

Public involvement in pre-registration nursing education: A scoping review of educational activities and their conceptual underpinnings.

MUDD, Alexandra <<http://orcid.org/0000-0002-6455-5211>>, VOLDBJERG, Siri Lygum, FEO, Rebecca, GOLDSCHMIED, Anita Z and CONROY, Tiffany

Available from Sheffield Hallam University Research Archive (SHURA) at:

<https://shura.shu.ac.uk/37844/>

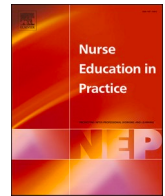
This document is the Published Version [VoR]

Citation:

MUDD, Alexandra, VOLDBJERG, Siri Lygum, FEO, Rebecca, GOLDSCHMIED, Anita Z and CONROY, Tiffany (2026). Public involvement in pre-registration nursing education: A scoping review of educational activities and their conceptual underpinnings. *Nurse education in practice*, 95: 104903. [Article]

Copyright and re-use policy

See <http://shura.shu.ac.uk/information.html>



Public involvement in pre-registration nursing education: A scoping review of educational activities and their conceptual underpinnings

Alexandra Mudd^{a,b,*}, Siri Lygum Voldbjerg^c, Rebecca Feo^a, Anita Goldschmied^b, Tiffany Conroy^a

^a Flinders University, Bedford Park, South Australia 5042, Australia

^b Sheffield Hallam University, College of Health, Wellbeing and Life Sciences, Sheffield S1 1WB, UK

^c Aalborg University, Aalborg, Region Nordjylland 9220, Denmark

ARTICLE INFO

Keywords:

Public involvement
Nursing education
Pedagogy
Educational activities
Collaboration
Stakeholder involvement

ABSTRACT

Aim: This scoping review maps the literature on public involvement in pre-registration nursing education, focusing on educational activities and the explicit theories, frameworks or models used to inform or justify these activities to support educational practice.

Background: Public involvement is an established and expanding feature of pre-registration nursing education. However, there is limited clarity regarding the range of activities currently undertaken and the extent to which these are informed by theories, frameworks or models.

Design: A scoping review.

Methods: A systematic search was conducted in CINAHL Ultimate, Medline, Scopus, ERIC, PsychINFO, Emcare, Australian Education Index and ProQuest Dissertations. The review followed the principles of the Joanna Briggs Institute methodology, the PRISMA-ScR checklist and guidance on artificial intelligence use in evidence synthesis.

Results: The review included 144 sources with diverse methodologies and geographical origins. A wide range of public involvement activities were identified, most commonly direct involvement in educational activities such as storytelling, teaching and developing materials. Few sources provided detailed descriptions of activities, learning outcomes, evaluation mechanisms or required resources. Only a small number of sources explicitly used theories, frameworks, or models to justify involvement or inform their educational design, although many referenced broader conceptual or policy drivers.

Conclusion: Public involvement in pre-registration nursing education encompasses diverse activities with varied conceptual underpinnings. Greater transparency in reporting, including clearer descriptions of activities and their evaluation, is needed to strengthen the evidence base, support practice and empower stakeholders.

1. Introduction

Pre-registration nursing education is tasked to meet national and international quality standards and align with population needs (World Health Organization, 2021). Public involvement is a growing element of pre-registration nursing education and rationalised by reference to democracy (Rowland et al., 2019), civic responsibilities (Scott et al., 2021; Towle et al., 2010) and social justice (Feijoo-Cid et al., 2024). In countries such as the UK and Australia, there are explicit accreditation requirements for nursing pre-registration education to include public involvement (Australian Nursing and Midwifery Accreditation Council,

2019; Nursing and Midwifery Council, 2023). Although accreditation requirements are most explicit in these countries, understanding how public involvement is undertaken may also be relevant to educators in settings where it is less established. Public involvement has resonance for nursing as there is growing emphasis on care being person-centred (McCormack, 2017) and the importance of therapeutic relationships (Feo et al., 2017).

This review focuses on public involvement in pre-registration nursing education (programmes leading to initial professional registration or licensure as a nurse). For this review, public involvement in pre-registration nursing education was defined as the active and purposeful

* Corresponding author at: Flinders University, Bedford Park, South Australia 5042, Australia.

E-mail address: A.mudd@shu.ac.uk (A. Mudd).

<https://doi.org/10.1016/j.nepr.2026.104903>

Received 27 April 2026; Received in revised form 12 June 2026; Accepted 26 June 2026

Available online 29 June 2026

1471-5953/© 2026 The Authors. Published by Elsevier Ltd. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).

contribution of members of the public to educational activities for pre-registration nursing students. Terminology is a consistent challenge within public involvement (Burnier et al., 2022; Scammell et al., 2016; Towle et al., 2010; Tørring and Pedersen, 2022). A wide variety of terminology is used to describe public involvement, and this has been found to be confusing (Burnier et al., 2022). Since language in this context transmits values and beliefs (Spencer et al., 2011) and is closely aligned to power and control (McLaughlin, 2009), the term public involvement has been used in this review to be inclusive and, in an attempt, to avoid language perceived as pejorative or demeaning.

When contributing to pre-registration nursing education, the public can provide unique understandings of individual experiences (Horgan et al., 2020), giving insights that cannot be generated internally in pre-registration nursing education (Happell et al., 2020). This suggests that public involvement is not solely concerned with representation but also with the inclusion of distinct forms of knowledge. However, though mandated, it is not clear how public involvement should be operationalised (Smith et al., 2016) and there are concerns that literature on public involvement is not always explicit on how it is informed by pedagogical theory or frameworks (Bennett-Weston et al., 2023; Bocking et al., 2019).

Alongside evolving regulatory, accreditation and workforce expectations (Australian Nursing and Midwifery Accreditation Council, 2019; Nursing and Midwifery Council, 2023), several broader developments have created new considerations for public involvement in pre-registration nursing education. First, there is a growing emphasis on the importance of pedagogical methods and technologies to operationalise nursing education (World Health Organization, 2021) and this extends to public involvement. Second, pre-registration nursing education is resource intensive and greater considerations of value for money have put additional attention on pedagogical quality and effective use of resources (O'Connor et al., 2021; Towle et al., 2010). Third, societal demographics demonstrate that increasing numbers of nurses will be required in future, suggesting larger course numbers (Boniol et al., 2022; NHS England, 2023). Fourth, higher education is still emerging from technological changes brought by the COVID-19 pandemic where technology was operationalised and adapted to meet new and emerging needs (Rapanta et al., 2021). Finally, there is growing awareness of nursing students' diverse learning needs, such as student neurodiversity, (Ramjan et al., 2025; Royal College of Nursing, 2022), which may require reasonable adjustments which have an impact on public involvement. In this context there is a need to ensure that public involvement activities and their underpinning theories align with the current reality of pre-registration nursing education, are designed to enhance student learning and are grounded in an appropriate evidence base (O'Connor et al., 2021; World Health Organization, 2021).

Against this backdrop, understanding how public involvement is undertaken and how student learning is conceptualised may support nurse educators in making informed pedagogical decisions. Educators need high-quality information to support informed and intentional choices about public involvement and to ensure involvement activities are underpinned by an appropriate evidence base (Haycock-Stuart et al., 2016). Without careful consideration of the nature of the educational activities and how the learning occurs, there is a risk of public involvement being performative or tokenistic rather than making a meaningful contribution to student learning (McCutcheon and Gormley, 2014; Odejimi et al., 2021). Reports of public involvement contributors and nursing educators perceiving certain activities such as storytelling or providing testimony as tokenistic highlight the importance of carefully designing involvement activities (Happell and Bennetts, 2016; McPhee et al., 2023; Questroy et al., 2022). At the same time, changes in pre-registration nursing education, including the need to expand nursing education capacity (World Health Organization, 2025), larger student cohorts (Scammell et al., 2016) and the growth of digital and hybrid learning approaches (Janes et al., 2023), suggest there is scope for innovation and adaption in how public involvement is undertaken.

Previous reviews on public involvement in pre-registration nursing education have contributed to understanding, however, methodological and conceptual limitations remain. These include the searches being conducted a significant time ago (Scammell et al., 2016), concentrating on clinical education or academic education in isolation (Suikkala et al., 2018; Tørring and Pedersen, 2022) and attention to co-production involving the public and students (O'Connor et al., 2021). Other reviews have not explicitly explored the pedagogy involved (Tørring and Pedersen, 2022) or focused on the effects of public involvement, with little detail on the activities or the pedagogical approaches (Alberti et al., 2023). Reviews that have focused on theory have typically required specific detail about the theory to be reported, resulting in a detailed exploration of only a small number of articles within this broad topic (Bennett-Weston et al., 2023). Therefore, a scoping review is needed to systematically map current public involvement activities and their underlying theories, providing a comprehensive synthesis of involvement activities and pedagogical underpinnings across pre-registration nursing education.

2. The review

2.1. Objective and review questions

The objective of this scoping review is to map literature on public involvement in pre-registration nursing educational activities by extracting details of the activities, how they are operationalised and the theories, frameworks or models stated as informing or justifying them. The review has two questions:

- What types of educational activities involving members of the public are described in pre-registration nursing education?
- How are theories, frameworks or models used to inform or justify public involvement in pre-registration nursing educational activities reported in the literature?

3. Methods

3.1. Design

A scoping review was selected as it facilitates identification of available heterogeneous evidence in an exploratory and descriptive manner (Grant and Booth, 2009; Peters et al., 2021) in areas where evidence is still developing (Mak and Thomas, 2022). The design of this scoping review was informed by the JBI methodology for scoping reviews with its nine stages (Peters et al., 2020) and reporting aligns with the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist (Tricco et al., 2018). The original protocol for this scoping review was registered with Open Science Framework <https://osf.io/a5y36/>. The scoping review protocol was peer reviewed by a JBI trained reviewer and two volunteer members of the public.

3.2. Search methods

Following the JBI manual, Population, Concept, Context was used to structure the inclusion and exclusion criteria (Peters et al., 2020). Full details of the inclusion and exclusion criteria are available in Table 1. The population consisted of members of the public, who at the time of their involvement, were not acting in a professional healthcare capacity or were not students undertaking in healthcare studies. This restriction was to facilitate focus on members of the public rather than healthcare professionals or healthcare students. The concept was active and purposeful involvement in a nursing pre-registration educational activity. Active and purposeful involvement was used to distinguish between incidental interactions between members of the public and nursing students where the public were undergoing healthcare treatment or

Table 1
Inclusion and exclusion criteria.

	Inclusion	Exclusion
Population	Members of the public	Professionals employed within the healthcare settings or students enrolled in healthcare courses
Concept	Public involvement must be conscious Public involvement must be within a nursing pre-registration educational activity Public involvement can take any form Articles that explore staff/public/patient/academic experiences of engagement can be included if they discuss the type of public involvement or pedagogical or theoretical underpinning of involvement	Interactions between nurses or nursing students and members of the public without specific educational activity Activities where the public are unaware of the educational activity Descriptions of theoretical frameworks without discussion of potential practical application Involvement not related to education (e.g. public involvement in research or clinical practice) Descriptions of public involvement in educational recruitment activities (e.g. public involvement in interviews for educational recruitment) Education focused on interprofessional activity rather than nursing specific activity Descriptions of actors or people role playing as people receiving care
Context	Public involvement can take place at any location where nursing pre-registration educational activities are undertaken (university, hospital, clinic etc.) Public involvement can take place at any time and in any country or territory	Public involvement in medical or allied health led educational activities where nursing students are incidental or peripheral participants
Sources of evidence	Articles in any language – All types of publications indexed in professional databases, including but not limited to primary research, secondary research, case studies, evaluations and theses	
Time frame	Published since 2014	

investigation and were not actively engaged in specific purposeful educational activity. The inclusion and exclusion criteria were purposely broad to facilitate inclusion of sources even if there were not comprehensive descriptions of how educational activities occurred. The context included all settings where pre-registration nursing education takes place. There were no restrictions on publication type and all languages were included. Sources published after 2014 were included to focus on current public involvement activity and update the earlier review conducted by Scammell et al. (2016).

3.3. Search strategy

A comprehensive search string was developed by reading and reviewing public involvement articles, exploring previous reviews and testing the search in CINAHL, Medline and ERIC. The search string was then amended and refined before being translated with assistance from the Bond University Institute of Evidenced-based Healthcare, Systematic Review Accelerator tool (Clark et al., 2020). The following databases were used: CINAHL Ultimate (EBSCO), Medline (Ovid), SCOPUS (Elsevier), ERIC (ProQuest), Emcare (Ovid), Australian Education Index (ProQuest), PsycINFO (Ovid) and ProQuest Dissertations & Theses Global (ProQuest). The search string was tested by assessing whether known articles were retrieved. The search process was discussed and

reviewed by an experienced university librarian and final searches completed in April 2025.

3.4. Screening process

Abstracts of sources retrieved from the database search results were pre-screened using a bespoke AI screening tool developed specifically for this review (see (Mudd et al., 2025) for details redacted for anonymity). This bespoke pre-screening method was designed to remove highly irrelevant results and aligns with the principles included in the Position Statement on Artificial Intelligence (AI) Use in Evidence Synthesis Across Cochrane, the Campbell Collaboration, JBI and the Collaboration for Environmental Evidence 2025 (Flemyng et al., 2025). Results of pre-screening were uploaded into Covidence (Covidence, 2025) and duplicates were removed. Sources without readily available abstracts at the database stage were accessed and missing abstracts located. As per JBI guidance (Peters et al., 2020), a random selection of 25 sources underwent pilot testing amongst the team using the inclusion and exclusion criteria. The team met to discuss the pilot, and consensus was achieved amongst the reviewers. The team agreed that abstract screening should continue conducted by the lead author. During this period there was regular team discussion of progress until all abstracts were reviewed. For full text review, a random selection of 28 sources, 10% of the sample, underwent pilot testing among the team. Again, the team met to discuss the results, consensus was achieved amongst the reviewers and screening continued by the lead author. Where full text review and/or extraction made explicit reference to another potential source of interest for this review, that source was reviewed as per the inclusion/exclusion criteria.

3.5. Data extraction

A data extraction tool was developed in Microsoft Excel to provide a descriptive summary of the results aligned to the objective and research questions and specifically noting the source characteristics, followed by details of public involvement activities and underlying theory or pedagogy. As the review included both review and non-review sources, two versions of the data extraction tool were developed to align with the different source types. Due to time and feasibility, authors were not contacted where information was missing from the sources. Sources were not excluded on this basis and remained eligible for inclusion in the review. A piloting of the data extraction tool with 6 sources was performed and the team met to discuss progress and agree consensus. There was no critical appraisal of sources as per JBI guidance (Peters et al., 2020). To support transparency, reproducibility and future research, review materials including the protocol, full search strategies, database translations, data extraction template and extraction dataset are available on the Open Science Framework <https://osf.io/a5y36/>.

3.6. Data analysis and presentation

Data analysis followed JBI guidance and focused on descriptive mapping of the sources in regard to the two research questions (Peters et al., 2020). Where multiple sources described the same specific public involvement activity, then the activity was treated as the unit of analysis to avoid duplication or over-representation of an activity. For example, one source may describe an activity and evaluate it from a public perspective, while another evaluates the same activity from the student perspective. Although reported in two sources, this represents one activity.

4. Results

The results are presented in three sections. The first reports the selection of all included sources. The second presents findings from the non-review sources, including their characteristics, the educational

activities involving members of the public and the theories, frameworks or models associated with these activities. The final section summarises the review sources.

4.1. Source selection

Across the eight databases, 9066 sources were identified of which 3289 were duplicates identified by Covidence. 5591 sources containing an abstract were pre-screened using the bespoke AI screening tool and 4087 were excluded. 186 sources were unable to be pre-screened using AI and proceeded for manual review. Thereafter, 1690 sources underwent researcher title and abstract screening, 63 further duplicates were removed and 1349 sources excluded. In total 278 full text sources were assessed for eligibility and 141 were excluded (for full breakdown please see Fig. 1, the completed PRISMA flowchart). During full text review and data extraction a further 7 sources were identified and included. Overall, 144 sources were included in the review, 131 were a range of primary research, discursive papers and case studies, while 13 were review articles.

4.2. Non-review sources

4.2.1. Source characteristics

This section reports the characteristics of the non-review sources (n = 131). Sources were published between 2014 and 2025. Publications increased steadily from 2014 until a peak in 2020 and then a small decline in the years to 2025. (Note the search was conducted in April 2025). Sources originated from a range of countries across Europe, North America, Asia and Oceania, with the largest contributions from the UK (n = 58), Australia (n = 28) and the USA (n = 11). Table 2 provides a breakdown of published sources by country. Eight of the multi-country sources related to the same project reported across different publications. The inclusion criteria permitted all publication

Table 2
Breakdown of published sources by country.

Location	Sources
United Kingdom	58
Australia	28
United States	11
Multi-country	9
Canada	4
Spain	4
Finland	3
South Korea	3
Brazil	2
France	2
Israel	2
Republic of Ireland	2
Czech Republic	1
Italy	1
Japan	1

types, resulting in a heterogenous mix of sources, including empirical research, descriptive reports, case studies, commentaries and evaluations. Table 3 demonstrates the different publication types.

4.2.2. Educational activities involving members of the public involvement

Educational activities involving members of the public were discussed in most sources. Data were extracted on the characteristics of these activities, including activity details, the educational setting and context of the educational activities, associated resources or supporting elements, intended learning outcomes and reported evaluation.

One hundred and fourteen sources referenced some aspects of the educational activities that members of the public were involved in. Fig. 2 depicts the count of different educational activities specified in the sources. When describing the different activities, language used by study authors was reproduced. This means that there may be some overlap, as some sources described ‘teaching’ by members of the public and others

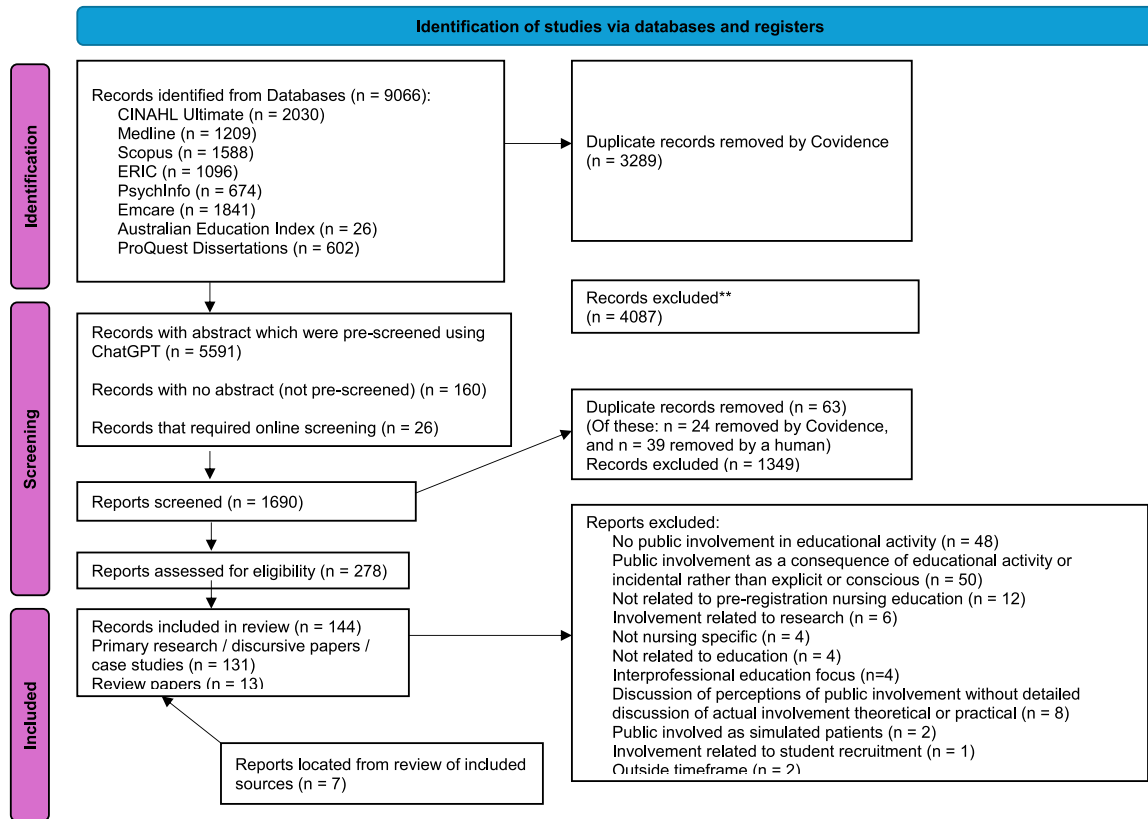


Fig. 1. PRISMA 2020 flow diagram of the study selection process.

Table 3
Count of the different source types.

Type of article	Count
Qualitative	58
Case study	27
Mixed methods	13
Discussion paper	10
Quantitative	10
Qualitative	4
Case study and evaluation	1
Editorial	1
Mixed methods	1
Opinion piece	1
Qualitative - case studies	1
Report	1
Review & qualitative	1
Review and case study	1
Thesis	1

described ‘guest lecturing’. Many sources referred to ‘question and answer’ as a form of activity or used similar terminology. This terminology was used by source authors to describe activities where members of the public responded to questions from students or nurse educators, although the format and level of detail reported varied across sources.

4.2.2.1. Activity details. A range of reported educational activities emerged and can be grouped into four broad categories according to the function of involvement: direct involvement in educational activities across settings, involvement in design, involvement in supporting structures and involvement in an external advisory role. Table 4 provides details and count of reported activities and their categories. Across countries, differences were noted in the most frequently reported public involvement activities. In the UK, the four most common activities were storytelling, teaching, developing materials and question and answer. In Australia, these were storytelling, developing materials, guest lecturing and teaching. In the USA, the most frequently reported activities were

visiting in community, developing materials, storytelling and question and answer. In addition, it was noted that storytelling and question and answer were reported as occurring simultaneously in multiple sources ($n = 14$).

4.2.2.2. Educational settings and context. Seventy-seven sources discussed a specific educational activity in detail. Data were extracted to report on the setting of the educational activity in the pre-registration nursing curriculum. Most sources described activity in an academic setting ($n = 51$) while clinical or community visiting settings were reported in 16 sources and combined clinical and academic setting in one source ($n = 1$). Only two of the 77 sources explicitly related to assessment activity, either formative or summative.

Most of the sources describing specific educational activities involved face-to-face participation by members of the public ($n = 62$). A small number of sources described written involvement ($n = 2$) or on-line involvement ($n = 4$), while several sources did not clearly specify whether involvement was in person ($n = 11$). Many sources outlined educational activities that were a unique experience for the students, with no element of replicability ($n = 52$). Thirteen sources detail elements of replicability, either for the participating students or for future cohorts. One example was the creation of video resources in partnership with members of the public to improve nursing students’ communication skills, which could be revisited by students across cohorts (Coyne et al., 2025).

4.2.2.3. Resources or supporting activities relating to public involvement. Fifty-four sources did not provide details of the support required for the public, such as preparation or debriefing. Twenty-one sources reported varying amounts of levels of support for the public involved. There were some examples of extensive information about support that was fully documented. For example, Raikes and Balen (2019) reported two days of preparatory visits to a prison to support members of the public prior to their educational workshop. Whereas Felton et al., (2018) described a

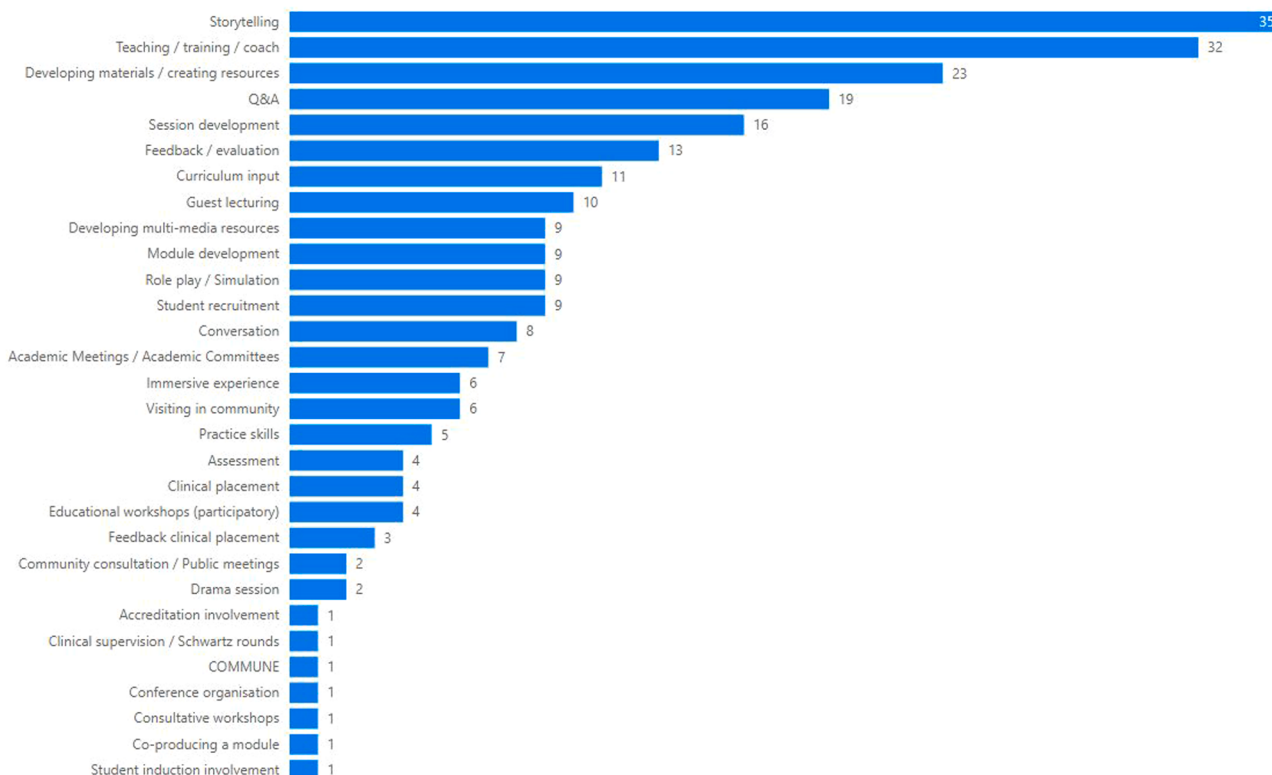


Fig. 2. Count of educational activities.

Table 4
Mapping of reported educational activities involving members of the public, categorised by type of activity with frequency counts.

Functional category	Public involvement activity
Direct involvement in educational activity across settings	Storytelling (n = 35), teaching/training/coaching (n = 32), question and answer (n = 19), feedback and evaluation (n = 13), guest lecturing (n = 10), role play/simulation (n = 9), conversation (n = 8), immersive experiences (n = 6), visiting in community (n = 6), practising skills (n = 5), assessment (n = 4), clinical placement (n = 4), educational participatory workshops (n = 4), feedback within clinical placement (n = 3), drama sessions (n = 2), clinical supervision (n = 1).
Involvement in design	Developing materials (n = 23), session development (n = 16), curriculum input (n = 11), module development (n = 9).
Involvement in supporting structures	Student recruitment (n = 9), academic meetings (n = 7), accreditation involvement (n = 1).
External advisory role	Consultative workshops (n = 1), community consultation (n = 2).

one-day preparatory workshop for members of the public.

Fifty-eight sources did not specify any organisation support such as payment, staff time, or infrastructure. Nineteen sources provided some details. Of the 19, seven explicitly referred to payment for members of the public. In one instance the public were given access to the University’s post-graduate teaching qualification education (Maher et al., 2017). Other examples included resources for a welcome pack (Tuohy et al., 2025) and funding to create specific roles to support community partnership working (Zandee et al., 2015).

4.2.2.4. Learning outcomes and evaluation. Twelve sources were explicit about the learning outcomes related to the activity (see Table 5). These learning outcomes were explored based on their explicit wording and descriptively categorised to illustrate the type of activity that was intended. Five sources articulated learning outcomes explicitly pertaining to partnership or relational engagement with members of the public. Thirty-nine sources described broad aims of the activity. Examples include obtaining feedback on interpersonal skills (Speers and Lathlean, 2015) and improving knowledge and understanding of culturally competent care (Mathew et al., 2017). In 26 sources the learning objectives were unspecified.

Table 5
Categorisation of explicit learning outcomes (Sources could be represented in more than one category where learning outcomes reflected multiple elements).

Categorisation of stated learning outcomes	Source
Learning outcome category	
Cognitive outcomes	Cassidy et al., (2023) Ottosen et al., (2023) Feijoo-Cid et al., 2022 Fenton, 2014 Carroll et al., (2018) Kaylor et al., (2024) Huteau et al., (2023) Goodhew et al., (2020) Banerjee et al., 2017
Practice-oriented outcomes	Beiers-Jones et al., (2023) Ottosen et al., (2023) Fenton, 2014 Carroll et al., (2018) Killam et al., 2025 Goodhew et al., (2020) Banerjee et al., 2017
Partnership-oriented outcomes	Fenton, 2014 Carroll et al., (2018) Killam et al., 2025 Huteau et al., (2023) Goodhew et al., (2020)

Fifty-nine sources involved some form of evaluation of the educational activity including informal mechanisms where authors described feedback without specifying evaluation methods used. Eighteen sources did not include any information about evaluation of the activity. Evaluation most involved students (n = 51) and less frequently members of the public (n = 24). Six sources described evaluation involving the public, students and the nurse educator or facilitator.

4.2.3. Theoretical approaches

The review identified two distinct ways theories, frameworks and models were used across the sources. First, to explain or provide a rationale for public involvement and second, to inform pedagogical approaches to public involvement. Sources were coded as containing theories, frameworks, or models when authors explicitly named and applied one in their description of the activity. Definitions of theories and framework were informed by Varpio et al. (2020), who describe theory as logically related propositions that explain relationships between concepts. Models were defined according to Fawcett (2000) as frames of reference used to interpret phenomena of interest, while concepts were defined in line with McKenna et al. (2014) as descriptive of phenomena. Sources were coded as containing conceptual drivers where activities were justified by concepts, justifications, or policy or accreditation requirements without an accompanying theory, framework, or model.

4.2.4. Theories, frameworks and models as rationales for public involvement

Of the included sources, 17 explicitly used theories, frameworks, or models as a rationale for the public involvement. These were grouped into three categories: first, nursing theories, such as Peplau’s Theory of Interpersonal Relations (1997); second, broad explanatory theories, such as Habermas’ Critical Social Theory (McCarthy, 1978) and third, practice-orientated frameworks, for example Leamy et al.’s Recovery-Orientated Care (2011). Table 6 provides details of the categories and extracted data relating to the theories, frameworks and models identified across the sources. In contrast, 110 sources relied on conceptual drivers to justify the activity without reference to a named theory or conceptual framework. Conceptual drivers underpinning public involvement were diverse and included value-based or policy motivations such as accreditation requirements, healthcare inequalities and social justice, power, challenging negative stereotypes, person-centred care and cultural understanding. The articulation of these drivers varied considerably across the sources and consistent categorisation was not feasible.

4.2.5. Theories, frameworks and models used to inform pedagogical design

Twenty-three sources explicitly used theories, frameworks, or models to inform their pedagogical design or conceptualise learning processes within educational activities. These were grouped descriptively into three categories: educational theories or frameworks such as Knowles’ theory of andragogy (1988); nursing-specific models for example Benner et al.’s Novice to Expert Theory (1984); and public involvement models such as Pomey et al.’s Montreal Model of Public Involvement (2015). Table 7 provides details of the theories, frameworks and models informing pedagogical design within public involvement educational activities. Originators of the theory, framework, or model are included if the source specified them and terminology is reported as used in the sources. Five of the 131 sources used theories, frameworks, or models to inform both the rationale for public involvement and the pedagogical design of the activity.

4.3. Review sources

Thirteen review sources were included. Authors were based in Australia (n = 3), the UK (n = 1), Canada (n = 2), multi-country collaborations (n = 2), Italy (n = 1), Korea (n = 1), the USA (n = 1),

Table 6
Theories, frameworks and models as rationales for public involvement.

Theories, frameworks and models as rationales for public involvement		
Category	Theory/Framework (Originator*)	Sources
Nursing theories	Human Caring Science (Watson)	Questroy et al., (2022)
	Theory of Interpersonal Relations (Peplau)	Heidke et al., (2018); Suikkala et al., 2018; Conlon et al., (2020)
Explanatory theories	Critical Social Theory (Habermas)	Bocking et al., (2019)
	Empathy (Rogers, 2004)	Heidke et al., (2018)
	Pedagogy of the Oppressed (Freire, 1971)	Conlon et al., (2020)
	Self Determination Theory (Deci and Ryan, 1985)	Tapsell et al., (2021)
	Socio-Cultural Theory (Wenger)	Tobbell et al., (2018)
	Socio-Cultural Theory Stigma (Goffman)	Kuti and Houghton, (2019) Raikes and Balen, 2019; de Almeida et al., 2021
Practice – orientated frameworks	Community as Partner Model (Vollman et al., 2012)	Carroll et al., (2018)
	Four models of the Physician-Patient Relationship (Emanuel and Emanuel)	Suikkala et al., 2018
	Ladder of Involvement (Tew et al.)	Feijoo-Cid et al., 2017; McCutcheon and Gormley, 2014; Suikkala et al., 2018; Sinfield, Pearson et al., (2021)
	Open Dialogue (Seikkula and Olson)	
	Person-Centred Care (McCormack and McCance)	Felton et al., (2018)
	Recovery – Oriented Care (Leamy et al.)	Thompson et al., 2025
	Spectrum of Involvement (Towle et al.)	Feijoo-Cid et al., 2017; Suikkala et al., 2018; Questroy et al., (2022)

Finland (n = 1) and Denmark (n = 1). Review types included scoping reviews (n = 6), systematic reviews (n = 2), integrative literature reviews (n = 2), one realist synthesis and two reviews where the type was unspecified. Some review sources focused on contexts such as mental health education (n = 3), clinical education (n = 2), or academic education (n = 2), whereas others focused on specific conditions (e.g. dementia or disability). The review sources provided useful contextual discussion of public involvement in pre-registration nursing education, although detailed descriptions of specific educational activities were minimal. Few reviews provided definitions of public involvement or co-production (n = 3) and discussion of required resources, support, evaluation of learning outcomes and theoretical or pedagogical approaches was limited. Nevertheless, the review sources were valuable in identifying additional non-review sources.

5. Discussion

This scoping review has identified a range of public involvement educational activities reported in the literature and explored the pedagogical, theoretical and conceptual frameworks underpinning them, which were often inconsistently articulated. The review gives rise to three main points of discussion: first, the range of public involvement activities and the practical features of their design and delivery, second, the use and role of theory and third the challenges of reporting and transparency in the literature.

5.1. Diversity of public involvement activities

This scoping review has identified that public involvement in pre-

Table 7
Theories, frameworks and models used to inform pedagogical design.

Theories, frameworks and models used to inform pedagogical design.		
Category	Theory/Framework (Originator*)	Sources
Educational theories and pedagogical frameworks	Andragogy (Knowles)	Pearson et al., (2021); Odejimi, 2017
	Constructivism (including social constructivism)	Stacey et al., 2015; Matora-Muzengi, 2021; Arblaster et al., 2023
	Social Constructivism (Vygotsky, 1978)	Pringe and Smith, 2022
	Critical Pedagogy (Freire, 1971)	Job et al., 2019; Dix, (2016)
	Experiential Learning	Maher et al., (2017); Job et al., 2019
	Experiential Learning (Kolb, 2014; Kolb et al., 2014)	Kuti and Houghton, (2019); Sandersen et al., 2023; Nash-Patel et al., (2022); Dugmore, 2017
	Heutagogy	Garner et al., 2022
	Liberation Pedagogy (Freire, 1971)	Bocking et al., (2019)
	Model of Empowerment (Freire, 1993)	Biles et al., 2015
	Narrative Pedagogy/Theory	Matora-Muzeng, 2021; Conlon et al., (2020)
	Narrative Pedagogy (Diekmann, 2001)	Pringe and Smith, 2022
	Person-Centred Theory (Rogers, 2004)	Biles et al., 2015
	Reflective Learning Theory (Dewey)	Job et al., 2019
	Reflective Practice (Schön, 1984)	Job et al., 2019
	Self-Determination Theory (Deci and Ryan, 1985)	Tapsell et al., (2021)
	Situated Learning (Lave and Wenger, 1991)	Dugmore, 2017
	Social Learning Theory	Matora-Muzengi, 2021
	Socio-Cultural Theory	Kuti and Houghton, (2019)
	Transformative Learning	Nash-Patel et al., (2022); Conlon et al., (2020)
	Transformative Learning (Mezirow, 1997)	Odejimi, 2017
Nursing specific models	Conceptual Framework for use of Illness Narratives (Kumagai, 2008)	Harper et al., 2020
	Novice to Expert Theory (Benner et al.)	Coyne et al., (2025)
Public involvement specific models	Clinical Judgement Model (Tanner, 2006)	Beiers-Jones et al., (2023)
	Leininger's Sunrise Model	Mathew et al., (2017)
	Montreal Model of Public Involvement (Pomey et al.)	Huteau et al., (2023)
	Open Dialogue Practice (Seikkula et al. (2011))	Pearson et al., (2021)

registration nursing education occurs through a range of activities including direct involvement in educational activity, involvement in design, involvement in supporting structures and external advisory roles. Storytelling and teaching based on lived experience appear to be a commonly reported approach. However, a challenge during this review was ascertaining what precisely was meant by storytelling or teaching or guest lecturing as these were poorly articulated. In several cases there appeared to be a conflation between describing public involvement and describing the pedagogical method through which learning occurred. For example, Tørring and Pedersen (2022) described 'Experts by Experience' as a pedagogical method, while Kang and Joung (2020) noted that the term does not in itself describe the specific activity undertaken. As a result, descriptions frequently emphasised the presence of members of the public rather than explaining how they were involved and the

intended educational purpose.

Storytelling appears to illustrate the ambiguity surrounding public involvement activities. Personal experiences are important and provide insights that students may struggle to obtain through other means (Goodhew et al., 2023). However, reliance on storytelling may risk confining members of the public to sharing their own personal experiences, positioning them as ‘recipients’ or ‘consumers’ of education rather than recognising their potential contributions as partners in educational design and delivery (Happell, 2016; Wilson et al., 2022). There were occasions where a more structured scaffolding approach was taken. For example, Kang et al. (2023) described academics delivering specific topic content followed by personal narratives aiming to consolidate students’ understandings. However, in other occasions it was not clear what scaffolding or integration took place to anchor the storytelling into the students’ learning experience and the influence that the individual member of the public exercised. In most sources it was not clear whether the public had to describe in advance their ‘story’ to teaching staff, whether they had any further influence on the broader course, or where and how their experiences fit. There may be a risk of symbolic inclusion without further integration.

The evidence suggests that most involvement occurred through face-to-face activities. This is noteworthy given the increasing adoption of online and hybrid learning approaches in pre-registration nursing education following the Covid-19 pandemic (Janes et al., 2023). Face-to-face activities have implications for both the demographics of who can participate and student learning experiences. For example, where student cohorts are large, members of the public may be required to repeat activities multiple times. A notable finding was that many public involvement activities were non-replicable, meaning that students could not revisit or reuse learning materials. This may have implications for consolidation of learning, accessibility and scalability, particularly in increasingly hybrid learning environments. For some students, opportunities to access preparatory materials before a session or revisit content afterwards may support learning (Cummings et al., 2026). Overall, this review highlighted that there was limited detail regarding how educational activities were adapted to increasingly hybrid or online educational environments (Cao et al., 2025) or adapted to meet student learning needs. This may create challenges for educators seeking to adapt activities to different educational contexts globally.

5.2. Use and role of theory

Prior to this review there have been concerns that patient involvement is under theorised (Haycock-Stuart et al., 2016; Regan de Bere and Nun, 2016) and that there is an absence of a formal framework for public involvement (Happell et al., 2019). This review illustrated a nuanced approach relating to theory. First, the review recognised the distinction between theory pertaining to concept of public involvement and theory relating to pedagogical choices and methods. Second, the review demonstrated that explicit theoretical grounding (both for the concept of public involvement and for pedagogical choices and activities) is less common and occurs in a minority of sources, thus there is an opportunity to strengthen clarity in the field. Third, the theories cited, both in the rationale for public involvement and the pedagogical activities, demonstrated a plurality of approaches. In this context, the theoretical position underpinning an activity cannot be assumed and requires explicit reporting to support clarity and understanding of how the activity is intended to function. The results do not suggest that activity is atheoretical, rather their theoretical underpinnings were not consistently articulated.

Policy drivers and accreditation requirements were widely cited as rationales for public involvement, with many sources noting the obligations placed on educators through accreditation standards, albeit with limited guidance on how this should be implemented (Sinfield et al., 2025). Conceptual drivers for public involvement illustrated important context, for example, activities designed to challenge negative

stereotypes or promote person-centred care. These drivers suggest that choices to include members of the public were situated in a broader context of values rather than being arbitrary.

Situating learning activities within existing pedagogical approaches helps readers understand how learning is intended to occur and supports the transfer of knowledge between educators. The plurality of approaches identified in the review demonstrates how theory articulation matters as people operate with different assumptions and underlying considerations. Articulating theoretical underpinnings of an educational activity does not of itself ensure quality educational activity. However, being explicit about theory means that we share our thoughts, ideas and processes with others. This is particularly important as it helps educators and researchers to interpret, adapt and transfer approaches across different educational, cultural and regulatory contexts with clear understanding.

Where theoretical rationales and pedagogical underpinnings were articulated they gave the reader a greater insight into the intent and actions of the educator. There was evidence of advancements in this field with sources such as Dix (2016) and Grosvenor et al. (2021) developing models and theories for practice. Further elaboration around theory could ensure pedagogical intent is clear, support evaluation and strengthen the coherence across the field.

5.3. Challenges in reporting and transparency in the literature

This scoping review has noted the depth and variety of educational activities and theories used in public involvement in pre-registration nursing education and noted how further clarity in reporting would aid understanding. For example, the opacity in learning outcomes, specific learning activities and evaluation mechanisms create challenges for understanding, evaluating and using the literature effectively.

It is possible that learning outcomes were specified and learning activities will have had a plan and align to student assessment activities, however, this is not routinely specified in the literature. This review demonstrates that authors were aiming to evaluate activities, however the scale, scope and perspectives involved were not always clear. Many of the evaluations focused on student or public perceptions of the activities, without considering educator perceptions. Educator insights are pertinent as they are trained professionals seeking to design and deliver education. They may have insights that students and public miss and thus propose changes to educational activities and pedagogical design to improve activities for future.

Challenges around educational activity evaluation may exist because of the nature of the intended learning, as some of the concepts might require time for students to process or apply. Indeed, some of the learning, particularly around challenging negative stereotypes or promoting person centred care, might be difficult to articulate or to measure. Again, this review reveals complexity in this space, highlighting that tools have been devised to evaluate the involvement of the public in pre-registration nursing education (Tobbell et al., 2018). Though, these tools focus on evaluating involvement processes rather than educational outcomes, suggesting a blurring between evaluating involvement and educational activity.

This review has identified how support for members of the public and organisational support was not prominently reported despite prior literature highlighting its importance (Happell et al., 2015; Odejimi et al., 2021). Where documentation around support was specified, it revealed great insights into the considerations required for educators when selecting certain educational methods. Several sources noted that storytelling and teaching by members of the public engaged emotions (Feijoo-Cid et al., 2022; Ferri et al., 2019; Heidke et al., 2018; McGarry et al., 2015; Smith et al., 2016; Unwin et al., 2018), though it was not always clear what support mechanisms were available and how pedagogical choices such as activity, group size or educational environment were considered in view of the potential for engaging emotions. Realistic descriptions of the resources required empower educators to make

informed decisions about their educational activities. This aligns with earlier discussion about clarity of educational activities as some sources noted the ability of members of the public to take part in training to support teaching (Maher et al., 2017) and some noted how the public requested this (Questroy, 2022). Overall, this review has demonstrated that the literature pertaining to public involvement in pre-registration nursing education is diverse and complex. Clearer documentation regarding theoretical underpinnings and educational activity would strengthen the ability for educators and the public to share, evaluate and advance knowledge across different educational contexts.

5.4. Implications and recommendations for future research

This review enables interested parties, whether nursing educators or members of the public, to explore the breadth, diversity and innovations in public involvement activities in pre-registration nursing education and put these into theoretical context. The findings may also support educators in countries where public involvement is not mandated, by providing insights into the range of activities currently reported in the literature. The findings of the review highlight how more detailed and transparent reporting of public involvement in pre-registration nursing education would benefit individual readers and the field collectively. In other public involvement fields, such as healthcare research, reporting guidelines have been devised to facilitate accurate reporting such as Guidance for Reporting Involvement of Patients and the Public GRIPP2 (Staniszewska et al., 2017). A suggestion would be for GRIPP2 to be amended and refined for the purposes of pre-registration nursing education. For example, specifying information about the description of the activity, the learning outcomes, the pedagogical and theoretical underpinning, support and preparation, infrastructure and evaluative approach. Such an approach could be conducted collaboratively with all parties involved. By suggesting reporting on these elements, it may encourage greater transparency in the field of public involvement in pre-registration nursing education. Greater transparency could enable and facilitate innovation and evaluation in this field in terms of pedagogical advancements which consider public needs, student needs and organisational resources.

5.5. Strengths and limitations

This review has several strengths. First, it has been comprehensive in its inclusion criteria by encompassing all types of published literature. Second, it has described and mapped this literature using the categorisation or description as far as possible provided by the original authors. Third, the research questions are broad and have facilitated discussion of potential interest to all parties related to public involvement in nursing pre-registration education. Fourth, the review makes suggestions for future research and practice. Nevertheless, the review has potential limitations, for example in including research published in languages other than English and translating using AI, there is potential for some imprecision in our understandings of these papers. However, this relates to a small number of sources ($n = 8$ at full text review stage), which were not determinative of the final focus for discussion. In addition, it is acknowledged that public involvement in pre-registration nursing education operates within a sociocultural context, there may be challenges for readers, like our research team, to fully appreciate all the nuances operating, even if the sources were written in English.

6. Conclusion

This scoping review explored the methods of public involvement in pre-registration nursing education and the underpinning theories, frameworks and models involved. The findings illustrated sources from a range of countries and described a diverse range of educational activities, although many were delivered through face-to-face approaches. The review highlighted the challenges of understanding how activities

functioned due to limited reporting of learning outcomes, evaluation processes, support mechanisms and the realities of implementation. In addition, there was potential for conflation between theories, frameworks and models justifying public involvement and those elucidating pedagogical approaches and theoretical underpinnings were not always clearly articulated. Greater transparency regarding educational design, implementation and evaluation may strengthen the ability of educators and members of the public to share, adapt and advance knowledge across different educational contexts.

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

CRediT authorship contribution statement

Feo Rebecca: Formal analysis, Methodology, Supervision, Writing – review & editing. **Voldbjerg Siri Lygum:** Formal analysis, Methodology, Supervision, Writing – review & editing. **Mudd Alexandra:** Writing – review & editing, Writing – original draft, Visualization, Software, Project administration, Methodology, Formal analysis, Conceptualization. **Conroy Tiffany:** Formal analysis, Methodology, Supervision, Writing – review & editing. **Goldschmied Anita:** Formal analysis, Methodology, Supervision, Writing – review & editing.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper

Acknowledgements

The authors would like to thank Mary and John Dougan for their valuable insights, discussions, and contributions to the development of the protocol and progression of the scoping review. We also thank Catherine Brady of Flinders University Library for her guidance and support in the translation and testing of the search strategy.

References

- Alberti, S., Ferri, P., Ghirotto, L., Bonetti, L., Rovesti, S., Vannini, V., Jackson, M., Rossi, F., Caleffi, D., 2023. The patient involvement in nursing education: A mixed-methods systematic review. *Nurse Educ. Today* 128, 105875–105875.
- Arblaster, K., Mackenzie, L., Buus, N., Chen, T., Gill, K., Gomez, L., Wells, K., 2023. Co-design and evaluation of a multidisciplinary teaching resource on mental health recovery involving people with lived experience. *Aust. Occup. Ther. J.* 70 (3), 354–365.
- Australian Nursing and Midwifery Accreditation Council (2019). Registered Nurse Accreditation Standards 2019. (https://www.anmac.org.au/sites/default/files/documents/registerednurseaccreditationstandards2019_0.pdf).
- Banerjee, S., Farina, N., Daley, S., Grosvenor, W., Hughes, L., Hebditch, M., Wright, J., 2017. How do we enhance undergraduate healthcare education in dementia? A review of the role of innovative approaches and development of the Time for Dementia Programme. *Int. J. Geriatr. Psychiatry* 32 (1), 68–75.
- Beiers-Jones, K., Doyle, B., Lanciotti, K., Lemon, E., 2023. Population Health projects: an innovative teaching strategy for baccalaureate nursing education. *J. Prof. Nurs.* 49, 26–32.
- Benner, P., 1984. *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*. Prentice-Hall, Upper Saddle River, NJ.
- Bennett-Weston, A., Gay, S., Anderson, E.S., 2023. A theoretical systematic review of patient involvement in health and social care education. *Adv. Health Sci. Educ. Theory Pract.* 28 (1), 279–304.
- Biles, J., Biles, B., McMillan, F., 2015. Interdisciplinary approach to clinical placements within Charles Sturt University School of Nursing Midwifery and Indigenous Health. A practice report. *J. First Year High. Educ.* 6 (1), 155–161.
- Bocking, J., Happell, B., Scholz, B., Horgan, A., Goodwin, J., Lahti, M., Bierung, P., 2019. 'It is meant to be heart rather than head': International perspectives of teaching from lived experience in mental health nursing programs. *Int. J. Ment. Health Nurs.* 28 (6), 1288–1295.
- Boniol, M., Kunjumen, T., Nair, T.S., Siyam, A., Campbell, J., Diallo, K., 2022. The global health workforce stock and distribution in 2020 and 2030: a threat to equity and 'universal' health coverage? *BMJ Glob. Health* 7 (6).
- Burnier, I., Northrop, G., Fotsing, S., 2022. Nomenclature of real patients in health professional education by role and engagement: a narrative literature review. *Can. Med. Educ. J.* 13 (5), 69–76. <https://doi.org/10.36834/cmej.72429>.

- Cao, W., He, Q., Zhang, Q., Tang, Y., Chen, C., He, Y., 2025. Acceptance or satisfaction of blended learning among undergraduate nursing students: A systematic review of the literature. *Nurse Educ. Today* 147, 106589.
- Carroll, A.M., Clancy, T., Bal, C.K., Lalani, S., Woo, L., 2018. Learning through partnership with communities: A transformational journey. *J. Prof. Nurs.* 34 (3), 171–175.
- Cassidy, B., Fischl, A., Fasone, A., Braxter, B., 2023. Stakeholders inform an LGBTQIA+ health best practices learning module for nursing students. *J. Transcult. Nurs.* 34 (6), 453–463.
- Clark, J., Glasziou, P., Del Mar, C., Bannach-Brown, A., Stehlik, P., Scott, A.M., 2020. A full systematic review was completed in 2 weeks using automation tools: a case study. *J. Clin. Epidemiol.* 121, 81–90. <https://doi.org/10.1016/j.jclinepi.2020.01.008>.
- Conlon, M.M., Smart, F., McIntosh, G., 2020. Does technology flatten authenticity? Exploring the use of digital storytelling as a learning tool in mental health nurse education. *Technol. Pedagog. Educ.* 29 (3), 269–278.
- Covidence. (2025). Covidence systematic review software [Computer software]. (<https://www.covidence.org/>).
- Coyne, E., Corones-Watkins, K., Dhar, A., Mitchell, L., Mongta, H., Wardrop, R., Hughes, L., 2025. Health professional students' evaluation of video resources to improve their communication skills: A co-design study. *Nurse Educ. Today* 147, 106601.
- Cummings, J., Serembus, J.F., Ossont, M.W., 2026. Supporting neurodiversity: Effective teaching strategies for nursing students. *Nurse Educ.* 51 (1), E1–E7. <https://doi.org/10.1097/NNE.0000000000001967>.
- de Almeida, L.C.G., dos Santos Mascarenhas, da Silva Santos, Brasil, B.P.L., de Santana, J. D., 2021. Protagonismo social: encontros entre graduandas de enfermagem de Salvador e ativistas vivendo com HIV. *Nurs. (São Paulo)* 24 (277), 5857–5864.
- Deci, E.L., Ryan, R.M., 1985. Intrinsic motivation and self-determination in human behavior. Plenum.
- Diekelmann, N., 2001. Narrative pedagogy: Heideggerian hermeneutical analyses of lived experiences of students, teachers and clinicians. *Adv. Nurs. Sci.* 23 (3), 53–71. <https://doi.org/10.1097/00012272-200103000-00006>.
- Dix, J.A., 2016. Mutual Development through Authentic Relationships: Adventures. Journeys and Appreciative Stories of Service User Engagement in Student Nurse Education (Doctoral dissertation, University of Central Lancashire). (<https://knowledge.lancashire.ac.uk/id/eprint/16638/>).
- Dugmore, H. M., 2017. Interpreting the value of feedback: older adult feedback to nursing students in a simulated environment in residential aged.
- Fawcett, J., 2000. Contemporary nursing knowledge: Conceptual models of nursing and nursing theories. F. A. Davis, Philadelphia.
- Feijoo-Cid, M., Arreciado Marañón, A., Fernández-Cano, M.I., García-Sierra, R.M., 2024. Expert patients leading activities on social justice: towards patient-centered education. *Nurs. Ethics* 31 (7), 1233–1246. <https://doi.org/10.1177/09697330231217038>.
- Feijoo-Cid, M., Morina, D., Gómez-Ibáñez, R., Leyva-Moral, J.M., 2017. Expert patient illness narratives as a teaching methodology: A mixed method study of student nurses satisfaction. *Nurse Educ. Today* 50, 1–7.
- Feijoo-Cid, M., García-Sierra, R., García García, R., Ponce Luz, H., Fernández-Cano, M.I., Portell, M., 2022. Transformative learning experience among nursing students with patients acting as teachers: mixed methods, non-randomized, single-arm study. *J. Adv. Nurs.* 78 (10), 3444–3456.
- Felton, A., Cook, J., Anthony, R., 2018. Evaluating a co-facilitation approach to service user and carer involvement in undergraduate nurse education. *Nurs. Stand.* (2014+) 32 (20), 47.
- Fenton, G., 2014. Involving a young person in the development of a digital resource in nurse education. *Nurse Educ. Pract.* 14 (1), 49–54.
- Feo, R., Conroy, T., Jangland, E., Muntlin Athlin, Å., Brovall, M., Parr, J., Blomberg, K., Kitson, A., 2017. Towards a standardised definition for fundamental care: A modified Delphi study. *J. Clin. Nurs.* 27, 2285–2299. <https://doi.org/10.1111/jocn.14247>.
- Ferri, P., Rovesti, S., Padula, M.S., D'Amico, R., Di Lorenzo, R., 2019. Effect of expert-patient teaching on empathy in nursing students: a randomized controlled trial. *Psychol. Res. Behav. Manag.* 457–467.
- Fleming, E., Noel-Storr, A., Macura, B., Gartlehner, G., Thomas, J., Meerpohl, J.J., Jordan, Z., Minx, J., Eisele-Metzger, A., Hamel, C., Jemio, P., Porritt, K., Grainger, M., 2025. Position Statement on Artificial Intelligence (AI) Use in Evidence Synthesis Across Cochrane, the Campbell Collaboration, JBI and the Collaboration for Environmental Evidence 2025 (n/a). *Campbell Syst. Rev.* 21 (4), e70074. <https://doi.org/10.1002/cl2.70074>.
- Freire, P., 1971. Pedagogy of the oppressed. Herder, N.Y.
- Freire, P., 1993. Pedagogy of the oppressed. The Continuum Company, London, UK.
- Garner, J., Gillasp, E., Smith, M., Blackburn, C., Craddock, A., Drew, T., 2022. Co-producing nurse education with academics, students, service users and carers: lessons from the pandemic. *Br. J. Nurs.* 31 (16), 854–860. Anonymous Service, User.
- Goodhew, M., River, J., Samuel, Y., Gough, C., Street, K., Gilford, C., Orr, F., 2023. Learning that cannot come from a book: an evaluation of an undergraduate alcohol and other drugs subject co-produced with experts by experience. *Int. J. Ment. Health Nurs.* 32 (2), 446–457.
- Goodhew, M., Samuel, Y., Gilford, C., River, J., 2020. Co-producing a drug and alcohol nursing subject with experts by experience. *Aust. J. Clin. Educ.* 8, 1.
- Grant, M.J., Booth, A., 2009. A typology of reviews: an analysis of 14 review types and associated methodologies. *Health Inf. & Libr. J.* 26 (2), 91–108.
- Grosvenor, W., Gallagher, A., Banerjee, S., 2021. Reframing dementia: Nursing students' relational learning with rather than about people with dementia. A constructivist grounded theory study. *Int. J. Geriatr. Psychiatry* 36 (4), 558–565.
- Happell, B., Bennetts, W., 2016. Triumph and adversity: Exploring the complexities of consumer storytelling in mental health nursing education. *Int. J. Ment. Health Nurs.* 25 (6), 546–553.
- Happell, B., Bocking, J., Scholz, B., Platania-Phung, C., 2020. The tyranny of difference: Exploring attitudes to the role of the consumer academic in teaching students of mental health nursing. *J. Ment. Health* 29 (3), 263–269.
- Happell, B., Scholz, B., Bocking, J., Platania-Phung, C., 2019. Promoting the value of mental health nursing: the contribution of a consumer academic. *Issues in Mental Health Nursing* 40 (2), 140–147.
- Happell, B., Wynaden, D., Tohotoa, J., Platania-Phung, C., Byrne, L., Martin, G., Harris, S., 2015. Mental health lived experience academics in tertiary education: The views of nurse academics. *Nurse Educ. Today* 35 (1), 113–117.
- Harper, L., Marsden, D., Ambridge, A., Otasanya, C., Scrivener, H., Summers, J., Darko, E., 2020. A training resource to educate students about learning disabilities. *Nurs. Times* 116 (4), 23–26.
- Haycock-Stuart, E., Donaghy, E., Darbyshire, C., 2016. Involving users and carers in the assessment of preregistration nursing students' clinical nursing practice: a strategy for patient empowerment and quality improvement? *J. Clin. Nurs.* 25 (13–14), 2052–2065.
- Heidke, P., Howie, V., Ferdous, T., 2018. Use of healthcare consumer voices to increase empathy in nursing students. *Nurse Educ. Pract.* 29, 30–34.
- Horgan, A., Manning, F., Donovan, M.O., Doody, R., Savage, E., Bradley, S.K., Happell, B., 2020. Expert by experience involvement in mental health nursing education: the co-production of standards between experts by experience and academics in mental health nursing. *J. Psychiatr. Ment. Health Nurs.* 27 (5), 553–562.
- Huteau, M.E., Cardoso-Fortes, C., Berkesse, A., Jackson, M., Pomey, M.P., Stoeber-Delbarre, A., 2023. Les professionnels de santé s' appuient sur les patients partenaires. *Soins Cadres* 32 (141), 54–63.
- Janes, G., Ekpenyong, M.S., Mbeah-Bankas, H., Serrant, L., 2023. An international exploration of blended learning use in pre-registration nursing and midwifery education. *Nurse Educ. Pract.* 66, 103514. (<https://www.sciencedirect.com/science/article/pii/S1471595322002281>).
- Job, C., Yan Wong, K., Anstey, S., 2019. Patients' stories in healthcare curricula: creating a reflective environment for the development of practice and professional knowledge. *J. Furth. High. Educ.* 43 (5), 722–728.
- Kang, K.I., Joung, J., 2020. Outcomes of consumer involvement in mental health nursing education: An integrative review. *Int. J. Environ. Res. Public Health* 17 (18), 6756. <https://doi.org/10.3390/ijerph17186756>.
- Kang, K.I., Shin, S., Joung, J., 2023. Consumer involvement in psychiatric nursing education: An analysis of South Korean students' experiences. *Issues Ment. Health Nurs.* 44 (5), 418–424.
- Kaylor, S., Townsend, H., Kiepek, A., Jester, M.L., Yoder, C.M., Davis, S., 2024. Influence of Social Determinants of Health on Students in a Rural Community. *Online J. Rural. Nurs. Health Care* 24 (2), 100–128.
- Killam, L.A., Tyerman, J., Chevalier, N., Cavanagh, F.C., Henze, K., Mohan, K., Luctkar-Flude, M., 2025. Partnering with persons living with bipolar disorder to develop an authentic virtual simulation. *Issues Ment. Health Nurs.* 46 (1), 20–28.
- Knowles, M., 1988. The modern practice of adult education: From pedagogy to andragogy. Cambridge Book Company, Cambridge.
- Kolb, D.A., 2014. Experiential learning: Experience as the source of learning and development. FT press.
- Kolb, D.A., Boyatzis, R.E., Mainemelis, C., 2014. Experiential learning theory: Previous research and new directions. Perspectives on thinking, learning and cognitive styles. Routledge, pp. 227–247.
- Kumagai, A.K., 2008. A conceptual framework for the use of illness narratives in medical education. *Acad. Med.* 83 (7), 653–658.
- Kuti, B., Houghton, T., 2019. Service user involvement in teaching and learning: student nurse perspectives. *J. Res. Nurs.* 24 (3–4), 183–194.
- Lave, J., Wenger, E., 1991. Situated learning: Legitimate peripheral participation. Cambridge university press.
- Leamy, M., Bird, V., Le Bouthillier, C., Williams, J., Slade, M., 2011. Conceptual framework for personal recovery in mental health: systematic review and narrative synthesis. *Br. J. Psychiatry* 199 (6), 445–452.
- Maher, B., Bell, L., Rivers-Downing, N., Jenkins, C., 2017. How a service-user educator can provide insight into the recovery experience. *Ment. Health Pract.* 20, 6.
- Mak, S., Thomas, A., 2022. Steps for conducting a scoping review. *J. Grad. Med. Educ.* 14 (5), 565–567.
- Mathew, L., Brewer, B.B., Crist, J.D., Poedel, R.J., 2017. Designing a virtual simulation case for cultural competence using a community-based participatory research approach: A Puerto Rican case. *Nurse Educ.* 42 (4), 191–194.
- Matora-Muzengi, H., 2021. The impact of service user teachers on mental health education. *Nurs. Times* 118 (1), 42–45.
- McCarthy, T., 1978. The critical theory of Jürgen Habermas. MIT Press.
- McCormack, B., 2017. In: McCormack, B., McCance, T. (Eds.), Person-centred practice in nursing and health care theory and practice, Second edition. Wiley Blackwell.
- McCutcheon, K., Gormley, K., 2014. Service-user involvement in nurse education: partnership or tokenism? *Br. J. Nurs.* 23 (22), 1196–1199.
- McGarry, D., Andrews, N., Buchta, M., Kent, K., McFarlane, C., McFarlane, J., 2015. Capturing the experience: lessons of consumers and carers in rural mental health education. *Australas. J. Paramed.* 12, 1–7.
- McKenna, H., Pajnikhar, M., Murphy, F., 2014. Fundamentals of Nursing Models, Theories and Practice, 2nd ed. John Wiley & Sons, Incorporated.
- McLaughlin, H., 2009. What's in a name: 'client', 'patient', 'customer', 'consumer', 'expert by experience', 'service user' – what's next? *Br. J. Social. Work.* 39, 1101–1117.

- McPhee, J., Warner, T., Cruwys, T., Happell, B., Scholz, B., 2023. 'They don't really know why they're here' mental health professionals' perspectives of consumer representatives. *Int. J. Ment. Health Nurs.* 32, 819–828. <https://doi.org/10.1111/inm.13124>.
- Mezirow, J., 1997. Transformative learning: Theory to practice. *New. Dir. Adult Contin. Educ.* 74, 5–12.
- Mudd, A., Conroy, T., Voldbjerg, S.L., Goldschmied, A., Feo, R., Schuwirth, L., 2025. Developing and Evaluating the Use of ChatGPT as a Screening Tool for Nurses Conducting Structured Literature Reviews: Proof of Concept Study Results. *J. Clin. Nurs.* <https://doi.org/10.1111/jocn.17818>.
- Nash-Patel, T., Morrow, E., Paliokosta, P., Dundas, J., O'Donoghue, B., Anderson, E., 2022. Co-design and delivery of a relational learning programme for nursing students and young people with severe and complex learning disabilities. *Nurse Educ. Today* 119, 105548.
- NHS England. (2023, June 30). NHS Long Term Workforce Plan (Version 1.2) [PDF]. NHS England. (<https://www.england.nhs.uk/wp-content/uploads/2023/06/nhs-long-term-workforce-plan-v1.2.pdf>).
- Nursing and Midwifery Council (2023). Standards for pre-registration nursing programmes. (<https://www.nmc.org.uk/globalassets/sitedocuments/standards/2024/standards-for-pre-registration-nursing-programmes.pdf>).
- O'Connor, S., Zhang, M., Trout, K.K., Snibsoer, A.K., 2021. Co-production in nursing and midwifery education: A systematic review of the literature. *Nurse Educ. Today* 102, 104900. <https://doi.org/10.1016/j.nedt.2021.104900>. Epub 2021 Apr 13. PMID: 33905899.
- Odejimi, O., Lang, L., Serrant, L., 2021. Optimising service users and carers involvement in nursing and social work pre-registration degrees. *Nurse Educ. Today* 107, 105128.
- Odejimi, O. (2017). An exploratory, descriptive mixed method study of active service users and carers involvement in adult nursing and social work students' pre-registration education. <https://wlv.openrepository.com/items/a89457de-3b36-4036-b8d0-8885ca7b6273>.
- Ottosen, M., Eloi, H., Lyons, M., 2023. Engaging patients as teachers in a baccalaureate nursing reproductive health care course: A qualitative study. *Nurse Educ. Today* 128, 105859.
- Pearson, M., Sunderland, L., Hendy, C., 2021. Open dialogue and co-production: promoting a dialogical practice culture in the co-production of teaching and learning within nurse education. *J. Ment. Health Train. Educ. Pract.* 16 (5), 364–372.
- Peplau, H.E., 1997. Peplau's theory of interpersonal relations. *Nurs. Sci. Q.* 10 (4), 162–167.
- Peters, M.D.J., Godfrey, C., McInerney, P., Munn, Z., Tricco, A.C., Khalil, H., 2020. Scoping Reviews. In: Aromataris, E., Lockwood, C., Porritt, K., Pilla, B., Jordan, Z. (Eds.), *JBIM Manual for Evidence Synthesis*. <https://doi.org/10.46658/JBIMES-24-09>.
- Peters, M.D., Marnie, C., Tricco, A.C., Pollock, D., Munn, Z., Alexander, L., McInerney, P., Godfrey, C., Khalil, H., 2021. Updated methodological guidance for the conduct of scoping reviews. *JBIM Evid. Implement.* 19 (1), 3–10.
- Pomey, M.-P., Flora, L., Karazivan, P., Dumez, V., Lebel, P., Vanier, M.-C., Débarges, B., Clavel, N., Jouet, E., 2015. [The Montreal model: the challenges of a partnership relationship between patients and healthcare professionals]. In: *Sante Publique*, 27, pp. S41–S50.
- Pringle, A., Smith, M., 2022. Using lived experience stories and anecdotes to enhance mental health nurse education. *Ment. Health Pract.* 25 (3).
- Questroy, M., Margat, A., Gross, O., Marchand, C., 2022. L'engagement des patients dans la formation des étudiants en soins infirmiers: une étude exploratoire. *Rech. En. soins Infirm.* 148 (1), 22–39.
- Raikes, B., Balen, R., 2019. The benefits of prisoner participation in interdisciplinary learning. *Service User Involvement in Social Work Education*. Routledge, pp. 74–85.
- Ramjan, L.M., Richards, G., Roach, D., McGrath, B., Drury, P., Walters, C., Salamonson, Y., 2025. Academic support strategies for nursing students with a disability at university—An integrative review. *Collegian* 32 (4), 195–211.
- Rapanta, C., Botturi, L., Goodyear, P., Guàrdia, L., Koole, M., 2021. Balancing technology, pedagogy and the new normal: Post-pandemic challenges for higher education. *Post. Digit. Sci. Educ.* 3 (3), 715–742.
- Regan de Bere, S., Nunn, S., 2016. Towards a pedagogy for patient and public involvement in medical education. *Med. Educ.* 50 (1), 79–92. <https://doi.org/10.1111/medu.12880>.
- Rogers, C., 2004. *On Becoming a person*. Constable, London.
- Rowland, P., anderson, M., Kumagai, A.K., McMillan, S., Sandhu, V.K., Langlois, S., 2019. Patient involvement in health professionals' education: a meta-narrative review. *Adv. Health Sci. Educ.* 24 (3), 595–617.
- Royal College of Nursing., 2022. Neurodiversity guidance: For employers, managers, staff and students. <https://www.rcn.org.uk/Professional-Development/publications/neurodiversity-guidance-uk-pub-010-156>.
- Sanderson, L., Choma, L., Cappelli, T., Arrey, S., Noonan, I., Prescott, S., Bland, A., 2023. Developing online simulated practice placements: a case study. *Br. J. Nurs.* 32 (13), 636–643.
- Scammell, J., Heaslip, V., Crowley, E., 2016. Service user involvement in preregistration general nurse education: a systematic review. *J. Clin. Nurs.* 25 (1–2), 53–69.
- Schön, D., 1984. *The Reflective Practitioner: How Professionals Think in Action*. Basic Books Inc, United States of America.
- Scott, L., Hardisty, J., Cussons, H., Davison, K., Driscoll, H., Powell, S., Sturrock, A., 2021. Exploring a collaborative approach to the involvement of patients, carers and the public in the initial education and training of healthcare professionals: A qualitative study of patient experiences. *Health Expect.* 24 (6), 1988–1994.
- Seikkula, J., Alakare, B., Aaltonen, J., 2011. The comprehensive open-dialogue approach in Western Lapland: II. Long-term stability of acute psychosis outcomes in advanced community care. *Psychosis* 3 (3), 192–204.
- Sinfield, G., Wilson, C., Goldspink, S., 2025. Nurse lecturers' experiences of working with people with lived experience: A phenomenological study (Article). *Nurse Educ. Today* 147, 106549. <https://doi.org/10.1016/j.nedt.2024.106549>.
- Smith, P., Ooms, A., Marks-Maran, D., 2016. Active involvement of learning disabilities service users in the development and delivery of a teaching session to pre-registration nurses: Students' perspectives. *Nurse Educ. Pract.* 16 (1), 111–118.
- Speers, J., Lathlean, J., 2015. Service user involvement in giving mental health students feedback on placement: A participatory action research study. *Nurse Educ. Today* 35 (9), e84–e89.
- Spencer, J., Godolphin, W., Karpenko, N., Towle, A., 2011. Can patients be teachers? Involving patients and service users in healthcare professionals' education. *Health Found. Inspiring Improv.*
- Stacey, G., Oxley, R., Aubeeluck, A., 2015. Combining lived experience with the facilitation of enquiry-based learning: a 'trigger' for transformative learning. *J. Psychiatr. Ment. Health Nurs.* 22 (7), 522–528.
- Staniszewska, S., Brett, J., Simera, I., Seers, K., Mockford, C., Goodlad, S., Tysall, C., 2017. GRIPP2 reporting checklists: tools to improve reporting of patient and public involvement in research. *BMJ* 358. <https://doi.org/10.1136/bmj.j3453>.
- Suikkala, A., Koskinen, S., Leino-Kilpi, H., 2018. Patients' involvement in nursing students' clinical education: A scoping review. *Int. J. Nurs. Stud.* 84, 40–51.
- Tanner, C.A., 2006. Thinking like a nurse: A research-based model of clinical judgment in nursing. *J. Nurs. Educ.* 45 (6), 204–211.
- Tapsell, A., Patterson, C., Moxham, L., Perlman, D., 2021. Informing Work-Integrated Learning through Recovery Camp. *Int. J. Work. Integr. Learn.* 22 (1), 73–81.
- Thompson, H., Patterson, C., Lewer, K., Moxham, L., 2025. Changing People's Hearts': The Lived Expertise Perspective of Communicating With Nursing Students at a Mental Health Clinical Placement. *Int. J. Ment. Health Nurs.* 34 (1), e13465.
- Tobbell, J., Boduszek, D., Kola-Palmer, S., Vaughan, J., Hargreaves, J., 2018. Evaluating service user pedagogy in UK higher education: Validating the Huddersfield Service User Pedagogy Scale. *Nurse Educ. Today* 63, 81–86.
- Tørring, R.B., Pedersen, S.B., 2022. Methods for involvement of patients, public and users in academic nursing education: A scoping review. *Nord. J. Nurs. Res.* 42 (4), 185–194.
- Towle, A., Bainbridge, L., Godolphin, W., Katz, A., Kline, C., Lown, B., Madularu, I., Solomon, P., Thistlethwaite, J., 2010. Active patient involvement in the education of health professionals. *Med. Educ.* 44 (1), 64–74. <https://doi.org/10.1111/j.1365-2923.2009.03530.x>.
- Tricco, A.C., Lillie, E., Zarin, W., O'Brien, K.K., Colquhoun, H., Levac, D., Straus, S.E., 2018. PRISMA extension for scoping reviews (PRISMA-ScR): checklist and explanation. *Ann. Intern. Med.* 169 (7), 467–473.
- Tuohy, D., Tuohy, T., Graham, M., McCarthy, J., Murphy, J., Shanahan, J., Cassidy, I., 2025. Older people's views of participating in an intergenerational café with student nurses. *Int. J. Older People Nurs.* 20 (2), e70019.
- Unwin, P., Rooney, J., Cole, C., 2018. Service user and carer involvement in students' classroom learning in higher education. *J. Furth. High. Educ.* 42 (3), 377–388.
- Varpio, L., Paradis, E., Uijtdehaage, S., Young, M., 2020. The Distinctions Between Theory, Theoretical Framework and Conceptual Framework. *Acad. Med.* 95 (7), 989–994. <https://doi.org/10.1097/ACM.0000000000003075>.
- Vollman, A.R., anderson, E.T., McFarlane, J., 2012. *Canadian community as partner: Theory and multidisciplinary practice*, 3rd ed. Lippincott Williams & Wilkins, Philadelphia, PA.
- Vygotsky, L.S., 1978. *Mind in Society: The Development of Higher Psychological Processes*. Harvard University Press, Cambridge MA.
- Wilson, C.B., Slade, C., McCutcheon, K., 2022. Providing a roadmap for co-production in curriculum development for nursing and midwifery education. *Nurse Educ. Today* 113, 105380.
- World Health Organization, 2021. Global strategic directions for nursing and midwifery. World Health Organization, pp. 2021–2025. (<https://www.who.int/publications/item/97892240033863>).
- World Health Organization, 2025. State of the world's nursing 2025: Investing in education, jobs, leadership and service delivery. World Health Organization. (<https://iris.who.int/server/api/core/bitstreams/a4173924-a18f-49b6-8bd1-9c2a4a098980/content>).
- Zandee, G.L., Bossenbroek, D., Slager, D., Gordon, B., Ayoola, A.B., Doornbos, M.M., Lima, A., 2015. Impact of integrating community-based participatory research into a baccalaureate nursing curriculum. *J. Nurs. Educ.* 54 (7), 394–398.