

Distance Education: The Canadian Enterostomal Therapy Nursing Education Program Model

BY Susan Mills-Zorzes

Distance education, also known as distance learning, involves the acquisition of knowledge via avenues that differ from traditional education delivery methods. Physical attendance at an educational institution is not required.

The correspondence course, a mode of distance education familiar to most people, involves, predominately, the exchange of written communication. In contrast, Ian Mugridge defines current distance education more broadly, “as a form of education in which there is normally a separation between teacher and learner and thus one in which other means—the printed and written word, the telephone, computer conferencing or teleconferencing, for example—are used to bridge the physical gap.”¹

Distance education has both advantages and disadvantages. One major advantage is that programs are accessible and available to any individual at a convenient time and location. Geographic locale is not a barrier. The learners engage in independent study in their own homes, work at their own pace, and draw upon personal and educational experiences. The use of online synchronous computer conferencing for the delivery of distance education may partially negate this advantage because the learner must be online at a particular time.

Not every student will succeed at distance study, as it is not an easy method of learning. Keegan identifies five serious obstacles for the distance learner working in isolation.² The student may have difficulty

- developing motivation and interest in the task
- initiating and maintaining motivation for study
- grasping the structure of the subject to be learned
- learning both analytical and instructive thinking
- evaluating progress in learning

The CAET Model

Canadian registered nurses interested in pursuing Enterostomal Therapy (ET) nursing practice urgently needed a Canada-based, bilingual Enterostomal Therapy Nursing Education Program (ETNEP). ET nursing, unlike many other nursing specialties, requires that registered nurses complete a recognized post-graduate program. Such a program had not been available in Canada since 1992 when both the French and English ET programs at the Université de Montréal and at the University of Toronto were cancelled. Subsequently, nurses attending programs in the U.S. noted the increasing disparities in the course content for Canadians. Major differences between the Canadian and U.S. health-care systems,

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La conférence de cette année offre des plages horaires sur les soins cliniques de base, les politiques de santé, l'éducation et la recherche en mettant l'accent sur les progrès dans le soin des plaies.

Au chapitre des nouveautés sont inclus un atelier sur les orthèses/prothèses, les brûlures et des séances plus avancées portant sur les plaies oncologiques et pédiatriques, les greffes, l'épidermolyse bulleuse et l'oxygénothérapie hyperbare. Et ne manquez pas nos quatre super **ateliers post-congrès** ainsi que la séance sur les « plaies casse-tête »!

La **conférencière vedette Danielle Sauvageau**, une extraordinaire entraîneuse de hockey, nous inspirera tous en montrant comment le rapprochement des frontières et la création d'un effort d'équipe sont les composantes essentielles de dénouements réussis — sur la glace ou au chevet d'un malade. Notre **Banquet du Président** sera la fête du soin des plaies de l'année.

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Pour des renseignements complets, visitez le site de l'ACSP à www.cawc.net.

The 2005 Call for Abstracts is now posted on the CAWC Web site (www.cawc.net).

L'appel de communications de 2005 est maintenant affichée sur le site de l'ACSP (www.cawc.net).

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professional nursing issues, and entrance requirements, as well as the fluctuation in the value of the Canadian dollar were factors that persuaded the Canadian Association for Enterostomal Therapy (CAET) to commit to the establishment of an ET nursing education program in Canada.

Traditionally, Canadian ET programs were operated “for profit” by hospitals and academic institutions. Because CAET was not involved in the administration of these programs, it could not stop their closures. To prevent this situation from happening again, CAET made the decision to fund the development and maintenance of an independent ETNEP. The CAET program was launched in 1996 with Nicole Denis, RN, ET, MScN, as program director and student advisor.

To provide as much flexibility for the student as possible, the CAET program is designed as a home

4. Fistulae, Draining Wounds and Percutaneous Tubes
5. Acute and Chronic Wounds
6. Urinary and Fecal Incontinence

The curriculum also includes a unique seventh module, which is a clinical preceptorship and specific assignments. The preceptorship component is a requirement and a strength of all accredited ET nursing education programs. In this module, the learner observes the practice of an excellent role model, actively links theory to practice, and forms collegial relationships under the one-to-one supervision of a practising ET nurse.

The ETNEP continues to evolve. Student program evaluations, CAET member input, and ETNEP Advisory Board recommendations have resulted in a number of program changes. The intent of the changes is to improve the course and enhance support for the learners. Each learner is assigned an academic advisor, who answers questions, oversees the student’s progress and provides support to the student throughout the program. Students and advisors communicate by telephone and e-mail.

The CAET advocates for the highest quality of specialized ET nursing for individuals with challenges in wound, ostomy and continence care. The CAET’s commitment to offering and administering a specialized nursing education program is a major way to fulfill this mission. On completion of the curriculum, the graduate is prepared to perform all functions of the ET nurse role, which can include consultation, patient care, education, research and administration.

To be considered for the program, the applicant must be a resident of Canada and a baccalaureate-prepared registered nurse with a minimum of two years recent clinical experience. More information is available at www.caet.ca. ☺

The Role of Enterostomal Therapy Nurses

Enterostomal Therapy Nursing is a specialty that applies advanced knowledge and clinical expertise to individuals with challenges in wound, ostomy and continence. Enterostomal Therapy Nurses provide consultation with interdisciplinary team members and are involved in the education of patients and other health-care professionals.

study (correspondence) program with additional communication by telephone and e-mail. Each learner receives written guidelines, textbooks, additional readings and videotapes. The majority of the student’s learning takes place through interaction with the course materials (required reading and written assignments), feedback on written assignments, and mid-term examinations. As adult learners, students are expected to direct their own learning and to organize a preceptorship to meet their individual learning needs. Students have 12 months to complete the program.

The theoretical component of the program consists of the following six modules:

1. The ET Nurse’s Professional Role
2. Psychosocial Adaptation Processes
3. Ostomy and Continent Diversions

References

1. Spodick EF. The Evolution of Distance Learning. 1996:2. <http://sqzm14.ust.hk/distance/evolution-distance-learning.htm>. Accessed October 20, 2004.
2. Keegan D. *Foundations of Distance Education*. New York: Routledge. 1999.
3. CAET. *Learner Guidelines*. Ottawa: Morin Publishing. 1999.



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