

# CASE STUDY

PebblePad to patient: Enhancing clinical practice learning Helen Dugmore, Clare Walters, Georgia Falconer & Jack Sawrey, Murdoch University, AU



PEBBLEPAD CASE STUDIES

STORIES OF INNOVATION TOLD BY THOSE CHARTING NEW COURSES IN LEARNING, TEACHING AND ASSESSMENT.

### THE CONTEXT

During the three-year Murdoch University (MU) Bachelor of Nursing (BN) course, nursing students are required to successfully complete seven Work Integrated Learning (WIL) clinical placement units, with clinical competence assessed against the Nursing and Midwifery Board of Australia (NMBA) Registered Nurse standards for practice (Nursing and Midwifery Board of Australia, 2016). MU BN students have been utilising a digital clinical eportfolio using PebblePad and the PebblePocket app to record clinical competence whilst on WIL clinical placements since 2017. WIL clinical placements occur in a variety of health care settings including metropolitan, regional, rural and remote areas of Western Australia. Internet connectivity is not always reliable in these settings and using templates developed in PebblePocket, students are able to undertake clinical assessments in real time, ensuring assessments are contextualised and integrated into clinical learning.

Exploring alternative ways to enhance the learning experience for students using PebblePad, MU Discipline of Nursing (DoN) has included blogging as a mechanism for learning and have embedded video blogs, 'vlogs', into the clinical eportfolios for those students attending rural and remote placements. Using the video function in PebblePocket, students video their oral reflections rather than using written reflections to document clinical experiences.

# THE PROBLEM

Undergraduate registered nurse students within Australia are required to complete a minimum of 800 hours of WIL clinical placement across the 3 years of study to be eligible for registration with the Australian Health Practitioner Regulatory Authority (Australian Nursing and Midwifery Accreditation Council, 2018). Rural and remote placements are a valuable inclusion to clinical placements for nursing students, offering unique learning experiences and exposure to a wide variety of clients. In many rural areas of Western Australia, the population is sparsely distributed outside of the regional centres and care is delivered at nursing posts or by visiting services, such as the Royal Flying Doctors Service (RFDS).

Approximately 300 MU nursing students undertake a rural or remote WIL clinical placement per year and may travel up to 3000 km from the Murdoch campus located in the Perth metropolitan area to attend placement. For many students, this placement may be the first time that they are away from family, friends and normal support structures for an extended period. Supervision of nursing students' clinical practice whilst in the rural or remote area is undertaken by registered nurse preceptors/ assessors on site.

A MU Clinical Nurse Facilitator (CNF) is also employed to oversee the learning experience and completion of regulatory assessments, ensuring that learning outcomes for the clinical unit are met. A difficulty is that the CNF is rarely located in the same physical location as the student and internet connectivity in rural and remote locations cannot always be relied upon.

Following the successful implementation of the clinical eportfolio as a workbook in PebblePad and assessment templates developed in PebblePocket, an opportunity to increase the connection to, and support of, students in rural and remote areas was seen in the use of the blog feature in PebblePad.

# THE APPROACH

A small pilot was undertaken with students attending RFDS WIL clinical placements throughout Western Australia in 2019 and 2020.

The aims of the pilot were to:

- Increase a sense of connection between the student, the CNF and academics through the vlog format.
- Promote responsibility for, and motivation around the learning process through partnering with students to modify the assessment format.

#### Partnering with students

Students undertaking RFDS placements were contacted to trial the new format of the clinical eportfolio with the inclusion of the vlog. Through discussion with students the reflective components of regulatory assessments were modified from the traditional written format and students were instead asked to create vlogs. Students were encouraged to create two vlogs per week of no more than two minutes duration each using PebblePocket. The students were familiar with PebblePocket having used the app in

previous clinical placements for completion of assessments and timesheets and in theoretical units for recording of videos for assessments. Once completed the students uploaded the vlogs to the 'Reflective Blog' page within the clinical eportfolio.

In order that requirements for assessment were met, broad instruction was provided to the students that the vlog should include the below. However, creativity in how the vlog was presented was encouraged.

- What have you seen (was there an occurrence of care/skill that you were involved in that was new describe this)?
- What have you learnt (was there new knowledge, did this experience challenge assumptions or perceptions)?
- Were there any positives or negatives to this experience?
- Have you been challenged to look at things differently?
- What can you take forward to future practice?

#### Partnering with assessors

Whilst familiar with PebblePocket for the completion of assessments and timesheets, CNFs were not familiar with the video function of the app. As a limited number of CNFs were involved in the pilot, one-one sessions were conducted to provide information on the changes to the assessment format and to show how students would create the vlogs in PebblePocket and upload to PebblePad. Instruction was also provided on how CNFs could give feedback to the students on the content of the vlogs.

Registered nurse preceptors/assessors on site, whilst not impacted by the changes to the clinical eportfolio, were informed of the students' requirement to create vlogs. Students were encouraged to share the clinical eportfolio with the site assessors, as they were required to create a video 'elevator pitch' describing their reasons for wanting to undertake the RFDS placements as part of the selection process for placement.

## **THE RESULTS**

Paperless assessment in the clinical area, which allows flexibility in the assessment format, is a new pedagogical approach in undergraduate nursing assessment. The clinical eportfolio allows for students to develop a personalised learning and assessment experience and allows academics and facilitators to provide feedback on learning in real time. Templates developed within PebblePocket have enabled assessments to be undertaken in real time and in varied clinical settings and locations where access to an internet connection cannot be relied upon.

Early results from the pilot show that with the integration of vlogs, students and CNFs can effectively create a constructivist learning environment that supports knowledge development through engagement, increased reflection and collaboration (Noel, 2014).

As an alternative to specific assessment reflections, I think they [vlogs] will encourage the students to be less task focused and think about their experience in a more holistic sense - possibly giving the CNF a more accurate impression of the student's progress.

(Rural and Remote CNF)

Completing the vlog innately made me reflect more as I was forced to think more critically about every day of my placement, especially how I was feeling. As there is so much writing involved during university studies through essays, reflections, assignments etc., it can sometimes feel as if you just begin to regurgitate information when reflecting rather than process your thoughts through a Gibbs cycle. This is where the video reflection became really useful as it was a fresh way of reflecting that challenged me to really reflect on how I was feeling and where I wanted to go with my placement, I feel I did this to a larger extent than if I was just writing my reflections.

#### (Third year student RFDS)

Vlogs create student-centred environments that contextualise learning (Meinecke, Smith & Lehmann-Willenbrock, 2013) and provide a medium for focused collaboration in which students have meaningful interaction with the clinical content and their CNFs, with the purpose of co-constructing knowledge and understanding (Halic, Lee, Paulus, & Spence, 2010).

The vlogs provide a great visual context for the environment students are working in and the type of community/setting they are living in throughout the rotation. This might give CNF's a broader appreciation for the type of issues/experiences students may have e.g. remoteness and feelings of isolation, practical considerations such as amenities within the town etc.

#### (Rural and Remote CNF)

*I really enjoyed both listening to this vlog and seeing some brief footage of the North West. I also liked that you included the locations you had visited throughout the week.* 

#### (Vlog extract Rural and Remote CNF)

Students easily engaged with the vlog format as it is simple, allows for a personal connection, they can be creative, and are able to record the vlog from anywhere and upload to PebblePad at a later time. Clinical Nurse Facilitators also engaged in the vlog format, creating their own vlogs to provide feedback, which was positively received by students.

The experience of creating the vlog was overall great. Using the pebble pocket app to upload the videos as an asset meant that it was very easy to both film and upload my vlogs to pebble pocket.

(Third year student RFDS)

...great to see another vlog! I think it's an awesome way of reflecting on prac

(Third year student RFDS)

...it was great to receive a vlog back and made the experience less daunting

(Third year student RFDS)

Through the incorporation of vlogs, a sense of connectiveness or belonging was established (Halic, et al, 2010). As is often the case in rural and remote placements, students and CNFs generally do not physically meet, and communication is through the telephone or written, either through email or through feedback in the clinical eportfolio. With the addition of the vlog a face is put to a name, increasing the personalisation of the relationship between CNF and student, resulting in increased support for the student.

Then there is the bonus of seeing non-verbal communication i.e. body language in response to a certain experience that can provide added information to the verbal content (rather than the traditional written reflections that can tend to be more descriptive)

(Rural and Remote CNF)

Greater connection to the student through the eportfolio is enabling students to undertake clinical placements across the vast distances of Western Australia. Now academic and clinical progression can be more closely monitored as well as providing increased pastoral support for students in rural and remote clinical placements.

## **LESSONS LEARNT**

Developing the vlog has added another dimension to the clinical eportfolio for students attending rural and remote clinical placements. The primary intention of the pilot program was to fill a perceived gap around support and isolation for students, by creating a sense of connection through the vlogs. A secondary outcome has been the perception from students and CNFs that learning is more powerful and meaningful through the vlog format.

By partnering with students to negotiate the format of assessments, in this case modifying the written reflective component to become a vlog, there was an increased responsibility for, and motivation around the learning process for students and the CNFs in the creation of the vlogs (Mercer-Mapstone etal., 2017). The learning outcomes for the reflective components of the assessments were perceived as being more positive by the students and the CNF through creation of the vlog. Students felt they were challenged through the vlog to think more critically and that ongoing reflection on the clinical experience was more likely

"I'm more likely to re-watch my vlogs as opposed to re-read my written reflections."

(Third year student RFDS)

Through ongoing collaboration with students, CNFs and industry partners, further challenges faced on rural and remote placements can be identified. By looking at student assessments and opportunities creatively within PebblePad, it is possible to bridge these challenges, which has enhanced the student learning experience and is equipping MU BN students with skills required to work within the digital health space.

# **IN BRIEF**

- Partner with students.
- Be prepared to take a risk.
- Look for and embrace opportunities to increase student learning experiences.

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# **GET IN TOUCH**

There are an awful lot of things that make PebblePad unique. Not least the fact that it's a platform designed by educators for educators. Indeed, the PebblePad team is bursting to the seams with innovators and practitioners, all of whom learnt their craft in teaching roles. If you want to talk to a team who really understands your world, get in touch.

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