'Advancing the Professional Disposition of Postgraduate Nursing Students: ORaRDAs and CPEGs'

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Abstract

Post-practicum experiences for postgraduate nursing students are often undertaken in nurses' existing workplaces, without a clear set of learning objectives or related activities. Consequently, there appears to be a disconnection between knowledge learnt in tertiary education settings and enactment of this knowledge in the workplace. These students may be aspiring to become advanced practitioners as a consequence of their postgraduate study, yet receive little direction on how to achieve this. Two interventions in this project: Clinician Peer Exchange Groups (CPEGs), and Online Reading/Resource and Reflection Activities (ORaRDAs) aimed to facilitate better links between university and clinical settings, enhance student engagement and understand professional disposition development in postgraduate nursing students. Twenty-three postgraduate nursing students enrolled in one subject for one semester participated in the study. The project adopted a mixed methods approach, collecting quantitative data in the form of pre/post-semester, 5-point Likert scale surveys and qualitative data in the form of students' discussion board posts. Preliminary findings indicate that both the CPEGs and ORaRDAs were viewed favourably by students. Enhanced leadership, teamwork and communication skills as a result of these activities were strongly reported. Career advancement was stated as a major reason for undertaking postgraduate studies. Post-semester the majority of participants considered that the learning activities had helped to advance their nursing careers. Discussion board posts revealed some of the language of an advanced nurse, along with factors which both supported and inhibited nurses' professional dispositions. Blended learning (i.e., face-to-face and online) appears to be the best approach for postgraduate nursing students. Teaching and learning activities should be explicitly linked to the workplace, with a focus on enhancing employability and career advancement. Formalised support for postgraduate students in the workplace is recommended. Further research that utilises qualitative methods and longitudinal designs may enhance understanding of how professional disposition develops during and beyond postgraduate nursing programs.

Introduction and background

The overarching aim of the national teaching and learning project (Griffith University/Office of Teaching and Learning) was to provide post-practicum experiences that improve the employability of students. Further to this aim, a set of interventions were developed and trialled in this small sub-project that aimed to:

1. Encourage postgraduate nursing students to link knowledge taught/learnt in on-campus workshops, to their individual work settings;

2. Support peer and individual learning and engagement both on and off campus; and

3. Understand professional disposition development in postgraduate nursing students.

Intensive professional preparation programs, e.g., Master of Advanced Nursing, require students to develop their professional identity, including associated expertise and attributes, in a relatively short time frame (18 months full time, 3 years part time). Postgraduate nursing students' practicum experiences are often undertaken in their existing workplaces, without a clear set of learning objectives or related learning activities. Consequently, there appears to be a disconnection between knowledge learnt in tertiary education settings and enactment of this knowledge in the workplace. These students may be aspiring to become advanced practitioners (e.g., nurse managers, clinical nurse educators) as a consequence of their postgraduate study, yet receive little direction on how to achieve this.

The benefits of postgraduate nursing programs e.g., attitude change, practice change, acquisition of knowledge and skills have been widely reported (Ng, Eley & Tuckett, 2016; Ng, Tuckett, Fox-Young & Kain, 2014). A more holistic nursing outlook, increased confidence in clinical decision-making, enhanced self-esteem, career advancement and increased job satisfaction are considered as facilitators of postgraduate nursing education (Ng et al., 2016; Ng et al., 2014). Improved problem solving, critical thinking, leadership and clinical skills, along with better management of complex situations are also attributed to postgraduate education programs (Ng et al., 2016). Ultimately, nurses with postgraduate qualifications are well-placed to contribute to better quality and safety outcomes for patients (Ng et al., 2016).

Conversely, a number of inhibitors for nurses taking up postgraduate programs are also reported. Postgraduate education programs may not adequately prepare nurses to work in their clinical area (Johnson & Copnell, 2002; Ewens, Howkins & McClure, 2001). Some postgraduate nursing students find the traditional academic practices of teaching, learning and assessment (e.g., essay writing) to be challenging and disconnected from their work practice (Burrow, Mairs, Pusey, Bradshaw, & Keady, 2016), while others consider online learning modalities e.g., discussion boards, podcasts, email, information searches, video conferencing as a major source of stress (Ng et al.,

2016). The challenges in finding a work-life balance when studying, prohibitive costs and lack of support from employers are also barriers to postgraduate nursing education (Ng et al., 2016).

Making connections between postgraduate nursing education and the workplace can be a positive (Ng et al., 2016) or negative emotional endeavour (Illingworth, Aranda, De Goeas & Lindley, 2013). Many nurses perceive postgraduate education in terms of professional requirements and accountability, feeling positive about the contribution that these programs make to their own personal and professional development, and to the nursing profession overall (Ng et al., 2016). Others are concerned mainly with reconstructing their professional identities in preparation for their advanced nursing roles, secondary to the acquisition of skills and knowledge (Illingworth et al., 2013).

Consequently, this calls for a curriculum approach which can accommodate a variety of learning styles, facilitate the development of a professional disposition for an advanced nursing role, and make strong connections between tertiary education programs and actual clinical practice. There is a paucity of literature which suggests the kinds of pedagogic practices which might comprise this curriculum approach. By trialling a set of interventions in one postgraduate nursing subject, this project sought to address this gap.

The interventions

Two interventions were trialed in this project: (a) on-campus 'Clinician Peer Exchange Groups (CPEGs)', adapted from the 'learning circles' developed and trialled by Harrison, Molloy, Bearman, Newton and Leech (2017); and (b) Online Readings/Resources and Reflective Discussion Activities (ORaRDAs), adapted from Harrison, Molloy, Bearman, Marshall and Leach (2017). These interventions were carried out in one postgraduate nursing subject, where students attend four full day workshops spread evenly over one semester.

The CPEGs

For the CPEGs, on-campus workshop activities were designed around the development of a professional disposition for an advanced nursing role. Students were divided into small groups of five-six, and time was allocated on each workshop day for CPEG activity. In Workshop One, this activity comprised establishing the attributes of advanced practitioners and professional goal setting. CPEG activity in subsequent workshops was related to professional journey, linked to professional goals and post-workshop experiences in the workplace. The process here was organic, developing from key questions such as "Tell us about a time when…" In the fourth and final workshop, students were also encouraged to revisit their professional goals set at the beginning of the semester. CPEGs were peer-led, with input from the facilitator only as required. Consequently, the learning and reflection that occurred in these exchanges was considered to be organic, and although guided by the subject content and the overall aim of advancing professional disposition, could take any number of directions.

The ORaRDAs

Three separate ORaRDAs scheduled between on-campus workshops were also designed to support the development of a professional disposition. Each ORaRDA addressed a key topic in nursing underpinned by patient safety: (a) leadership; (b) interprofessional collaboration; and (c) teamwork, chosen in light of the wide body of research attesting to their influence on patient outcomes (Levett-Jones. Oates & MacDonald-Wicks, 2014; Stone, 2009). For each topic, students were provided with one resource e.g., a reading, national guideline or a video clip. Key questions to guide learning and reflection accompanied each resource and were used by students to structure their online discussion board posts. Students were also provided with guidelines for responding to other students' posts. Participation in the ORaRDAs, including one original post and one response post to each of the three separate topics, comprised a mandatory assessment item for the subject.

Method

Twenty-five nursing students enrolled in one subject offered in the first year of a postgraduate nursing program (i.e., Graduate Certificate, Graduate Diploma, Masters) consented to participate in the study. Two students withdrew from the subject before data collection concluded, therefore complete data were collected from 23 students in total. These 23 students comprised 20 females and three males, ranging in age from 22-55 years. 70% of the cohort had ≥ 4 years of experience as a Registered Nurse. Eleven students were born in Australia, while the remaining 12 were born in China, Philippines, Thailand, Vietnam and Zimbabwe. Nineteen students were enrolled as domestic students, four were international enrolments.

The project adopted a mixed methods approach. Following University ethics approval, quantitative data were collected in the form of pre and post-semester surveys. These tools used a 5-point Likert scale, with 14 and 20 items respectively. Questions were asked around three domains of skills and knowledge development; teaching and learning strategies; and professional disposition. These instruments were developed specifically for postgraduate nursing students in this study, although questions around professional identity were adapted from Bialocerkowski, Cardell and Morrisey's (2017) 'Professional Identity in Speech Pathology' questionnaire. Free text questions around participants' preferred learning styles were asked at the end of the survey. Demographic and occupational data were also collected, including age, gender, language, country of origin, type of enrolment (i.e., international or domestic) and years of experience as a Registered Nurse. Quantitative data analysis was performed using SPSS Statistics Version 24.0. Descriptive methods were used to analyse data and report findings.

Qualitative data were collected in the form of online discussion posts, (i.e., the ORaRDAs). These data were imported into NVivo Pro 11, and analysed using a general inductive approach in accordance with principles described by Thomas (2006). With 'professional disposition' firmly in focus, the primary researcher read and re-read each participant's transcript many times, establishing a

set of categories and subcategories (i.e., themes) that constituted the preliminary findings. To enhance the credibility of the findings, a second researcher independently analysed the data.

Findings

Pre and post semester surveys
Preliminary findings from these surveys are presented under sub-headings that align with this project's three specific aims (i.e., linking subject knowledge to the workplace, supporting peer and individual learning and engagement on/off campus and understanding the development of postgraduate nursing students' professional disposition).

Linking subject knowledge to the workplace
Post-semester survey responses suggest that strong links were made between students' postgraduate nursing studies and indicate their individual workplaces. Twenty of the 23 participants reported enhanced development of their leadership skills at work, and twenty participants also considered that their teamwork and communication skills had improved as a result of their studies in the subject.

Supporting learning and engagement
Preliminary findings indicate that the CPEGs and ORaRDAs were received favourably by students. Table One below provides a very rudimentary overview of the data collected around these learning and engagement activities. Twenty-three post-semester survey responses were received in total. The number of participants reported in this table are those who responded either 'agree' or 'strongly agree' to the related survey questions.

Table 1: Positive Responses post-semester in relation to learning and engagement activities

	CPEGs	ORaRDAs
	n = number of students reporting	
Facilitated development as an advanced nurse	21	17
This activity is generally valued	21	17
Engagement with others in this activity enhanced learning	21	21
Learning from this activity has been integrated into nursing practice	19	20

To reiterate, these findings are unrefined at this stage. There were responses to these questions where students either disagreed or were undecided about the effectiveness of the learning and engagement activities.

Professional disposition

Responses related to the development of professional disposition over the semester were encouraging. Nursing career advancement was strongly reported as a reason for undertaking postgraduate studies. Twenty-three of the 25 participants who completed the pre-semester survey stated that they were undertaking postgraduate studies for career purposes. Eighteen participants also indicated pre-semester that they were intending to apply for an advanced position at the end of their program. At the conclusion of the subject, 22 of the 23 participants who completed the post-semester survey considered that they had made progress towards becoming an advanced nurse, and 21 reported that the subject had helped to advance their nursing career. Free text responses in this survey included references to becoming *"a more confident nurse"* and *"more confident in my practice"*. Fifteen participants stated that they were ready to apply for an advanced nursing position as a result of their studies in the subject, and nine of the 23 participants had already applied for such a position.

ORaRDA posts

Since the actual tasks that constituted the ORaRDAs in this subject were explicitly asking for students to link subject knowledge to their workplaces, and also required learning and engagement with others, data collected from participating students' online posts were analysed in relation to professional disposition only. Three main themes emerged: (a) the language of an advanced nurse; (b) factors supporting the development of postgraduate nurses' professional disposition; and (c) factors inhibiting this development.

Developing a professional disposition: advanced nurse language

Language indicative of an advanced nurse was evident in the ORaRDA posts. Perhaps due to the content of the ORaRDAs (i.e., leadership, interprofessional collaboration, teamwork), words and phrases such as *"teamwork", "communication", "patient safety"* and *"patient advocate"* were used frequently by participants. Using this kind of language is unsurprising, as it underpins all levels of nursing practice (Levett-Jones et al., 2014; Stone, 2009).

Noteworthy in these posts was that 16 of the 23 sources analysed either referred to themselves as *"experienced"* or *"senior",* or referred to others in their various work settings as *"junior".* When recounting various experiences in their workplaces, quotes included *"As a senior member of my team I understand…", "While communicating to junior medical and nursing staff, I always…".* These quotes do not suggest that professional disposition had developed as a result of the ORaRDAs, although perhaps this activity may have encouraged postgraduate nurses to more openly express their dispositions.

Open expression was also evident in the number of posts where students admitted the 'mistakes' they had made, acknowledged the gaps in their nursing practice: *"…being a reasonably*

senior nurse I felt extremely embarrassed and incompetent that I did not know how to do this"; and the steps they had taken/were taking to address them: *"[I] learnt from this…studied clinical teaching and became an educator."* ORaRDA posts were also supportive of others when they recounted their own adverse experiences: *"Thank you for sharing your story…"* and *"Your practice was very professional in this situation…"* These quotes may support honest reflection as a hallmark of advanced nursing practice (Chirema, 2007), although more research is needed around how nurses' reflection progresses or deepens over time (Dubé & Ducharme (2015).

Developing a professional disposition: supporting factors
Five factors were reported as strongly supportive of advanced nursing practice: (a) formal directives and guidelines; (b) workplace education; (c) reflective practice; (d) support from senior nurses; and (e) peer interaction/debriefing. These factors, specific examples, the number of participants (i.e., sources) who reported them and supporting quotes are presented in Table Two.

Table 2: Factors supporting the development of a professional disposition in advanced nursing

Supporting factor	Examples	No. of sources	Supporting quotes
Formal directives and guidelines	Nurses' Code of Conduct, Code of Ethics, National Safety and Quality Health Service Standards, hospital or area health policies, clinical pathways e.g. 'Sepsis Kills'.	20	[Nursing] practice needs to be grounded in a capacity for compassion and empathy, as is evident in our standards of practice and codes of ethics…[it's]what it means to be a professional.
Workplace education	Ward in-services, simulation, clinical supervision/mentoring, online programs e.g., 'DETECT'.	19	…in my workplace…ward in-services…reinforce nurses' knowledge of doing the primary [surveys] accurately and efficiently…these skills are important for early recognition and response to patient deterioration
Reflective practice	Reflecting on challenging clinical situations; reflecting on time as novice or new graduate	19	I reflected on the case in a systematic way and presented it at a clinical case meeting…This allowed me to explore positive and negative aspects of the case
Support from senior nurses	Escalating issues of discussing concerns with Nurse Unit Manager, Clinical Nurse Consultant, Clinical Nurse Educator	15	Against my gut instincts l was instructed not to perform a 12 lead ECG or collect formal bloods for electrolyte monitoring. I escalated this to my NUM who supported [me]…
Peer interaction and debriefing	Gaining feedback from others in relation to knowledge/skill deficits; post critical incident	14	I've initiated post-critical incident debriefing in our unit and my colleagues have reported that they feel better after these sessions. We are able to express how we feel about events and brainstorm the best possible management strategies for the next time we encounter a similar situation

Developing a professional disposition: inhibiting factors

The overarching inhibiting factor in developing a professional disposition for an advanced nurse role was frustration at their concerns being dismissed in the clinical environment, particularly in relation to situations of clinical deterioration or potential compromises to patient safety. Twenty-two quotes from 13 participants reflected this frustration, outlined in Table Three.

Table 3: Inhibitors to professional disposition development in advanced nursing: "being dismissed"

Inhibiting source	No. of quotes	Sample quotes
Medical officers	20	I have had a number of incidents where I have tried to escalate concerns to medical teams before and have been dismissed…It is such a helpless feeling, you feel like you're not being taken seriously. I also find the lack of support from medical staff…can be incredibly frustrating and also feel quite disheartening as you walk away from your shift feeling like you have not done your best job which is not the case.
Nursing colleague	1	I was particularly intimidated by this RN, and she immediately dismissed my concerns. The patient ended up having had a stroke. The RN was a great model for how not to be, and I learned that patients in my care rely on my ability to speak up.
Executive management	1	The patient's lonely death left me very sad and remorseful, besides very angry with the facility managers who had repeatedly ignored my request for more staff members. I felt that I was failing my patients, but I also did not know what I should do to address such a situation.

Issues arising for discussion and consideration

This is a small scale study and its findings should be considered as tentative and exploratory. However, the following issues are worthy of further consideration and research:

The majority of postgraduate students in this study were undertaking postgraduate education for career advancement, and findings from both pre/post semester surveys and ORaRDA posts suggest that professional disposition is already manifest in those nurses who enrol in postgraduate nursing programs. Therefore, teaching and learning activities in postgraduate education programs should make explicit exactly how they will enhance employability in various work settings, and should be designed with career advancement in focus.

Considering the positive responses to both the CPEGs and the ORaRDAs, a blended learning approach may work best for postgraduate nursing students. Learning activities in both of these approaches should be designed to complement each other, with the development of a professional disposition for advanced nursing roles a major objective.

Teaching and learning activities in postgraduate nursing education should support students to make clear links between their university studies and their work settings. From the preliminary findings, these links may be in the form of: (a) clear alignment with industry directives and guidelines; (b) encouraging nurses to convey key/relevant learning to their workplaces in the form of

ward in-service, committee participation etc., (c) well-designed reflective practice activities (which appear to remain a valuable tool for nurses). With regard to the latter, further research is required to ascertain whether reflective practice activities should be organic (e.g., in the CPEGs), or mandatory (e.g., the ORaRDAs)

Given that these study participants viewed support from senior nurses e.g., Nursing Unit Managers, to be an enabler in developing professional disposition, more needs to be done to strengthen the relationship between those nurses who are undertaking postgraduate nursing studies, and those who are not. In addition to the aforementioned recommendation of conveying postgraduate nursing to the workplace in the form of in-services etc., a more formalised arrangement for workplace support (e.g., mentoring, clinical supervision) could be considered.

More research is needed. Qualitative data in the form of focus groups and/or interviews with postgraduate nursing students may better understand factors that support professional disposition and the teaching/learning interventions that best facilitate this. Longitudinal studies could elaborate how professional disposition develops over time, including links to employability. Research into the effectiveness of blended learning programs for postgraduate nursing students should be ongoing.

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