An examination of interprofessional education within the pre-registration Bachelor of Science Honours Nursing (Children’s) programme

EXECUTIVE SUMMARY

A qualitative research study commissioned by Health England North Central and East London Local Education and Training Board [HE NCEL LETB] and undertaken jointly by the University of Hertfordshire and HE NCEL

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Executive Summary

Background

There is now a wealth of literature that has considered interprofessional education [IPE] within the context of a range of health professions (for example: Glen and Reeves, 2004; Cooper et al, 2005; Hoffman and Harnish, 2007; Barr et al, 2014). It has been suggested that the benefits of interprofessional education include the enabling of a collaborative professional approach within practice (Craddock et al, 2006) as well as an enhanced appreciation of the patient's perspective (Blickerl and Priyadharshini, 2007). It is clear that there is now an expectation that health professionals will be able to work interprofessionally (Chan et al, 2013) and, as a result, there has been consideration about how and where interprofessional education should take place – there have been suggestions that it is best located within clinical settings (Gordon et al, 2010) whilst others have advocated combined strategies that also include classroom-based education (Morison et al, 2003).

The Centre for the Advancement of Interprofessional Education [CAIPE] (2002) defines interprofessional education as occurring:

“when two or more professions learn with, from and about each other to improve collaboration and the quality of care” [http://caipe.org.uk/about-us/defining-ipe/]

CAIPE continues by stating that they use:

“the term “interprofessional education” (IPE) to include all such learning in academic and work based settings before and after qualification, adopting an inclusive view of "professional"” [http://caipe.org.uk/about-us/defining-ipe/]

The value of interprofessional education is clearly acknowledged in the Health Education England North Central East London (2015) mission statement that states their goal as: “Delivering excellence in multi-disciplinary education, training and workforce development in response to current and future needs in order to provide the best possible outcomes and experiences for patients and people.” [https://ncel.hee.nhs.uk/about-us/]
Research focus

This report summarises the findings of a qualitative research study, entitled: *An examination of interprofessional education within the pre-registration Bachelor of Science Honours Nursing (Children’s) programme*, that was commissioned by Health England North Central and East London Local Education and Training Board [HE NCEL LETB] in March 2015 and undertaken jointly by the University of Hertfordshire and HE NCEL between March 2015 and September 2015.

The overall aim of the study was to gain insight into the:

> Understanding and perceptions of children’s nursing students, lecturers and clinically based children’s nurses (who act as mentors) in relation to interprofessional education [IPE] and its potential impact on the care delivered to children, young people and families.

In addition, the research team developed the following objectives in order to refine the focus of the project:

**Objectives:**

- To utilise qualitative data collection approaches to enhance insight of IPE and its potential impact on the care delivered to children, young people and families.

- To ascertain the views of lecturers and Bachelor of Science [BSc] Honours [Hons] Nursing (Children’s) students from the University of Hertfordshire (a Higher Education Institution that is contracted to by HE NCEL).

- To seek the views of clinically-based children’s nurses who acted as mentors to BSc Hons Nursing (Children’s) students from the University of Hertfordshire, and, who were working within the HE NCEL geographical area.
Methods

The exploratory nature of this research guided the approaches used with qualitative methods being drawn on to obtain data via:

- Three mini focus groups with a total of seven BSc Hons Nursing (Children’s) students from the University of Hertfordshire.
- Semi-structured interviews with eight lecturers from the University of Hertfordshire who were involved in the delivery of IPE across the undergraduate health and social work programmes.
- Semi-structured interviews with three clinically-based children’s nurses who acted as mentors to BSc Hons Nursing (Children’s) students from the University of Hertfordshire, and, who were working within the HE NCEL geographical area.

Key findings

Summary of the findings from the mini focus groups with the BSc Hons Nursing (Children’s) students

- The value of the IPE theoretical modules (offered at academic Levels 4 and 6), and the opportunity for children’s nursing students to work with peers who were studying other health and social work programmes, was recognised by all who participated in the mini focus groups. Whilst the modules were not without some logistical challenges, there were very positive comments from the students about how they had gained insight into the roles and responsibilities of a wide range of other professional groups; in addition, the importance of interprofessional communication was highlighted.

- Learning about the work of other professionals had, in all cases, confirmed to the children’s nursing students that they had chosen the correct career pathway.

- All students had participated in IPE within a practice setting; however, this was normally under the guise of more generic learning. The experience in clinical environments was perceived to provide insight into “actual interprofessional working” [Angie, 2nd year student].

- IPE in practice was actively facilitated by the children’s nursing mentors who suggested, and actively arranged, learning opportunities for students; once again, this was part of the overall student learning experience and was not normally identified as ‘IPE’.

- The children’s nursing students raised some points in relation to the IPE module delivery; suggestions for how this could be enhanced were made and included,
for the academic Level 6 IPE module: A broader range of professional groups, the incorporation of interprofessional simulation and the re-structuring of the one week study ‘blocks’.

Summary of the findings from the semi-structured interviews with lecturers

- The participants all had substantive expertise as lecturers and displayed a motivated and committed approach to the delivery of the IPE modules, many commenting on how much they enjoyed being involved.

- Lecturers generally felt that IPE modules should be integrated throughout the undergraduate programmes so that there was a clear ‘thread’ across the years of study. There were some differences of opinion about whether the academic Level 4 module should be delivered in Semester A (September to January) or Semester B (January to June) of each academic year.

- The key skill that emerged as being of fundamental importance in terms of the IPE modular delivery was that of facilitation.

- IPE was very much valued by the participants and there was an overall view that the School of Health and Social Work was very supportive of the IPE philosophy as well as the module delivery.

- The participants felt that the IPE modules provided a valuable and important opportunity for students to study alongside their peers from other disciplines, particularly as this gave them an enhanced understanding of the different professional roles and responsibilities. There was a consistent view that other students could be involved in the IPE modules with medical students being principally highlighted.

- There was some concern that students did not always fully appreciate the value of the IPE modules whilst they were studying them and that understanding the relevance often occurred later in the students’ programmes.

- The content of the IPE modules was perceived to be positive as it provided an opportunity for students to explore common concepts within a safe environment; the involvement of service-users was also applauded. There was some suggestion that the more strategic overview of policy and its application to service provision (included in the academic Level 6 IPE module) could be challenging for students.

- A number of alterations to the IPE modules were already planned to further enhance the student experience (including the integration of students studying the early years programme and changes to the timing of the timetabled sessions), but the lecturers also made suggestions in relation to the future potential development of the IPE modules – these primarily focussed on the more
overt application to practice through, for example, the use of simulation, a student ‘buddy’ system, and the shadowing of professionals from different disciplines.

- There was a perception that the IPE modules were having a positive influence on patient/client care. Comments were made about the specific application to children and young people, with children’s nursing lecturers vocalising that the children’s nursing students had an enhanced insight into other professions and were therefore more likely to involve colleagues from other disciplines in a child’s care. Lecturers from other professional backgrounds felt that because working with children and young people was addressed in the IPE modules, this meant that all students had an increased awareness of this client group and their needs.

**Summary of the findings from the semi-interviews with children’s nurses**

- The children’s nurses had many years of experience of working clinically and had gained a tremendous range of knowledge, skill and expertise in that time. All acted as mentors to BSc Hons Nursing (Children’s) students.

- Whilst none of the participants had undertaken any formal IPE modules during their pre-registration nursing programmes, they all demonstrated an insight and understanding of the concept. The benefits of students having IPE within practice were vocalised with these primarily relating to the enhancement of patient care.

- The participants displayed a strong commitment to the facilitation of IPE learning opportunities for students and identified a comprehensive list of activities that they often arranged as part of their mentor role. Despite this, the activities were not ‘labelled’ as IPE, but were viewed as part of the generic student learning experience. It was felt that students had a similar perception.

- The children’s nurses felt that IPE theory was important, but that learning in, and from, clinical practice was imperative. The use of role play and simulation was identified as a means of complementing this.

- Communication was perceived as being a fundamental aspect of IPE.

- A concern relating to IPE was the need to maintain professional boundaries.
Recommendations

- It is recommended that the value and potential use of role play and simulated practice is considered since the study identified that students enjoy and learn well from these educational methods.

- It is suggested that the participation of medical students within IPE that involves BSc Hons Nursing (Children’s) students could be beneficial since these two professional groups frequently work closely in clinical practice.

- It is advocated that clinically based children’s nurses, who act as mentors, have information about IPE within the pre-registration nursing curriculum including how they can further facilitate this in clinical practice.