

Project Title

Factors influencing learners' confidence in performing patient handling activities after workplace training

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Organisation(s) Involved

Tan Tock Seng Hospital

Project Period

Start date: Oct 2016

Completed date: Sept 2017

Lessons Learnt

- To establish workplace application with departments before starting workshop so as to be able to sustain training in the department.
- Working with departments who recognize the importance of skills training and getting "buy-in" from participants further enhances the training sessions.
- Train-the-Trainers programme and workplace-based application process aids in increasing self-efficacy of participants.

Project Category

Research, New Pedagogy, Workforce Redesign

Keywords

Research, Quantitative Study, Qualitative Study, Workforce Redesign, Education, Workplace Training Programmes, Safe Patient Handling, New Pedagogies, Factors

Influencing Self-confidence, Experiential Learning, Hands-On Practice, Workplace Coaching, Hospital Service Ambassadors, Tan Tock Seng Hospital, Allied Health, Occupational Therapy, Workplace Skills Transfer and Application, Staff Empowerment

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Factors influencing learners' confidence in performing patient handling activities after workplace training

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BACKGROUND AND AIMS

Hospital service ambassadors (SAs) in an acute hospital in Singapore facilitate ward registrations and are often required to assist visitors or patients in wheelchairs while on duty. However, they are not equipped with patient handling skills. Occupational Therapists (OTs) were engaged to train and assess the SAs' competencies in three specific patient handling activities- wheelchair handling, toilet and car transfers.

The aims of this study are to 1) explore the factors influencing SAs' confidence in performing patient handling activities after training and 2) to improve future workplace training programmes.

METHODS

Self-confidence rating was used in this study as it is a useful measure of learning outcomes and self-efficacy¹. This pre-post study uses both quantitative and qualitative data for analysis. Data was collected in two phases at six months apart. Quantitative data was gathered through confidence ratings collected pre- and post-training from 24 SAs who attended the training using a numeric rating scale as shown below. Qualitative data was gathered through face-to-face and phone interviews among the SAs. Triangulation was done using qualitative data gathered from email interviews with five supervisors.

Confidence rating	
My level of confidence in safe manual handling of patients	
0	10
1	
2	
3	
4	
5	
6	
7	
8	
9	
Not at all confident	Totally confident

RESULTS

Six months post training, three staff had left the department. Data collected from 21 SAs showed the mean confidence ratings increased from 2.2 ± 2.4 to 7.4 ± 1.1 immediately post-training. However, the mean confidence ratings decreased to 6.5 ± 1.6 six months post-training.

SAs identified two factors that increased their confidence ratings:

1) Structured training sessions

The SAs shared that they had gained knowledge from structured training sessions that included practical sessions and competency assessments. These sessions helped the SAs increase their confidence ratings at six months post-training.

"Hands-on training... proven that the technique works." (P4)

"Competency assessment as during training like play-play but assessment makes it more serious" (P1)

The SAs' supervisors observed that the SAs are more eager to approach patients and visitors in wheelchairs after the training.

"Staff no longer shun away from assisting members of public who are on wheelchairs in fear of being unable to assist them" (Supervisor 1)

2) Coaching others

SAs reported that their confidence in patient handling activities increased when they were identified as workplace coaches and have the responsibility to teach others.

"Initially after the training, not much practice, forgot most of it. But after the Train the Coaches programme, everything stuck in my head already." (P4)

SAs identified two factors that decreased their confidence ratings:

1) Lack of opportunities to practise the skills at work

Most of the SAs and their supervisors acknowledged that there were not many opportunities for SAs to apply their skills at work besides handling of wheelchair. Hence, causing their confidence rating to decrease six-month post-training.

"Almost zero chance of doing at work" (P21)

2) Personal factors

SAs and their supervisors acknowledged that personalities, mindset and health may attribute to the SAs' decreased confidence ratings.

"Some staff are naturally shy or uncomfortable to get into close physical contact with strangers/patients and it is not their core job duty" (Supervisor 1)

"Fear of hurting patients." (P21)

DISCUSSION

In this study, confidence ratings in safe patient handling tasks were used to determine effectiveness of training and long term transference of skills to the workplace. The results imply that though training can increase one's confidence in safe patient handling tasks, transference of skills to their workplace may be limited. Factors that increased the SAs' confidence ratings were mainly attributed to the structured training sessions which included hands on practice that is an effective method for learning and acquisition of skills⁵ while the decrease in confidence rating six month post-training appears to be largely due to the lack of opportunities to apply the skills learnt at the workplace.

From this study, we suggest three ways to further improve future workplace training programmes to further enhance learning and transference of skills to the workplace.

1. Inclusion of hands-on practice on actual patients

Structured training and assessment conducted in a simulated environment can also include handling of actual patients in the real work setting⁴. This would lead to higher chances of transference of skills².

2. Incorporate workplace coaching sessions

Workplace coaching can be incorporated after the basic training and assessment in order for workplace training programmes to be sustainable, to increase responsibilities of learner and improve productivity^{3,5}.

3. Increase opportunities to apply skills at the workplace

It is important to increase opportunities for learners to apply skills at the workplace for them to develop more confidence in performing safe patient handling activities as "practice makes perfect".

One limitation of this study is the lack of comparison between learners' confidence ratings and their actual skill competency at six months post-training. Hence it remains inconclusive if confidence rating has a direct relationship with their skill competency in patient handling activities. Future studies could include a competency assessment at six-months to assess retention of skills and establish if confidence rating can predict actual skill competency.

CONCLUSION

This study highlights the importance of workplace application after training to maintain confidence among learners. Healthcare educators could consider incorporating workplace learning in the design of longitudinal workplace training programmes.



Acknowledgement

The authors would like to thank the Service Ambassadors and Executives of Visitor Experience Services, Tan Tock Seng Hospital for participating in this research. The training programme received funding from Employment and Employability Institute (e2i) Singapore.

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