

Nursing Model on Education 3: “Professional Learning Climate as a Patient Education Expert” and “Stepwise Searching and Problem-solving Educational Method ”

Fumiko Yasukata, RN, PhD (Faculty of Nursing, Fukuoka Prefectural University, Fukuoka, Japan)

Michiyo Oka, Miyako Oike, Fusae Kondo, Megumi Higashi, Chieko Yamamoto, Narumi Takiguchi, Emi Yamada, Hiromi Sanaki, Teruko Kawaguchi, Hiroko Shimomura, Yuko Hayashi, Momoe Konagaya, Takako Kobayashi, Kyoko Kodaira, Etsuko Yokoyama, Sanae Iha, Tomoe Inoue, Kazumi Oda, Sachiko Tange

[Objective]

The Patient Education Research Group has developed a “Nursing Model on Education”, which is composed of five elements. Among these elements, “Professional learning climate as a patient education expert (PLC)” and “Stepwise searching and problem-solving educational method (SPEM)” were identified. We report on the definitions and characteristics of these two elements.

[Methods]

Since 1994, 164 patient education cases have been analyzed in monthly meetings by the research group consisting of 14 nursing researchers and expert nurses. The inductive method was used in analysis. From the cases, the scenes in which patient’s behavioral modification occurred were extracted, the contents were described, and the elements were identified.

[Result and Discussion]

1) Definition of PLC

PLC is defined as “the behavior or mood of the nursing personnel backed up by professional knowledge and experience”. Moreover, PLC assumes three philosophical bases: 1) is patient-centered, 2) patients are different from one to another, and 3) patients do not change in the way that the nurse would like them to change. The present study extracted the following 10 elements of PLC: 1. show concern, 2. respect, 3. believe, 4. be modest in attitude, 5. create a relaxing ambiance, 6. show an attitude to listen, 7. talk with personal feeling, 8. show an attitude of moving ahead together, 9. show enthusiasm, and 10. humor and wit.

2) Definition of SPEM

SPEM is defined as “knowledge and skills of nursing personnel to solve problem with an open mind, through repeated confirmation according to the state of readiness in learning of patient”. The following four steps have been identified.

Step IV: Support for maintenance and habitualization of motivation and action

Objective: To ensure that the necessary self-management actions are continued long-term
 Category: 1. Technique of feedback for the treatment actions implemented
 2. Technique concerning specific methods for the maintenance and habitualization of the treatment actions

Step III: Support for solving difficulties encountered in treatment

Objective: Aiming to resolve the difficulties that the patient perceives, propose actions while listening to the patient’s opinions in a way that the patient can self-determine a method that suits him/herself.
 Category: 1. Technique to increase patient’s awareness
 2. technique to propose treatment method 3. technique to promote self-determination

Step II: Explore difficulties with treatment

Objective: Prime the patient to talk about his/her disease and daily life, and based on this information to explore the patient’s difficulty of incorporating self-management in daily life and the reason
 Category: 1. Technique of asking question 2. Technique of listening to the patient
 3. Technique of exploring difficulties 4. Technique of confirming difficulties

Step I: Building mutual trust relationship

Objective: Shorten the psychological distance with the patient to effectively promote patient education approach

Category	Subcategory
1. Technique of nurse to open up the patient	① greeting ②self-introduction ③ do not intimidate the existence of the patient
2. Technique of sharing psychological and physical grounds with the patient	① acknowledge the feeling of the patient ② wait for the person to be ready to talk
3. Technique of priming the patient to talk	① nurse asks question with concern, ② accepts the patient’s actions so far, ③ communicates own thinking as a nurse
4. Technique to provide chances for the patient to express him/herself	① respect patient’s wishes and values



3) Case Demonstrating the Relationship between PLC and SPEM

In the case of Mr. A who refused insulin treatment, the nurse respected the attitude of Mr. A for trying despite poor health and believed that the patient had the strength to recognize that his own condition required the initiation of insulin. Therefore the nurse took actions of “asking question with concern”, “accepting the patient’s actions so far”, and “communicating his/her own thinking as a nurse”. The nurse’s thinking was expressed in his/her attitude and mood, together with actions. The change in Mr. A to a positive attitude of measuring blood sugar was perceived as attributed to the complementary effect of PLC and SPEM.



Scene of finding out the patient’s thinking concerning hospitalization for the purpose of insulin initiation

Nurse’s thinking (PLC)	Nurse’s words/action(SPEM)	Mr. A’s response
I wonder what Mr. A is thinking. First of all, I wish to know her feeling. (respect, show attitude of willing to listen)	① Doctor recommends to start insulin. <u>Mr. A would you mind telling me what you wish to do in the future?</u> (ask question with concern)	② I don’t like insulin and going into hospital. I mean, if I start, then I have to continue forever....
Although the blood glucose has gone up, Mr. A has been trying hard. (believe, respect)	③ Up to now, you have not drunk alcohol; you have paid attention to your diet and <u>even worked hard with the exercises.</u> (accepts the patient’s actions so far)	④ Yes, I have been trying
It’s a worry that the data have not improved despite all the efforts (show concern, talk with personal feeling)	⑤ Despite your efforts, HbA1c is not getting any lower. <u>I think that this may mean we have come to the limit of oral medication. What do you think?</u> (communicating his/her own thinking as a nurse)	⑥ May be.
Since Mr. A has made many efforts so far, he can make it. He is someone who has the strength to be aware of his own condition. Let’s find a solution together. (believe, show attitude of moving ahead together)	⑦ In that case, <u>would you like to test by yourself and see how high your blood glucose is? Would you like to look at the results and then think about what to do in the future?</u> (give patient a chance to express him/herself)	⑧ Oh right, I have not measured my blood sugar these days. May be I shall measure it after quite a long while.

Step I Building mutual trust relationship – Priming technique –

4) Relation between PLC and SPEM

In the broad sense, “PLC” and “SPEM” are both skills of experienced nurses. However, PLC is an art that is the consolidated strength supported by the nurse’s philosophy and belief; while SPEM is the techniques that are “tools” translated from concepts. “PLC” and “SPEM” have a complementary relationship. The nurse’s philosophy and belief that form the background of PLC determines the will to be involved with the patient. A nurse who possesses PLC not only can talk to the patient more easily, but also sets his/her “will to be involved with the patient” into action by actively applying the SPEM that he/she possesses and trying to solve the patient’s difficulties together. Depending on the situation of the patient, behavioral modification may be achieved even though the PLC is weak or the SPEM is immature. However, in difficult cases such as when the patient has negative sentiments toward treatment or health personnel, without both “PLC” and “SPEM”, a good relationship with the patient cannot be built and behavioral modification is commonly not possible. In Japan, many patients find difficulties in communicating verbally of their own thinking. In addition, many patients do not think it proper to talk to health personnel about their own troubles and difficulties they have in daily living. For health personnel without PLC, there may be a cultural characteristic that a dialogue with the patient is difficult to establish. For this reason, in the training of a patient education specialist, in addition to achieving “SPEM”, education to acquire a high level of “PLC” is indispensable.

