

2016 American Nurses
Association Annual Conference

Connecting **Quality, Safety**
and **Staffing** to Improve Outcomes



"The Use of Blogging in Tertiary Healthcare Educational Settings to Enhance Reflective Learning in Nursing Leadership"

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Background

- **Increasing complexity** and **rapidly changing** work environments. **Momentum to become learning organizations**
- Increasing **demands** on organizations to **improve performance**
- **Need for competent nurse leaders**
- **Need for deep learning**



Objectives and Aims

- What are barriers to the use of blogging as a learning strategy?
- What are facilitators to blogging?
- Is there a difference in participant satisfaction with the learning experience between blogging and traditional classroom methodology?
- Does blogging as a learning methodology increase reflective learning?



The Role of reflection in learning

- Enhances the development of the professional self in practice (Boud, 2001)
- Aides the transformative learning process (Mezirow, 1998)
- Provides the opportunity for student's to articulate their understandings of course content and clinical experiences

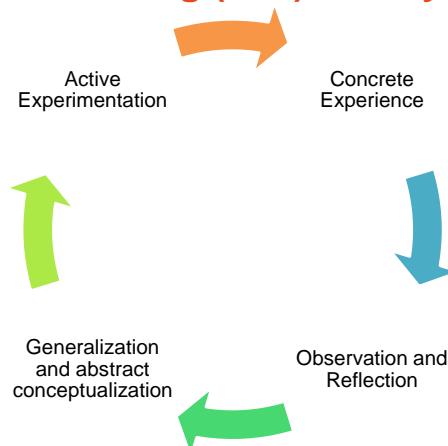


Reflective Learning and Blogs: Expand Classroom Experience

- **Encourage self-reflection** (Maag, 2005)
- Provides opportunities for **increased student participation** and **rich interaction** among students and faculty (Goldman, 2008; Grassley & Bartoletti, 2009; Maag, 2005)
- Promote **active learning opportunities** for **cognitive development** through writing and publishing knowledge gained over time (Goldman, 2008; Maag, 2005)
- Offer **online shared learning spaces** (Goldman, 2008; Hubbs & Brand, 2005; Maag, 2005)
- Allow the instructor to view, through the student's words, the quality of comprehension and mastery of content, including the **affective responses** (Goldman, 2008; Hubbs & Brand, 2005; Maag, 2005)

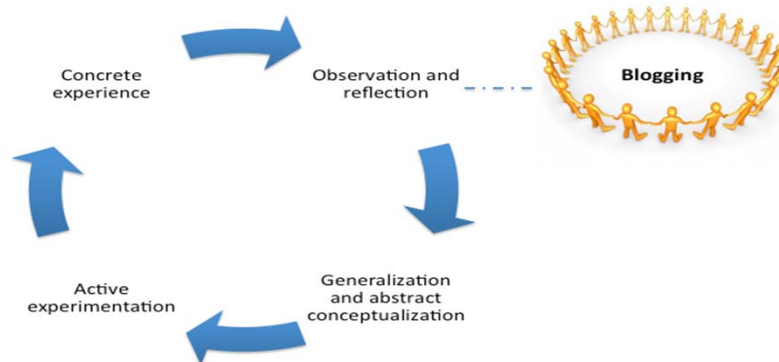


Theoretical Framework: Kolb's Experiential Learning (ELT) Theory





Application of Blogging to Kolb's (1994) ELT Using Blogging



Project and Study Design

- IRB approved, Quasi-experimental study design, to analyze the relationship between groups.
- “The Manager as Leader Learning Cafe” curriculum was developed for nurse managers at the medical center as part of the Nurse Executive Leadership Development Program
- Delivered to in a face-to-face traditional classroom format with a modified café learning approach



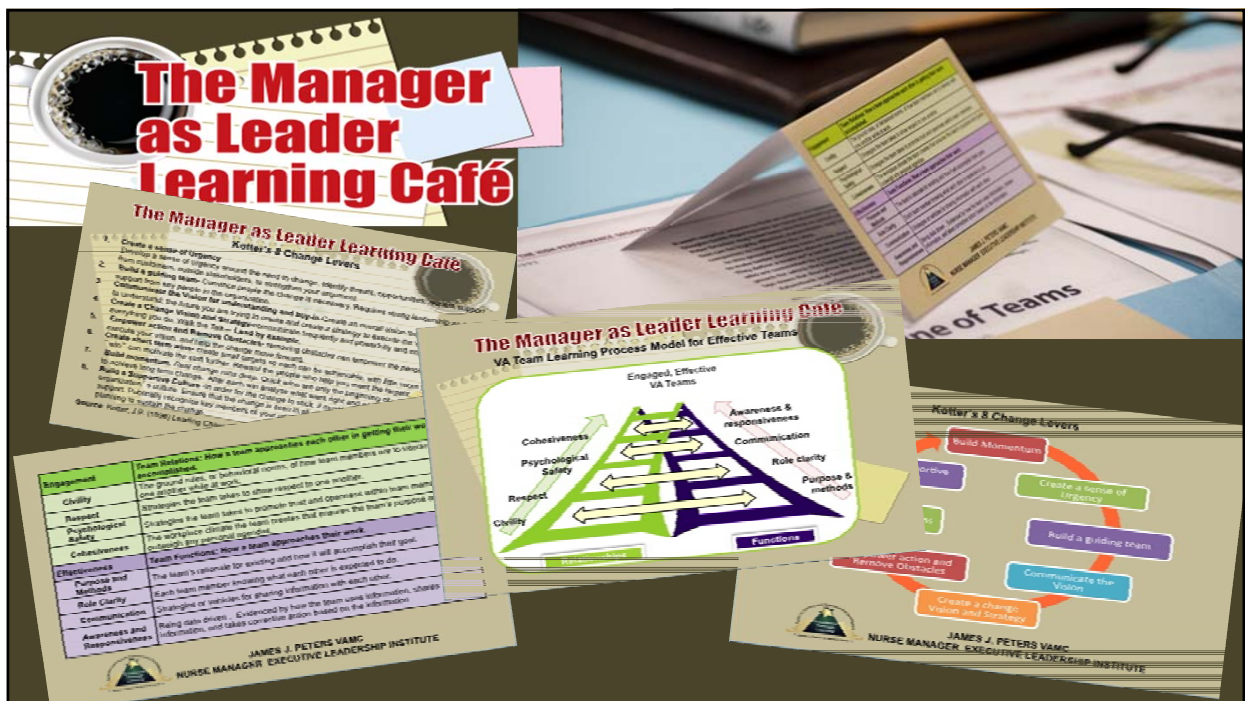
Project and Study Design

- Group BL randomly assigned to participate in a teacher led blog and attend the face-to-face training.
- Provided the opportunity for participants to reflect on questions based on assigned reading plus content of the face-to-face training.
- Group TA, were given a traditional written assignment to complete, with the same questions that were used for the blog,
- Differences in reflective thinking between groups were measured post training using The Reflective Learning and Interaction questionnaire ([Peltier, et al., 2005](#))



Factor Model of Dimensions of Reflective Learning and Interaction

- Assessment of both **levels of reflective learning, conditions of reflection, perceptions of program quality**([Peltier, et al., 2005](#)).
- **Reliability** was established through **factor analysis**
- **Regression analysis** to statistically assess impact of each of the dimensions on perception of quality of the program and benefits derived upon entry into the workforce.



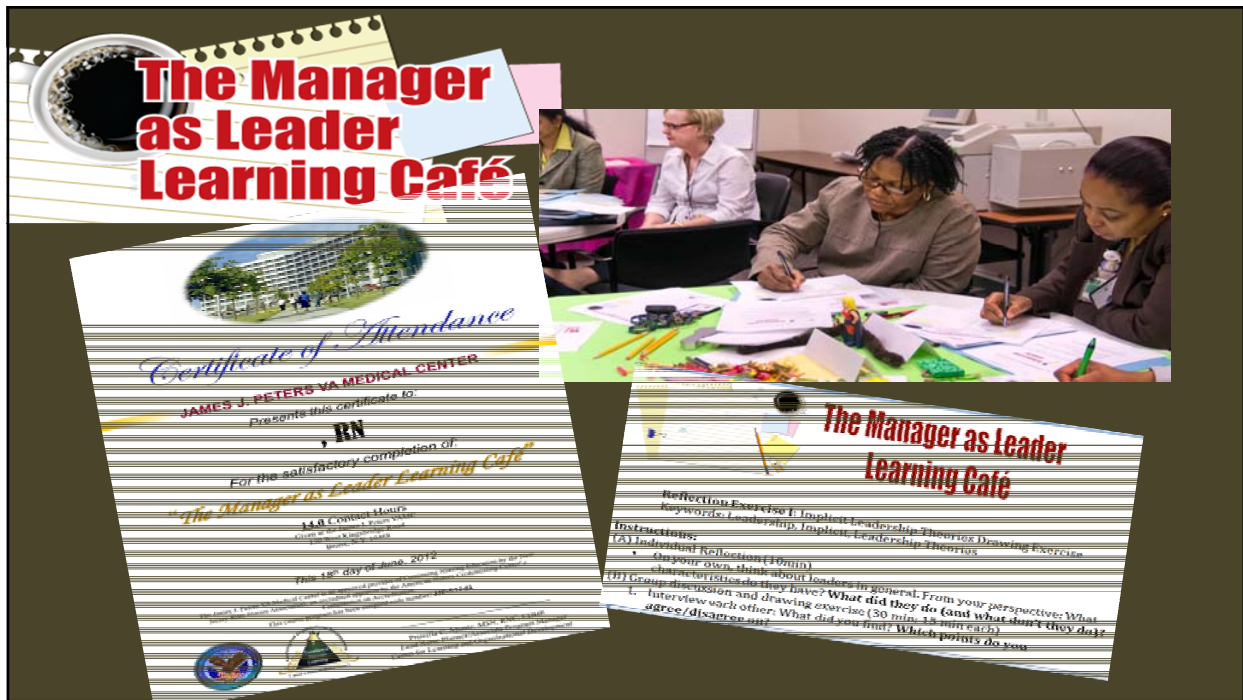
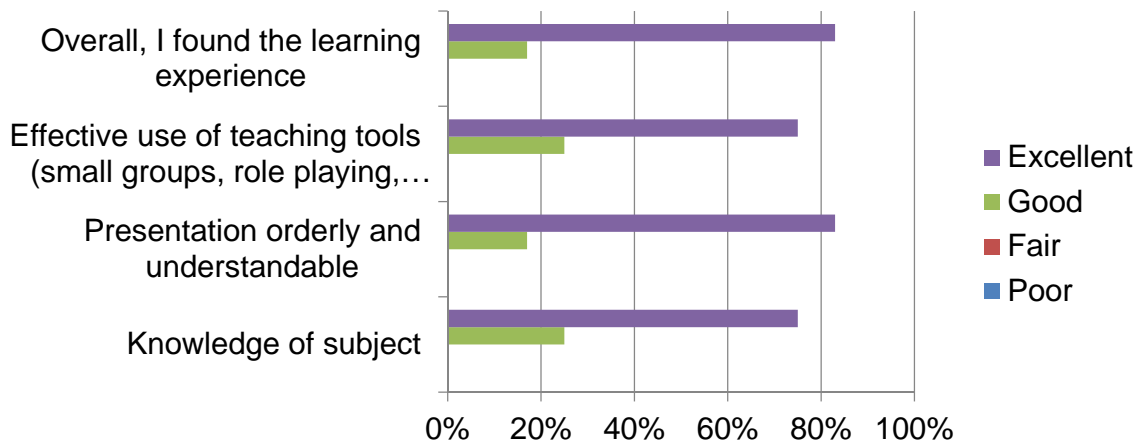


Table 4 Results of the Manager as Leader Program Evaluation





Operational Definitions

■ Reflection

the **intellectual** (cognitive) and **affective** (emotional) activities (D. Boud & Walker, 1985, 1998), associated with **the exploration of the meaning of experience** (Dewey, 1933), in the **development of new understandings and appreciations** (Mezirow, 1991).

■ Reflective process

the degree to which the **learner's schema** or **cognitive structure** is **used or changed** by **challenging habitual ways of thinking and acting**, leading to **different approaches to similar practice situations** (D. Boud, Keogh, R., & Walker, D., 1985; D. Boud & Walker, 1998; Dewey, 1916, 1933; Kember, 1999; Mezirow, 1998; Wong, Kember, Chung, & Yan, 1995).



Table 1 Results of the Reflective Learning and Interaction Two Sample Two-tailed

t-tests using t-distribution for small sample sizes* $p < 0.05$

	Group		p-value
	BL Mean (SD)	TA Mean (SD)	
Learning Dimension			
Intensive Reflection	3.67 (0.33)	4.18 (0.56)	0.09
Reflection	4.10 (0.38)	4.28 (0.74)	0.63
Student Interaction	4.00 (0.32)	4.13 (0.52)	0.61
Instructor Interaction	4.25 (0.47)	4.50 (0.47)	0.40
Habitual Learning	4.03 (0.51)	4.00 (0.60)	0.92
Understanding	3.53 (0.41)	3.84 (0.54)	0.31
Overall, the program provided me with the opportunity to develop new understandings and appreciations of my experience and role as a nurse manager/leader	4.33 (0.52)	2.20 (1.64)	0.01
Overall rating of learning experience**	3.67 (0.52)	3.60 (0.55)	0.84



Barriers/Facilitators

Barriers

- Access to the blog/shortened Time for Blog Responses
 - Need for self-registration
 - Wait time to get approved-delay in postings
 - Approval to join the group
- Time to develop a learning community
 - Length of program and time between Session I and Session II
- Timing of instructor feedback
- Level of BL group member comfort with blogging
 - Experience and skill with writing (BL group)



Facilitators

Provide an orientation to the blogging experience with instructions on self-registration, access and clarification of expectations.

May have needed more time to develop into a learning community to feel comfortable in expressing feelings and thoughts

Individualized instructor feedback for each post versus responding to the group when all responses were posted.

Assessment of knowledge and comfort with blogging pre-assignments



Weaknesses

- Small sample size and convenience sample limits generalizability of the findings.
- Although there were no between group differences in scores on the program evaluation regarding self-awareness, the overall high rating indicates a high level of self reflection from the learning experience .
- **The high level of reflective exercises** included in the face to face training could be a confounding variable, making it harder to find between group differences in reflective learning.



Conclusion

- The **use of reflection in the cycle of learning is a challenge to professionals.**
- The technology afforded by blogs can be used, to **extend the learning beyond the classroom** for the deeper learning needed for reflection to occur.
- Need for nurse educators to **ensure that this vital step of the learning cycle** is incorporated into the planning and implementation of learning activities.
- Informs the practice of other nurse educators contemplating to incorporate social mediated learning such as blogs, into their learning strategies to enhance reflective learning.



Getting published!!



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The Use of Blogging in Tertiary Healthcare Educational Settings to Enhance Reflective Learning in Nursing Leadership

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Web 2.0 technologies such as blogs are increasingly used in academic settings; however, they are not widely used in hospital settings. This project explored the effectiveness of using a blog to enhance reflective learning in a nurse manager leadership development course of a tertiary care hospital setting. Differences in reflective learning between the blog group and traditional learning group were measured post training using a Reflective Learning and Interaction Questionnaire. Although the groups did not differ significantly on any reflective learning dimension ($p < .05$, $n = 11$), the mean scores showed that both groups identified a reflective learning experience. Findings from this study inform the practice of other nurse educators contemplating to incorporate blogs into their learning strategies to enhance reflective learning.

burdened with decreasing resources, rapid change, and increasing regulatory requirements, while at the same time ensuring patient safety and quality patient outcomes (American Organization of Nurse Executives [AONE], 2005; Institute of Medicine [IOM], 2010). According to the IOM report on the *Future of Nursing: A Legacy for Nursing Leadership* (IOM, 2010), there is a need for nurses at all levels to meet the IOM recommendation of enabling nurses to lead change to advance health. These changes have created the need for nurse managers to develop new competencies to meet these increasing demands.

In meeting this challenge, organizations are investing in nurse manager leadership development through methodologies such as online training and traditional classroom approaches (Caramanica, 2010; Cathcart, Greenspan, & Quin, 2010; MacPhee, Sekton-Green, Bouthilliet, & Suryaprakash, 2011; Parry, Calarco, Hensinger, Kearly, & Shakarian, 2012).



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Questions

