A METHOD OF FEEDBACK IN MEDICINE ADAPTED TO THE REALITY OF NURSING PLACEMENTS: STUDY OF ITS ACCEPTABILITY BY TRAINEES AND SUPERVISORS

K. Lechasseur¹, J. Goudreau², J. Gagnon¹, M.P. Gagnon¹, L. Côté¹

¹ Université Laval (CANADA)
² Université de Montréal (CANADA)

Abstract

Background: Nursing students require tools to facilitate their analysis of and reflection upon patients’ health status in order to develop quality care. The six-step SNAPPSS technique for case presentations (Summarize relevant patient history and findings; Narrow the differential; Analyze the differential; Probe preceptors about uncertainties; Plan management; Select case-related issues for self-study) is a promising tool and is well documented in medical courses, but needs to be adapted to the reality of nursing internships.

Methods: During a pre-internship meeting and by email, potential participants received information from the main researcher about the SNAPPSS method. Consenting students (n=10) and supervisors (n=10) from nursing baccalaureate applied this method during their internships and were interviewed by an assistant researcher. The main questions were the following: 1) How did the meetings based on the method take place? 2) What do you think of this method? Interviews were recorded and transcribed in summary form. A thematic analysis was carried out by a research professional external to the nursing profession and validated by the main researcher. All participants received financial compensation for the time dedicated to this research.

Results:

Students: Even though they were comfortable with this method, some students reported difficulties in completing certain stages. Others used it more flexibly, skipping some stages along the way. Be that as it may, the students had no problems in presenting uncertainties to their supervisor and they perceived this stage as a positive one. The main facilitators were the students’ comfort with a structured approach, given that the previous courses fostered student autonomy, openness to the method on the part of the supervisor, and regular or routine activities on the care unit. Barriers included a lack of opening on the part of the supervisor, along with time and workload constraints. The students suggested a wider distribution of the method among supervisors, a better understanding of the method’s use according to organizational settings, and the providing of opportunities for them to put their thoughts on paper as regards the first three stages before meeting with the supervisor.

Supervisors: A number of supervisors mentioned that this method was akin to caregiving procedure and was therefore a good fit with their supervisory practice. In their view, the SNAPPSS method leads them to use more precise terms in helping students give voice to their often inexplicit intellectual undertaking. Supervisors tended to ask the students questions whenever the information transmitted during certain stages seemed unclear or incomplete. The main facilitators identified for the use of the SNAPPSS method were the supervisors' capacity to foster the autonomy of students in their learning pathway and the method’s regular use as a means of more fully mastering it. Supervisors also recommended that students be invited to put their thoughts on paper as regards the first three stages.

Conclusion: This study made it possible to explore and confirm the interest of participants as regards incorporating the SNAPPSS method in nursing sciences internships. A future study will involve recording meetings between students and supervisors based on this method, thus deepening and documenting its influence on students’ clinical reasoning, as well as on the quality of supervisors’ feedback.

Keywords: Reflexive practice, nursing education, clinical placement, SNAPPSS.