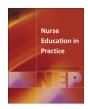
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Learning and teaching in clinical practice

# Academic learning for specialist nurses: A grounded theory study



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#### ABSTRACT

The aim was to explore the major concerns of specialist nurses pertaining to academic learning during their education and initial professional career. Specialist nursing education changed in tandem with the European educational reform in 2007. At the same time, greater demands were made on the healthcare services to provide evidence-based and safe patient-care. These changes have influenced specialist nursing programmes and consequently the profession. Grounded Theory guided the study. Data were collected by means of a questionnaire with open-ended questions distributed at the end of specialist nursing programmes in 2009 and 2010. Five universities were included. Further, individual, pair and group interviews were used to collect data from 12 specialist nurses, 5–14 months after graduation. A major concern for specialist nurses was that academic learning should be "meaningful" for their professional future. The specialist nurses' "meaningful academic learning process" was characterised by an ambivalence of partly believing in and partly being hesitant about the significance of academic learning and partly receiving but also lacking support. Specialist nurses were influenced by factors in two areas: curriculum and healthcare context. They felt that the outcome of contribution to professional confidence was critical in making academic learning meaningful.

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#### Introduction

Demands on specialist nurses' academic competence has changed over the past decade (Gerrish et al., 2003). In the everchangeable health service arena, specialist nurses with the ability to analyse, synthesise and evaluate information are required (Chan and Garbez, 2006; Goudreau et al., 2007; Simpson and Courtney, 2002; Tishelman et al., 2008). Since specialist nursing students need both academic and clinical specialist skills in their future careers, their education should help build their ability to integrate knowledge, handle complex occurrences and situations and

develop their ability to participate in clinical research and development (R&D). This puts demands on both educational providers and the health service to collaborate in taking the necessary measures to facilitate this.

A new European educational reform based on the Bologna process for the harmonisation of higher education (Davies, 2008; Palese et al., 2014) was in 2007 implemented in relation to the specialist nursing programmes in Sweden (e.g. specialist nurse programes in intensive care nursing, district nursing oncology nursing (SFS, 1993:100). The reform included the adoption of a twocycle system referring the specialist programme to master's level 60-75 hp, the requirement of an undergraduate degree of three years study for students to be eligible, a curriculum focusing on learning outcomes, and the possibility for the inclusion of a 15 ECT credits degree project. This change has meant raising the level from a basic course leading to a professional qualification to an advanced educational programme leading to a combined professional and academic qualification. In Sweden, this provided an enhanced structure for the academization of specialist nursing education, which since 1977 has been part of higher education. Consequently,

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an extensive curriculum change process began, affecting everything from guidelines and pedagogic developments to the student learning process and interaction with tutors (cf. Gundem and Hopmann, 1998). The new educational reform put equal demands on critical thinking, research relevance, ethical approach and independent evaluation as it did on clinical and theoretical aspects of the programme (Wijk et al., 2009). One challenge in this regard was to ensure that the combined examination in the programme sufficiently secured both clinical and academic competence leading to safe patient-care (Gerrish et al., 2003, 2011; Mattsson, 2008).

#### **Background**

The new educational reform affecting both the curriculum and faculty members visibly raised conflicting tensions between professional and academic learning objectives, research and healthcare development (German Millberg et al., 2011). The area of tension presumed to be about philosophically different educational endeavours (Englund, 1997) and whether a professional qualification could be integrated with an academic one in which the degree project played a central role (Hounell, 1986; Mattsson and Kemmis, 2007). Academic profession-oriented programmes must rest on a scientific foundation (Säljö and Södling, 2006), and research- and practice-based knowledge should be contextually integrated in order to create the necessary conditions for deep as opposed to surface learning (Marton and Pang, 2006). The prerequisite for deep learning in the execution of degree projects in praxis-related education is that such learning leads to new knowledge and praxis development. As a consequence, assessments of degree projects are preferably based on praxis-driven criteria rather than conventional criteria for scientific reports (Mattsson and Kemmis, 2007). Students should thereby be given the opportunity to relate their education to practice and reflect it therein (Schön, 1983).

In order to succeed with the aims of the educational reform to integrate research- and practice-based knowledge in the specialist nursing programme and degree project, universities and the healthcare service must show mutual commitment (German Millberg et al., 2011; Öhlén et al., 2012). If commitment is lacking on the part of the healthcare services, there is a risk that specialist nurses' academic competence will not be utilised in practice, calling into question its relevance in their education (Löfmark and Mamhidir, 2010). Few studies (German Millberg et al., 2011; Löfmark and Mamhidir, 2010; Öhlén et al., 2012) have highlighted the effects of the educational reform on the specialist nursing programme in Sweden after 2007, and these indicate that academic learning and its relevance to the profession is being debated. To our knowledge, there are no studies focused on newly-qualified specialist nurses' view of their academic learning for a combined professional and academic qualification. This study therefore takes its departure from the academic learning experiences of specialist nurses, as commencing during their education and presumed to continue throughout their professional careers.

#### Aims

The aim was to explore major concerns of specialist nurses pertaining to academic learning during their education and initial professional career.

#### Design and methods

Since no previous studies were found in the specific study area, a grounded theory approach was used with a constructivist epistemology (Charmaz, 2006). In order to increase variation two types of

data sets were used, and data collection and analysis were conducted concurrently.

#### **Participants**

First, in total 120 students answered an open-ended question, of which 94 were women and 26 were men, all aged between 23 and 56 years. Participants had completed specialist nursing education in the following disciplines: intensive care (n=22), anaesthesia (n=16), ambulance services (n=23), psychiatric care (n=3), theatre nursing (n=42), surgical care (n=2), oncology (n=5) and district nursing (n=7).

Secondly, interviews were performed with 12 specialist nurses. For the recruitment of interview participants, the heads of department at three of the five aforementioned universities were contacted to obtain a list of specialist nursing students who had completed their education in 2010. In total 165 people were sent information letters requesting participation in the study. Twenty specialist nurses initially agreed to participate but eight of these later declined due to lack of time or parental leave. For practical reasons individual, paired and group interviews were performed.

The interviewees had worked as specialist nurses for 5-14 months after graduation and represented the following disciplines: intensive care (n = 2), anaesthesia (n = 1), ambulance services (n = 1), psychiatric care (n = 6) and district nurses (n = 2).

#### Data collection

First, within the framework for a didactic project conducted between five Swedish universities (Öhlén et al., 2012) questionnaires were distributed to specialist nursing students who were finishing their specialist nursing programmes in 2009 and 2010. In addition to structured questions (not used in this study), the questionnaire contained the question: "Do you have any thoughts about the degree project you would like to share?" The students' responses ranged from brief comments to short descriptive narratives.

Secondly, the interviews were facilitated by two major questions: What was it like to do your degree project on the specialist nursing programme and how do you view it today? How do you view the degree project as a tool for developing safe patient care based on the best available knowledge? On the basis of these questions the participants were encouraged to relate and discuss from their perspectives and spontaneous reflections. Probing questions were used in order to deepen the understanding. Field notes were taken and interviews were tape-recorded and transcribed. The interviews lasted between 35 and 90 min.

#### Data analysis

When analysing the open-ended question open coding was applied. By means of constant comparison, major themes related to academic learning were identified and used in the subsequent interviews.

The interviews were followed by open coding. Then "incident by incident", code for code and category for category were compared and verified with quotes (initial coding). The initial codes were sorted into descriptive themes which were compared with the transcripted interviews. Each code was scrutinised on the basis of understanding the situations and circumstances it elicited.

This was followed by coding on a more conceptual level (focused coding). Theoretical refinement was accomplished by discussions among the authors; exploration of categories, dimensions and properties. Two subprocesses were derived from the initial codes, and their association with the codes was elaborated and reflected

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