Effect Evaluation of Successful Ability Model in Clinical Practice Teaching of Postgraduate Nursing Students

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Abstract

This study aims to explore the application of successful ability model in the clinical practice teaching of nursing master students. In this study, 47 nursing master students who were clinically practiced in our hospital from 2016 to 2018 were selected to use the "successful ability model" for clinical teaching practice. It includes cultivating nursing attitudes with professionalism as the core, improving nursing skills with emphasis on clinical practice ability, and enriching professional knowledge with post competency. Before and after the clinical practice teaching, the nurses' self-learning ability survey, the Chinese version of the critical thinking ability measurement table, and the nurse position competency questionnaire were used for investigation. Results show that after using the "successful ability model" for clinical teaching practice, the self-learning ability, critical thinking ability and post competency of nursing master students are significantly improved compared with before training. We can conclude that the establishment of a clinical practice teaching system for postgraduate students in the successful ability model has improved the competency of postgraduate nursing students and has certain clinical implications.

Keywords

Success ability model; Nursing professional master's degree; Clinical practice.

1. Introduction

With the rapid development of higher education in China's nursing profession, in February 2011, nursing became a first-level discipline, providing a very good development opportunity for the postgraduate education of nursing master's degree [1]. The cultivation of master's degree in nursing profession has also attracted great attention from all walks of life. As a new type of talent training method, professional nursing postgraduate education is more inclined to clinical practice, ranging from 18-24 months[2], clinical practice It is an important hub for linking theory and practice, and is an important part of the graduate training program[3, 4], which directly affects the quality of nursing talents[5]. Although some provinces, municipalities and hospitals have carried out some explorations in the clinical practice training of nursing master students, there are still many confusions and difficulties, and there are great differences among colleges and universities[6,7]. The success ability model was proposed by Chen Lijin, a well-known bank trainer in China, in the book "Bank Account Manager Training 25 Lessons", including Attitude, Skill and Knowledge, so it is also called ASK model[8]. It is widely used in the fields of corporate training and sales. It has been reported that the ASK model is applied to the clinical ability training of undergraduate nursing students[9]. The application of nursing cognitive model in nursing student education has been reported in foreign countries. The research results describe the current professional knowledge and professional skills of nursing students. And critical thinking skills, these three areas jointly predict the students' learning ability, provide a meaningful reference for the school's enrollment requirements [10,11], and the literature reports on evidence-based nursing clinical practice guidelines The application, but currently the foreign application of ASK model in clinical practice training of nursing interns and postgraduates is still rare [12]. This study aims to explore the effect of ASK model in the clinical practice of nursing master students, and provide a theoretical basis for improving the clinical practice ability of nursing master students.

2. Objects and Methods

2.1 Subjects

47 graduates from a center hospital who were engaged in clinical practice in 2016-2018 were selected as masters of full-time nursing in a university; 4 males and 43 females; average age 26 years; Basic education: 30 undergraduates and 17 junior colleges; Marital status: 20 married, 27 unmarried; Foreign language level: 26 in English, 26 in class, 21 in class; Master's degree in research: 20 clinical nursing, nursing 20 people in education and 7 in nursing management; 40 people have 2 years of work experience, of which 34 have worked in hospitals and 6 have been teaching.

2.2 Methods

2.2.1 Intervention method: Formulate management practice and implementation plan for clinical practice teaching of postgraduate nursing students

2.2.1.1 Clinical Practice Management

The director of the nursing department—deputy director of nursing teaching—mentor and head nurse—the four-level teaching structure of the clinical teaching teacher is Established. The Nursing Department is responsible for arranging the clinical practice of nursing master students, formulating clinical practice plans, organizing pre-job training, practice completion assessment, and teaching quality management. The Department of Nursing, in accordance with the professional direction and training requirements of the Master of Nursing, works with the tutors and students to develop a personal clinical practice rotation plan and a rotation table. Before entering clinical practice, the Department of Nursing organizes a one-week pre-job training.

2.2.1.2 Teaching with teacher

Nursing postgraduate clinical practice teaching teachers need to have a bachelor degree or above, more than 3 years of specialist work years, with a high and above professional technical titles; specialist nurses with intermediate and above professional technical titles also meet the requirements. In the teaching process, the hospital implements the clinical practice of nursing master's degree program to teach teachers qualification review system.

Teaching teachers should fully understand the requirements of clinical practice plans and guide students to participate in clinical nursing activities. In the process of teaching, teachers should attach importance to the combination of theory and clinical practice, strengthen the postgraduate's professional theoretical knowledge and operational skills guidance, guide clinical case care, and strictly guide students to write medical records according to the medical record writing standards, and must personally review various nursing documents.

The clinical practice teachers must strictly implement the nursing operation norms and personally guide the various treatments and nursing. It is strictly forbidden for students to be independently on duty without the guidance of clinical practice teachers. In addition, teachers should care for students. Keep abreast of the student's various situations (including the student's professional ethics, labor discipline, thoughts and practice gains, etc.), and finally the teacher is responsible for completing the student entrance and final exams, appraisal, and scoring.

2.2.1.3 Training objectives

Focusing on "attitude, knowledge, skills" for purposeful intervention and intensive guidance, and cultivating high-level, applied, and specialist nursing talents, they will have good political and ideological qualities and professional ethics, and have a solid basic theory of the discipline, professional knowledge, strong clinical analysis and thinking ability, can independently solve common nursing problems in the subject area, and have strong research and teaching ability [8].

Training content	Training focus	Specific contents		
		policy and regulations,		
		medical ethics,		
		professional theoretical knowledge, overall nursing,		
		health education,		
A (attitude)	professionalism	interpersonal communication, teamwork,		
		quality improvement,		
		clinical information technology,		
		humanistic spirit.		
	clinical practice ability	basic skills,		
		first aid skills,		
		special technology,		
		nursing procedure application ability, health education ability		
		medical record writing,		
S (skill)		communication ability,		
		scientific research ability,		
		evidence-based nursing ability,		
		criticism Thinking ability, etc.		
	clinical application ability	condition observation,		
		accurate judgment,		
К		timely treatment,		
(Knowledge)		nursing care,		
		health education,		
		psychological care.		

2.2.1.4 Training content

2.2.1.5 Training method

(1) Theoretical study: It mainly adopts centralized teaching, training in rotation, and self-study in planning.

(2) Clinical practice: It is mainly carried out by means of clinical department rotation. Clinical practice is divided into two stages: basic practice and specialist practice.

2.2.1.6 Training duration

The clinical practice duration of the master's degree in nursing is 2 years.

2.2.2 Implementation of standardized nursing master's training program

The Department of Nursing, in accordance with the professional direction and training requirements of the Master of Nursing. According to the clinical ability of nursing graduate students, they are divided into two levels of NS0 and NS1. NS0 level - students with no clinical work experience or less than 3 years of clinical work experience, students with NS1 level -3 years of clinical work experience; therefore, NS0 level basic practice should rotate at least 4 subjects, NS1 level basic practice only rotate 2 Subjects, then these students enter the specialist practice according to the subject requirements and professional direction.

The specific implementation method is as follows:

(1) Attitude (A) In addition to training in professional literacy and professional thinking, pre-job training introduces an experiential teaching model, which simulates the patient's condition using devices such as advanced simulated clothing that is inconvenient for the elderly and favoritism patients, so that students can experience different patient feelings. For example, inconvenient movement, hearing loss, and old-fashioned eyes, to improve students' empathy and humanistic care ability.

(2) Skills (S) Implementing the second-level management of the department, completing 9 basic and first-aid skills operations at the hospital level. These students train and stimulate the "thinking" ability through the study and application of mind maps, participation in difficult and critical case discussions in the department, and evidence-based rounds. Also, students should be trained in their writing skills. In addition to the standardized medical records, writing skills are required to complete a clinical reflection diary. Focusing on cultivating students' clinical thinking and independent analytical skills, and accumulating clinical work experience. Before the graduation, the students should take case care as the case, take the standardized patients as the core, conduct the written test and skill assessment in the form of objective structured clinical assessment.

(3) Knowledge (K) hospitals and teachers require students to participate in various academic activities at all levels of the organization, including special lectures by clinical medical organizations, special training of the nursing department, etc. Each rotation department completed the health education class once, and participated in the book report meeting before graduation.

2.2.3 Evaluation method

Students were assessed using the Autonomous Learning Ability Scale and the Nurse Post Competency Table before and after clinical practice. A total of 47 questionnaires were distributed in this study, and 47 were recovered, with a recovery rate of 100%.

2.2.3.1 Self-learning ability scale

The scale was developed by Chinese medical university Xiao Shuqin [13] in 2008. The scale has four dimensions: self-motivation belief, task analysis, self-monitoring and regulation, and self-evaluation. A total of 34 entries, including the overall Cronbach's α coefficient of the scale is 0.944; the overall split-half reliability is 0.894; the content validity index of the scale is 0.97, the scale can objectively evaluate the independent learning ability of nursing staff. Each item adopts the Likert 5 scale. The nurse judges the degree of recognition of the item through self-feeling. The items in the forward statement are given 5 points, 4 points, 3 points, 2 points, 1 point, respectively, from full compliance, conformity, basic compliance, basic non-conformity, and complete non-conformity. if it is a reverse statement, it will be scored in reverse.

2.2.3.2 Chinese version of the Calorie Asia Judging Thinking Emotional Tendency Questionnaire (CTDI-CV)

The scale was developed by Meici Peng [14] with a reliability of 0.90 and a content validity of 0.89. The scale includes seven qualities: finding truth, open mind, analytical ability, systemic ability, self-confidence of critical thinking, curiosity, and cognitive maturity. Each trait has 10 entries and a total of 70 entries. Among them, 30 items are positive and 40 items are negative. The answer to each item is divided into 6 items by "approval-disapproval". Negative entries are assigned 1-6 points, positive entries are assigned in reverse, 40 points or more of each trait is the minimum recognized score; 50 points or more means strong critical thinking. The total score of CTDI-CV is 420 points, and the score >280 indicates positive judgment ability; the score >350 indicates strong judgment ability.

2.2.4 Statistical methods

Statistical description and paired sample t-test were performed using SPSSI9.0 software, and the test level was P=0.01.

3. Results

3.1 Comparison of nurses' self-learning ability before and after clinical practice is shown in Table 1.

Table 1 Comparison of nurse self-learning ability survey scores

Project	Number of people	Self-motivation concept	Task analysis	Self-monitoring and adjustment	Self- evaluation		
Before clinical practice	47		3.43±0.25	3.36±0.33	3.32±0.44		
After clinical practice	47	4.19±0.21	3.71±0.30	3.54±0.28	3.54±0.35		
t value		9.6231	4.9155	2.8514	2.6826		
P value		0.0000	0.0000	0.0054	0.0087		

3.2 Comparison of nurses' critical thinking ability before and after clinical practice is shown in Table 2.

Table 2 Comparison of critical thinking ability								
Project	Number of people	Looking for the truth	Open mind	Skills of analyze	Systematizat ion ability	Critical thinking And self- confidence	Curi osity	Cognitive maturity
Before clinical practice	47	3.96±0.75	3.94± 0.42	3.59±0.82	3.83±0.63	3.90±0.35	4.01 ±0.6 8	3.76±0.78
After clinical practice	47	4.59±0.88	4.25± 0.55	4.14±0.9 1	4.38±0.52	4.45±0.41	4.76 ±0.4 9	4.22±0.86
t value		3.7354	3.071 1	3.0782	4.6158	6.9946	5.96 39	2.7162
P value		0.0003	0.002 8	0.0027	0.0000	0.0000	0.00 00	0.0079

3.3 The comparison of nurse competency scores before and after clinical practice is shown in Table 3.

Table 3 Nurse Competency Survey Score						
Project	Number of people	Good personal qualities	Clinical care ability	Support and interpersonal communication skills	Critical clinical thinking ability	Professional construction and development ability
Before clinical practice	47	2.73±0.82	2.37±0.55	2.71±0.65	2.36±0.67	2.63±0.53
After clinical practice	47	3.91±0.74	3.54±0.64	3.63±0.73	3.41±0.78	3.72±0.65
t value		7.3240	9.5053	6.4527	7.0007	8.9099
P value		0.0000	0.0000	0.0000	0.0000	0.0000

4. Discussion

4.1 ASK training model can improve the self-learning ability of nursing master students

The results of this study show that after using ASK training model to train nursing practice graduate students, the scores of self-learning ability of nursing master students are higher than before clinical practice. Self-directed learning refers to the process by which an individual actively determines the

learning needs with or without the help of others, formulates learning objectives, determines the human and material resources for learning, selects and implements appropriate learning strategies, and evaluates learning outcomes [16]. Through clinical practice, students can combine theory and practice to better master the clinical skills that focus on specialist operations [17, 18]. The ASK training model focuses on the development of students' attitudes. When formulating students' training programs, they pay attention to students' ideas, consider students' interests, and discuss clinical practice plans with students to help students complete the practical plan as planned. Ma Mengke et al [19-20] research shows that nursing graduate students hope that clinical practice can be guided by student needs, innovation and improvement of the inherent mode, and the development of individualized, humanized programs, the construction of ASK training model is in line with the students A demand.

4.2 ASK training model can improve the critical thinking ability of nursing master students

The results show that after using the ASK training model to train nursing practice graduates, the critical thinking ability scores of nursing masters are higher than before clinical practice. Critical thinking refers to the purpose of solving problems, based on the cognition of problems, training and evaluating and analyzing relevant information in a well-trained and impartial manner, constantly questioning, reflecting and judging, and then applying logical reasoning and induction methods. A comprehensive thinking model for optimal decision making [21]. The knowledge development of ASK training mode is mainly based on clinical application ability, including condition observation. At the same time, in the aspect of skills training, through the study and application of mind map, participation in difficult and critical cases of the department, evidence-based rounds, writing special cases and other activities to train and stimulate students' "thinking" ability, and ask students to complete reflection Diary, daily reflection on what you see and hear on the day, after reflection to inspire follow-up practice. At the end of each department's practice, students will be required to conduct standardized ward rounds, examine students' comprehensive skills, and evaluate the critical thinking ability of nursing masters. In order to meet the needs of future nursing and health development, the education of nursing masters in China should train more specialized high-level nursing talents who can directly participate in and guide clinical nursing practice [22-25].

4.3 ASK training model can improve the competence of nurses in nursing masters

The results show that after using the ASK training model to train nursing practice graduates, the scores of nurses' competence in nursing masters are higher than those before clinical practice. Some scholars in China believe that nurse competence is an organic combination of knowledge, skills and attitudes, and is reflected in clinical nursing, ethics and legal practice, professional development, education and counseling, critical thinking, leadership, interpersonal relationships and scientific research [26]. Xu Shaobo [27] believes that nurse competence includes knowledge, skills, abilities and personal traits.

In a qualitative study of the expectation of tutors by nursing masters, Iranian scholars hope that the masters of nursing expectors can not only guide and support their education and research, but also have good communication skills and professional competence. Emphasis on the cultivation of professional knowledge [28].

5. Conclusion

In 2016, the ASK model was used to conduct clinical practice training for nursing master students. , knowledge, skills, carry out purposeful intervention and intensive guidance, cultivate a good political and ideological quality and professional ethics, have a solid basic theory and systematic expertise, strong clinical analysis and thinking ability, independent It solves the common nursing problems in this subject area, and has high-level, applied and specialist nursing talents with strong research and teaching capabilities. At present, the number of nursing graduate students received by this hospital is limited, and the training of nursing graduate students is still in the exploration stage. In the future, I hope that there will be more large-scale, multi-center research to explore suitable training programs,

develop more comprehensive training content, and constantly adapt to the development of clinical practice training models for masters of nursing at home and abroad.

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