

# [Clinical teaching and learning experience](https://assignbuster.com/clinical-teaching-and-learning-experience/)

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The unsatisfying situation in the learning experience was cultural differences of some elderly patients since most of them dictated on the nature of their treatments according to their values and beliefs. Some elderly patients in nursing homes refused oral medications and preferred injections. Some elderly patients could not attend personal hygiene needs like washing and grooming without nurse assistance. Another challenging situation was constant accidents and patient injuries in the nursing home (McGregor, 505). The nursing home design did not factor the safety precautions of elderly patients. Some unsatisfying experiences encountered by the educator included equipment failures, diagnostic errors and drug prescription errors of the nursing learners. Another challenging experience was poor ventilation and high temperature in the nursing home. Breakdown in communication was occasioned by personal challenges while equipment failures were occasioned by organizational challenges since the nursing home had not properly maintained the equipment. The instructor’s behavior as a role model is this situation did not demonstrate respect for elderly patients, patience, integrity, and flexibility in dealing with emerging situations in nursing learning (Haskvitz & Koop, 182).   
  
Suppose that I was a nursing educator, I would recognize the cultural, gender and age differences in dealing with the elderly patients at the nursing home. I would encourage both cordial oral and written communication that would assist students to convey ideas in all situations in the nursing home. I would encourage creative thinking and critical reasoning skills in order for learners to reduce diagnostic errors, drug prescription errors, and equipment failures. I would provide immediate feedback to learners and encourage open discussions. The above strategies will improve communication between nursing assistants and patients, reduce medical errors and create a good learning environment that encourages creativity and reflective learning (Tanner, 152).   
  
Reflective learning can be incorporated in this learning situation. The educator should tell stories such as case studies of his or her previous practice experience in dealing with elderly patients. Social interactions and practical experiences can facilitate a learner’s reflective learning. Keeping journals, making short notes, narratives and oral interviews at the nursing home can assist the learning to reflect on prior knowledge and processes thus avoiding diagnosis and drug prescription errors. Comparing and contrasting different learning experiences can also assist in reflection learning. The physical environment such as poor ventilation and high temperature could have hindered reflective learning (Haskvitz & Koop, 184).   
  
Conclusion   
  
Communication breakdowns, poor ventilation, diagnosis errors and patient accidents are some of the unsatisfying experience I encountered as a nursing assistant. Reflective learning through oral interviews, case studies, making short notes and provision of feedback will assist in creative learning of the nursing students.