



Tensions related to implementation of postgraduate degree projects in specialist nursing education

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SUMMARY

In conjunction with the introduction of the Bologna process in Sweden, specialist nursing education programmes were moved up to the second cycle of higher education with the opportunity to take a one-year master's degree, which also meant that students would undertake a degree project carrying 15 ECTS. The purpose of this study was to examine the introduction of postgraduate degree projects on the second-cycle level into Swedish specialist nursing programmes in accordance with the Bologna process. Five universities were involved and the study design took the form of action research. Problem formulation, planning, evaluation and follow-up with reflection led to new actions over a period of 2 1/2 years. Through a review of local curriculum documents, the implementation of a postgraduate degree project was monitored and these reviews, together with field notes, were analysed by means of constant comparative analysis. The results revealed a variety of tensions that arose when postgraduate degree projects were introduced, taking the form of differing views on the relationship between research, clinical development, specific professional objectives and academic objectives. These tensions were reflected in six areas of change. In summary, it can be noted that implementation of the postgraduate degree projects highlighted tensions related to basic views of learning.

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Introduction

In Europe there is considerable variation with regard to how nursing education is structured and organised as well as the academic level on which the course programmes are run (Davies, 2008). The European education reform according to Bologna, which aims to bring about greater harmonisation of higher education, resulted in specialist nursing programmes being raised to the second cycle, the Master's level. The implications of this change are multifaceted and despite the aim of adopting a common European view it can be assumed that the programmes are influenced by national education systems (Zabalegui et al., 2006).

The European education reform also aims to clarify expected learning outcomes rather than teaching objectives. Bowden and Marton (1998) state that in higher education the focus must shift from teaching to learning, where the student assumes greater personal responsibility for learning. They also state that the course programme should support learning for the future. In the course of designing new curricula, didactic implications become important, e.g. teaching activities in relation to learning outcomes. Didactic issues provide answers to a number of questions: What should be learned? Why should it be learned? How should it be taught and learned? Who is the learner? (Jank and Meyer,

2007). Based on Marton and Pang (2006) the understanding could be that even very well thought-out curricular ambitions could be jeopardised by inappropriate didactic solutions.

Sweden and Spain are examples of European countries that combine specialist nursing degrees with a master's degree over one or two years (Zabalegui and Cabrera, 2009; SFS, 1993:100). Following the implementation of the Bologna process, the Swedish specialist nursing programmes have resulted in course programmes comprising 60–75 ECTS, including a postgraduate degree project that could be equivalent to the requirements for a master's degree (one year) in nursing. The master's level in the Swedish specialist nurse education is in line with the intentions and guidelines according to the second cycle's education in the Bologna process. There are strict requirements on critical thinking, ethical conduct and research-related knowledge base throughout the programme including practicum (SFS, 1993:100).

It can be envisaged that the manner in which the intentions embodied in the curriculum documents are realised could take different forms at the universities and this raises questions about what form such change processes could take.

Aim

The aim was to explore implementation of postgraduate degree projects in Swedish second-cycle specialist nursing education according to the Bologna process.

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Approach and design

The starting point for the study was a collaborative project involving the specialist nursing programmes at the University of Gothenburg, Karlstad University, Borås University College, University of Umeå and Luleå University of Technology. If these centres are taken together, all eleven Swedish Specialist Nursing degree programmes were represented: Anaesthesia Care, Intensive Care, Operating Room Nursing, Prehospital Nursing, Surgical Nursing, Medical Nursing, Oncological Nursing, Paediatric Care, Psychiatric Care, Elderly Care, and Primary Health Care (SFS, 1993:100).

A participatory design was chosen due to the fact that at each centre there was a large number of stakeholders and factors involved in which implementation of the Bologna process could take place. Participatory action research presented the opportunity for research founded on local experience (cf. Rönnerman et al., 2008; Dick, 2007) where the research topic governed the choice of method for data collection and analysis (Rönnerman et al., 2008).

Project development, participants and data

This study was conducted stepwise according to classic action research (Rönnerman et al., 2008) and took place as follows:

- 1) The study commenced with a meeting where all five centres of education were represented. Decisions had been taken at the centres that specialist nursing programmes should lead to an integrated specialist nursing degree and a master's degree (one year). At the centres uncertainty was expressed about how this could be implemented and if it was possible. Two to six faculty members from each university, 18 in total, made up the project team and the views of everyone were brought to bear on the development of the project. At all the centres involved, at universities and clinics, there were several stakeholders, which meant a number of views were considered. The project team discussed and problematised the area, whereupon the following activities were planned: A review of all local curriculum documents (all kinds of curricula and programme and course syllabi documents were included), an inventory of local conditions, identification of collaborative partners and the formation of local project groups. Meetings were planned and held on a regular basis over a period of 2 1/2 years.
- 2) The team began by producing a joint protocol for examining local curriculum documents at the centres. The protocol was a means of summarising and initiating new processes and providing an overview of the structure of the degree project, recommendations for design, training in scientific methods, decisions whether the students should write alone or together, grading, reference systems, review templates, compulsory elements in the postgraduate degree projects and modes of reporting, supervision and examination. In autumn 2007 the centres' curriculum documents were gathered, examined and compiled based on these areas.
- 3) The local curriculum documents were re-examined in 2008 and 2009 as changes were implemented on a continuous basis at all five centres.
- 4) The work at the centres was conducted over the 2 1/2 years based on local conditions and the number of persons involved varied from one activity to another, from 25 persons to just a few at each centre. The aim of the work on the local level was to create shared involvement in the students' postgraduate degree projects. Working groups were set up with teachers, students and principal clinical preceptors. Field notes were taken during local activities and followed up at the research team meetings with the five centres involved, which were held both in the form of physical meetings ($n = 6$) and online meetings ($n = 11$). Notes were taken

at all meetings which, together with the review of the documents, formed the basis for the data analysis of the study.

The project participants were active and voluntary contributors to the study throughout every phase of the project and were thus aware of the purpose of the study as well as the possibility to withdraw their participation whenever they wanted and without giving any reasons. The study was followed in international research ethics conventions.

Data analysis

The constant comparative analysis method was used (Dick, 2007). The aim of the analysis was to identify commonalities and variations in the documents reviewed and field notes in order to conceptualize and find explanations according to the four stages presented by Dick (2007):

- 1) Comparisons and coding of data were carried out using open coding of the compiled texts in the protocol.
- 2) The codes were compared and merged into preliminary change areas which formed the basis for selective coding of the field notes and recoding of the protocol text.
- 3) A further comparative analysis was made in order to find similarities and differences in the preliminary identified change areas. During the course of this analysis we identified preliminary tensions between differing didactic views.
- 4) Differing descriptions were analysed in order to refine the preliminary analysis and find the underlying pattern.

Results

Different didactic changes were identified as a result of the implementation of the Bologna process in the specialist nursing education and the introduction of postgraduate degree projects, which was expressed in the local curriculum documents and the experiences of the faculty at the centres. The change is not in a specific direction but instead embraces movements between specific professional objectives, academic objectives, research and clinical development, which is reflected in six change areas, see Fig. 1.

When the professional objectives of the specialist nursing degrees are combined with the academic objectives tension arises. The academic objectives and degree project will be integrated into the tradition of professionally oriented education, created over several years, where professional know-how is valued highly. In order to create a balance it becomes significant to focus on and develop the relationship between research and clinical development towards specific professional objectives and where the academic objectives have been integrated. How it is balanced by the faculty depends on

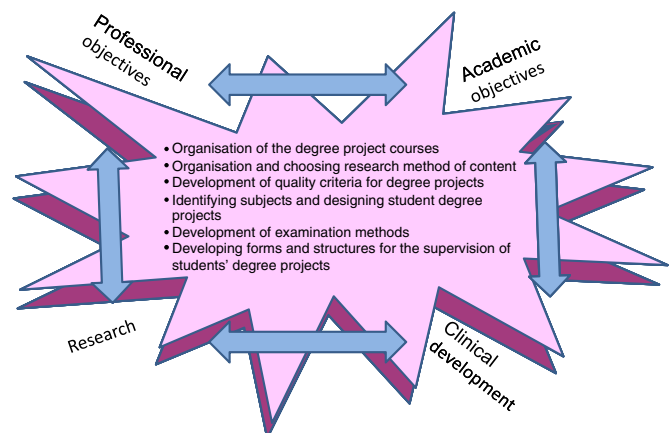


Fig. 1. Tensions related to implementation of degree projects in specialist nursing programmes and six change areas where the tensions are shown.

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