

APPENDIX P

SUMMARY OF THEMES DELINEATED AFTER FOCUS GROUP WITH NURSES POST-TRAINING AND FOLLOW-UP

1 SERVICE DELIVERY

- **Attitude**
 - Increased confidence due to increased knowledge and skills *“I learnt that I could, that one could easily communicate with disabled children” / “helps me to deal with them”*
 - Change in mindset *“eye opener” / “affected me as a person”*
 - Myths regarding children with severe disabilities were dispelled *“when I was at college, they say that the mentally retarded patients just keep quiet when they have a pain”*
 - Positive attitude *“now I don’t regard them as being disabled, I see them as normal kids who are not able to do certain tasks” / “these children can be given a second chance in life”*
 - Proud : feel valued by patients, primary caregivers and other nurses)
 - Increased patience *“... it has made me practise patience and has made me understand them...”*

- **New knowledge** - Increased understanding and knowledge about
 - Disability
 - Communication skills
 - Now have the ability to communicate with children with severe disabilities *“... now I can talk to patients who visit the clinics with signs...”*
 - Feel empowered : can teach children with severe disabilities as well as colleagues
 - Realise the importance of early intervention *“... it is easier for them to learn and teach them while they are still young...”*
 - Importance of milieu teaching *“... so I’ve realised the importance of home environment teaching after this in-service”*
 - Importance of providing children with severe disabilities with communication opportunities *“we must give them a chance to do so...”*
 - Pre-training belief: conducted only referrals, now equipped to provide training *“I thought we were just going to be taught how to refer these children...”*

- **Role of nurse / Multiskilling** - Importance of team collaboration “*I can show them we are all a team.*”

 - See own role in team as important (pride in own profession) “*the nurses are the first people who come into contact with this child.*”
 - Importance of community and training and their role with this “*... and then to talk to the community at large...*”
 - Importance of collaborating with families “*... for us (nurses) to be with the primary caregivers...*”
 - Importance of training other nurses “*... I was using this sign of “help” and then the nurses were just all around myself... and then I started going on with all these signs teaching them...*”
 - Importance of teaching typically developing children about disability, and the nurse’s role “*teach these children to play with the disabled children ...*”
 - Knowledge and skills about the communication means and functions of children with disabilities
 - Know what they’ll teach (concrete knowledge) “*... I can advise the mother about exercising and teach about the functions of communication, also the signs and then advise them to take the child to a crèche and communicate with other children...*”

- **Job satisfaction** - Increased job satisfaction “*... I enjoy this too much...*”

 - Pride in own abilities “*... but now, after this training, I know that I can work with them...*”
 - Enjoyment and fun of interactive teaching, using problem-based learning “*... and then I enjoyed this method.*”

- **Strong focus on social inclusion** - Training of community in acceptance of disability “*they should be included in the community and accepted...*”

 - Importance of inclusion and community integration (e.g. take children with disabilities on outings) “*on a Sunday the child can also go to the Sunday school like the other children...*”
 - Importance of focusing on the ability and not the disability “*I don’t regard disabled children as being disabled, I see them as normal kids who are not able to do certain tasks...*”
 - Training of primary caregivers to facilitate social inclusion “*...they must not hide these children.*”

- **Relationship with primary caregivers** - Importance of including primary caregivers as part of the team “*to make them work together...*”

Necessity of providing support to these primary caregivers “*...the primary caregivers should also be given support that we can help the children...*”

- Educate primary caregivers on acceptance by focusing on ability “*take their children as they are and be with them.*”
- Increased knowledge about what to do with primary caregivers
 - *Listen to the problem*
 - *Talk to primary caregivers and ask about problems*
 - *Assist primary caregivers by showing them what to do*
 - *Teach mother signs (expand to family and then outsiders)*
 - *Referral to therapist if still necessary after having tried first*

2 TRAINING EVALUATION

- **Content**
 - ***Communication means***
 - Manual signs: feel that they are equipped to use it, especially for greeting, to give instructions and to request basic needs.
 - EasyTalk (started at home by teaching own children and family members)
 - Real objects and the making of the object communication board
 - Communication board
 - ***Communication functions***
 - Greeting
 - Requesting “help”
 - Requesting “more”
 - ***Communication partners***
 - Importance of increasing number of communication partners through social inclusion
 - ***Communication opportunities***
 - Importance of providing and creating communication opportunities
 - Violating expectations
- **Training method**
 - **Follow-ups**
 - Helped to problem-solve difficult cases
 - Served revision role “*makes us not to forget some of the things.*”
 - Not threatened by the evaluative nature of follow-up “*it wasn’t a big deal.*”
 - Provided an opportunity to practise new knowledge and skills if they have not had exposure to a child with severe disability “*helped us to visualise...*”
 - Acted as a trigger for independent revision “*after the follow-up I started to recall them and then I started to read.*”
 - Relevant case studies were selected for follow-ups

- **Training**
 - Could identify with the researcher and wanted to please her *“Let me not disappoint Juan.”*
 - Training was well-prepared
 - Lectures were good

- **Skills mastered**
 - Gained knowledge about what to do *“now I feel I can communicate with these children”*
 - Excited about new knowledge and skills. Eager to demonstrate them
 - More hands-on training with real cases will further enhance skills development.

- **Outcomes**
 - Empowerment. *“I never thought I would use that (signs) as an adult, but now I see it has a lot of purpose.”*
 - Positive attitude. Know what to do and how to do it.
 - In-service training of other nurses at clinic *“when we get that type of patient and I am not present, they can use these things (BCIP).”*
 - Enjoyment when working with children with disabilities *“it (BCIP and training) helps us to enjoy working with severe disability patients because really before that was a problem.”*
 - Apply skills to own profession to ease nursing problems *“teach him something to show us when he is feeling pain...”*
 - New knowledge and how to problem-solve in situ and where to start.
 - Sense of achievement and pride *“one patient who is deaf specifically asks for the nurse who knows how to talk!”* (herself)
 - Pride *“...how to communicate by using signs. That is something I never dreamt I would be able to do.”*
 - Feel valued and confident about new skills and knowledge
 - Horizons are widening (watching Deaf TV, interested in Para-Olympics, etc.)
 - Felt that initial course objectives were met – positive impact on expectations.
 - Increased insight. Thinking about the devastating effects of disability and realises it is emotionally draining.
 - Fun: training was enjoyable *“we were so laughing...”*

- **Negative aspects**
 - One week training was too short : should be extended to at least two weeks
 - Whole day training is tiring : should maybe be only mornings
 - Found interactive teaching and hands-on workshops demanding at first. Not accustomed to problem-based learning.

3 General comments

- Responses were genuine and deep, and nurses shared experiences on an emotional level.
- Honesty. Admitted to having tried to avoid the researcher initially during first follow-ups due to fear and anxiety of what would be expected of them.
- Initial anxiety was put at ease by researcher during first follow-up “*I was so relieved...*”