Enquiry-Based Learning

Enquiry based learning (EBL) is a form of learning that is structured around group discussion and the learning that emanates from it. The EBL processes entail:

a) Students working as a group to share ideas and knowledge arising from a 'learning trigger'

b) Individuals working outside the group to collect and retrieve literature, to critically appraise information and/or to seek opinion of peers and specialists

c) The group coming back together: to share the information that has been acquired; to report, discuss and assess progress towards addressing the issues raised by the trigger and to decide if further information is required.

Learning in this way encourages the students to become independent learners and provides them with practice in tackling puzzling situations and defining gaps in their own knowledge. It also assists them to develop a deep understanding of the subject matter they are acquiring and to work and learn within a group.

Students will learn using enquiry based learning during their attendance in class, but will require support and advice at times from staff in practice. This will usually focus on information related directly to clinical care.

Self assessment

Self assessment is considered to be crucially important during practice placements. This is encouraged by the use of portfolios in which students will be expected to record and summarise what they have learnt from their experiences. The portfolios are an integral part of the learning and assessment processes in both the theoretical and practice components of the course. In this way equal importance is given to the learning that occurs in both theory and practice.

Objective Structured Clinical Examinations (OSCE's)

Objective Structured Clinical Examinations (OSCE's) are an approach to the assessment of clinical skills in which the components of practice competence are assessed in a planned, structured way, with attention being paid to the objectivity of the examination (Harden 1988).

OSCE's take place in skills centres within the School of Nursing, at planned times. Students can find preparing for OSCE's quite stressful and support is available from staff in the School. Students may also appreciate practising these clinical skills in practice if the opportunity is available and the need for this will increase in practice as Essential Skills Cluster assessments are introduced from September 2008. There will be more information on this to follow or available via your PLT.

The standard OSCE consists of a number of time limited activities (stations) that each student completes. At each station the student is presented with a scenario and/or situation, which is designed to test particular nursing practice skills. For example, technical skills, problem solving abilities and factual knowledge required to demonstrate

competence. An examiner is present at each station observing and scoring the student's performance.

As the student progresses with the OSCE they are required to perform a skill and explain their rationale as they do so. This links their knowledge to performance. Students are not told the result of their assessment immediately. As the course progresses the OSCE scenarios become more complex.

Staff from practice are always welcome to observe or contribute to an OSCE session. Please contact your local School of Nursing centre for more information. Training is available for practice staff who wish to become OSCE examiners. Contact Liz Perrell for further information on 0115 8230845

Harden, RM. (1988) What is an OSCE? Medical Teacher, 10, 1, 19-22.

Clinical Skills Development Pocket Book

From September 2005 students on all pre registration courses have a Clinical Skills Development Pocket Book. The fundamental idea behind the booklet is to reintroduce a tool for students and mentors to record the acquisition of clinical skills throughout their pre-registration course (and potentially beyond this).

It is anticipated that this book will:
a) Provide mentors with a brief overview of the student's skills experience and development.
b) Provide the students with a visual record of their skills acquisition.
c) Enable the personal tutor and PLT representative to have an overview of the students' progress in relation to clinical skills.

NB students are advised to keep an electronic 'back up' copy.

Firstly a practical point; although it will fit in most pockets, it will not fit into a tailored uniform pocket of a petite student. The term ' Pocket Book' is really just to remind students to keep it with them.

Four different versions exist (one for each branch) which are similar. CFP skills are the same for all, but skills for the specific branch of nursing do vary.
For first year students we have 'starred' some skills that were felt to be most important for junior students to achieve.
Students have been advised to refer to local policies, to ascertain which skills (locally) are within their remit and which require further training following registration.

At the current time, the pocket book itself is not formally assessed. Students will need to use it as part of their portfolio development and clinical assessors will find it to be a vital part of the portfolio of evidence for the achievement of clinical competencies.
Because of the pressures already on clinical assessors, we have designed this as a self-assessment document and there is no formal expectation for assessors to 'sign off' a student, however we do thank any assessors who wish to contribute to the book. We feel that this is potentially an important aspect so that assessors can obtain a view of which skills the student has acquired within the placement and monitor progress within the placement and the course as a whole. In order they undertake this, reviewing the skills booklet as part of the preliminary, intermediate and final interviews may be helpful.

We acknowledge that because of the huge range of activities nurses undertake it will never be a totally comprehensive document. We do hope however, it will be constantly developing and welcome any comments or suggestions of skills which have been omitted. Please send your suggestions back to The School of Nursing with the student or direct to us via email, which are;

roderick.cable@nottingham.ac.uk or liz.aston@nottingham.ac.uk

(Or internal only at:
https://www.nottingham.ac.uk/nursing/students/diploma/documents/skills-log.html)

The Peer Support Initiative - The Buddy System

Background

With placement allocation becoming longer and more evenly spread throughout the 3 year programme there will be a better balance in many placements of junior (students in their first year) and senior students (students in their final 6 months of training) working and learning at the same time within the same clinical placement. It would be beneficial for the senior and junior students to form a supportive relationship, aiding the development of both parties. Senior student's managerial skills would benefit by contribution to the orientation and support of junior students and the anxieties and problems that junior students often experience in new and unfamiliar surroundings would be reduced.
It is not a role that would involve the senior student in any form of assessment of junior students and it will only occur under the supervision of a qualified nurse.
The way in which the peer support system is organised will vary according to individual student abilities and needs and the local environment. The educational link person will offer help and support in relation to establishing local structure and management of this role.

Aims

1. To increase the professional responsibility of senior students through the development of registrant level mentoring skills (NMC 2006).
2. To provide a mechanism for senior students to provide support of a helping nature in clinical practice for a junior student.

Objectives

Senior Students

Peer support will:

1. Provide the opportunity for the development of registrant level mentorship skills.
2. Develop the confidence and competence of the student within the clinical environment.
3. Further develop critical reflective thinking processes.
4. Enable the acquisition of teaching skills.

Junior Students

Peer support will:

1. Reduce initial anxieties regarding the placement experience.
2. Assist the development of essential care skills.
3. Aid the integration of theoretical knowledge within the practice setting.
4. Encourage reflection on practice.

Roles and Responsibilities

Senior Students

1. provide support to the junior student in developing specific clinical skills that the junior student has been taught and the senior student has acquired
2. assist the junior student to understand the rationale for simple, but essential, nursing interventions
3. help the junior student to reflect on practice, sharing personal reflections and experiences where appropriate.

4. assist in the initial orientation to the clinical area, where appropriate
5. maintain confidentiality in relation to this relationship.

Junior Student
1. assist in the identification of their specific learning needs.
2. actively participate in this process, maintaining confidentiality within this relationship.

Mentor Responsibilities
The mentor is required to:
1. satisfy themselves that the management student is able to undertake clinical skills to a satisfactory standard
2. discuss what they expect the management student to achieve with the junior student
3. allocate the management student to a junior student
4. monitor the management's student's success in this role
5. provide constructive feedback to the management student with respect to their teaching and support of junior students
6. participate in feedback to the junior student.

Preparation for This Role

Senior Students
Preparation for the senior student will require the development of registrant level mentorship skills, the nature of helping relationships, reinforcement of reflective skills, the acquisition of appropriate clinical skills, demonstrating skills and problem solving.
Many of these skills will have already been taught within the registrant level programme, prior to their management placemen, but will need to be revisited with the emphasis on providing support for junior colleagues. Sessions will be provided through the registrant programme which will include how to teach clinical skills, the nature of a helping relationship, the giving of feedback to junior colleagues and how to access support regarding this process. The need for sensitivity and confidentiality within this role will also be emphasised.

Junior Students
For the junior student, preparation for this support mechanism will be provided as part of the preparation for clinical practice. This preparation will explore the peer support role, the aims of providing peer support and advice on how to access support for matters relating to this process. The need for sensitivity and confidentiality within such a relationship will also be reinforced to all students.

Mentors
Preparation for mentors will occur through mentor preparation and updates. Ongoing support for this initiative will be provided by the educational PLT representative to the area. Written information will be included within the ward assessment file.

Support Mechanisms

For students:
Students will be able to access formal support from their mentor, personal tutor, and/or educational PLT representative to the area. Informal support may be accessed through peer support networks.

For mentors:
Mentors will be able to obtain support from their peers, managers, personal tutor to the student and the educational PLT representative to the area.

Evaluation of the Role
Evaluation of the role will occur through:
a) student placement experience evaluations
b) reflection on practice sessions following placement experiences
c) a sharing forum via the practice learning team.

For further information please contact Liz Aston, School of Nursing.
0115 82 30976 or liz.aston@nottingham.ac.uk