



## ***Revision of the Apprenticeship and Internship Logbooks of Community Health Nursing***

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#### **Abstract**

**Background & Objective:** Logbooks are important tools in the training and evaluation of students. Using logbooks bridges the gap between theory and practice. The present study aimed to revise the apprenticeship and internship logbooks of community health nursing.

**Materials and Methods:** This is a qualitative study in the paradigm of educational management, aiming to revise the apprenticeship and internship logbooks of community health nursing at Qazvin University of Medical Sciences, Iran in 2015. In addition to the library research method, various data collection techniques were employed. The items of the mentioned logbooks were scored based on a five-point Likert scale (absolutely essential, essential, relatively essential, slightly essential, and non-essential). Face and content validity of the former logbooks were assessed, and the research team evaluated the curriculum of community health nursing in order to modify the items and create the final logbooks. After making the necessary changes, the logbooks were provided for the faculty members, and the face and content validity was also confirmed.

**Results:** After evaluating the new course outlines of the affiliated ministry and taking a poll from the faculty member elites, a set of 77 new items were obtained. Among the 10 final logbooks, the three sections of 'health education', 'home care', and 'communications' were not found in the initial logbook. The final logbook was provided with 10 sections and 142 components.

**Conclusion:** The items regarding health education and communications are further emphasized in the current logbook, while these items were lacking in the former ones. Improvement of these skills could remarkably promote holistic nursing.

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## Introduction

Logbook is an important tool in the training and evaluation of students (1). In fact, a logbook is the file used to keep documents and work samples (2). In terms of the application in skills training, a logbook is a designed, purposeful set of documents, evidence, and records of the scientific and educational activities of students, which demonstrates their efforts, progress, and academic status in their theoretical or clinical education. Furthermore, logbooks are used as a method of performance evaluation, which help professors to objectively assess the progress of students in achieving educational goals (3).

The views of education experts and findings of field research have confirmed the numerous multifaceted advantages of logbooks. One of the main concerns in most educational systems is the gap between theory and practice in medical fields, including nursing. Despite completing several theoretical courses, students are rarely able to apply their knowledge in clinical settings (4). Using logbooks could remarkably promote general skills (e.g., critical thinking), thereby bridging the gap between theory and practice and maintaining students in the process of constant learning (2).

The findings of Hoveizian et al. show that compared to conventional approaches, logbooks are more effective in increasing the interest and motivation of students to participate in learning and discovering the limitations and their improvement during internship. Moreover, owing to the concordance of the subjects in logbooks with evaluation goals, the satisfaction rate of students has been reported to be high with this method (1). In another study, Bahreini has emphasized on the positive effect of using logbooks on the improvement of rethinking skills in nurses. Accordingly, rethinking through thought stimulation about the clinical performance and studying the associated theoretical knowledge result in the reduced gap between theory and practice, keeping students in the process of constant learning (2).

Another major advantage of logbooks mentioned in the findings of Latifi et al. is that it causes students to learn self-assessment through contemplating their work samples. Some of the other strengths of logbooks are connecting theory and practice, raising the awareness of students regarding their strengths and weaknesses, active participation of the instructor in providing feedback, enhancing the self-confidence of students, and

encouraging students to improve their learning abilities. Mutual participation of instructors and students in the selection and analysis of information leads to their professional growth (5).

With respect to the importance of the professional learning process in nursing, it could be stated that nurses play a pivotal role in the health status and rapid recovery of patients. This role requires adequate knowledge, awareness, skills, and abilities on behalf of nurses. Therefore, various professional approaches are employed to train qualified nurses for patient care, and nursing education is implemented with an emphasis on the training of nurses with clinical skills, as well as adequate knowledge, which highlights the significance of clinical education in nursing (1).

Clinical education and preparation of nursing students for accepting various roles in the health system are among the foremost objectives of nursing schools (6). From the perspective of education experts, educational programs and evaluation of these processes are complementary. Furthermore, a codified evaluation system is one of the most important influential factors in the improvement of clinical education from the viewpoint of students (7). Therefore, nursing

education policymakers are constantly concerned with finding effective methods of clinical education (8).

Clinical education aims to make measurable changes in students in the provision of clinical care. This type of education creates the opportunity for students to convert their theoretical knowledge into various mental, psychological, and kinetic skills that are essential to patient care (9). One of the challenges in clinical education is the performance evaluation in students since it is considered to be a determinant of the learning quality as a foundation for future plans, and the quality of learning outcomes depends on the quality of evaluation (10). In the studies conducted by Veton and Gonda in this regard, it was stated that the majority of students were not satisfied with their evaluation in clinical practice, considering the evaluations to lack objectivity (11). Moreover, the experience of researchers indicate that the clinical evaluation of nursing students is mostly carried out with the purpose of assigning final grades, and the common evaluation methods are mostly based on the mindset and personal views of teachers without sufficient adherence to objective and behavioral criteria (12). Chopman believes that overcoming mindsets in clinical

evaluation is difficult. Claims on the mental and non-comparable nature of clinical evaluations have urged instructors to find objective, reliable evaluation methods (13).

With this background in mind, it should be noted that logbooks are among the most potent tools to be employed in education, as well as the evaluation of education outcomes, in all fields, especially nursing and medicine.

On the other hand, the field of nursing and its academic education has recently undergone qualitative and quantitative changes. The proposed outlines of nursing by the affiliated ministry show the community-oriented transformations in the study units of community health nursing.

Nowadays, logbooks have long been used in the field education and evaluation of nursing students in the courses of community health nursing. However, due to the modifications in the educational contents and outlines of this field in recent years, there has been the need for the promotion of these logbooks, so that they could enhance the quality of clinical education, develop the skills of students, and eventually offer proper holistic care in nursing. The present study aimed to revise the apprenticeship and internship logbooks of community health nursing at Qazvin School of Nursing and Midwifery, Iran.

## Materials and Methods

This qualitative study was conducted to revise the apprenticeship and internship logbooks of community health nursing at Qazvin University of Medical Sciences in 2015. To assess the current logbooks in this university and other academic institutions and examine the findings of previous library studies regarding the logbooks of community health nursing in the country, a library study was initially performed and the literature in this regard was reviewed via searching in databases such as PubMed, SID, Iranmedex, and Magiran to collect data.

In the first stage of the study, the face and content validity of the former logbook were evaluated. All the items of the mentioned logbooks were scored based on a five-point Likert scale (absolutely essential, essential, relatively essential, slightly essential, and non-essential). To do so, the logbook was distributed among eight faculty members at the Department of Community Health Nursing (four members on campus and four members out of the school who were experts in the field of community health nursing). These individuals were asked to present their views toward all the items of the logbook. After collecting their views, all the comments were assessed qualitatively through census.

At this stage, 13 out of 65 items were eliminated, and 16 new items were suggested for the logbook.

In the second stage, the research team evaluated the new outline of the affiliated ministry (communicated in 2014) in the field of community health nursing (theory and practice). In accordance with the modifications in the amount of the theory and practice courses of the mentioned field, the items of the logbook were determined. At this stage, only 45 items were added to the logbook.

Combined findings of the first and second stage of the study resulted in the development of a new logbook, which contained 10 sections and 142 components. After the necessary modifications, the logbook was provided for the faculty members, and the face and content validity (qualitative) were assessed. The development diagram of the logbook is illustrated in Figure 1.

## Results

The initial logbook, which was provided for the faculty members for the evaluation of the face and content validity, had seven sections of essential activities and skills of students (vaccination: eight items, family planning: eight items, pregnancy health: nine items,

environmental health: 10 items, child health: 12 items, school health: 14 items, industrial health: four items) (total: 65 items). Details of the initial logbook have been presented in Table 1. According to the information in this table, only the eight underlined items are exclusively related to the health education and communication with the patients.

After assessing the new outline of the affiliated ministry and taking a poll from the faculty members, new sections and details were added to the initial logbook (Table 2). Data in Table 2 were divided into 10 sections and a total of 77 new items. Among the 10 sections of the table, the last three sections (health education, home care, and communications) were lacking in the initial logbook and were added to the new logbook for the first time. Moreover, 17 items relating to health education and communication with patients were added to the first seven sections of the logbook.

The final logbook was designed with 10 sections and 142 items. In the final logbook (Table 3) 25 items were directly focused on the educational and communications skills of the students. In addition, the two sections of health education and communications (total: 14 items) were focused on these skills.

*Vital Table 1: The primary sections and workbook statements*

Sections	Themes
<b>Vaccination</b>	*1-Good communication with the child
	*2- Good communication with the child's parents
	1- Checking the vaccination card to determine the vaccine which is needed for the child
	2- Checking the vaccine in terms of name, date of use, color
	3- Checking the child's health before vaccination
	4- Checking cold chain monitor
	5- Compliance with health principles before and after vaccine injection
<b>Family Planning</b>	6- Recording the vaccine specification in the vaccine card
	1- Good communication with the patient*
	2- Filing and recording patient information
	3- Completing the prenatal care form and follow up
	4- Giving advice on choosing a safe contraceptive method
	5- * Instructing how to use, drug interactions, and contraindications for each method of contraception
	6- Checking complications of contraceptive use
	7- Complete the women's gaping form
<b>Pregnant mother health</b>	8- Examination of breast and its diagnosis of abnormalities
	1- Filing and completing a pregnant mother's care plan at the first visit
	2- Interpretation of diagnostic tests for pregnant women
	3- Measuring blood pressure, height, weight and BMI
	4- Estimating delivery date
	5- Checking the status of the pregnant mother's vaccination and referral for the vaccine if necessary
	6- Determination of the necessity of injections of Rougum ampoules in a mother with a negative blood type
	7- Checking the mother's nutritional status
<b>Environmental Health</b>	8- Timely administration to the correct amount of iron, folic acid and... Diagnosing the health problems of pregnant mothers through observation and interviewing
	1- Studying and interpretation of demographic data and rural cultural situation and provide the village crocodiles
	2- Studying of the causes of death in different age groups
	3- Assessment of the health status of the rural environment (waste disposal, provision of safe water, wastewater treatment, sanitary facilities according to the checklist)
	4- Reviewing the provision of health services in the village and tracking existing deficiencies
	5- Checking rural water health
	6- Measuring water chlorine
	7- Measuring water pH
	8- Extraction of at least 20 health indicators from vital Zidge for one year
	9- Checking non-communicable and communicable diseases in the village (registration, reporting, care and referral)
<b>Child Health</b>	10- Assessment and analysis of village health problems
	1- Neonatal examination for jaundice
	2- Jaundice classification in aspect of signs
	3- Referral of children at risk for jaundice to the doctor
	4- * Teaching about the importance of breastfeeding
	5- * Teaching about to keep your baby when you're feeding breast milk

*Continue Vital Table 1: The primary sections and workbook statements*

	6- * Teaching the right position during breastfeeding
	7- * Teaching how to breastfeed and keep breast milk right
	8- Correct measurement of height, weight, child circumference
	9- Draw up the chart of height, weight, round head
	10- A comparison of child's physical development with standards and diagnosis of growth retardation, growth retardation and growth retardation
	11- Identification and care of high-risk children (if available)
	12- Checking how to feed
<b>School Health</b>	1- Checking school buildings for school suitability
	2- Checking suitability of school buildings classes
	3- The suitability of classes with the number of students
	4- Condition of the classroom ventilation
	5- Lighting status of classes
	6- heating system
	7- Proportion to the number of floors of each Grade
	8- Floor, ceiling and classroom walls
	9- Classroom board status
	10- Table and Chairs Status
	11- Environmental health of school
	12- Evaluation of school drinking water
	13- Checking the number and status of toilets
	14- Checking status and number of drinkers
<b>Industry and Places Health</b>	1- Assessing the health status of workers according to their health records
	2- Identification of people at risk of occupational injuries and their referral to health centers
	3- Checking the factory environment in terms of physical, chemical, and psychological risk factors
	4- Checking the work environment in terms of ventilation, heat, cold and ...

\*New themes

*Vital Table 2: sections and themes in primary logbook*

Sections	Themes
<b>Vaccination</b>	1- 1- Understanding the complications and contraindications of each vaccine
	2- 2. Teaching about possible complications of the vaccine
	3- Choosing the right vaccine injection site
	4- Proper vaccine injection
	5- Proper amount of drops of polio
	6- Vaccination for pregnant women
<b>Family Planning</b>	1- *Teaching how to approach the patient according to the type of prevention method
	2- * Teaching about the importance of performing a Pap smear test
	3- * Teaching about the importance of breast self-examination
<b>Pregnant mother health</b>	1- * Teaching young couples on hereditary diseases
	2- * Teaching the mother about prenatal care
	3- * Teaching about common problems during different stages of pregnancy
	4- * Teaching about Postpartum Risk Symptoms
	5- * Teaching about Postpartum nutrition education
	6- Identifying the risky of behaviors of his mother and wife
	7- * Teaching the mother about prenatal care

*Continue Vital Table 2: sections and themes in primary logbook*

<b>Environmental Health</b>	1- * Teaching how to make healthy drinking water
	2- Solving related problems according to the process
	Interpretation and comparison of the extracted indices from Zaj in recent years
	Drawing charts and tables to provide vital zidg data
	3- Visiting houses according to the checklist
<b>Child Health</b>	Identifying relevant health problems
	1- Teaching parents about the time to start a child's supplementary food
	2- Teaching parents about how to provide and provide baby food
	3- A training on the amount and timing of the onset of food supplements for the child
	4- Completing the oral examination of children and report abnormal cases
	5- Teaching parents about the oral health of the child
	6- Teaching about childhood disaster prevention
<b>School Health</b>	7- Determining the next visit time and record it in the child's card according to the age and condition of the child's development
	1- Wasting disposal status
	2- Sewage disposal situation
	3- School buffet status
	4- Examining the health history (thalassemia, diabetes, tuberculosis, epilepsy, chronic diseases, etc.)
	5- Students' general health examination
	6- Tracking height and weight and record on the chart
	7- Determining BMI and record in the chart
	8- Performing oral and dental treatments
	9- Examination of the spine (kyphosis, scoliosis and lordosis)
	10- Examination for the diagnosis of nutritional deficiencies (anemia, goiter)
	11- Examination of skin, hair and nails
	12- Vision measurement
	13- Hearing aid
	14- Psychosocial-behavioral problems (stuttering of the tongue, chewing nails, urinary incontinence, depression and depression, aggression and...)
	15- Respiratory problems (cough, shortness of breath and...)
	16- Clothing status (cleanliness, size, fit with the season and...)
	17- Referral of students with health problems
<b>Industry and Places Health</b>	18- Teaching students about health problems
	1- Designing a health education program to reduce risk factors
<b>Health Education</b>	1- Collecting information
	2- Identifying the most important needs of community education
	3- Determining the problem with educational priority
	4- Determining the target group
	5- Setting educational goals
	6- Development of a health education program tailored to educational needs
	7- Studying facilities, facilities and educational obstacles
	8- Choosing the right methods for health education for target groups
	9- Implementation of the training program
	10- Evaluation and feedback
<b>Home care</b>	1- Family survey on the health of the pregnant mother
	2- Family survey on the health of the infant's child



	3- Family survey in terms of health of the elderly member
	4- Family examination for the presence of a disabled person
	5- Family examination in the view of addicted person
	6- Family examination for the patient with chronic illness
	7- Family examination in terms of nutritional status and food health
	8- Family examination in terms of housing and environment health
	9- Checking the physical and psychological status of the family
	10- Reviewing the status of the family's evolutionary stage
	11- Identifying and record family problems correctly
	12- Prioritizing diagnosed problems
	13- Planning for the most recognized problem
	14- Running the care program as much as possible
<b>Communications</b>	1- Observing the principles of communicating (questioning, listening accurately and responsibly, observing, speaking, touching, etc.)
	2- Skills in building the right relationship with others
	3- Interaction and participation in the affairs
	4- Using the knowledge and experience of colleagues
	5- Reviewing and consult with colleagues during decision making

*Vital Table 3: sections and themes in Final logbook*

<b>Vaccination</b>	1- Proper relationship with the child
	2- Proper communication with the child's parents
	3- Checking the vaccination card to determine the vaccine needed by the child
	4- Controlling the vaccine in terms of name, date of use, color
	5- Checking the child's health before vaccination
	6- Observing the chains of cold
	7- Compliance with health regulations before and after vaccine injection
	8- Recording the vaccine specification on the vaccine card
	9- Understanding the complications and contraindications of each vaccine
	10- Teaching about possible vaccine complications
	11- Choosing the right vaccine injection site
	12- Proper vaccine injection
	13- Giving the correct polio drops
	14- Vaccination for pregnant mothers
<b>Family Planning</b>	1- Communicate well with the client
	2- Filing and recording customer information
	3- Completing the pregnancy care form and follow it
	4- Advice on choosing a safe contraceptive method
	5- How to use, drug interactions and contraindications to each contraceptive method
	6- Studying of complications arising from the use of contraceptive methods
	7- Completing the women's gaping form
	8- Teaching how to approach the patient according to the type of prevention method
	9- Teaching about the importance of performing a Pap smear test
	10- Teaching about the importance of breast self-examination
	11- Performing a breast examination and diagnosing abnormal cases
<b>Pregnant mother health</b>	1- Filing and completing a pregnant mother's care plan at first visit

*Vital Table 3: sections and themes in Final logbook*

	2- Interpretation of diagnostic tests for pregnant women
	3- Measuring blood pressure, height, weight and BMI
	4- Estimating probable birth date
	5- Checking the status of the pregnant mother's vaccination and referral for the vaccine if necessary
	6- Determination of the necessity and necessity of injections of rougum ampules in a mother with a negative blood type
	7- Studying of mother's nutritional status
	8- Timely administration to the correct amount of iron, folic acid and...
	9- Teaching the mother about prenatal care
	10- Teaching the mother about prenatal care
	11- Teaching about common problems during pregnancy
	12- Teaching about Postpartum Risk Symptoms
	13- Postpartum nutrition education
	14- Identify the risky behaviors of his mother and wife
	15- Young girls training on hereditary diseases
	16- Diagnosing the health problems of pregnant mothers through observation and interviewing
<b>Environmental Health</b>	1- Studying and interpretation of demographic information and cultural situation of the village and the village of Corki
	2- Studying of causes of mortality in different age groups
	3- Reviewing the provision of health services in the village and tracking existing deficiencies
	4- Assessment of the health status of the rural environment (waste disposal, provision of safe water, wastewater treatment, sanitary facilities according to the checklist)
	5- Checking rural water health
	6- Correcting water chlorine measurements
	7- Measuring water pH
	8- Teaching how to make healthy drinking water
	9- Investigation of non-communicable and communicable diseases in the village (registration, reporting, care and referral)
	10- Assessment and analysis of village health problems
	11- Solving related problems according to the process
	12- Extraction of at least 20 health indicators from statistical form (zij hayati: in persian) for one year
	13- Interpretation and comparison of the extracted indices from Zaj in recent years
	14- Drawing an appropriate chart for providing vital zigzag data
	15- Visiting home according to the checklist
	16- Identifying relevant health problems
<b>Child Health</b>	1- Neonatal examination for jaundice
	2- Jaundice classification for signs
	3- The referral of a baby to the doctor's risk of jaundice
	4- Learn about the importance of breastfeeding
	5- Learn how to keep your baby in breast milk
	6- Teach the correct mother position during lactation
	7- Learn how to breastfeed and keep breast milk right
	8- Correct measurement of height, weight, child circumference
	9- Draw up the chart of height, weight, round head

*Continue Vital Table 3: sections and themes in Final logbook*

	10- A comparison of child's physical development with standards and diagnosis of growth retardation, growth retardation and growth retardation
	11- Identification and care of high-risk children (if available)
	12- Find out how to feed the baby
	13- Teaching parents about the timing of starting a child's supplementary food
	14- Teaching parents about how to provide and provide baby food
	15- Learn about the amount and timing of starting baby food supplements
	16- Complete the oral examination form for children and report abnormal cases
	17- Teaching parents about baby's oral health
	18- Teaching about childhood prevention
	19- Determine the time of the next visit and register it in the child's card according to the age and the child's growth status
<b>Health Education</b>	1- Collecting information
	2- Identify the most important needs of community education
	3- Determine the problem with educational priority
	4- Determine the target group
	5- Setting educational goals
	6- Development of a health education program tailored to educational needs
	7- Study facilities, facilities and educational obstacles
	8- Choosing the right methods for health education for target groups
	9- Implementation of the training program
	10- Evaluation and feedback
<b>School Health</b>	1- Checking the school building for the proper location of the school
	2- Study the school building in terms of the location of the classes
	3- Fitness of the class with the number of students
	4- Ventilation condition of classes
	5- Class lighting conditions
	6- Heating system
	7- Fitting the number of building floors with a degree
	8- Floor conditions, ceilings and class walls
	9- Classroom status
	10- The status of the table and chairs
	11- Health school environment for general purpose
	12- Study of school drinking water
	13- Checking the number and status of toilets
	14- Checking the status and number of drinkers
	15- Waste disposal status
	16- Sewage disposal status
	17- School buffet status
	18- Examining the health history (thalassemia, diabetes, tuberculosis, epilepsy, chronic diseases, etc.)
	19- Student's General Health Survey
	20- Heights, height and weight, and recorded on the chart
	21- Determining BMI and record in the chart
	22- Performing oral and oral medications
	23- Examination of the spine (kyphosis, scoliosis and lordosis)
	24- Detection of nutritional deficiencies (anemia, goiter)

*Continue Vital Table 3: sections and themes in Final logbook*

	25- Examination of skin, hair and nails
	26- Vision measurement
	27- Hearing aid
	28- Psychosocial-behavioral problems (stuttering of the tongue, chewing nails, urinary incontinence, depression and depression)
	29- Respiratory problems (cough, shortness of breath and...)
	30- Clothing status (cleanliness, size, seasonal fit, etc.)
	31- Referring students with health problems
	32- Teaching students about health problems
<b>Home Care</b>	1- Family survey on the health of the pregnant mother
	2- Family Survey on the health of the infant's child
	3- Family survey in terms of health of the elderly member
	4- Family examination for the presence of a disabled person
	5- Family examination in the view of addicted person
	6- Family examination for the patient with chronic illness
	7- Family examination in terms of nutritional status and food health
	8- Family examination in terms of housing and environment health
	9- Checking the physical and psychological status of the family
	10- Reviewing the status of the family's evolutionary stage
	11- Identifying and record family problems correctly
	12- Prioritizing diagnosed problems
	13- Planning for the most recognized problem
	14- Running the care program as much as possible
<b>Communication</b>	1- Observing the principles of communicating (questioning, listening accurately and responsibly, observing, speaking, touching, etc.)
	2- Skills in building the right relationship with others
	3- Interaction and participation in the affairs
	4- Using the knowledge and experience of colleagues
	5- Reviewing and consult with colleagues during decision making
<b>Industry Health and Places</b>	1- Reviewing the health status of employees and workers according to their health records
	2- Identification of people at risk of occupational injuries and their referral to health centers
	3- Evaluation of the factory environment in terms of physical, chemical, and psychological risk factors
	4- Development of a health education program to reduce risk factors
	5- Checking the work environment for ventilation, heat, cold and...

## Discussion

The initial logbook consisted of seven sections and 65 items, while the final logbook had 10 sections and 144 items. The final logbook had three new sections and 77 new items, which were lacking in the former

logbook. The sections of 'health education', 'home care', and 'communications' were also lacking in the former logbook and added to the new logbook for the first time.

Logbooks are useful tools for the training and skills assessment of students (1-3). Since

there are various sources to determine educational objectives (e.g., experts, community needs, students) (14, 15), it is important to revise and modify logbook items based on the curriculum and educational sources (3).

By nature, the nursing profession is a combination of art and science in the provision of individual or community care for patients of diverse demographic characteristics. Acquiring the necessary skills, the graduate of the master's degree in nursing are able to provide various healthcare services. After graduation, they are often recruited in healthcare centers and hospitals, and their learned skills enable them to not only provide clinical care in hospitals, but also to become an efficient healthcare team member for the provision of community care and disease prevention (16).

In countries such as Australia, Sweden, and the United Kingdom, community health nurses with a bachelor's degree can provide community-based health care. In these regions, it has been acknowledged that nurses play an important part in the promotion of community health. The evaluation of the curriculum of the bachelor's degree nursing in the mentioned countries has established that acquiring the skills relating to the community-

based healthcare skills is a leading objective of the designed curricula. Further emphasis of these logbooks lies on the development of the essential clinical skills by nurses. The nature of these skills is such that every nursing student must be evaluated in terms of the acquisition of these skills during education and after graduation, and the permit to practice their skills is issued only if the evaluation is approved. Study of the nursing logbook in Iran shows that using this important instrument of evaluation and professional education has not yet been thoroughly established in nursing education centers, and there is no obligation for the application of this logbook in the final evaluation of nursing graduates (17).

The most significant finding of the present study, which is of great distinction in comparison with the previous studies in this regard, was that in this logbook, the aspects of 'health education' and 'professional communication with patients' have been accentuated, while they have been mostly neglected in the other clinical logbooks. Clinical nursing is a profession fundamentally involving training and communication skills. Correspondingly, the qualitative approach of the current research indicated that in recent years, special attention has been paid to the

health education and communication skills in nursing as opposed to the past. Comparison of our findings with the other studies in this regard showed that nursing services are mostly directed toward the participation of patients in an education-oriented manner (5, 6). The researchers of the present study concluded that in the other available clinical nursing logbooks in Iran, the two skills of 'health education' and 'professional communication' have not been adequately considered. According to the findings of the current research, the contents of the new curriculum of community health nursing, which was proposed by the ministry of health in 2014, further emphasis has been placed on these aspects, so that the number of the relating items have increased from eight items to 17 items. These modifications in the nursing curriculum are indicative of the community-oriented policies on a large scale by the ministry of health. Health education and communications are two elemental tools for the promotion of community health. In fact, the promotion of community health could be attributed to the adoption of proper strategies to enhance the sense of responsibility in the community members toward their own health and wellbeing (18). Health education and development of

professional communication are the stepping stone of healthcare promotion in most of the developed countries. Therefore, teaching communication skills to nursing students is considered essential.

In the present study, in line with the revisions in the large-scale policies of the ministry of health, the need for improving community-oriented nursing activities was evident in the poll taken from the faculty members, so that many of the community-based health services (health education, communications, home care) were considered to be essential skills for nurses from the viewpoint of these elites.

## Conclusion

The difference between the current logbook and the former version is that the items relating to 'health education' and 'communications' are further emphasized on the current logbook, while they were mostly neglected in the former versions. Development of these skills could promote holistic nursing. Although the acquisition of the principles of health education, communicating with patients, and home care are considered in the educational curriculum, providing the opportunity for the healthcare activities of nurses within the community remains a fundamental element in this regard.

Therefore, with the prediction of all these skills in the apprenticeship and internship logbooks of community health nursing and their application for the bachelor's degree nursing students, the continuity of these skills after the graduation of these students is expected to promote community health on all levels.

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### References

- 1- AssadiHoveizian SH, Shariati A, Haghighi SH, Latifi SM, SheiniJaberi P. Effects of clinical education and evaluation with portfolio method on nursing students' satisfaction: a clinical trial. *Journal of Clinical Nursing and Midwifery.J ClinNurs Midwifery*. 2014; 3(3): 70-79.
- 2- Bahreini M, Shahamat SH, Moattari M, Akaberian SH, Sharifi S, YazdankhahFardMR. Development of Reflective Skills among Nurses through Portfolio: A Qualitative Study. *Iranian Journal of Medical Education*. 2012; 12(2): 120 - 130 .
- 3- Saeedazzakerin M. Khorami Marakani A, Khorami Marakani M.H. log book -based learning in nursing education.*Journal of School of Nursing and Midwifery, ShahidBeheshti University of Medical Sciences and Health Services*. 2009; 19(66):43-49.
- 4- Akhoundzadeh K, Ahmari Tehran H, Salehi SH, Abedini Z. Critical thinking in nursing education in Iran. *Iranian Journal of Medical Education*. 2011; 11(3): 211- 223.
- 5- Latifi M, Shaban M, NikbakhtNasrabadi AR, Mehran A, ParsaYekta Z. Clinical evaluation effect comparison by two methods conventional and port folio on nursing students satisfaction rate.*Nursing Research*. 2011; 6(21): 15-28.
- 6- Cheraghi F,Parkhideh H,Riazi H. The correlation study self efficacy clinical performance nursing students. *Scientific Journal of Hamadan Nursing & Midwifery Faculty*. 2011; 19(1) :35-40.
- 7- Tahery N, HachemBechari Y, Hojjati H, Cheraghian B, Mohammadi H. Effective factors on clinical education improvement from nursing students' viewpoints of Abadan nursing faculty in 2009. *Dena Scientifice Journal*. 2008; 4(3):4.
- 8- Alavi M, Abedi H. Nursing Students' Experiences and Perceptions of Effective Instructor in Clinical Education. *Iranian Journal*

- of Medical Education*. 2008; 7(2): 333-325.
- 9- Omidvar SH, Bakuei F, Salmalian H. Clinical training problems from midwifery Students' Viewpoints at the University of Medical Sciences Babol. *Iranian Journal of Medical Education*. 2005; 5(2): 15-21.
- 10- Hadizadeh F, Firoozi M, ShamaeyanRazavi N. Nursing and midwifery students' perspective on clinical education in Gonabad University of Medical Sciences. *Iranian Journal of Medical Education*. 2005; 5(1): 70-8.
- 11- BorazPardejani SH, Feraidunimoghadam M, Lorizadeh MR. Situation clinical training from the perspective of students from the Faculty of nursing and midwifery Tehran University of Medical Sciences. *Iranian Journal of Medical Education*. 2008 ;5(3) :102-111.
- 12- Latifi M, Shaban M, NikbakhtNasrabadi AR, Mehran A, ParsaYekta Z. Effect of Clinical Evaluation with Portfolio on Critical Thinking Skills of Nursing Students. *Iranian Journal of Medical Education*. 2011; 11(4): 380-368.
- 13- Alavi M, Iraj Poor AR, Abedi HA. concepts in the evaluation of clinical training. *Strids in Development of Medical Education*. 2007; 4(1): 10-18.
- 14- Ahadian M. Introduction to educational technology. 2010. Boshra publisher, Tehran, Iran.
- 15- Shabani H. Methods of education. 2012. Samt publisher. Tehran, Iran.
- 16- Hosseinzadeh K. Principles of Community Health Nursing Internship. *The Journal of Qazvin University of Medical Sciences*. 2016.
- 17- Khayyati F , Jahanlou A.SH , Lotfizadeh M. Developing and Introducing a New Curriculum for Apprenticeship of Public Health Students in Bachelor Level in 2009. *Journal of Health*. 2010; 3(4): 81-93.
- 18- Hosseinzadeh K, Niknami S, Heidarnia A. Schooling fever threats school children's physical activity; A qualitative study in Iranian families. *Indian Journal of Fundamental and Applied Life Sciences*. 2015; 5 (s3): 622-29.