

International Pediatric Clinical Immersion: Uniting Nurses Globally

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ABSTRACT

In the current globally challenging economic climate, pediatric staff nurses across the world are rarely able to travel and learn from one another in clinical settings such as children's hospitals, ambulatory care clinics, or through pediatric home care agencies. Staff nurses normally work for agencies and are employed for twelve hours at the bedside and due to increased acuity of young children and adolescents, are often unable to attend continuing education or academic offerings to broaden their perspectives of care delivery. This is especially true for pediatric nurses that may be considering traveling to another country and learning through a clinical immersion experience to increase their awareness of the facets of caring for children from other ethnic backgrounds and cultures. The expense of travel and the challenge of coordinating logistics often make the chance to meet pediatric nurses abroad only a dream. Additionally, many nurses have families and homecare obligations that prohibit lengthy travel abroad. This article describes an innovative international clinical immersion partnership between one university school of nursing and children's hospital in the United Kingdom and a children's hospital and southeastern university school of nursing in the United States. This article will describe the opportunities for networking between similar specialties of nurses. Two diverse countries joined in an educational partnership to bring opportunities to share dialogue and clinical rotations to both nursing students and pediatric practicing nurses that made travel possible.

Keywords

Clinical, Immersion, International.

Introduction

The nursing profession is ethnically diverse and evolving globally, and rapidly expanding to become more international in scope [1]. With the increasing complexity and diversity of the population in nations and countries around the globe, nurses are being asked and required to care for a wealth of patients that come from a variety of ethnic backgrounds in the nurses' own unique clinical settings such as hospitals, clinics, ambulatory settings, and home care. This is especially true for nurses caring for immigrant children and young people that are from nations that are extremely different from their own nation of origin. Pediatric nurses that deliver specialized care to children often are required to learn the basic cultural beliefs and foundations of the children and young people, as well as families, in which they are caring for in the clinical environment [2]. These care specialties include learning basic language and childcare

needs that are particular to the individual pediatric patient or young adolescent that is requiring acute nursing care.

An important issue that is impacting pediatric nurses and nurses in all fields worldwide is the aging workforce. Spiva, Hart, and McVay [3], found that the average age of employed nurses in pediatrics was 46.8 and this shortage of nurses was due to chronic fatigue from working long 12-plus hour's shifts and difficult patient care situations requiring extreme lifting. An additional factor that is compounding the shortage of pediatric nurses is the attrition of new, novice nurses that are leaving the nursing profession globally in the first to second year after entering nursing practice [4]. Nursing students around the world are required to enter a challenging profession that requires advanced critical awareness of both clinical care as well as global pediatric nursing issues [5]. Clinical immersion experiences may be the answer to help young student nurses who are novices to learn to care for children from all ethnic backgrounds and from a variety of nations.

Jie, Andreatta, Liping, and Sijian [6], found that clinical immersions for student nurses experiencing an international perspective facilitates their personal and professional growth, and allows them to understand different cultures and global issues [2]. International experiences provide students an awareness of pediatric global nursing issues and helps them to understand both the differences as well as similarities of pediatric nursing care [7]. For the majority of nursing students in schools of nursing worldwide, it is often difficult to partake in an international clinical immersion's experience due to time, expense, and being away from their families. Many of these clinical immersions are found to be a half-year (or one semester or term) in length, and are often quite cost prohibitive to the average student and family.

In a systematic review of 23 empirical articles regarding international student exchange experiences, Kolbuk, Mitchell, Glick, and Greiner [8], found that there were not any articles describing two-way exchange experiences in global pediatric nursing education and that there were not any models for best practice for international student clinical immersion exchanges. In this article, the formation of a collaborative two-way clinical immersion experience for both pediatric nursing students, as well as pediatric nurses, will be presented as a model for other schools of nursing to review as well as for children's hospitals and clinical settings that are located around the world. Additionally, the development of the educational model, A Collaborative Cultural Learning Model, will be presented that showcases the facets of learning that assists and enables pediatric nursing students and nurses to glean knowledge of pediatric care on an international level to help them in acquiring the knowledge to care for children and young people from around the world, regardless of where they are employed and working as a nurse.

History of International Pediatric Clinical Immersion Program

This article describes the need for understanding pediatric global nursing through clinical immersion exchange programs. The article presents a program that provides a collaborative mentoring partnership of both student nurses and practicing pediatric nurses that has been established between two schools of nursing and two pediatric hospitals located in the United Kingdom and United States of America. This partnership has been in existence for eleven years and was initially formulated and developed in the fall of 2006. Nursing pediatric faculty from a regional comprehensive university located within the Southeastern United States initially sought approval from the college health and human sciences dean and university provost for taking the initiative to begin an international program with a school of nursing abroad that focused upon pediatric care. The pediatric nursing professors contacted the director of nursing at the large metropolitan university in the north central United Kingdom that taught pediatric and young people nursing care in their nursing program. The aim was to seek their interest in developing a collaborative clinical immersion program that would focus upon mentoring of nursing students and nurses at pediatric clinical sites in both countries.

After an initial positive reply from the director of the school of Nursing in the United Kingdom, the pediatric professors from the United States planned an initial on-site meeting with the faculty and director to review goals and objectives for the development of the international collaborative pediatric immersion experience for both students from the United States, as well as those from the United Kingdom. The meeting was held at the university school of nursing in the United Kingdom and both parties agreed to develop the clinical immersion program and to formulate an educational learning contract between each school of nursing for administration to review. Upon return to the United States, the faculty presented the international learning contract to the school administration and the clinical immersion program was granted full approval. The director at the school of nursing in the United Kingdom also presented the learning contract to the university administration, and it was also approved unconditionally.

The faculty within both schools of nursing jointly worked together to develop the international pediatric clinical immersion course syllabus and format. The course for the nursing students and pediatric nurses from the United States would transpire during the annual ten day spring break. This allowed the travel to commence on the weekends and to have the clinical immersion experiences, as well as historic sightseeing, during the Monday through Friday period. Pediatric nursing students from the university in the United Kingdom chose to travel to the university in the United States during the month of January for a two-week clinical immersion which was their normal time for international studies. The clinical immersion experience for the students and pediatric nurses from the United States were transported to the United Kingdom through the travel arrangements from an international student tour company, which allowed the overall costs of the trip to remain at a minimum for the 10-day travel. Students from the United Kingdom made travel arrangements as a group and shared housing, as well as travel expenses when they arrived in the United States. This also allowed a minimum of expense on the trip.

Nursing students and pediatric nurses from the United States were asked to begin the week with educational presentations that focused upon health disparities, as well as health illnesses that currently were prevalent in their hometown or region with the nursing students and pediatric nurses at the university and children's hospital in the United Kingdom. These presentations included topics such as early onset type two diabetes with children and young people, the obesity crisis with children, and the many spectrums of autism that exist at a phenomenally high level across the nation. As the years of the program have commenced, the presentations have been diverse and have even focused upon the pediatric care of children of color and those that are from the Cherokee Native American boundary that is located adjacent to the university.

Additionally, there have been many outstanding presentations from the students and pediatric nurses from the university and children's hospital in the United Kingdom that have been informative to the students from the United States and have allowed for much

discourse and dialogue regarding pediatric care with children from all nationalities, as well as ethnic backgrounds. Pediatric nursing students from the United Kingdom have presented to the nursing leaders of the pediatric hospital in the United States, as well as to the entire nursing administration regarding the nature of their school of nursing program, and the variety of children they have learned to care for from various ethnic backgrounds that have migrated to the United Kingdom since the advent of the European Union. For both groups of students and nurses, the presentations have allowed growth and development for having the chance to present to an international audience.

The clinical immersion component for each group of pediatric students and nurses from both universities varied in experiences depending upon the length of time that was allotted for the immersion experience with pediatric families. Students and pediatric nurses from the United States had selected their preference for the specialty of hospital department or ambulatory agency and these preferences had been given to the clinical coordinator for the children's hospital in the United Kingdom. Over the years, the preferences have ranged from general pediatric care, acute care, pediatric intensive care, oncology care of children, neonatal intensive care, school nursing, as well as home care of oncology patients. Three months prior to the trip, the faculty leader for the clinical immersion program in the United States would provide the names, email addresses, and locations for the students and pediatric nurses to be able to contact their nursing mentor to learn about their clinical immersion. These assignments were provided by the clinical coordinator at the children's hospital. By having the contact information three months ahead of time, this allowed a bond to develop between the students, pediatric nurses, and the pediatric nursing mentors in the United Kingdom. Exchanges of photos, as well as Face book sites, furthered allowed development of a platform for advanced friendship to develop. During the first day of the clinical immersion after the presentations were presented in the morning, the children's hospital would host a welcoming lunch to the visiting group from the United States, and would invite the pediatric mentors to join them in the afternoon to meet their pediatric students and nurses, and take them to their clinical immersion site. The clinical immersion would then commence for the following three days, and participants would use the local public transportation system, such as coaches and taxis, to be transported to the various sites. For many of the pediatric nursing students and nurses, this was a novel experience, compared to the overuse of automobiles for transportation in the United States!

Pediatric nursing students that traveled to the United States from the United Kingdom had a two-week clinical immersion in January which was held each year of the collaborative program. During the first week of the clinical immersion, the nursing students were rotated through all of the in-house pediatric units for full day tours with pediatric nursing mentors. These assignments included general pediatrics, pediatric oncology of children and young people, pediatric intensive care, neonatal intensive care, ambulatory care, special needs nursery, and visits with home health pediatric nurses as well as school nurses. The students and

pediatric mentors thoroughly enjoyed the experience of learning with one another, and both found that the days passed all too quickly.

With the second week of pediatric assignments, pediatric students from the United Kingdom traveled to the Native American Cherokee boundary for clinical rotations that were located near the university. Students began their week of immersion by having an in-depth overview to the culture of the Cherokee people through an orientation that transpired at the National Museum of the Eastern Band of the Cherokee Nation. This introduction to the historical hardships of the Cherokee people and children allowed the nursing students from the United Kingdom to have a clearer idea of the life and struggles of these families over time.

Throughout the second week of the clinical immersion, the pediatric nursing students from the United Kingdom were rotated through the pediatric divisions of the Native American Cherokee Hospital, as well as many ambulatory clinics including behavioral mental health of children, visiting home health care visits for families and children, and the prenatal and post-partum clinic. These immersions with their pediatric mentoring nurse allowed the students to have a wider knowledge base and facilitate their understanding of an ethnic culture that was extremely different than their own in the United Kingdom.

Students and pediatric nurses from both universities were required to write in narrative format about their daily experiences about their clinical immersion site and reflect about the pediatric practice of their nursing mentor that they had been assigned to learn from for that day. Additionally, they were required to write a short paper on their overall perspective of their time in a pediatric clinical immersion experience, and each of these assignments were submitted to their nursing professors at the end of the clinical immersion travel period. Common reflections from both groups of traveling students and pediatric nurses were that the experiences were extremely eye-opening with bringing a new awareness of cultures of all of the children they had met, as well as the differences between the socialized care of both the Cherokee nation and the United Kingdom, as well as compared to the capitalistic care that is delivered within the United States.

Students also reflected upon the differences in uniforms that each nation wore, and the students and pediatric nurses from the United States commented upon the stylish grey and blue uniforms that were worn by students and the practicing nurses in the United Kingdom. Clinical immersion students from the United Kingdom that experienced clinical immersions with the pediatric nurses in the children's hospitals and ambulatory care settings were amazed that uniforms often consisted of wearing a wide variety of colorful scrubs, with often, cartoon characters and children's animals on the scrub tops.

In the United Kingdom, the uniforms are presented with a range of blue to royal blue, and as well as maroon, that help to indicate to patients and their families the rank of the nurse that is caring for them.

Development of a Collaborative Cultural Learning Model

The nursing faculty and clinical coordinators from both universities, as well as children's hospitals, believed that the development of an educational learning model (Figure 1) for the nursing students and pediatric nurses would be helpful for their acquisition of the breadth of education that they had gleaned from the trip and course. The overall clinical immersion experience is based upon the global learning, which is represented by the globe. The cultural experience and learning has been represented by culture, in which by traveling and being assigned to a pediatric nurse to learn about a unique setting with special children with often a variety of ethnic backgrounds, allows new cultural awareness to be developed. The clinical immersion program has been successfully implemented by both universities, as well as children's hospital for over eleven years, and this collaborative venture is represented by the term of collaborative in the diagram. The model is deliberately designed to be a basic model for student learning and comprehension. It has been well received by students and nursing staff alike.

The main component for the model is the focus upon clinical learning, which represents the clinical immersion that transpires in countries and children's hospitals, as well as ambulatory pediatric settings and environments. This model is presented to each new group of students as they are being prepared to partake and travel to the United Kingdom or United States for their unique clinical immersion experience.



Figure 1: Collaborative Cultural Learning Model.

Discussion regarding the overall merit on pediatric clinical immersion experiences

The international pediatric clinical immersion program prepares students for global awareness of pediatric nursing roles through clinical pediatric rotations and self-directed learning experiences. Students are transformed in the clinical mentoring that takes place

with guidance of pediatric nurses in both the pediatric hospital in the United Kingdom and the United States, as well as ambulatory care pediatric settings that include diverse school nursing sites, oncology clinics, home health agencies that focus upon pediatric patients, and behavioral mental health clinics for children and young people. Students are guided and led through pediatric clinical experiences with both ambulatory as well as critically-ill children and are exposed to international differences and similarities in pediatric nursing and medical care. The students learn the various differences and similarities in pediatric care within both countries and appreciate the nursing care practices in delivery of care. This program continues to be successful and proves to be an educational foundation in pediatrics in both schools of nursing, as well as with the two children's hospitals that participate in the collaborative international clinical immersion program on an annual basis. Over the years, the program has grown in popularity, and the programs now have waiting lists comprising of both nursing students, as well as pediatric nurses, that are both excited to participate in the international clinical immersion program. The program is truly a once in a lifetime opportunity to share, learn, and reflect on pediatric care with nursing students and pediatric colleagues abroad in both countries.

References

1. Berland A, Richards I, Lund KD. A Canada-Bangladesh partnership for nurse education: Case study. *International Nursing Review*. 2010; 57: 352-358.
2. Smith K, Curry K. 92011). Is it worth it? Measuring the long-term effects of an international experience for nursing students in Ecuador. *Journal of Community Health Nursing*. 28: 14-22.
3. Spiva L, Hart PL, McVay. Hearing the voices of the newly licensed RN's: A qualitative study suggests that they need more guidance and support than they are getting. *American Journal of Nursing*. 2013; 113: 24-32.
4. Hoffler L, Thomas K. Transition of new graduate nurses to the workforce: Challenges and solutions in the changing healthcare environment. *North Carolina Medical Journal*. 2017; 77: 133-136.
5. Wright DJ. Planning a study abroad clinical experience. *The Journal of Nursing Education*. 2010; 49: 280-286.
6. Jie H, Andreatta S, Liping Y, et al. A collaborative international community health nursing: Clinical experiences in China. *Home Health Care Management & Practice*. 2010; 22: 499-506.
7. Wros P, Archer S. Comparing learning outcomes on international and local community partnerships for undergraduate nursing students. *Journal of Community Health Nursing*. 2010; 27: 216-225.
8. Kulbok PA, Mitchell EM, Glick DF, et al. International experiences in nursing education: A review of the literature. *International Journal of Nursing Education Scholarship*. 2012; 9: 1-21.