

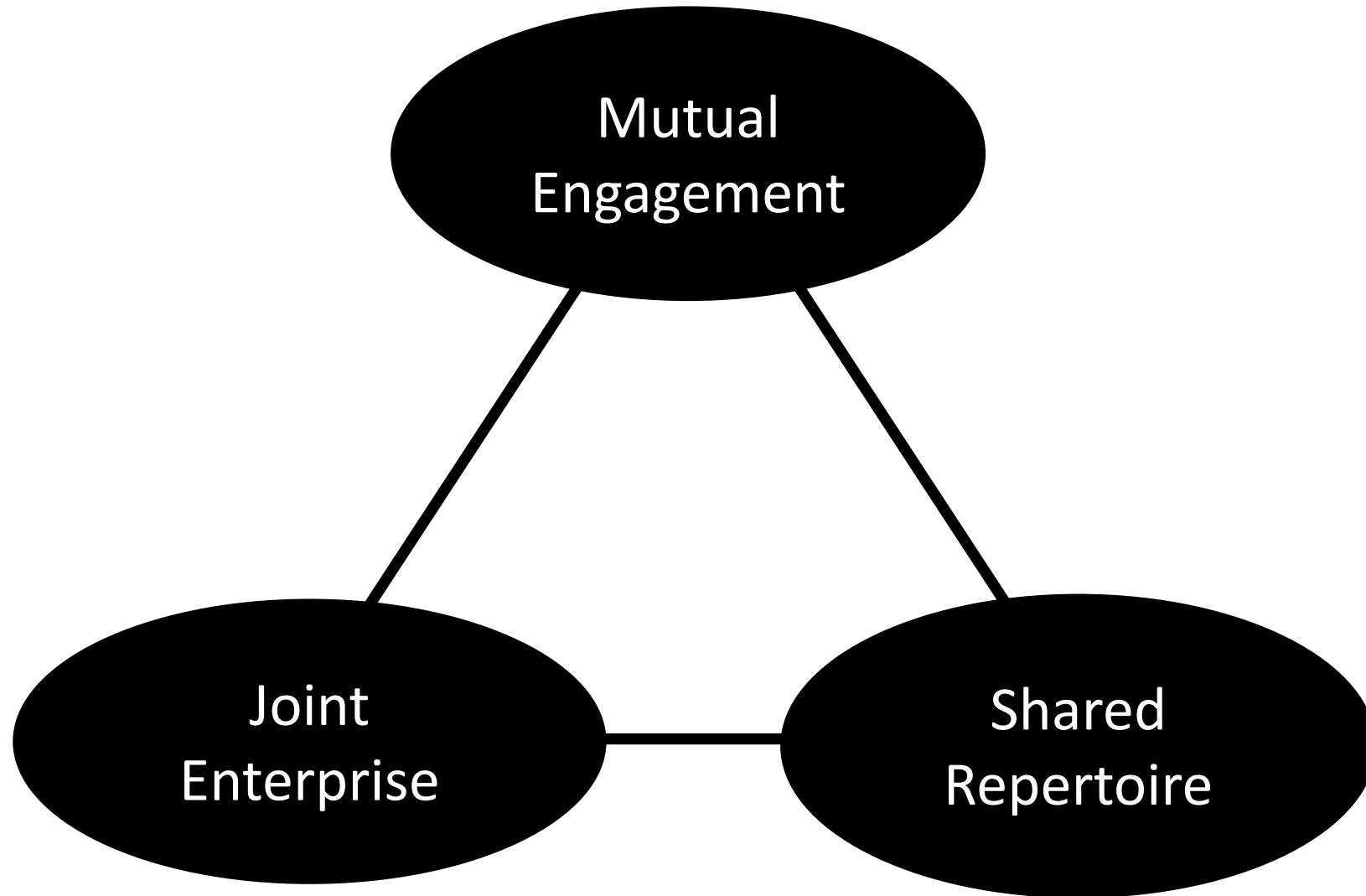


MONASH University

Aligning epistemology of classroom and workplace learning:
The development of a design framework for situated learning simulation.

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The curriculum transformation



Three properties of a community of practice (Wenger, 1998)

Social participation is as a fundamental characteristic of learning, meaning and identity (Wenger, 1998)



Learning in a community of practice (Wenger, 1998)

Research Question One:

In what ways may the concept of Communities of Practice be used as a framework for the design of immersive simulation?

Research Question Two:

In what way may immersive simulations informed by Communities of Practice develop the capability of international nursing students from culturally and linguistically diverse backgrounds to participate within Australian communities of nursing practice?

Focus Group
Analysis

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graph TD; A[Focus Group Analysis] --> B[Design Characteristics Simulation Program]; B --> C[Simulation Implementation Debrief & Interviews]; C --> D[Design Framework for Situated Learning Simulation];
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Design Characteristics
Simulation Program

Simulation Implementation
Debrief & Interviews


Design Framework for
Situated Learning Simulation

Focus Group Analysis



Major theme	Sub-theme
Theme One: Relationships are different.	<ul style="list-style-type: none">• The pyramid.• Senior nurses and baby nurses.• Get involved! Australia is more friendly.
Theme Two: Community and practice is different.	<ul style="list-style-type: none">• Finding yourself within an unfamiliar community.• Negotiating multimembership.
Theme Three: Learning is different.	<ul style="list-style-type: none">• Affordances are different.• Learning is different: Learning by joining in.

Design Characteristics
Simulation Program



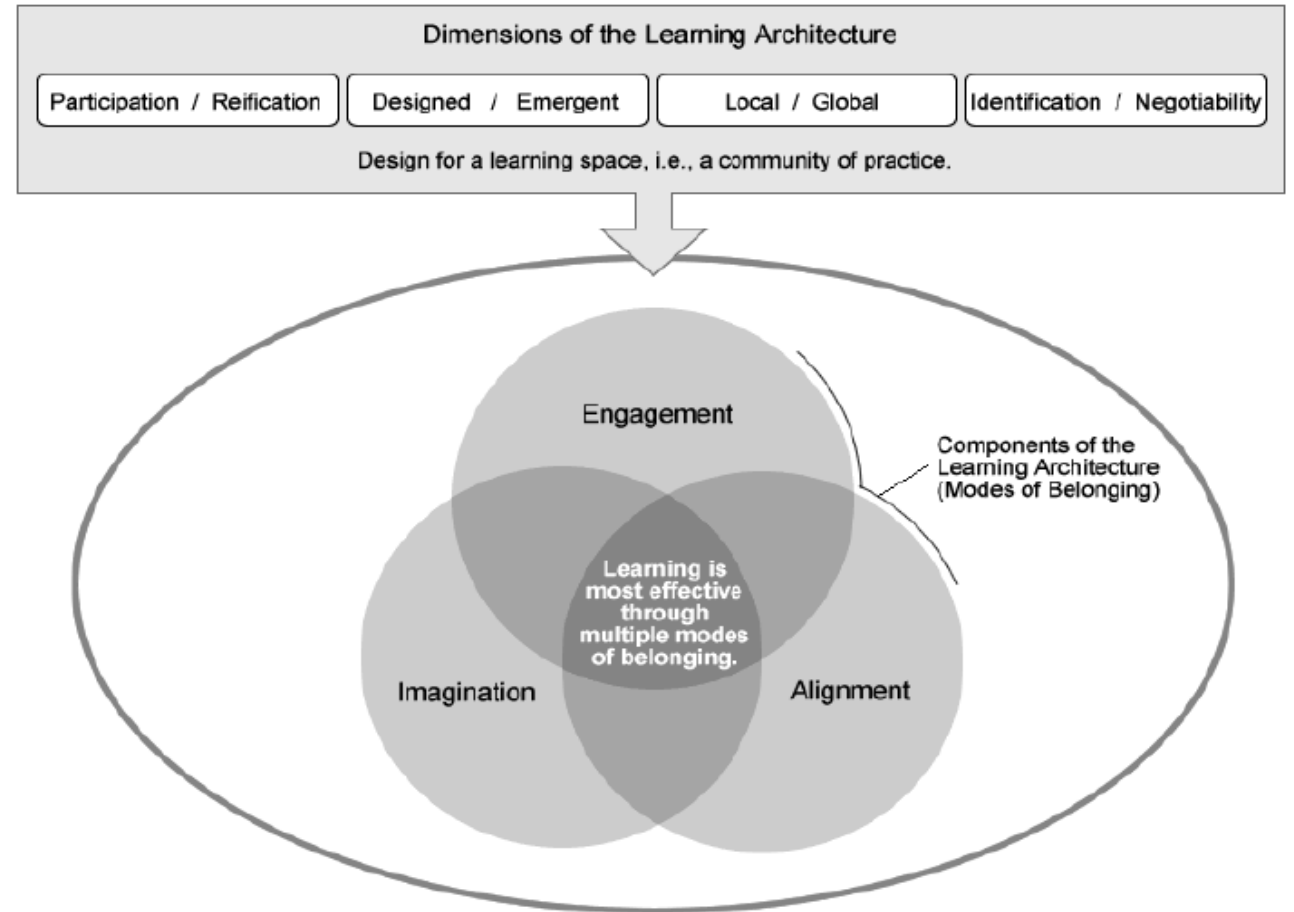
Phase One data

Communities of Practice
(Wenger, 1998)

Authentic learning environments
(Herrington & Oliver, 2000)

Typology of early career learning
(Eraut, 2007)

9 Design Elements



A conceptualisation of Wenger's (1998) learning architecture
(Henderson, 2007)

Research Question One:

In what ways may the concept of Communities of Practice be used as a framework for the design of immersive simulation?

Simulation Implementation Debrief & Interviews



Five propositions regarding the construction of
ICALD nursing students' *identities as learners*
within an Australian CoNP.

1.

Significant meaningful learning occurs from exploring participation and non-participation through simulations that replicate everyday nursing practice.

I was nervous and nobody was responding. We were all silent and there was sort of delay. That delay makes me a bit nervous because (pause) we cannot judge this patient's situation exactly or very accurately. The silent and nobody was responding or doing nothing. That's not good.

(Cheng, China)

For me I think I want to try to move the patient and I also feel scared. If I move she will ah (pause) he will become worse. I just don't know if (pause) I can't decide what I go to do.

(Jiao, China)

2.

Competence from a Communities of Practice perspective facilitates understanding of learning as an ongoing process of becoming.

'What could you do to locate the medication?' Hyo does not respond but looks at the medication chart. RN2 asks 'Who could you ask?' and smiles at Hyo. After 10 seconds, Hyo responds 'The nurse? The registered nurse?' RN2 responds 'Is that me?' Both RN2 and Hyo laugh.

(contact summary)

3.

Mutual engagement *affords access* to the joint enterprise and shared repertoire.

I think he [Cheng] ask in a very polite way. 'Can we join conversation? Do you want sugar [for coffee]?' They [old-timers] say 'No no', but this meant they turn their face [to us]. If he [Cheng] doesn't ask, I may sit there for a whole day like that. The first time [when interacting with new nurses] I may use his words.

(Kwan, Korea)

4.

Negotiation of multimembership *must* explore cultural difference in relation to participation.

You [the researcher] are in a higher position to me. To say something to someone in a higher position is a big change. Even when I speak to you, I don't know why I cannot speak properly. It is a bit hard to explain this part but this is how I feel.

(Kwan, Korea)

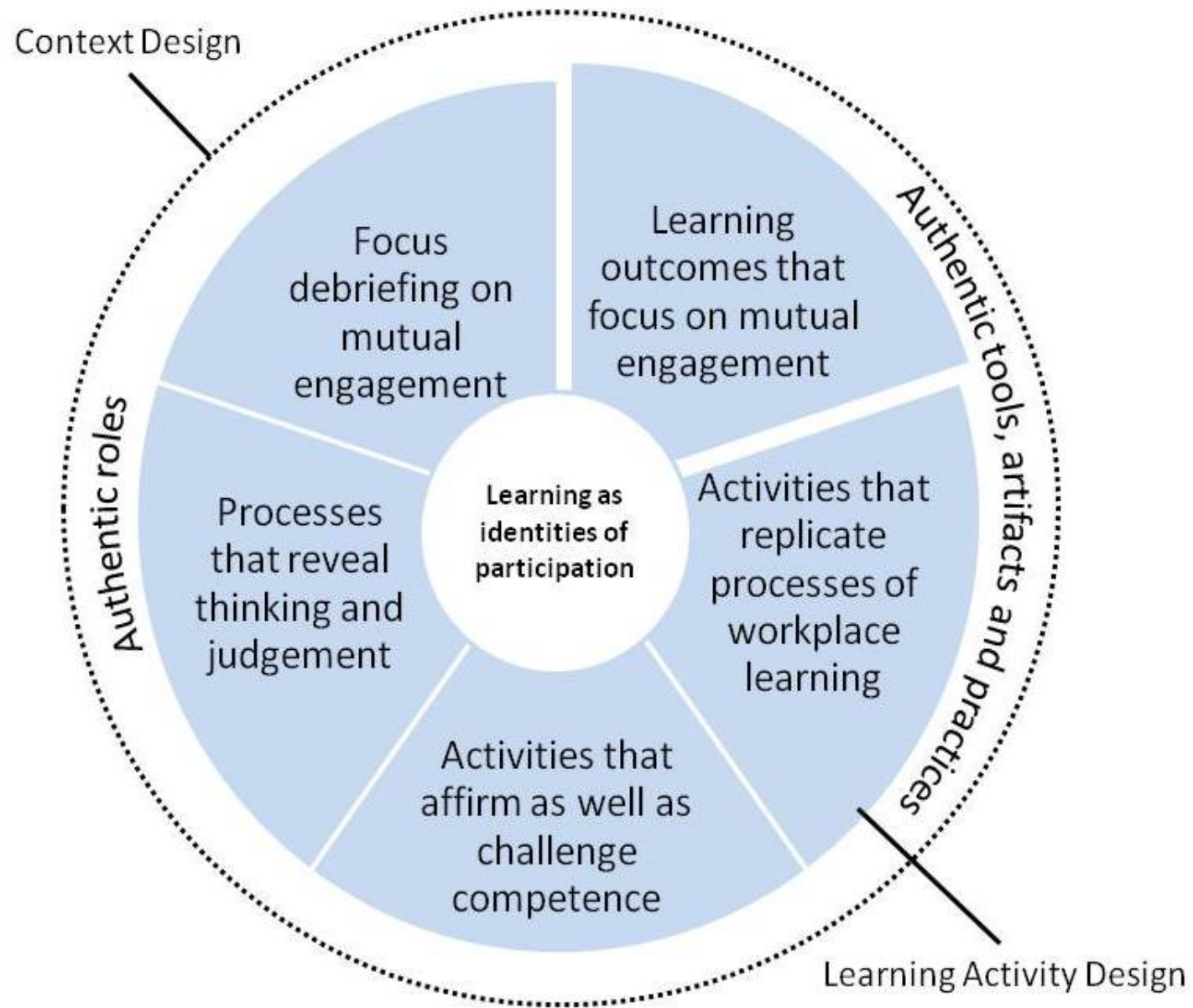
5.

Simulation represents a boundary object, which facilitates connections between communities of practice.

...the experience of interaction with staff [during the simulation] was quite helpful. Especially asking questions. If I hadn't done some simulations...I might have hesitated to ask something because I thought that bothering or interrupting. But I learnt through the simulation that I would be in clinical placement to ask some questions by means of learning something.

(Jae-Sun, Korea)

Design Framework for Situated Learning Simulation



The Situated Learning Design Framework for Simulation (Guinea, 2016)

Research Question Two:

In what way may immersive simulations informed by Communities of Practice develop the capability of international nursing students from culturally and linguistically diverse backgrounds to participate within Australian communities of nursing practice?

*I think this opportunity can be very effective in terms of giving that kind of situation to the students 'cause they feel like...they might feel they know quite a lot. But when the people be in the situation...they feel like they don't know what they have to do. 'Cause as I said before I was confused and don't know how organising idea in my brain and looking patient and organising and hesitate my um...**my role** or what I am going to do.*

(Jae-Sun, Korea)

*I have thought about it and I think um if I didn't have the chance to engage in your simulation research, and experience that with other students, I would not know the nurses are there to help us. Even from the first day it was not too difficult to ask nurses anything. [This] one thing I was surprised (pause) **I am very surprised for me.***

(Hyo, Korea)

*I learnt we don't have to do all things in hospital because we are student nurses not registered nurses. It was helpful for me to learn [this] before the clinical placement [that] **our role** is smaller than a registered nurse. **There is a boundary.** After the simulation we had talking about the simulation [debriefing] and we are getting to know about the boundary and our role.*

(Hyo, Korea)

*It is not just the skill. It's important to be **psychologically prepared** I think. That's what I have learned.*

(Cheng, C1S2D)

The curriculum transformation

Participation

...not just to local events of engagement in certain activities with certain people, but to a more encompassing process of being active participants in the *practices* of social communities and constructing *identities* in relation to these communities....Such participation shapes not only what we do, but also who we are and how we interpret what we do.

(Wenger, 1998 p.4)

Limitations

- Small sample size
- One location

Implications

- Contributes strong evidence for theory-driven design frameworks for simulation
- Purposefully designed simulation experiences can facilitate identities of learners
- Relevance for different contexts
 - Domestic students
 - Graduate nurse programs
 - Other disciplines and professions

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