Research teaching in learning disability nursing: Exploring the views of student and registered learning disability nurses

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Introduction
Priorities for the development of the learning disability (LD) nursing profession within the UK are set out in Strengthening the Commitment to teach research (Hek and Shaw, 2006). However, the available literature is inconclusive in terms of how best to access research, critically evaluate it, and apply it to practice settings. (Scottish Government, 2012) where two recommendations relate to the use of evidence in practice and the development of research in this field of nursing practice. Fundamental to the achievement of these recommendations is a workforce that is able to use evidence to underpin their practice and able to contribute to the production of new knowledge. However, currently little information exists regarding how research is taught to LD nurses. This paper seeks to address this deficit by reporting the findings of free text question within a wider survey concerning the use of research in LD nursing.

Background
The Code of Professional Conduct (Nursing and Midwifery Council [NMC], 2015) requires all nurses to base their practice on the best available evidence hence practitioners need to have an awareness of how to

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The value of research teaching has been questioned by some nursing students (McCurry and Martins, 2010) and some find learning about research difficult leading them to view this subject less positively than other subjects within the curriculum (Thomson et al., 2014). Bonsaksen (2014) suggests that the perceived/actual divide positively than other subjects within the curriculum (Thomson et al., 2014). Healy and Jenkins (2009), speaking more broadly of undergraduate research teaching, argue that it should be mainstreamed and integrated into all of the curriculum rather than being a separate subject: this supports students to engage with the subject and values the contribution of all staff (rather than just those who are research focused). Embedding research within all of the nursing curriculum rather than just in specific ‘research classes’ and the use of enquiry based learning to enable students to access, appraise, and apply research to clinical settings is also recommended by Christie et al. (2012).

Relevance to practice is important for nursing students and Newton et al. (2010) argue that there needs to be support for research within practice settings if students are to be able to develop an understanding and appreciation of evidence based practice. This requires that both educational curricula and the infrastructure within practice settings are supportive of the development of research and its application to practice (Loke et al., 2014), and that a culture is developed in which using research is the norm (Balakas and Sparks, 2010).

There can be difficulties with teaching research to mixed ability groups (Balakas and Sparks, 2010) but there is consensus that the use of experiential methods is beneficial (Irvine et al., 2008). McCurry and Martins (2010) found that students preferred the use of interactive group activities that facilitated the practical application of research skills. Elsewhere the use of peer tutors (more senior students and recently qualified nurses) to support student learning regarding research has been found to be helpful (Thomson et al., 2014). Most importantly the use of peer tutors was found to make research more accessible to the students since it demonstrated that it was not just something understood and undertaken by academic staff.

Nursing educators have been urged to change their focus from simply providing information about research to providing opportunities for students to gain experience of the research process (Loke et al., 2014) and it has been argued that students should be moved from being consumers of knowledge to being knowledge producers (Healy and Jenkins, 2009). Birks (2011) suggests that academics should seize the opportunities available to engage students in active, engaging and meaningful ways in research but recognise that this requires specific skills.

Whilst this literature highlights issues that may be relevant to the teaching of research to LD nurses no literature was found that specifically addressed this particular context. This paper therefore aims to address this gap in knowledge.

Methods

Data Collection

A questionnaire was developed for the purpose of this study and this was piloted with 5 registered and 5 student nurses not involved in the main study: no substantive changes were made. The questionnaire comprised predominantly fixed response questions but the focus of this paper is on the free text data collected in response to the statement: ‘What do you think about how research is taught to learning disability nurses? What is good and what needs to be improved?’

Participants were given a copy of the questionnaire at conference registration and an announcement was also provided from the stage on day one. Completed questionnaires were collected via a box available at the registration desk and members of the research team were available throughout the two days of the conference.

Sample

A convenience sample of nurses attending the Positive Choices Conference in March 2014 was invited to participate in this survey. This conference is held annually primarily for student nurses from the United Kingdom (UK) and Ireland undertaking courses in LD nursing: some registered nurses also attend. In total 498 people registered to attend the conference and of these 310 (62%) completed and returned the questionnaire. Two hundred and twelve (68% of participants) comprising student nurses (n = 158), registered nurses working in practice settings (n = 25) and registered nurses working in educational establishments (n = 24) completed the free text question that forms the basis of this paper. Five participants did not did not specify their background. Participants were each assigned a participant number and this is used for identification purposes in the discussion of findings.

Ethics

The questionnaire included an initial section that detailed the rationale for the study, how the data would be used, and mechanisms to ensure anonymity of responses. It was stated that return of the questionnaire would be taken as implying consent to participate in the study. The study was reviewed by the Faculty of Life Sciences and Education Ethics Committee at the University South Wales and received a favourable opinion.

Data Analysis

All responses were transcribed verbatim and reviewed by all members of the research team to identify recurring themes. Based on this initial review consensus was achieved and a coding frame was developed detailing key themes and associated descriptors. This was used by two members of the team (RN and MP) to independently code all of the data. Coding was then compared and a high level of agreement was noted with minor differences being resolved through discussion. To assist with retrieval of coding the raw data was then entered into NVivo and the agreed codes applied. Table 1 below details the 8 major themes and the number of excerpts coded to each theme.

Discussion of Findings

Teaching Approach: The Good and the Bad

Respondents highlighted the impact of teaching style, and the skills and knowledge of lecturers, on student engagement in research.

Table 1

<table>
<thead>
<tr>
<th>Key themes</th>
<th>Number of excerpts coded</th>
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<tbody>
<tr>
<td>Teaching approach: the good and the bad</td>
<td>52</td>
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<tr>
<td>Finding the right level</td>
<td>15</td>
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<tr>
<td>Right from the start</td>
<td>20</td>
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<tr>
<td>We need more time</td>
<td>35</td>
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<tr>
<td>Generic versus specialist</td>
<td>42</td>
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<td>Getting research into practice</td>
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<tr>
<td>What should we focus on?</td>
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Contrasting experiences were evident in relation to the depth, quantity, and style of research teaching experienced by participants:

- ‘Not detailed and thorough enough. Not much opportunity to practice research. Need more emphasis on types of research, research methods, especially methods more inclusive for people with learning disability e.g. participatory appraisal – back by more empirical data/research methods’ (R299 student nurse)

- ‘We have had a very good and very thorough research module so that is very good’ (R22 student nurse)

- ‘The research topic is taught to be a scary subject. There needs to be more awareness and teaching of research’ (R223 student nurse)

- ‘I think it is good that students are encouraged to always link theory with practice. I think it is always good that lecturers direct students to good, rich research that will help ensure that practice is effective’ (R214 student nurse)

- ‘It’s variable depending upon skills of tutors’ (R119 registered nurse)

- Some specific attributes required by teachers were identified as being: enthusiasm, supportive, knowledgeable, interested and experienced in research:
  - ‘Enthusiastic tutors are a must to encourage good participation’ (R125 student nurse)

- ‘Depends on the lecturer and their interest in research at pre-registration. This can significantly influence how RNLD’s view research moving forward in their career’ (R131 registered nurse)

- Some participants commented on how they found research concepts difficult to understand and suggested improvements needed:
  - ‘Broken down, simplified’ (R19 student nurse)

- ‘Research isn’t always taught in practical way for example in relation to your placement experiences’ (R104 not specified)

- ‘Too didactic – needs to be demystified – more involvement with service users/practitioners’ (R134 registered nurse — education)

- For others it was important that research should be integrated and fundamental to all modules as advocated by Healy and Jenkins (2009)
  - ‘Research should be part and parcel of every single session — integral to not separate from’ (R30 registered nurse — education)

- ‘I feel research should be taught throughout a student’s 3 year training and not just an isolated topic’ (R242 student nurse)

- Group sizes were also identified as being an issue with smaller groups being advocated as providing a more positive experience:
  - ‘Should be taught in smaller groups where people have more opportunity to ask questions and interact with what can be a challenging topic’ (129 student nurse)

- ‘Being a small group we are fortunate to have access to tutors who are really supportive and go the extra mile.’ (R197 student nurse)

However, the opportunity to make teaching more interesting, exciting and engaging ways may not always be something that lecturers feel is possible due to organisational constraints.

- ‘As I teach this I would like more control (at my university I feel I am told how to do it!). I’d like to have more freedom to make it more exciting’ (R269 registered nurse — education)

Finding the Right Level

Student nurses may feel that research is a difficult topic to study (Thomson et al., 2014) and this was reflected in some participant responses. Whilst some nursing students commence their studies with previous research experience this is not the case for all, and teaching mixed ability groups can be challenging (Balakas and Sparks, 2010). In such a situation assumptions can be made and these can impact negatively on the learning process:

- ‘I feel that very little time is spent on research and that the time on it is very rushed. It also felt that we should have had some idea on research and a majority did not’ (R228 student nurse)

- ‘I feel it was very rushed and it is presumed that the person has knowledge of research’ (R229 student nurse)

- ‘I feel that the research is taught well, however, it is difficult to understand as a first year’ (R106 student nurse)

- It would thus appear that students may struggle to understand research if it is not presented at an appropriate level for them.

Right From the Start

Several participants indicated that research teaching should commence at the beginning of their course:

- ‘Research should be taught right from the start of the course’ (R2 student nurse)

- ‘There needs to be more lessons about research in learning disability nurses and it should also be taught from the start of the programme’ (R47 student nurse)

- ‘As a first year student not really used a lot of research as yet. Maybe this needs to be changed so using research and evidence is a habit from the beginning’ (R209 student nurse)

Participants identified this early exposure as being important both in helping them to develop their competence with research and also in assisting them to make better use of evidence to support their practice and academic studies. There were, however, contrasting experiences in terms of the stage at which research was introduced in students’ courses:

- ‘Only in first year but thus far research has been encouraged as part of most modules studied to enhance what is taught in lectures and develop’ (R283 student nurse)

- ‘As a first year student not really used a lot of research as yet. Maybe this needs to be changed so using research and evidence is a habit from the beginning’ (R209 student nurse)

- ‘As a third year LD student nurse it is not until the third year that we have had any lectures in research. I think earlier introduction to research would be beneficial’ (R55 student nurse)
‘As a pre-reg student the University was very proactive in supporting students to access databases, however there was not a lot of research teaching until the top up programme. I personally found it hard to grasp three years into my study. If this was introduced earlier it would probably have been a lot easier to carry out research’ (R230 registered nurse)

Within the nursing literature discussion regarding research teaching tends to focus on what is taught, and how it is taught, rather than when it is taught. When considering wider issues of undergraduate research teaching, however, Healy and Jenkins (2009) cite several case studies of early introduction into the curriculum as being good practice and for participants in current study there seemed to be some consensus that the early introduction of research into the curriculum would be helpful.

However, simply introducing research early in the course is insufficient: how it is taught also needs to be considered if it is not to be dismissed as irrelevant:

‘Despite its early introduction to nursing curriculum students do not see it as interesting until year 3 when they need to understand and apply’ (R304 registered nurse — education)

We Need More Time

As well as considering when in the course research is introduced participants also commented on the time that is devoted to it within the curriculum:

‘More time needs to be spent on the topic so a greater understanding is had and the fear factor taken away’ (R7 registered nurse)

‘It’s only touched on at university and most students come away confused and disinterested as there is not enough attention paid to it’ (R9 registered nurse)

‘For myself I feel that insufficient time is devoted to research skills in the taught component of the course. For someone like myself who already has a degree it might be sufficient but some of my colleagues for whom it is a new experience have struggled’ (R70 student nurse)

Some positive approaches were noted but once again time was a limiting factor:

‘… the lecturers are very good giving us webpages, journals and books for us to read. The only thing I would say to improve is TIME! Not enough time’ (R71 student nurse)

Time was also identified as a constraint on the use of research in practice:

‘There is not enough time invested into it. I love research but when at work and the only nurse on duty there is no time’ (R66 registered nurse)

This is of concern given the importance of support within practice settings in promoting understanding of evidence based practice amongst students (Newton et al., 2010).

Generic Versus Specialist

Participants indicated that research is often taught via generic modules undertaken by all student nurses regardless of their field of practice. Within such modules teaching may be delivered by lecturers without experience within the learning disability field and this was felt to impact on the learning experience of students:

‘I feel I was taught well about this subject however tutor has little or no understanding of challenges in LD’ (R87 not specified)

‘Often generic with lack of application. Sometimes lacks imagination due to poor understanding of the discipline and in particular ethical issues specific to people with learning disabilities’ (R24 registered nurse)

‘Often lectures for all branches of nursing do not mention any learning disability research when all other branches are mentioned. Lecturers from other branches often tell us they do not know about learning disability nursing or practice.’ (R298 student nurse)

Elsewhere it has been noted that students may not perceive research as integral to their practice (Hek and Shaw, 2006) and the lack of a LD specific focus within research teaching can create challenges for students in making links between the theory and practice of research which could potentially contribute to this perceived lack of relevance. A number of participants therefore highlighted how they felt it was important to be taught by lecturers who had the appropriate skills and knowledge to support application to practice:

‘Half of the academic time allocated to teaching my cohort was delivered by a mental health nurse/lecturer. I believe that an LD lecturer would have been of a more positive benefit for us’ (R72 student nurse)

Reported experiences did, however, vary and in some instances the LD lecturers were able to provide a counter balance by emphasising the relevance of research to LD nursing within specialist lectures:

‘Our course focuses on research – our LD lecturers from day 1 are ‘evidence based practice for learning disability nursing’ – other nursing fields have ‘Intro to X nursing’ lectures.’ (R115 student nurse)

Examples were also given of LD lecturers being involved in the delivery of these generic research modules:

‘In our university research is taught as a generic module — however in this module there is an LD lecturer who focuses discussion and reviews of research on LD’ (R250 registered nurse — education)

There’s Not Enough

Research undertaken by Parahoo et al. (2000) suggested that one reason research appeared to be used less in LD nursing was the limited research undertaken in this field. Whilst this comment was made in the absence of any reviews of LD nursing research two subsequent reviews (Northway et al., 2006; Griffiths et al., 2009) both highlighted that whilst there was evidence of growth in LD nursing research there was a need for investment to improve its quality and quantity. Some participants reflected the perception that research in this field remains limited:

‘More research (needs to be) done around learning disability nursing in practice and issues faced in practice’ (R32 – student nurse)

‘Limited evidence based practice, affect the way learning disability nurses deliver good quality care practices. Also not enough research on the learning disability nursing practices impairs the role of learning disability nurses’ clinical decisions. On the other hand good quality evidence based research is needed to educate and improve the practice’ (R286 student nurse)
This lack of research was perceived as impacting both on understanding the needs of people with a learning disability and also on student academic development:

‘Nice that there is LD specific research however there needs to be more research as I am preparing for my dissertation and struggled/struggling to get LD specific research. So I had to incorporate research from other fields in order to make up the 10–12 articles needed’ (R57 student nurse)

‘Hard to access material that is appropriate’ (R178 student nurse)

However, it needs to be remembered that wider nursing research and wider LD research may also be relevant to improving the quality of life for people with learning disabilities. LD nurses need, therefore, to have the skills and confidence to access such research.

For one participant it was important that research should be developed by those who are working directly with people with learning disabilities:

‘I believe that LD research could be driven more than it is currently being. It could be improved by more LD research being carried out by LD professionals who work directly with people adults/children with LD’ (R296 registered nurse)

Getting Research Into Practice

All student nurses in the UK are required to spend 50% of their time in university based study and 50% in practice settings and it is essential that learning about research is continued within practice settings (Loke et al., 2014). A number of participants recognised the importance of this:

‘We need to continually develop to link theory to practice to be able to give the best care to our clients’ (R244 student nurse)

‘I find it hard to understand in university. I learn it better when it is being used in practice’ (R293 student nurse)

Participant responses, however, suggest that there are challenges that limit the extent to which this occurs:

‘Research often taught in a theoretical classroom setting and should be taught in a more practical way within the clinical area’ (R53 registered nurse — education)

‘I don’t feel that there was enough emphasis on using the most up to date research and practicing in accordance with it’ (R74 student nurse)

‘…more support for students, focus on evidence based practice during practice placements for student LD nurses’ (R288 student nurse)

However, participants also suggested a more general lack of support for research within practice settings at both individual and organisational levels:

‘In training taught about its role in informing practice. Post-graduating not really done much in practice, very much ‘on your own’, no support. Thus lack of energy and enthusiasm to keep up with research despite requirement by NMC to be up to date in practice …’ (R182 registered nurse)

‘When discussing research in practice staff didn’t seem to value it being carried out in their practice area.’ (R174 student nurse)

‘It is very hit and miss. Some nurses struggle with the implementation of research in their practice and recognising that they are interdependent’ (R190 registered nurse)

The dissemination of research was identified as being more than just the responsibility of individual practitioners, rather there is a wider service/organisational duty to facilitate this. Also, it was suggested that there needs to be more encouragement and opportunity for practitioners to be involved in research.

‘There needs to be more opportunities to add and get involved in research in practice. Research findings need to be filtered through organisations in interesting and innovative ways’ (R219 student nurse)

Many of these responses suggest that the support for research in practice settings (Newton et al., 2010) may be lacking and that work is required to develop a culture in which using research is viewed as the norm (Balakas and Sparks, 2010).

What Should We Focus On?

A number of participants proposed strategies that could be used to enhance the teaching of research within LD nursing for example providing opportunities for students to become active participants in the research process rather than just passive consumers of research lectures:

‘It is taught as something we need to understand and how to critique it. However, there is little suggestion that we should somehow be involved in doing it’ (R196 student nurse)

‘I don’t think students are given enough time and opportunity to develop these skills and there is rarely opportunity to carry out research’ (R61 registered nurse — education)

‘We are taught how to use, critique and apply but a lack of focus on implementing our own research’ (R33 — registered nurse)

‘Being involved in current “real” research project has helped me’ (R264 student nurse)

These responses suggest that the teaching approaches advocated by Loke et al. (2014) and Healy and Jenkins (2009) might be beneficial.

The importance of role modelling was also recognised: students need to be able to see lecturing staff as being research active:

‘Students need to see academic staff engaged with research/working in partnership with students and mentors’ (R31 registered nurse — education)

Conclusions

This study used a convenience sample hence its composition may not be reflective of the wider LD nursing profession. Whilst the overall response rate for the survey (62%) is positive it is not possible to assess how those who chose not to participate were similar to, or differed from, those who did and the data presented here relates to only one question in the survey. Finally the participants all come from one nursing speciality within one country. All of these factors limit the extent to which it is possible to generalise from the findings. However, the aim of the research question was to develop an understanding of an area where no published data existed rather than to generalise. In addition the findings both reflect and add to the wider literature regarding the teaching of research to nurses and hence may have relevance outside
of both the speciality and the country. This being the case there are some conclusions that can be drawn.

The findings of this study suggest that within LD nursing currently there is variation in the timing and amount of research teaching, the teaching approaches used, and hence the quality of student experience. Of concern is that the links between research and practice often appear to be weak and some participants reported a lack of support for the use of research within practice settings. Whilst this may be a reflection of practice constraints it needs to be addressed both to improve the quality of student learning opportunities and, most importantly, to improve the quality of support provided for people with learning disabilities. However it was encouraging to note an interest in, and enthusiasm for, research amongst participants which provides a good base from which to develop.

Some strategies emerged from the study findings as being potentially useful in taking forward this agenda: the introduction of research early in nursing courses, the integration of research into all modules, the use of teaching methods that actively engage students, and (where possible) providing opportunities for students to become involved in research studies. All of these strategies can be taken forward by staff working within universities although it is recognised that in some instances staff may require support to ensure that they are able to deliver a ‘research active curriculum’ (Healy and Jenkins, 2009:3). However, in conjunction with this, there is clearly a need for university based staff to engage with, and support, not only practitioners working in clinical settings but also with the organisations for whom they work in order to work towards achieving a culture in which using research is the norm (Balakas and Sparks, 2010).

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