

A framework for portfolio development in postgraduate nursing practice

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Aims and objectives. The aim of this study is to explore the introduction of portfolios into the first year of an MSc in Nursing Programme.

Background. This paper outlines a framework for portfolio development in postgraduate nursing practice. The framework is being piloted, within the Irish context, with students in the first year of a Masters in Nursing programme and has the potential to be developed for other nursing programmes at postgraduate level.

Design and method. An action research approach has been chosen to study the implementation of the portfolio and the development of a framework to guide this initiative. To date the development of the framework is being piloted as part of the 'taking action' phase of a first action research cycle.

Results. In its current stage of development the framework is constructed to embrace the core concepts of specialist nursing practice and the nursing management competencies, from current Irish health care documents. In addition the portfolio is anchored around personal development planning and is supported by the use of action learning tutorials and academic and practice facilitators. The first evaluating phase will take place later this year and will involve the collection of data from students, facilitators and lecturers.

Conclusion. The introduction of the portfolio at postgraduate level has highlighted, to date, issues of confidentiality in committing experiences to paper, issues around its assessment, and issues around sharing this document with other students.

Relevance to clinical practice. Portfolio development at postgraduate level emphasizes linking theory and practice and stresses the importance of reflection on practice. The portfolio can also be used by nurses to develop their clinical career pathways and encourage personal development planning.

Key words: action learning, facilitators, personal development planning, portfolio development

Introduction

This paper outlines the development of a framework for portfolio development in a Masters in Nursing programme, using an action research approach. Many definitions have been put forward in the literature for portfolios. Price (1994, p. 35) suggests that:

A portfolio is much more than a document providing only evidence of what has gone before: it is 'a dynamic record of growth and professional change'.

Jasper (1998, p. 246) agrees that a portfolio can be developed '...as a living, dynamic working document that supports advancing practice...'. The framework has been developed

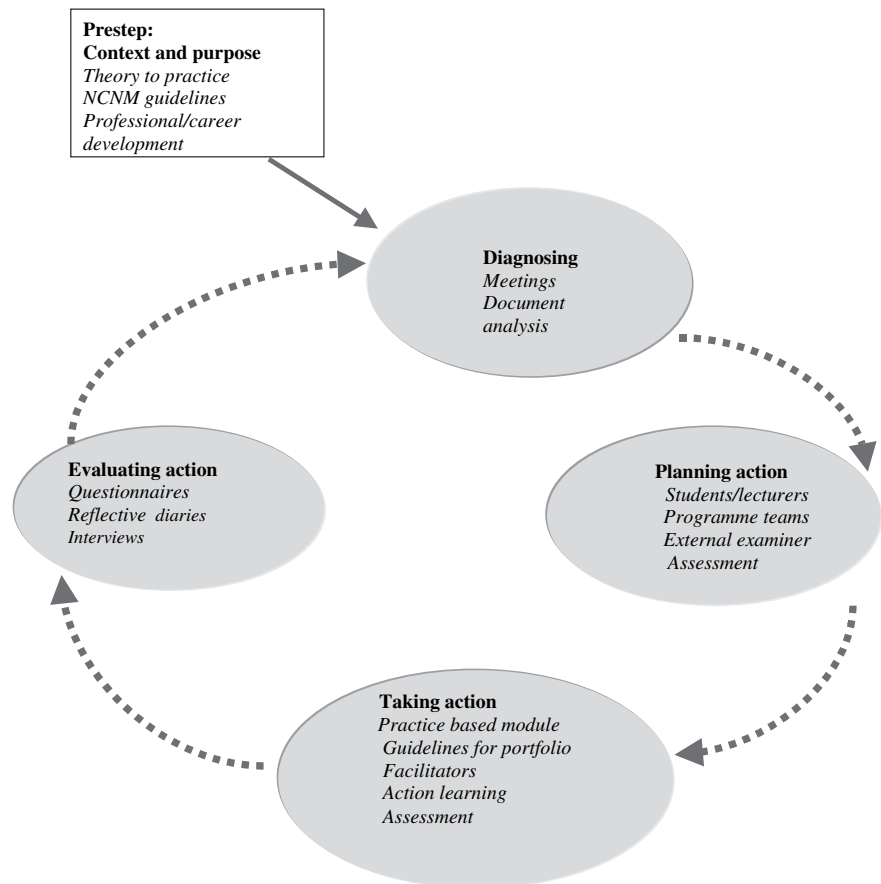


Figure 1 1st action research cycle

during the 'Taking Action' phase (Fig. 1) of the first action research cycle using that proposed by Coghlan and Brannick (2001). The student guidelines supporting the framework are influenced by current Irish documents to embrace the core concepts of specialist nursing practice suggested by the National Council for the Professional Development of Nursing and Midwifery, and the competencies for nurses in the management of the health services, from the Office for Health Management (Rush *et al.* 2000). In addition the portfolio development process is anchored around personal development planning and is supported by tutorials, using the principles of action learning and facilitators.

Aims and objectives

The aim of this study is to explore the introduction of portfolios into the first year of an MSc in Nursing Programme. The objectives of the study for the first action research cycle are to:

- Develop student guidelines for portfolio development.
- Evaluate the benefit of facilitators in the practice area as support for students developing their portfolios.

- Examine the use of action learning sets among students during the preparation of their portfolios.
- Examine the use of reflection in the portfolio.
- Develop a framework for portfolio design at postgraduate level.

Design and method

An action research approach has been chosen to study the implementation of the portfolio and the development of a framework to guide this initiative. Action research has been described as:

...a participatory, democratic process concerned with developing practical knowledge in the pursuit of worthwhile human purposes...It seeks to bring together action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people, and more generally the flourishing of individual persons and their communities. (Reason & Bradbury 2001, p. 1)

The main benefits of action research are the improvement and understanding of practice by its practitioners and the

improvement of the situation in which the practice takes place (Zuber-Skerritt 1992). In a review of the literature, two action research studies examining the introduction of portfolios were found, one from medicine (Snadden *et al.* 1996) and one from nursing (Cayne 1995). This is a new initiative in the MSc programme, which aims to promote personal and professional development of nurses in the 21st century, so they can respond to the challenge of the increasingly rapid change and development in the Irish health care system. These challenges are set out in the Commission on Nursing (Government of Ireland 1998), The Health Strategy, Quality and Fairness (Department of Health & Children 2001) and the more recent Health Service Reform Programme (Department of Health & Children 2003). The National Council for the Professional Development of Nursing and Midwifery recognises that in educating nurses for specialist and advanced nursing and midwifery practice there is great scope for innovation in the development of roles in line with service need. The National Council for the Professional Development of Nursing and Midwifery (2002, p. 2) state:

Collaboration and partnership between service providers and educational institutions will enhance the relevancy of educational programmes and take cognisance of emerging trends in health care needs and provision.

One means of reflecting this collaboration is the development of a portfolio, a requirement by the National Council for the post of Advanced Nurse Practitioner (ANP), who must be educated to master's level. In Ireland currently there is no requirement to demonstrate continuing professional development following nurse registration. Thus, nurses pursuing accreditation of a Clinical Nurse Specialist (CNS) role are educated to Higher Diploma level, but do not need to produce a portfolio. The Office for Health Management propose that nurses take initiatives to move the service forward and show a willingness to try out new ideas. The portfolio is introduced in the MSc programme as part of a practice-based module, not only to meet the requirements of the National Council if students wish to pursue an Advanced Practitioner post, but to encourage personal and professional development towards a career pathway. Following meetings with students and clinical managers, and the involvement of the external examiner, in the prestep of the action research cycle (Fig. 1) the portfolio was introduced, as part of a practice-based module.

Practice-based module

The portfolio forms the assessment method for a practice-based module, in the first year of an MSc in Nursing

programme. The overall aim of the module is to support the student in their demonstration of extensive experience, knowledge and skills, through the core concepts of specialist practice, or nursing management competencies. The module aims to advance nursing practice and promote high quality people centred care by promoting links between the academic and practice settings. The module is made up of 150 hours of learning which will, for the most part, be independent learning time by the students, as they develop their portfolio. The remaining learning time comprises direct contact time with a facilitator in the practice and academic settings. The module will also comprise 500 clinical hours. Clinical hours are defined as working in direct clinical practice associated with the achievement of the clinical learning outcomes of the programme and includes observation of clinical practice, supervised clinical practice and consolidation of clinical practice (National Council for the Professional Development of Nursing and Midwifery 2002).

The practice-based portfolio is promoted as an active process involving collecting, synthesizing and organizing possible relevant items, which will reflect the best evidence of achievement of the module learning outcomes. These learning outcomes reflect one of three pathways, CNS, ANP or Nurse Manager (Table 1).

Although the portfolio will be used in a product role to assess the achievement of learning outcomes for the practice-based module, the process role of the portfolio in personal and professional growth will be evaluated via an action research project. Students will be interviewed using a focus group approach and a questionnaire will be developed to explore the process of developing the portfolio. The theoretical basis of this initiative will also be examined in the questionnaire. It is planned to involve all stakeholders in this feedback, e.g. students and facilitators.

Developing a portfolio

The theoretical basis of the portfolio approach in this framework is underpinned by the four assumptions of the theory of adult learning (Knowles 1975): (i) the student is self-directed; (ii) the student's past experiences are a rich resource for learning; (iii) readiness to learn develops from life tasks and problems; (iv) the student demonstrates curiosity and is self-motivated to grow and achieve. According to Knowles (1975) and Cayne (1995) even if everyone does not have these tendencies, portfolio preparation can help to nurture and develop them, given a facilitative climate. The portfolio approach is based on experiential learning where the learner is actively involved with the realities being studied. Kelly (1996) suggests that portfolio development

Table 1 Core concepts and competencies

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|---|
| Core concepts of clinical nurse/midwife specialist |
| Clinical focus |
| Patient advocate |
| Education and training |
| Audit and research |
| Consultant |
| Core concepts of advanced nurse/midwife practitioner |
| Autonomy in clinical practice |
| Pioneering professional and clinical leadership |
| Expert practitioners |
| Researcher |
| <i>Nursing management competencies</i> |
| Generic competencies |
| Promoting evidence-based decision making |
| Building and maintaining relationships |
| Communication and influencing relationships |
| Service initiation and innovation |
| Resilience and composure |
| Integrity and ethical stance |
| Sustained personal commitment |
| Practitioner competence and professional credibility |
| Front level |
| Planning and organisation of activities and resources |
| Building and leading the team |
| Leading on clinical practice and service quality |
| Middle level |
| Proactive approach to planning |
| Effective co-ordination of resources |
| Empowering/enabling leadership |
| Setting and monitoring performance standards |
| Negotiation skills |
| Top level |
| Strategic and system thinking |
| Establishing policy, systems and structures |
| Leading on vision and values |
| Stepping up to the corporate agenda |
| Development approach to staff |

puts students in control of their continuing professional development. However, there are both benefits and challenges in the process of portfolio development.

As part of the 'taking action' stage of the action research cycle the students needed to be convinced that portfolios did have some potential benefits. There is general agreement, from both research and anecdotal literature about the value of keeping a portfolio. Some of the benefits of the process of portfolio development include their use as a means of facilitating the development of students' accountability and autonomy. Harris *et al.* (2001) suggest that it has the potential to encourage students to take more responsibility for the direction, progress and quality of their learning, in addition to the development of better study skills. However research is needed in this area to validate this claim.

Much of the literature discusses the benefits of reflective practice for continuing education (Barriball & While 1996, Furze & Pearcey 1999, Platzner *et al.* 2000, Hannigan 2001, Paget 2001). Portfolios can encourage students to develop their self-reflection and take charge of their lifelong learning (Wenzel *et al.* 1998). According to Harris *et al.* (2001) this reflection needs to be a conscious and deliberate strategy aimed at understanding and learning from clinical practice. Klenowski (2002, p. 3) believes that:

A portfolio of work that incorporates self-reflection supports learning if the developmental nature of the portfolio process is sustained and provides opportunities for students to self-evaluate their own growth.

However, the reluctance of the student to engage in self-reflection has also been highlighted in the literature. Focusing on fears and weaknesses as well as strengths may be seen as threatening by some students (Mitchell 1994, Snadden *et al.* 1996, Karlowicz 2000).

Portfolios have been used in the assessment of nursing and medicine. Some studies found that, not only did portfolios enable theory and practice to be brought closer together, but that they could lead to improvements in practice and facilitate students taking control over their own learning (Murrell *et al.* 1998, Mathers *et al.* 1999). There are many debates around the reliability and validity of assessment of the portfolio (Rae & Cook 2000, Roberts *et al.* 2002, Gordon 2003, McMullan *et al.* 2003). These issues are particularly highlighted if the portfolio is used for summative assessment purposes. Questions, which have been raised to date in this study, are around the idea of involving the facilitator or student in the assessment. There can be a fear that the portfolio can become assessment led, reducing its learning value. In addition, students may be reluctant to express their thoughts and feeling honestly if they know their writing will be assessed (Gerrish *et al.* 1997, Snadden & Thomas 1998). Ethical issues of privacy and confidentiality are also reported in the literature as concerns for students committing their experiences on paper for their portfolios (Gerrish *et al.* 1997, Gannon *et al.* 2001). Portfolio entries may be censored if students are not assured of confidentiality (Gannon *et al.* 2001). The honesty of entries thus questions the validity and credibility of the portfolio as an assessment tool. The amount of evidence to be provided and the time-consuming aspect of compiling the portfolio may have a negative effect on the student's motivation (Mitchell 1994). Finally portfolios have also been criticized for the amount of time taken to complete and assess them (Oechsle *et al.* 1990, Ryan & Hodson Carlton 1997, Harris *et al.* 2001).

The Portfolio – which framework?

Various interpretations of the portfolio have evolved ranging from a logbook resembling curriculum vitae through to deeply personal accounts. Webb *et al.* (2002, p. 897) sum up four main models of portfolios in a rather humorous way. The shopping trolley model as containing ‘...anything that has been used and produced during the learning process’. The toast rack portfolio has ‘...a number of “slots” that must be filled for each module/placement on a preregistration diploma/degree programme’. The cake mix involves ‘...blending of the parts...to form a whole portfolio cake’. Fourthly in the spinal column model ‘...a series of competency statements/vertebrae form the central column of assessment’ (p. 898).

In the development of this framework, a mixture of the spinal column and cake mix models are reflected in that the portfolio is centred round core concepts or competencies and there is a blending of reflective incidents to demonstrate these. The main body of the portfolio will comprise evidence of knowledge and the application of knowledge in practice. However, in keeping with the Scope of Nursing and Midwifery Practice Framework (An Bord Altranais 2000) the inclusion of certificates of attendance at specific courses will not be promoted as evidence of learning. The portfolio will not comprise of numerous ‘pieces of paper’ to suggest learning. Rather, reflection on what was learned from the experience and the learning in the form of stated learning outcomes must be identified. These outcomes can reflect one of the three pathways, that of CNS, ANP or nurse manager.

Students are encouraged to select and describe experiences and ideas that are most important to them and increased their personal insight. In keeping with Price (2003) the portfolio will include at least three elements: (i) Description of a practice experience, (ii) Written account of reflection on this experience and (iii) Action plans and or descriptions of the nursing care response. It is the student who decides which episodes or aspects of practice to include in the portfolio. Some aspects of practice worthy of reflection may include the following:

- Those that have been successful, or unsuccessful in terms of patient/client outcome.
- Those that have triggered them to re-examine their practice.
- Those that prompt them to re-evaluate their beliefs and values or their worldview.

The portfolio needs to demonstrate a critical attitude towards the student’s own practice. To do this it is important that the student provides a description of the context of the practice area, without breaching confidentiality. Issues that have been raised by students during this process include the fear of committing their experiences to paper and sharing these with others. In the portfolio the students needs to make sense of

what is happening by addressing theory to explain practice observations and experiences. The portfolio also needs to capture the student’s ability to identify alternative ways of practice and envisage strategies for change. However prior to starting on the journey of developing their portfolio the student will have a number of support mechanisms in place.

Support mechanisms

Action learning tutorials are arranged for the current MSc group. With a group of 18 students there are three groups of six students each. Action learning is a method of problem solving and learning in groups (sets) to bring about change for individuals, teams and organizations. Tutorials using the action learning principles bring participants together to question, challenge and support each other. The challenge is to listen intently to all members of the group without giving advice. Each group is allocated a facilitator within the department and meet on two occasions in each semester. Students are encouraged to network with each other outside of the organized action learning tutorials.

In addition to the support of the tutorial groups, the students have identified a colleague in the practice area who acts as their Facilitator of Work-based Learning in developing their portfolio. This concept is not new in the department and has been used successfully, as part of the Practice Development degree programme since 1999 (Cowman *et al.* 2000). As this is a pilot phase of portfolio development in the MSc programme, the facilitators initially, will not be involved in assessment as is the case for the Practice Development degree. However, there is scope for this development following evaluation of the initiative. The facilitator is someone who the student can work comfortably within discussing his or her reflections of an experience in practice. These discussions aim to help the student to explore an experience more critically. They are encouraged to use the concepts/competencies as a basis for their discussions with the facilitator. However, it is important that the student, and not their facilitator, make the decisions about what experiences they want to reflect on. In addition, the facilitators can build on student’s strengths and provide constructive feedback. The role of the facilitator will be evaluated as part of the action research cycle.

Titchen (2003, p. 33) developed the concept of a ‘critical companion’. She describes a critical companion as:

...a helping relationship in which an experienced facilitator (often, but not necessarily, a colleague) accompanies another on an experiential journey, using methods of ‘high challenge’ and ‘high support’ in a trusting relationship.

Through this relationship the critical companion can enable practitioners to critique their practice and build a portfolio of evidence to include structured reflections and evidence drawn from colleagues in other professions (Manley & Garbett 2000).

Students developing their portfolios also have the support of an academic-based facilitator who guides the tutorials using the action learning framework. This role involves helping students clarify their thoughts about experiences in practice and helping relate these back to theory. Strategies used within action learning groups are those described by Titchen (2003) above, i.e. listening, questioning, supporting and challenging. While students will meet their facilitators at various times as they develop their portfolio, their Programme Co-ordinator is the constant link person for them for any general issues around their experience. To date this 'back-up' is working well.

Using the framework

One way of getting started on this journey is to think of an experience, which has made some impact on their memory. They should then write up the experience as they remember it. They can discuss this with their practice-based facilitator or action learning group so that they are challenged about the experience in a questioning manner so as to help them reflect and analyse the experience. As the diagram indicates (Fig. 2) this process may go back and forth a number of times to the action learning group or facilitator until the student can connect up with the concepts (of CNS or ANP) or competencies (of a nurse

manager) they have portrayed in their decision-making and handling of the experience described. When they are satisfied that they have achieved this level of understanding they can then attempt to carry out a Personal Development Plan (PDP) to identify areas for further development around the concepts/competencies chosen.

Personal development plan

The portfolio development is underpinned by the inclusion of a PDP. According to the Office for Health Management (2003, p. 3) Personal Development Planning is a:

...process that enables people to make the best use of their skills and helps advance both the individual's plans and the strategic goals of the organisation. It also provides the framework to focus on development needs which may result from change in work roles, or from organisational or legislative change, or from challenges involved in managing people or working in teams.

It is, therefore, a co-ordinated plan that is made to facilitate growth and development of the individual, paying attention to personal and career aspirations. The PDP is made up of action planning, which focuses on areas in need of improvement for the student as well as their strengths. Thus, there is an element of risk for the student in exposure of this material. Again, support strategies must be included, for example, practice facilitators to guide the student in this venture. It is not within the scope of this paper to include a framework for such a plan but there are excellent resources for a PDP via the Office for Health Management website (<http://www.officeforhealthmanagement.ie>). The student will inevitably need some support strategies to guide them with these plans.

Conclusion and recommendations

This paper has outlined a framework for portfolio development in postgraduate nursing practice. It is being piloted with students in the first year of a Masters in Nursing programme and will have the potential to be developed for the Higher Diploma programmes in specialist nursing practice. The framework embraces the core concepts of specialist nursing practice, from the National Council, and the competencies desired for nurses in the management of the health services, from the Office for Health Management. In addition the portfolio is anchored around personal development planning and is supported by the use of action learning tutorials and facilitators. The introduction of the portfolio in a master's programme in the Irish health care setting is timely, following the recent publication of the Health Service Reform Programme (Department of Health & Children 2003). It is

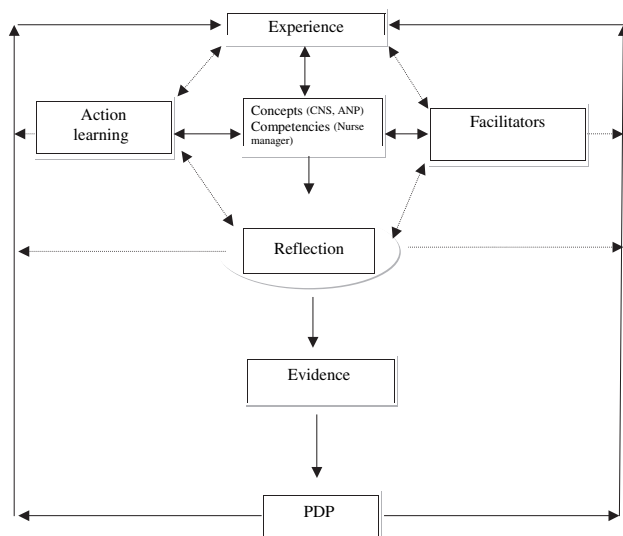


Figure 2 A framework for portfolio development in postgraduate nursing practice.

now vital that nurses take initiatives to move the service forward and show a willingness to try out new ideas. The process of portfolio development emphasizes the integration of theory and practice, making clinical practice integral to academic learning. Building portfolios can encourage students to critically reflect on their decision-making skills and to move forward with action planning. These skills can foster, in the 21st century nurse, a willingness to embrace change, setting the student up for long term development after the MSc programme has been completed.

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Contributions

Study design: PJ; data collection and analysis: PJ and manuscript preparation: PJ.

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