable students to use the nursing process in a basic community assessment as well as provide community decision makers and stakeholders with significant data and analyses about the health-related needs and potential solutions within a particular community (Eshelmann & Davidhizar, 2000). The eLearning portions of the course can also serve as a means of communication between students and also provide an enhancement in their understanding of community assessment principles and concepts. Students are able to post their final completed assessment study on the WebCT discussion boards; all members of the class have access to these discussion boards and each student's case study is available for every member of the course to review.

eLearning course components help to solidify the gap between didactic learning and clinical learning. Lee-Anne Gassner and Karen Wooten (1999) found that experiential learning was greatly enhanced through stronger collaboration between students, clinicians, and nursing faculty. Hybrid courses help to increase this collaboration largely through an increased influx of communication between students, clinicians, and faculty. Interactions and feedback are faster and implemented in a more academic fashion. In addition, instructors are able to teach concepts to a greater number of students by increasing the potential for interaction and the use of group discussions to illustrate course concepts.

Fostering Respect for Others

An important concept student nurses must understand during the course of their education is the concept of autonomy (Potter & Perry, 2005). One aspect of autonomy is gaining insight and respect for individual client decision making. For example, a client in the end-stages of cancer

may choose to discontinue caustic chemotherapeutic regimens despite the possibility of prolonging life for a few more months. The nurse may feel disappointment in the client's decision; but ultimately, he or she must respect the decisions rendered by the client.

It is essential that nurses be prepared and educated on how to communicate with clients in the end-stages of life before they actually have real interactions with such clients. One approach to introduce students to the concepts of death and dying is through case studies. Students learn through simulation the appropriate techniques involved in effectively and therapeutically communicating with dying clients and their loved ones. The physical and mental health course discussed in this chapter includes extensive laboratory and simulation training through the course's skills lab component.

One section of the course's lab specifically addresses death and dying. Students are placed in pre-selected groups and presented with several plausible clinical scenarios and lead through the nursing process with the assistance of a laboratory instructor. A designated student leader or leaders assist in the laboratory discussions. All of the scenarios are downloaded from the course in WebCT. Students also have their own discussion board sections and collaborate collectively prior to the laboratory session electronically. Analysis of student performance is achieved through evaluation from not only the instructor but fellow students within the group as well.

Through simulated learning, students are better prepared to act when they encounter similar clinical situations in their actual clinical courses. In CBNE, students may be treating a dying client through a hospice setting, providing holistic and palliative nursing care to clients who have little life expectancy. After participating in online group discussions and simulated laboratory exercises, students are not totally new to these client's needs and at least have a small

knowledge base regarding the most effective approach to treating these clients. Students gain the skills necessary to respect the client's decisions and through the eLearning component of the course, reinforce the concepts of autonomy in service delivery.

STUDENT, FACULTY, AND COMMUNITY PARTNER RESPONSES

Qualitative responses students provided on formal evaluations of the course highlight the impact these laboratory preparation sessions have in providing client care. For example, students expressed greater understanding and comprehension of therapeutic communication principles related to death and dying. In addition, feedback indicated that many students appreciate the easy access the eLearning component provides to documents and case studies that assist them in preparing for their simulation laboratory experiences. Because the online environment provides a virtual meeting room, students in varying geographic locations are able to interact via the course's discussion boards, affording greater opportunity for collaboration.

Students also use the eLearning components of the hybrid course to reinforce and reflect on the concepts taught in the simulation labs. For example, students might discuss in later online journal entries or online discussions about their personal clinical experiences and how the simulation labs provided a greater understanding of the clinical concepts. Several students have commented to instructors that the eLearning component of the course afforded easier communication with faculty and fellow students. For example, one comment written by an anonymous student in a course evaluation stated: "I like how we can use the WebCT discussion boards to talk about clinical situations and plan group projects. Many of us live miles away from each other and the WebCT boards sure make planning easier! Plus, it's great for sharing thoughts and ideas about clinical experiences and providing useful clinical information to each other."

In turn, faculty also expressed this positive aspect of the course's Web component. One clinical instructor stated: "Using the course's WebCT Site allows me to have easy access to communication with the students and gives me the opportunity to quickly share student experiences with others. This allows me to reinforce clinical concepts students encounter, such as the importance of the nurse respecting clients' personal decisions about their health care, to other members of the clinical group. It also gives students the opportunity to interact by posting their personal reflections and experiences on these concepts" (S. Ladores, personal communication, February 21, 2007).

Finally, clinical partners within the community can also be granted access to the WebCT Sites for communication with students. Although this is not currently utilized, user identification numbers and security passwords can be registered to individuals in the community who need access to the course's WebCT Site. This allows these individuals the opportunity to communicate with students and enhance their online learning experience.

COURSE REFLECTION

A hybrid, service-eLearning approach to physical and mental health curriculum plays a crucial role in meeting the objectives of service-learning and CBNE. Through various integrations of online enhancements in service-learning approaches, students placed in organized community services more effectively address local needs, develop academic skills, and foster respect for others. eLearning provides an invaluable contribution to nursing students' abilities to provide nursing care in community-based settings. Although the context of this discussion has focused on nursing education and more specifically, CBNE, the application of these concepts extrapolates into any discipline that utilizes eLearning to facilitate a service-learning approach to instruction. These approaches to service-learning lend to the enhancement of communication, collaboration,

group discussion, and overall facilitation of learning for students engaged in this highly rewarding and significant form of learning. Through continuous innovation of the uses of eLearning strategies, every academic discipline can strengthen how their unique students meet their own objectives of service-learning.