

# **POSSIBILITIES AND PITFALLS OF INTRODUCING EDUCATIONAL INNOVATION: REFLECTION ON PROCESSES AND OUTCOMES IN A BLENDED LEARNING DESIGN FOR UNDERGRADUATE STUDENT NURSES**

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## **ABSTRACT**

Systematically applied, reflection is a process that can improve practice and release potential for informed, constructive change. This paper is a critical, reflective evaluation of online innovations in an undergraduate nursing course, with suggestions for strategies that can work to encourage students' engagement with each other in active learning. Key components and learning activities are discussed, as implemented within a course offered to third year, undergraduate student nurses. Pausing to reflect on the—at times—discomforting nexus between expected and actual outcomes, I highlight how introducing innovation can yield both unintended consequences and unexpected rewards for students and instructor.

## **CONTEXT**

The course of interest in this discussion, 'Introduction to Nursing Knowledge', is part of a four year Bachelor of Science (Nursing) (BScN) at the University of Northern British Columbia (UNBC), in Prince George, Canada. Subject content comprises a basic introduction to nursing ideas, theories, knowledge construction and theoretical reasoning: a 'dip-your-toe-in-to-test-the-water' sampling of some highly abstract and complex concepts related to Nursing's epistemology and Nursing ontology. Critical reflection on outcomes of selected attempts at innovation are discussed, with a view to offering a repertoire of effective possibilities that can be implemented to facilitate active learning, as well as students' engagement with each other and with the course content.

I am a proponent of active, authentic, immersive and transformative learning as a means for educating nurses who not only can perform technical skills but also are able to relate on a human level with patients. Qualities and abilities underpinning a nurse's effectiveness in being able to 'tune-in' to her/his patients include empathy, advocacy and self-awareness. As do scholars who support value-aware learning, I would argue that an effective way of learning and activating these highly desirable attributes in nursing students is through experiential learning and reflective processing of meaning imbued therein. In keeping with this inquiring, reflective and active approach to teaching students of nursing, I find resonance in the assertion by Jonassen and Rohrer-Murphy who suggest "...that conscious learning emerges from activity (performance), not as a precursor to it" (Jonassen & Rohrer-Murphy, 1999).

Grounded in a constructivist perspective, I try to be innovative, playful, and creative with my teaching as a means of elevating students' motivation. Ultimately the primary intended outcome is to improve each student's retention and transfer of theory based knowledge into her/his nursing practice. Further, as a social constructivist, I "...believe that meaning making is a process of negotiation among the participants through dialogues or conversations" (Jonassen, Peck, & Wilson, 1999). Reshaping traditional 'top-down', instructor-lead, face-to-face delivery by weaving authentic and experiential online activities into students' learning is one way of facilitating this (Oliver, 2004; Woo, Herrington, Agostinho, & Reeves, 2007). An intersection of human activity, consciousness, self-awareness and context frames my approach to meaningful education for nursing practice using both face-to-face and online processes.

## **LEARNING ACTIVITIES: INTENDED AND ACTUAL OUTCOMES**

Chinn and Kramer's (2008) ways of knowing in Nursing (as adapted from Carper, 1978) comprised the loom upon which students' learning was woven. These incorporate emancipatory, ethical, personal, aesthetic, and empirical knowing (Carper, 1978; Chinn & Kramer, 2008). Using Chinn and Kramer (2008) to guide students' evolving awareness of nursing knowledge proved to be a powerful tool in eliciting what was for some a transformative

experience, awakening a deep appreciation of the meaning and power of nursing practice as a force for human well-being.

In keeping with my educational philosophy, I set out to provide varied learning activities for students. The subject was a blended learning experience, with access to online resources and activities via the Blackboard Learning Management System (LMS). Below is a brief commentary evaluating actual vs. intended outcomes of the primary educational activities and processes that were used to provide a scaffold for presenting relevant course content.

Two-three hour class sessions per week incorporated formal and informal lectures, group activities and student presentations, as well as time for reflection, questions and answers. Online learning resources linked students to suggested readings and activities, relevant URLs, a scheduling calendar, and course lectures as handouts. An Online Discussion Forum provided space for open (or private if desired) exchange of ideas and easy notification of any updates or changes, whilst an Email space facilitated one-to-one communication between students and each other, as well as students and instructor. Expectations that these online tools would function as they were intended were generally met, with students using them as an adjunct to class time and only a few experiencing difficulties requiring helpful interventions. Supporting this finding, most students rated online communication and instructor responsiveness as highly positive in their end of course evaluations.

### **Nursing Theorist Online Role-play**

One goal of this subject is for learners to improve their scholarly writing skills. In addition to submitting written scholarly papers and individual reflective accounts of their experiences, students participated in the primary online learning task, which was intended to be an online nursing theorist role-play discussion. Students worked in groups of three for the theorist assignment, collectively taking on the 'persona' of a nursing theorist and responding to prompting statements posted online during the semester. The Nursing Theorist Role-play Discussion Forum was a modified version of the Mekong e-Sim, which is an online role-play simulation about international natural resource management issues (McLaughlan, Kirkpatrick, Maier, & Hirsch, 2002). Basically the activities centred on four, fairly structured, 'in-role' short papers (4-6 pages) that addressed key questions related to nursing theorists and their work.

Ideally, 'theorists' were to interact via the discussion forum in response to the trigger statements and comments of other personae. The aim was to bring each theorist 'to life'. Whilst the intended learning outcomes for improving students' scholarly writing abilities were mainly satisfied, the goal of having students actively engage with each other was not achieved in the theorist role-play. The 'in-role', cross-theorist conversations were limited to attempts by one or two groups to write postings in the voice of their theorist. Students stated that they felt having to provide references for their comments stifled the free and active conversation that would have represented a dialogue between nursing theorists. In addition, lack of sufficient time for cross-theorist discussion inhibited the sharing part of this assignment. In response to student feedback, this year's course has been adjusted. The insight I gained from critically reflecting on this learning activity has enabled me to step back and notice that it may not be always necessary—or appropriate—to maintain an innovation if it is not meaningful or motivational for students. In this case, I would support trial of a similar activity to evaluate whether it may be more suited to graduate students as was the case in the original Mekong e-Sim online activity (McLaughlan et al., 2002).

### **Nursing Knowledge Blog**

A Nursing Knowledge Blog was originally established for students so that they could comment on any topic related to the subject. This was designed to provide a safe, secure online space where students could highlight, discuss or debate significant or controversial nursing issues. I was sure that assurances of anonymity in this forum would encourage participation, and eagerly awaited what I envisaged would be a lively exchange of views between students. For a subject where expression and reflection on values and experiences forms a major component of the learning processes, I anticipated that the blog would provide a suitable medium. This was its intended outcome. The actual outcome was a total of only two postings in two weeks (one of them mine) for the whole class of 38 students. Unintended and rewarding consequences of modifying this activity are highlighted below as a focus for discussion and reflection.

Through reflecting on possible reasons for the lack of success of this activity, it is clear that assumptions underpinning my interpretation of students' online safety, anonymity and motivation to contribute may have been incongruent with meaning ascribed thereto by students. It is likely that students may not have wanted to contribute to a free-form discussion forum where the instructor was ultimately in control of conditions governing anonymity. Indeed, their perspective may have been that no matter how much I assured them of freedom for self-expression, I remained the one who would oversee all contributions. In hindsight, following reflection on my reading of comments in an online evaluation of course activities, it is clear that a combination of lack of focus, doubt about anonymity, and absence of marks for postings to the Nursing Issues Blog presented a strong disincentive for students to post comments in this space.

### **Nursing Issues Discussion Forum**

In response to formative, informal evaluation, I decided to make a change to address some of the students' concerns and at the same time, try to improve interaction between students within the online learning environment. I set up a 'Supplementary Nursing Issues Discussion Forum'. The afore-mentioned non-focused, non-marked Nursing Blog morphed into a newly designed activity that became the 'epicentre' of surprise as well as a source of unexpected, positive outcomes. Students voiced that they were feeling confused by the multi-part learning tasks. Prior to this, they had for the most part submitted hard copies of written assignments to instructors for feedback and grading. Many students stated that they were feeling stressed and overwhelmed by the study and assessment requirements of their BScN course.

The change was implemented in an attempt to open up a space for reflection and commentary and decrease students' anxiety about completing multi-faceted assessments. This new learning task was a simplified adaptation of a previous requirement to post regular comments to the nursing theorist forum. Students (individually or as a group if they choose) earned optional marks for participation in the Supplementary Nursing Issues Discussion Forum, a space to discuss, reflect on, and debate issues related to nursing theorists. Individual student postings in the supplementary nursing issues discussion forum thread were not required to be referenced; however, the postings had to be in each student's own words and not taken from an unacknowledged source. A minimum of two postings per student any time until the final class for the semester earned full marks. Topics could be 'kick-started' by students or instructor, and any reasonable topic related to the course material was acceptable. Criteria for earning marks and expectations for what was considered a reasonable posting were outlined in the marking guide (Barrett, 2008), which specified how marks were allocated. Participation referred to contributing to the interactions in an active way, for example, contributing a relevant posting, message, or comment. Lurking was not deemed to be participation.

Over a period of about 10 weeks, I posted six topics for commentary.

#### 1. IS NURSING AN ART OR A SCIENCE ?

Each student was invited to express her/his views here. They were required to use the 'Reply' buttons and post directly into the named topic.

#### 2. STORY: 'In bed with a dying patient' (Interleuken, 2008)

This was a story found on the URL [www.allnurses.com](http://www.allnurses.com) of a nurse who had invited a woman to lie in bed with her dying husband during the final hours of his life. Students were asked to read the attached story (from allnurses.com) and respond to the following questions.

- What do you think about this nurse's decision? What would you have done? How does it make you feel? Would you do anything differently? What kind/s of nursing knowledge is this nurse using?

#### 3. STORIES FROM THE FRONT (Hoerner, 1915)

Students were invited to respond to questions that related to a letter written July 9<sup>th</sup>, 1915 from RN Sophie Hoerner when she was in France serving as a Nursing Sister in World War I, as posted on the internet (Hoerner, 1915).

- Can you relate to Sophie's account of looking after soldiers in the field? What do you think about when she tells the story of caring for the dying soldier? Do you think you will ever be working in a conflict or war zone? Is this anything you have considered for your nursing future? How do you think Sophie will settle back into nursing when she returns back to Canada after her service in France? Do you relate any nursing knowing to her account of her nursing practice?

#### 4. NURSING BUMPER STICKERS ("Bumper Stickers," 2008)

Students were invited to go to the web page <http://www.realnurse.net/humour/bumpers.shtml> and read the bumper stickers. They were asked the following questions.

- What do you think? Do any resonate with you? Do any offend you? Do any speak to you in any way? Would you display one? Which one? Why?

## 5. A VISION FOR A BETTER FUTURE FOR HEALTH CARE

("Patch Adams & the Gesundheit! institute," 2008)

Students were invited to go to the website <http://www.patchadams.org/campaign/>

where they could find the 'real' Patch Adams's story and read about the actual 'Gesundheit!' Institute. I invited them to consider their thoughts.

- I have a dream that one Summer some students and I will go there for a few weeks. Let me know what you think. Would you or anyone you know consider doing this to broaden your knowledge of health care possibilities?

## 6. ONE EXTREME - TO ANOTHER: NURSES WORKING

Students were invited to look at two very different possibilities for doing nursing work and caring; both promising possibilities for job satisfaction. This topic was food for thought about where students might work over their lifetime nursing careers. Students were invited to think about which they would prefer.

1) Médecins sans frontières

<http://www.msf.ca>

2) The Mayo clinic

<http://www.mayoclinic.org/jobs-nursing-rst/>

## Student Participation and Engagement

This new, reworked activity (The Nursing Issues Discussion Forum) met and exceeded expected outcomes in terms of engaging students' participation and reflection. Many students made multiple postings over the time that the activity ran, even though only two postings were required. Topics stimulating the most discussion were: 'Nursing Bumper Stickers' (32 postings); 'Nursing as Art or Science' (29 postings); and 'In bed with a dying patient' (26 postings). In the sense that this course was designed to heighten awareness of different ways of knowing in nursing, it was apparent from students' involvement and the depth of feeling and awareness conveyed in their postings that the new Nursing Issues Discussion Forum was a success. Postings conveyed messages that were powerfully evocative, emotionally charged, and meaningfully relevant in relation to the subject's objectives and students' evolution towards becoming sensitive, reflective, empathic, and holistic nurses in practice. Students wrote from the heart and with passion. They also synthesized their reflections into appreciation of how various ways of knowing were woven into nursing knowledge and nursing stories, making reference to all ways of knowing that underpinned the course: personal, aesthetic, emancipatory, ethical and empirical (Chinn & Kramer, 2008). Some examples of postings to the most popular topics will illustrate. Names have been removed for confidentiality. I asked students for permission to use their anonymous comments within a paper or presentation.

Topic 3 Nursing Bumper stickers was the most active posting. There was a heated, impassioned debate between a few students and at times it was difficult for me not to get involved. I resisted, even after receiving a personal communication inferring that I step in and censure some of the comments. Eventually students themselves moved through the difficulties associated with their shared conversation, settled their own differences, and diffused what I was beginning to think may have been a mistake on my part choosing this as a discussion topic. Most students loved the idea of laughing about various topics in the bumper stickers website, whilst others saw some as offensive and possibly contributing to perpetuating negative stereotypes. I was surprised at how few students expressed that they would be offended. Challenging reflections on personal and ethical beliefs underpinned many comments in this topic.

- *They are everything I think we are trying to eliminate within our profession. For years women have fought to be free from these types of sexist sayings. Yes I could see some humor in a few but for the most I felt they were degrading to women and nurses.*
- *If the intent of the sticker was to belittle a nurse and the work that they do then it would be inappropriate, however, I think these stickers attract attention to nurses and say, 'Hey! Remember we are out there'. It reminds people that nurses are there 24/7 and that we do care.*
- *I absolutely love these stickers, they are hilarious!...I believe in nursing we need to have a sense of humor...*

The topic 'In Bed with a Dying Patient' touched the depths of students' own values and stimulated some powerful, personal reflections in relation to what they might do in a similar circumstance. Personal and aesthetic awareness in practice predominated in students' comments here.

- *I think this is an amazing story, one that will stay in my head for a long time...Once I become more experienced...I will probably build up enough confidence to suggest actions such as this to patients and their*

*families. I hope that I develop experiences in my career that are as touching as this, and I hope that I will make a difference to many people in times of such vulnerability.*

- *I think that great nurses are the ones that have the courage to use their creativity while providing artful care.*

In the topic ‘Nursing as an Art or a Science’, students crystallized meanings elucidated in comments about issues (as in the aforementioned two topics) into deeply reflective and evolving thoughts about nursing practice. This is where many comments showed synthesis of students’ understandings about the inter-relatedness in practice of all—empirical, aesthetic, personal, ethical and emancipatory—ways of knowing.

- *There is no book that tells you exactly what to do in every situation, and that is where the art of nursing comes in. When a nurse decides to hold a person’s hand for a procedure, they are doing something to ease the person’s fear and make them feel safer, not something that is in the policy and procedures manual.*
- *For me, science in nursing is lost if there is no art. Without art, nursing becomes an assembly line in a manufacturing warehouse with patients getting their medications at this time and washes at this time and meals at this time...You can see how the humanity will be lost if nurses do not take the time to discover the true needs of their clients.*
- *I think that the art is what the patient remembers about the nurse...the caring and the connectedness...the art is the nurse’s ability to really connect with patient and the ability to care and make the patient feel better. It’s taking the science and applying it in a therapeutic way that fits the patient best. Bringing both the science and the art is what is going to make the nurse a whole.*
- *To develop the art in nursing I believe the nurse has to be aware of the person they are inside.*

I was deeply moved by many of the students’ postings; re-living my own nursing and midwifery practice memories through reading their reflections. Transformative understanding crystallized as I journeyed through the course with my students, and I too developed a greater awareness of, and connection to my own ways of knowing in nursing. In keeping with the course aims of developing students’ skills of self and professional practice awareness, I had no hesitation sharing my reflections with them in an email requesting permission to share their comments—anonously—with other nurses through writing this paper.

- *As I’ve been reading the Nursing Issues Discussion postings, I have been moved by the thoughtful and reflective responses coming in. I am not responding as I don’t want to influence you, but it is difficult as there are so many resonances with what you are all saying and my own experiences and thoughts as an experienced nurse, and memories of my thoughts when I was a student and new RN (last century!!).*

## **OUTCOMES, CONSEQUENCES AND REWARDS – POSSIBILITIES AND PITFALLS**

Consequences of setting the Nursing Issues Discussion Forum learning task were an increase in students’ writing and debate, in particular the responses to key topics (as above). Unexpected rewards included my sense of satisfaction that arose out of reading the depth of feeling and degree of reflective ability within students’ postings, as well as observing how the task stimulated so much participation. This compared favorably with other tasks I had set to encourage students’ exchange and sharing of views; however, not all students warmed to the idea of active, online participation. In an anonymous, voluntary, end of semester survey evaluating the online components of the subject, students’ comments ranged from praiseworthy and satisfied with the ease of communication thus enabled, through a continuum to expressions of anger and loathing in relation to anything perceived as other than ‘traditional’, didactic, class-based lectures and essay-type assignments. Thankfully, a very small minority of students expressed the latter comments. Nevertheless, the volume and quality of Discussion Forum postings show that providing this space for exchange of views enhanced these students’ development and clarification of values and opinions related to ways of knowing in nursing and how these play out in practice.

## **ENGAGING STUDENTS THROUGH MEANINGFUL, ACTIVE LEARNING**

As stated at the beginning of the paper, this subject—Introduction to Nursing Knowledge—is designed both to awaken students’ awareness of Nursing’s ways of knowing, and also to enhance development of qualities in them, including empathy, self-awareness, and advocacy; with a view to helping them relate to clients on a human level when performing the more technical skills that are integral to much of contemporary nursing practice. In this paper, I have highlighted how a selection of online learning activities, in particular the Nursing Issues Discussion Forum, provided possibilities for facilitating students’ development across these domains. I have also discussed the

effectiveness of strategies I employed to increase students' participation and exchange of ideas in an active learning milieu. Engaging students through active learning and moving them towards knowledge synthesis for meaningful transfer of learning to clinical practice is an on-going challenge for nursing instructors. Innovation is not always successful in the first instance; however, critical reflection on one's teaching practices and responsiveness to student input can lead to greater insight into possibilities that show promise and also those that do not.

Being brave enough to try something new in teaching can be a confronting experience, especially when one must acknowledge that the bright idea just doesn't gel with some of the students for whom it was intended. Maintaining the status quo is easy in the short term; however, I would argue that by thinking 'outside the-square', a teacher-of-nurses can role-model a powerful mix of imaginative and creative ability for students who will need to meet many challenges as practising Registered Nurses in the immediate and long-term future. In the spirit of sharing, I offer practical insights from evaluation of selected online learning strategies. Critical reflection on both positive and negative outcomes has revealed helpful suggestions that may be employed to facilitate active learning and students' engagement with each other, the course content, and the learning objectives. As I have done in this paper, sharing insights and wise learning (Barrett, 1998) through reflection and dialogue can promote working together as colleagues towards ongoing validation of, and improvement in practice which is aimed at achieving excellence in the quality of pedagogy within nursing education.

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