# IMPROVING NURSING EMPLOYABILITY THROUGH CURRICULA CHANGE





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#### **SUMMARY**

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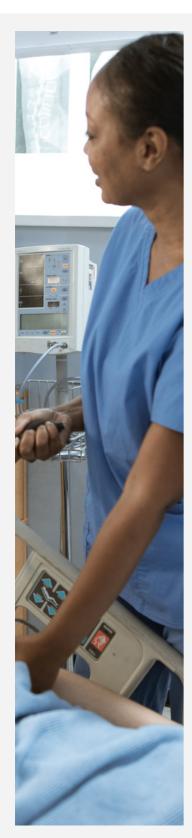
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This case study explores the improvement action plan developed by the Interuniversity Council of Catalonia (ICC) —the body responsible for coordinating the Catalan university system (SUC). The plan was compiled using participatory methods (PMs) involving academic, professional and alumni representatives throughout Catalonia and proposes curricula changes to improve the employability of Nursing graduates. The proposed curricula changes address 10 employability challenges identified from Labour Market Intelligence (LMI) drawn from an employers' survey (AQU, 2020). As a result of this survey, 59 actions were proposed to enhance the employability skills of Nursing graduates. The potential benefits of this process are: 1) the implementation of system-level LMIbased curricula changes to improve the employability of recent graduates; and 2) the sustainability and longevity of these curricula changes, based as they are on mutual consensus between key stakeholders. The Catalan University System is founded on the principles of institutional autonomy, and thus, it is individual responsibility to implement the proposed curricula changes. Notwithstanding, the ICC has set up a working group to follow-up with and coordinate institutions' activities regarding the improvement plan. This working group will meet for the first time in May 2023. This case study explores the work leading up to this group's establishment.

### CONTEXT



In 2019, the Interuniversity Council of Catalonia —the body responsible for coordinating the Catalan university system (SUC)— agreed to establish a working group to identify and address challenges in relation to the employability of recent Nursing graduates, and to propose an improvement action plan. These changes were mostly in the form of changes to the curriculum and were to be implemented by all universities in the SUC.

This working group had several aims (For more information on these aims, see Department of Research and Universities (in press). Informe: Grup de Treball per a la Millora de la formació dels estudis de Grau en Infermeria. Barcelona: Generalitat de Catalunya) in relation to the improvement of Nursing education but one aim was specifically related to the employability of recent Nursing graduates:

"To review the curricula of Nursing degrees to ensure that graduates attain the necessary skills [...] demanded by health institutions and organizations." (Department of Research and Universities in press, p. 5)

To explore this aim further and to identify the associated challenges and solutions it was necessary to interrogate local Labour Market Intelligence (LMI). Specifically, the group analysed the responses of an employer (See AQU Catalunya's Employers' opinion survey website: <a href="https://www.aqu.cat/en/Studies/Surveys-and-thematic-studies/Employers-opinion">https://www.aqu.cat/en/Studies/Surveys-and-thematic-studies/Employers-opinion</a>) survey carried out by the Catalan University Quality Assurance Agency (AQU Catalunya) targeted at hospitals and health centres that had recruited recent Nursing graduates (AQU Catalunya 2020). This survey, which is conducted periodically on a three-yearly basis, seeks to identify which skills are lacking or should be improved among recent graduates. The survey found that Nursing employers perceived gaps in the professional skills of recent graduates in the following key areas:

- ·Capacity to evaluate the Nursing needs of patients and to plan and carry out adequate interventions.
- ·Capacity to use critical thinking in Nursing interventions and to seek continuous improvement.
- ·Capacity to use scientific evidence in the development of Nursing interventions.
- ·Capacity to communicate with patients and their families effectively and empathically.
- ·Capacity to provide comprehensive care in Nursing interventions.

Additionally, employers also reported the need to improve the following soft skills:

- ·Problem-solving and decision-making
- ·On-the-job training
- ·Work responsibility
- ·Autonomous working
- ·Teamwork

To come to agreement on the curricula changes that might address the deficit in the skills above, a group of Heads of Nursing Departments at Catalan universities (known in Catalonia as Deans or Directors) lead by Dr. Dolors Juvinyà-Canal, developed a working methodology based on Participatory Methods (PMs), which is explained in the section below.

[1] See AQU Catalunya's Employers' opinion survey website: https://www.aqu.cat/en/Studies/Surveys-and-thematic-studies/Employers-opinion

### METHODOLOGY

The proposed curricula changes were agreed upon by groups of selected stakeholders using Metaplan techniques (CIPAST, nd). This qualitative technique is 'a facilitation method for groups and as a communication model, in which opinions are developed, a common understanding is built and objectives, recommendations and action plans are formulated to focus on a problem and its possible solutions' (ibid.). The key Nursing education stakeholders —70 participants including academics, employers, and junior staff (recent graduates)— were then distributed across 6 different groups based on geographical location to ensure that different perspectives from non-metropolitan and metropolitan regions were fully represented. These groups were tasked with finding solutions to the two main challenges formulated in the context section above by drawing on the available LMI. Namely:

- 1. How to improve Catalan Nursing University Education, taking into consideration employers' opinions on the skills of recent graduates?
- 2. How to adapt expert training in Nursing to respond to the professional profiles most demanded by employers?

These 6 sessions yielded 366 ideas that were transformed into concrete actions following the process shown in Figure 1.

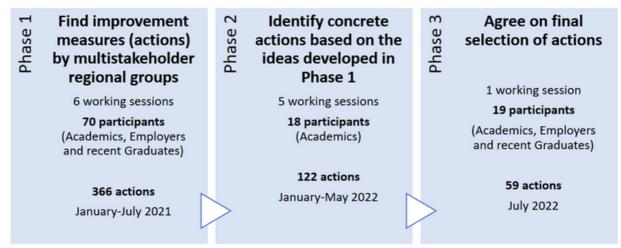


Figure 1. Process of ideation and selection of improvement measures in Nursing education

These actions were then grouped thematically and by order of importance into the 10 challenges that stakeholders identified as the key improvement issues for Nursing education. These actions, grouped by challenge, are outlined below:

### Challenge 1. How can universities train Nursing students' team-working skills? Which concrete changes in curricula need to be implemented to do so?

1.1.Foster collaborative projects and assignments (including collaborative mindsets, beyond simply dividing tasks) across the entirety of the programmes and within all modules.

### Challenge 2. How to foster soft skill acquisition among future Nursing graduates? How to specifically train communication skills and nurse leadership?

- 2.1. Greater use of simulations aimed at developing soft skills.
- 2.2. Focus on case resolution involving the use of soft skills.
- 2.3.Organise seminars and workshops to help students assess their soft skills and analyse their training needs.
- 2.4.Plan activities oriented to enhance students' emotional management.
- 2.5. Develop toolkits aimed at promoting critical thinking and reflection.
- 2.6.Encourage oral communication skills and argumentation by using presentations as an assessment technique.
- 2.7.Develop assessment rubrics and materials for soft skill acquisition.

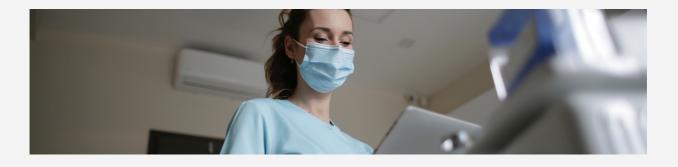
## Challenge 3. How to foster research and evidence-based practice (EBP) cultures throughout Nursing degrees?

- 3.1. Integrate EBP into Teaching Plans for all modules.
- 3.2. Encourage teaching staff to use updated, contemporary evidence in all modules.
- 3.3. Increase dissemination of departmental research to students and provide the opportunity to assist in these research projects.
- 3.4. Create spaces to share research activities between undergraduate, graduate, and doctoral programmes as well as in clinical practice.
- 3.5. Create reading and reflective practice groups.
- 3.6. Encourage scientific reading from Year 1 of programmes and have students ask research questions on a regular basis.
- 3.7. Share examples of applied Nursing research with students, with real testimonials from clinical researchers in Nursing.
- 3.8. Conduct clinical sessions during the placement period based on cases of care using EBP.
- 3.9. Encourage students to apply research results to practical Nursing interventions.

### Challenge 4. Further promote the role of Advance Practice Nurses (APN)[1] (Schober 2019) and work to consolidate the role across the health system?

An APN is a nurse who has acquired clinical competencies and advanced decision-making skills, through additional education, for expanded Nursing clinical practice' (Schober 2019, p. 63).

- 4.1. Reach an institutional agreement on the concept, skills, and responsibilities of APNs.
- 4.2. Incorporate the role of the APN in student placements and ensure that students develop some of their practice under the supervision of APNs.
- 4.3. Invite APNs to training sessions, case resolution activities and as supervisors of undergraduate dissertations
- 4.4. Incorporate content in first-year Nursing modules that foregrounds the role of APNs and promotes their impact on health outcomes.



# Challenge 5. How can we maintain a dialogue with employers and work collaboratively to develop the skills that students need to attain, and detect gaps in specialised training?

- 5.1. Define and schedule periodic meetings with employers, and course and placement coordinators.
- 5.2. Work with employers to carry out a situational diagnosis of the needs of employers and teaching staff, to explain the expected learning outcomes of placement periods, and to work together on a document that sets out the critical competences that students need to acquire during their placements.
- 5.3. Work on key skills with associate teaching staff (In the Spanish context, associate professors are individuals whose principal professional activity is outside Academia, with the aim of bringing professional/practitioner perspectives into the classroom) and detect gaps in specialised training.
- 5.4. Design, together with employers, assessment materials and rubrics to evaluate achieved learning outcomes.
- 5.5. Promote the participation of employers and students in the processes of monitoring and evaluating the quality of Nursing degree programs. Incorporate student debates and analysis of concrete learning situations into both clinical and university teaching environments.
- 5.6. Include Nursing and healthcare professionals in the working groups that design curricula.
- 5.7. Schedule discussion groups with specialized nurses from Health centres, with academic tutors, and with university management to evaluate how to tackle specialization.

# Challenge 6. How can we improve professional nurses' supervision of Nursing students? How can we define the role and responsibilities of placement supervisors, and/or mentors?

- 6.1. Establish a training programme for clinical supervisors tailored to different levels of expertise.
  6.2. Improve clinical supervisors' skills in pedagogy and educational tools, leadership, and communication (particularly, feedback to students) and scientific evidence.
- 6.3. Reformulate supervisors' competency requirements to include student professional and soft skills development, and the modelling of expected professional identities.
- 6.4. Foster effective communication and greater active participation between academic and clinical supervisors: inter alia, the definition of expected learning outcomes, assessment rubrics, and a shared professional vocabulary.
- 6.5. Facilitate peer observation between academic and clinical supervisors and encourage the peer-to-peer feedback between the two roles.
- 6.6. Increase professional recognition of the role of the supervisor.



## Challenge 7. How to incorporate emerging Nursing roles[1] in current degree programmes and modules?

During the review process, participants reflected on the need for greater focus on the skills and competencies of emerging Nursing professionals. Participants proposed the idea of establishing a dialogue with employers to identify these roles.

- 7.1. Include final year student placements with the clinical supervisors that perform these new emerging roles.
- 7.2. Design degree specializations specifically focused on these emerging new roles.
- 7.3. Incorporate training in Nursing care from a gendered perspective.
- 7.4. Include emerging teaching methodologies, such as simulations and role play. These could include, for instance, teleconsultation and emotional management.
- 7.5. Increase the number of teaching hours on pharmacology, and the prescription, use and authorization of new drugs and health products.

## Challenge 8. How to adapt undergraduate and postgraduate Nursing degree programmes to changing societal and employer needs?

- 8.1. Offer decentralised life-long learning opportunities that respond to the needs of Health centres. Increase training coordination between the University and employers.
- 8.2. Refocus teaching and learning on emerging Nursing specialities, with an increased focus on placement opportunities.
- 8.3. Offer training in emerging societal changes, such as cross-cultural communication or LGTBIQ+ care. Teach Nursing care from the perspective of Sustainable Development Goals.



- 8.4. Reinforce teaching in digital skills to address current and future care needs.
- 8.5. Develop indicators to understand contemporary social needs in terms of Nursing care.
- 8.6. Include a final examination in all degree programmes in the form of an Objective Structured Assessment of Technical Skills (OSATS).
- 8.7. Establish a project incubator to find solutions to current and future societal needs.

### Challenge 9. What are the new types of teaching roles required to respond to current learning needs?

- 9.1. Expand teacher induction plans and training sessions on mentoring and student engagement.
- 9.2. Offer training in teamwork for teaching staff.
- 9.3. Incorporate different teaching profiles in decision-making processes about modules, contents, and degree planning. Include associate teaching staff in research projects and in discussions on the improvement of degrees.
- 9.4. Identify potential teaching talent among healthcare professionals to harness their expertise.
- 9.5. Design spaces (seminars, workshops, or round tables) to foster dialogue between teaching staff and healthcare professionals.
- 9.6. Establish new teaching roles and encourage the creation of linked positions (Linked positions are teaching roles that involve both teaching and healthcare practice in University health centres.).
- 9.7. Boost recognition strategies in the accreditation of teaching staff: recognise healthcare experience in staff accreditation processes.

# Challenge 10. How can we boost a sense of belonging in the Nursing profession to achieve the social transformation of the profession? What are the values that should be transmitted to Nursing students? How should it be achieved? What are the actions that can be undertaken to encourage collaborative work as opposed to individualism?

- 10.1. Encourage person-centred care practices. Humanise care through reading, debating, and the analysis of care practice. Foster ethical and professional commitment from a humanist model.
- 10.2. Foster values such as professional effort, generosity, service, allegiance, commitment, and responsibility.
- 10.3. Encourage commitment towards the profession in relation to Public Health and foster active participation in community organisations and institutions.
- 10.4. Assess students' values prior to entrance into degree programmes. Include the teaching of values in theoretical modules and on placement. Identify role models in relation to professional values and encourage reflexive practice.



### REFLECTIONS, CONCLUSIONS & NEXT STEPS

Although it is too early to assess the impact of the process described in this document on Nursing education, it is clear that Labour Market Intelligence can be a catalyst for agreement on system level curricula change that may boost the employability of Nursing graduates. These decisions are much more likely to be both durable, effective, and owned by individual HEIs, stemming as they do from agreement between all key stakeholders. Additionally, the involvement of employers –both in the form of employer surveys but also their key participation in discussions and curriculum design processes—contributes to the professional credibility of degree programmes and the future graduates of these programmes.

Clearly, the next step for this project is to see the effective implementation of curricula changes across all the HEIs involved. As laid out in the initial brief for this project, each HEI is responsible for prioritising and implementing the challenge actions according to their own priorities and capacities. We foresee two main challenges with this process of implementation: firstly, the coordination of curricula changes and interventions across all of the institutions involved in the project; and secondly, the evaluation of the impact of the actions which are ultimately taken. For the time being, the Interuniversity Council of Catalonia has proposed the formation of a new working group with both representatives from the Catalan Ministry of Health, the Ministry of Universities and University management to coordinate the implementation of the proposed actions. The activity of this group will begin this year and the first meeting is scheduled to happen in May, 2023.

It goes without saying that individual institutions may face barriers that may hinder the implementation of curricula changes. As the Catalan University System works on the principles of institutional autonomy, HEIs may face delays in the implementation of curricula changes depending on their priorities and resourcing.

However, the authors of this case study firmly believe that the model of best practice contained within this system-wide curriculum redesign, will represent a source of inspiration to programme designers that seek to incorporate LMI into their decision-making processes. The relevance of this case study extends to all programme designers of degrees leading to regulated professions where coordinated action is required between educators, employers, and policymakers.

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