



ERA+ Clinical Leadership in Nursing Education



Clinical Leadership in Nursing Education

Inspirational good practice

**“Collaborative thinking and teamwork
with other healthcare professionals”**

This example shows practical leadership skills that are applied in educational settings. These practices were identified and collected during the Erasmus+ KA220-HED project “Clinical Leadership in Nursing Education,” co-funded by the Erasmus+ programme of the European Union. The content is based on existing practices, with good examples submitted by project partners and stakeholders, recognized as validated examples from professional practice.

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1. Contact Information

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2. Short description of the teaching method

'*Collaborative thinking and teamwork with other healthcare professionals*' is an elective teaching class with more than 200 students from the medical, physical therapy, nursing, oral health, pharmaceutical, dietetics and social work programs. They participate in 8 live evening sessions with

- group discussions on roles, stereotypes, expectations and responsibilities;
- small group discussions on cases, ethical and actual themes in health care;
- testimonies of patients, relatives and interprofessional teams;
- discussions focusing on the development of a care plan.

Interprofessional teams from the field are involved by bringing in and supervising their own cases during the evening sessions.

Our principles:

Learning by doing – promoting equality – knowledge sharing for better healthcare

3. Why should colleagues use this method to strengthen clinical leadership?

Students are invited and challenged

- to articulate their own professional expertise, role and responsibilities;
- to share and combine their knowledge, expertise and professional experience with students from another profession;
- based on this combined expertise, to make decisions in respectful and professional communication and collaboration with other professions, to develop a care plan from a person-centered- perspective or to address ethical and legal issues. This person-centered perspective is reinforced by testimonials of patients and relatives that enable students to become aware of the potential impact of (in)effective interprofessional collaboration on quality of care;
- to become aware of team dynamics that promote or threat joint clinical reasoning and to treat their peer students as equals.

4. Competencies related to clinical leadership

Primary competences – **secondary competences** addressed by this good practice.

Domain – ethics

- ✓ **Ethical competence** (**ethical principles and values; professional integrity and accountability**)

Domain – professional nursing

- ✓ Clinical competence (**clinical competence in specific clinical area; nursing process; health promotion**)
- ✓ Quality management competence (**quality of care; patient safety**)
- ✓ Evidence based practice competence (**evidence based practice**)
- ✓ Decision making competence (**critical thinking; decision making; problem solving**)
- ✓ Self-development competence (**continuous professional development**)

Domain – innovation and change

- ✓ **Visioning competence** (**future-oriented thinking; understanding the big picture; finding innovative approaches; questioning**)
- ✓ **Change management competence** (**initiating change; advocating change; implementing change**)

Domain – influencing and advocacy

- ✓ **Influencing competence** (**influencing others; motivating others**)
- ✓ **Patient advocacy competence** (**patient advocacy**)

Domain – team leadership

- ✓ **Team leadership competence** (**team formation, team coordination, positive working atmosphere**)
- ✓ Guidance competence (**supervision, mentoring**)

Domain – communication and collaboration

- ✓ **Communication competence** (**effective communication, dialogical competence**)
- ✓ **Collaboration competence** (**interprofessional collaboration; professional collaboration**)

Specific behaviors practiced: giving feedback, speaking up, handling conflict

5. Timeline

Students participate in 8 evening sessions on campus (February until May)

The first session focusses on challenging stereotypes, comparing roles, and exploring perspectives of good care.

Subsequent sessions involve (1) discussions on real-life cases – from pediatric to geriatric care, end of life care, high tech health care, primary care, hospital care... - guided by work field partners
(2) discussions on current topics, including ethical and legal subjects in interprofessional practice
(3) creating and presenting/pitching a care plan using the ICF model to a panel of professionals.

The design of this elective course is in line with the Meta model of Interprofessional Development (Reinders & Pesut, 2022) starting from demystifying stereotypes, comparing roles and responsibilities, learning about contributions of other healthcare professionals to developing a shared vision and planning.

6. Student guidance

- Coaching of the group discussions on cases by an interprofessional team of lecturers and by interprofessional teams from the working field.
- Supervision of each small interprofessional group of students by a fixed supervisor to build trust, ensure continuity of support and monitor progress in collaboration.
- Guidance and intervision/supervision of the coaching lecturers.
- Group discussions on interprofessional collaboration led by the lecturer using visual aids, theoretical frameworks, and creative methods to identify learning effects.
- Peer-feedback and self-reflection (reflection assignment).
- Permanent supervisor.

7. Required materials / Conditions

- Platform with learning materials (Toledo): cases and instructions for students, learning materials on interprofessional collaboration, etc.
- Interprofessional teams of 7-8 students, and for each team sufficient space in a classroom that is suited for interactive methods.
- Proportionate representation of students from various professions.
- Lecture hall (testimonials, pitches, ...) and suitable classrooms.
- Enough coaching lecturers, an interprofessional team of coaching lecturers.
- Readiness of sufficient interprofessional teams and patient/relatives to support the case discussions and to organize the testimonials.
- Cases from the working field representing all professionals involved in the elective course.

- Detailed guidelines for each case discussion or session to support the coaches/lecturers and to instruct the students: these guidelines are developed by all members of the interprofessional team of coaching lecturers.
- Practical and policy support for those who are responsible for participating programs.
- Organisational, financial, and administrative support.
- Flexibility in course schedule, willingness to organise necessary, surrounding conditions.

8. Evaluation / Follow-up

- Peer assessment
- Individual reflective writing assignment assessed by means of a rubric.

9. Results / effects on students

Multiyear measurements probing for qualitative and quantitative feedback from students, using focus groups and questionnaires distributed to all participating students (n = 146; response rate 97%), indicate increased knowledge sharing, improved quality of care, a greater belief in their professional future together (breaking silos) and patient-centeredness. Valuing each other's contributions, treating peers as equals, fostering trust, being challenged to explicit their own professional role responsibilities and knowledge, and being a true spokesman for their own profession, contribute to these outcomes.

'Very often during the lessons, I thought, wow, I hadn't looked at it that way before, and my understanding changed.' (nursing student)

'I would like to add that I have genuinely learned a great deal about interdisciplinary collaboration and other disciplines in general. I am convinced that this will make me a better doctor (currently a trainee) in the future.' (medical student)

10. Tips for colleagues

- Be a real coach, and leave your role as instructor and teacher behind, unless necessary.
- Give space to team autonomy.
- Allow to make 'mistakes' but facilitate learning from 'mistakes.'
- Focus on relationships and not just on the task.
- Focus on the process, and not just on the result.
- Inspire students to
 - focus on relationships and not just on the task;
 - to focus on the process and not just on the result;
 - to fully and actively participate in the sessions;
 - to not be preoccupied in the first place with exams, marks, and grades.
- Use theoretical frameworks where useful and meaningful, for assessment and validation.

- Be willing to become a real team player in the interprofessional team of lecturers.

11. Practical example / anecdote (optional)

A very simple example of reflective coaching during one of the sessions:

After a few group sessions, an interprofessional group of seven students concluded: 'We work well together! We always agree.' To which the lecturer replied: 'Oh dear, does that mean differing opinions are a threat to good teamwork?'

12. Visual material (optional)



