

EDUCATIONAL INNOVATIONS

Implementation of the Essential Elements of Service Learning in Three Nursing Courses

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Service learning is a teaching strategy that balances meaningful service to the community and the learning goals of nursing students. This balance between service and learning benefits both the students and the community (Ciaccio & Walker, 1998; Hales, 1997; Sigmon, 1994). Service learning is a partnership through reciprocity and reflection. It empowers nursing students to experience community leadership, prepares them for future nursing roles, and provides a valued service to the community.

It is only recently that the nursing profession has begun to implement service learning as a teaching method (Norbeck, Connolly, & Koerner, 1998). Unfortunately, confusion still exists between traditional nursing clinical experience, experiential learning, and service learning (Ciaccio & Walker, 1998). However, the essential elements of service learning distinguish it from traditional methods of nursing education. According to Greenberg (1995), Seifer (1998), and Shah and Glascoff (1998), these essential elements are:

- Meaningful service.
- Reciprocity.

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- Development of leadership.
- Reflection.

The purpose of this article is to describe the implementation of the essential elements of service learning in a project that involved three nursing classes (i.e., nursing leadership, community health, and pediatrics) and collaboration with several community agencies.

Meaningful Service

It is essential in service learning that the service project has meaning to the community and the students. This meaningful service should not take the place of jobs but should be a useful service that otherwise would not be completed (Peterson & Schaffer, 1999). To achieve this essential element, the Division of Nursing at Stephen F. Austin State University (SFASU) formed a community coalition that met for the purpose of discussing the health care needs of the community. At the first coalition meeting, a Texas Department of Health (TDH) representative proposed that nursing students implement a door-to-door tuberculosis (TB) screening project with the TDH. Recent case findings of active TB identified high-risk areas in two low-income minority neighborhoods in the local community. In previous projects, TDH staff members had to work overtime to complete case finding (Clark, Cegielski, & Hassell, 1997). At the coalition meeting, TDH representatives and nursing faculty conceived a partnership that would allow nursing students to plan and implement this community service to meet the learning goals of three nursing classes, as well as meet the service goals of the TDH.

Reciprocity

Following the initial meeting, the faculty met with community agencies to discuss the proposed project regarding the element of reciprocity. Reciprocity is the value for both the student and the community. Questions of value for this project included:

- Would this project meet course objectives?
- Would this project be feasible for students to accomplish in a semester?
- Would there be sufficient community and university resources available?
- Would there be follow-up resources for the target population referred for evaluation and treatment of a significantly reactive skin test?

Course Objectives

Since 1993 the Division of Nursing has used service learning as a teaching strategy. Evaluating previous service learning experiences involving junior and senior nursing students, faculty gained valuable information regarding effectiveness of and areas for improvement in satisfying community needs and facilitating achievement of course objectives. Previously, fourth-semester leadership and community health courses had used joint clinical experiences successfully as a means of incorporating service learning projects. The addition of a third course, pediatrics, was a new step. The demographics of the neighborhoods to be screened suggested that the majority of the population were families with children, which would provide an excellent experience for students in the pediatrics class. After reviewing the course objectives, faculty considered the community need for TB screening and follow up as a mechanism to achieve the

course objectives in the leadership, community health, and pediatrics courses.

Semester Feasibility

Based on the size of the neighborhoods, it was agreed that two predominately Hispanic neighborhoods would be targeted. Door-to-door screening in 1 week was considered manageable for the number of homes and anticipated numbers of the target aggregate in these neighborhoods. Follow-up health histories and referrals, according to the projected number of reactive skin tests, would be feasible for the pediatrics course students to complete during a following week. All the tasks of the project could be accomplished within the time constraints of a semester's schedule. It is essential that service learning activities can be accomplished successfully in a semester to prevent student frustration and feelings of inadequacy (Peterson & Schaffer, 1999).

Human Resources

Each team would require an RN, a Spanish interpreter, and a nursing student. To satisfy an appropriate faculty-to-student ratio, five faculty members teaching senior-level courses and the director of the division would need to be involved. Forty students (the total of all three courses) would be provided clinical time to participate in this project. In addition to the one local TB Elimination RN and a paraprofessional, the TDH committed TB Elimination RNs from the entire region to participate during project implementation, scheduled so one nurse would work only one or two evenings.

Subsequent discussions between the TDH and nursing faculty identified another partner, a local nonprofit agency, Health Horizons, which serves the needs of the HIV population. Health Horizons committed the staff member responsible for TB case finding related to HIV management. It was planned that students would solicit volunteers from the community to fill the interpreter team position.

The TDH TB Elimination Managers and a masters nursing student who had leadership experience with similar projects as part of her coursework agreed to be available for expert consultation during project implementation. The partnering agencies committed their key resource people to participate in student orienta-

tion. Students were given lists of resources, including contact personnel from each agency. Thus, commitments were made so adequate and appropriate personnel would be available to students.

Fiscal Resources

Fiscal resources (i.e., supplies, transportation to the site, marketing) were pooled and committed during group meetings. The participating faculty had received a minigrant from Stephen F. Austin State University's Center for Service Learning and Eldercare, which would provide funding for a student worker and transportation to the project site. The Division of Nursing also obtained a grant from the Aetna Foundation, which provided funds for supplies and marketing. The TDH supplied materials for Mantoux testing (i.e., tuberculin-purified protein derivative, ice packs for transporting the vaccine, alcohol and cotton swabs, forms for recording standardized TDH TB data to be collected, educational materials for participants and the target population).

In a previous door-to-door screening project, incentives were used successfully to encourage individuals to be home when the screeners returned 48 hours later to read the results (Clark et al., 1997). As the grant monies did not cover the cost for incentives, students needed to ask for community contributions to cover this cost. In previous service learning experiences, students had been able to raise funds through the support of the community. Fund raising is an invaluable experience for leadership and community nursing students because it is a mechanism for increasing the numbers of community partners involved in a service project.

Health Horizons had funding available from a grant for follow-up screening and chest x-rays. Following a meeting with the TDH, Health Horizons, and the faculty, it was agreed there was adequate financial and material support both in reality and potentially to make the project feasible.

Development of Leadership

From the faculty's perspective, the development of the students was a priority outcome. The goal of the faculty was to enable and empower the students to plan, implement, and evaluate this project to

develop the students as community leaders. To facilitate this development, the following occurred:

- A TB orientation day was provided for students.
- Faculty agreed to reorganize courses for clinical hours and some course content.
- Community agencies and faculty agreed to grant project ownership to the students by relinquishing decision making to them following the orientation.

Orientation

An all-day clinical orientation was held for the students at the beginning of the semester, in which each agency's key resource people participated. Time was scheduled after the completion of the orientation to allow students to begin their organization and planning.

Course

The courses were revised to meet students' learning needs so they would be able to successfully complete the project. For example, in the nursing leadership class, the course content on planning was moved to the first lectures. In addition, in that class, a time was planned for student discussion regarding the project. In the community health and pediatrics courses, tests were to be given on the content from the orientation. Pediatrics course students practiced obtaining health histories from each other during laboratory time. Approximately one third of total required clinical hours in the leadership and management and community health classes were allotted for the project. The pediatrics class allotted one tenth of the total required clinical hours.

Relinquishing Decision Making

For students to experience community leadership, there was a need to grant them ownership of the project by relinquishing decision making. The faculty and community agencies discussed this at each of the preliminary planning meetings. Based on experiences with other service learning projects, relinquishing decision making initially was difficult for faculty and community agencies. Agency staff and faculty agreed to act as resources for students and were very supportive of empowering the students to be the leaders in the experience, realizing it would

require a conscious effort to achieve this goal.

Reflection

Reflection is a key element of service learning. It is an intentional, systematic processing of the service experience (Seifer, 1998). To integrate reflection into the courses, reflection assignments (i.e., verbal and written) were outlined in the three course syllabi, and points were assigned for completing them as part of the course grade. Weekly anonymous written reflections would be collected by the student assistant from the Center for Service Learning at SFASU. A debriefing session was scheduled immediately after the project for verbal reflection during class time. As part of the evaluation and final reflection, student presentations were given at a luncheon for the community agencies, volunteers, students, and faculty.

"Joining Hands for Health: Stop TB"—The Experience

Orientation was held January 28, 1998, with the key community agency personnel, students, and faculty participating. At the orientation, students volunteered to be members of four committees. In a mere 5 weeks, students planned and prepared for the implementation phase of the project. Actual screening occurred in the sixth week.

Prior to the departure time for the neighborhoods each evening, students attended inservices to remind them of important information and, after the first night, to brief everyone on progress. The start time planned by the students was 5:00 p.m. This time was chosen to find most members of the target population at home and to complete each evening's community work before dark. A supervisory team of students circulated throughout the entire neighborhood in a loaned rescue truck to coordinate activities, solve problems, and maintain safety, incorporating the use of two-way radios, which were valuable assets. Ten teams, consisting of a volunteer interpreter, an RN, and a student, followed assignments and schedules of homes to visit and drop-off plans. Teams were transported simultaneously in three vans supplied by

SFASU. For additional coordination, the van drivers and one student in each of the vans functioned as an adjunct to the supervisory team.

Mantoux tests were placed on Monday and Tuesday evenings, and results were read on Wednesday and Thursday evenings, respectively. Each person in a home who was present for the reading placed his or her name in a box for a drawing of one of 34 \$25.00 grocery and gasoline certificates, which were awarded on Thursday evening. On return to the university each evening, as participants ate, student coordinators collected data, reorganized and distributed supplies, adjusted map assignments, and evaluated the day's progress.

On the fifth day, staff from the TDH and Health Horizons returned to the community to attempt to read the results for some of the individuals who were missed. Following compilation of information on significantly reactive skin tests, third-semester pediatrics course students returned for two evenings with teams to provide referrals, obtain histories, and provide additional TB education. The process followed a similar pattern as the original week, except only one van was needed.

During the 4-day implementation, the teams visited 169 households (84% of homes) and tested 278 individuals (79%) in those homes. Eighty-one percent ($n = 226$) of the results were negative, 12% ($n = 32$) were positive, and 7% ($n = 20$) were not available to be read. Of the 32 individuals who tested positive, 14 were started on medication, and 6 had symptomatic follow up. The remainder either moved or refused treatment.

Reflections

The student evaluations of the service learning experience were very positive. To summarize students' reflections, as a result of this project, students learned about:

- Cultural diversity.
- Themselves.
- Skills for public health.
- Organization.
- Others.
- Kindness of others.
- Collaboration.
- Fund raising.
- Community spirit.

- Cooperation.
- Soliciting volunteers.

As one student wrote:

I definitely can say that this project really opened my eyes to the needs of this community and how to assess, plan, implement, and evaluate a particular area of the community before and after the project was finished. I, like most people, learn by experiences, and I can honestly say that this project instilled ample amounts of worthwhile information that I hadn't known before, that I will carry with me throughout my career, as well as my life.

At the celebration luncheon at the end of the semester, community agency staff, volunteers, faculty, and students were asked to reflect verbally on the service learning experience. The students presented the outcomes of the project, what they had learned, and recommendations for future projects. The community agency staff and volunteers then presented their perspectives, and their positive comments were overwhelming. The service learning had provided the necessary resources to screen individuals in at-risk neighborhoods and had made the experience enjoyable for everyone.

Summary and Conclusions

The students' creativity, enthusiasm, energy, and excellent planning skills made a tremendously positive impression on the community agencies that participated in this project. The students applied principles of:

- Epidemiology, including collecting meaningful descriptive data.
- Community and family intervention.
- Community partnerships.
- Leadership.
- Cultural competence.

As students visited the homes of families of different ethnic and socioeconomic status than themselves, perhaps the most poignant outcome was the opportunity for students to experience cultural sensitivity, relativity, and accommodation.

Implementing the essential elements of service learning provided the foundation for a successful service learning experience. It took the time, energy, and commitment of all involved, but the end result was an educational experience that bene-

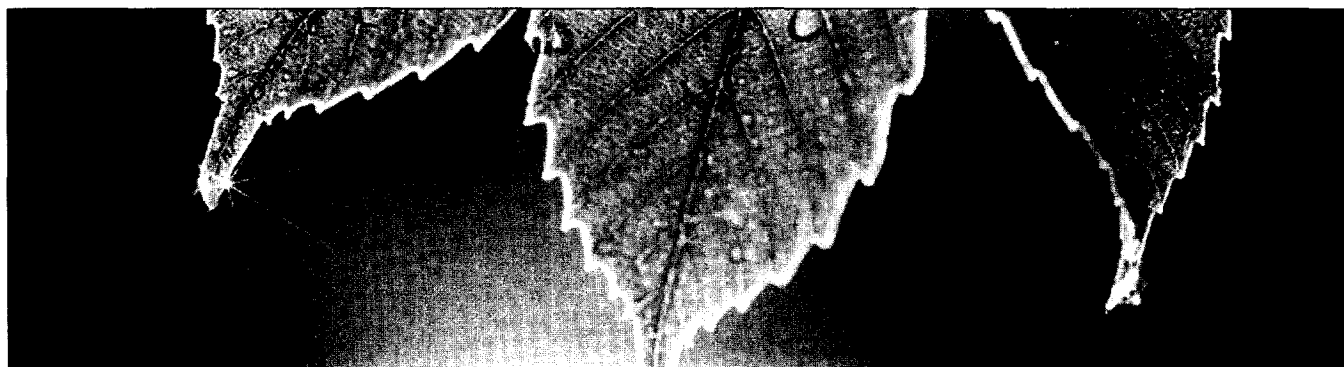
fited students, faculty, and the community. Service learning presents an effective, unique, and valuable means for nursing students to master the objectives of community health, leadership and management, and pediatrics courses, and to prepare to function in a health care environment that demands partnering with the community to use resources more effectively to promote public well-being.

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