Section: Nursing



Original Research Article

ASSESSMENT TOOLS USED FOR EVALUATING NURSING STUDENTS DURING GERIATRIC PRACTICUM IN SELECTED UNIVERSITIES IN KENYA

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ABSTRACT

Assessment tools are essential for evaluating nursing students' competencies, particularly in specialized fields like geriatric nursing. This study investigates the assessment tools used during geriatric practicum at selected Kenyan universities, revealing significant inconsistencies and a reliance on unstructured observational assessments. Only 20% of lecturers reported using standardized tools such as the Comprehensive Geriatric Assessment (CGA). These findings underscore the need for standardized evaluation methods to ensure consistency in measuring student competencies across institutions.

Keywords: Geriatric nursing, assessment tools, practicum, nursing education, Kenva.

INTRODUCTION

Assessment in nursing education is crucial to ensuring that students acquire the necessary competencies to deliver high-quality care. The complexity of geriatric nursing, characterized by the unique needs of older adults, further emphasizes the importance of appropriate and standardized assessment tools (Conroy et al., 2014). Inconsistent assessment practices across educational institutions can lead to disparities in the preparation of nursing graduates, compromising the quality of care they provide (Ouslander et al., 2009).

The need for standardized tools in the assessment of nursing students has been recognized globally. Research suggests that standardized evaluations improve learning outcomes and enhance clinical decision-making (Santos et al., 2017). Yet, in Kenya, there is a lack of consistent use of such tools, raising concerns about the preparedness of nursing graduates in specialized areas like geriatrics (Munyewende & Rispel, 2015).

Standardized tools like the Comprehensive Geriatric Assessment (CGA) play a vital role in measuring the competencies of nursing students, but their adoption in Kenyan nursing programs remains limited. This study examines the types of assessment tools used in evaluating nursing students during geriatric practicum in selected universities,

identifying gaps and opportunities for improving assessment practices.

MATERIALS AND METHODS

This descriptive cross-sectional study involved 17 nursing lecturers and 72 nursing students from Moi University and Kabarak University. Data were collected through structured questionnaires that assessed the use of various assessment tools during geriatric practicum. Quantitative analysis, including chi-square tests, was used to determine significant differences in the use of standardized tools between public and private universities.

The study aimed to explore the reliance on both formal and informal assessment methods and to evaluate the effectiveness of these tools from the perspectives of both students and lecturers. Similar studies have employed cross-sectional designs to evaluate nursing assessments in clinical settings (Hodgson et al., 2016).

Ethics, rooted in ancient Greek philosophy, refers to a system of principles guiding choices and actions (Johnstone, 2009). Research ethics involve maintaining the dignity of subjects and responsibly publishing information. The researcher obtained approval from the Institutional Research and Ethical Committee (IREC) at Moi University, as well as a research permit from NACOSTI. Permission to conduct research was also granted by selected Universities.

Informed consent was a key ethical concern. Participants were fully informed about the study, their right to withdraw at any time, and assured that their confidentiality would be protected. Personal information was only accessible to the researcher, and anonymity was ensured by removing traceable identifiers. The research was for academic purposes, and participation was voluntary.

RESULTS

Standardized Tool Usage:

The study revealed that only 20% of lecturers used standardized tools like the CGA in evaluating students, while the remaining 80% relied on unstructured observational methods (Table 1). Among students, only 15% reported being assessed using standardized tools, indicating that informal assessments dominated the practicum evaluations.

Perceived Effectiveness:

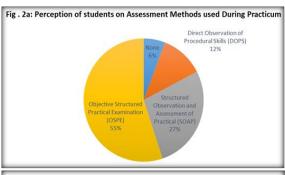
Both students and lecturers expressed concerns about the effectiveness of the current assessment methods. Lecturers highlighted that the lack of training and resources contributed to the limited use of standardized tools (Furze et al., 2015). Students, on the other hand, felt that observational assessments did not provide a comprehensive evaluation of their competencies (Figure 2).

Disparities Between Institutions

A significant difference was found between private and public universities in the use of standardized tools, with private universities showing slightly higher rates of usage. A chi-square test confirmed the disparity (p-value = 0.03), underscoring the need for uniform standards across all nursing programs in Kenya. Studies in other low- and middle-income countries have reported similar findings regarding disparities in nursing education practices (Munyewende & Rispel, 2015; Hirani et al., 2020).

Figure 2: Perceived Effectiveness of Assessment Methods

Pie charts depicting the perceptions of students and lecturers on the effectiveness of different assessment methods used during practicum.



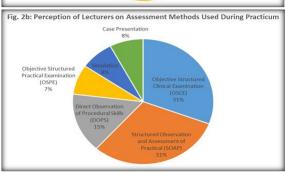


Table below shows the types of assessment tools used by lecturers and students, comparing standardized vs. observational methods. [Table 1]

Table 1: Usage of Assessment Tools During Geriatric Practicum

Assessment Tool	Lecturers (%)	Students (%)
Standardized Tools (CGA)	20	15
Observational Methods	80	65
Informal Assessments	45	55

DISCUSSION

The results indicate substantial inconsistencies in the assessment practices of nursing students during the geriatric practicum. The low prevalence of standardized tools such as the CGA highlights a gap in evaluating student competencies, which could impact the quality of care provided by nursing graduates (Ellis et al., 2011). Studies in other countries, including the U.S. and the U.K., have demonstrated that standardized assessment tools improve learning outcomes and clinical competencies (Levett-Jones et al., 2011; Santos et al., 2017). The reliance on informal and observational assessments, though useful in certain contexts, may fail to capture the full range of competencies needed to care for elderly patients. Without a standardized approach, nursing graduates may vary in their preparedness to address the needs of the geriatric population, leading to inequalities in care quality (Boltz et al., 2020; Furze et al., 2015). Research has shown that training lecturers on the use of standardized tools can significantly improve their adoption and effectiveness (Burgess & Mellis, 2015). In addition, embedding these tools into the nursing curriculum can foster a more structured approach to evaluating competencies, aligning educational outcomes with clinical needs (Green et al., 2017).

CONCLUSION AND RECOMMENDATIONS

To address the identified gaps in assessment practices, this study recommends the following:

- 1. Standardization of Assessment Tools:
 The adoption of standardized tools such as
 the CGA should be mandated across all
 nursing programs in Kenya to ensure
 consistent evaluation of competencies
 (Levett-Jones et al., 2011).
- 2. Training for Lecturers:
 Lecturers should receive training on the use of standardized assessment tools to enhance their application during practicum evaluations. This will help mitigate the resource and knowledge gaps identified in the study (Burgess & Mellis, 2015).
- 3. Integration into Curriculum:
 Standardized assessments should be integrated into the Bachelor of Science in Nursing (BSN) curriculum as part of practicum requirements to ensure students are familiar with these tools and their use in clinical practice (Green et al., 2017).
- 4. Continuous Review and Feedback:
 There should be a system for continuous review and feedback on the effectiveness of assessment tools to ensure they remain relevant and aligned with best practices in geriatric care (Santos et al., 2017).

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