

**An evaluation of a pilot hybrid programme of Post
Registration Children's Nurse Education. A
partnership with SAOLTA University Health Care
Group, the School of Nursing and Midwifery Trinity
College Dublin and Children's Health Ireland, 2022-
2023**

Sláinte Leanaí Éireann



Children's Health Ireland



Trinity
College
Dublin

The University of Dublin



Grúpa Ollscoile Cúram Sláinte
University Health Care Group



Oifig an Stiúrthóra Seirbhísí
Altranais & Cnáimhseachais

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Executive Summary

Introduction

An extensive examination of children's nursing in Ireland was conducted in 2019-2021 resulting in the publication of *Leading the Way: A National Strategy for the Future of Children's Nursing 2021-2031* (HSE 2021). During the extensive consultation process in the development of this strategy, frustration was expressed at the lack of flexible options to obtain a post-registration Registered Children's Nurse (RCN) qualification. Thus, the strategy proposed that consideration must be given to the development of flexible education pathways for registered nurses with no formal qualification in order to register as children's nurses. This report outlines an evaluation of a pilot hybrid post-registration education pathway in which candidates undertook The Higher Diploma in Children's Nursing as registered students with Trinity College Dublin (TCD) while completing their clinical placements across Saolta University Health Care Group (Saolta) and Children's Health Ireland (CHI). While there were students employed by CHI also on the programme, this evaluation focusses specifically on the Saolta element of the programme which commenced in 2022.

Objectives

Formative Objectives

- To discuss the experience of the key stakeholders in the post-registration Hybrid Higher Diploma in Children's Nursing Registration programme. These include students, academic staff, preceptors, Clinical Nurse Managers, Clinical Coordinators and Nurse Practice Development Coordinators involved in the delivery of the programme.

Summative Objectives

- To discuss the hybrid programme from design planning through to implementation.
- To explore the optimum way to support students undertaking the post-registration Hybrid Higher Diploma in Children's Nursing Registration programme.
- To outline accountability, decision-making, sustainability, and scalability of the programme.
- To discuss program effectiveness and achievement of program outcomes.
- To make recommendations and propose the best practice model for the delivery of the post- registration Hybrid Higher Diploma in Children's Nursing post-registration programme.

Research design

To evaluate the programme several methods were employed. These were.

- A detailed description on the planning of the Hybrid Higher Diploma in Children's Nursing programme from design planning through to implementation.
- Student evaluations of the theory elements of the programme.
- Student evaluations of the clinical placements on the programme

- Preceptors' experiences of providing an optimum clinical learning environment, understanding of learning outcomes and preparation for programme.
- Academic staff evaluations of the hybrid programme.
- Stakeholders' evaluations of the processes in the development of the programme.

Key findings

- The Hybrid Higher Diploma in Children's Nursing programme prepares students to acquire the knowledge, professional values and discipline-specific competencies to fulfil the role of the RCN. That is, to deliver safe, high-quality, compassionate, ethical, legal and accountable practice to children, young people and their families in diverse health care settings.
- Students who commenced both Year One and Year Two of the pilot Hybrid Higher Diploma in Children's Nursing programme have indicated they would not have been in a position to pursue the RCN registration if it was not delivered in a hybrid model.
- The post programme evaluations yielded positive findings with all the students reporting their experiences of the programme to be largely positive.
- Findings from Year One of the pilot Hybrid Higher Diploma in Children's Nursing programme show that it is an effective means of providing an accessible pathway to the RCN register for nurses in the Saolta University Group programme.
- Moving the programme beyond the pilot phase, the hybrid model of delivering the Hybrid Higher Diploma in Children's Nursing annually would contribute to increasing the number of Registered Children's Nurses within Ireland.
- The Hybrid Higher Diploma in Children's Nursing programme aligns to the vision set out by Saolta's Strategy 2019-2023, with the emphasis on improving patient care by supporting training and education programmes.

Recommendations

The following recommendation are informed by the findings of this report and will enable the sustainability and expansion of this hybrid approach to children's nursing education on a regional level:

- Permanent funding of additional commissioned university places (suggested number 10-15 places annually).
- Permanent funding of PRCN (Post-Registration Children's Nursing) places - WTEs posts to support the programme.
- Review the number of commissioned places available on a national level.
- Establish partnerships with other hospital groups and hospitals to widen the scope and availability of practice placements.
- Provide permanent funding for the Clinical Coordinator post.
- Expand the accessibility and equity of access of the Hybrid Higher Diploma in Children's Nursing programme to nurses on RNID and RPN register.

- Permanent funding of additional commissioned university places (suggested number 10-15 places annually).
- Permanent funding of PRCN (Post-Registration Children's Nursing. places - WTEs posts to support the programme in Saolta.
- Review the number of commissioned places available on a national level.
- Establish partnerships with other hospital groups and hospitals to widen the scope and availability of practice placements.
- Provide permanent funding for the Clinical Coordinator post.
- Expand the accessibility and equity of access of the Hybrid Higher Diploma in Children's Nursing programme to nurses on RNID and RPN register.

Chapter One – Introduction and Background

Introduction

Irish children's healthcare services are facing unprecedented growth and demands due an increasing child population and the evolving profile of children's healthcare needs. Children's Nursing in Ireland is also in a period of rapid and unprecedented change with the development of the new National Children's Hospital, the establishment of Children's Health Ireland (CHI), and the implementation of a model of healthcare (Slaintecare) (Government of Ireland 2018) and a new Model of Care for Children (HSE/ RCPI 2016). An adaptable, knowledgeable, and skilled children's nursing workforce is essential in this period of change. The complexity and dependency of children in acute healthcare services has risen sharply, changing the profile of children attending hospital and creating a demand for more registered children's nurses (RCN) to safely provide patient care. However, the number of children's nurses does not reflect the increase in the child population or the increasing complexity of caring for children's healthcare needs with registered children's nurses making up only 4%-5% of all registered nurses in Ireland (NMBI 2023).

The National Model of Care for Paediatric Healthcare Services Ireland (HSE/ RCPI 2016) encompasses the provision of care to children as close to home as possible, including care in the community, which requires an adequate community nursing resource for children which does not currently exist in Ireland. Children, young people and their families have a right to be cared for by registered nurses that are appropriately qualified, educated and competent having completed a recognised programme of study and clinical practice in nursing care of children and young people (Paediatric Nursing Association of Europe PNAE, 2005a, PNAE 2005b, Royal College of Nursing 2014). It is recognised that there is a need to increase the number of RCN's to meet the needs of the new children's hospital as well as local and regional children's units, community settings and to support the development of a '*care closer to home*' model of care.

An extensive examination of children's nursing in Ireland was conducted in 2019-2021 resulting in the publication of Leading the Way: A National Strategy for the Future of Children's Nursing 2021-2031 (HSE 2021). During the extensive consultation process in the development of this strategy, frustration was expressed at the lack of a flexibility to obtain

the RCN qualification. Thus, the strategy proposed that consideration must be given to the development of flexible education pathways for registered nurses with no formal qualification in order to register as children's nurses. This report outlines an evaluation of a pilot hybrid post-registration education pathway in which candidates undertook The Higher Diploma in Children's Nursing as a registered student with Trinity College Dublin (TCD) while completing their clinical placements across the Saolta University Health Care Group (Saolta) and Children's Health Ireland (CHI). While there were students employed by CHI also on the programme, this evaluation focusses specifically on the Saolta element of the programme which commenced in 2022.

Background

Pre 2022, the post-registration pathway to registration as a RCN existed within Dublin only. This pathway involves post-registration children's nursing students (PRCNS) undertaking a 1-year Higher Diploma in Children's Nursing programme with either Dublin City University (DCU – *affiliated with CHI at Temple Street*), Trinity College Dublin (TCD – *affiliated with CHI at Tallaght*) and University College Dublin (UCD – *affiliated with CHI at Crumlin*), whilst being a full-time employee of the respective hospital. The Higher Diploma in Children's Nursing of 60 ECTS, is a full-time taught programme of 12 months duration. On completion of the programme, the student graduates from TCD with the Higher Diploma in Children's Nursing and is also eligible to register as a children's nurse. Prior to the Hybrid Programme, the programme in TCD was delivered jointly by the School of Nursing and Midwifery, Trinity College Dublin (SNM, TCD) the University of Dublin (UCD), and Children's Health Ireland (CHI) with students undertaking placements in CHI.

The purpose of the Higher Diploma registration education programme is to ensure that, on completion of the programme, the newly qualified nurse is equipped with the knowledge and skills necessary to be a competent and professional RCN. The rationale for the programme is to ensure an adequate and sustainable supply of RCNs to meet the demands of an increasingly challenging service that requires the highest standard of care. The United Nations Convention on the Rights of the Child (2010) states that each signatory, of which Ireland is one, is committed to safeguarding "the right of the child to the enjoyment of the highest attainable

standard of health and to facilities for the treatment of illness and rehabilitation of health.” It is essential, therefore, that to meet this obligation, each child should have access to an RCN when required. This is emphasised by Article 8 of the European Association for Children in Hospital’s Charter, which states “Children shall be cared for by staff whose training and skills enable them to respond to the physical, emotional and developmental needs of children and families” (EACH, 2001).

Collectively, there are 85 commissioned places on these programmes nationally. Despite extensive recruitment campaigns, some of these commissioned places have not been filled for several years. Anecdotal evidence suggests that, despite nurses’ interest in acquiring an RCN qualification, the requirement to relocate to Dublin and the associated financial and lifestyle implications, may be a barrier to nurses in regional health settings from taking up places on these programmes.

It is within this context that a working group (Appendix One) was established in 2021 to explore the feasibility of developing a programme in which the students could complete some aspects of the programme within the hospital group regionally in which they were employed, whilst also availing of the opportunity to undertake core and specialist placements within CHI. Having established its feasibility, work began on developing a pilot programme for hybrid delivery of the Higher Diploma in Children’s Nursing Post-registration programme with CHI, Saolta and the SNM TCD, in September 2022. This innovative programme was designed to offer an education pathway for registered nurses to undertake the post registration children’s programme while remaining in regional and local units, increasing capacity on the programme overall and providing qualified RCN’s on completion of the programme to units where children are cared for in hospitals in Saolta. In keeping with the National Strategy for the Future of Childrens Nursing in Ireland 2021-2031 (2021) this programme was developed to make a valuable contribution to the delivery and design of children’s nursing services and to the continued professional development of the children’s nursing workforce.

Aim of the Evaluation

The aim of this evaluation is to report the development and implementation of a Hybrid Higher Diploma in Post Registration Children's Nursing Programme with placements in tertiary, regional and local children's units using Stufflebeam's CIPP Evaluation Model (Stufflebeam 1983).

Objectives

Formative Objectives

- To discuss the experience of the key stakeholders in the Hybrid Higher Diploma in Post Registration Children's Nursing Registration programme. These include students, academic staff, preceptors, Clinical Nurse Managers, Clinical Coordinators and Nurse Practice Development Coordinators involved in the delivery of the programme.

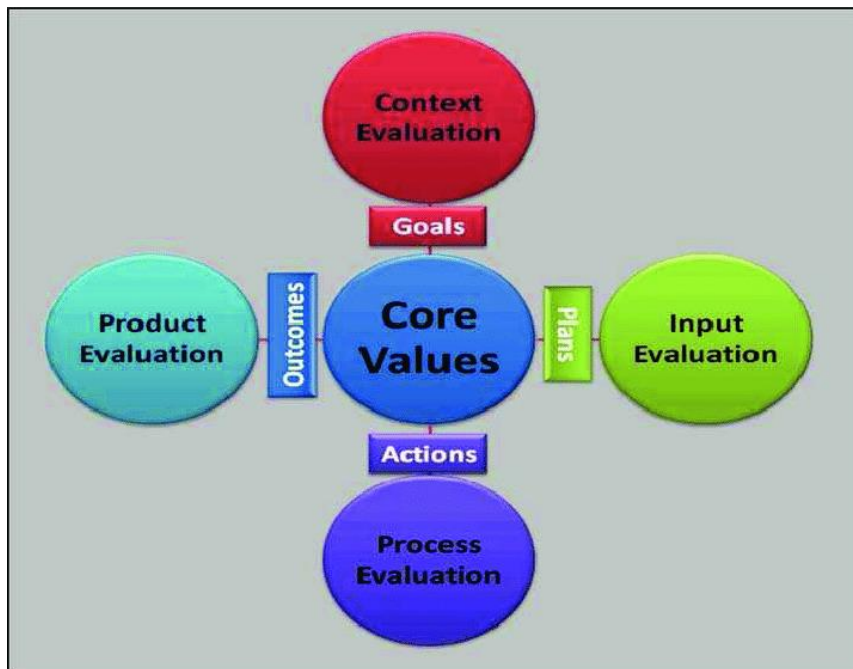
Summative Objectives

- The summative objectives of this evaluation are to discuss the hybrid programme from design planning through to implementation.
- To explore the optimum way to support students undertaking the Hybrid Higher Diploma in Post Registration Children's Nursing Registration programme.
- To outline accountability, decision-making, sustainability, and scalability of the programme.
- To discuss program effectiveness and achievement of program outcomes.
- To make recommendations and propose the best practice model for the delivery of the Hybrid Higher Diploma in Post Registration Children's Nursing Registration programme.

Methods

CIPP Evaluation Model

CIPP model is an evaluation model for curriculum evaluation (Stufflebeam 1983) which includes four elements: C- Context, I- Input, P- Process and P- Product.



Context- Focus on the overall goals of programme.

Input- Focus on resources and strategies to achieve programme goals/aims

Processes- Focus on evaluation of curriculum implementation, monitoring and feedback

Product- Focus on the outcomes of the programme.

Evaluation Methods

To evaluate the programme several methods were employed. These were:.

- A detailed description on the planning of the hybrid programme from design planning through to implementation.
- Student evaluations of the theory elements of the programme.
- Student evaluations of the clinical placements on the programme
- Preceptors' experiences of providing an optimum clinical learning environment, understanding of learning outcomes and preparation for programme.
- Academic staff evaluations of the hybrid programme.
- Stakeholders' evaluations of the processes in the development of the programme.

Chapter Two Context

Introduction

The Saolta University Healthcare Group provides acute and specialist hospital services to children in the West and Northwest of Ireland in the counties, Galway, Mayo, Roscommon, Sligo, Leitrim, Donegal and adjoining counties.

It comprises of the following hospitals across these counties

- University Hospital Galway (UHG)
- Letterkenny University Hospital (LUH)
- Mayo University Hospital (MUH)
- Merlin Park University Hospital (MPUH)*
- Portiuncula University Hospital (PUH)
- Roscommon University Hospital (RUH)*
- Sligo University Hospital (SUH)

In view of the need to increase the numbers of RCNs in Saolta and the outlined flexible pathways needed to educate Children's Nurses, a group was established by Siobhán Horkan (Director of Paediatric Nursing, Saolta). The group was set up in July 2021 to discuss the potential planning for a hybrid model of the Higher Diploma in Post Registration Children's Nursing Education Programme in partnership with Saolta, TCD and CHI. This group was a sub-group of a wider workforce steering group of CHI, HEIs, Saolta, HSE and the group was commissioned by the steering group to explore the hybrid programme.

This group considered the structures and process required to support this pilot project, in addition to the benefits and risks associated with the project and included representatives from TCD, CHI@ Crumlin, CHI@Tallaght and Saolta. The initial brief of this group was to establish the feasibility of a hybrid programme of the Higher Diploma in Post-Registration Children's Nursing Education between Saolta, TCD and CHI and once feasibility had been established, moving to develop, plan and oversee its introduction.

Resources Required for the Hybrid Programme

The feasibility discussions noted that the potential students would

- Remain in the employment of Saolta

- Undertake the majority of their clinical placements within Saolta (acquiring a minimum of three clinical assessments (NCADs), but not in the unit in which they were employed prior to the programme).
- Undertake agreed specialist placements within Saolta
- Undertake a core complex surgical placement (6 weeks) in a CHI @ Crumlin hospital along with two weeks specialist placement in PICU/HDU
- Undertake the 12 weeks theory of the programme with TCD using a hybrid model of learning (virtual and face to face lectures).

In addition, funding for the programme would need to include

- The students' academic fees
- Student salaries for the duration of the programme
- Replacement staff in units where students left a vacancy for the duration of the programme.
- A full time Higher Diploma in Children's Nursing Clinical Coordinator post in the Saolta.
-

Confirmation of the employment status and funding structure for the hybrid programme

- Students doing the Hybrid Higher Diploma in Children's Nursing Post-registration Programme remain full employees of Saolta and are paid their full salary by Saolta on their placements in CHI.
- Saolta backfilled some of the posts vacated by students pursuing the hybrid programme.
- Academic fees are paid by the Office of the Nursing and Midwifery Services Director (ONMSD).
- A full time Hybrid Higher Diploma in Children's Nursing Clinical Coordinator post in Saolta was also funded by The Nursing and Midwifery Services Director Office in ONMSD. The funding was initially for 18 months but this has been extended to Sept 2024 now.

Curriculum Changes

The curriculum of the Higher Diploma in Children's Nursing is constantly evolving to reflect the changing nature of healthcare and service delivery. It is designed to equip graduates to meet the challenges of the future, underpinned by engagement with health service providers, to ensure that the curriculum addresses contemporary work practices and continuous professional development. The Higher Diploma in Children's Nursing programme is described by the Nursing and Midwifery Board of Ireland (NMBI), as a Post-Registration (Registered General Nurse, Registered Mental Health Nurse, Registered Nurse Intellectual Disability) Category 2 education programme leading to a major award at Level 8 on the National Framework of Qualifications in which leads to an additional professional registration in children's nursing as graduates of the programme are eligible to apply to NMBI for registration as an RCN. NMBI oversees the delivery of the programme to ensure that it meets the National Standards and Requirements (NMBI 2018).

Programme Proposal Approval – Professional

Once a curriculum is approved by University Council within TCD, the programme curriculum is submitted to NMBI for approval as a Category II Post Registration Programme delivered at level 8 of QQI and leading to a major award. Thereafter, the curriculum is submitted for re-validation in keeping with the NMBI requirements every 5 years and any changes to the programme must also be approved.

In May 2021, Maryanne Murphy (TCD PRCNs Programme Coordinator) and Dr Mary Hughes (Postgraduate Director School of Nursing and Midwifery TCD) met with the NMBI Education Officers. At this meeting, full support of the hybrid programme was expressed by NMBI officers. It was requested that an addendum document be submitted to NMBI to seek a material change to the current validated Higher Diploma in Children's Nursing programme in TCD. Completed Clinical Audits received from the Saolta hospitals - Letterkenny University Hospital (LUH), Mayo University Hospital (MUH), Portlincula University Hospital (PUH), Sligo University Hospital (SUH) and University Hospital Galway (UHG)) were also submitted to NMBI. Approval was received in December 2021 (Appendix Two).

Trinity College Dublin/ Saolta Partnership

The School of Nursing and Midwifery, Trinity College Dublin and the Saolta deliver the programme in partnership. A Memorandum of Understanding, detailing the partnership agreement, was signed by the Saolta executive and TCD. Administrative staff (Appendix Three) are assigned to work with the Higher Diploma in Children's Nursing Course Co-ordinator and Postgraduate Director to ensure efficient and comprehensive administration of the programme (in relation to programme enquiries, programme advertising, and programme delivery).

Clinical Audit

Clinical sites are subject to clinical learning environment audit by the SNM, TCD to be deemed suitable learning sites for the programme. The successful audit of a clinical site using the NMBI audit tool is valid for 5 years. Therefore, all clinical sites for the Hybrid programme underwent a clinical audit before designating them as a clinical placement site and audits were submitted to NMBI.

Recruitment

The Post-Registration Programme in Children's Nursing in Trinity College has an intake of 15 students annually (8 places CHI@Tallaght and 7 Saolta places for the pilot). For the hybrid pilot programme, CHI released seven unfilled places to Saolta from the 85 commissioned places on the Post-Registration Children's Nursing Programme 2022. The pilot hybrid Higher Diploma in Post Registration Children's Nursing Programme with Saolta was open to applications from Registered General Nurses (RGN) employed in Saolta in the Emergency Departments and Children's Units in Saolta.

Seven RGNs were recruited from the Children's units and Emergency Departments in Saolta. There was keen interest in the programme with demand exceeding supply. The interviews were held in Saolta with a CHI representative.

Clinical Placements for Saolta students

Medical, Surgical and specialist Clinical Placements were provided in CHO1 and CHO2 and the Saolta and other healthcare facilities in the West and Northwest predominantly in.

- University Hospital Galway (UHG)
- Letterkenny University Hospital (LUH)

- Mayo University Hospital (MUH)
- Portiuncula University Hospital (PUH)
- Sligo University Hospital (SUH)

Students employed by the Saolta attended CHI sites for 8 weeks in total. 6 weeks surgical placement and 2 weeks PICU.

Facilities

TCD provides a wide range of student facilities including a health service, counselling services, accommodation, careers advice, and study skills workshops. The supports available to students include the facilities of counselling, health and chaplaincy services in TCD. As employees, students can avail of services provided for staff within the partnered hospital.

Student Support

The SNM, TCD, in partnership with Saolta endeavour to create a positive learning and working environment which focuses on respect and dignity for all individuals in that environment. In this regard the provisions of the Dignity and Respect Policies of TCD and Saolta apply to students undertaking the children's nursing registration education programme. The facilities of counselling, health and chaplaincy services in TCD are also available to all students. As employees of Saolta, students can avail of counselling, health and chaplaincy services via the Employee Assistance Programme and via the Employee Support Services in Saolta.

Details of student support systems are provided to the students on the first day of the programme. Students who are experiencing difficulties with any aspect of the programme or with their personal lives are encouraged to contact their programme co-ordinator. Every effort will be made to assist students to resolve their issue(s) in a timely and sensitive manner. Each module leader is available to assist on support and guidance pertaining to module learning and content.

Students have full access to all services within universities including the library, student counselling, IT facilities, health centre, gym, clubs, and societies. Students can access the library (e.g. journals, databases, dictionaries, e-books) remotely both on and off campus.

Students can use the onsite library facilities in they wish to access print versions of books, use book loan facilities, or study onsite. Facilities within the library include computers, wireless internet access, printers and photocopiers, group study rooms, study spaces, and self-issue and returns for books.

Chapter Three Process (Implementation of the Programme)

Teaching and Learning Activities

The Higher Diploma in Children's Nursing of 60 ECTS, is a full-time taught programme of 12 months duration. The meaningful integration of theory and practice is fundamental to the design of this programme. The programme is a full year (12 months) Higher Diploma programme and is of 52 weeks duration. The programme consists of the following distribution of classroom and practice learning over the twelve months.

Breakdown of weeks for the duration of the programme

Theoretical Instruction	12 Weeks
Clinical Instruction	36 Weeks
Annual Leave	4 Weeks
Total	52 weeks

12 weeks are allocated to classroom learning. In the programme in TCD, these are separated into three blocks of theoretical content, 5 weeks at the beginning of the programme, 3 weeks in November and 4 weeks in Feb/ March. Classroom learning consists of hours of direct contact and directed learning (student learning hours). For the hybrid programme, direct contact hours are a combination of face to face teaching, live online teaching, pre-recorded lectures and directed work for students to complete.

Teaching and Learning Strategy

Inherent in the teaching and learning strategies is the recognition that the students bring valuable knowledge together with life experiences to the learning situation. The central aim of the programme is the preparation of RCN's to practise safely, competently and effectively in partnership with children, young people and their families. A wide variety of teaching and learning strategies are employed. The group size also permits students and teachers to work closely and foster the development of rich interpersonal and reflective skills in a safe environment. Collaborative cooperative learning is encouraged to facilitate comprehension and the development of practical and psychomotor skills. Active student engagement with content is encouraged using seminar, debate and peer presentation. Individual and group

learning develops interactive skills, provides self-assessment, and assists in the development of critical thinking and team building skills. Facilitation of reflective practice throughout the programme is seen as a means of enabling self and peer evaluation of issues in practice.

Integration of theory and practice components underpins all teaching and learning strategies. The assessment strategy on the Higher Diploma in Children's Nursing encompasses a variety of assessments with the aim of encouraging the development of knowledge and the different skills each assessment requires, as well as providing each student with the opportunity to capitalise on their individual strengths.

Hybrid Online Learning

The Post-Registration Programme in Children's Nursing in the SNM, TCD is delivered in a hybrid model for all students. 80% of the theory on the programme is delivered via virtual learning platforms. The other 20% is delivered at the Trinity Centre for Health Sciences campus in the ground of St. James Hospital and the SNM, TCD, D'Olier St. This is to facilitate travel from the west and northwest of Ireland via public transport.

Clinical Placements

The NMBI (2018a) Children's Nurse Post-Registration Education Programmes Standards and Requirements set out the requirements regarding the minimum length and variety of practice placements on the Higher Diploma in Children's Nursing. Students undertake practice placements in the following:

- Saolta hospitals which include:
 - Letterkenny University Hospital (LUH)
 - Mayo University Hospital (MUH)
 - Portiuncula University Hospital (PUH)
 - Sligo University Hospital (SUH)
 - University Hospital Galway (UHG)
 - Children's Health Ireland (CHI)

Preceptors

In the practice learning environment, students on the Hybrid Higher Diploma in Post Registration Children's Nursing practice alongside and under the appropriate support of Registered Nurses (RN). To maximise learning in practice and to facilitate the development and assessment of the competencies required of an RCN, students are assigned a named Preceptor (and, if appropriate, Co-Preceptor) at the beginning of each practice placement within the practice environment. It is desirable that all RN's engaged in the teaching, learning and assessing of students will be prepared for this role.

A Clinical Co-Ordinator is employed by Saolta to support students and preceptors whilst on the Hybrid Higher Diploma in Post Registration Children's Nursing Programme. The Clinical Coordinator provided support to all the six Saolta sites in the pilot.

Clinical Instruction Number of weeks (36 weeks)

To satisfy the NMBI requirements for the programme (NMBI 2018), the following clinical an assessment of the placement opportunities available in Saolta, Medical and Surgical placements, emergency department, neonatal, CAMHS and community placements were assessed and determined to be able to provide the learning experiences students required.

For experience of nursing children requiring specialist surgery or high dependency care, it was determined that these opportunities were not available within Saolta. Therefore these placements were provided by Children's Health Ireland. This required Saolta students to travel and stay in Dublin for the duration of these placements which represented 15% of the overall duration of the programme.

Requisite Clinical Placement	Number of Weeks	Location
Nursing children with medical/surgical disorders (including nursing infants under 1 year)	22 weeks	Saolta University Hospital Group Sites (16 weeks) Children Health Ireland (6 weeks)
Nursing children in Accident and Emergency (including outpatient department)	4 weeks	Saolta University Hospital Group Sites
Nursing children requiring high-dependency care	2 weeks	Children Health Ireland

Any students who had not fulfilled their specialist placements during previous training/education (Operating theatre, Maternity care, Intellectual disability)		Saolta University Hospital Group Sites
Additional Clinical Placements Undertaken by All Students		
Child and Adolescent Mental Health Unit,	1 week	Merlin Park , Galway
Neonatal Intensive Care Unit or Special Care Baby Unit	1 week	Saolta Group Hospitals
Community placement	1 week	Clinical Nurse Coordinator for Children with Life Limiting Conditions, Complex Needs Coordinator and Community Paediatrician
Total	36 weeks	

Assessment Processes

Academic Assessment

The assessment processes for the academic modules and clinical modules are mapped to the programme learning outcomes (Appendix Four).

Clinical Competency Assessment

Students are assessed using the National Clinical Assessment Documentation (NCAD) for the Hybrid Higher Diploma in Children's Nursing Programme. The clinical assessment document incorporates the Domain of Clinical Competence framework outlined by NMBI (2018). Competence is assessed under six domains including:

1. Professional values and conduct of the nurse competences.
2. Nursing practice and clinical decision-making competences.
3. Knowledge and cognitive competences.
4. Communication and interpersonal competences.
5. Management and team competences.
6. Leadership potential and professional scholarship competences.

The Learning Outcomes

There are eight learning outcomes to be achieved on the Hybrid Higher Diploma in Children's Nursing Programme.

Following successful completion of the totality of the programme, the children's nursing student will be able to:

CLO-01	Acquire the knowledge, professional values and discipline-specific competencies to fulfil the role of the Registered Children's Nurse – that is, to deliver safe, high-quality, compassionate, ethical, legal and accountable practice during childhood and in diverse health care settings;
CLO-02	Demonstrate knowledge, clinical skills and professional behaviours that are underpinned by the Scope of Nursing and Midwifery Practice Framework (NMBI 2015) and the Code of Professional Conduct and Ethics for Registered Nurse and Registered Midwives (NMBI 2014);
CLO-03	Practise as a competent Registered Children's Nurse to assess, plan, prioritise, deliver and evaluate nursing care based on a comprehensive and systematic assessment of health and nursing needs in consultation with the child/young person receiving such care, their parent/ guardian and the multidisciplinary team;
CLO-04	Apply theoretical principles to the practice of children's nursing using professional judgement, critical reasoning, problem-solving and reflection derived from an evidence base of nursing and from the applied life, health and social sciences;
CLO-05	Deliver child and family centred, high-quality and safe nursing care based on a collaborative relationship with a child/young person receiving such care, that respects their dignity, autonomy, self-determination and rights to make health and life choices across the health spectrum;
CLO-06	Demonstrate the skills of effective communication, delegation, inter-professional liaison and team-working to promote the quality and safety of the healthcare environment;
CLO-07	Maintain competence to develop and enhance the capacity for self-awareness, reflective practice, leadership and professional scholarship;
CLO-08	Apply evidence from an appraisal of research studies and evidence-based clinical guidelines to the practice of children's nursing.

Evaluation Processes

To determine the success and impact of the Hybrid Post-Registration Children's Nursing programme, an evaluation was performed with the key stakeholders. The programme

evaluation was performed to understand the feasibility, the student experience, experience of stakeholders, in addition to the structures, processes and outcomes of the curriculum.

Programme evaluation involves placing a value on the individual and collective aspects of a programme and making a judgment about its structure, processes, and outcomes. The most thorough evaluation involves collecting information from students, clinical staff supporting the students, academic staff and stakeholders in a programme. Several surveys were administered during the programme of the first year of the pilot and two focus groups were also performed. It was important for students and stakeholders involved in the pilot hybrid to share their experiences and provide valuable feedback for the future development of this programme. The formative evaluations focused on determining which aspects of the programme design worked well and if changes were required. The purpose of the formative evaluations is to identify areas for improvement to ensure the intended objectives of the programme could be met. A pre programme survey (Appendix Five) was administered to students coming on the programme and several surveys were also administered throughout the programme. These focussed on student's experience of modules and clinical placements (See Appendices Six and Seven). Surveys were also sent to preceptors (Appendix Eight) and key stakeholders (Appendix Nine) involved in this pilot programme. There were also two focus groups held, one with students (Appendix Ten) and one with the academic staff (Appendix Eleven). An end of programme survey (Appendix Twelve) was also administered to the students on the pilot hybrid post-registration children's nursing programme.

	Before the programme	During the programme			End of Programme
Students	Survey	Survey (<i>Module Evaluation</i>)	Survey (<i>Clinical Placement evaluation</i>)	Focus Group	Survey
Preceptors			Survey		
Key Stakeholders			Survey		
Academic Staff				Focus Group	

Figure One illustrates the surveys administered.

Summary report on the evaluations and focus groups held with students, staff and stakeholders.

The response rates for surveys administered was between 90-100%.

Summary report on Pre programme Evaluation with students

The pre-programme evaluation showed that most students (N=7) were influenced to apply for the programme because of the hybrid model. They reported that they would not have applied for the programme unless the hybrid programme was available due to family commitments, or they were unable to relocate to Dublin for a year. Students had found out about the programme largely through their workplace. Reasons for applying were influenced by an interest in gaining a Children's Nursing Qualification and gaining additional skills and knowledge to care for children. Some reported that they had always wanted to do the programme but could not because of other commitments, others were caring for children currently but recognised the need to gain expertise in caring for children to the area to provide quality and safe care for children. The students' expectations of support they would receive during the programme were predominantly around academic support and flexibility so that they could balance other life commitments. Students stated that they wished to work in children's settings after the programme with most reporting that they wished to return to their previous workplace or remain within Saolta.

Summary report on Academic Module Evaluation by Students

The surveys administered to evaluate the academic modules also had a very good response rate (N=6-7). Responses were related to the interactive nature of the classes that kept them engaged. Likewise some expressed that pre-recorded lectures or online lectures that were recorded and available later the class were really useful for topics that they were unfamiliar with. Some conflicting information (N=2) was received on the preparation for assignments with one looking for more information and another felt that the preparation was sufficient. Some examples of student feedback included below:

Student Comments

Students were also asked to provide suggestions on how academic module delivery could be improved for the future. Some of the comments looked at the structure of classes and the need for more engagement and breaks during the day. Students felt that when being taught online all day, breaks and interactivity would help maintain concentration and topic engagement.

Breaks between class definitely help as it can be very heavy and tiring when online all day, but all of our lecturers did their best to ensure we had a break'

There are some lectures that would go 90 slides without student engagement. Though online there is great need for student engagement'.

'More interactive sessions will help us to stay focus on the lecture during online lessons'.

In addition, some more time to engage with the topic themselves would have been considered useful

There is so much information to take onboard and lots of references and reading lists so a bit more self-directed learning would be good to allow us the time to catch up'.

Not surprisingly, some of the students wished to add additional preparation and timing of the assignment.

'Module could be more enjoyable if the method of assignments are discussed in the class itself'.

'Personally I hate assignments, I feel that it takes up a lot of time especially when it's the first couple of months and your trying to find your feet. I think more help with the search strategy and library skills would be useful, once off lecture isn't sufficient especially when a chunk of your grade relies on this. I understand academic writhing and assignments are important for any programme but maybe the timing of it could be a bit different, maybe an exam at Christmas and then an assignment after Christmas might suit a bit better for the flow of things'.

There were also others who did not wish anything to be changed in the modules

'A very interesting module and credit to {lecturers name redacted} who is a fantastic lecturer, answers and supports our learning, very approachable to email and a credit to the university. She taught us a lot of the sessions. I really enjoyed this module and a great start to the programme before we headed into practice to get us thinking'.

'Everything good ...'.

Summary Report on Clinical Evaluations

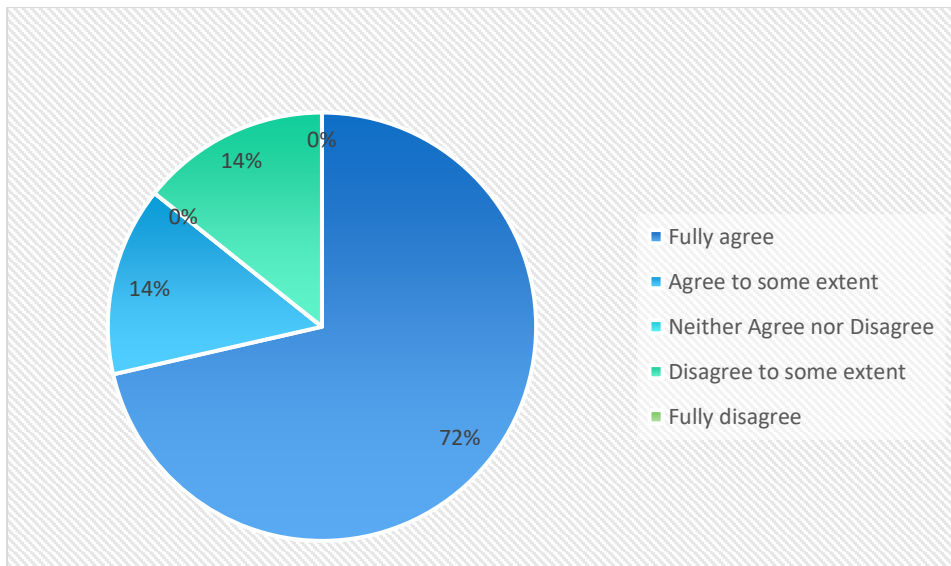
The students received a clinical evaluation survey with closed ended questions to complete after each of their clinical placements (See Appendix 8). The response rate to these surveys was very good, generally greater than 80%.

Overall, students reported that the areas that were allocated to, provided a good learning environment. Where a student felt that the clinical area, they were allocated to did not provide a good learning environment, on every occasion except for one, the student had brought this to the attention of the Clinical Coordinator or the Clinical Nurse Manager (CNM).

Students also reported that preceptor(s) provided a level of supervision that was appropriate to their needs during placements. The vast majority (86%) also agreed that they were given opportunities to practice skills and perform key tasks under the supervision of their preceptor to some extent.

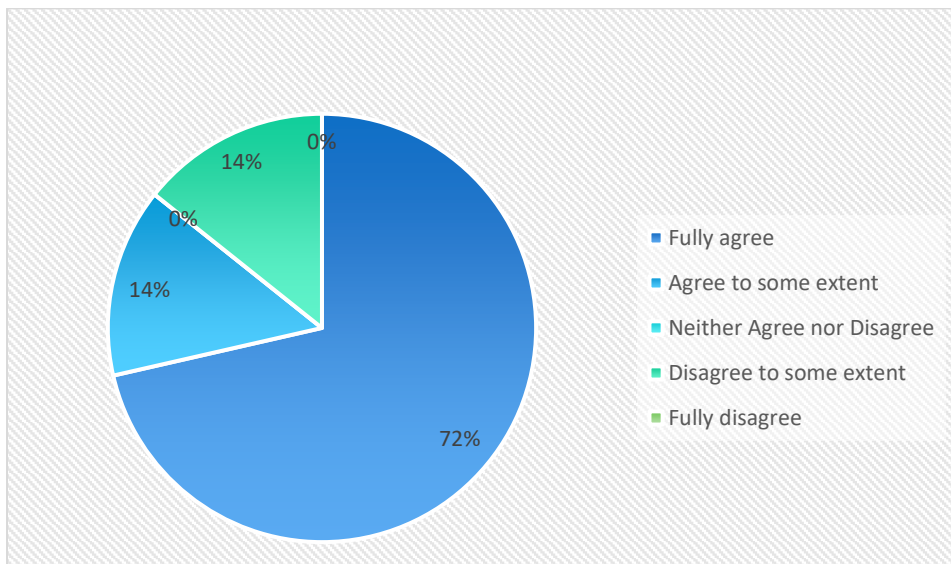
Figure 1

I was given opportunities to practice skills and perform key tasks under the supervision of my preceptor during my placement with my linked hospital / service.



Most students also expressed the view that they had achieved their learning outcomes during their placement and that they were supported by their Preceptor(s) during their placements.

Figure 2 - I achieved my learning outcomes during my placement with my linked hospital / service.



In [name of hospital redacted] Paeds Ward, you can be exposed to various cases and learning opportunities, which include elective and emergency surgical patients (soft tissue surgery, orthopedics, ENT), respiratory problems (RSV, tracheostomy,

noninvasive high flow oxygenation, etc.), eating disorders, long-term full-care patients, oncology patients with PICC lines, Hickman, and many more'.

'Most of the staff nurses are helpful and nice and are happy to teach'.

'Paediatric Ward [name of hospital redacted] is a great place where you can be exposed to all kinds of medical and surgical cases, which can be very simple to very complicated'.

'I enjoyed my clinical placement, I feel like I learned a lot and gained experience'.

I appreciate the support and inclusion from all the staff members on the ward (Nurses, CNM II and III, ANPs, HCA's, Doctors - including Consultants, kitchen staff, etc.)'.

When asked to comment on any areas or aspects of the clinical learning environment during placement with linked hospital / service that could be enhanced students' comments reflected the difficulties in accessing some learning opportunities due to the ward areas being very busy and reduced staffing levels. There were some comments that reflected a lack in certainty regarding who the preceptors/associated preceptors allocated to the students were at times. Students also identified some challenges in clarifying their role or scope of practice. Students' observations on aspects of good practice experienced during placement concentrated on the quality of learning opportunities and the kindness, support, friendliness, helpfulness and willingness to teach displayed by staff. They particularly identified the Clinical Coordinator or Clinical Nurse Education Facilitators role as useful and felt that they fulfilled the role of preceptor in some locations.

Specialist Placements

The placements in CHI were evaluated positively. They felt welcomed and supported during their 8 weeks while on placement in CHI. Very positive experiences were also reported from Child and Adolescent Mental Health Unit (CAMHS), Neonatal Intensive Care Units as well as the placement with the Clinical Nurse Coordinator for Children with Life Limiting Conditions, Complex Needs Coordinator and Community Paediatrician. Some student comments are included below:

This placement in the CAMHS inpatient unit was an eye-opening experience. Most of the time, you will not have the opportunity to have a placement in such a place. It was a great pleasure to be there for the placement. I wish it could be two or even three weeks of placement, as I felt that I had just started to get to know the routine and getting to know all the fantastic children and young adults there as much as they began to get used to me, and I had to leave. I am grateful for the opportunity to be exposed to all the daily tasks and support shown to the patients. I participated in Medical reviews, Dietitians reviews, Psychological reviews, and admissions to the Unit; I received excellent guidelines and support from all the staff in the Unit’.

The team on SCBU were welcoming, eager to teach and involve me in the aspects of care for the pre term baby’s. They have a very hands on approach and I really enjoyed it’.

‘I undertook a 4 week placement in ED [name of hospital redacted] from the minute I started there I was made a part of the team and every chance there was to learn something new my preceptor had me involved. I thoroughly enjoyed my placement there, the staff were knowledgeable, safe and supportive. I was able to go to the neonatal and paediatric simulations also which was a good help’.

Summary Report on Preceptors/NPD experience of the hybrid Post Registration Programme (n=28)

There was wide range of respondents from across the SAOLTA group and CHI to the survey of student support in the form of preceptors and NPD coordinators. They all reported positively on their experiences of the hybrid programme. In particular, having one clinical coordinator was considered very advantageous as preceptors had preplacement information to plan the placement and constant communication throughout the placement. Some of the comments below show this:

There was very little support required, I had a close link with the programme co-ordinator should any issues arise.

Excellent support from the coordinator and group DON and the cnf

Had coordinators contact details if there were any problems.

Continuous support, guidance and advice

Great communication, zoom link and emails

Support given from the course coordinator. Regularly checking in for progress of students

I received comprehensive timely information re the programme, the student and the aims and objectives of the placement. I also received the coordinators contact details along with the students. Advanced noticed offered me the opportunity to carefully plan the placement. Excellent support and links from the CEF, very accessible at all times to answer queries.

Update on the programme by programme coordinator and support regarding any queries.

Clinical Staff were also asked to comment on the benefits of having a student on the hybrid Post Registration Programme on placement on their area. Comments in relation to that outlined several benefits. These included the high calibre of students on the programme which enhanced the learning environment.

Excellent asset to the department. Very interested to learn

They were integral part of the team, and valued their input both theoretically and practically

So much learning was shared with our staff from their experience. The student was extremely competent and added so much to the service. It was a positive experience all round and we look forward to continuing to support the programme.

They had vast experience and knowledge

They are very eager to learn, they get experience, they are counted in numbers

Another cohort of preceptors appreciated the time they were given to teach a children's nursing student which they had not had before and this made them reflect on the knowledge and experience they had.

It also provides reflection time for us as practitioners as we are teaching we are also reflecting on our own roles

Excellent benefits to the ward. Staff get the opportunity to mentor post graduate students who have a vested interest. Allows staff to share their extended knowledge and experience. Great to help focus the education. Student was a great asset on the ward

Aside from teaching and imparting them with the knowledge and skills our unit has to provide, having the PRCNS have provided us an extension of our team. A sense of being able to teach and educate the future of our ward nurses.

It has been a great learning experience for all staff and the fact that the Unit was seen as being a suitable placement for them enhanced ward staff confidence to promote a learning environment.

It is good for staff to be challenged by students and improves the staff's knowledge base also.

Great having student showing an interest in paediatrics. Their enthusiasm and interest was infectious. By having students on the unit it ensures our teaching and assessment skills are being utilized to their maximum potential. These students are future paediatric nurses so there is great positivity in having them on the unit.

As we have a general paediatric ward. The students have opportunities to see a wide variety of conditions

The preceptors and nurse practice development coordinators also saw an opportunity to showcase the area in which they worked to potential future staff members.

Made the staff aware that this programme is available to registered nurses.

Babies are transferred from these hospitals regularly- it's good for us to hear their resources & how they do things in their hospitals and for them to learn from us and take that knowledge back with them.

They can bring knowledge and experience from other sites previously worked in and hopefully bring more knowledge gained in ED back to their place of work and further into their career.

Gives students a further insight into neonatal care, and considering the paediatric ward also meets this cohort of patients following their discharge from Maternity services it is a vital skill set to possess. Unfortunately there is a shortage of neonatal nurses nationally and SCBU's and NICU's mainly cater for midwifery students, it may be beneficial to increase placement time for paediatric students to identify their interest in neonates as a speciality

Good opportunity to show new nurse the options for children's nurses in the community and good insight for students to see home life of children with complex health needs.

Ensuring that the student gets the opportunity to work independently, with supervision and mentorship as needed.

Difficult initially to know each nurses baseline knowledge as we have not met them before

When asked about areas that could be enhanced, the clinical staff highlighted that issues arose with the amount of time they had to teach and the activity of the units.

Sometimes due to work load I may not have enough time to give to the student

Difficult to have time to take to properly assess the students. Busy environment, short staffing of qualified paediatric nurses so difficult to always have a paed nurse with the students. Felt that sometimes students were missing learning opportunities within the department when short staffed or very busy

Low staff levels can be difficult, busy department can hinder learning, but on other hand huge exposure for students.

Trying to protect them as students and not fully be counted in the numbers. From a participant point of view it was unanimous that it was positive for everyone supporting them and all feedback reflected this...they wanted to be there and by asking questions it educated everyone around them...

Being short staffed and not being able to give 100% as a result of this

Trying to keep them supported and not having to allocate them patients unsupported as such due to staff shortages

If you get a weak student it can be very challenging as they are expected to take a full patient workload immediately. The acuity can be very high on our ward as with other areas and providing adequate support to weaker students can be a big challenge

During a busy winter season if they are not coping it is difficult to find the time to support them when their preceptor is also busy

Summary of Stakeholders Survey Findings (n=9)

The steering committee and key stakeholders in the Hybrid Higher Diploma in Children's Nursing programme were also surveyed for their views on the communication processes and level of consultation in the programme.

I found that everybody involved was really invested, very enthusiastic about the project and very willing to support each other and share information. It was a really positive experience.

As a stakeholder, I feel there was a very high level of consultation with all parties. I did not feel at any stage that my perspective or the perspective of my organisation were unimportant or not valued. We were able to contribute to the design and the implementation of the programme

All stakeholders identified and early consultation contributed to the success of the programme so far. Any changes, modifications were addressed and implemented

I was included in all meetings and updates. I had somebody I could contact if I had any queries re Saolta students

The steering committee survey also asked about the representation and membership on the steering committee:

The overall enthusiasm, commitment and can do attitude of all members of the steering committee contributed so positively to the development of the programme.

Very good cross-representation and engagement from all.

I feel the membership was sufficiently broad to capture the various perspectives necessary, and appropriately sized to enable decision-making.

There were two members only from the Saolta group. Should we have had more from them? Perhaps an NPD colleague who is familiar with the clinical learning environment in the Saolta

Group. What about a student? Going forward would a student from the first cohort be helpful on the steering committee? Especially since all the meetings are virtual.

It might be helpful to include staff in UCC/CUH and in UL/LUH as a learning opportunity for them, which would make expanding the programme in the coming years easier. It would also contribute to standardizing the approach.

Summary of Focus group with academic staff (n=6)

A Focus Group was held with Programme Academic Staff at the end of theory element of the programme. This meeting was facilitated by a staff member of TCD that did not teach on the programme and notes were taken by the Clinical Coordinator of the Hybrid Higher Diploma in Children's Nursing from Saolta.

When asked about their overall experience of the Hybrid Programme all expressed very positive feelings overall. It was felt that levels of engagement were generally very good and that everyone - staff and students had had a positive learning experience. Regarding the online learning component the staff expressed great confidence in the amount of theory that was being delivered online. There was an acknowledgement of the need to find new ways to teach in the virtual setting. Numerous different and innovative methods for online application were discussed. Students were felt to be motivated and online learning leaned itself to the more experienced nurses/post graduate students. The flexibility that the programme provided for students was acknowledged and the academic staff felt that students appreciated this. It was felt that this needs to be embraced going forward and consider how flexibility can be even further improved.

The value of face to face learning was agreed. However it was noted that students queried the merit of having to travel to Dublin for this. However staff felt that it was particularly beneficial in getting to know the students and picking up on any students that may have been struggling.

Going forward it was recognised that the value in the face to face days needed to be maximised by careful consideration of scheduling and consideration of what content was best delivered in person and issuing dates well in advance. The opportunity to network on these days was also seen as important and should be facilitated.

Some of the challenges were identified as technology related, both in terms of having suitable equipment and systems to support the process. The etiquette of online learning also needs to be maintained to a high standard. The diversity of the group was also discussed. Some students had not participated in 3rd level education for a number of years and some needed more support with academic writing than others. The group had varying levels of experience caring for children which the lecturers managed by mixing the groups and allowing extra time in online breakout sessions to facilitate conversation/networking/information sharing. This also compensated for the students decreased face to face experiences.

Overall the feedback was positive with a willingness to continue and improve the online class experience for students and teaching staff.

Summary of Focus group with students on the programme

A focus group was held with all the Saolta PRCN's towards the end of the programme in July 2023. This was facilitated by a member of staff of the Centre for Nurse Education and notes were also taken on the day.

The students' experience of the programme was predominantly positive. They expressed that they would not have embarked on the programme had it required moving to Dublin. Nevertheless, the programme had still involved additional expense in travelling to placements and sourcing accommodation, but it was widely acknowledged that that would have been a much greater issue for them if doing the programme in Dublin. The students were asked about the experience of making the decision to return to education as a mature student. Some voiced that they had been unsure what the programme was going to involve. Others felt that although they had years of experience in children's nursing and were really just aiming to have the registration that reflected their experience, they learnt much more than they had anticipated. They also spoke at length about the need to maintain a work life

balance in relation to existing family commitments and found that the programme mostly gave the support and flexibility that they needed.

When asked about the theoretical component of the programme the replies were largely positive. Understandably the students found some topics and presentations more engaging than others. They found the clinical days delivered by Saolta specialist professionals very useful. On the days that they were required to travel to Dublin they were anxious that the content be of a nature that was relevant to all students and that needed to be delivered in person as opposed to feeling that it could have been given online. The students particularly enjoyed and valued the simulation sessions.

Regarding their experience of the delivery of the clinical component of the hybrid programme the students found the transition from staff nurse to student challenging at the start but beneficial once they adjusted. They reported that placements in Saolta provided as rich learning opportunities as those in CHI. The role of the Hybrid Coordinator was identified as vital to the smooth functioning of the programme.

The students spoke particularly highly about their specialist placements. They found that particularly their CAMHS and community placements were revealing and overall requested more and longer specialist placements.

Staff on all sites were found to be very helpful and supportive. On some occasions there were issues with their preceptors and the process seemed to work best where there was a 'team' approach with the student having a 'team' consisting of an identified preceptor plus two associate preceptors. The students found the NCAD's to be confusing and requiring a lot of paperwork –they also found that they caused confusion with preceptors. There was preference for the assessments in the sites where there was a more skills based/structured document. In addition, the Time Management System (TCD) and the assignment element of the overall academic assessments were considered challenging. The sites where a Clinical

Nurse Education Facilitator was available was found to be very helpful and largely remedied any issues with documentation.

The students were asked, in relation to their clinical placements, if they felt that they had been adequately prepared for registration. They responded very positively particularly in relation to their appreciation of areas such as child and family centred care and the need to provide families with appropriate education. They greatly valued the enhanced observation and clinical skills and knowledge they had gained and expressed a much-increased awareness around child protection issues. They also felt that they had gained a much-improved understanding of the wider services available to children and their families. They did express some concern regarding being deskilled in some areas when returning to their staff nurse role.

Overall the feedback was very positive from the students. They felt that the programme respected students' strengths and weaknesses and should fundamentally be continued as it is. The role of the coordinator was felt to be pivotal to the smooth running and success of the programme.

Chapter Four Product

Focus on the outcomes of the programme.

Introduction

The Hybrid Higher Diploma in Children's Nursing prepares students to acquire the knowledge, professional values and discipline-specific competencies to fulfil the role of the RCN– that is, to deliver safe, high-quality, compassionate, ethical, legal and accountable practice during childhood and in diverse health care settings. Students are expected to articulate and begin to analyse the seminal research and evidence that underpins practice as well as showing an understanding of the areas of practice that require further deliberation and research. By the end of the programme students are expected to be able to demonstrate knowledge, clinical skills and professional behaviours that are underpinned by the Scope of Nursing and Midwifery Practice Framework (NMBI 2015) and the Code of Professional Conduct and Ethics for Registered Nurse and Registered Midwives (NMBI 2014); and to practise as a competent RCN's to assess, plan, prioritise, deliver and evaluate nursing care based on a comprehensive and systematic assessment of health and nursing needs in consultation with the child/young person receiving such care, their parent/ guardian and the multidisciplinary team;

Summary of the summative assessments on the pilot PRCN

The seven students on the pilot Hybrid Higher Diploma in Children's Nursing programme passed all their academic and clinical assessments. The students' results were ratified at a Court of Examiners in the SNM, TCD on Oct 4th 2023. Following publication of their results all students were deemed eligible to enter the register of RCN's maintained by NMBI. All seven students remain in the employ of Saolta.

Fitness for Practice

The post programme evaluations of year one of the pilot had very positive findings with all the students reporting on their experience of the hybrid programme as largely positive. The students all indicated they would recommend the programme to their colleagues. Not having to move to Dublin for a year to do the programme was an important factor in them pursuing the programme.

'Although there was a lot of travelling and different placements it was still much easier to do with a family than moving to Dublin for a year. It gave me the opportunity to do my children's nursing which I'm very grateful for'.

'That I did not have to live in Dublin for the year to get the degree in Children's Nursing'.

'The possibility to do most of the placements in my nearest facilities, but also it was great to visit the other sides in Crumlin, Galway'.

Other important factors in the programme outlined by the students included:

'The accessibility of the online lectures from anywhere, as the life is not as simple as we planned'.

'The simulations lab in St. James's was greatly useful, and thanks to the once weekly trips, they broke the days spending in front of the screen'

'The different lectures from the ANPs and CNMs as they gave me better inside of the roles and the touch of the real life in the stories

'Amazing support from the Lecturers'.

When asked about the content of the programme and how this will help their future practice as children's nurses, students provided the below feedback. A better understanding of family centred care was mentioned by nearly all the students.

'Better liaising with other hospital and mdt, family centered care , better approach to eating disorders etc'.

It has made me think a lot more about evidence based practice and family and child centred care. I'm keen to continue reading and attending study days.

Better FCC and understanding how your interactions with parents can greatly affect the care of the child and their response to treatment

I was able to support my patient with anorexia with the techniques that I was shown in CAMHS, which proved to work well and I pass them to the staff in Paeds ward. I initiated the

change of the pathway for Acute Asthma (PRAM assessment etc) and Croup in my ED. I encourage new staff (Nurses and Doctors) to download the Clinibee app.

There are numerous factors that I have already applied in my practice, family centred care in the ED, the importance of communication and discharge information, awareness of childhood conditions, burns, respiratory.

Better family centred care. Better understanding of child development and how to care

Family centred care has been my take away. Coming from an emergency nursing background always concerned about life or limb threats, but there are many concerns that families go through that may not be life threatening but really affect their daily living. There is life after ED, health education, health promotion, reassurance for families to see care and love from health service providers.

The students also included some comments on how the programme could be improved. More time in the simulation suite e.g. more simulations on Asthma and Croup was included as some areas that they felt could be expanded. More time on their CAMHS placement was mentioned by all the students and one student outlined more time in Crumlin also. The TMS (Time Management System) posed some challenges also.

Effectiveness

The first students of this pilot programme overwhelmingly praised the course for opening the door to a qualification that was unattainable previously, based solely on location. The hybrid delivery, although there was some travel required, facilitated flexibility overall. The students experienced rich learning experiences throughout Saolta placements. Providers of the placements also benefited from the students on placement with them, which in turn has led to longer placements in some areas. It is fair to say that the hybrid Higher Diploma in Children's Nursing programme is an effective way of educating RCN's as there are now seven new RCN's that returned back into the workforce within Saolta.

Sustainability

The evidence available from year one of the pilot hybrid Higher Diploma in Children's Nursing suggests it an effective means of providing an accessible pathway to the RCN register for nurses in the Saolta University Group programme. If the programme can be moved beyond pilot phase it will continue to enhance and increase the number of Registered Children's Nurses within Ireland. Examining recently released RCN registration data from NMBI (2023) out of the five divisions, Childrens Nursing has the lowest number of registered nurses. This programme added 8.2% of post registered RCN graduates to the workforce in 2023.

The Hybrid Higher Diploma in Children's Nursing programme continues to generate considerable interest both within all branches of nursing and other hospital groups. Cork University Hospital (CUH) has expressed interest in establishing a similar programme. The evidence from the evaluation of this model of hybrid post-registration education suggests it is a sustainable model that can be replicated.

The second pilot year is currently underway with a further seven RGN students. Applications are oversubscribed for available places once again in the 2023-2024 intake, so a panel was created and currently has 5 future students. To address this short fall of places it is proposed to expand the intake to 10-15 students annually, recruiting across all branches of nursing in addition including UHL as a placement site.

To realise the vision and sustainability of the future of the Hybrid Higher Diploma in Children's Nursing programme, funding is required. Currently the places on this programme are the unfilled commissioned places belonging to Children's Health Ireland. Funding is required for commissioned student places within Saolta. To continue to successfully run the course sufficient support staff is required. Currently the program Clinical Coordinator role, a WTE post, requires funding as a permanent position. An assessment of the impact of the

potential expansion of the programme on the workload of the program coordinator role may also be required.

The Hybrid Higher Diploma in children's nursing programme aligns to the vision set out by Saolta's Strategy 2019-2023, with the emphasis on improving patient care by supporting training and education programmes. This is evident from this first pilot year as all of the seven students who are now RCN's are back in employment in the Children's services in Saolta.

Conclusion

CIPP is one of the most commonly used models to evaluate programmes and the evidence provided in this evaluation suggests this pilot hybrid programme was a positive initiative. The contributions from the students, stakeholders, preceptors and academic staff to this evaluation were invaluable and largely very positive with some minor improvements required. The CIPP evaluation model was used in this evaluation with the purpose of providing systematic information and evidence to support future decision-making in relation to this hybrid model of post-registration children's nursing education.

Recommendations

The following recommendation are informed by the findings of this report and will enable the sustainability and expansion of this hybrid approach to children's nursing education on a regional level:

- Permanent funding of additional commissioned university places (suggested number 10-15 places annually).
- Permanent funding of PRCN (Post-Registration Children's Nursing) places - WTEs posts to support the programme in Saolta.
- Review the number of commissioned places available on a national level.
- Establish partnerships with other hospital groups and hospitals to widen the scope and availability of practice placements.
- Provide permanent funding for the Clinical Coordinator post.

- Expand the accessibility and equity of access of the Hybrid Higher Diploma in Children's Nursing programme to nurses on RNID and RPN register.

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Appendix One Terms of Reference and Membership of the Working group to develop, plan and oversee a Pilot Hybrid Higher Diploma in Children's Nursing:

- Plan the development of the hybrid programme with key stake holders.
- Identify key milestones and objectives to be met and actioned on for the pilot hybrid programme to start in Sept 2022.
- Develop the role of the project officer for the management of the programme in the Saolta.
- Monitor the hybrid programme in the academic year 2022/23
- Evaluate the hybrid programme with key stakeholders in 2022/23.

Working Group Membership

- Siobhán Horkan (Director of Paediatric Nursing, Saolta)
- Elizabeth Fitzpatrick (Student Allocations Officer, CHI-Tallaght)
- Suzanne Cullen (Assistant Director Nursing-Workforce at CHI)
- Dr. Carol Hilliard (Nurse Practice Development Coordinator-CHI at Crumlin) *Replaced by Warren O'Brien (May 2023)*
- Siobhán O Connor (Nurse Practice Development Coordinator-CHI at Tallaght)
- Caroline O Connor (Nurse Practice Development Coordinator-CHI at Temple Street). *Replaced by Siobhán Gilboy in February 2023.*
- Ann O Connell (Clinical Coordinator, Higher Diploma in Children's Nursing, CHI-Tallaght). *Replaced by Sinéad Ryan in August 2022.*
- Maryanne Murphy (Head of Children's Nursing and Higher Diploma in Children's Nursing Programme Coordinator (21-22), SNM TCD).
- *Thelma Begley (Course Coordinator, Higher Diploma in Children's Nursing, SNM TCD). June 2023-onwards,*
- Carmel Hoey (NMPDU, HSE, WEST and Midwest),
- Martina Vaughan (Nursing and Midwifery Planning and Development Unit, WEST and Midwest)
- Colette Goonan (Clinical Coordinator, Higher Diploma in Children's Nursing Saolta) *(Replaced by Karen Grennan October 2023)*

Appendix Two – Programme Approval from NMBI



Bord Altranais agus
Cnáimhseachais na hÉireann
Nursing and Midwifery
Board of Ireland

Dr Mary Hughes
Associate Professor/Director of Post Graduate Teaching and Learning
School of Nursing and Midwifery Trinity
College Dublin 24 D'Olier St.
Dublin 2

via email

28 September 2022

Re: Hybrid Children's Nursing programme (H.Dip.) – Addendum Document re Material Change to Curriculum Document

Dear Dr Hughes,

Thank you for your letter dated Thursday 23 June 2022, in relation to a request for a minor programme amendment. The NMBI following review by the Education Training and Standards Committee, at their meeting on Thursday 8 September 2022 approved the amendment.

Wishing you every success with the programme.

Yours sincerely,

Carolyn Donohoe

Director of Education, Policy and Standards

Appendix Three - Professional Staff (School of Nursing and Midwifery)

Role	Name current holder
Head of the School of Nursing and Midwifery	Prof Fintan Sheerin
Director of Teaching and Learning (Postgraduate)	Dr Brian Keogh
Head of Children's Nursing Discipline	Ms Maryanne Murphy
Higher Diploma in Children's Nursing Course Co-ordinator	Ms Maryanne Murphy (21-23) Ms.Thelma Begley (23-present)
School Administrator	Mr Frank O'Rourke
Allocations Officer	Mr Padraig Dunne
Administrative Officer	Ms Ailish Whyte
Administrative Officer	Ms Emma Duffy
Senior Executive Officer	Ms Jane Ashe
Higher Diploma in Children's Nursing Executive Officer	Ms Anna Jankowska
Library representatives	Ms Jessica Eustace-Cook
Representatives from Nursing and Midwifery Management from Saolta University Health Care Group hospital(s).	
Clinical Co-ordinator Saolta university Healthcare	Colette Goonan RGN RCN BNS MSc (22-23) Ms.Karen Grennan (23-)
Director of Paediatric Nursing, Women & Children's Network, Saolta University Health Care Group	Ms. Siobhán Horkan
Student representatives, including student convenor	Student representatives per year per site

Appendix Four Assessment Strategy

Programme Learning Outcomes	Module	Assessment Strategies
CLO.01, CLO.08, CLO.07, CLO.04,	NU7921	A 3,000 word written assignment on a contemporary issue in children's nursing outlined in assessment guidelines. (100%)
CLO.01, CLO.02, CLO.03, CLO.04, CLO.05, CLO.06	NU7922	Component 1: An objective structured clinical examination (OSCE) (Pass/Fail)
		Component 2: A 3-hour unseen integrated written examination. Answer 3 out of 5 questions. (100%)
CLO.04, CLO.08, CLO.06, CLO.07,	NU7923	: A 3,000 word essay style case study analysis using a recognised framework. (100%)
CLO.01, CLO.02, CLO.03, CLO.04, CLO.05, CLO.06, CLO.07, CLO.08	NU7924	A Competency continuous assessment based on core competencies using the National Clinical Assessment Documentation for Higher Diploma in Children's Nursing Students (NCAD) and incorporating: • Clinical learning outcomes. • Reflective practice vignette • Observation in practice. • Medication management booklet
CLO.01, CLO.02, CLO.03, CLO.04, CLO.05, CLO.06, CLO.07, CLO.08	NU7925	A Competency continuous assessment based on core competencies using the National Clinical Assessment Documentation for Higher Diploma in Children's Nursing Students (NCAD) and incorporating: • Clinical learning outcomes. • Reflective practice • Observation in practice. • Medication management booklet

CLO.01,CLO.02, CLO.03, CLO.04, CLO.05, CLO.06, CLO.07, CLO.08	NU7926	A Competency continuous assessment based on core competencies using the National Clinical Assessment Documentation for Higher Diploma in Children's Nursing Students (NCAD) and incorporating: • Clinical learning outcomes. • Reflective practice • Observation in practice. • Medication management booklet
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Appendix Five Pre programme survey

Pre-Programme Survey Hybrid Higher Diploma In Children's Nursing 2022-23

Dear Students, prior to commencing on your programme, the Higher Diploma team would be most grateful to receive some preliminary feedback from you. Thank you in advance for taking time to complete the survey. Your individual responses are anonymous and will be collated automatically into a single report for the Higher Diploma Team.

The survey should take 3 minutes or less to complete.

Q1 How did you find out about this programme?

- ☐ From your workplace
- ☐ Trinity College website
- ☐ Trinity College Open Day
- ☐ Other Please specify _____

Q2 This is a hybrid programme with CHI / TCD / SAOLTA. How much has this influenced your decision to apply?

- ☐ A lot
- ☐ A bit
- ☐ Not at all
- ☐

Q3 What were your reasons for pursuing a hybrid Higher Diploma in Nursing programme?

Q4 Would you have applied for this programme if it wasn't hybrid? Please elaborate:

Q5 What supports do you expect from the Programme team and the College?

Q6 What do you hope to achieve from this programme?

Q7 On successful completion of the programme, where do you hope to work?

Q8 Further Comments / Suggestions are welcome

Appendix Six Academic Module Evaluation

Higher Diploma Module Evaluation

Dear Students, the Postgraduate team is keen to get your feedback to help us to improve this Block. Your individual responses are anonymous and confidential. All the student responses will be compiled into a report for review by the relevant postgraduate team. The team will keep you informed of any plans for change based on your feedback. Thank you in advance for taking time to complete the survey. The survey should take 3 minutes or less to complete.

Q1 How satisfied are you with this theory block

- ☐ Extremely satisfied
- ☐ Moderately satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Moderately dissatisfied
- ☐ Extremely dissatisfied

Q2 How satisfied are you with the structure of this theory block?

- ☐ Extremely satisfied
 - ☐ Moderately satisfied
 - ☐ Neither satisfied nor dissatisfied
 - ☐ Moderately dissatisfied
 - ☐ Extremely dissatisfied
-

Q3 How satisfied are you with the timing of this theory block?

- ☐ Extremely satisfied
 - ☐ Moderately satisfied
 - ☐ Neither satisfied nor dissatisfied
 - ☐ Moderately dissatisfied
 - ☐ Extremely dissatisfied
-

Q4 How satisfied are you with the facilities available to you on this theory block?

- ☐ Extremely satisfied
 - ☐ Moderately satisfied
 - ☐ Neither satisfied nor dissatisfied
 - ☐ Moderately dissatisfied
 - ☐ Extremely dissatisfied
-

Q5 Can you let us know what you have found particularly interesting / useful / effective about this theory block? In relation to, for example, delivery method (face to face class, pre-recorded class, Online Live class) teaching, content, assessment, administrative support, organisation etc.

Q6 Could you tell us how you think this theory block could be improved in the future?

Appendix Seven Clinical Evaluation

Higher Diploma in Children's Nursing Clinical Placement Survey Placement Master 2022-2023

Q1 Which clinical partner hospital did you do your placement in?:

- ☐ Children's Health Ireland (CHI) at Tallaght University Hospital
 - ☐ Children's Health Ireland (CHI) at Crumlin Children's Hospital
 - ☐ Children's Health Ireland (CHI) at Temple Street University Hospital
 - ☐ Saolta University Health Care Group at Letterkenny University Hospital (LUH)
 - ☐ Saolta University Health Care Group at Mayo University Hospital (MUH)
 - ☐ Saolta University Health Care Group at Portiuncula University Hospital (PUH)
 - ☐ Saolta University Health Care Group at Sligo University Hospital (SUH)
 - ☐ Saolta University Health Care Group at University Hospital Galway (UHG)
 - ☐ Other _____
-

Q2 The clinical areas on my placement with my linked hospital / service provided a good learning environment

- ☐ Fully Agree
 - ☐ Agree to Some Extent
 - ☐ Neither Agree Nor Disagree
 - ☐ Disagree to Some Extent
 - ☐ Fully Disagree
-

Q3

If you feel that the clinical areas on your placement with your linked hospital / service did not provide a good learning environment, did you bring this to the attention of your Programme Coordinator or the Clinical Nurse Manager (CNM)?

- ☐ Yes
 - ☐ No
 - ☐ Not Applicable
-

Q4 My Preceptor(s) provided a level of supervision that was appropriate to my needs during my placement with my linked hospital / service

- ☐ Fully Agree
- ☐ Agree to Some Extent
- ☐ Neither Agree nor Disagree
- ☐ Disagree to Some Extent
- ☐ Fully Disagree

Q5 I was given opportunities to practice skills and perform key tasks under the supervision of my preceptor during my placement with my linked hospital / service.

- ☐ Fully Agree
 - ☐ Agree to Some Extent
 - ☐ Neither Agree nor Disagree
 - ☐ Disagree to Some Extent
 - ☐ Fully Disagree
-

Q6 I achieved my learning outcomes during my placement with my linked hospital / service.

- ☐ Fully Agree
 - ☐ Agree to Some Extent
 - ☐ Neither Agree nor Disagree
 - ☐ Disagree to Some Extent
 - ☐ Fully Disagree
-

Q7 I was supported by my Preceptor(s) during my placement with my linked hospital / service.

- ☐ Fully Agree
- ☐ Agree to Some Extent
- ☐ Neither Agree nor Disagree
- ☐ Disagree to Some Extent
- ☐ Fully Disagree

Q8 I was supported by other nurses on the ward / area during my placement with my linked hospital / service.

- ☐ Agree Fully
 - ☐ Agree to Some Extent
 - ☐ Neither Agree nor Disagree
 - ☐ Disagree to Some Extent
 - ☐ Fully Disagree
-

Q9 I was able to work alongside my Preceptor(s)/ Co-Preceptor 50% for the time I was on placement with my linked hospital / service

- ☐ Fully Agree
 - ☐ Agree to Some Extent
 - ☐ Neither Agree nor Disagree
 - ☐ Disagree to Some Extent
 - ☐ Fully Disagree
-

Q10 Please comment on any areas or aspects of the clinical learning environment during your placement with your linked hospital / service that could be enhanced.

PLEASE **DO NOT** NAME INDIVIDUAL STAFF.

PLEASE **DO** NAME SPECIFIC WARDS OR AREAS WITHIN A PLACEMENT YOU ARE COMMENTING ON e.g. Maple Ward / Child ED Sligo, Child ED CHI@Crumlin.

Q11 Please comment on aspects of good practice you experienced during your placement with your linked hospital / service. PLEASE **DO NOT** NAME INDIVIDUAL STAFF.

PLEASE **DO** NAME SPECIFIC WARDS OR AREAS WITHIN A PLACEMENT YOU ARE COMMENTING ON e.g. Maple Ward / Child ED Sligo, Child ED CHI@Crumlin.

Appendix Eight- Preceptors/NPD/ CNM/ Nurse Facilitator evaluation Survey Questions

Q1

Preceptor/Clinical Nurse Manager /Clinical Nurse Facilitator Survey: Hybrid PG Children's Nursing Programme

Your vital contribution to the Hybrid Higher Diploma in Children's Nursing is much appreciated. As this is the first year of the programme we are carrying out an evaluation and are seeking feedback from all stakeholders. We would be very grateful if you could take the time to respond to this survey. As the people you have facilitated and supported the students on their clinical placements we believe that the insight you can give us is invaluable.

The survey should take 5 minutes or less to complete.

Q1 Please specify the Ward/Unit/Department you work in:

Q2 Are you:

☐

Clinical Nurse Manager

☐

Clinical Nurse Education Facilitator

☐

Staff Nurse acting as Preceptor/Associate Preceptor

☐

Other Please specify

Q3 Did you feel well enough prepared for your role with the Post Graduate Children's Nursing Students?

- ☐ Not at all
 - ☐ Somewhat
 - ☐ Moderately
 - ☐ Very well
-

Q4 Please provide any further comments you have about your preparedness for your role with the Post Graduate Children's Nursing Students?

Q5 What support did you receive in your role with the Post Graduate Children's Nursing Students?

Q6 What do you think were the benefits of having Post Graduate Children's Nursing Students on the ward /unit?

Q7 What do you think were the challenges of having Post Graduate Children's Nursing Students on the ward /unit?

Q8 Do you think the Post Graduate Children's Nursing Students adequately prepared and orientated to their clinical placement?

- ☐ Not at all
 - ☐ Somewhat
 - ☐ Moderately
 - ☐ Very well
-

Q9 Any further comments about the Post Graduate Children's Nursing Students' preparedness and orientation to their clinical placement?

Q10 Were the learning outcomes appropriate for Post Graduate Children's Nursing Students?

- ☐ Not at all
 - ☐ Somewhat
 - ☐ Moderately
 - ☐ Very well
-

Q11 Please provide any further comments you have about the appropriateness of the learning outcomes for Post Graduate Children's Nursing Students?

Q12 What stands out for you from your experience precepting the Post Graduate Children's Nursing students?

Q13 Would you be willing to take part in a focus group to give feedback and share your experiences of the Post Graduate Children's Nursing students and your insights and suggestions about how the programme can be improved? If so, please give your email address.

Appendix Nine Stakeholders survey

Stakeholder Survey: Pilot Hybrid Post Registration Programme in Children's Nursing

Q1

Stakeholder Survey: Hybrid PG Children's Nursing Programme

Your vital contribution to the Hybrid Post Registration Children's Nursing Programme is much appreciated. As this is the first year of the programme we are carrying out an evaluation and are seeking feedback from all stakeholders. We would be very grateful if you could take the time to respond to this survey. As a member of the steering committee and a stakeholder in this project we value your contribution.

The survey should take 10 minutes or less to complete.

Q1 Please specify your role

Q2 In your opinion, how important is the pilot hybrid Post Registration Children's Nursing Programme?

- ☐ Not at all important
 - ☐ Somewhat important
 - ☐ Moderately Important
 - ☐ Very Important
-

Q3 How satisfied were you with the level of consultation during the design and implementation of the pilot hybrid Post Registration Programme in Children's Nursing?

- ☐ Not at all satisfied
 - ☐ Somewhat satisfied
 - ☐ Moderately satisfied
 - ☐ Very well satisfied
-

Q4 Please provide any further comments you might have about the level of consultation during the design and implementation of the pilot hybrid Post Registration Programme in Children's Nursing

Q5 How satisfied were you with the membership of the Steering Committee of the pilot hybrid Post Registration Programme in Children's Nursing?

- ☐ Not at all satisfied
 - ☐ Somewhat satisfied
 - ☐ Moderately satisfied
 - ☐ Very well satisfied
-

Q6 Please provide any further comments you might have about the membership of the Steering Committee of the pilot hybrid Post Registration Programme in Children's Nursing?

Q7 How satisfied were you with the frequency and quality of communication from the Steering Committee?

- ☐ Not at all satisfied
- ☐ Somewhat satisfied
- ☐ Moderately satisfied
- ☐ Very well satisfied

Q8 Please provide any further comments you have about the pilot hybrid Post Registration Children's Nursing Programme.

Appendix Ten Focus group with academic staff

Focus Group held with

Academic Staff of Trinity College Dublin

Involved in teaching on the

Hybrid Higher Diploma in Children's Nursing

May 2023

Facilitated by: Sylvia Huntley Moore

Notes taken by: Colette Goonan

Discussion Topics

- Overall experience of the Hybrid Programme
- Face to face
- Online
- Discussion about delivery of Theoretical Component -Face to Face versus Online
- Value of Face to Face /need to increase face to face in the future?
- When to have face to face days;
- Discussion about overall structure of theory delivery
- What has worked well?
- What could be improved/done better?
- Challenging areas
- Challenges of varying levels of children's nursing experience
- Future Plans

Appendix Eleven- Focus group with students on the programme

PGCNS Focus Group

July 2023

Facilitator & Note Taker

Question 1

Tell me about your overall experience of the programme

Question 2

What was your experience of the way in which the theoretical component of the programme was delivered?)

Question 3

What was your experience of the way in which the clinical component of the programme was delivered?

Question 4

In relation to your clinical placements do you feel that they have prepared you adequately for registration?

Question 5

Many of you are mature students who made a conscious decision to return to education after some time – tell us about that experience

Question 6

How did the programme compare to previous nurse training/education that you have undertaken?

Question 7

You are the first group to have undertaken this programme – if you had the opportunity to influence it for next year what would you like to see

Appendix Twelve— Student End of Post programme survey

Post Registration Children's Nursing SAOLTA End of Programme Survey 2022-23

Dear Students now that you are coming towards the end of your programme, the postgraduate team is keen to receive your feedback to help us to improve the programme. Your individual responses are anonymous and confidential. All the student responses will be compiled into a report for review by the postgraduate team. While your responses to this survey won't benefit you directly, you will be helping us to improve the programme for next year's students.

Thank you in advance for taking time to complete the survey.

The survey should take 5-7 minutes or less to complete.

Q1 How did you find the hybrid learning in the programme?

- ☐ Very easy to manage
- ☐ Fairly easy to manage
- ☐ Fairly difficult to manage
- ☐ Very difficult to manage

Q2 Overall, how did you find the workload (preparing for classes, attending classes, reading, assignments, studying)?

- ☐ Very easy to manage
- ☐ Fairly easy to manage
- ☐ Fairly difficult to manage
- ☐ Very difficult to manage

Q3 If you found the workload difficult to manage please give reasons:

Q4 Overall, how well did the programme meet your expectations?

- ☐ Very well
 - ☐ Fairly well
 - ☐ Not very well
 - ☐ Not at all
-

Q5 How likely are you to recommend the programme to friends and colleagues?

- ☐ Very likely
 - ☐ Fairly likely
 - ☐ Unlikely
 - ☐ Very unlikely
-

Q6 Overall, what has worked well for you on the programme?

Q7 Overall, what do you think we could improve about the programme?

Q8 Can you please give an example of how you'll apply what you've learned in the programme to your professional practice

Q9 How will doing this programme affect your future career?
