

Phone Visiting as a Novel Clinical Experience for Healthcare Students During COVID-19 and Beyond

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Abstract

During the COVID-19 pandemic, there was a need to utilize innovative clinical placements for healthcare students. The Saskatchewan Polytechnic Continuing Care Assistant (CCA) Program created a five-week phone visiting program to meet the clinical needs of CCA students and to assist older adults who were experiencing social isolation during the COVID-19 pandemic. Student evaluations from the project were analyzed using Braun and Clarke's (2006) thematic analysis and resulted in three themes: building communication skills, communication as your job, and older adults as people. This program was successful in providing students with the opportunity to practice communication, learn the importance of effective communication in the workplace, and view older adults from a new perspective. The phone visiting program was beneficial for both students and the older adults involved; therefore, it would be a beneficial addition to health science programs as part of clinical or communication classes.

Keywords

Older adults, clinical experience, healthcare students, phone visiting, program evaluation

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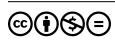
Introduction

Finding clinical placements for healthcare students has been an ongoing challenge that increased exponentially with the additional regulations of the COVID-19 pandemic. To address this challenge, the CCA Program in Regina, Saskatchewan created a phone visiting program that paired CCA students with older adults in the community for weekly phone calls as an alternate clinical experience. Implementing a phone visiting program met students' clinical needs for completing their course requirements and also provided social interaction for older adults who were socially isolated during the pandemic. The phone program afforded these students opportunities to work on their communication skills without the distraction of the personal care tasks found in a standard clinical experience. This paper will describe the phone visiting program along with the results of a thematic analysis of student evaluations. Creating innovative options for clinical experiences is essential for skill-building and ensuring successful program completion during the pandemic and beyond.

Background

The COVID-19 pandemic has significantly impacted healthcare students' clinical placements. In March 2020, Saskatchewan post-secondary institutions cancelled in-person clinical placements and replaced them with case studies, simulations, and other virtual means of learning (Bamford, 2020). In the fall of 2020 and spring of 2021, many students returned to clinical placements but there continued to be limitations. Students were removed from placements if there were COVID-19 cases, and many facilities did not accept clinical students.

The CCA Program (home care/special care aid, home health aide, resident assistant) is a nine-month certificate program offered at Saskatchewan Polytechnic. This program prepares unregulated care providers to work in a variety of settings, including long-term

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care facilities, home care, and some acute care units. As part of the overall clinical experience, the CCA program includes a 40-hour clinical experience in a home care or community setting. During the COVID-19 pandemic in March 2021, several agencies were unable to accept students for clinical experiences due to the increased risk of COVID-19 transmission to staff and residents. To facilitate a quality clinical experience for all students during this pandemic, faculty needed to find other options. Students without a traditional clinical placement were assigned to the phone visiting program to give students a practical chance to work on their communication skills.

Older adults were selected as the volunteers for the phone visiting program for two reasons: the CCAs primarily work with older adults, and older adults were experiencing social isolation during the COVID-19 pandemic. Older adults who were 60 years of age or older, retired, and living independently were included in the program. The phone visiting program aimed to help ease the loneliness many older adults were experiencing during the COVID-19 pandemic, as up to one-half of older adults experience loneliness, and this was worsened during the pandemic (Cho et al., 2019). Loneliness impacts older adults' physical health, with socially isolated older adults being more likely to experience depressive symptoms, sleep disturbances, and dementia (Cacioppo et al., 2002; Cho et al., 2019; Holwerda et al., 2012). The phone visiting program was one way to help older adults in the community during this challenging time.

One of the aims of this project was for students to develop their therapeutic communication skills, which is an essential part of working in healthcare. Therapeutic communication is a form of information transmission that builds interpersonal relationships, and it is an important clinical competency in patient-centred care (Abdollahimi et al., 2017). It is essential for students in healthcare fields to develop effective communication skills in order to build therapeutic relationships and provide the best quality patient care (Sancar & Aktas, 2019). However, nursing students reported knowing therapeutic communication skills but were insecure or unable to apply them in actual communication with patients (Dermani et al., 2020). Finding ways to develop students' practical therapeutic communication skills will benefit them and their patients/residents throughout their careers.

There is a paucity of research regarding phone interventions by non-medical healthcare professionals and their usefulness as a clinical experience. While many programs exist that match volunteers with older adults experiencing loneliness, little research has been completed on their potential as student clinical

experiences. Two studies were located that found positive results for older adults in short-term phone interventions through the lens of the volunteers participating in the phone program (Office et al., 2020; Van Dyck et al., 2020). Office et al. (2020) conducted research with medical student volunteers who called older adults one time for an average of 8.3 minutes. Another study also involved medical student volunteers calling residents living in care facilities weekly (Van Dyck et al., 2020). Both studies found that medical students viewed the phone calls as a positive, and most believed they were beneficial to older adults (Office et al., 2020; Van Dyck et al., 2020).

Ethics

This project received ethics approval from the University of Saskatchewan BEH#2884.

Description of the program

The phone visiting program was conceptualized through the team's preliminary qualitative research examining the experience of older adults during the COVID-19 pandemic. During this research, loneliness and social isolation were found to be significant problems for older adults. The research team wanted to implement an intervention that might help alleviate some of these negative emotional symptoms. Phone calls as an intervention were suggested as a COVID-19 friendly socialization option. This idea coincided with faculty expressing concern about the lack of home care clinical placements and the need to seek new opportunities for CCA students. This project aimed to meet the needs of both older adults experiencing social isolation and students in need of clinical placements.

Older adults were recruited for the phone visiting program through acquaintances of research team members and from the original research participants of the experience of older adults socially isolating during the COVID-19 pandemic. These individuals were invited to participate in the CCA phone program if they wished. Interestingly, the older adults in the initial research most often stated that they did not wish to be part of a phone support group; however, they expressed a desire to help CCA students complete their clinical experience.

Students were emailed guidelines for conducting the phone visits and suggestions for weekly conversation topics. To assist students in initiating conversation, open-ended questions and tips were provided. Themes such as family or former working life were provided each week to guide the discussion. Instructions were merely a guideline, and students were encouraged to follow the flow of the conversation regardless of the guide. Each older

adult was paired with a CCA student, and the CCA student was given contact information for the older adult. The students were responsible for initial contact and scheduling of weekly phone calls over a five-week period. Each phone call was to last between 25 to 60 minutes. Students were required to submit a half-page summary after each phone call which included answers to weekly reflective questions.

Student evaluations of the program

Twenty-two students were assigned to the project, with 21 students successfully completing their five phone calls. Sixteen of the 21 students completed the program evaluation. The evaluation questions included reflections such as what they learned about older adults, themselves, and their interpersonal communications. The questions also asked for reflections about how this experience would help in their future CCA practice. The last questions asked for feedback on the phone visiting program and suggestions for improvement for future students. Students' evaluations were overwhelmingly positive and showed the growth of the students throughout the phone visiting program.

Methods

Braun and Clarke's (2006) thematic analysis was used to create themes of the results of the student evaluations. Thematic analysis is an inductive approach to data gathering that seeks to find patterns in the data (Braun & Clarke, 2006). Data from the student evaluations were de-identified and reviewed multiple times using a line-by-line coding process. The codes were then grouped together to create themes, these themes were confirmed, and overarching theme names were created by the research team. The research team used a constructivist and relativist approach to data analysis. As the research team members are all instructors or retired instructors in the nursing or continuing care assistant programs, we bring our own philosophies of teaching and learning to the analysis. The results give voice to the participants while recognizing that the researchers' experiences colour the interpretation. We also recognize that the evaluations reflect one small portion of the learning journey for students and the personal experiences of each student.

Results

Through analysis, the results were grouped into three themes: building communication skills, communication as your job, and older adults as people. These three themes identify the growth of students in their communication skills and their beliefs about older adults.

Building Communication Skills

Building communication skills refers to the multiple ways in which students learn new communication techniques and put their theoretical knowledge of communication skills into practice. Although the communication classes offered in the CCA program built theoretical skills, many of the students lacked practical experience speaking to older adults and people they did not know. Through the phone visiting program, the students were given the opportunity to gain practical communication skills.

Students described increasing comfort in their ability to talk to new people as a significant growth area:

"During this phone call experience, I have learned that I can hold a conversation with a complete stranger. It sounds odd, but if you really knew me, you would know that I have a very hard time holding conversations with people I do not know. But now I can say that has definitely changed."

Students practiced active listening skills and used silence to allow older adults time to formulate answers. The simple acts of listening and reflecting were important lessons for one student, "Listen and be mindful of the other person's thoughts and beliefs." Furthermore, silence was used as a communication tool, "I also learned about the importance of becoming a better listener and allowing for natural silences." Several participants talked about the need for patience, "Patience is important, waiting a bit before talking in case they have more to say." Finally, the importance of allowing people to fully express themselves was identified, "It's extremely important to let them talk and not respond because sometimes they rail off in conversation, and you need to let them speak for as long as they need."

Simple lessons such as using conversation starters and checking for understanding were helpful tools that students developed during the phone program. One student found that talking about the weather helped fill the gaps in conversation, "Weather is something they may resort to talking about if they are unsure of what to talk about." Checking for understanding was a way to show engagement, "It is important to listen and give feedback on what they're talking about, so they know they are being understood." Students described the importance of learning new communication skills, and this was increasingly important as they were preparing to move into the workforce.

Communication as your job

Students are often focused on task-based learning, such as how to take a pulse or use a lift properly. During the phone visiting program, students recognized that communication with older

adults, tailoring care to individuals, and building relationships were as important as the tasks themselves. Many of the participants recognized the need for good communication skills when working in healthcare, “I believe that this will help me in the future because it showed me that it is easy to talk to someone you have never met before. With working at different facilities and with tons of different staff and residents, I will be able to strike up a conversation quite easily, at least I am hoping for that.”

One student succinctly described the importance of communication and relationship building, “1. They want you to listen attentively, 2. They want to gain your trust and feel safe around you (before divulging any information), and 3. They want you to keep your promises (like time/appointment).” Students learned that communication is an important tool for putting their clients at ease, “Having good interpersonal communication can set a good relationship between the worker and the client, and it will make the client comfortable.” Participants discovered that sharing information about themselves made older adults feel more comfortable, “I have also learnt that older adults feel safer to talk about themselves and families if you share a little bit about yourself too.” These are invaluable lessons regarding the importance of communication in the workplace and the starting point for quality senior care.

Individualizing care through communicating with older adults was additional learning for students that will make them better care providers. In the words of one participant, “Giving care is not only performing the morning care and feeding; listening to them and spending time with them to make them happy is also part of care.” A student further added to this thought, “Learning to listen to what the older person wants and how they feel instead of just doing your job.” Another participant reflected on their learning, “I will use these lessons by not treating everyone the same because I do not know everyone’s story; I do not know what they have encountered in their life or what they are going through at this point in time.” Through the phone visiting program, students reflected on the importance of communication over tasks in the workplace.

Older adults as people

Many of the students in the CCA program have had little contact with older adults and may see older adults for what they have lost, not for what they have to offer. Students forget that older adults are people with joys, hopes, and vibrant lives. The phone visiting program allowed students a glimpse into an older adult’s life that they may not have previously experienced. Students were pleasantly surprised by how quickly they were able to develop a

relationship with an older adult:

“I learned that older people still have good communication abilities; they are always ready to chat with people—it does not matter if the person is young or old. As long as you are willing to be part of their company and conversation, you become part of their social network.”

Students also found that older adults enjoyed the same type of encouragement as they would, “They enjoyed being validated and praised for their past and present achievements.”

One of the common learnings among the participants was about older adults’ vitality and health, “Regardless of their age, they still desire a life with good health and lots of love and care.” Other participants spoke of older adults’ outlook on life: “They are so appreciative of the small things,” “Their outlook on life during this whole thing is very inspiring,” and “Keep optimistic in hard times.” Valuing the experience of older adults was an important lesson, “They like to talk about their life experience and also like to hear about us.” They learned about how older adults found joy in their life, “They like to spend their time with their family, especially grandchildren.” Furthermore, “They like having company and someone to talk to.” Finally, they expressed an interest in older adults continuing to have vitality after retirement, “I have learnt that just because you are ‘retired’, it doesn’t mean you do or have to stop working.”

Students enjoyed developing a relationship with the older adult they were partnered with and often gained much out of the relationship in return, “She has no idea how much I loved talking with her... I hate to say it, but I did not really have a grandma figure in my life, so this was an amazing experience.” The students also enjoyed the encouragement they received from older adults, “He also told me that as long as you believe in yourself, you can get through anything.” Many students expressed great enjoyment visiting with older adults, “It was very comfortable, and my senior was a total sweetheart. I wish this experience didn’t have to come to an end!”

The phone visiting program led many students to reflect on the relationship they had with older adults in their own family, “I also learned that I am very privileged and lucky to be so close with my family and be loved by so many people.” Another student improved her relationship with her own grandparents, “By getting this opportunity, I understand the importance of talking to older persons. After this phone project, I started to talk to my grandparents. Hearing them and spending time with elder persons makes them happy, and in one way, it’s our duty.” Learning about

older adults as people was a rewarding discovery for many of the student participants.

Discussion

The phone visiting program achieved multiple goals. It allowed students to develop therapeutic communication skills, meet clinical objectives, and support older adults in the community. Anecdotal evidence points to the fact that older adults enjoyed the experience. The students had very few negative comments; some wished for scheduled times to make phone calls, while others liked the flexibility. Some wished for there to be shorter requirements for conversations, while others enjoyed longer conversations. Several students expressed sadness that the program had come to an end. The lack of negative comments speaks to the value of the program. After initial instructions, students completed the experience with minimal guidance. Students stayed on task and were conscientious in submitting weekly reports with few reminders. The CCA program is an entry-level program, and students often need support to successfully complete tasks. This was not the case in the phone visiting program.

Many students reported that the phone clinical experience was beneficial for them to build their therapeutic communication skills. Although the students have taken courses on communication techniques, they often had little prior experience talking to people they did not know. Additionally, students lacked experience conversing with older adults. Healthcare students' lack of comfort with using communication skills aligns with the literature (Dermani et al., 2020). However, in this study, students improved their comfort with communication skills and felt more confident in their ability to use their communication skills going forward.

The phone visiting program allowed students to complete their home care practicum at a time when home care placements were few. The phone visiting program did not merely meet the requirements of the clinical but allowed students to grow their communication skills, which are essential in healthcare, and provided a new dimension to the clinical experience. Some aspects of the phone clinical experience were an advantage, such as being able to work on communication skills and relationship-building without the distraction of other tasks. The phone visiting program lacked the face-to-face connection, and many students missed the ability to read older adults' expressions and gestures. Also, there was no direct care completed during this clinical; however, direct care is not a requirement for this clinical experience.

CCAs and other healthcare workers are uniquely positioned in the healthcare system to develop relationships with their patients through continued communication. This is different than medical students who, as found in previous studies, often have short one-time conversations with patients or short, infrequent conversations (Office et al., 2020; Van Dyck et al., 2020). The nature of the CCA role as daily care providers positions them to develop strong therapeutic relationships with patients in a way that other healthcare providers cannot. As outlined by Abdolrahimi et al. (2017), good communication by healthcare providers can improve the quality of care and reduce negative outcomes. Providing opportunities for healthcare students to develop therapeutic communication skills is vital.

This program not only met the needs of student clinical requirements but helped meet the needs of the community by providing visiting opportunities for older adults who were socially isolating during the COVID-19 pandemic. Older adults have experienced high levels of loneliness during the COVID-19 pandemic, and this is impacting their health and well-being (Cacioppo et al., 2002; Cho et al., 2019; Holwerda et al., 2012). The need to find new ways to connect with older adults has never been greater. There will continue to be a need to innovate clinical experiences and find new options for students. The phone visiting program meets three needs: providing students clinical opportunities, growing student communication skills, and offering visiting opportunities for older adults.

Conclusion

Finding clinical placements for healthcare students has always been a challenge which worsened during the COVID-19 pandemic. Innovative clinical options that not only meet the minimum requirements for clinical placements but grow students' skills in new ways are essential. The themes of building communication skills, communication as the job, and older adults as people reflect the learning of the students through this program. Pairing students with older adults for phone visits was an excellent way to build communication and relationship-building skills. Going forward, innovations in clinical experiences should consider including both opportunities for students to learn skills and for their learning to support community needs.

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