
Exploring British and Finnish pre-registration nursing students' experiences of learning emergency and acute care nursing through a collaborative online international classroom

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Abstract Background: This case study describes the development and evaluation of a collaborative online international learning (COIL) nursing collaboration between Finland and UK in 'Care of the Acutely Ill Patient'. Aim: The aim was to plan and deliver an online programme of learning experiences on a shared professional subject with mixed

international students, then evaluate this learning experience with a view to expanding or extending it in future as a core element of our nursing programmes. Method: A steering group led the design format of this short course, aligning it to each university's curriculum and professional goals. Then, a teaching team devised the learning materials and learning sessions. Finally, the steering group evaluated the course. In total there were 38 student participants (Finland n=21, UK n=17). Results: 80 per cent (n= 20) of students felt that their understanding of the subject had increased as a result of taking the course. In total 64 per cent (n=16) felt that the course had enabled them to gain skills to help their future career development. Perceptions of working in mixed international groups was diverse, with challenges of communication, time and perceptions of what constituted 'group work' between UK and Finnish students. Learning new nursing aspects from teachers and peers as well as sharing ideas from another country in a novel way was perceived as beneficial and overall 'uplifting'. Conclusion: This COIL has significant strengths but also some challenges. The outcomes of this case study point to its potential and value within nursing and other professional programmes.

KEYWORDS: COIL, nursing education, course design, virtual exchange

INTRODUCTION

This paper is a case study describing the planning, development, piloting and evaluation of a novel collaborative online international learning (COIL) course for professional pre-qualification nursing students from Finland and the UK.

Nursing is a ubiquitous practice-based profession, yet nurses rarely get the opportunity to interrogate their own or peers' practice either at home or internationally. Providing exposure to other cultures and nationalities through a shared professional lens can enable this and further develop professional practice, knowledge of healthcare systems, but more importantly an appreciation of differences and possibilities in the wider, global context.^{1,2} International exchange during nursing education is one means to do this and is often seen as a prime means to enable multicultural and global competencies and cultural appreciation.³⁻⁵

The recent COVID-19 pandemic restricted travelling but triggered a technological surge and innovation within education and also healthcare delivery. For higher education, this massive sector shift to the online environment led to accelerated

and renewed opportunities through the virtual world to meet educational and professional goals. Terminology around online education varies, even at times causing some consternation.⁶ Terms such as virtual exchange (VE) and COIL commonly appear with the inference of 'emergency' mode or 'replacement', when in reality they offer a different pedagogical approach which can supplement or be more inclusive than previously. Now such approaches are increasingly advocated⁷ to provide an enriching learning experience which additionally widens student engagement.

WHAT IS A COIL?

COIL is not new; rather, it has been in existence for decades,⁸ albeit on a much lower scale. Initially it provided 'emergency' opportunities but now in the 'post-emergency' period offers an embedded route to further widen and extend opportunities. This online world has the potential to reframe traditional pedagogies to innovate and creatively plan for experiences, drawing on 'new ways of learning' and of reflecting on and interrogating experiences.

The COIL in this case study between Middlesex University, UK and Metropolia University of Applied Sciences, Finland, arose from an enduring desire to continue a long-established international collaboration and nursing exchanges. The fundamental aim of this COIL was to enable students from these universities to work on a common professional theme or activity — in this instance a clinically focused topic: ‘Care of the Acutely Ill Patient’, which is an area nurses in all countries engage with.

Nursing discipline and education — considerations

Nursing is a practice-led profession where education is situated for much of the time within clinical areas where the majority of learning occurs. Nurse education and preparation is broadly set out within the EU Directive 2005/36/EC,⁹ which is then interpreted and operationalised in various ways across Europe. Students spend 50 per cent (up to 2,300 hours) of their programme in clinical areas of the total programme 4,300 hours at degree level (EHQ level 6 or first cycle), which is 360 credits (UK) or 210 European Credit Transfer and Accumulation System (ECTS) (Finland).

Many clinical specialist areas are common across Europe, eg emergency care or elderly care, as one would expect, but local services, context and culture vary. Exposure of nursing students to diverse and unfamiliar global healthcare systems and cultures has a powerful impact on nursing students’ own professional and personal journey.¹⁰ Nursing educators in turn recognise the importance of student exposure to diverse cultures and important global challenges, sustainable development goals (SDGs), eg social and health inequalities.¹¹ Traditionally this has been through international exchanges, study abroad experiences and creative university partnerships aiming to enrich knowledge, understanding of professional practice and

wider moral and ethical issues.¹² Indeed, vehicles such as Erasmus+ mobilities were a common and well-documented strategy to enhance intercultural abilities,^{13–15} however, within the UK, exchange engagement by nursing students was particularly low.¹⁶

There are specific challenges to nursing students completing exchanges: professional regulation of programmes, specialised experiences and political complexities such as Brexit in the UK, so alternative opportunities are ripe to be developed. Collaborations through COILs offer a different model for nursing students: international or cultural exposure and wider global concerns, SDGs,¹⁷ global awareness and leadership,¹⁸ cultural competence¹⁹ and improved intercultural communication.²⁰ Thus, by supporting collaborative learning across institutions a global perspective in academic and practice learning is more likely, with benefits for both students and academics.²¹

As an evolving pedagogy, COIL still requires a broader evidence base of student experiences and perspectives to establish if it effectively does support internationalisation. This paper presents a case study of a British–Finnish pre-registration nursing COIL programme (emergency and acute nursing care) with the intention of contributing to the evidence base. Furthermore, it aims to exploit existing partnerships and expand our pedagogical understanding for our own students and nursing programmes.

‘Care of the Acutely Ill Patient’ COIL development

An initial pilot of the COIL took place during spring 2022 (March–May) through the existing collaboration between Metropolia University of Applied Sciences and Middlesex University. Each university offers similar nursing programmes leading to an academic qualification and professional registration for practice. Each also has a

diverse study body. Metropolia has nursing programmes in both English and Finnish.

To determine the potential of the initial proposition and discussion a pilot was used. This aimed to test, evaluate and identify if this approach appealed to students (and staff) and also if it achieved both universities' educational goals for their nursing students. Exploration of each other's curricula indicated synergies and opportunities within year 2 (level 5) of the nursing programme. A COIL team was established comprising a steering group (senior nursing lecturers from both universities), a teaching team and undergraduate nursing students from both universities. The name of the COIL was altered slightly to better reflect the expanse of this nursing speciality from 'Emergency and Intensive Care' to 'Care of the Acutely Ill Patient'.

While there were learning outcomes associated with the core theme of emergency and acute care nursing primacy, the COIL was considered the vehicle for professional practice and cultural discourse. Technology was the driver for learning and engagement but not the pedagogy per se. In fact, the course and lessons were planned drawing on a social constructivist approach whereby students were to be active in seeking, challenging and acquiring knowledge.²² Thus the 'learning encounters' were planned to be synchronous (sharing new material) and asynchronous (student group activities and tasks) to emphasise the social community.

Planning involved four distinct stages:

1. Strategic planning (institution support, resources and staff);
2. Framework development (content, assessment, programme integration);
3. Pedagogy and operational processes;
4. Evaluation.

Key to the realisation of this COIL was the existing partnership with an a priori knowledge of the context of partners' healthcare challenges, education and

context. Significant effort in planning is deemed essential,^{23,24} as well as clarity on processes. Powerful enablers evident among staff were mutual respect, skilled influencers, commitment to collaboration and recognising the opportunity for cultural exchange.²⁵

Introducing students to the COIL

For this COIL English was the working language, thus students from the Finnish English language participated alongside UK students. Student participation in the COIL was entirely voluntary; however, once started, participants were asked to remain for the duration (four synchronous sessions). Student recruitment was through specific credited theory modules (identified by each university) which had the option of drawing on differing pathways of learning within them. In Metropolia the students were in year 2 and this COIL formed part of their credited module 'High Dependency Nursing'. In Middlesex University this was through a credited module called 'Expansive Learning' (in both year 2 and 3) comprising diverse self-selected pathway options where students explore an in-depth topic related to nursing, health or society.

Both universities utilise the Moodle virtual learning platform and for this COIL. Metropolia's Moodle was more customisable and so was selected and fortunately the navigation and tools were familiar to all students. Guidance was given to UK students for log-in and navigation in any event. Careful attention was given to the preparation of the students for this learning experience, ie time and meeting as well as written guidance. Learning online was not new, but meeting as an international community, having joint lessons with UK and Finnish teachers and also managing expectations and concerns needed to be addressed. The time difference was not considered a problem by the teaching team (Finland is 2 hours ahead of UK); however,

it was factored into the scheduling of synchronous sessions.

The key goals for this experience revolved around the nursing topic or theme wrapped in an environment of socially constructed learning, exploring a nursing speciality to which students had limited exposure, navigating a digital world but also enabling an understanding and perhaps a visual picture of another professional and international world without being exposed to it.

The teaching team also participated on a voluntary basis, expressing a desire to expand their teaching skills, to exercise their own professional clinical expertise as intensive care nurses before entering teaching, and to share cultural insights.

COIL framework development

The approach taken is outlined in Figure 1, which illustrates the COIL

structure, processes (learning and evaluation) and product (course). There were four taught sessions planned (Figures 2 and 3), each lasting 3.5 hours, which were held via Zoom link. The asynchronous sessions included set tasks and group activities which students self-arranged. Before each ‘taught’ day, students’ reading and other tasks were set in preparation for the lesson. The final lesson culminated in a group presentation on a topic of their choice around ‘Care of the Acutely Ill Patient’. All sessions were taught jointly by lecturers from both universities.

Evaluation was key and the means selected were anonymous survey and safe open discussion (discussed later).

METHODS

The students in this COIL consisted of second year (Finland) and mixed second and third year (UK) pre-registration nursing

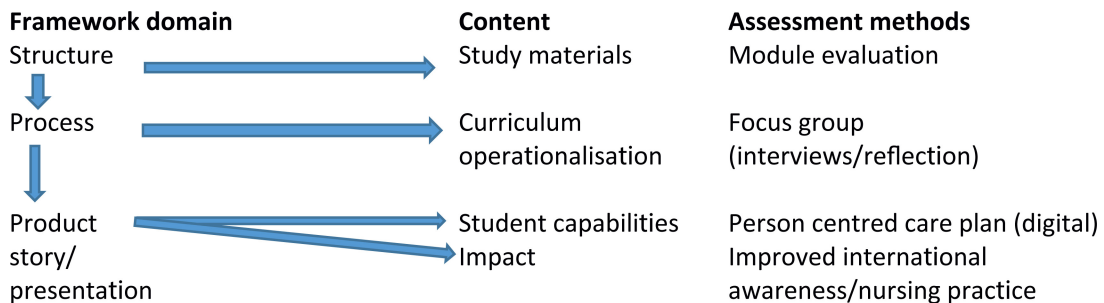


Figure 1: Programme development and evaluation

Session/lesson	Content
Day 1	Care pathways and care dependency levels of acutely ill patient
Day 2	Observations, monitoring and other special aspects of care in High Dependency Units (HDU)/acute care
Day 3	Patient safety and professional competencies in Care of the Acutely Ill Patient
Day 4	Group presentations and course evaluation Topic 1: Cardiac emergency Topic 2: Accident/trauma Topic 3: Respiratory emergency Topic 4: Postoperative problems Topic 5: Haematological emergency Topic 6: Sepsis/acute kidney failure case

Figure 2: COIL: course outline

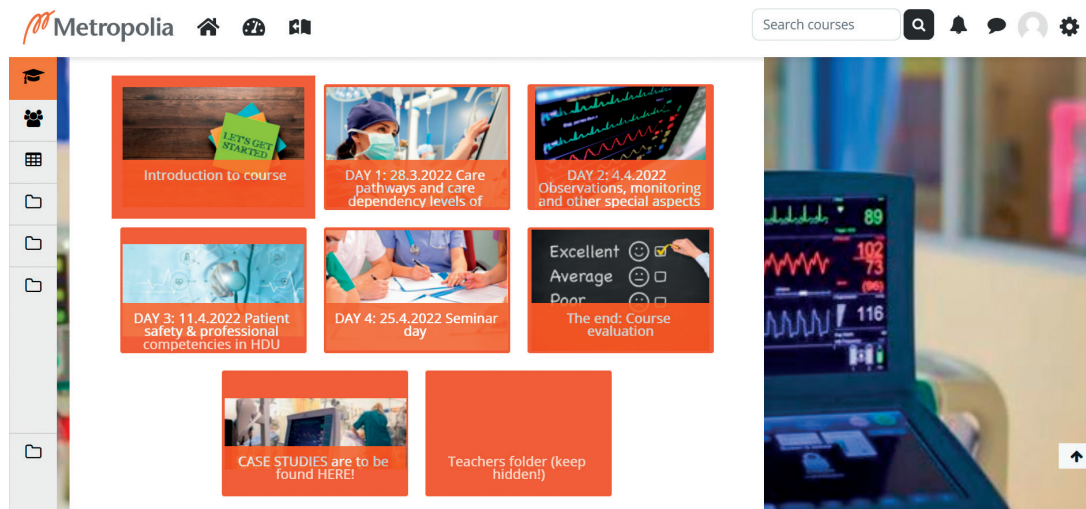


Figure 3: COIL Moodle page

students (total $n=38$: Finland $n=21$, UK $n=17$). Nursing practice follows adult, child and mental health in the UK. Thus, from the UK, four were from mental health speciality, the remainder from adult nursing. Finland does not have separate nurse education pathways; all are general nurses. Since this was to be evaluated and disseminated to professional routes, ethical approval was sought and received from both UK and Finnish institutions ethics committees (UK ethics approval 19361: Health and Social Care ethics subcommittee). Informed consent was attained from each participant and data was handled according to General Data Protection Regulation (GDPR) Data Protection Act.²⁶

To evaluate the perceptions, experiences and learning from this COIL the programme team proposed the following questions:

1. How valuable do the students feel this COIL was to learning about acute care nursing?
2. What were the advantages and challenges of learning in mixed international groups in an online acute care nursing course?

Students' feedback was collected using an anonymous confidential online survey

(Qualtrics tool) voluntarily. Participants also provided verbal reflections at the end of the course in addition to the feedback questionnaire.

DATA COLLECTION AND ANALYSIS

Data was collected at the end of the course in April 2022 using a purposely designed feedback anonymous self-completion questionnaire which comprised Likert scale questions and open-ended questions (Appendix 1). A total of 24 nursing students provided their feedback, giving a good response rate of 63 per cent. The data did not differentiate responses from Finnish or UK students and so was pooled. Survey data was analysed, and ratings were reported using descriptive summaries (percentages) and from the responses of open-ended questions thematised, revealing two main themes.

The questions were a mix of 20 statements asking for perceptions of the learning environments, materials, teaching and group work. Open questions asked about:

- Perceptions of working in a mixed (Finnish–British) group;
- What was considered 'good' in this COIL;

- What they liked most about the COIL;
- Suggestions for improvements.

One further question asked about real-life exchanges and students' perceptions of this versus online. This latter question was posed to gain an insight into the appeal of online as a means to substitute or add a dimension to international perspectives or assist the team in considering an option moving forward to 'blend' the two routes.

RESULTS

Students' views on course content

Course content was evaluated as mainly positively with 64 per cent (n=16) of the participants indicating they received enough information and 80 per cent (n=20) expressing that their understanding of the subject had increased as a result of taking the course. A total of 64 per cent (n=16) felt that the course had enabled them to gain skills that will help their future career development. Sixty per cent (n=16) responded that they learned social and professional skills on the course and the same amount felt that they learned cultural perspectives they previously did not think of. In the end, 56 per cent (n=14) of the students would recommend the course to their peers.

Students' views on teaching and learning methods and resources

Views on teaching and learning methods on the course were quite optimistic, with more students providing positive or neutral feedback rather than negative. Sixty-four per cent (n=16) felt that the teaching staff had managed to make the subject interesting and 48 per cent (n=12) indicated sufficient time was allocated for group work. Theoretical content was presented as 'flipped learning' with 72 per cent (n=18) agreeing that learning resources on the course Moodle platform were helpful and

64 per cent (n=16) felt that the reading list provided helped to orientate to the lectures beforehand. Working in mixed groups was the core to the course and a total of 68 per cent (n=17) of students felt that learning in international groups was a good experience. Furthermore, 64 per cent (n=16) of the respondents felt that learning in international groups was motivating compared to traditional ways; however, 24 per cent (n=6) felt that learning in mixed groups was not motivating, while 48 per cent (n=12) felt that working in mixed groups created challenges and made the course more demanding. Interestingly, 60 per cent (n=15) indicated they learned cultural perspectives previously not thought of. When asked if they would have preferred to travel and participate in real life instead of online, 48 per cent (n=12) of the students responded that they would, preferring 'in real life'. Fundamentally, it appears that taking part in the COIL was seen as a positive experience by the majority.

Students' positive experiences of online learning in mixed groups

As mentioned, participants identified mixed experiences with international online learning and working in mixed groups. Key positive aspects which emerged from the comments were sharing international perspectives and comparing practices. Students found it interesting and stimulating to compare practices between two countries, with some of the protocols and practices found to be very similar.

'It was interesting to find out how nursing is done in England and the possible differences between the two countries.'

'Also, to learn little about how things work in another country.'

Learning new things in a new way from several different teachers and peers from

another country was highlighted as beneficial, as well as sharing ideas with different students with different prior experiences.

'I found comparison between Finnish and the UK practices interesting. Also, to have so many teachers present with vast knowledge of the subject, was very beneficial ...'

Learning from others and comparing practices was seen as inspiring, with learning in multicultural groups particularly inspiring. Students commented on the opportunity to share experiences with people from different countries and backgrounds and cultures within their own countries too.

'The opportunity to get to know the teaching system of another country and hear students' experiences.'

'Generally, meeting new people from abroad was uplifting.'

The course provided students with a taste of acute care and intensive care nursing in a friendly learning environment where they felt they could ask questions and learn new things.

'I felt relaxed, did not feel intimidated or afraid to make mistake knowing I would be given correction with rationale.'

Furthermore, real-life case studies provided a different dimension of practice from both countries, offering different teaching styles, practice approaches and insights into new patient problems not necessarily widely present in their own country (eg Finland and Sickle cell crisis). These were positively received and engaged with.

Challenges with online learning in mixed groups

Despite students reporting working in mixed groups as positive, challenges were

also evident. It appeared that diverse habits and ways of 'doing' group work were the main issues. The intention was for students to work in mixed groups of students from different backgrounds; however, they report this required more effort to find mutual ways to participate.

'I guess it took a bit of effort trying to work out an effective method of communication that works for everyone in both countries.'

'Most of the Finland students were struggling to understand how UK students do presentations, and that proved some challenges.'

Another challenge highlighted by several students was the two-hour time difference between Finland and UK, which made it difficult to get in touch with the group and get together to work on their presentations, creating stress and complications for some.

'Time wise it's hard to get together really due to time difference.'

'It was surprising how difficult it was to work in the mixed groups. Somehow the little two hours difference was too much. Personally, I don't think it was and it did not need to be a problem but for some it was.'

Students were innovative in their work, drawing on social media means to communicate and meet, eg WhatsApp, so everyone could stay informed regardless of time difference. Issues with group work continued, however, indicating the challenges were not solely due to the time difference.

'Although a WhatsApp group was created so that everyone could stay on top of things, some people did not react to messages.'

‘We had some issues in our group as two members did not contribute to the presentation.’

Concerns were reported that not everyone participated equally and expressed different motivational levels between students. Some students experienced unexpected difficulties and communication clashes likely due to cultural differences and styles of communication. Some of the students felt that they were not being heard or were misunderstood while working in groups.

‘It was surprising how difficult it was to work in the mixed groups.’

‘It’s sometimes difficult to reach people in other countries, by this I mean about communication.’

‘[...] feel like could not talk to them.’

‘Was quickly shut down when making a suggestion.’

Overall students appreciated participating in this course despite it being somewhat challenging at times. Kindness was mentioned as a core requirement alongside respecting others’ views and creating an open and welcoming learning environment. This ought to be present in all courses, especially online.

‘I do not think working in a mixed group is a challenge. Without it the whole essence of international collaborative learning would have been lost. However, it would be great if students taking part in this programme in future, are more receptive of ideas from other areas ... we should still make our points with respect and kindness.’

‘Real-life exchanges’

In reaction to real-life exchanges, 68 per cent (n=17) indicated a desire to see practice in

a real environment on exchange compared with 12 per cent (n=3) not desirous of this. This was followed up with an open question which pointed to themes such as intention to go on exchange, perceptions of real life being preferable (to online) and also ‘seeing’ this topic in practice rather than theoretically.

‘I feel like in real life exchange I would have gained more skills and I would have learned and seen more.’

‘It would be interesting to practise what I have learnt in a UK based environment because the experience would be different.’

DISCUSSION

Pedagogy: COIL as a learning and teaching paradigm

The evaluation of this COIL points to significant benefits as an international learning experience within nurse education. There were inevitably challenges, some of which appeared to emerge from inherent issues with group work and equity, but also the finite time to navigate the process of negotiation and communication within groups.

There are two key issues within this COIL: the learning experience and the subject area. Most of the challenges identified were around the former and most of the benefits were within the latter. Student views of content were rather mixed, which could be due to being unused to such a complex technical area of nursing or having limited experience in these practice areas. This is a very specialised subject area, and while students struggled with some of the content, they did overall enjoy the patient cases used to illustrate practice and the experiences of the teachers within this professional area. They stated that the lessons were not long enough or sufficient enough and it would appear that evaluation immediately following the course does not allow for

reflecting on and processing the learning gained. Group work was a challenge, and it is recognised that this can be affected by time management, personality differences and unequal contributions of individual group members, yet the literature indicates that despite this, students appreciate its importance and value.²⁷

Higher education and professional teaching and learning has evolved over the last decade or so and the impact of the pandemic has further accelerated this. While this COIL drew upon an established pedagogy (social constructivism) in the planning, increasingly the activities and student interactions drew on multiple pedagogies of experiential, humanist and transformative paradigms of education. It could be argued that collaborative networks and partnerships contributed to this and added to this paradigm shift.

The key strength in the COIL is the meaningful exchange between academics and students with peers in geographically distant locations. Understanding the context of international partners is influential to the success of global partnership projects such as this COIL.^{28,29} The students who participated in this COIL brought with them the variety of their own lives and clinical experiences made more complex by the mix of nursing students from differing areas of nursing. This could add richness, alternative perspectives (ie. mental wellness from mental health nurses), but also challenges such as limited experiences to draw on.

The literature points to other challenges such as terminology and its consequences. Reports by Erasmus + Virtual Exchange (the Stevens Initiative)³⁰ and EVOLVE³¹ indicate high levels of student satisfaction with VE or COIL as a learning activity.³² In many cases, students also reported learning factual information about many topics and social issues including immigration, religion, gender roles and the differing reactions to the COVID-19 pandemic.

This project used the term COIL to best reflect the international and digital communication route; however, terms such as 'virtual' (VE) can point to a sense of it not being real or authentic, or of lower value than physical mobility exchange programmes. This was not explored with students and the intention is not to replace but to add a teaching and learning dimension to 'internationalisation' and transcultural issues. On reflection, moving forward, adding a physical dimension onto a COIL is appealing to potentially cement learning experience; however, this remains to be explored.

Limitations and lessons learned

Reflecting on the data, it would be good to elicit Finnish views and UK views separately; however, this is not a huge limitation. Timing is an issue; it was perhaps too soon after completion, when emotions were high. There were mixed results and personality or attitude challenges; however, this reflected cultural differences or general challenges of students towards such activities (group work) evident in many countries and areas. This evaluation is ongoing with a follow-up intended after three months.

The key module learning outcomes were planned in lesson activities. Beyond this, however, students appeared to develop soft skills such as intercultural awareness (of their own diversity and that of their own home nations) and digital literacy in how they exchanged ideas and worked together in teams. There were challenges with personality clashes and perceptions of 'effort' or equitable contribution by students, which forced them to negotiate, defend and generally manage or in the worst-case scenario involve the teacher facilitators. This too is illustrative of softer communication skills; however, realistically it is typical of the challenges of group work in any country. O'Dowd³³ asserts that virtual experiences (such as COIL) can best enhance students'

collaborative and intercultural skills if confronted with challenges which require them to find creative ways to collaborate and communicate effectively with their international partners. This too contributes to a professional value and skill beyond the learning experience itself.

One consideration as yet not explored is the challenge for the nurse teachers. VE activities can stretch teachers to step away from their established learning and teaching approaches and develop new skills to engage in intercultural and digital learning experiences.^{34,35} COILs can offer professional development opportunities too: new professional partnerships, collaborative academic initiatives, development of online collaboration skills and innovative approaches to teaching. The corollary to this is that it is time-consuming to prepare online materials and may be perceived to be extra workload or to lack recognition or reward. Starke-Meyerring and Wilson³⁶ assert that the success of globally networked initiatives such as virtual experiences (for example COIL) depends on three key pillars — robust partnerships, innovative institutional policies and innovative pedagogies — and arguably this embraces staff development and recognition too.

CONCLUSION AND RECOMMENDATIONS

There were significant positives associated with the inclusion of COIL in modules and there is scope to overcome challenges identified, extending the pedagogical concept drawing on enablers to boost 'internationalisation at home' initiatives. Evaluation to address perceptions, satisfaction and challenges is essential for future course development.

Although as facilitators we anticipated some challenges and mitigated accordingly, there will inevitably be others we have not planned for, such as prior preparation and addressing social needs within groups.

Digital literacy skills did not appear to be problematic; however, navigating cultural practice and position with use of tools proved a challenge. It is fair to note that timing and planning around complex timetables was an issue. The operationalisation of programmes within both countries was very different; in the UK this pattern led to challenges with 'block teaching' as opposed to semester-long teaching and complying appropriately. Similarly nursing programmes do vary in the UK. Mental health students with limited physical health experiences were included, offering the added dimension of looking at a holistic intercultural aspect to person-centred care, which was an unintended but novel inclusion.

To enhance student preparedness and experiences, a planned programme of briefings and managing expectations is proposed specifically to mitigate confusion with local practices (ie preparing a presentation), group identities and roles, autonomy, intercultural awareness and digital literacy guidance. Facilitators may also consider periodic synchronous meetings with all students as checkpoints to see how the course is going, address challenges and encourage debate and critique.

While COIL cannot be the panacea for international mobility, it can add to the repertoire of exposure to international experiences and circumvent issues which previously could impede physical exchanges (family commitments, finances, etc.); as such, it is therefore more inclusive. Digital poverty may create challenges, but each university has freely available Internet which ought to address this. The student is central to COIL success and, as this case study indicates, can benefit from a valuable learning experience that offers an opportunity to see another professional world without leaving home.

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