**Title of the symposium:** Designing comparative assessments in nursing at first and second cycle level.: the Importance of Assessment Literacy and Scope of Practice. Findings from the European Union CALOHEE project (2020-2022). [Measuring and Comparing the Achievements of Learning Outcomes in Higher Education in Europe]

#### Chair/presenters (including country):

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# Description of the symposium (including background, aim, set-up/topics that will be presented, implications and future perspectives):

**Paper 1: Background**: Modernising Level 6 and Level 7 nursing competences in the European space: designing assessment metrics for comparison.

Paper 2 Methods: Designing differential assessment levels: 'lost in translation?

Paper 3 Findings: Factors that influenced cohort enacted competence: development of 2023 model

Paper 4 Future directions: Practical realities, technological advances, and political implications

**Aim:** To raise debate and critical discussion concerning the methods and findings of the CALOHEE project. These include revised nursing competences for level 6 and Level 7, assessment rubrics, assessment examples for comparative assessment and ethical issues.

Four papers comprising 30 minutes of meaningful discussion with participants. The audience will be invited to participate in a pretest Scope of Practice example, the findings of which will be shared during Paper 4.

# Paper 1 Background: Modernising Level 6 and Level 7 nursing competences in the European space: designing assessment metrics for comparison

The ability to compare learning outcome achievement between countries and institutions requires the development (and initial testing) of a blueprint/ test items bank that caters for variations in cultural, disciplinary, and educational specificities of national and local entities. Without relevant international metrics, the CALOHEE project intended to design agreed measurement instruments for subject specific disciplines in Higher Education. Paper 1 sets the stage by outlining the CALOHEE project steps and the rationale for the revised Tuning Nursing Competences (2023).

Paper 1 reveals the 'Elephant in the Room', namely the significant variation in nursing activity across the Europe in relation to the role of registered nurses in society, the organisation of the health and welfare systems, the legal authority and accountability afforded to nurses, and the available national economic and human capital resources. Noticeable advances in the nursing scope of practice indicated in our previous work are now more prevalent. Including nurse prescribing, telenursing, advanced, specialist and consultant nurses. The rate of adoption of these roles varies significantly between jurisdictions, particularly at post qualification or post graduate level.

The six countries comprising the nursing group, represent, and will illustrate, these variations, even though at level 6, the nursing profession has been technically 'harmonised' since the original Nursing Directive of 1977 and its subsequent revisions (the latest being Directive 2013/55/EU). At second cycle level,





international benchmarks for advanced practice roles have informed programme competences and therefore, in principle, enabled face similarity. A concurrent case study from Estonia offers useful practical examples throughout the symposium.

### Paper 2: Methods: Designing differential assessment levels: 'lost in translation?

Key to devising assessment rubrics, frameworks and measurement tools that can be applied across jurisdictions, is articulating the variables that may inhibit or promote the enactment of not just an individual's competence, but the competence expected of a given cohort of students. International comparisons are based on cohort results. Furthermore, concepts like competence, assessment, and scope of practice are complex phenomena that influence the assessment literacy of students, teachers, and practitioners. Understanding these factors enables assessments to be meaningful and valid. **Paper 2** summarises how, building on our previous work, the CALOHEE1 Assessment Framework, and the 2018 enacted competence model, we developed a schema and instruments capable of identifying and analysing cohort differences in the Tuning competences selected for comparative assessment. This meant we could design, and evaluate, the assessment rubrics and measurement tools to take account of recognised cohort variations (e.g. scope of practice).

#### Paper 3: Findings:

One key finding is that the reductionist nature of the initial Assessment framework meant it did not prove useful. In contrast, our ability to further develop the enacted competence model (2018 above) and apply it through our country profiles, enabled us to frame the influencing factors in their wider political, environmental, social, technological, legislative, economic, and regulatory context, drawing on multiple ways of knowing. The schema demonstrates, and accommodates, the integrated nature of nursing competence, theory, and practice, and better informs the development of valid, reliable, and relevant assessments. Exploring cohort assessment and data handling revealed several ethical issues. Illustrative rubrics, scenario-based assessments and answers will be presented.

## Paper 4 Future directions: Practical realities, technological advances, and political implications

The implications for future work, policy and practice in educational research and practice. Survey findings from the beginning of the symposium will be shared and used to inform the audience debate concerning the implications of assessment literacy, varying scope of practice and practical assessment methods. We highlight future work involving real world pilot testing, the potential for further Adoption of Technologies in assessment and the key necessity to develop international standards of assessment in theory and practice. New standards will also need to address the role of assessors, the assessment design, delivery, evaluation, interpretation, and dissemination of the results as well as issues of translation and ethics.

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