EVALUATION OF THE RELATED LEARNING EXPERIENCE (RLE) INSTRUCTIONAL STRATEGIES AMONG NURSING SCHOOLS IN CALABARZON: BASIS FOR PROPOSED GUIDELINES FOR SKILLS ENHANCEMENT

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ABSTRACT

Title of the Research : **EVALUATION OF THE RELATED LEARNING EXPERIENCE (RLE) INSTRUCTIONAL STRATEGIES AMONG NURSING SCHOOLS IN CALABARZON: BASIS FOR PROPOSED GUIDELINES FOR SKILLS ENHANCEMENT**

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This study attempted to evaluate the ten RLE instructional strategies applied in ten nursing subjects in Related Learning Experience (RLE). Specifically, it described the profile of the respondent nursing schools in CALABARZON –IVA in terms of human resources, physical facilities, and instructional standards. It also evaluated the RLE instructional strategies as rated by the clinical instructors and the students and determined if there were significant differences in the evaluation of the respondents. Moreover, it described the performance of the respondents in the Philippine Nurse's Licensure Examination (PNLE) for the past five years. Finally, the study proposed nursing skills enhancement guidelines for RLE instructional strategies based on the results of the evaluation. The CIPP model was utilized as the framework of the study. The research instrument was subjected to reliability with the results ranged from 0.06 to 0.8 at 0.05 level of significance. Thirteen nursing schools in CALABARZON were involved in the study. These schools were the Adventist University of the Philippines, Emilio Aguinaldo College- Dasmariñas, Olivarez College-Tagaytay City, University

of Perpetual Help System-Binan, CDH Allied Medical College (Calamba Doctor's College), De La Salle Lipa City, Lyceum-St.Cabrini Allied Health Sciences, Siena College, Tomas Claudio College, Sacred Heart College, Southern Luzon State University, Unciano Colleges, and World Citi College. A total of 1063 respondents were used. Frequency counts, relative frequencies in percent, means, standard deviations, coefficient of variations, and t-test were used.

The profile of the respondent schools showed that 13 deans were graduates of either MAN/MSN, had at least 1- 5 years of administrative experience and had been teaching for 20 years or more. Majority of the clinical instructors were graduates of either MAN/MSN, or MAEd, and had at least 1- 9 years of teaching experience. Indicators were partially existing in the nursing skills laboratory and clinical facilities were comprised of; "arrangement of seat is amphitheater style," "has electrocardiogram," "has virtual skills laboratory," "has classroom for conference," and "has library." All of the 13 participating schools followed the prescribed clinical instructor-student ratio except in 4th year level, which had the ratio of 10-12. Most of the student–clientele ratio prescribed by the CMO 14, Series of 2009 per level were not followed except in 2nd year, 1st semester and 3rd year levels, 1st semester. Almost half of the participating schools had not been accredited in their more than five years of existence. Nine out of ten RLE instructional strategies were rated very good to excellent by the students and the clinical instructors. Only journal writing was rated very good by the respondents as applied to nursing subjects with RLE.

RLE instructional strategies with significant results include bedside teaching as applied to N-104, N-106 and INP; case study as applied to N-102, N-106, and INP; coaching as applied to N-102, N-104, N-106 and INP; conferences as applied to N-104, N-106 and N-107; demonstration as applied

to FNP; N-102, N-104, N-106, and N-107; feedback as applied to N-102, N-106, N-107 and INP; reflecting as applied to N-104, and N-106; role modeling as applied to N-104, N-106 and INP; and, simulation as applied to N-104, N-106, N-107 and INP; Three out of 13 participating schools did not perform in the PNLE.

Based on the findings and conclusions of the study, it is recommended that participating nursing schools should have definite and clear guidelines of RLE instructional strategies. These instructional guidelines may help the nursing students in honing their nursing skills, likewise increase and improve performance rating in the PNLE by the participating schools. Nursing educators should make use of these RLE instructional guidelines and full implementation for each RLE instructional strategy in nursing subjects with RLE. Nursing students should be more vigilant and assertive in expressing their needs to practice what are prescribed in the guidelines of each RLE strategy. Nursing administrators, should design the seats like amphitheater styles in nursing skills laboratory and provide ECG equipment, conference room, and library and provide a virtual skills laboratory. The Commission on Higher Education (CHED) should regularly monitor the participating schools in terms of the implementation of policies and standards of the BSN program. Future researchers on nursing education, this endeavor may provide additional contribution to the body of knowledge in the area of evaluation of RLE instructional strategies in RLE.

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