

Perceptions toward Ward round and its Influence on Learning among Students of College of Health Sciences, Usmanu Danfodiyo University Sokoto, Nigeria

Umar Asmau Idris¹, Faruk U. Abubakar², Muhammad Anka Nasiru³

Department of Nursing Sciences, College of Health Sciences, Usmanu Danfodiyo University, Sokoto, Nigeria

Abstract: The main purpose of this study was to assess the perceptions of students of the College of Health Sciences (CHS) Usmanu Danfodiyo University (UDUS) towards ward round and the influence of their perceptions on learning. The study utilized descriptive cross-sectional survey design and selected 214 students of 400 and 500 levels of Bachelor of Nursing Sciences (BNSc) and Bachelor of Medicine; Bachelor of Surgery (MBBS). This research used Structure questionnaire for data collection, which was divided into four sections based on the objectives of the study. The study used 139 respondents as sample, however only 124 questionnaires were properly filled and returned for further analysis. The result of the study shows that respondents have positive perceptions of the ward round as an effective learning implement. Specifically, the respondents concurred ward round has a positive impact on students' performance. However, some factors such as inadequate time, number of students concurrently learning at a given place, excessive caution due to fear of making mistakes or harming the patient negatively affect students' participation in ward rounds. Consequently, the study recommends for the provision of skilled staff as tutors, use of sufficient time during ward round and use of few students at the same time who undertake to learn during the ward round.

Keywords: Perception, ward round, influence, learning, students.

I. INTRODUCTION

Ward round is an indispensable activity for the inter-professional health teams in the hospital sceneries [15], [16]. Ward round as a health activity, represent a multifaceted tasks needing not only medical familiarity but also communication abilities, clinical technical abilities, patient management abilities, and team-work abilities [15]. According to [19] the average day-to-day time spent on a single patient during ward round is estimated to be about 4-6 minutes, which permits health professionals to examine a particular client. In addition, ward round is a multifaceted occurrence in which several participants have varied concern-the nurse, doctor and patient experience ward round in a dissimilar way [15]. Ward-round is exceptional, in that, learning is delivered in a natural health-related setting; it is client-oriented rather than disease-oriented; it has an inherent objective of facilitating the apprentice's problem-solving and medical reasoning skills [5]. Bedside, ward rounds are the furthestmost patient-centered of all instruction avenues and they offer the most rich and dramatic stage on which learning can happen [4]. Apart from augmenting patient care, ward-rounds also afford a live and lively teaching experience related to the patients visited. Active participation by the learner affords the opportunity to improve interpersonal skills while interacting with patients and team members, and at the same time to gain experience dealing with the problem of real patients with real medical and social problems. [4].

Furthermore, [23] is of the opinion that all types of ward rounds (teaching ward round, review of the ward, traditional ward round and working ward round) are ways for teaching and learning. [14] is also of the belief that ward rounds provide a huge opportunity for inter-professional learning and informal continuing professional development not only for junior doctors in training but then also for the entire multidisciplinary team. However, North Sydney Department of

Health [20], opine that teaching ward round (TWR), an aspect of ward round mainly includes doctors who are registrars and expert that go on round from one patient to another in the ward to examine the understanding of medical students and other junior doctors. The idea is to train the young doctors on ways to recognize the disease and its management. Thus, this type of ward round limits vigorous learning for other health experts such as nurses, midwives, pharmacist, and other allied health professionals. Perception on the other hand denotes to the organization, identification, and interpretation of sensual data in order to symbolize and understand the gotten information [17].

In line with the foregoing, [20] proposes that effective learner is vigorous and strategic, skilled in collaboration, dialogue and producing knowledge with others. Additionally, the learner is able to advance goals and plans, observe his/her own learning and it is adaptable across contexts [20]. Furthermore, [4] argue that effective learning is profound learning which emphasizes on creating meaning and critical rational, and it has its foundation on a scientific standard of distinguishing, utilizing deductive reasoning and putting on concepts and methods to solve a hitherto un-encountered problem. The Scholars [20], [4] further argued that educators can improve deep learning by producing learning experiences that will ease the construction of meaning and the expansion of knowledge concerning Learners' individual mental process.

A study by [13]; to investigate the educational value of ward round for basic year 1 & 2 trainees in a big hospital in London, United Kingdom; shows that 42.5% of the participants felt that ward rounds were entirely service-oriented deprived of any teaching, 35% mentioned that there was a number of teaching during the ward round, and 22.5% mentioned that there was a combination of ward rounds, some with and some without teaching. Again, the findings show little time was devoted to teaching during ward round and a major amount of time was expended on administrative jobs. Additionally, study by [12] propose that ward round is a worthy clinical teaching approach and the pupils enjoy to take part in all activities throughout clinical teaching. Moreover, the respondents argue that learning is further healthy when tutors of student nurses specifically, and pupils of other health-related professionals in general develop plans to ensure their full partaking in ward rounds [12]. However, [18] are of the opinion that ward round does not supplement learning experience of pupils, that most nurses do not partake in ward rounds due to scarcity of staff and insufficient time.

In view of the above, there are few studies on the perceptions of students towards ward round and its perceived influence on learning among health professionals. There are few studies that focus on testing ward round variables in a single study. In short, most previous studies that examine ward round variables and their influence on learning mainly focuses on Europe and other African countries. Specifically, in Nigeria, there is not a single study to the knowledge of these researchers that examines ward round variables among students of CHS, Usmanu Danfodiyo University, Sokoto. Based on the foregoing, these scenarios created gaps for this study to fill in by conducting a further study.

II. METHOD

This study utilized cross-sectional descriptive survey research design to evaluate the perceptions of students of CHS, UDUS on ward round and the influence of their perceptions on learning. The research setting was CHS UDUS, Nigeria. The population of the study was 214, which included BNSc and MBBS students in 400 and 500 levels. The proportionate sampling technique, an aspect of probability sampling was used to divide the study population based on proportionate percentage of the two study groups (BNSc and MBBS). The respondents were selected randomly from each group based on their percentage. Slovincs formula was utilized to decide the sample size. Subsequently, 139 students were selected for the study. A structured questionnaire was adapted from [12] for the data collection. The questionnaire was structured into four sections. Section A consists of the socio-demographic data of the respondents while section B consists of students' perception on the concept of ward round as an effective learning tool. Again, section C consist of the impacts of ward round on students' performance, and Section, D involves factors influencing students' participation in ward rounds. Furthermore, consent was obtained from the respondents through offering the respondents consent form, which they duly filled and signed. Again, the filled questionnaires were returned to the researcher for further analysis. The data was sorted and analyzed using Statistical Packages for Social Sciences (SPSS).

III. DISCUSSION OF FINDINGS

Table I shows that majority of the respondents are within the age range of 20 -24years (72.5%), while the least respondents are within the range of 30-40years (7.2 %). Additionally, majority of the respondents are males (58.8%). Similarly, with regards to the respondents' level of study, Table 1 shows that majority of the respondents are in level 500 (50.8%). Again, concerning the ethnic background of the respondents, the result of this study shows that majority of the

respondents are Hausas (46.7%) and the least is the Igbo (4.8%). Furthermore, concerning the religion of the respondents, the result shows that majority of the respondents practice Islam (84.6%).

TABLE 1: DEMOGRAPHIC DISTRIBUTION OF THE RESPONDENTS

VARIABLE	BNSc		MBBS	
Age (in years)	Frequency	Percentage	Frequency	Percentage
20-24	19	76	71	71.7
25-29	4	16	21	21.7
30-40	2	18	7	7.1
Total	25	100	99	100
Sex				
Male	12	48	61	62
Female	13	52	38	38
Total	25	100	99	100
Level				
400Level	14	56	47	47.5
500 Level	11	44	52	52.5
Total	25	100	99	100
Tribe				
Hausa	15	60	43	43.3
Fulani	6	24	17	17.1
Igbo	1	4	5	5.1
Yoruba	3	12	34	34.4
Total	25	100	99	100
Religion				
Islam	19	76	86	86.9
Christianity	6	24	13	13.1
Total	25	100	99	100

The result of this study as indicated in Table 2 shows that students of CHS UDUS have a positive perception of ward round as an effective learning tool with an average mean of 3.4. They agree that ward round is a complex clinical activities providing high-quality care in the clinical area. That, ward round is an way for enabling the trainee’s problem-solving skills in the clinical area. Again, the result indicated ward round as a way for assimilating theory and practice in the clinical area. Equally, the findings showed ward round as way for clinical thinking in the clinical area, and the process was proven as teaching taking place within the context of patient in the clinical area. This result is in line with a study by [12] at Ahmadu Bello University Teaching Hospital, Shika- Zaria. It is also in line with the study by [23] who observed that ward rounds were avenues for teaching and learning but in different ways. Contrary to the views of the above studies is the opinion of a study conducted by [13]; on the educational value of ward rounds for junior trainees in a large hospital in London, United Kingdom.

Table 2: Students’ Perception of the Concept of Ward Round as an effective learning tool.

S/N	ITEMS	MEAN	SD
1.	Complex clinical activities proving high-quality care	3.7	0.6
2	Avenue for facilitating trainee’s problem-solving skills in the clinical area	3.3	0.8
3	Avenue for integrating theory and practice in the clinical area	3.4	0.5
4	Avenue for clinical reasoning in the clinical area	3.2	0.3
5	Teaching taking place in the context of patient in the clinical area	3.5	0.4

Furthermore, concerning the impact of ward round on students’ performance, the result in Table 3 also shows that the respondents agree that the ward round has a positive impact on students’ performance. In addition, the respondents established that ward round has impacts on students’ understanding and clinical decision, problem-solving abilities, capability to interconnect effectively, intelligent capacities, teamwork, and students’ self-confidence in discharging practical events. The foregoing agreement was with an average mean of 3.3. The preceding result is in line with that of

[11] who indicated that ward round teaching offers a valuable chance for students to learn clinical facets of patient care as well as moral values. Additionally, the findings are in line with that of Lees [14], who opined that ward rounds offer huge prospect for inter-professional education and informal ongoing professional development. Likewise, the result of this study is in line with that of [16], who indicated that part of the rewards of ward round is the acknowledgement of the significance of collaboration among the medical professionals.

Additionally, findings of this research indicates that non-supportive attitude of the working staff, excessive caution due to fear of making mistakes or harming the patient, feeling of insufficiency, total number of students simultaneously learning at the site, too few prospects for students to inspect patients, and inadequate time are the issues that affected students' partaking in ward rounds, this agreement was by an average mean of 3.0. However, they disagree with a mean of 1.8 that ineffective teaching skill of the educator affects participation in ward rounds. The foregoing result is in agreement with the study by [12], which shows that few chances for students to inspect patients and number of students concurrently learning at a place affect their perception on ward round. Additionally, the findings of this research are in line with the previous studies by [9].

Table 3: The impact of ward round on students' performance

S/N	ITEMS	MEAN	SD
1	Understanding and clinical judgment	3.4	0.31
2	Problem-solving skills	3.0	0.28
3	Ability to communicate effectively	3.4	0.31
4	Intellectual capacity	3.2	0.28
5	Teamwork	3.5	0.32
6	Student's confidence in carrying out practical activities	3.1	0.29

IV. CONCLUSION AND RECOMMENDATIONS

In conclusion, this study establishes that the students of CHS UDUS demonstrated a positive perception of ward round and its influence on effective learning. However, some factors such as inadequate timeframe, number of students concurrently learning at a given place, anxiety of making mistakes or harming the clients negatively affect students' partaking in ward rounds. Therefore, the management and staff of CHS UDUS should intensify efforts in addressing the identified factors militating against effective learning. Based on the findings of this study, the researcher recommends that the time spent on ward rounds should be adequate for effective learning to take place. Additionally, the students should be encouraged to fully participate and be inquisitive during ward round. Finally, the hospital management and the staff in the ward should develop, implement and sustain the strategies that improves students' participation in ward round.

ACKNOWLEDGEMENT

I wish to express my heartfelt appreciation to my lecturers and co-authors that reinvigorated me to undertake this amazing study. I am really thankful to them for their support. Also, I remain thankful to my family for their moral support; I want to say thank you so very much once more.

REFERENCES

- [1] Al-Haqwi A. Determinants of Effective Clinical Learning: Student and Teacher Perspective in Saudi Arabia, 2012; 12(4), 33- 41
- [2] Acharya. V, Reyahi, A., Amis. S & Mansour, S. Do "trainee-centered ward rounds" help overcome barriers to learning and improve the learning satisfaction of junior doctors in workplace? *Advances in medical education and practice*. 2015; 6 (583), 13-22
- [3] Amann, Chua, James & Sanga. The Benefits and Barriers to Nurses Attending Ward Rounds, *Nursing Review-April*, 2017; 9(35), 63-74
- [4] Bassaw B., & Naraynsingh V. Ward- Rounds: role in clinical teaching and learning in contemporary medicine, *West Indian Medical Journal*, 2011, 60(6), 37-43
- [5] Braungart M. & Braungart G. *Applying Learning Theories to Healthcare Practice*, 2007; 17-22

- [6] Creswell, J. W. Research design: Qualitative, quantitative, and mixed methods approaches, Sage publication, Lincoln. 2014; 67-89
- [7] David L, Social Development Theory. Vygotsky, 2014; 8-19.
- [8] Dolmans & Durak. Factors adversely affecting student learning in the clinical learning environment: a student perspective, Education for Health Change in Learning & Practice, 2017; 21(3) 2-27.
- [9] Durham S, & Sorrell J. implementing a new faculty workload formula, Nursing Education perspectives; 2007; 28(4), 165-184
- [10] Ghazi A. & Adel Y., 2013, Development of assessment tool to measure students' perceptions of respiratory care education programs, J Family & Community Med: 2013; 20(2): 166-122
- [11] Haghani. F, Arabshashi. S, Bigdeli. S, Alavi. M & Omid. A, Medical Academia Clinical Experiences of Ward Round Teaching Curriculum, Advanced Biomedical Research Journal, 2014; 2(13), 2-5.
- [12] Ladan M., Musa H., Balarabe F., Aliyu A., Sani D., Adamu A,... Ladan F. Undergraduate Students' Perception Towards Ward Rounds as a Clinical Teaching Strategy and Perceived Impact on Academic Performance in Zaria, Nursing and Midwifery Council of Nigeria Research Journal, 2016; 1(4)21-29
- [13] Laskaratus M. F., Wallace. D, Gkotsi. D, Burns. A, & Epstein. O, The Educational Value of Ward Rounds for Junior Trainees, journal of medical education online; 2016; 20(1), 11-16.
- [14] Lees. The Nurse's Role in Hospital Ward Rounds, Nursing Times; 2013; 109(12), 12-14,
- [15] Leino K, Mattilla E, Collin P, & Sand J, The Nurse as the Discussion Opener During Ward Rounds: An Observation Study in the Wards of a Finnish University Hospital, J Nurs Health Stud, 2017; 2(2). 61-74
- [16] McLeod, B., & Harden, H. Clinical teaching strategies for physicians. Medical Technology Publishers. Brisbane. 2005; 173-89.
- [17] Mohammadi S. & Baniroostam T. A Perceptual Meta-model based on the Ontology of Mental Models, The International Journal of Humanities & Social Studies, 2015; 3(11), 206-231
- [18] Ndie E C, Ogwa E, Oko J & Emeh A, Assessment of Nurses Opinions on Participation in Ward Rounds in Ebonyi State, International Research Journal of Public and Environmental Health, 2015; 2(1), 1-3
- [19] Nikendi C, Huhn D, Pittiu G. Trost Y., Bugaj T.J., Koechel .A & Schultz J-H. Students' Perceptions on an Inter-professional Ward Round Training – A Qualitative Pilot Study, Journal for Medical Education, 2016; 33(2), 111-123
- [20] NSW. Multidisciplinary Ward Rounds, NSW Department of Health/ 2011; 1-7.
- [21] Royal College of Physicians & Royal College of Nursing, RCP/RCN, Ward Rounds in Medicine: principles for best practice, 2012; 1-15.
- [22] Seifert K & Sutton R, Major theories and models of learning, Lumen Educational Psychology, 2015; 3-18/
- [23] Shankar P.S. Ward Rounds in Medicine, RGUHS J Med Sciences, 2013; 3(3)135-137,
- [24] Talbot. M, An interview study of the working ward round as instrument of experiential learning in postgraduate medical education, Journal of Vocational Education and Training; 2000; 52(1), 149-159,
- [25] The National School Improvement Network, NSIN, Effective Learning, 2002; 1-19
- [26] Watkins C., Carnell E., & Lodge C., Effective Learning in Classrooms, 2007; 17-19, Paul Chapman Publishing, London,