



Workplace Healthcare

Human-Centered Nursing Education and Practice

The emotional being of patients and their family is the best indicator for human-centered care. Regardless of busy hospital schedule, it is important not to overlook the human aspect of nursing. As long as one could be tactful and observant while maintaining his or her professionalism and briskness, human-centered care is definitely feasible.

When institutions implant people-oriented concept early in the nursing education, students will be prepared when they are confronted at the clinical settings. They will bear in mind that love and compassion can nourish their minds and broaden their views.

In planting the seed of human-centered practice through nursing curriculums, humanitarian care is introduced along with clinical studies. In near future, the seeds will grow in the hearts of nursing students when they enter the workforce.

Shou-Jen Peng, Associate Professor of the Department of Nursing, Tzu Chi College of Technology

Human-centered and patient-centered ideas are frequently advocated concepts in Taiwan and international healthcare policy and nursing education. All clinical professionals believe they have implemented people-oriented concept. However, as healthcare becomes more science and technology driven, it seems inevitable to “dehumanize” patients in order to streamline healthcare in both Taiwan and the world. Let us review the following situations that give rise to conflicts.

Caring and Efficiency – A Dilemma

This is a common scenario in the early morning hours at the hospital rooms; night shift and morning staffs are busy preparing shift exchanges while waking up families who stay overnight in the hospital rooms.

“Good Morning! Rise and shine! Please put away your temporary beds and clean up so the rooms are ready when doctors and nurses do their morning rounds.”

One family member complained that the patient and the family did not get much sleep and they asked not to be disturbed when the doctors were conducting their morning check-ups. If we do not wake up the patients, then how do we do our work for the rest of the day? When there is conflict between standard work routine and specific patient request, what should the nursing staff do in order to be people-oriented?

Mrs. Chang gave birth two months ago.

She had gone through training about the benefit of breastfeeding. But being a first-time mom with a full-time work schedule, she does not have time to breastfeed. During her follow-up visit, she expressed fatigue, frustration and shame for not having enough breast milk for her baby. As a professional healthcare worker, we know all about the benefits of breastfeeding, do we fault her for not giving her baby the best? How do we handle the situation when there is a conflict between the mother needs versus the baby?

Chan is a seventy-six year-old patient hospitalized for lung cancer; his children told him that he had the flu. With a weakened and fragile health he asked, “I want to know if I would ever get better.” This is a very common situation for clinical nurse staff. Do we respect a patient’s right to know? Or do we respect the wish of a patient’s family? To tell or not to tell – which one is people-oriented?

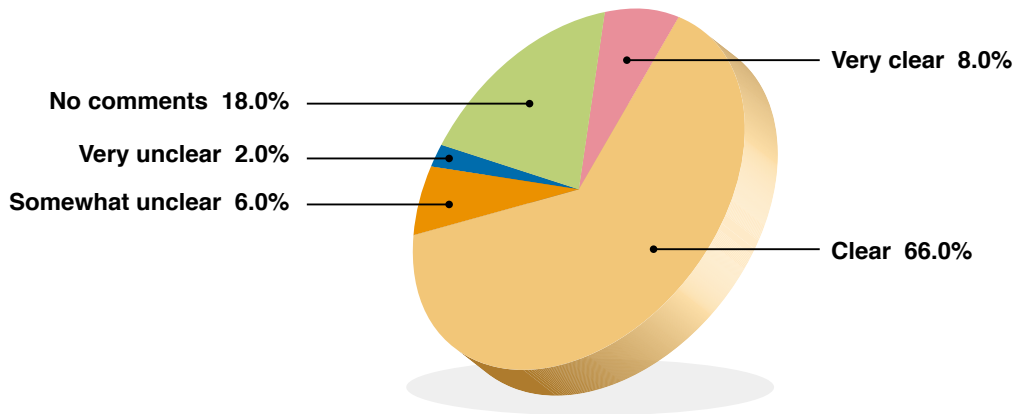
As healthcare becomes more advanced and technologically focused, it highlights the increasing concern of dehumanizing individual health cases. All of the above scenarios are common; thus many international academics are asking healthcare providers to emphasize people-oriented services. Where would we seek care when we are ill and are most vulnerable? We probably want nothing less than an institution with the latest, safest technology, friendly service, excellent work ethics, a comfortable environment with ease of accessibility, and etc. Simply put, we want

Basic Data Analysis

Gender	Number of People	%
Male	12	1.8
Female	652	98.2
Total	664	100.0
Education	Number of People	%
College	221	33.3
Bachelor	271	40.8
Master or Phd	172	25.9
Total	664	100.0
Nursing Rank	Number of People	%
N	158	23.8
N1	122	18.4
N2	229	34.5
N3	99	14.9
N4	56	8.4
Total	664	100.0
Job Title	Number of People	%
Registered nurse	457	68.8
Deputy head nurse	46	6.9
Head nurse or higher	70	10.5
Case manager	28	4.2
Nurse practitioner	50	7.5
Others	13	2.0
Total	664	100.0
Department	Number of People	%
Internal medicine	132	19.9
Surgical	104	15.7
Emergency and critical care	161	24.2
Pediatric, G&B	60	9.0
Community service	15	2.3
Functional team	17	2.6
Dialysis center	14	2.1
Administrative	24	3.6
Others	137	20.6
Total	664	100.0

Q1

Are you clear about the concept of "human-centered" philosophy? (N = 664)



a place that understands our pains and makes us feel at ease.

As healthcare providers are aware of dehumanizing practices and begin to advocate the value of people-oriented care, it is a challenge to balance a people-oriented practice against cost, efficiency and a technology-driven healthcare system. Nursing is a profession that emphasizes both art and science. Since the beginning of the nursing profession in the 19th century, people are the clientele and caring is the core belief of people-oriented values. Nursing professionals are at the front line of patient care and are keys to implementing people-oriented practice. By offering them with the best education in people-oriented nursing, we ensure that such practice will continue in the future.

The cover story for this Tzu Chi Nursing Journal surveyed Tzu Chi Hospitals clinical

staff regarding their views on "People-Oriented Nursing Education and Care" to understand the areas of improvement in nursing education and clinical studies. Amongst the 664 participants in the survey, 98.2% are females; most people hold bachelor or vocational bachelor degrees, at 40.8%; follows by two-year college graduates at 33.3%. Questionnaire participants are mostly nursing level N2 (34.5%), and only 9.4% are nursing level N4. Most of their professions are clinical nurses at 68.8%; 24.2% of them work in the emergency or critical care department, with internal medicine at 19.9% and surgery at 15.7%.

Knowing People-Oriented Care

The first question is about participants' understanding of the people-oriented

concept. About 74% of them answered with either clear or very clear, indicating staff's understanding of the principle; only 8% answered with unclear or do not understand at all; there are also 18% who selected no comments. Since most of the staff who answered with no comment or unclear worked as front line nurses, hospital managers can leverage job training to promote the concept. Of course, this distribution could also reflect the busy schedule of nurses who have to dehumanize their practice in order to get their job done.

Nursing Curriculum Cultivates Humanistic Values

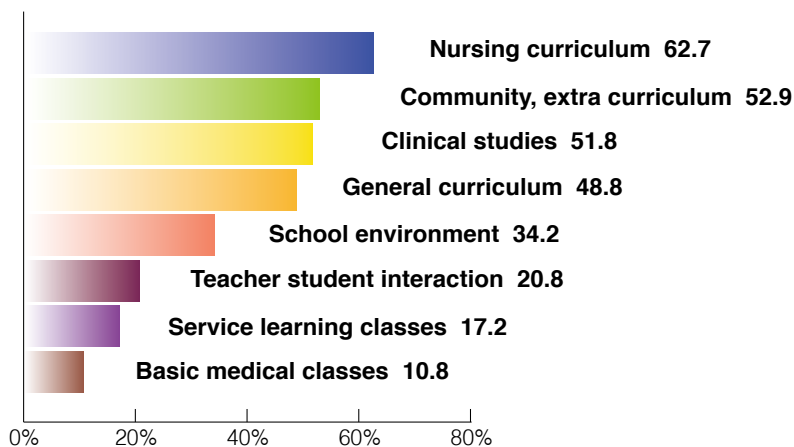
The second question tries to understand if the participants' past

education helps to nurture people-oriented values. Participants can select multiple answers. The top five results are as follow: nursing curriculum (62.7%), community and extra curriculum activities (52.9%), clinical studies (51.8%), general education curriculum (48.8%), and school living environment (34.2%).

Nursing scholar, Day (2005) points out that community experiences allow nursing students to understand and become familiar with their professional values. For example, entry-level students think nursing profession is to help others while senior level students realize the true meaning of caring. Tzu Chi College of Technology' general curriculum, for example, is designed to incorporate Tzu Chi's humanity culture, life education, tea and flower arrangement, and other programs

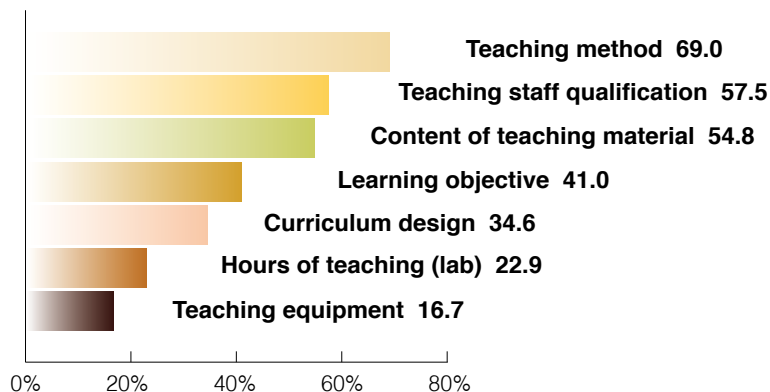
Q2

Does nursing education help in cultivating the concept of "human-centered" ethics? (N = 664, multiple choices allowed)



Q3

What are the potential areas of improvement in nursing education? (N = 664, multiple choices allowed)



to infuse the concept of respecting life. Nursing classes emphasize on ethics and care in addition to creating a humanistic environment that encourages students to gain volunteer experiences. Based on participants' information, many nursing students learn most from social clubs and extra curriculum activities, indicating the power of non-traditional classes. For example, our students participated in aboriginal community service to help others with their professional skills. In return they are emotionally connected with the local community. Recognition from the Education Department is rewarding but the personal growth and values instilled on students are priceless.

In addition, the Education Department has been encouraging teachers to combine general education, basic medical courses and nursing courses together in building student character. Price (2009) points

out students observe the behavior of their teachers and clinical mentors; some students are negatively affected by the unpleasant condition in internship and results in conflicting emotions with the nursing profession. This is something the teachers need to keep in mind.

The third question is about potential areas of improvement in current nursing education to enhance the practice of people-oriented care. The top three selections are teaching methods (69.0%), teaching staff qualification (57.5%), and content of the teaching material (54.8%).

In order to cultivate students' people-oriented disposition, it takes more than traditional teaching method of dictating knowledge. Each student has a unique personality and learning style. Teachers need to respect their individuality and adjust teaching methods accordingly to include discussion, interaction, and self-study to

allow students to learn from case studies or actual practices. For example, elderly care classes teach students about the human aging process; experimental classes utilize equipment for students to experience how the elders move. In clinical classes, students take elders from day care to exercise center, help with their meals, and even give elder baths. All of the practical hands-on classes are to relate theories with practical learning.

Assistant Professor, Chi-Chun Chin (2006), points out the Institute of Nursing Education conducted an evaluation based on teachers' education, humanistic quality and practical experiences. Based on this survey, from a clinical staff's point of view, students expect teachers to have better humanistic nature and teaching skills to help instructing future nursing

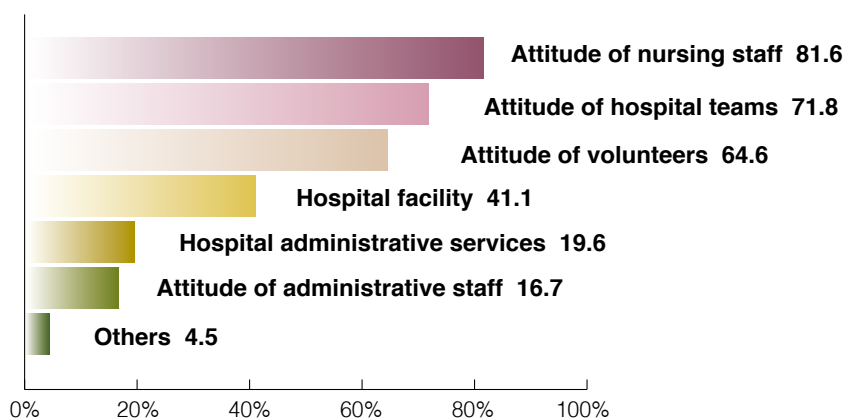
staff through creative teaching. With school's clinical training program and long-term planning, teachers can continue to advance their professional knowledge. Through experience sharing and auditing each other's classes, they can learn from each other. Aside from nursing courses, the cadaver teachers in human anatomy are also source of inspiration for students to understand the true values of nursing. Moreover, microbiological immunology teaches students to respect living beings and the ecology.

Recognized for Their Professionalism

The fourth question asks participants' opinion on which hospital position best exercise people-oriented care. Each

Q4

My unit's working environment vs. Non-nursing's working environment. Has the hospital achieved "human-centered" care? (N = 664, multiple choices allowed)



student has to select three answers. The results reveal that nursing staffs are highly recognized for their professionalism; up to 81.6% of participants praised about their work attitude, then followed by hospital team members (71.8%), volunteers (64.6%), hospital equipment (41.1%) and others.

Improving Collaboration and Hospital Policy

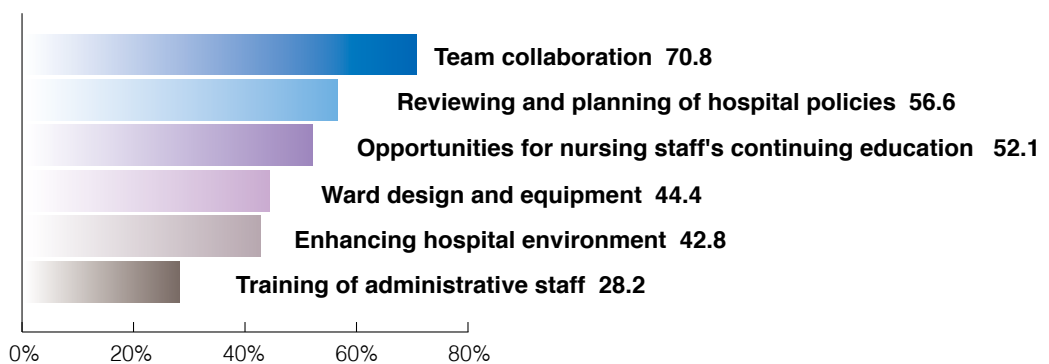
From the result of the question, one can notice the parallels between Tzu Chi's medical mission statement and the nurses' patient-oriented recognition. Through teachings of Master Cheng Yen, Tzu Chi's medical mission adheres the concept of "Patient-centered medical care that respects patients as teachers."

In providing hospital care, nursing staff are encouraged to develop their empathy

– "When others are hurt, we feel the pain; when others suffer, we feel the sorrow." Many nursing staff are mindful of patients' and their family members' feelings. Naturally, they are positive about nursing staff's people-oriented working attitude. Due to the limit of three choices, hospital facility, hospital administration services and administrative staff garnered fewer votes, but this is not an indication of problem as the next question reveals that they are not part of the areas that needs improvement.

The fifth question asks participants to think about areas of improvement in enhancing clinical practices of human-centered care. Although previous answers positively recognized the work of the hospital and team member's service attitude, participants still feel that a likely area of improvement is in team collaboration (70.8%). Indeed, good team cooperation

Q5 | What are the potential areas of improvement in the hospital? (N = 664, multiple choices allowed)



and communication are the most effective ways to provide patient care. For example, the current IPPC symposium at the hospital allows cross-departmental discussion of case studies and learning. The only way to avoid mistakes of transplanting HIV infected organs such as the case that occurred in one of the Taiwanese hospitals, the entire staff has to check the process and procedure thoroughly to ensure patient safety – this is fundamental of human-centered care.

Other areas of improvement include reviewing and planning of hospital policy (56.6%), continuing education for nursing staff (52.1%), assessing hospital environment (42.8%), improving ward design and equipment (44.4%), enhancing hospital environment, improving training of administrative staff (28.2%), and others. All of these are related to hospital policy, and it is an area closely linked to patients during their hospital visits. Examples are long wait-time at the waiting room or at the examining room, crowded examining rooms, confusing hospital floor map or complicated registration process and etc. Departmental managers can find areas of improvement by playing the role of patients going through the hospitals processes and procedures.

Which health institution would we visit when we are sick and emotionally vulnerable? Aside from considering professional skills and reputation, people also expect friendly service, good ethical

practice, safe and up-to-date equipments, comfortable environment and convenience of visit. Based on this survey, participants all have people-oriented attitude, especially amongst the clinical nursing staff. This most encouraging result indicates that this mind-set was cultivated early during their nursing school program.

The theme of the survey focuses on patients' concern regarding "Human Centered Nursing Education and Practices", where nurses are keys to implement the people-oriented concept at the clinical settings. We believe that if we treat nursing students and staff with people-oriented attitude in their education and the work environment, they will pay it forward by implementing people-oriented care in their work settings.

In order to continue the effort of inculcating the concept of people-oriented nursing practice, the school is responsible for helping students to topple rigid nursing stereotypes and build on professional values. During nursing clinical studies, educators need to help students deal with conflicts between professional values and team management (Maben, Latter, & Clark, 2006). Through these questionnaires, we confirm our efforts in nursing education and hope that it will continue to help students to grow their humanistic nature while not losing their original passion as they enter the workforce.

To Accept the Elderly and Learn from Them

— Senior Citizen Care Station

Chuan-Hsiu Tsai, Associate Professor of the Department of Nursing,
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Where there is a need, there is a nurse. Nursing education is about training in both humanistic nursing and professional knowledge that adapts with the development of society and health care. Social changes, population structure and disease patterns are factors that affect nursing care. Hualien is a county with aging and migrating population. Students not only need to practice their profession in the hospital, but also be part of community health and long-term care rehabilitation solution. These are two important issues in our education.

Geriatric Care and the Senior Citizen Station

Tzu Chi College of Technology's Department of Nursing was formed in 1989 by Master Chang Yen to train professional nurses. In 2001, a two-year college nursing program was established. It opens up the development of non-emergency medical training in the community.

In addition to the basic clinical courses such as internal medicine, surgery, gynecology, pediatrics, psychiatry, community and long-term health care were added based upon the needs of the locals. The program is designed to teach students skills, and to understand the community care and long-term care programs. About 80% of cases that require long-term care reside in the community, and only 20% are in the hospital. With the establishment of a national health insurance program, chronic diseases are on the rise. When young

adults move out to cities, the elderly are left behind in towns where geriatric and long-term care is lacking. Hence, in meeting community needs and coordination with the nursing program, the nursing department evaluated and planned the possibility of establishing a senior health care station. Upon obtaining funding from the Ministry of Education, a first senior station – "Tai-Chang Senior Citizen Care Station" – was established in Hualien.

Learning Life Experience & Wisdom from Seniors

The senior citizen station is a product of students' brainstorming. In traditional point of view, old age is often defined and associated with disability, weakness, degradation and loneliness. Few people adopt positive attitudes when they see the effects of aging. However, when students are involved in community activities, they have observed how seniors adjust their moods and physical needs. The main goal for students is to practice appreciation, thoughtfulness and kindness. By participating and interacting in the community, students learn from seniors' life experience and wisdom. The theories that students learn in school have to be practiced in order to transform knowledge into skills.

Due to low birth rate and small family size, majority of students left home to study at nursing school upon their graduation from junior high school. They have very limited working and social experience. It

becomes very important for students to have a chance to transform their learning into real practice so they know how to assist people in need. While studying at a boarding school, students have difficulties understanding and communicating with people who are not of their own generation. Once, a student said, “In the beginning, I thought a lot of grandpas and grandmas need my help. But, when I was at the senior citizen station, they all know a lot than I do. If we were to live in a place without electricity, we might die earlier than the seniors. They’ll be the one who survive, not us.”

Communication is a different level of learning. Students are too comfortable with the way they communicate in school, when they go to the senior citizen station, the first thing they learn is how to speak his or

her native tongue. Often times, the elders would exclaim, “Aren’t you a Hakka? How come you don’t know how to speak your own tongue?” At the beginning, students can only answer with an awkward smile. Gradually, students learn that smile and eye contact were the best communication strategy and method.

The axle of nursing care is health promotion and supporting a client’s day-to-day functions. However, if healthcare workers have always resided on school dorm and worked in hospital setting, how can he or she understand the day-to-day needs of their long-term care clients? This is a question I try to answer myself. But one day, I saw a student trying to learn how to cook with a volunteer mentor. All of a sudden, I had an epiphany. The students are not just learning about nursing care;



Senior Citizen Care Station practicum – throughout the interaction and communication with elderly, Tzu Chi College of Technology nursing students also discover the elderly are true life experts!



Volunteer service is the type of course that students could learn from assisting the elderly.

they are learning how to live.

Throughout the integration of school education and clinical practice, Tai Chung Senior Citizen Care Station has grown from one station to seventeen. It has been eight years since the first station was established. The activity center, supported by everyone and sponsored by the government, went from a small hut to a concrete structure. Half of those practicum students who helped to establish the first station have

been transferred to long-term care or elderly health promotion work. The head nurse at Tzu Chi Medical Center Community Health Center —Ching-Lan Lin – was a crucial member in creating community care in these communities. She also completed her nursing master’s degree in recent years. At last, I would like to say it is such a fortunate and blessing experience to be part of this project.

Finally, I would like to share the principles of senior citizen station with all of you:

Before teaching students the meaning of “sickness”, one must teach them about “life”.

Before teaching students how to “direct” patients, one must teach them how to “listen”.

Before teaching students about “cure”, one must teach them about “care”.