



LHP Skillnet DiGNI Phase 1 Evaluation Report

September 2025



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1

Executive Summary

1. EXECUTIVE SUMMARY

Societies and economies worldwide are being reshaped by a demographic shift towards an ageing population, including a growing proportion of older individuals and increasing life expectancy. This will see a rapid increase in the demand for Long-Term Care (LTC) in the coming years (OECD,2020).

As life expectancy has increased, adults who are living longer often present with more complex needs and multiple co-morbidities. Conditions such as dementia are estimated to rise by 134% up to 150,000 by 2050 (O'Sullivan et al. 2024). These complex conditions will require a higher level of specialised nursing support. The need for an appropriately trained and skilled workforce within the LTC sector to meet the current and future demand has been identified as a key challenge.

In May 2020, the COVID-19 Nursing Homes Expert Panel was established, following a recommendation by the National Public Health Emergency Team (NPHE) and appointed by the Minister for Health. The panel was tasked with preparing recommendations to address immediate challenges and propose long-term reforms. A key theme in the Expert Panel's report was the requirement for gerontology expertise, and the Panel recommended that senior nursing staff should undertake post-graduate gerontological training.

In response to this recommendation, the Minister for Health established a Postgraduate Diploma in Gerontological Nursing Initiative in early 2024, funded by the Department of Health and managed by Leading Healthcare Providers (LHP) Skillnet. The Diploma in Gerontological Nursing Initiative (DiGNI) offers QQI-Level 9 postgraduate training for a nurse from every private nursing home in Ireland over 2 years. Following an open competitive tender process, LHP Skillnet partnered with four Higher Education Institutes to deliver on the initiative aimed at enhancing expertise in gerontological nursing across Ireland's private nursing home sector.

In Q4 2024, LHP Skillnet commissioned an impact and evaluation study to gather and collate data from nurses enrolled on the Postgraduate Diploma, the participating nursing homes, and participating HEIs, to better understand the impact of this initiative, including on the sector as a whole.

The following evaluation report presents a comprehensive assessment of the experience to-date of participating nurses, nursing homes, and educational institutions, focusing only on the first cohort of 198 participants (academic year 2024-2025). This will be followed by a further evaluation on the second cohort and finally the impact report, which will explore the overall impact of the initiative on the key stakeholders one year post completion.

KEY FINDINGS

1. High satisfaction - 82% of nursing homes and 83% of nurses reported to be very satisfied with the DiGNI.
2. Knowledge application - 95% (61/64) of nurses reported having successfully applied new knowledge in their workplace.
3. Practice transformation - 64% of nurses reported having implemented specific practice changes benefiting older person care.
4. Confidence boost - 98% of nurses reported increased confidence in gerontological nursing competencies.
5. Career advancement - 17.5% (11/63) of nurses experienced career progression through promotion or new roles whilst on the programme.
6. Positive impact on recruitment and retention - 70.5% of nursing homes believed the initiative would positively impact recruitment and retention.
7. Improved quality of care – at the time of the survey 63% of nursing homes reported improved quality of resident care with a further 18% stating it was too early to judge the impact.
8. Strong educational outcomes ¹ - HEIs reported high student engagement and completion rates (87.75% completed, 7.25% deferred to 2025, 5% withdrew).

Responses from the nurses, nursing homes and HEIs indicate that strengths of DiGNI include its offering of both online and blended learning format, high-quality curriculum, and emphasis on leadership development. Areas for potential enhancement include expanding offerings to meet future potential demand, improving orientation processes, and maintaining research and evaluation capacity.

This first phase evaluation provides strong evidence of DiGNI's effectiveness in enhancing professional competencies, supporting career advancement, and improving quality of care for older adults.

Recommendations include expanding DiGNI to other specialisms and integrating it with formal career progression frameworks.

¹ LHP Skillnet have noted that 35 nurses enrolled on the programme have since applied for Masters





2

Context

2. CONTEXT

The Diploma in Gerontological Nursing Initiative (DiGNI) is managed by LHP Skillnet and delivered in collaboration with four Higher Education Institutes. The initiative aims to provide every private nursing home in Ireland with access to one Post Graduate Diploma in Gerontological Nursing programme with the aim of enhancing the knowledge, skills, and expertise of nurses specialising in gerontological care. The initiative is run over two academic years with 50% of Nursing Homes being involved in year 1 and the remaining 50% in year 2.

The initiative emerged in response to well-documented challenges within Ireland's long-term care sector, including concerns about the quality of care for older adults, workforce capacity limitations in gerontological nursing, and persistent difficulties with staff recruitment and retention (Department of Health, 2020).

These challenges have been exacerbated by the increasing complexity of care needs among older adults and Ireland's rapidly ageing population, creating an urgent need for specialised nursing expertise in gerontological care (Lang and Hoey, 2017; McShane et al., 2024; Noonan et al., 2024; Aleo et al., 2024).

DiGNI is a significant investment by the Department of Health in addressing critical challenges facing Ireland's long-term care sector. As a strategic intervention, DiGNI is designed to build and retain nurse expertise within the private nursing home sector, addressing both immediate workforce development needs and longer-term sector sustainability.

By providing fully funded access to specialised education, the initiative seeks to remove financial barriers that have historically limited professional development opportunities for nurses working in long-term care settings (Glasper, 2018; Fitzpatrick et al., 2023).

2.1 DiGNI Structure and Delivery

An innovative feature of DiGNI is that it is a collaborative effort between higher education institutions, LHP Skillnet, and nursing home providers to address the growing demand for evidence-based gerontological nursing practice. The design of DiGNI reflects understanding of adult learning principles, workplace-based education, and the specific competency requirements for excellence in older adult care.

DiGNI is delivered through a collaborative model involving four Higher Education Institutes Atlantic Technological University (ATU), Royal College of Surgeons in Ireland (RCSI) Faculty of Nursing and Midwifery, University College Cork (UCC), and Trinity College Dublin (TCD). All participating institutions offer a Level 9 Postgraduate Diploma in Gerontological Nursing on the National Framework of Qualifications (NFQ), ensuring consistency in academic standards while allowing for institutional diversity in delivery approaches. Higher Education Institutes were recruited via an open tendering process.

Participants are engaged with a comprehensive curriculum covering advanced clinical assessment, leadership and management, legal and ethical considerations, and specialised topics such as dementia care and palliative approaches.

The learning format combined theoretical components with practical application opportunities, enabling working professionals to enhance their expertise while maintaining their clinical responsibilities.

Features of this learning format were set out in the tender published by LHP Skillnet. The award criteria for this tender assessed proposals on completeness of documentation, understanding of the project, and accessibility for a national cohort, with emphasis on high-quality, blended or online delivery. Marks were weighted towards programme content (including a management module), sectoral expertise, contemporary pedagogy, innovative clinical placements tailored to the long-term care sector, and value for money.

The learning programme ranges from 12 to 18 months across institutions, with varying emphases on specific components such as leadership and management, research methods, and clinical practice.

Assessment methods include written assignments, presentations, case studies, and clinical practice evaluations, with each institution maintaining its own approach to student support services and clinical placement arrangements.

2.2 Stakeholder Engagement and Support Structure

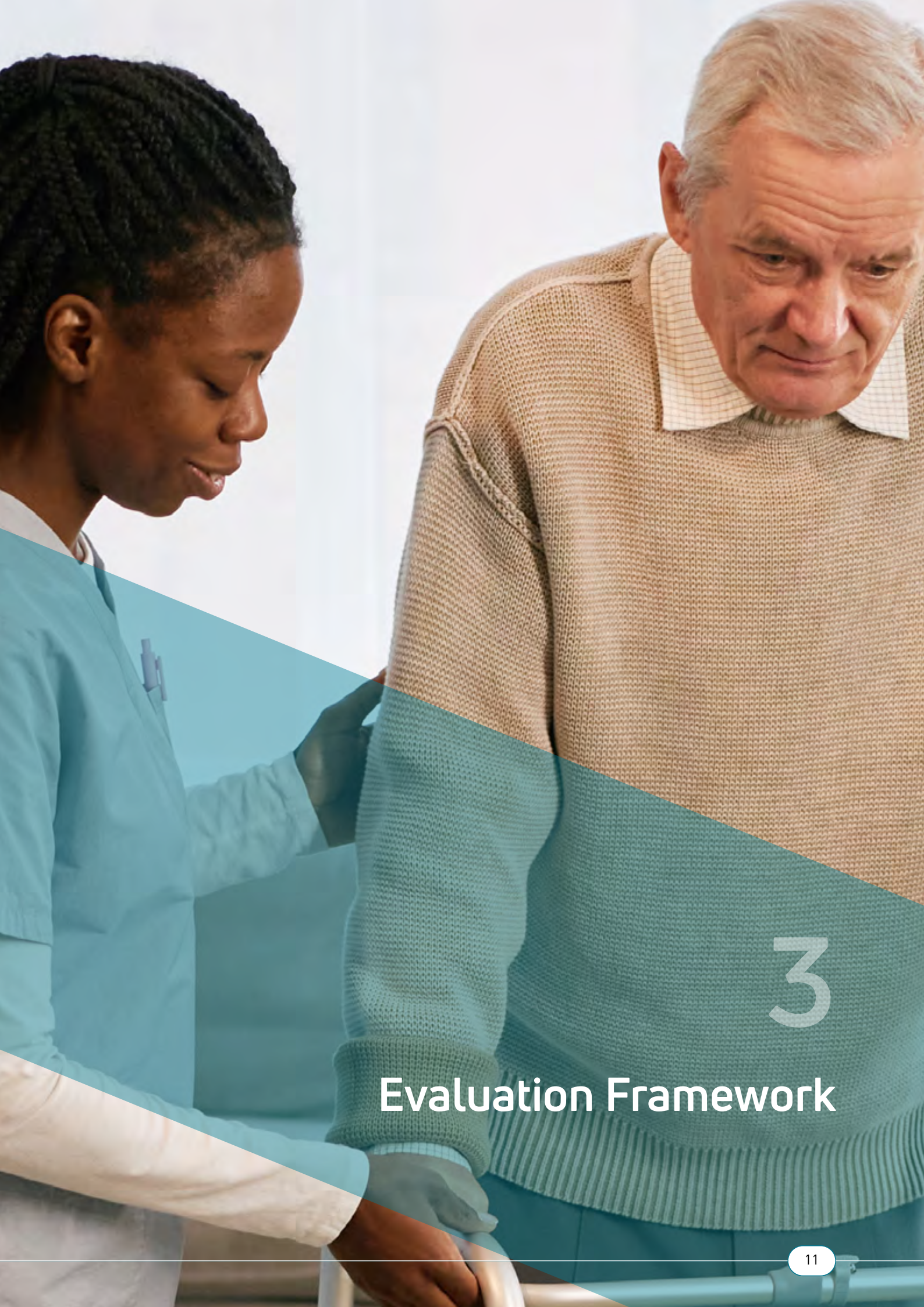
DiGNI specifically targets nurses working in private nursing homes across Ireland, addressing a sector that reports challenges in accessing post graduate education and specialist training due to funding constraints. The programme aims to reach nurses at various career stages, from those new to gerontological nursing to experienced practitioners seeking to formalise and expand their expertise.

DiGNI includes a comprehensive support structure with LHP Skillnet as the primary coordinator. LHP Skillnet manage the overall initiative including tendering for HEIs, budgets, reporting and the application process while providing ongoing support to participants, and facilitating communication between nursing homes and HEIs.

Participating nursing homes demonstrate their commitment through various support mechanisms, including adjusted work schedules, paid study leave, and coverage of travel costs for their participating nurses.

The collaborative approach extends to clinical placement opportunities, with all four HEIs having established partnerships with nursing homes for the purpose of clinical sites to provide students with practical experience across diverse gerontological care settings.





3

Evaluation Framework

3. EVALUATION FRAMEWORK

This evaluation report presents a comprehensive assessment of the experience to-date of nurses enrolled, Nursing Homes and HEIs. The evaluation framework incorporates both quantitative and qualitative methodologies to capture participant experiences, nursing home perspectives, HEI insights, and broader sector-level impacts.

Data collection involved detailed surveys with all stakeholder groups, providing a multi-faceted view of the programme's effectiveness and areas for improvement.

This evaluation aims to inform future initiative development, support evidence-based decision-making regarding programme expansion, and contribute to the broader understanding of effective workforce development strategies in long-term care settings.

Results will be made available to the Department of Health and Skillnet Ireland, with findings potentially contributing to academic publications and policy discussions regarding gerontological nursing education and long-term care sector development.

3.1 Methodology

The evaluation employed a mixed-methods approach, incorporating multiple data sources to provide a comprehensive assessment of the initiative. The methodology comprised five key components

3.1.1 Desk Review of Programme Documentation

A desk review was conducted to collate and analyse all relevant programme documentation. The desk review provided essential background information and informed the evaluation framework, research questions and subsequent evaluation delivery.

3.1.2 Survey of Participating Nursing Homes

A structured survey was circulated to nursing homes participating in DiGNI in year 1. The survey assessed the quality and structure of clinical placements, the learning environment, supervision practices, and perceived impacts on both student learning and resident care. Survey items were adapted from validated instruments and tailored to the local context following consultation with clinical educators and programme staff.

3.1.3 Survey of Higher Education Institutes (HEIs)

A parallel survey was conducted with staff from participating HEIs. This survey gathered data on curriculum implementation, collaboration and communication with nursing homes, perceived challenges, and outcomes related to student preparedness and satisfaction. The HEI survey provided institutional perspectives and enabled triangulation of findings with data from nursing homes.

3.1.4 Pre- and Post-Survey of Enrolled Nurses

To assess the impact of DiGNI on enrolled nurses, this evaluation used a pre-post design with matched participant analysis to examine programme effectiveness across multiple domains. The methodological approach combined descriptive and inferential statistics for quantitative measures with systematic thematic analysis for qualitative responses. Data collection occurred at two critical time points - at programme commencement (Wave 1) and upon programme completion (Wave 2).

A 43% response rate for matched pre-post analysis provides adequate statistical power for meaningful comparisons while representing substantial engagement with the evaluation process despite participants' busy professional schedules.

The analytical framework incorporated Kirkpatrick's four-level evaluation model as the primary organising structure, enabling systematic assessment of participant reactions, learning acquisition, behavioural changes, and organisational outcomes. This established framework provides internationally recognised standards for educational programme evaluation while facilitating comparison with other professional development initiatives in healthcare settings.

3.1.5 Data Analysis

Data from all surveys was analysed in MaxQDA with two rounds of coding of nurse surveys by two analysts. Quantitative analysis included descriptive statistics, frequency distributions, and pre-post comparisons for matched participants. Qualitative data from open-ended survey responses were analysed thematically to identify key patterns and insights.

3.1.6 Ethical Considerations

Participation was voluntary, and all data were anonymised to ensure confidentiality. This multi-component methodology enabled a robust and nuanced evaluation of the programme, capturing the perspectives of students, nursing homes, and HEIs, and grounding findings in both documentary evidence and stakeholder experience.

3.1.7 Kirkpatrick's Four-Level Model

Kirkpatrick's Four-Level Model is a widely used framework for evaluating education and training programmes. Developed by Donald Kirkpatrick, it proposes that learning interventions should be assessed on four dimensions.

Level	Focus of Measurement	Key Questions Answered
1. Reaction	Participants' immediate perceptions, satisfaction and engagement	<i>Did they like it? Was it relevant and engaging?</i>
2. Learning	Knowledge, skills, attitudes or confidence gained	<i>What did they learn? Can they demonstrate new competence?</i>
3. Behaviour	Transfer of learning to real-world practice over time	<i>Are participants applying new skills on the job?</i>
4. Results	Organisational or societal impact (quality, productivity, outcomes)	<i>What measurable improvements occurred because of the programme?</i>



4

Perspectives of Participating Nursing Homes

4. PERSPECTIVES OF PARTICIPATING NURSING HOMES

This section of the report focuses on the views of participating nursing homes. The survey included responses from both individual nursing homes and nursing home groups at the beginning phase of the initiative. The majority of respondents represented single nursing homes (46), with a smaller proportion from larger groups (5). Respondents held a variety of roles, including Directors of Nursing/Persons in Charge, and other senior management positions.

4.1 Overall Satisfaction

A significant majority of respondents reported being very satisfied with the participation of their nurse(s) in the initiative.

TABLE 1: How satisfied are you with the participation of your nurse in the Diploma in Gerontological Nursing Initiative?

Satisfaction Level	Count	Percentage
Very satisfied	41	82%
Somewhat satisfied	6	12%
Neither satisfied nor dissatisfied	1	2%
Don't know	2	4%

** One nursing home did not reply to this question*

In the second wave survey, 84% of respondents (n=43) identified benefits of the DiGNI with the remaining nursing homes indicating that it was too early to tell what the impact will be.

Some of the benefits cited by nursing homes include the significant increase in specialist gerontological knowledge and skills, which has been applied directly to improve day-to-day care and resident outcomes, a qualified nurse on the team providing valuable leadership and improved decision-making support.



“The in-depth knowledge of Geriatric care is essential for those working in the Older person’s care. With this understanding the nurses will be able to render proper services that is effective for the service users.” (Director of Nursing)

“The biggest benefit of the Diploma in Gerontological Nursing Initiative for our nursing home has been the enhanced skill. The training has equipped the nurse with a deeper understanding of age-related conditions and best practices in age-related care, leading to improved resident outcomes and better quality of life for the residents. Additionally, it has fostered a culture of continuous professional development, which has boosted staff morale but unfortunately has made no positive outcome on retention.” (Person In Charge)

Other benefits noted include enhanced evidence-based practice, better understanding of age-related conditions, improvements in quality of care, legal and ethical awareness, medication management, and compliance with regulations.

A strong theme was the transfer of learning to other staff through on-the-floor education, fostering a culture of continuous professional development, boosting staff morale, and increasing professionalism.

Additional benefits included networking with peers, introducing new initiatives, and strengthening governance and critical thinking. While some had not yet observed tangible outcomes, and retention challenges remain, most emphasised that the initiative has elevated skills, knowledge, and care standards within their nursing homes.

4.2 Support Provided

94% of nursing homes indicated that LHP Skillnet provided adequate support throughout the programme. Only a small fraction reported dissatisfaction or uncertainty regarding support. The application process was frequently described as smooth and straightforward. Respondents highlighted clear communication, timely responses, and a supportive environment. LHP Skillnet was praised for providing, guidance, support and for their responsiveness.

4.3 Quality of Care

Respondents observed improvements in the quality of care following the initiative, with 63% noting positive changes. However, about 18% felt it was too early to judge the impact, and 19% reported no observed improvements.

Respondents highlighted a range of positive, tangible impacts from the programme, most commonly the transfer of new knowledge and skills to colleagues and the application of learning to improve resident care. Specific examples reported include introducing new clinical practices (e.g., delirium screening, Do Not Attempt Resuscitation consent form changes, reducing psychotropic medications,

antibiotic stewardship, and multi-drug resistant organism management), enhancing quality improvement initiatives, and aligning care more closely with person-centred and HIQA standards.

Respondents highlighted how nurses enrolled on the programme are more proactive in identifying issues, implementing evidence-based solutions, and engaging residents, families, and staff in improved care processes.

TABLE 2: Have you observed any of the following changes since your nurse(s) participated in the Initiative?

Changes in nurse(s) observed	Responses	Percentage
Enhanced resident assessment skills	36	21%
Improved communication with residents	33	19%
Increased use of evidence-based practices	30	17%
Improved dementia care	27	16%
More effective fall prevention strategies	24	14%
Better medication management	20	12%

4.4 Study-Work Balance

42 out of 51 nursing homes that responded to the survey reported that they provided practical workplace accommodations to support the nurse's participation, with the most common measures being adjusted work schedules/rosters, paid study leave (often ranging from a few days to 10 days), and flexible working hours. Several also mentioned covering travel costs, ensuring protected study time, avoiding night shifts, and aligning work tasks with programme content to enhance learning.

A few noted additional supports such as mentorship, time off for placements, and opportunities to introduce new ideas from college into practice. Some indicated minimal or no changes were required due to online lectures or the nurse's ability to self-manage time, while a small number reported providing no support. Overall, the main form of assistance was enabling attendance through schedule flexibility and paid study leave.

It is worth noting that 58 out of 198 participating Nursing Homes requested a second place in year 2 indicating a perceived benefit to having this specialist qualification to the organisation.

4.5 Impact on Recruitment, Retention, and Staff Morale

72.5% of respondents believed that the initiative would have a positive impact on both recruitment and 69% believe it will improve retention of gerontological nurses.

TABLE 3: Do you feel that the Diploma in Gerontological Nursing Initiative will have a positive impact on your ability to recruit gerontological nurses?

Response	Frequency	Percentage
Yes	37	72.5%
Too early to tell	13	25.5%
No	1	2.0%
TOTAL (valid)	51	100.0%

TABLE 4: Will the Initiative have a positive impact on your ability to retain gerontological nurses?

Response	Frequency	Percentage
Yes	35	68.6%
It is too early to tell	12	23.5%
No	4	7.8%
TOTAL (valid)	51	100.0%

55% of respondents also observed a positive effect on staff morale.

TABLE 5: Has participation in the Diploma for Gerontological Nursing Initiative affected staff morale?

Response	Frequency	Percentage
Yes	28	54.9%
Too early to tell	13	25.5%
No	10	19.6%
TOTAL (valid)	51	100.0%

The qualitative feedback reinforced the quantitative findings, with respondents citing increased knowledge, confidence, and leadership among participating nurses. The initiative was seen as a valuable tool for professional development and staff retention, though some noted ongoing challenges in competing with larger healthcare institutions for qualified staff.

4.6 Expanding to Other Specialisms

98% of respondents (n=50) felt the initiative should be expanded to other specialisms, with Dementia Care and Tissue Viability most frequently mentioned, followed by Palliative/End-of-Life Care, nurse prescribing, and other areas relevant to gerontological nursing.



“It would be wonderful if other areas relevant to Gerontological nursing is also supported with funding, Moreover, it would be great if the the [SIC] current students are supported in completing Masters program in gerontological nursing.” (Director of Nursing)

Respondents highlighted that expanding to these areas would significantly enhance staff knowledge, improve resident care (e.g., dementia management, pressure sore prevention, skin integrity), and boost professional development opportunities.

Additional suggestions included offering such programmes annually, allowing modular or two-year formats to ease workload, and extending funding to support progression to master’s level. Overall, respondents saw strong value in applying this fully funded postgraduate model across other specialist fields in older person’s care.

4.7 Conclusions and Recommendations by Respondents

The Diploma in Gerontological Nursing Initiative is highly valued among participating nursing homes, with strong satisfaction reported regarding nurse participation and the support provided by LHP Skillnet. The programme has led to perceived improvements in care quality, staff knowledge, and morale. Participation has been impactful, though logistical challenges remain, especially around scheduling and the limited number of funded places.

Respondents’ suggestions for improving the Diploma in Gerontological Nursing Initiative focused on main areas of programme structure, access and availability, and logistical support.

Some recommended extending the programme over two years to reduce intensity, especially for those returning to study, and offering more recorded or online lectures to reduce travel and allow flexible access.

Access-related suggestions included increasing the number of funded places, allowing more than one participant per nursing home (particularly large homes), and making the programme available annually to support ongoing staff development and retention.

Logistical improvements included sending class schedules to managers, allowing time off for assessments, tailoring placements to learner needs, and improving communication between the college and participants.



5

Perspectives of Participating Higher Education Institutes

5. PERSPECTIVES OF PARTICIPATING HIGHER EDUCATION INSTITUTES

This section presents an analysis of the Higher Education Institute survey responses. There were 6 viable responses from 6 respondents across the four institutes. Participants represented senior academic leadership roles including Programme Directors (33.3%). The respondents self-reported their roles to be Programme Co-ordinator, Lecturer co-coordinator Gerontology PgD/ MSc, Deputy Director of Academic Affairs, Operations Coordinator, Lecturer and Programme Director, and Programme Director.

5.1 Overall Satisfaction

5 out of the 6 of respondents rated their overall experience with DiGNI as "Excellent," with the remaining one describing it as "Average." No respondents reported poor or unsatisfactory experiences.

Only 1 of the 6 respondents reported encountering any challenges integrating the programme with existing offerings. This included "registering students on 3 campuses and facilitating students accessing each others campus and aligning VLE² across 3 campuses" (HEI 2).

All four HEIs reported that they made curriculum adaptations to better align with DiGNI requirements.

All respondents who answered the question agreed that the DiGNI has the potential to adequately prepare students to meet professional competencies. LHP Skillnet support and inter-institutional communication were universally rated as "High" and "Very Effective," respectively, highlighting the strength of collaboration and support structures.

Overall, respondents described student engagement and motivation in the DiGNI as positive, with some highlighting that participants are enthusiastic, actively contribute to discussions, and bring valuable clinical experience that enriches learning.

Some noted that it took time for students to settle into the programme, but once familiar, they became highly engaged and keen to share ideas and learn from peers. While most feedback was positive, a few observed variation in commitment levels, some students fully immersed themselves, while others participated at the minimum required level. One respondent suggested additional academic support could further enhance engagement.

2 Virtual Learning Environment (VLE)

5.2 Perspectives on Content, Mode of Delivery, and Assessments

Survey responses indicate a strong endorsement of the DiGNI content, with the curriculum being viewed as providing a comprehensive coverage of gerontological nursing, including advanced clinical skills, leadership, management, and research competency. It should be noted that this reflects the requirements outlined in the LHP Skillnet call for tender.

Respondents noted that the content is both relevant and immediately applicable, with students often implementing new practices and innovations in their workplaces as a direct result of their learning.



“The programme has given students confidence to make suggestions and implement change within their setting based on the knowledge gained through the programme.” (HEI 3a)

This view of the HEIs is supported by the responses from the Enrolled Nurses outlining specific examples.

Respondents identified the DiGNI main impacts as substantially enhancing student knowledge, clinical skills, and career opportunities. Students gained a deeper, evidence-based understanding of gerontology-specific issues such as dementia care, chronic disease management, palliative care, and the complex needs of older adults.

Practical skills improvements included patient assessment, care planning, ethical and legal decision-making, and advocacy, alongside strengthened critical thinking and research appraisal abilities.

Many noted increased confidence to suggest and implement workplace changes, take on leadership roles, and apply best practice to improve care quality. The programme also fostered more positive attitudes toward ageing, encouraging compassionate, person-centred care.

The inclusion of evidence-based practice and critical appraisal skills is particularly valued, as it empowers nurses to advocate for high-quality care and professional integrity.



“The initiative deepens nurses’ understanding of gerontology-specific health issues, including dementia care, chronic disease management, and palliative care. It equips them with up-to-date, evidence-based practices tailored to the complex needs of older adults.” (HEI 3b)

5.3 Attendance and Completion Rates

Attendance rates were generally positive, with high levels of student engagement reported once initial adaptation challenges were overcome. One institution did note issues with students enrolling but not participating or withdrawing without communication. To address this, they suggested the introduction of formal agreements outlining expectations and commitment prior to enrolment.

"At the beginning it took the students some time to get the hang of the sessions and participate, but as everything takes time they quickly adjusted and the students taking this programme are currently the most enthusiastic group we have. They participate in every session and discuss topics in depth."(HEI 3b)

At the time of the preparing this report, completion rates differed across institutions. Collectively, of the 198 participants who registered and commenced the programme, 160 completed the programme, 24 deferred (all of which recommenced the programme in September 2025) and 14 withdrew.

5.4 Conclusion

In summary, the DiGNI is valued by participating HEIs, with strong evidence of positive impacts on students, institutions, and the broader healthcare sector. Responses indicated that the key factors for the initiative's success include strong organisational and managerial support, consistent funding, protected study time, an engaged student body, and a well-designed curriculum covering advanced clinical skills, leadership, and research.



6

Perspectives of Enrolled Nurses

6. PERSPECTIVES OF ENROLLED NURSES

This section presents an analysis of the survey responses from nurses. Of the 198 nurses enrolled and participating, 129 completed the first survey (wave 1) and 71 completed the Wave 2 post-programme evaluation. 34 of the 198 are still on the programme with a completion date not until Dec 2025 or Jan 2026 and these will be included in the 2nd report.

This cohort represents a diverse group of nursing professionals, predominantly female (81%, n=105) and aged 30-39 years (51%, n=66), with significant prior nursing experience. The majority possessed six or more years of nursing experience (83%, n=107), indicating that the programme attracted experienced professionals seeking to deepen their expertise in gerontological care.

The programme's impact extends far beyond traditional educational outcomes, demonstrating tangible career advancement opportunities and workplace transformation. Nearly one in five participants (18%) that responded to the question on career progression (n=100) experienced career progression through promotion or new roles in gerontology, while 81% reported feeling better positioned to achieve their career aspirations and 16% reporting that it may help them achieve their career aspirations.

Most significantly, **84%** of participants successfully applied their newly acquired knowledge in their workplace settings, with **64%** implementing specific practice changes that directly benefited older adult care.

Most of the responses centred on adopting a more person-centred, holistic approach to caring for older adults. Common themes included improving dignity, independence, and meaningful engagement; tailoring care plans to individual preferences; and integrating evidence-based interventions such as falls prevention programmes, dementia care frameworks (e.g., VERA, DCM, PINCH ME), dietary and dining experience enhancements, and responsive behaviour management strategies.

Three respondents implemented quality improvement initiatives, updating assessment tools, refining care planning and auditing processes, improving safeguarding, and enhancing medication management through regular reviews and polypharmacy reduction. Others introduced staff education and on-site training on topics such as Non-Cognitive Symptoms of Dementia (NCSD), communication, and cultural responsiveness.

Additional impacts included better legal and ethical decision-making, early onset dementia advocacy, comprehensive geriatric assessments, and improved multidisciplinary collaboration.

The high satisfaction levels reflect the programme's quality and relevance to contemporary gerontological nursing practice. An overwhelming 93% of participants expressed satisfaction with the programme overall, while 73% rated the content as very relevant to their current roles.

The programme's impact on professional confidence was equally impressive, with 98% reporting confidence in their gerontological nursing competencies.

TABLE 6: How confident do you now feel in your gerontological nursing role?

Response	Percent (valid)	Frequency
Extremely confident	65.6	42
Somewhat confident	32.8	21
Neutral	1.6	1
TOTAL (valid)	100.0	64

These outcomes are further validated by the programme's outstanding Net Promoter Score of 9.25 out of 10, with over 81% scoring 9 or 10 recommendation ratings.

6.1 Demographics and Career Trajectory Comparison

The pre-post analysis of participant demographics reveals important insights into programme effectiveness and participant outcomes. While baseline demographics remained stable across the evaluation period, the career progression data demonstrates significant professional advancement among programme participants. The 17.5% who achieved promotion or new gerontological roles represents substantial career mobility in a relatively short timeframe.

Career aspiration achievement data provides compelling evidence of programme effectiveness, with 97% of participants reporting improved positioning to achieve their stated career goals. This outcome suggests that the programme successfully enhanced participants' qualifications, confidence, and competencies in ways that directly support their professional development objectives.

The comparison between initial career aspirations and post-programme outcomes reveals strong alignment between participant expectations and actual achievements. Many participants who initially expressed interest in management roles, specialised positions, or advanced practice opportunities reported concrete progress toward these goals following programme completion.

6.2 Programme Expectations Versus Reality

The analysis of participant expectations compared to programme delivery reveals generally positive alignment, with most participants reporting that the programme met or exceeded their initial expectations. This finding suggests effective programme marketing, realistic expectation setting, and high-quality programme delivery across all components.

Content relevance assessment showed that 73% of participants rated the programme as “very relevant” to their current roles, indicating strong alignment between curriculum design and workplace needs. The remaining 27% of participants rated the content as “relevant”, with no participants rating the programme as irrelevant to their professional responsibilities.

Learning format showed significant improvement from pre-programme confidence to post-programme satisfaction. Participants initially expressed some uncertainty about blended learning approaches but ultimately reported high satisfaction with the delivery format’s effectiveness for their learning needs. 97% of respondents reported the blended approach as being effective with 73% of these reporting it as “Very effective”.

This finding validates DiGNI’s pedagogical approach and suggests that concerns about online learning can be successfully addressed through programme design and implementation.

6.3 Knowledge and Skill Development Progression

The comparison between hoped-for learning outcomes and actual knowledge gained reveals success in meeting participant learning objectives. Leadership and management skills emerged as the most frequently reported area of knowledge gain (35%), followed by specialised clinical knowledge in areas such as dementia care (10%) and evidence-based practice (10%).

DiGNI’s emphasis on critical thinking, research literacy, and evidence-based practice resonated strongly with participants who sought to enhance their professional competencies beyond basic clinical skills.

Responses that described how knowledge was applied revealed that participants successfully integrated new learning with existing professional knowledge, creating enhanced competency profiles that combine experience-based wisdom with current best practice approaches. This integration represents sophisticated professional development that extends beyond simple knowledge acquisition to encompass practice transformation.

6.4 Thematic Analysis of Professional Development Outcomes

6.4.1 Most Valuable Aspects

The thematic analysis of participant feedback reveals distinct patterns in programme value perception, with leadership and management development emerging as particularly valuable. Participants highlighted the programme’s effectiveness in developing leadership competencies that directly applied to their workplace responsibilities and career aspirations.

Clinical knowledge enhancement was equally valued (21% of responses), with participants appreciating the programme’s comprehensive approach to gerontological nursing science. The integration of current research with practical application strategies resonated strongly with experienced practitioners seeking to update and validate their clinical expertise.

Respondents reported that expert sessions and specialist input provided unique value through exposure to recognised leaders in gerontological nursing and related fields. Participants valued the opportunity to learn from practitioners with diverse backgrounds and specialised expertise, broadening their understanding of contemporary approaches to elder care.

Communication and peer interaction opportunities created unexpected value through professional networking and collaborative learning experiences. Participants reported appreciation for the opportunity to connect with colleagues from different care settings and share experiences and insights about common challenges in gerontological nursing practice. This was reported by nurses enrolled in both an online and blended setting.



“Additionally, the chance to collaborate with peers who share a passion for elderly care has been incredibly enriching.”(R057)

“The programme fosters a collaborative learning environment, encouraging interaction and knowledge sharing among peers, which has been beneficial for personal and professional growth.”(C018)

6.4.2 Knowledge and Skill Development

Leadership and management skills were the most commonly referenced (35% of categorised responses), reflecting both participant priorities and programme curriculum. The development of these competencies addresses critical sector needs while supporting individual career advancement objectives.

Dementia care expertise emerged as a key area of knowledge development (10% of responses), reflecting the high prevalence of cognitive impairment among older adults in care settings and the specialised knowledge required for effective dementia care. Participants valued the programme's evidence-based approach to dementia care challenges and person-centred intervention strategies.

Respondents reported improvements in Evidence-based practice capabilities, including an enhanced ability to locate, evaluate, and implement research findings in their practice settings. This competency development supports quality improvement initiatives while positioning participants as knowledge leaders within their organisations.

Legal and ethical knowledge gained particular relevance given the complex regulatory environment surrounding elder care. Participants appreciated the programme's comprehensive coverage of contemporary legal and ethical issues, including consent, decision-making capacity, and human rights approaches to elder care.

6.4.3 Commitment to Gerontological Nursing Specialty

The analysis of commitment reveals significant positive impact, with participants describing enhanced understanding of gerontological nursing's unique value and professional identity. The programme appeared to strengthen participants' sense of professional purpose and commitment to excellence in older person's care.

Many participants reported that the programme helped them articulate the specialised knowledge and skills required for effective gerontological nursing practice. This enhanced professional identity supports advocacy for the specialty while contributing to the broader recognition of gerontological nursing's value within healthcare systems.



“The programme deepened my understanding of elderly care, strengthened my clinical skills, and reinforced my passion and long-term commitment to advancing quality, person-centred care in gerontological nursing.” (C009)

“It made me feel more confident to advocate for my clients. It was also an eye opener as it helped me to understand how much work and planning we still need to put in if we want to meet the needs of an ageing population in the future. I would love for gerontological nursing to be more recognised and valued.” (A001)

Career commitment was reinforced through exposure to the breadth and depth of gerontological nursing practice, with participants expressing increased enthusiasm for continued specialisation in older persons care³. This commitment is particularly valuable given recruitment and retention challenges within the sector.



“The programme has helped me give better and more confident care to older adults. I now understand their physical, emotional, and social needs more clearly. I’ve learned how to assess them properly, notice small changes in their health, and respond early.” (R050)

“I’m working in this field for over 10 years, and this programme has solidified that I would like to stay in this area of nursing.” (C003)

The programme's emphasis on person-centred care and dignity in ageing resonated strongly with participants' professional values, reinforcing their commitment to advocacy and excellence in elder care. This values alignment supports long-term retention within the specialty while promoting high standards of practice.



“I am now able to conduct a thorough assessment of older persons taken into consideration each person’s needs, and preferences to provide the best quality care outcomes.” (R060)

“The programme has had a significant impact on the quality of care I provide to older adults. It deepened my understanding of the physical, emotional, and psychological challenges that come with ageing, allowing me to deliver more compassionate and holistic care. I now place greater emphasis on person-centred approaches, effective communication, and promoting dignity and independence.” (R126)

³ As of 13/08/25, 35 nurses enrolled on the LHP Skillnet Postgraduate Diploma in Gerontological Nursing have applied for a Masters



7

Kirkpatrick's Four-Level Analysis

7. KIRKPATRICK'S FOUR-LEVEL ANALYSIS

The Kirkpatrick Levels Analysis at this early stage indicates that the DiGNI successfully achieved its objectives across all evaluation dimensions. The programme demonstrates

- Exceptional participant satisfaction with outstanding recommendation scores
- Successful knowledge acquisition with high application rates in practice
- Widespread behavioural change leading to improved quality of care
- Significant organisational impact through career advancement and continued professional development

Level 1 – Reaction (Participant Satisfaction and Engagement)

Participants reported consistently high satisfaction with the programme, with "very satisfied" ratings increasing from 66% programme to 83% post-programme. The programme maintained strong perceptions of content relevance, with over 70% rating it as "very relevant," and achieved an exceptional mean recommendation score of 9.25/10. These findings demonstrate that the DiGNI was both engaging and perceived as directly applicable to participants' professional contexts.

Kirkpatrick Level	Dimension	Metric	Early-Programme (Wave 1)	Post-Programme (Wave 2)	Outcome
Level 1: Reaction	Overall Programme Satisfaction	Very Satisfied	85/129 (66%)	57/69 (83%)	Significant improvement in satisfaction
Level 1: Reaction	Content Relevance	Very Relevant	111/129 (86%)	47/64 (73%)	High relevance maintained
Level 1: Reaction	Programme Recommendation	Mean Score (0-10)	Not measured	9.25/10	Outstanding recommendation score

Level 2 – Learning (Knowledge, Skills, and Confidence)

The programme significantly enhanced participants' professional confidence, with two-thirds rating themselves as "extremely confident" by programme end. Substantial skill gains were reported, with 63.5% noting that their expertise had "much improved." Most notably, 95% of participants indicated they had successfully applied the knowledge gained directly in their workplace, reflecting strong learning transfer.

Kirkpatrick Level	Dimension	Metric	Early-Programme (Wave 1)	Post-Programme (Wave 2)	Outcome
Level 2: Learning	Professional Confidence	Extremely Confident	Not measured	42/69 (67%)	Enhanced professional confidence
Level 2: Learning	Expertise Development	Much Improved	Not measured	40/63 (63.5%)	Significant skill enhancement
Level 2: Learning	Knowledge Application	Applied in Workplace	Not measured	61/64 (95%)	Excellent knowledge transfer

Level 3 – Behaviour (Application in Practice)

Behavioural change was evident, with 64% of participants implementing tangible changes in their practice following the programme. The impact on care quality was particularly strong, with 95% reporting improvements attributable to the training. This demonstrates that learning outcomes translated effectively into real-world practice, leading to meaningful changes in service delivery.

Kirkpatrick Level	Dimension	Metric	Early-Programme (Wave 1)	Post-Programme (Wave 2)	Outcome
Level 3: Behaviour	Practice Changes	Implemented Changes	Not measured	41/64 (64%)	High rate of practice transformation
Level 3: Behaviour	Quality of Care Impact	Reported Improvements	Not measured	60/63 (95%)	Widespread care quality improvements

Level 4 – Results (Organisational and Career Impact)

The programme yielded measurable benefits at the organisational and professional levels. Nearly one in five participants (18%) reported career progression through promotion or new roles. Furthermore, 81% felt better positioned to achieve their career goals, and 92% intended to pursue further education, indicating that the programme acted as a catalyst for sustained professional growth and sectoral capacity building.

Kirkpatrick Level	Dimension	Metric	Early-Programme (Wave 1)	Post-Programme (Wave 2)	Outcome
Level 4: Results	Career Progression	Promoted/ New Role	Not measured	11/63 (18%)	Significant career advancement
Level 4: Results	Career Aspirations	Better Placed to Achieve	Not measured	52/64 (81%)	Strong career goal advancement
Level 4: Results	Future Development	Planning Further Education	Not measured	47/51 (92%)	Sustained professional development



8

Conclusion

8. CONCLUSION

The evaluation provides preliminary evidence of the effectiveness of DiGNI in enhancing professional competencies, supporting career advancement, and ultimately improving the quality of care provided to older adults.

The success across all levels of Kirkpatrick's evaluation framework demonstrates comprehensive impact that extends from individual satisfaction to organisational and career outcomes.

The high levels of knowledge application and practice change implementation indicate that the programme successfully bridged the theory-practice gap that often challenges professional development initiatives.

Participants' ability to translate learning into meaningful workplace improvements represents the ultimate validation of programme effectiveness and relevance to contemporary gerontological nursing practice.

Career advancement outcomes provide tangible evidence of programme value for individual participants while addressing sector needs for qualified nursing leadership.

The substantial percentage of participants feeling better positioned for career advancement suggests that programme benefits may continue to manifest over time as participants pursue additional opportunities for professional growth.

8.1 Strengths

The combination of blended and online learning format proved effective for working nurses, enabling participation without compromising professional responsibilities. This delivery model should be considered for replication in other professional development contexts within healthcare settings.

Faculty expertise and programme content quality received ratings from participants, reflecting careful curriculum development and instructor selection. The integration of theoretical knowledge with practical application strategies resonated strongly with experienced practitioners seeking to enhance their expertise.

The emphasis on leadership development addressed critical sector needs while supporting individual career aspirations. This dual benefit created strong alignment between participant objectives and broader workforce development goals.

8.2 Possible Enhancements

Future programme iterations should consider expanding the offering to meet demand, including through specialisms, while maintaining the quality standards that contributed to exceptional outcomes. The high recommendation scores and participant enthusiasm suggest strong potential for programme growth.

Enhanced orientation and onboarding processes could address initial participant concerns about online learning platforms and academic expectations. Several participants noted challenges with programme navigation during early stages, suggesting opportunities for improvement in participant preparation.

Continued emphasis on practical application and workplace integration should remain central to programme design. The exceptional success in knowledge application and practice change implementation validates this approach while suggesting opportunities for further enhancement through structured mentoring or peer support initiatives.

8.3 Programme Scalability

There was strong consensus that the initiative could be successfully scaled to other specialisms, with dementia care, tissue viability, and palliative care most frequently cited as areas of need.

8.4 Future Development

The demonstrated impact on professional competencies, career advancement, and care quality supports the development of future programme iterations while exploring opportunities for broader implementation.

Integration with career pathway development and professional recognition systems could enhance programme value while supporting sector workforce development objectives. DiGNI's success in preparing nurses for leadership roles suggests potential alignment with formal career progression frameworks.

Research and evaluation capacity should be maintained to support continuous programme improvement and contribute to the broader evidence base on gerontological nursing education.





9

Bibliography

9. BIBLIOGRAPHY

- Aleo, G., Walsh, N., Pagnucci, N., Kearns, T., Fitzgerald, C., 2024. Directors of Nursing in the Irish long-term care setting: Learning and Development supports required to meet challenges in their current role. LHP Skillnet (commissioned by Skillnet Ireland).
- Coffey, A., Savage, E., Leahy-Warren, P., Mulcahy, H., Wills, T., McCarthy, V., Fehin, P., McLoughlin, K., Ó Doibhlin, D., Benefield, L., O' Sullivan, B., Hegarty, J., 2016. Systematic Literature Review and National Focus Groups to Support the Development of a Strategic Vision and Educational Framework for Gerontological Nursing (Report).
- Department of Health, 2020. COVID-19 Nursing Homes Expert Panel: Final Report. Government of Ireland.
- Fitzpatrick, J.M., Bianchi, L.A., Hayes, N., Da Silva, T., Harris, R., 2023. Professional development and career planning for nurses working in care homes for older people: A scoping review. *Int. J. Older People Nurs.* 18, e12519. <https://doi.org/10.1111/opn.12519>
- Glasper, A., 2018. Problems affecting the continuing professional development of nurses. PubMed.
- Lang, D., Hoey, C., 2017. The development of a strategic vision and educational framework for Gerontological nursing | *International Journal of Integrated Care*. <https://doi.org/10.5334/ijic.3921>
- McShane, N., Monaghan-Tyer, F., Toner, R., 2024. Establishment of Registered Advanced Nurse Practitioners (RANP) Gerontology Clinics in Two Ambulatory Day Units. *Age Ageing* 53, afae178.231. <https://doi.org/10.1093/ageing/afae178.231>
- Noonan, C., Davey, N., Farrelly, A., Soh, J., 2024. Enhancing Care For Nursing Home Residents Through A Specialised Geriatrician-led Acute Care Team. *Age Ageing* 53, afae178.286. <https://doi.org/10.1093/ageing/afae178.286>

