

## NET2021 Conference

### Live session full abstracts

#### Theme Session 6A

#### Student experience, engagement and achievement

6Ai, 14:00 - 15:20, 2 September 2021

Issues for debate paper

**Negotiated work-based learning at postgraduate level: What are the challenges within healthcare practice?**

Helen Orton, University of Liverpool

**Promotional abstract:** Negotiated work-based learning provides a flexible educational programme, being more accessible to healthcare professional learners within a challenging and dynamic healthcare environment: it is also congruent with the views and plans of healthcare organisations. The approach, whilst relying on experiential learning, facilitates active and authentic learning and encourages a learning-to-learn aptitude which encourages the questioning of underlying assumptions around practice. The need for a structured framework will be examined to ensure that teaching and learning strategies, agreed learning outcomes and assessments are constructively aligned. The presentation will also critically reflect the diversity of work-based learning opportunities.

**Key concepts to be addressed, including, where possible, the international relevance:**

It is reported that work-based learning can be challenging for academics in that they are required to adopt a mentor, coach and supervisor role as opposed to taking the more traditional mode of teaching and learning (Stephens, 2014). Academics need to realise that the curriculum is driven by the needs of the employer and learner, thus resulting in a shift in responsibility in learning and a sharing of power on the design process of content and quality of the learning programme. Thus, for the work-based learning to be effective, the partnership arrangement needs to be built on mutual respect.

**Aim(s)/focus:** The presentation will identify that understanding the real workplace issues is key, the ultimate aim being to improve the delivery of high-quality patient care. This will be achieved through reflecting on a number of negotiated work-based learning projects, ranging from enhanced clinical skills to the writing and implementation of policies, in which the presenter has been involved. The presentation will also reflect on the importance of the tripartite relationship and the need for mutual development of the learner's learning. The need for quality assurance achieved through applying a structured framework will be examined, both from the academic and work-place perspective.

**Evidence base and literature informing the arguments:** Work-based learning, informal or formal, requires participation in work processes and collaboration with colleagues, taking on challenges and thus, is seen as a by-product of working. The formal approach is via flexible and high-quality educational programmes which have been encouraged within healthcare organisations to enable workforce transformation and high-quality care to be delivered. Developing a partnership between the service provider, the student and the higher education institute (HEI) is essential to ensure learning is assessed against agreed learning outcomes and academic quality is assured and where the learning is both negotiable and congruent with the organisations' views and plans. The challenges around work-based learning for

academics demands more of a coaching role rather than the more traditional mode of teaching and learning and, as such, the curriculum is co-designed with the student and their organisation. However, it is commonplace to develop a bespoke learning contract as part of the tripartite arrangement, consistent with a module specification on which learning is based in HEIs but the “one size fit” approach is not feasible: creativity is required to ensure learning and teaching strategies and assessments are both meaningful and creative.

**Issues for debate:** What and how much direction should academics provide, considering the nature and area of the learning? As part of the tripartite agreement, all parties should ensure that the programme of learning is coherent and that the learning outcomes and assessment and associated criteria are appropriate to the level of award. Who should take responsibility for assessing the student? Work-based assessments should reflect the WBL, some of which may be competency-based, can be undertaken by work-based mentor but the academic rigour can be assessed by academics via a critical reflection of the process, their learning and implications for future practice.

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

- Negotiated work-based learning requires a robust tripartite arrangement which, in order to facilitate student-led learning, draws on the expertise from mentors in practice with the academic taking on a coaching role and ensures a coherent programme of study.
- The nature of the “negotiated” part of work-based learning allows flexibility in learning and a diverse range of practice skills that can be developed including the clinical skills acquisition, policy and protocol development, whilst at the same time, gaining skills in project management.
- Completing negotiated work-based learning enables professionals to gain academic reward and has the opportunity to enhance career development.

#### **References:**

Boud, D. & Solomon, N. (2001) *Work-Based Learning: A New Higher Education?* Open University Press, Milton Keynes.

Department of Health (2006). *Learning for a Change in Healthcare*. London. HMSO.

Department of Health (2008). *High Quality Care for All: NHS Next Stage Review*. The Stationery Office, London.

Doherty, O. & Stephens, S. (2019) ‘The cultural web, higher education and work-based learning.’ *Industry and Higher Education*, 34(5), 330-341.

Eraut, M. (2007) ‘Learning from other people in workplace.’ *Oxford Review of Education*, 33(4), 403-422.

Lester, S. & Costley, C. (2010) ‘Work-based learning at higher education level: value, practice and critique.’ *Studies in Higher Education*, 35(5), 561-575.

Nevalainen, M., Lunkka, N. & Suhonen, M. (2018) ‘Work-based learning in health care organisations experienced by nursing staff: a systematic review of qualitative studies.’ *Nurse Education in Practice*, 29, 21-29.

Stephens, S., Doherty, O., Bennett, B. & Margey, M. (2014) ‘The challenge of work-based learning: a role for academic mentors?’ *International Journal of Mentoring and Coaching in Education*, 3(2), 158-170.

**Keywords:** Tripartite Agreement, Student-Led, Cohesive Programme, Constructive Alignment, Academics, Role, Mentor/Coach.

**6Aii, 14:00 - 15:20, 2 September 2021**

**Research paper**

**Enhancing early stage leadership skills in new Nursing graduates using a rapid access Masters' course: A feasibility study**

Oonagh Carson and Dr Helen McGarvey, Ulster University

**Promotional abstract:** This research session relates to the conference theme of Educational Enhancement and specifically to assessing the impact of postgraduate learning on the development of leadership and resilience skills in new nurses. The session presents the findings from Phase One of a repeated measures design study looking at self-assessment by new nurse graduates of leadership and resilience skills within the first two weeks and at six months following rapid access to a Masters Level Nursing Programme which includes rotational placements and a three tier structure of clinical support.

**Background, including underpinning literature and, wherever possible, the international relevance of the research:** Healthcare is faced with nursing shortages (RCN, 2015); concerns of supply and retention (Christie & Co, 2015); and the need to attract newly qualified nurses (PHE, 2018). Increasingly complex healthcare with safety, quality and efficiency demands (Massimi *et al.*, 2017), also requires better-educated nurses with strong, resilient, leadership skills which deliver better patient outcomes (Wilkinson *et al.*, 2018). Masters educated nurses improve care by challenging poor practice and becoming change agents (Hole *et al.*, 2016) resulting in the current international trend for Master's level nurses. This study examines phase one of a rapid-access, part-time, MSc aimed at improving resilience and retention.

**Aim(s) and/or research question(s)/research hypothesis(es):** The aim of the research is to test the associations between early access to the Ulster University MSc Nursing – Leading Practice programme for new Nursing graduates and the development of leadership skills and resilience skills.

Research objectives of the full study are:

- To establish if there was any change in leadership and resilience perception scores over the four time-points.
- To make recommendations regarding the appropriateness of a rapid access model MSc in Nursing for new Nursing graduates.

This submission will present the findings from phase one of the experiential learning intervention at data collection time-points one and two.

**Research methodology/research design, any ethical issues, and methods of data collection and analysis:** The ethics committee approved study, is a repeated measures design with data collection in week 2 of the intervention (Sept 2019), and again at 6 months (February 2020), 12 months and 2 years. This submission will present analysis from the first two data collection points. Online data collection will include brief demographic questions; the Healthcare Leadership Self-Assessment Tool, reflecting attributes of the Healthcare Leadership Model (NHS Leadership Academy 2013) and the extensively and internationally used, 25 item self-rating Connor-Davidson Resilience Scale (CD-RISC). SPSS will be used

to establish changes in perceived leadership and resilience identified as the project (intervention) progresses.

**Key findings and recommendations:** This presentation will report Phase One findings of a study exploring the impact on leadership and resilience of an innovative Master's leadership programme for new graduate adult nurses. The programme managed by the Northern Ireland Practice and Education Council (NIPEC) on behalf of the Department of Health in collaboration with the School of Nursing, Ulster University, is a two-year experiential learning intervention of a rapid access part time MSc (MSc Nursing – Leading Practice) which contains four 30-credit modules and one 60-credit dissertation module in combination with four rotational, clinical placements.

Participants were recruited from students who completed their Pre-Registration Adult Nursing course at Queen's University, Belfast or Ulster University, in September 2019, with a 2:1 or above, degree classification. The participants were appointed as HSC band 5 staff nurses and commenced the programme in September 2019. Aligned with the normal university support the MSc participants have been allocated a three-tier structure of clinical support. They have been provided with a band 6 or above clinical facilitator (mentor), a quality initiative mentor and a band 7 project coordinator. The analysis of findings from two (of the four) data collection points of self-assessed leadership and resilience skills will be presented.

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

- Enhancing leadership skills in early career staff nurses through a Rapid Access Master's Programme involving rotational placements supported by a three tier structure of clinical support.
- Assessing the impact of postgraduate learning on resilience skills development in new graduate nurses through an innovative experiential programme.
- Examining self assessment of leadership and resilience skills in new graduate nurses.

#### **References:**

Christie & Co (2015) *The UK Nursing Workforce Crisis or Opportunity?* London: Christie & Co.

Clark, L., Casey, D. & Morris, S., (2015) 'The value of Master's degrees for registered nurses.' *British Journal of Nursing*, 24(5), 16-20.

The Connor-Davidson Resilience Scale (2003) Available at: <http://www.connordavidson-resiliencescale.com/user-guide.php> [Accessed August 2019].

Hole, G.O., Brenna, S.J., Graverholt, B. & Ciliska, D. (2016). 'Educating change agents: a qualitative descriptive study of graduates of a Master's program in evidence-based practice.' *BMC Medical Education*, 16, 71-79.

Massimi, A., Marxuillo C., Di Muzio, M., Vacchio, R., D'Andrea, E., Villari, P. & De Vito, C. (2017) 'Quality and relevance of master degree education for the professional development of nurses and midwives.' *Nurse Education Today*, 53, 54-60.

NHS Leadership Academy (2013) *Health care Leadership Model. The Leadership Framework Self-assessment tool.* NHS leadership Academy.

Public Health England (2018) *Facing the Facts, Shaping the Future. A draft health and care workforce strategy for England to 2027.* Available at:

<https://www.hee.nhs.uk/sites/default/files/documents/Facing%20the%20Facts%2C%20Shaping%20the%20Future%20%20a%20draft%20health%20and%20care%20workforce%20strategy%20for%20England%20to%202027.pdf>. [Accessed August 2019].

Royal College of Nursing (2015). *International Recruitment 2015*. London: Royal College of Nursing.

Wilkinson, J., Carryer, J., Budge, C. (2018) 'Impact of postgraduate education on advanced practice nurse activity – a national survey.' *International Nursing Review*, 65, 417–424.

**Keywords:** Nursing, Leadership, Resilience, Innovative, Experiential.

**6Aiii, 14:00 - 15:20, 2 September 2021**

**Research paper**

**The perceptions and experiences of mid-career nurses and midwives who are Masters level part-time students**

Dr F. J. Raymond Duffy, The University of the West of Scotland

**Promotional abstract:** Mid-career nurses are the largest group of currently registered nurses (NMC, 2019) and the number of mid-career nurses and midwives participating in Masters' Level study is increasing. Despite this, very few research studies have been conducted looking at their views. This descriptive phenomenological study brings to the fore the perceptions that mid-career nurses have about participating in Masters' programmes. The study findings indicate how both employers and higher education institutions (HEIs) could improve the support mechanisms available for such students. It also recommends that more effort be expended on making mid-career part-time students feel part of the university community.

**Background, including underpinning literature and, wherever possible, the international relevance of the research:** Mid-career professionals are experiencing changes that are encouraging many to return to participate in Masters'-Level programmes. The shortage of doctors (Begley *et al.*, 2014) and the development of specialist clinical expertise (Cooper *et al.*, 2019) may explain this. There are also intrinsic factors driving this including a desire to be challenged, to not feel 'left-behind', a means of increasing their professional confidence and a way to extend their careers and provide more funds for retirement (Cooley, 2008; Spencer, 2006; Watkins, 2011; Isopahkala-Bouret, 2015). However, there is limited research that has explored their experiences or views.

**Aim(s) and/or research question(s)/research hypothesis(es):** The aims were:

- To bring to the fore the perceptions that midcareer professionals have about participating in health and social care Masters Programmes as older students.
- To reveal the personal, social and cultural factors that may have a bearing on their experiences while engaging in learning within an HEI.
- To uncover and understand from their perspective the challenges facing mid-career students participating in taught postgraduate Masters Level study.
- To identify actions that can be taken forward to make a contribution to ongoing debates about the participation of mid-career professionals from health and social care in higher education.

**Research methodology/research design, any ethical issues, and methods of data collection and analysis:** The research methodology employed was descriptive phenomenology following a Husserlian approach. Twelve mid-career nurses (aged 45 and



over) were interviewed, in depth, about their experiences as part-time Masters Level students. Analysis was undertaken utilising Braun and Clarke's (2006, 2013, 2019) framework for Reflexive Thematic Analysis. Ethical permission for the study was granted by both the University of Strathclyde and the University students were recruited from. Efforts were made to ensure there was no coercion involved in student participation.

**Key findings and recommendations:** Considering participants' lived experiences as a struggle for recognition (Honneth, 1994, 1995) provided the richest insight into their views. However, it was not the only theoretical lens that helped to provide an understanding of their involvement with the process of gaining a Master's. Incentive theories suggest that mid-career nurses may have more altruistic goals than their younger peers, while Maslow's (1954) and Vaillant's (2002) work on psychosocial development indicate that they also have a desire to be generative both inside and outside their workplace. There was also evidence that participating in M-Level study improved both the social and identity capitals of participants (Bourdieu, 1986; Schuller, 2002).

The study findings can be used to inform mid-career professionals themselves about what might be required prior to and during M-Level participation. They can also be used to assist lecturing staff encountering mid-career professionals in HEIs and may also help inform the approach taken by HEIs to supporting part-time postgraduate study for mid-career professionals. For employers the study also exposed some ageism within nursing that needs to be addressed particularly in relation to who is encouraged to attend/be funded to participate in M-level programmes.

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

- The participation of mid-career professionals in Masters programmes can be viewed as a struggle for recognition. This allows clearer insight into how best to support them in their journey.
- Investing in the education of mid-career professionals can reap rewards beyond that expected from their younger peers because they are more likely to make efforts to create a legacy for their current team/workplace/profession.
- There is a need to retain mid-career nurses and midwives within the profession to help moderate the impact of the worldwide nursing shortage. Encouraging mid-career professionals to take up Masters level study may help with this.

### **References:**

Begley, C., Murphy, K., Higgins, A. & Cooney, A. (2014) 'Policy-makers' views on impact of specialist and advanced practitioner roles in Ireland: the SCAPE study.' *Journal of Nursing Management*, 22(4), 410-422.

Bourdieu, P. (1986) 'The Forms of Capital.' In J. Richardson (Ed.), *Handbook of Theory and Research for the Sociology of Education*. pp.241-258). New York: Greenwood.

Braun, V. & Clarke, V. (2006). 'Using thematic analysis in psychology.' *Qualitative Research in Psychology*, 3:2, 77-101, 3(2). doi:10.1191/1478088706qp0630a.

Braun, V. & Clarke, V. (2013b). *Successful Qualitative Research: A Practical Guide for Beginners*. London: SAGE Publications Ltd.

Braun, V. & Clarke, V. (2019) 'Reflecting on reflexive thematic analysis.' *Qualitative Research in Sport Exercise and Health*, 11(4), 589-597. doi:10.1080/2159676X.2019.1628806.

Cooley, M.C. (2008) 'Nurses' motivations for studying third level post-registration nursing programmes and the effects of studying on their personal and work lives.' *Nurse Education Today*, 28(5), 588-594.

Cooper, M.A., McDowell, J., Raeside, L. & ANP–CNS Group (2019) 'The similarities and differences between advanced nurse practitioners and clinical nurse specialists.' *British Journal of Nursing*, 28(20), 1308-1314.

Honneth, A. (1994) 'The Social Dynamics of Disrespect: On the Location of Critical Theory Today.' *Constellations*, 1(2), 255–269.

Honneth, A. (1995). *The Struggle for Recognition: The Moral Grammar of Social Conflicts* (J. Anderson, Trans.). Cambridge, MA: Massachusetts Institute of Technology Press.

Isopahkala-Bouret, U. (2015) 'Educational Credentialing of an Aging Workforce: Uneasy Conclusions.' *Adult Education Quarterly*, 65(2), 83-99. doi:10.1177/0741713614564048.

Maslow, A.H. (1954). *Motivation and Personality*. New York: Harper.

Nursing and Midwifery Council. (2019). *The NMC Register Data Report: 31 March 2019*. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/other-publications/nmc-register-data-march-19.pdf>

Schuller, T., Brassett-Grundy, A., Gree, A., Hammond, C. & Preston, J. (2002) Learning, continuity and change in adult life. Wider Benefits of Learning Research Report No 3. London.

Spencer, R.L. (2006) 'Nurses', midwives' and health visitors' perceptions of the impact of higher education on professional practice.' *Nurse Education Today*, 26(1), 45-53.

Vaillant, G.E. (2002). *Aging Well: Surprising Guideposts to a Happier Life from the Landmark Harvard Study of Adult Development*. Boston: Little Brown and Co.

Watkins, D. (2011) 'The influence of Masters education on the professional lives of British and German nurses and the further professionalization of nursing.' *Journal of Advanced Nursing*, 67(12), 2605–2614. doi:10.1111/j.1365-2648.2011.05698.x.

**Keywords:** Education, Nursing, Masters, Attitudes, Phenomenology.

**6Aiv, 2 September 2021, 14:00 - 15:20**

**Poster+**

**Evaluating e-learning strategies used to improve access to Postgraduate Cancer Education during global pandemic**

Martin Galligan and Chris McNamara, Royal Marsden Hospital

**Promotional abstract:** The global pandemic has had a significant impact on the delivery of care to individuals living with and beyond a cancer diagnosis. Despite the challenges raised by the pandemic there was still a need to deliver high quality Cancer Education to health professionals to ensure they had the essential knowledge to deliver complex cancer treatments. The aim of this review was to evaluate the impact of implementing high quality Cancer Education within the virtual learning environment to ensure learners can continue to develop this essential knowledge and skills.

**Main focus/theme of, or issues addressed by, the poster:** The impact of the COVID-19 pandemic has had lasting implications on the provision of cancer services due to mass redeployment of staff and resources. Despite this, there was a continued need for high quality cancer education to ensure healthcare professionals have the skills and knowledge

required to care for individuals living with and beyond a cancer diagnosis. The suspension of face-to-face teaching resulted in a need to deliver interactive e-learning material to support distance learning.

The aim of this project was to evaluate the adaption of current postgraduate cancer modules into e-learning format and to understand the ease of accessibility and learner experience in accessing the virtual learning environment.

**Research approaches and underlying evaluation:** A cohort of modules were deemed essential to continue during national lockdown to enable professionals to develop essential skills in cancer care. Preliminary learner feedback was collected through an online mid-way evaluation. Learners were invited to rate their experience of using virtual learning environment, accessing support and accessing online content on a four-point Likert scale. One hundred learners were invited to complete the mid-way evaluation with 74 responding. 88% (n=65) felt that it was very easy or easy to navigate the learning environment and 85% (n=63) also reporting that it was very easy or easy to access the online content and virtual tutorials. 96% (n=71) also reported they found it easy to access support during the module.

**Implications for healthcare education:** The preliminary feedback from learners was extremely positive regarding the ease and ability to navigate the virtual learning environment and engaging with the online content. These results provide reassurance that the current provision of e-learning allows learners to achieve the learning outcomes of the module. However, it should be noted that further evaluation is ongoing to explore the impact on summative assessment results.

**Keywords:** Cancer, Cancer Education, Oncology, Cancer Nursing.