

REVIEW OF SENIOR NURSING STUDENTS' PERFORMANCE ON GCS ASSESSMENT OF HEAD INJURY PATIENT

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ABSTRACT

A review was conducted on senior nursing students performing Glasgow coma score (GCS) assessments on head injury patients. This review addressed the scenario of management for students weak in performing Glasgow coma score on head injury patient and is based on management theory to overcome this problem. There are various articles that generally presented the challenges of nursing students in practical area while assessing head injury patient using Glasgow coma score. This article reviews on factors that contributed towards this disease and the scenario faced by senior nursing students weak in performing Glasgow coma score. Theoretical framework and Models are discussed in this article as a guideline based on management perspectives. Furthermore, a review on corrective action to solve the weakness of senior nursing students in performing Glasgow coma score on head injury patients was conducted. By using current model, lecturer and clinical instructor may develop skills among senior nursing students to excel in practical settings especially on the GCS. The use of management based models in teaching at clinical setting is important to produce nursing students with excellent skills that is related to quality care of patients in hospitals.

Keywords : Glasgow coma score, senior nursing students, head injury patient, nursing education.

INTRODUCTION

In Malaysia the number of nursing colleges and university providing training for nursing students has increased drastically due to urbanization. This situation caused majority of nursing students' to depict poor performance in practical situation because of lack of skills in clinical setting and the lack of attention given by clinical instruction. Clinical practice is the time for nursing student to get practical experience based on nursing theory. However, students do not realize the importance of practical experience for contribution to effective performance at work and also for their future carrier.

Therefore, an increase in the number of intake of students leads to weak performance in the clinical area. This situation gives rise to negative impact on nursing profession as well as reputation of college or university. The curriculum for a diploma in nursing is

divided into two inclusive components theory and practical. Whereby, according to Jerlock, Falk & Severinsson (2003), practical actions in a real setting include the development of nursing methods and techniques. For Nurses in practice, each situation is unique and connected to specific individuals at a given point in time and is the result of thoughts, values, feelings and judgments expressed in various decisions and actions. Furthermore, Mannix *et al.*, (2006) stated that clinical education for undergraduate nurses within the current context of increasing resources and advancement of clinical educations are essential to the nursing curriculum.

The current problem to be discussed is unsatisfactory assessments of Glasgow coma score (GCS) on head injury patients patient in neurosurgical ward. This is related to clinical practice and a study to help students to perform well.

DISCUSSION

Factors

This present problem occurs because some of the students were unable to give proper attention during clinical class due to high student density in the ward. Elcigil & Sari (2007) found in their study that students usually complain that they are not sufficiently guided by their educators during their clinical training period. Moreover, students face difficulty in assimilating the theoretical knowledge they study in their course in the clinical setting. This is because clinical environment is very much different than what is described in class.

In addition, some of the students lack confidence and suffered from anxiety while doing practical for clinical classes. Elcigil & Sari (2007) found in their study that most of the problems encountered by student nurses were anxiety caused due to the evaluation process followed by the clinical educator. They also fear of being interrogated or afraid of receiving negative feedback. They also face communication problems.

Besides that, some of the lecturers have no credibility in supervising students in clinical practice. Ousey & Gallagher (2010), stated that most lecturers found it difficult to balance the competing role in both clinical and teaching sessions. Whereby, nursing lecturers are not clinically creditable to successfully facilitate proper learning of their students. Therefore, clinical learning experience of lecturer plays a critical role in the socialization and for applied learning among nursing students (Livsey, 2009).

Furthermore, lack of preparation for clinical posting causes weak performance. Hicks-Moore (2005) stated that students' performance in clinical practice is weak because of the lack of preparation, fragmented and superficial levels of understanding. Therefore there is needs to foster critical thinking and problem-solving skills.

Theory framework and Model

From management aspects we need to see that the solution is appropriately addressed via a "mentor". The identification of potential protégés by mentor can occur through a variety of methods. The team members who express an interest in leadership, individuals who have recently taken on new

leadership and professionals who show promise in the area of leadership through their interactions with others are all likely candidates. Mentoring relationships can be formal or informal. Mentoring relationship must be mutually rewarding; it must involve the opportunity for real work and stimulating challenges as well as agreement on ownership of any project created through the partnership; and the relationship must remain on professional grounds at all times. The mentor has the responsibility to create opportunities for professional growth and involvement, whereas the protégé is responsible for responding to these opportunities. The mentor has the responsibility to provide opportunities for the protégé to gain recognition for the work accomplished; the protégé is accountable for being responsible and reliable with the work accepted. The mentor empowers, encourages and challenges the protégé for further development (Jones, 2007).

Based on the model above, weak students will be assigned lecturers to help in clinical posting. The mentor is the lecturer and a protégé is the students respectively. Mentor (lecturer) will teach students and monitor development of students in GCS assessment. The lecturer will then be able to manage students one by one in the clinical area, especially weak students in doing GCS assessment on head injury patients.

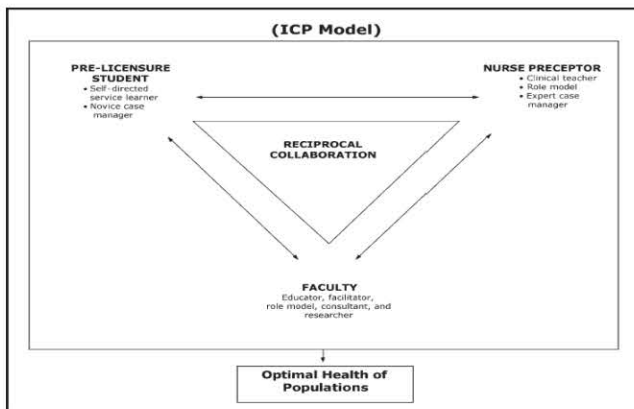
Model

In order to help weak students in the clinical area, management should follow this model as a guideline for strategy such as the preceptor model. Croxon & Maginnis (2009) stated that a popular model for clinical teaching of nursing students is the preceptor model, which involves students working under the supervision of a Registered Nurse (RN), who is part and parcel of the staff in the nursing area. This reinforces the use of the cluster model whereby the clinical facilitator is working with the students in a ratio of 1:8 or less and allocates patient care to the students. The preceptor model is highly effective because preceptor has more time to spend in assisting the students.

Myrick & Yonge (2004) found in their study a substantive theory can provide useful insights into the contextual reality of the preceptorship experience within the context of graduate nursing education and

its enhancement on critical thinking. Furthermore, Antrobus & Kitson (1999) were able to interpret nursing knowledge derived from nursing practice based on the political, academic and management domains and the external contextual relationship involved with the nurse leaders. This subsequently translates into nursing findings based on the language and priorities of politics, academic or management.

Management in an academic nursing program should produce independent and autonomous nurses with the ability to acquire, update and assimilate new knowledge, skills and attitudes (Jerlock, Falk & Severinsson, 2003). According to Hicks-Moore (2005) using concept maps in the clinical setting is a tool that can facilitate effective data gathering and critical thinking to provide students with a strategy that encourages application and synthesis. Concept maps can be used to describe not only the patients' pathophysiological responses to illness but also their psychosocial responses. Integrating concept maps into the entire clinical experience encourages discussion, reflective thinking, concept synthesis and critical analysis (Hicks-Moore, 2005).



Management to Solve Problem

Management of academic performances is essential to solve the problems of students who are weak in clinical practice in order to empower students in the clinical area. Whereby, a few strategies in clinical teaching are essential to help students.

In order to empower students in management, academics must reflect the real situation and focus on skills. Therefore, emphasis on GCS for head injury patients is essential. Lau, Chuk & Wei So (2002) stated that reflective clinical teaching is a very

important process in teaching nursing student. This is due to the fact that this potential benefits the students, patient care and clinical teaching. Through this process of reflection, new teaching strategies will be built on evidence. Students will then be more effective in the clinical setting because it reflects the real situation more vividly.

The weak students in clinical area need to be stimulated so that they can achieve better skills. Nevertheless, management of clinical education is the responsibility of all involved in delivering health care, namely ward sister, mentors, lecturers, specialist or advanced practitioners and clinical nurse educator (Pollard *et al.*, 2007) in order to help students in clinical skills. Therefore, clinical lecturer needs to cooperate with them in order to help weak students.

Furthermore, management must stimulate students' 'active learning in ward', especially the assessment of GCS by head injury patient. This action is believed to be able to help weak students tremendously. According to Reilly & Spratt (2007), 'active learning' is defined as using simulation in promoting engagement and improving student's motivation in learning. The students recognized the difference between 'doing it' rather than 'reading about it', whereby it aids in retention of learning a particular skill. Therefore, nursing lecturer must spend some time after finishing the clinical teaching to do some simulation with students in that ward. Briefing students about GCS and monitoring students after that one by one during performance of GCS on head injury patients is essential. This situation is classified as "linking lecturer's role" and consequently aiding students in clinical practice (McSharry *et al.*, 2010). Moreover, clinical simulation is a viable, efficient, and effective instructional technique, enabling nursing students to participate in intense learning experiences while at the same time gaining confidence in their ability to care for patients and practice proper clinical decision making (Che' Reed, Lancaster & Musser, 2009).

Besides that, academic management needs to give chances to students to be in charge of management of head injury patient as this would aid them better in understanding GCS assessment in patient care. Budgen & Gamroth (2008) stated that students assigned to patients are more oriented in their work which increases the level of knowledge and skills through

actual practice. Therefore, such method is beneficial as students will have an expert teacher and clinicians will have minimal teaching responsibilities. This situation can be considered as a form of student centered learning. Klunklin *et al.*, (2010) found in their study that students have high openness towards learning opportunities, with self-concept along with initiative and independence in learning to become an effective learner. According to Thailand's policy on education that emphasizes on student-centered learning to support teaching and learning processes self-directed learning is promoted. Self-directed learning is a method of teaching and learning that is increasingly used in nursing education (McSharry *et al.*, 2010).

Furthermore, management are required to encourage lecturer and clinical instructor to solve problems via problem based learning (PBL) which will be able to enhance weak student's assessment of GCS. Therefore students' critical thinking will improve and they will be able to relate well with a patient's situation in the ward. PBL is a student-centered instructional strategy, in which, students collaboratively solve problems and reflect on their experiences (Staun, Bergström & Wadensten, 2010). Ehrenberg & Ha'ggblom, (2007) found in their study that students expressed that problem based learning (PBL) promoted greater freedom but on the same time greater responsibility. They appreciated the greater responsibility on reaching the clinical goal provided for them. Therefore, implementation of PBL in clinical practice can help the lecturer and clinical supervisor in guiding students in the learning process rather than to provide knowledge (Staun, Bergström & Wadensten, 2010). However, management should be alert with the accessibility of simulated clinical environment at college, which prepares them before going to or after finishing their practical. The simulated clinical environment is a simulation exercise using three-patient simulators simultaneously for each simulated clinical experience. Simulation among students will increase effectiveness in the assessment of GCS.

Other than that, academic management should be provided in the clinical skills centers (CSC). CSC is one of the ways to help weak students in improving their skills in clinical, supported by providing appropriate environment and material to learn. Freeth & Fry (2005) stated that students and tutors enjoyed

learning and teaching within the CSC. The CSC was seen as a learning environment that supported the linking between theory and practice. There was some ambivalence among tutors about the correlation between performance in CSC and clinical practice (McSharry *et al.*, 2010).

Lastly, academic management needs to provide a new alternative in improving students' skill assessment via video recording of GCS assessment for head injury patients. Kelly *et al.*, (2009) found in their study that students felt more motivated to learn based on watching the video, and it is believed that videos helped to prepare them for the practical skills in classes. Furthermore, if students are still unclear regarding assessment of GCS, they can replay the video again to increase their understanding and improve their skills.

CONCLUSION

Students who are weak in clinical areas face serious problem, which will affect the credibility of the nursing profession. As nursing lecturer face this situation, there is a dire need to identify the weakness and proper management to polish the skills of the students. More attention and monitoring of weak students in clinical areas are required in order to help them to be more skillful. Therefore, nursing lecturer need to plan the best strategies in order to help students in improving their skill in clinical classes, such as, simulation in the ward and clinical skill centers. Exposing students to real head injury patient and monitoring them one by one in performing the assessment of GCS on patient will help them to be more confident and understanding. Lastly, as a nursing lecturer we need to be more sensitive to student's competency whereby early action can help the weak students more.

Weaker students in clinical areas are one of the challenges faced by nursing lecturer. Nursing lecturer needs to demonstrate positive leadership behavior in order to influence the student's attitude and empower them. Consequently, there are immediate requirement of support to create structurally empowering learning environments. Therefore, the need for clinical lecturers to demonstrate positive leadership behaviors while practicing nurse role models is essential.

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