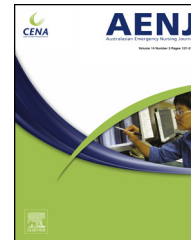




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RESEARCH PAPER

# Participant evaluation of team-based learning using one-off teams in a hospital setting



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## KEYWORDS

Emergency nursing;  
Nursing education;  
Team-based learning;  
Critical thinking;  
Staff development;  
Advanced practice

## Summary

**Background:** Team-based learning (TBL) is a highly structured educational strategy that improves student engagement, promotes deeper learning and builds professional skills but has had limited use in nursing education.

**Aims:** To examine participant experiences of TBL using one-off teams in a hospital setting.

**Method:** A prospective exploratory design was used in an urban district hospital in Melbourne, Australia. The sample was 49 registered nurses. The intervention was a TBL-based education program focused on assessment and management of adult patients with isolated distal limb injuries. Data were collected using two instruments that evaluated participant experiences of the narrated slide presentation and participant experiences of learning of using TBL. Quantitative data were analysed using descriptive statistics and thematic analysis was used to analyse the qualitative data.

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**Results:** The results revealed two key themes: “quality of learning” and “positive team experience”. The presentation was accessed twice or more by 51% of participants. Participants perceived a high quality of learning: 95.5% stated that their learning expectations were met or exceeded. Three quarters of participants (77.5%) commented about the contribution of their team members.

**Conclusion:** Participants in this study thought TBL provided them a positive learning experience, as individuals and as teams. Education methodologies that focus on professional attributes and behaviours in addition to clinical skill are well suited to emergency nursing whereby nurses have to be theoretically prepared for practice and work well in teams.

**Relevance to clinical practice:** TBL has a natural synergy with the requirements of advanced nursing practice and offers a positive learning experience that enhances clinical outcomes.

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### What is known?

- TBL can be used to teach large groups in busy clinical environments.
- Even with one-off teams, education delivered using TBL results in superior clinical outcomes.

### What this paper adds?

- Even with one-off teams, TBL gives nurses a positive learning experience.
- Learning in ‘real world’ team focus enables clinical skills development but also enhances professional attributes and behaviours.

## Background

Models of education delivery may be classified as didactic or dialectic. Didactic models of education aim to transfer information from the teacher to the student and the key focus is on delivery of course content (teaching) rather than learning.<sup>1,2</sup> Unfortunately, many hospital-based nursing education programs are delivered using this model and are steeped in tradition and focused on service delivery rather than deep learning. Short ‘in-service’ education sessions during ‘double staffing time’ are still the mainstay of nursing education in many Australian hospitals despite evidence that shows that didactic lectures do little to affect practice change.<sup>3</sup> In dialectic models of education, students work at a level of deep understanding that enables them to practically apply knowledge rather than simply memorising facts.<sup>1,4</sup> One example of a dialectic approach is team-based learning (TBL).<sup>1</sup>

TBL was originally developed in the 1970s by Larry Michaelsen to teach business at University of Oklahoma.<sup>5</sup> TBL is often incorrectly aligned with ‘group work’; however, TBL is a highly structured educational strategy that improves student engagement, promotes deeper learning and builds professional skills such as collaboration, negotiation and communication.<sup>6</sup> TBL consists of three phases: pre-class preparation, readiness assurance and application of concepts.<sup>4,7</sup> The assignments used for the readiness

assurance tests and application exercises are grounded in the ‘4Ss’: problems that are *significant* to students; all student working on the *same problems* creating common topics for discussion; problems require individuals and groups to make a *specific choice*, and all teams engage in *simultaneous* reporting.<sup>7,8</sup>

To date, TBL has been predominantly used in medical and business schools<sup>5</sup> with limited use in nursing education.<sup>9</sup> The majority of published papers relate to use of TBL in undergraduate nursing courses<sup>10,11</sup> and use of TBL in postgraduate nursing education has been reported in one Australian School of Nursing and Midwifery.<sup>12</sup> There is only one published study of use of TBL in hospital-based nursing education.<sup>13</sup> One possible reason for slow uptake of TBL in Universities and even slower in hospital-based education programs is that TBL requires major changes to the traditional roles of the educators and students.<sup>7,14</sup> The role of educators in TBL is complex and focused on designing and managing the process of learning rather than delivering facts.<sup>7,15</sup> Assessment for learning (rather than *of* learning) is a key component of TBL and the degree to which assessments stimulate higher-order thinking is directly related to assessment task design.<sup>2,16</sup> Educators need sophisticated skills in assessment design and assessment tasks should require students to use higher-order skills<sup>16</sup> rather than requiring students to demonstrate factual knowledge through recall which does not require use of higher-level cognitive skills.<sup>16</sup> The role of students in TBL shifts from being passive recipients of information to active participants with responsibility and accountability for learning.<sup>7</sup>

## Aim

The aim of the study was to examine participant experiences of team-based learning using one-off teams in a hospital setting.

## Method

### Design

A prospective exploratory design was used.

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