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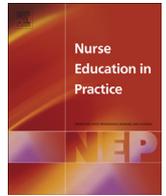
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Use of a blog in an undergraduate nursing leadership course



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ABSTRACT

In this study, the use of a blog in a senior leadership clinical nursing course was analyzed qualitatively through two means; focus group interviews of those using the blog, and analysis of blog content. Initial feelings expressed by students were annoyance and intimidation concerning the blogging assignment. These feelings quickly dissipated, with students verbalizing many positive aspects related to the blog, including having a place to reflect, feeling connected as a group, valuing feedback provided by their peers, and learning from theirs and others' experiences. The mechanics of having to synthesize their thoughts in written form, in a shared venue was also identified by students to be helpful for their learning. Blog posts were primarily related to student experiences, with students identifying a "lesson learned" in most posts. Student comments were geared to providing support of fellow students, through words of encouragement or through sharing similar experiences. Instructors felt the blog, in addition to helping students to synthesize their thoughts, helped to monitor how students were learning and progressing throughout the semester, and helped them to transition from nursing student to practicing professional. The researchers concluded that blogging in a senior leadership clinical nursing course promotes reflection is an effective way to enhance student learning.

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Introduction

The purpose of this research is to describe and analyze the use of blogging as an alternative method of for debriefing and reflection in the last semester of clinical coursework in an undergraduate baccalaureate nursing program in the western United States.

Traditional clinical rotations in nursing education consist of one instructor with 8–10 students working in the same unit at the same time. Clinical shifts include a preconference for preparation and a post-conference for the purpose of synthesis of clinical learning and debriefing. Students have the opportunity to share successes, challenges, and new insights with the instructor as facilitator. The instructor and students meet together at the conclusion of the clinical shift for the discussion (O'Conner, 2006).

Many baccalaureate programs include a senior leadership clinical course in the curriculum. In contrast to clinical in earlier semesters, this final clinical rotation places students with preceptors working a variety of shifts in different facilities without the instructor and usual group of fellow students present. The preceptor model aims to

increase student's independence and enhance self-directed learning (Omer et al., 2013). However, at the conclusion of the shift, the preceptor may not have the time for a debriefing session or may provide an inadequate debriefing. The student may have had an experience he or she needs to process. Feedback is essential for students to learn effectively, and more likely to be accepted and result in improved practice if the information is appropriately presented to the student. For feedback given apart from the practice setting, the provision of sufficient time and space is necessary to ensure all aspects of practice can be discussed (Clynes and Raftery, 2008).

Background

Millennial learners and technology

Demographics and the learning needs of students should be considered when exploring options for sharing clinical experiences. Generational diversity has been identified as impacting teaching and learning for today's learners. Teaching strategies should be tailored to generational values and learning culture to facilitate student learning. Millennial generation learners (those born between 1980 and 1992) have grown up with technology and prefer active participation, immediate feedback, and positive reinforcement (Montenery et al., 2013).

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Online clinical conferencing has been found to be beneficial for nursing students. Students in online conferencing groups compared with face-to-face groups rated their experiences higher. Students reported that descriptions of other student's experiences facilitated their learning. Convenience, more opportunities to participate, and more time to think were also identified as beneficial (Cooper et al., 2004). Instructors must be able to connect and support students in an online environment for the communication to be successful. It can be challenging for instructors to shift from nonverbal bodily expressions to relying on written dialogue. Attention needs to be paid to words and phrases that put students at ease and preserve openness for learning (Diekelmann and Mendias, 2005).

Debriefing

Debriefing is an essential component of experiential learning. Instructional design should incorporate deliberate use of sufficient time, resources, and strategies that move the student from an experiential activity into a reflective learning situation (Brackenreg, 2004). Through structured debriefing, learning can be enhanced and critical thinking developed as well as other skills, such as clinical decision making, clinical reasoning, and clinical judgment (Dreifuerst, 2009). Debriefing should provide a communication process between student and teacher that enables students to develop strategies that improve future performance. It should be structured to set the stage for dialogue and closure (Cant and Cooper, 2011).

Narrative pedagogy

A blog can serve as a place for students to tell their clinical stories and read the stories of others sprinkled with instructor feedback. The value of narrative pedagogies is well-documented in the literature and is observed to be among the best teaching strategies (Benner et al., 2010). Learning to think like a nurse is enhanced by reflective journaling, helping students to develop clinical reasoning and judgment. Narrative pedagogies, in conjunction with course content, have been identified as providing many benefits for today's learners. These benefits include teaching, learning, interpreting, critically thinking, and analyzing concepts, ideas, and situations. Personal narratives and stories create the capacity for students to develop ethical knowledge, caring, and culture. A narrative framework allows for special access to the human experience. The benefits of one narrative pedagogy, reflective journaling, include personal growth and development, use of intuition and self-expression, problem solving, stress reduction, and health benefits (Brown et al., 2008). Epp (2008) had similar conclusions; reflection activities contribute to critical thinking, invite students to be true to nursing, and build self-actualization.

Method

Design

The design of the study was a mixed methods (QUAL + qual) descriptive study design. The blending of multiple points of view was utilized to provide a stronger understanding of the research problem or question at hand as compared to single-method research (Creswell, 2009, 2014). As research approaches are combined in a single study, the strengths of one method helps to compensate for the weaknesses of another, improving reliability and validity of data by overcoming bias associated with single-method studies (Streubert and Carpenter, 2011). The primary

qualitative portion of this study (QUAL) consisted of focus group interviews to describe senior nursing students' perceptions of the usefulness of a blog in a clinical leadership course. The second additional qualitative component (qual) consisted of thematic analysis of blog posts and comments. Synthesis of these multiple points of view was utilized to provide a unified account of the effect of blogging for the senior nursing students; providing a 'big picture' for the research (Richards, 2009).

Sample

The sample for this study was a convenience sample (N = 15) of senior clinical nursing students attending a private, faith-based university in the western United States. Students were from clinical groups in two separate semesters, and with two separate clinical instructors. All participants (100%) were female, including the instructors.

Blogging

Blogging was accomplished by using a private blog, set up through Blogger® (Google®), with a patterned background, which was changed dependent on the season. For example, the background in January consisted of a snow scene, while the end of semester background contained a print of graduation caps. A picture of the clinical group was placed across the top of the blog. The blog also contained features such as a list of posts, and a calendar feature at the bottom which allowed students and the instructor to post their clinical schedule and class activities in a weekly format. Permission was required to access the private blog; the investigators sent an invitation by e-mail to the students, and the students had to accept this invitation to access the blog. Through privacy controls, access for the blog was limited to the participants, the facilitator, and the investigators; in addition, the blog was also restricted from search engines. Expectations for blogging were that students should post on the blog once a week, and comment on another students' post once a week. Aside from not using patient or staff names and other identifying information, students were not given any other instructions for blogging.

Other reflective activities in the course included a weekly bridging, where students would meet with their individual clinical sections for discussion of clinical activities and leadership topics. Bridging had a 90 min time allotment, and followed a didactic course for the 64 students in the entire nursing class.

Data collection and analysis

Ethical permission from the university Institutional Review Board was obtained for this study, with informed consent obtained for the focus group interviews and use of blog content for analysis. The two clinical groups were invited to attend focus group interviews at the end of the semester, with all students (seven out of seven) attending the interview the first semester, and five out of eight students attending the focus group interview the second semester. The interviews were recorded and transcribed. Both focus interview transcripts and blog posts and comments were analyzed by first reducing data through coding, then using the codes to identify themes. The researchers then compared and analyzed themes until a consensus was reached. For the instructors' perspective, utility of the blog was described.

Results

All of the 15 students in both clinical groups were female, with seven in one semester, and eight in the second. The age of the

students was not collected; however, no students were under the age of 20 or over the age of 25 per instructor report.

Focus group themes

Reflecting through blogging

Several themes emerged regarding the usefulness of the blog. The overarching theme was that blogging allowed a way to reflect. This reflection was provided on several levels. First, the blog provided a way to be able to express and work through feelings. One student commented “When you type something, you work through feelings. [The blog] helped me to recognize my own coping skills. I had a lot of patients who were demanding. Blogging helped me to be more patient in my heart, more caring, after I realized what my feelings were”. Another student commented “When I would see some experiences that people had had, particularly with death and dying ... it sparked reflection in myself. [Blogging] took the burden off my shoulders—it provided a release, because I thought ‘I can just put it on the blog’”. The students reported that blogging “created closure”, “made me think”, and “helped me to pause and reflect on what I was doing”.

Students reported that reflecting on the blog provided other benefits. The forum of the blog, which allowed others in their clinical group (and their instructor) to see posts and comments, prompted them to reframe their experiences in a positive way because they knew others would be reading what they had written. A student commented “There were times when I had a bad day, but just the fact that I had to post on the blog helped me to think about it positively”. Another student reported it helped her to view “negative things positively” saying it helped her to change her perspective, to think “what did I learn from this experience—I worked really hard, what did I learn?”

Reflection also promoted learning in other ways for these students. Students reported “learning from each other”, and as one student commented when reading the blog, “I would think what I would do if this happened to me”. The shared venue allowed them to experience nursing in other students’ capstone sites, as seen by this student comment; “I could see different expectations on others’ units—how it is to be a nurse on all the units, rather than on just one”.

Another aspect of reflection identified as positive for students was an increase in spirituality. Students reported that they were able to relate their spiritual experiences on the blog, and that “reflecting on the blog helped at a spiritual level”, especially relating this to death and dying experiences they had shared on the blog. Blogging provided other perspectives that they may not have thought of, “especially in spiritual matters”.

Community

Blogging provided a sense of community important to the students. As they read posts and comments on the blog, students reported they could “learn from each other”, finding they weren’t “alone in [their] experiences”. Another student commented “It was nice to see on the blog you weren’t the only one thinking or caring that way”. Students reported that blogging helped them to share continuously, rather than just once a week at bridging, helping them “immediately”. A student stated “Nursing is my socialization—having the blog is a way to connect”. Another student reported “It really helped seeing that someone else had issues”, and another verbalized “Seeing other’s excitement makes me more excited”. This was especially important to them in their final clinical experience in nursing school, helping them to become more cohesive because of shared experiences. The need for community was seen in the student comments “I would have felt a disconnect

from my group without the blog” and “It was a fun way to end our experiences with a blog”.

Becoming a nurse

Transitioning from student to nurse was a benefit identified by students; with students saying they could see big differences in themselves from the beginning of the semester to semester end by reading their blog posts. A student comment illustrates this; “I’ve changed a lot since my very first post. Some of the [posts] inspired me to do that. Everyone in the semester had the opportunity to be compassionate and caring, and we got to read about it.” Seeing others’ excitement about nursing also helped them to become more excited. Two students mentioned creating their own journals from their posts on the blog, with one of them stating she wanted a “note to self—just for me”. “When we are in nursing school, we have certain energy. When we look back on journals we can remember the excitement”.

Usefulness of the blog

Regarding the utility of the blog, students stated they were initially disheartened by an additional assignment. They reported these feelings quickly dissipated within the first few weeks of the semester, as they could see the value of the blog as previously described. Students reported they liked the fun backgrounds, and especially liked pictures posted of their clinical group. In addition, one of the two clinical groups mentioned that the blog provided an impetus for discussion for weekly bridging sessions, as often topics discussed on the blog would continue into class discussion. The other group felt that the blog allowed other topics to be discussed in class, as many had already been discussed on the blog. Both groups felt the blog structure, with the requirement of one post and one comment per week and no specific posting topic gave them freedom to post what they wanted, as they did not want the blog to be any more structured than this. Both groups described blogging as “fun”.

The instructors both felt the blog was helpful for student learning, and in becoming a nurse for several reasons. Both felt the blog served as a barometer of how students were doing in clinical. Both felt that the blog was helpful for reflection, and could see student growth, especially in the area of increased confidence in nursing skills and abilities, progress throughout the semester. In addition, both sometimes found questions or cause for concern through posts or comments that would have not been raised until bridging. One instructor used the calendar feature for students to post their clinical schedules; the other did not.

Themes from student posts and comments on the blog

Finding meaning in experiences

Student blog posts primarily consisted of relating experiences they had had in their clinical settings, and then sharing what they had learned from that experience. This began early on in the blog, and continued throughout the semester. The lessons mainly included many general reflective observations such as “Comparing these two patients really helped me to understand the importance of lifestyle choices”, and “I learned that our attitude greatly impacts our patient interaction”. Specific learning was also included, such as a student post dedicated to the use of hand hygiene and glove use as well as posts sharing what had been learned from articles and other posts explaining specific diagnoses and related nursing care. Many times the lesson learned was the title of the blog post. Examples include “Time Management”, “Unexpected learning experience”, “Sepsis”, “Team work”, even titling the post as a lesson, for example, “Today’s Lesson: Learn to Live with the Let-downs”.

In addition to sharing their learning and triumphs, students used the blog as a venue to debriefing negative and emotionally charged experiences as well. Posts included topics such as death and dying, crisis situations, very busy shifts, and instances where students were not able to perform a skill as well as they would have liked. Some examples include a post titled: “Slow” discussing the speed at which the student was able to accomplish nursing tasks, and in another post, the comment “sometimes as a student I feel like a burden”. These posts describing inadequacies or emotions always spawned comments from other students validating the feelings of the person posting and providing reassurance. For example, in response to the “burden” post, a student commented “I feel like a burden too ... my preceptor told me that she always volunteers to take students because she feels like she learns more”.

We are all in this together

The blog was a connected conversation between the students. Following almost all posts, comments from fellow students would validate the feelings or opinion(s) expressed in the post, share a similar experience, or provide encouragement or support for the student posting. Students would also post questions they had, and fellow students (and at times, the instructor) would provide an answer through comments.

Examples of validating posts included “I agree with you, that as nurses, even as student nurses, we are leaders”, and “That is so true—there are some things we can fix, and other things we can’t”, and “I completely agree with you guys!”. Feelings were also validated, with students writing things such as “Wow, that sounds really hard” and “That’s really cool that you got to see the whole process—it will help you to be able to understand what they’re going through”, and “I too feel like I could get better at talking and communicating with patient’s families”. Some comments validated the person posting through sharing similar experiences. Examples of these comments include “I did the same thing once” and “I know exactly what you are talking about”, and “I have had a similar situation as well”, with the student then describing the situation.

The students were cheerleaders for each other, with most comments providing positive support for the person posting. Comments would range from a short “You are AWESOME!!”, “What a great experience for you!”, “I like what you are saying”, and “I totally needed to hear this” to longer comments such as “Doesn’t it feel like some days we have awesome days and feel like we were prepared and knew what to do and other days we just feel like we can’t do anything and will never be able to be a nurse? It’s kind of frustrating! But yes, we never know what situation we will encounter and have to keep trying and keep learning!”

Students would question each other, usually in a post, and at times in a comment. Answers would come primarily from their peers through comments. One example included a post titled “How do you talk to them?” with the student describing the situation prompting the question, and two students providing an answer through their comments on that post. Other questions were within posts, such as “What are we to do as future nurses to address these ever so prevalent issues?” and specific questions such as “Don’t you have to have no pulse and/or stop breathing to be a real code?”

Becoming a nurse

Student posts and comments throughout the semester talked about building confidence in skills, and progressing from student to nurse. Comments at the beginning of the semester were directed towards accomplishing skills and tasks, such as starting an IV or providing care for more than one patient, while posts and comments toward the end of the semester talked of higher order nursing skills, such as prioritization, care coordination, and delegation. In addition, students also validated their choice of nursing as a profession.

Examples included “Helping her reminded me of why I want to become a nurse”; “What an incredible profession to be involved in”; “Welcome to the rest of our lives!!!” and “I thought several times throughout the shifts what a privilege it is to be in nursing”.

As mentioned in the focus group interviews, both blogs were primarily positive, and many comments expressed excitement and enthusiasm for learning experiences and also for nursing as a career. A comment expressed in a student post describes this enthusiasm: “It was one of those moments that I came to really appreciate the career we have ahead of ourselves. I can’t wait for similar experiences we will have during our career as nurses.”

In addition, comments regarding confidence and abilities about becoming a nurse also progressed from semester beginning to semester end. At the beginning were comments such as “I am nervous to start clinical without having done a pre-assessment” and “Why can’t I get the NG tube down?” to comments at semester end expressing that they had become nurses, for example; “I feel I could actually be an ER nurse now which I was worried would never happen!” Students described the semester end and their transition out of school as “bittersweet”, saying things such as “I’m going to miss the novelty of being a nursing student” and “I cannot believe it is over. I am kind of sad”.

Gratitude

Gratitude was often a subject or included in posts and comments, and even the title of a post. Gratitude was expressed for several things; primarily learning opportunities provided at clinical and in their nursing education; time and teaching provided by the student’s preceptor; and for their healthy lives as compared to the patients they were caring for.

Examples of gratitude provided for learning opportunities included “I appreciate the forthcoming opportunities to learn and grow”; “It was a good opportunity to learn to individualize care”; “I have given this experience a great deal of thought and I am grateful for the experience”; and comments specific to their nursing education such as “I’m so grateful for all those professors, nurses, fellow students, and others who’ve inspired me with their teaching”. Gratitude was expressed many times for preceptors, with statements such as “I am glad I have a good preceptor who can be an example of good nurse–patient interactions”, and “I am really grateful for my preceptor and all she does to help me feel confident and capable”. Students wrote about their gratitude for their own healthy lives as compared to the patients they were caring for, such as “I am grateful for the good health I have been blessed with and NEVER take it for granted”.

Feeling the influence of a Higher Power in nursing practice

As our faith-based university includes religious education in the student curriculum, the many posts linking the practice of nursing to spirituality were not a surprise. Posts included statements such as “It was a loving reminder of how my passion in life allows me to feel God’s love”, and “I have learned how to manage time, work harder, and simply rely on the Lord”. Some posts were dedicated to the spirituality students perceived were in their nursing practice, and this comment came from one such post: “Recognizing that we are children of God and that He has a purpose for us, both in this life and the next, increases my capacity to handle the stresses of life (and nursing!) as I know He will help me along the way”.

Comparing the data

There was only one common theme found in both the focus group data and data found in blog content; the theme of “Becoming a nurse”. This common theme showed the effectiveness of the blogging assignment in the leadership course as a final clinical

learning experience and moving toward entry into professional practice. The other themes identified from the focus group interviews were primarily related to students' positive opinions about the utility of the blog as a means for reflection and building a feeling of community within the group. These themes supported results from a small quantitative study finding that students were positive about using social networking in a public health nursing course (Drake and Leaner, 2013).

The use of reflection has been recommended throughout all nursing educational experiences. Nurses who are reflective practitioners are able to reorder how they think, act and understand, and to determine what is relevant during their assessments, enhancing future patient care outcomes (National League of Nursing, 2015). Themes generated from the analysis of blog content, consisting of student and instructor posts and comments, showed a much deeper impact from the extended group reflection provided by the blog over the semester. These themes, rather than focusing on utility, were tied to meanings drawn from clinical experiences. While the theme of "community" found from focus group interview data could possibly be argued to be the same as the theme "We are all in this together" as identified from blog content, the comments from the blog show the importance of the feelings of connection within the group, rather than an aspect of blog usefulness. Other themes from the blog content also showed the results of deep reflection, such as gratitude, feeling the influence of a Higher Power, and the ability to draw meaning from their experiences.

Discussion

As described by Benner et al. (2010), benefits from written pedagogies include teaching, learning, interpreting, critically thinking, and analyzing concepts, ideas, and situations. The results of this study support this as students in both groups were very positive about the use of a blog as a means to reflect. In fact, the only negative aspect students identified about blogging was their short-lived irritation at having another assignment. Halic et al. (2010) stated undergraduate students reported blogging enhanced learning, stimulated thinking outside of class, and facilitated understanding other points of view. This was supported by the students in our study, who identified that blogging promoted learning through reflection, and allowed a means to question and discuss with each other outside of the weekly bridging class. Halic et al. (2010) reported disagreement about the value of peer comments on the blog, stating that 27% agreed comments were valuable, versus 37% who did not. This contrasted greatly with our qualitative findings, as students verbalized the feedback they received from their peers was not only appreciated, but valued. Halic et al. (2010) found in their study that the score students gave for "sense of community" was a predictor for perceived learning by students. The theme of community emerged strongly in our study, as well as learning through reflection, supporting the Halic et al. (2010) findings. Niederhauser et al. (2012) emphasize the importance of finding a better way to educate through innovative learning activities. These activities are needed to better prepare students for the current healthcare environment, and the results from this small study support that blogging fills that need.

The blog format actively involved students in both clinical groups, allowing them needed time and space to discuss clinical events in addition to their weekly bridging. Students were able to post immediately after their clinical, or wait until they had time to process the event. This also allowed others to comment on the posts as soon as they were posted, allowing for immediate peer feedback rather than having to wait to discuss clinical events until

weekly bridging. Focus group comments supported that the blog provided the active participation, immediate feedback, and positive reinforcement so important to millennial learners, as feedback given apart from the practice setting, allowing sufficient time and space is necessary to ensure all aspects of practice can be discussed (Clynes and Raftery, 2008; Montenero et al., 2013). Aside from the utility of the blog, the venue for prolonged group reflection over the course of the semester likely provided the greatest impact from the blogging activity. It allowed students to find meaning from their clinical experiences, and move from their role as student to that of practicing professional.

Limitations

The limitation for the study was the small sample from one university. Another limitation was that all study participants were female. The study would have to be repeated in other settings with both male and female participants to confirm the results.

Conclusion

Initial feelings expressed by students were annoyance and intimidation concerning the blogging assignment. These feelings quickly dissipated, with students verbalizing many positive aspects related to the blog, including having a place to express feelings and reflect, feeling connected as a group valuing feedback provided by their peers, and learning from theirs and others' experiences. The mechanics of having to synthesize their thoughts in written form, in a shared venue was also identified by students to be helpful for their learning. Blog posts were primarily related to student experiences, with students identifying a "lesson learned" in most posts. Student comments were geared to providing support of fellow students, through words of encouragement or through sharing similar experiences. Instructors felt the blog, in addition to helping students to synthesize their thoughts, helped to monitor how students were learning and progressing throughout the semester, and helped them to transition from nursing student to practicing professional.

The importance of developing reflective practice has been emphasized in preparing nurses for future practice. Blogging in a capstone nursing course promotes reflection and is an effective way to enhance student learning. Expression of their experiences in their last semester in blog format allowed each clinical group to find meaning in their experiences, and to write their own story. As one student commented "Now it's on to a new chapter in our lives. I'm scared and nervous but very excited at the same time".

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