NET2021 Conference
Live session full abstracts

Theme Session 3D
Educational Enhancement

3Di, 14:00 - 15:20, 1 September 2021
Innovation paper
Co-production for collaborative learning through open dialogue across media: 'We dance like this'
Dr John Stephens and Chris Carter, Sunderland University

Promotional abstract: Contemporary Healthcare Education operates within an interconnected and rapidly changing world of challenge and opportunity in the development of curricula that reflect practice. This work provides an evaluation of a co-produced module of study within a Pre-Registration MSc Physiotherapy programme. Students identify, develop, and design small-group projects working with 'Physiopedia'. Thus, projects hold the potential to contribute to a global educational forum as well as student dialogue for learning. Students critically explore both 'product' (resultant project) and 'process' (project development). Emergent learning affects continuing professional development and identity, within themes associated with the work of Derrida, Foucault, and Bauman.

Background, context and evidence base for the innovation, including, where possible, its international relevance: In meeting the educational needs of contemporary society, Kleiman (2011) argues the necessity for disequilibrium through constant change and evolution where creativity is potent – education at 'the edge of chaos'. This position is placed against a backdrop of an interconnected, continually changing world where technology and dialogue are major drivers in healthcare education (Stephens, 2019). Physiopedia is a free resource of physical therapy knowledge, collaboratively edited and driven by experts. Its mission is to help improve global heath by providing universal access to physical therapy knowledge.

Aim/focus of the innovation: The expanding contexts of physiotherapy present opportunities for pre-registration education in terms of curriculum scope and design. It is proposed that curricula driven by 'process' rather than 'product' to be appropriate in meeting the need for students to develop as autonomous learners (Stephens, 2019). MSc Physiotherapy (pre-registration) students are provided with the opportunity to investigate a contemporary area of physiotherapy practice (of their own choosing) within a general theme of innovation, service and/or professional development, and develop a Physiopedia resource to support this.

Implementation of the innovation: Guidelines and instructions to a) gain a shared understanding of the purpose and scope of projects, b) comply with the requirements of 'Physiopedia' were discussed with students in class. Projects were developed to meet co-produced learning outcomes developed by the full student group and University staff. Projects were agreed and developed following a series of facilitated workshops linked to a range of physiotherapy service contexts (e.g. NHS, Charities, Private Practice) and open discussions with individual physiotherapists exploring their current role, career path to date, and future aspirations in relation to the continuing development of the physiotherapy profession within contemporary healthcare.

Methods used to assess the innovation: Students (n=20) worked in four small groups in the development of the 'Physiopedia' projects, that can be found here https://www.physio-pedia.com/Northumbria_University_Innovation_and_Contemporary_Physiotherapy_Project. In addressing agreed learning outcomes a 30-minute individual presentation supported by visual aids followed by a 10-minute discussion in relation to the 'product' (the project) and also the 'process' of its development was undertaken. Presentations/discussions were filmed. Narrative analysis of the filmed discussion (in particular) supported by field notes was undertaken to identify emergent themes.

Key findings: Five emergent key themes were identified from the evaluation: (the value of) open dialogue; relationships across environments; impact; collaboration and movement – 'we dance like this'; personal and professional identity. Although the task was initially viewed with ambiguity (the challenges of free choice!), students enjoyed and valued their experience. Ideas and activity initially known to very few people became (potentially) available to a global audience for discussion. Methodologically the work is framed by symbolic interactionism (Blumer, 1969), with the works of Derrida, Foucault, Bauman and Bohm providing useful theoretical perspectives for contemporary pre-registration education.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

1. Co-production of curriculum outcomes and content (product) that reflects contemporary practice issues;
2. The value of an emphasis on 'process' driven curricula;
3. Impact beyond the classroom and local practice working in collaboration with a 'public' professional media platform.

References:
Blumer H. (1969) *Symbolic Interactionism. Perspective and Method*. New Jersey: Prentice Hall.

Kleiman, P. (2011) 'Learning at the Edge of Chaos.' *All Ireland Journal of Teaching and Learning in Higher Education* (AISHE-J) 3(2), 62.1-62.11

Stephens, J. (2019) 'Hasten slowly, you will soon arrive: Space, dialogue and participation in support of a Dialogical Curriculum Framework.' Doctoral Thesis. Available at: http://nrl.northumbria.ac.uk/38912/1/John%20Stephens%20final%20thesis.pdf.

Keywords: Co-prodution, Collaborations, 'Physiopedia', Learning and Identity.

3Dii, 14:00 - 15:20, 1 September 2021
Innovation paper
Co-tecs: A collaborative technology approach to supporting enhanced learning
Katherine Drape and Paul Watson, Northumbria University

Promotional abstract: The impact of the COVID-19 pandemic and student nurse practice learning has presented unique challenges as practice areas have swiftly adapted their way of working to ensure safe management of care for families and service users, adopting a tech approach to service delivery. Considering this approach and the need to ensure meaningful learning and collaborative working, Northumbria University Nursing students from Child and Mental Health fields were given the opportunity to engage in a technology enhanced learning experience delivered by practice partners in the North East area.

Background, context and evidence base for the innovation, including, where possible, its international relevance: The impact of the COVID 19 pandemic and student nurse

practice learning has presented unique challenges as practice areas have swiftly adapted their way of working to ensure safe management of care for families and service users, adopting a tech approach to service delivery (Li *et al.,* 2019; Wyres & Taylor, 2020). The use of Collaborative Technology Enhanced Care Services has been at the forefront of NHS England's Five Year Forward view (2014). Moreover, how health technology is used to support patients and service users has been recognised as an opportunity to transform patient outcomes and to enhance Higher Education for Nursing students (Konard *et a*l., 2021; Cook *et a*l., 2011)

Aim/focus of the innovation: Considering this approach and the need to ensure meaningful learning and collaborative working, Northumbria University Nursing students from Child and Mental Health fields were given the opportunity to engage in a technology enhanced learning experience delivered by practice partners in the North East area. The use of technology enhanced learning again has been identified as a key priority in supporting the development of the healthcare workforce (Health Education England, 2013). Moreover, Co-Tecs, continues to be a priority in ensuring opportunities for health and social care students (Lea & Callaghan, 2011), to acquire, develop and maintain the essential knowledge, skills, values and behaviours needed for safe and effective patient care.

Implementation of the innovation: For Child field students this was delivered by the Children's 0-19 services across three different geographical regions, whilst Mental Health students' experience was delivered by multiple stakeholders, including statutory, private and third sector organisations. This regional approach ensured our students', our clinical partners' and the universities' maiden experience of Co-Tecs was underpinned by the NMC (2018) *Future nurse: Standards of proficiency for registered nurses* to demonstrate the knowledge, skills and values of the NMC code.

Methods used to assess the innovation: Student evaluation in the form of questionnaires were completed at the end of the Co-tecs experience and student and staff were given the opportunity to discuss their experience and learning in a virtual discussion at the end of the programme.

Key findings: Initial feedback from students and staff has been positive with role play and scenarios from practice being identified as key to student engagement (Swart, 2017). It is vital for the development of Co-Tecs and the student experience that research is planned to explore the use of co-tecs as a future model of learning, looking at the impact and outcomes of clinical practice, partnership working and student educational experience.

Three key points to indicate how your work contributes to knowledge development within the selected theme:
- Co-tecs is a future model of learning which enhances student nurses' experience.
- Co-creation and partnership working across the region to develop technology enhanced learning supports best practice and bridges theory to practice.
- The use of technology enhanced learning provides insight into specialist areas and teams across different fields of nursing.

References:

Cook, D.A., Hatala, R., Brydges, R., Zendejas, B., Szostek, J.H., Wang, A.T. & Hamstra, S.J. (2011) 'Technology-enhanced simulation for health professions education: a systematic review and meta-analysis.' *JAMA*, 306(9), 978-988.

Department of Health (2014) *NHS five year forward view.* London: The stationary Office. Available at: https://www.england.nhs.uk/five-year-forward-view/ [Accessed 11.3.2021)].

Konrad, S., Fitzgerald, A. & Deckers, C. (2021) 'Nursing fundamentals–supporting clinical competency online during the COVID-19 pandemic.' *Teaching and Learning in Nursing*, 16(1), 53-56.

Li, L., Lin, M., Wang, X., Bao, P. & Li, Y. (2020) 'Preparing and responding to 2019 novel coronavirus with simulation and technology-enhanced learning for healthcare professionals: challenges and opportunities in China.' *BMJ Simulation & Technology Enhanced Learning*, 6(4),196-198.

Lea, S. & Callaghan, L. (2011) 'Enhancing health and social care placement learning through mobile technology.' *Journal of Educational Technology & Society*, 14(1), 135-145.

Nursing and Midwifery Council (2018) Future Nurse: Standards of proficiency for registered nurses. Available at: https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/future-nurse-proficiencies.pdf [Accessed 11.3.2021].

Swart, R. (2017) 'Critical thinking instruction and technology enhanced learning from the student perspective: A mixed methods research study.' *Nurse Education in Practice*, 23, 30-39.

Wyres, M. & Taylor, N. (2020) 'Covid-19: using simulation and technology-enhanced learning to negotiate and adapt to the ongoing challenges in UK healthcare education.' *BMJ Simulation & Technology Enhanced Learning*, 2020, 6, 317-319.

Keywords: Collaborative, Co-construction, Enhanced learning, Partnership working, Educational Experience.

3Diii, 1 September 2021, 14:00 - 15:20
Poster+
The Healthcare Academics Race Equality Diversity and Inclusion Networks
Sheila Sobrany and Georgina Cox, Middlesex University

Promotional abstract: Inspired by the work of members of the Chief Nursing Officer's Black Minority & Ethnic Strategic Advisory Group. The Healthcare Academics Race Equality Diversity Inclusivity Network (HAREDIN) began in December 2018 after nursing academics stated that they wanted this group to help support the student mirror group SHAREDIN. These networks are bringing about a positive change in the way that the Middlesex University works to supporting Black Minority and Ethnic Nursing staff and students in higher education as well as alumni Nursing students with a 'lift as your rise approach'. They have been shortlisted for One Middlesex staff awards.

Main focus/theme of, or issues addressed by, the poster: The Healthcare Academics Race Equality Diversity Inclusivity Networks values the contributions of Black Minority and Ethnic nursing academics in supporting each other and their Pre-Registration students though similar journeys in the NHS from undergraduate, postgraduate and beyond with a 'lift as you rise' approach because they have a clear understanding of the barriers they face. Their work aims to reduce attrition and improve retention and career progression of nurses in the NHS and higher education through coaching and mentoring as well as allowing them to thrive through being in touch with their sense of cultural and professional identity.

Research approaches and underlying evaluation: Quantitative Research was conducted within the Health and Education Faculty at Middlesex University. The participants were from students from the fields of Adult, Child and Mental Health Nursing. Students with English as a first language and students with English as a second language were explored. An online questionnaire was posed to 80 out of 240 students. Descriptive data analysis showed the mix of student participants was largely diverse, spoke multiple languages, were female and

young. Expectations were higher of the teaching quality than the accessed resources. Older students struggled to cope with learning, accessing resources, transitioning more than younger students. Experiences and expectations were avoidance of confusion, lack of clarity and consistency.

Implications for healthcare education: Teachers need to be supported to develop cultural congruence, when teaching these students. Institutions need to develop a culturally sensitive curriculum and need to identify students who are older, and at risk. Students wanted their teachers to be accessible and make time to see drafts and discuss their work, lack of these opportunities created anxiety in the students. They were approaching mainly Black Asian and minority students they felt they could culturally identify with.

References:
Advance HE (2012) Race Equality Charter. Available at: https://www.ecu.ac.uk/equality-charters/race-equality-charter/ [Accessed 5 May 2019].

Health Education England (2013) Reducing Pre-Registration Attrition and Improving Retention Report.

OfS (2019) Differences in student outcomes. Available at: https://www.officeforstudents.org.uk/data-and-analysis/differences-in-student-outcomes/ethnicity/ [Accessed 4 May 2019].

Parahoo, K. (2014) *Nursing Research Principles, Process and Issues*. 3ed. Basingstoke: Palgrave Macmillan.

Rollock, N. (2013) 'A political investment: revisiting race and racism in the research process.' *Discourse; Studies in the Cultural Politics of Education*, 34(4), 492-509.

Sandelowski, M. (2000) 'Focus on Research Methods-Whatever Happened to Qualitative Description?' *Research in Nursing & Health*, 23, 334-340.

Scammell, J. & Olumede, G. (2011) 'Racism and the mentor-student relationship: Nurse education through a white lens.' *Nurse Education Today*, 32(5), 545-550.

Serrant- Green, L. (2010) 'The sound of 'silence a framework for researching sensitive issues or marginalised perspectives in health.' *Journal of Research in Nursing*, 16(4), 347-360.

Warmington, J. (2018) *NHS workforce race equality: A case for diverse boards*. London: NHS England.

West, E., Nayar, S. & Taskila, T. (2017) *The Progress and Outcomes of Black and Minority Ethnic (BME) Nurses and Midwives through the Nursing and Midwifery Council's Fitness to Practise Process*. Greenwich: NMC Report University of Greenwich.

West, M., Dawson, J. & Kaur, M. (2015) Making the difference: diversity and inclusion in the NHS. Kings Fund.

WRES (2018) Workforce Race Equality Standard data reporting, s.l.: NHS England.

Keywords: Black Asian Minority and Ethnic, Widening Participation, NHS Long Term Plan, Workforce Race Equality Standard.

3Div, 14:00 - 15:20, 1 September 2021
Poster+
Engaging students in learning about person-centred care via a neighbourhood study
Kevin Bayley, University of Manchester

Promotional abstract: In the first-year of a Nursing degree, students study one of Greater Manchester's neighbourhoods, providing an introduction to the area and to each other. Over

five days they spend time in, and learn about, an area and its population. The study focuses on public spaces, assets and culture, with activities leading to consideration of personalised care and social prescribing. This partnership with local care organisations and the third sector, deliberately keeps students away from NHS placements. Groups develop online bulletin boards and at the end of the study, these are accessible to all students visiting these areas for later placements.

Main focus/theme of, or issues addressed by, the poster: The relationship between healthcare professionals and the public is changing. Personalised care is fundamental to the NHS Long Term Plan (NHS, 2019), enabling personal choice and control. The new NMC Standards of proficiency for registered nurses (NMC, 2018) provide an opportunity for universities to explore the meaning of person-centred care with students and consider factors that support health and wellbeing rather than factors that cause disease. Taking an asset-based approach to the neighbourhood study encourages students to appreciate community-led approaches to manage health and wellbeing.

Research approaches and underlying evaluation: Quantitative data has been captured from the studies and activities undertaken by the students. Community partners have provided feedback on the resources developed to inform future iterations. Plans are in development for a qualitative evaluation of the next neighbourhood study with student and community focus groups to understand the experience and value of this learning.

Implications for healthcare education: The new nursing curriculum was developed in response to the NMC Standards of proficiency for Registered Nurses (NMC, 2018) using a constructive alignment (Biggs & Tang, 2011) approach. With this in mind, it is not sufficient for students to learn about person-centred care and social prescribing; they need to actively seek out and engage with these activities in the real world, thus incorporating them into their practice framework. This partnership approach combines declarative and functioning knowledge to provide an authentic learning and assessment experience that informs and influences the students' development as nurses.

References:
Biggs, J.B. & Tang, C.S. (2011) *Teaching for quality learning at university: what the student does* (4th ed. ed.). Maidenhead: McGraw-Hill/Society for Research into Higher Education/Open University Press.

Nursing and Midwifery Council (2018) Standards of proficiency for registered nurses. Available at: https://www.nmc.org.uk/standards/standards-for-nurses/standards-of-proficiency-for-registered-nurses/.

National Health Service (2019). NHS Long Term Plan. Available at: https://www.longtermplan.nhs.uk/.

Keywords: Partnership Working, Authentic Learning, Person-Centred Care, Social Prescribing, Student Experience**.**