

Results of cross-faculty 'capstone' assessments involving nursing and performing arts students

Sharon Edwards, Nic Fryer, Michelle Boot et al

Abstract

This article describes how 'capstone' assessments were created to provide two different student groups, nursing and performing arts students, with a lived experience of learning together about their own fields of practice. Capstone assessments combine 'live' human simulation with self-reflection and peer review. A capstone assessment is the integration of a body of relatively fragmented knowledge and learning to form a unified whole and can be used as a transitional assessment and a bridging experience to connect knowledge between modules or courses. The capstone assessments involved two faculties and four modules, three nursing and one performing arts (see Table 1). Case studies were designed to represent real-life situations that students were likely to encounter during their careers, either playing a patient as an actor or performing a caring role as a nurse. Assessments for the capstone simulation were formative, and involved the students engaging in self-reflection and peer review. Videos were available to enhance the self-reflection and peer-review process. Evaluation was undertaken through verbal feedback during debrief, written feedback, video footage and nursing student and acting student peer review. The experience of capstone assessments for two diverse student groups provided valuable learning from their own and from a different group outside their subject area.

Author details

Sharon Lorraine Edwards, senior lecturer, Buckinghamshire New University, Uxbridge, England; Nic Fryer, senior lecturer, Buckinghamshire New University, Wycombe, England; Michelle Boot, senior lecturer, Buckinghamshire New University, Uxbridge, England; Michael Farquharson, senior lecturer, Buckinghamshire New University, Uxbridge, England; Samantha McCormack, technical manager, simulation, psychology and performance, Buckinghamshire New University, Uxbridge, England; Kelly Sluman, technical demonstrator, Buckinghamshire New University, Uxbridge, England; Katherine Tigar, skills and simulation technician, Buckinghamshire New University, Uxbridge, England

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Introduction

The Nursing and Midwifery Council (NMC) Code (2015) and the Professional Standards Authority (2015) both focus on developing professional practice. This article

describes how 'capstone' assessments can prepare two different student groups for independent reflective professional practice. The capstone transformative approach is a way of thinking more creatively about how the learning for two different groups of students can be approached and achieved with one activity. This method can: integrate materials across modules and faculties; create opportunities for students to connect knowledge and to collaborate with, and learn from, their peers and other professionals; and develop supervision and leadership skills that reflect recent NMC (2018a, 2018b) standards. The formative capstone assessments described here involves teaching in live simulations, and assessment through self-reflection and peer review.

Some published papers describe the use of actors in simulation (Oliveira et al 2015) and capstone assessments in nursing (Rebeschi and Aronson 2009, Baird et al 2016), and identify various course design formats. Wilkinson et al (2008) and Fallowfield et al (2002) show that simulation with actors can have a lasting effect. The capstone assessments described in this article brought nursing and performing arts students together and enabled them to share their learning from course modules in practice situations. They involved performing arts students working to a brief supplied by the nursing academic team and nursing students responding in role to the scenarios played out by the performing arts students. This collaboration allowed each group of students to offer feedback to the other. The nurses later commented on the actors' success in delivering their role, while the actors commented on the nurses' success in relating to them appropriately and effectively.

Design

The design included the capstone assessments, self-reflection and peer review, student and staff preparation and moulage, or casualty make-up for training purposes that allows actors to appear older or to have wounds (Edwards and McCormack 2018), for authenticity.

Transformative assessment

A capstone assessment is the integration of a body of relatively fragmented knowledge and learning to form a unified whole (Conway and Ahmed 2012). Capstone assessments are not new to academia (Hirsch and Parihar 2014). Jackson (2010), for example, has suggested using them as a transitional assessment and a bridging experience connecting knowledge between modules or courses, while Saseen et al (2017) prefer to use them as a learning experience for students to engage in active and student-centred learning. Hirsch and Parihar (2014), Lee et al (2014) and Saseen et al (2017) show how capstone assessments can enhance students' confidence and knowledge, and can be a reliable assessment tool. Drawing on these ideas, the aim of these capstone assessments was to mix students from different curricula and modules, and assess them together. They also supported them to integrate and connect learning materials and topic areas relevant to their profession, while preparing them for their later roles as actors and qualified nurses.

Ensuring they worked together was logical because curricular content for both groups involves the development of core skills, such as critical thinking, problem-solving, transferable skills and reflection. Capstone assessments can help nurses develop specific skills, such as person-centred care, empathy, leadership and supervision, set out in the NMC (2018a) standards of proficiency. Performing arts

students undertake a strategic professional practice module in which they are asked how performing arts can have a socially beneficial function. Working to a live brief is important for actors playing the part of patients to enable them to support the nursing students caring for them at the bedside. Such work is therefore strongly relevant to nursing and performing arts students' learning.

Self-reflection and peer review

Capstone assessments can align simulation with peer review (Weaver et al 2016). The terms 'self-assessment' and 'peer assessment' are often applied to students' involvement in marking their own and others' assignments (Chaves et al 2006, Welsh 2006, Dearnley and Meddings 2007). Cox and Harper (2000) highlight that peer assessment can inform evaluations of colleagues' practical work or performances, and students can mark each other's work according to criteria set by themselves or lecturers. Peer review does not involve students passing or failing their colleagues, but providing feedback to support their self-reflection. Thus, peer review can be a mediator for learning that takes place between individuals. Peers review each other's performance as nurses or actors to inform self-reflection, which can enable students to 'own' their learning, and receive advice they can draw on in their current and future practice. Students can discuss, then reflect on, peer reviews before deciding on what actions are necessary for improvement.

The terms 'self-reflection' and 'peer review' were used for the capstone assessments because observation and feedback were required from students' peers to inform self-reflection. This rigorous process showed a deeper cognitive approach to learning. It also contributed to meeting the NMC (2018b) standards, which require that students are assessed through a range of methods and that self-reflection is evidenced. In this case, nursing students peer reviewed each other and the performing arts students' acting talents as patients. At the same time, performing arts students peer reviewed each other and the nursing students, for example by giving feedback on how the nurses cared for them. Videos were provided to support self-reflection, personal and professional development, and peer review.

Student and staff preparation

Before the first capstone assessment took place, module leaders and lecturers from both faculties met to introduce themselves to the principles of capstone assessment: self-reflection and peer review. They then set the performance criteria to guide self-reflection and peer review for both groups, and outlined the criteria in line with the different contexts of the nursing and performing arts modules. Teaching materials, such as patient assessments, charts, X-rays and notes, were developed to ensure realistic simulations. The nursing and performing arts students discussed the case studies in their seminar groups to prepare them for assessment. The nurses were given opportunities to practise simulation using self-reflection and peer review in their skills sessions to help reduce potential stress.

The student groups were offered peer-review materials, such as articles, and an information sheet on the capstone-assessment process, all of which were placed on the university virtual learning environment (VLE). The capstone assessment process provides students with opportunities to learn and practise with limited consequences, and gain immediate feedback and evaluation of their role. This enriched the students' learning experiences and helped them appreciate some of the

wider issues involved in delivering care and in acting. The case scenarios, a plan of the simulations, peer-review criteria and learning and teaching materials, such as drug and fluid balance charts, were also placed on the VLE to enable students to practise the scenarios in which they would take part.

Moulage

The second- and third-year assessments involved moulage and the use of intravenous cannulas and catheters to add authenticity to the simulations, engage the students' senses, encourage their full participation and learn about their profession from real life experiences. Props were also used to simulate a real ward, for example patients' personal items, water jugs, reading material and medication.

'Live' simulation

Assessment simulations take place in mock clinical areas at the university. The performing arts students play the role of patients and realistically portray their clinical conditions to develop their improvisation and characterisation skills; the nursing students care for the 'patients' in real time. Second-year students undertake a capstone assessment based on three bedside case scenarios they have explored in seminar sessions. The assessment involves two modules: one on intermediate skills for nursing practice and the other on professional practice for third-year performing arts students. In the third year, the nursing students undertake a capstone assessment in which they must manage patients with multiple conditions, medication regimens and drug therapy issues in a simulated four-bed bay. This assessment involves three modules: one on nursing skills, namely leadership, collaboration and interprofessional practice, one on adult nursing skills underpinning complex care, and the third, as with the second-year nursing students, on professional practice for third year performing arts students.

Each 'live' simulation is relevant to the students' level of practice and lasts about 20-30 minutes. Student learning is overseen by lecturers who can prompt and intervene to ensure accuracy. This continues through to debrief, which is an important learning element to ensure educational development and emotional support are delivered in a safe environment. As a result, students begin to gain better insight into their practice and become active participants in their learning.

Student evaluation

Student feedback and evaluation are gathered through the completion of structured evaluation forms, formal discussions, debrief sessions and video. Videos of the live simulation are shown to both groups to support their self-reflection, peer review and debrief. This process of reflection can then be assimilated by both groups of students to improve future simulation activities. The emerging themes from the students' feedback were about 'being in the moment', improvising, challenging, assessing, sensing and experiencing (Table 2).

Sensing and experiencing

The students 'sense' the environment around them and have to deal with the reality of the experience. In drama education this is known as 'building belief' (Wagner and Smith 1979), in which participants' senses are enhanced to a state of embodied engagement. Effective nursing care does not rely on engagement and treatment, but involves all the senses. This links to the philosophical notion of phenomenology: 'By...

remaking contact with the body and with the world we shall also rediscover our self, since perceiving as we do with our body, the body is a natural self and, as it were, the subject of perception' (Merleau-Ponty 2002). Students' embodied perspectives are enhanced through engagement with other students' perspectives. The development of intuition and observation between the two groups is part of the nurses' and actors' experience of the assessment and interaction. Intuition, and comparative nursing and acting methodologies, allow the students to explore their sense of, and rationale for, their actions through experiencing 'live' simulations.

In this way, students sense the 'realness' of the experience together, but learn different things from it. Learning is enhanced through a different student group that offers alternative perspectives to deepen students' understanding of their profession. They move from focusing on their own experience to thinking about how patients or clients experience what they do.

Improvising and being in the moment

Both groups must improvise as they adapt 'in the moment' to the influences and responses of the nurse or actor. It is valuable for both groups to engage with sensitivity where pre-rehearsed responses are inadequate. In both disciplines, practitioners 'reflect-in-action'; they are sensitive to the needs of others in the moment and creatively respond to them. Both parties improvise from their pre-existing vocabularies.

By improvising in the safe space of a simulation suite rather than a real ward, they can experiment, and create and embrace risk, rather than follow predictable paths. The performing arts students draw on a limited description of the parts they play to develop rounded characters who make sense to them, and who can adapt in the moment to the influence and response of the nurses. As O'Neill and Lambert (1982) say: 'Through active identification with imagined roles and situations in drama [participants] can learn to explore issues, events and relationships.'

By embodying rather than simply describing behaviours, the students' notions become learned and part of their subconscious. A part of what becomes embodied is the capacity to adapt and improvise in situations in which nurses and actors must respond to each other. Through the relationships they form, the nurses develop their own sense of identity, how they treat and interact with patients.

Students from both courses have reported feeling more confident and aware of their abilities after taking part in the scenarios. This teaching innovation helps students to develop their creative potential and ability to respond to others, while connecting their skills to theory (Hope et al 2011).

Challenging and assessing

The self-reflection and peer reviews between the two groups of students enabled them to judge each other's performance, while bringing them into the community of assessment practice (Table 3). Self-reflection and peer review are powerful forms of assessment, and by assessing each other the students must be engaged and involved. Through the pedagogical process both groups of students are challenged:

The nurses challenge the actors by asking:

- Did they make the situation immediate?
- Were the questions they asked appropriate to the characters they played?
- Was their portrayal of the condition accurate?
- Were their interactions convincing?

The actors challenge the nurses by asking:

- Were their reactions and responses reassuring and helpful?
- Did they adapt to the patient's needs?
- Did they display competence, confidence and a good bedside manner?

The teacher's task is to elicit the creative responses of both groups and to 'sense the collective meaning that was emerging from the drama' (Havell 1987). By moving from self-awareness to an awareness of what the other group is looking for, the students' experience shifts from role playing to critical engagement in specific concerns for different groups. The capstone assessments enabled students to experience practice in a way that connects practical subjects to the academic part of their course, thereby bringing both to life.

Both groups engage with the complexities of real-life interactions and are part of the assessment experience while learning from it. The students challenge, and are challenged by, each other, which helps them to understand each other's needs – a process that is crucial to becoming an effective nurse or an effective actor. Such challenges are vital to professional development because they prompt participants to respond to requests and demonstrate their ability to extend their skills.

Discussion

According to Nickles (2011), simulation addresses skills deficits in pre-registration nursing students. The capstone assessments described in this article provided students with the opportunity to think critically, make decisions and develop reflection-in-action skills. Combining the use of performing arts students, capstone, self-reflection and peer review in simulation demonstrates how students can improve key skills.

The assessment methods were self-reflection and peer review, which allowed the two groups to judge each other's performance. These methods also brought the students into the community of assessment practice and changed them from passive recipients of information to active participants in acquiring it. Self-reflection and peer review are empowering forms of assessment that require engagement and involvement, and students are often best placed to provide feedback on each other's technical and interpersonal performance.

The new NMC (2018b) standards for nurse competence highlight the importance of student empowerment, and empowering and supporting students enable them to demonstrate professional behaviours (NMC 2015). Self-reflection and peer review also help students prepare for their post-graduation work environments and duties, which has positive implications for the development of future mentors and assessors. The evaluation processes involved the students living their experiences together, being in the moment, assessing their peers and learning different things from the experience.

The students' evaluations demonstrate how these processes affected their professional development (Table 2). For example, they enhanced the students' understanding of their profession and provided opportunities for them to experiment in the complexity of professional work settings in a safe simulated environment. The student evaluations also show how embodied simulations can prepare healthcare practitioners and actors for their later roles. Informal discussions and comments in the student evaluations indicate how capstone assessments have helped prepare them for future professional work environments, made the issue of employability come alive for them and enhanced their chances of employment.

Capstone assessments engage students in working across faculties in a range of contexts, from nursing skills development to a complex set of interpersonal skills. They have improved two different groups of students' confidence, reflection abilities, and psychomotor and technical skills. Involvement in the capstone assessments has led to the professional and personal growth of all team members. Working with other departmental and faculty members, and receiving feedback, have also made them more aware of how work might be seen by colleagues from other areas. In this way, peer review and learning between academics mirror the students' learning (Table 4). This collaborative work between performing arts and nursing students shows that simulation is not only related to the advancement of healthcare professionals, but can be applied to other professional groups.

The process in which students learn together and assess each other while undertaking different programmes is innovative, creative, sustainable, transferable and engaging. It shows that, in institutions, success can be achieved through collaboration between departments and gives staff a strong sense of purpose.

Reflection

The students who took part in the capstone assessments said they enjoyed the experience and want to be involved in more of them. As a result, capstone assessments have been embedded in the second- and third-year course modules.

There are logistical challenges to setting up capstone assessments. For example, they rely on the availability of facilities and actors, and receptivity to simulation and role play. They also involve travelling between campuses to ensure the integration of different student groups. The logistics of this can be complicated, but planning should ensure that the two groups of students have a clear itinerary and expectations. The creation and maintenance of case scenarios also require planning and resource allocation, and analysis of evaluation data can add to lecturers' regular workload. Meanwhile, feedback from students can help determine future revisions.

There is growing partnership and collaboration across university departments at Buckinghamshire New University to develop drama strategies that enable participants to 'stop the action' and reflect on it (Boal 1979, Need 2014). There are plans to provide better make up and props for moulage, and to develop a peer-review app to use across professions.

Conclusion

'Live' or 'embodied' simulation provides students with a deeper understanding of what is required of them in their areas of practice, and their engagement enhances their

competence. Developing simulations collaboratively generates respect, equality, sustainability and a shared vision, while ensuring simulations are shared between students and teachers rather than being teacher-led creates a progressive learning environment in which students are in charge of their learning. The embodied simulations that are involved in capstone assessments provide students with opportunities to think critically and make decisions, and can improve their understanding of how academic subjects link with patient care. The simulations also help students to develop interpersonal, interaction, communication and 'reflection-in action' skills.

By working with interdisciplinary academic teams, health and social care students have become a more informed, compassionate and caring workforce with a vision for quality healthcare delivery. They have also helped to produce actors with the ability to work across professional platforms. At the core of this process are students learning from each other with role play as a crucial element. This innovation can sustain itself across nursing practice and applied theatre modules, and have a positive and constructive effect on everyone involved.

References

Baird K, Gamble J, Sidebotham M (2016) Assessment of the quality and applicability of an e-portfolio capstone assessment item within a bachelor of midwifery program. *Nurse Education in Practice*. 20, 11-16.

Boal A (1979) *Theatre of the Oppressed*. Pluto, London.

Chaves J, Baker C, Chaves J et al (2006) Self, peer, and tutor assessment of MSN competencies using the PBL-evaluator. *Journal of Nursing Education*. 45, 1, 25-31.

Conway J, Ahmed G (2012) A pharmacotherapy capstone course to advance pharmacy students' clinical documentation skills. *American Journal of Pharmaceutical Education*. 76, 7, 134.

Cox A, Harper H (2000) *Planning Teaching and Assessing Learning*. University of Greenwich, London.

Dearnley C, Meddings F (2007) Student self assessment and its impact on learning – a pilot study. *Nurse Education Today*. 27, 4, 333-340.

Edwards S, McCormack S (2018) Simulation using 'live' adult service users and moulage in a variety of settings. *Nursing Management*. 24, 9, 33-40.

Fallowfield L, Jenkins V, Farewell V et al (2002) Efficacy of a cancer research UK communications skills training model for oncologists: a randomised control trial. *Lancet*. 359, 9307, 650-656.

Havell C (1987) Rifts and reunions: a reconstruction of the development of drama in education. In Abbs P (Ed) *Living Powers: The Arts in Education*. Falmer, Philadelphia PA.

Hirsch A, Parihar H (2014) A capstone course with a comprehensive and integrated review of the pharmacy curriculum and student assessment as a preparation for advanced pharmacy practice experiences. *American Journal of Pharmaceutical Education*. 78, 10, 192.

Hope A, Garside J, Prescott S (2011) Rethinking theory and practice: pre-registration student nurses experiences of simulation teaching and learning in the acquisition of clinical skills in preparation for practice. *Nurse Education Today*. 31, 7, 711-715.

Jackson N (2010) From a curriculum that integrates work to a curriculum that integrates life: changing a university's perception of curriculum. *Higher Education Research and Development*. 29, 5, 491-505.

Lee J, Cooley J, Tanner N et al (2014) Development of a pharmacy capstone course from focus groups to advanced patient care. *American Journal of Pharmaceutical Education*, 78, 8, 56.

Merleau-Ponty M (2002) *Phenomenology of Perception* (Smith C Trans). Routledge, New York NY.

Need V (2014) Introducing Playback Theatre. trueheart.org.uk/wp-content/uploads/2013/05/INTRODUCING-PLAYBACK-THEATRE-March-2014.pdf (Last accessed: 27 July 2018.)

Nickles L (2011) The use of simulation to address the acute care skills deficit in pre-registration nursing students: a clinical skills perspective. *Nurse Education in Practice*. 11, 3, 199-205.

Nursing and Midwifery Council (2015) *The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives*. NMC, London.

Nursing and Midwifery Council (2018a) *Standards of Proficiency for Registered Nurses*. NMC, London.

Nursing and Midwifery Council (2018b) *Part 1: Standards Framework for Nursing and Midwifery Education*. NMC, London.

Oliveira S, do Prado M, Kempfer S et al (2015) Experiential learning in nursing consultation education via clinical simulation with actors: action research. *Nurse Education Today*. 35, 2, 50-54.

O'Neill C, Lambert A (1982) *Drama Structures*. Hutchinson, London.

Professional Standards Authority (2015) *Right-Touch Regulation*. Professional Standards Authority, London.

Rebeschi L, Aronson B (2009) Assessment of nursing students learning outcomes and employment choice after the implementation of a senior capstone course. *International Journal of Nurse Education Scholarship*. 6, 1, 21.

Saseen J, Linnebur S, Borgelt L et al (2017) A pharmacotherapy capstone course to target student learning and programmatic curricular assessment. *American Journal of Pharmaceutical Education*. 81, 3, 45.

Wagner C, Smith J (1979) Peer supervision: toward more effective training. *Counselor Education and Supervision*. 18, 4, 288-293.

Weaver K, Morales V, Nelson M et al (2016) The benefits of peer-review and a multi-semester capstone writing series on inquiry and analysis skills in an undergraduate thesis. *CBE Life Sciences Education*. 15, 51, 1-9.

Welsh M (2006) Engaging with peer assessment in post-registration nurse education. *Nurse Education in Practice*. 7, 2, 75.

Wilkinson S, Perry R, Blanchard K et al (2008) Effectiveness of a three-day communications skills course in changing nurses' communication skills with cancer/palliative patients: a randomised control trial. *Palliative Medicine*. 22, 4, 365-375.

Table 1 – Modules involved in the Capstone

Modules involved in Capstone	3rd year Performing Arts students	2nd year Nursing students	3rd year Nursing students
Nursing 2 nd year module		Intermediate skills for nursing practice	
Nursing 3 rd year module			Leadership, Collaboration and Inter-professional practice module Adult Nursing Skills Underpinning Complex Care module
Performing Arts 3 rd year module	Strategic Professional Practice module		

Table 2 – Nurse and actor feedback/evaluation of the capstone assessment

The Capstone transformative approach with self-reflection and peer review in 'live' simulation is a way of thinking more creatively in how the learning for two very different groups of students (nursing and performing arts) can be approached and achieved with one activity.

Theme	Nurse evaluations	Actor evaluations
Being in the moment	<p>"The live simulation helps me to understand myself better when assessing patient and communicating with them. This helps me to identify that it is important to be professional in my approach at all times"</p> <p>"I was very nervous and the patient could see it, and I think this can make them feel unsafe. I need to work on my nervousness"</p>	<p>"I enjoyed the experience of playing the part of a patient"</p> <p>"A great experience"</p> <p>"I enjoyed the nurses' enthusiasm"</p> <p>"It was really fun to be in this type of situation"</p> <p>"It was a good experience"</p>
Improvising	<p>"It helped to build my confidence. Since the patients are not familiar. It felt like, we were in the ward"</p> <p>"Able to use emotional intelligence to solve problems"</p>	<p>"Improvisation and working with minimal information to form a well rounded character"</p> <p>"How to adapt to certain situations in an improvisational manner to help students"</p> <p>"It was enjoyable to do some acting that was more improvised and not scripted"</p>
Challenging	<p>"Although I was apprehensive to start with I feel that the live simulation really helped to show us what we know and challenged us to try even if we weren't sure"</p>	<p>"I learned a lot, being a patient is not easy"</p> <p>"It was useful because I was able to delve into the world of being in a hospital and the things that come with being in pain"</p>
Assessing	<p>"Provided an opportunity to assess a real person – a good learning opportunity"</p>	<p>"Because this was the student nurses' assessment there was a lot of pressure to perform well and accurately"</p>
Senses	<p>"The live simulation gave me a very good insight into what us students will face one day once qualified"</p> <p>"Felt very realistic, helped me realise the responsibility involved as a nurse"</p>	
Experiencing	<p>"The use of live people was brilliant! This helped in interacting with a real person with reactions back"</p> <p>"Live simulation was very educational allowed for real life scenarios to be in place with real patients"</p>	<p>"I enjoyed having a character to act through each one and expand it"</p> <p>"It was a great experience, and it opened my eyes to other acting opportunities"</p>

Table 3 – Nurse/actor peer review results

The strength of the actor student/student nurse peer review is in the written feedback the students provided to each other.

Theme	Nurse/Actor peer review	Actor/Nurse peer review
Playing the role	"Actors playing the role of patients were very realistic" "The actor was polite but effectively expressed concerns in a way similar to a real patient" "Very good at giving impression of real life scenarios"	"Most nurses were calm and capable. Some could do with being more competent with their patients"
Getting involved	"Charlie was a realistic patient and played on the fact he was feeling hot and bothered much like real patients with a temperature" "The patient seemed quite distressed and anxious and would adapt accordingly e.g. short of breath"	"Some of the nurses got involved more than others e.g. looked at the blood results, temperature. When having to pretend I was going to poo myself, the nurses responded well"
Challenging	"The actress played the role well and kept questioning the student nurse's actions" "Able to challenge the nurse and express distress using verbal and non-verbal language" "I enjoyed it even though it was difficult"	"Some of the student nurses didn't know what medication did what and didn't move away when discussing uncertainties which put me (the actor) on edge"
Assessing	"The patient (actor) was able to inform us whether we were doing a good job" "I enjoyed carrying out the assessment and gaining feedback throughout"	"I felt very comfortable and relaxed to act because students did not feel like they were being tested"
Experiencing	"Frankie provided a good learning experience as to how a patient can deteriorate at any moment" "The actor started to experience shortness of breath, had to administer oxygen and deal it realistically"	"Don't talk about patients in front of them especially hearing about other patients" "Remember to fill in the correct paperwork". "Very well done"
Employability	"Very good acting skills, make it feel very realistic. This sort of stuff does happen a lot in practice"	"It was interesting to experience live simulation. I think I could reflect on my up and coming placement"
Overall the nurses and actors gave very good verbal feedback	"Really good at acting and gave us good verbal feedback" "Gave good feedback on care"	"Keep it up" "The student nurses were very professional" "The student nurses seem to know what they are talking about"

Table 4 – Teaching staff professional development and feedback on being involved in the Capstone assessment

Theme	Lecturer feedback	Comments
Creating reality	"Fantastic to collaborate with performing arts students, I feel already there is a strengthened relationship between nursing and performing arts from my conversations with students and the actors and I feel both benefitted hugely from taking part in a practical scenario to use the skills they have acquired and receive feedback".	The Capstone collaborative practice between faculties has not only built effective working partnerships that are sustainable but also between academic staff and the Skills and Simulation team to work together to ensure smooth transitions between each simulation and to create an environment as realistic and as authentic as possible.
Working collaboratively	"By working with humans, the nursing students are challenged. They have to engage with the complexities of real life interactions, and improvise. This has value for both groups of students – having to really engage with sensitivity, where pre-rehearsed responses are inadequate"	We recognised the benefits of working collaboratively with other departments and faculties in the university (pre and post-registration nursing, and performing arts).
Supporting each other	"I have taken the ideas on self and peer review into the post-graduate diploma (PGDip) stage 1 and introduced it to students."	Supporting each other while engaging students in a variety of 'live' simulation activities and additional assessment, which was a new innovation for some colleagues
Improving the education of student nurses and performing arts students.	"There are a variety of learning opportunities afforded in this task demonstrated by feedback following the simulation session from nurses and actors, which provides depth and the opportunity to evaluate the learning achieved and therein continue to develop the focus of the partnership".	The connection for students begins as the learning is discovered by students and provides the opportunity for them to uncover all the key elements necessary to address their own professional development.
Teachers/students as partners in learning	"The preparation was lengthy for the team but really paid off. As a lecturer facilitating this learning experience I found it was profoundly useful for the students and ensured lots of discussion, peer feedback and enthusiasm for the students developing clinical and leadership skills."	The 'live' simulations can provide a learning environment where teachers can become partners in the learning process, and this is making the student experience come alive. It ensured the students developed their leadership skills of prioritising care in a more complex environment than is usually achieved in a simulation activity and therefore more closely corresponded to real clinical work.
Improved institutional relationships	"It has brought together different professional groups with one clear and compelling aim/ reason to work together, to improve student learning through 'live' simulation pedagogy."	There is evidence that this teaching innovation work is leading to the development of improved institutional relationships through the inter Faculty/ Departmental collaboration within the university
Sharing work with others	"The knowledge and skills that each employee can pick up from this work can be taken back to their own departments to make improvements or enhancements."	Presenting this work at Faculty events has shared this work with others.