WORK BASED LEARNING: QUANTIFYING ENHANCEMENTS TO HEALTHCARE PRACTICE

Fiona Foxall and Megan Tanner
University of Wolverhampton

ABSTRACT

A qualitative project was conducted to quantify enhancements to practice as a result of undertaking a work-based learning (WBL) programme. Key themes identified were the development of knowledge, reflective skills and the development of transferable skills, which enabled participants to challenge practice, therefore encouraging innovation and demonstrating lifelong learning.

KEYWORDS

United Kingdom -- Work-based learning -- healthcare practice -- praxis

INTRODUCTION

United Kingdom (UK) Government policy has driven forward changes in the National Health Service (NHS) that have highlighted the importance of lifelong learning in healthcare, such as the Dearing Report (1997) and the Leitch Report (2006). However, the concept of lifelong learning has itself created dissonance with authors such as Crowther (2004) and Coffield (1999), who argue that the principle of learning throughout life has a political agenda and is a method of controlling the workforce and intensifying workloads for the benefit of employers. Despite these polar approaches, we view the principle of lifelong learning as exciting, indeed necessary and are committed to the concept. We view lifelong learning as learning based on experience which leads to the development of expertise in practice and the synthesis of theoretical knowledge from practice i.e. praxis. To support students through their lifelong learning journey, we have developed innovative work-based programmes of study to meet the needs of our students, clinical partners and the client groups they serve.

The NHS is a dynamic organisation, requiring constant learning to engage with research findings, new treatments and new technologies. As part of the New Labour initiatives, the Modernisation Agency was set up to review NHS careers and stresses the value of underpinning knowledge for advancing practice. This has led to an expectation that senior staff will not only be clinically experienced and credible but will also be able to conceptualize practice, using higher level academic skills. The Modernisation Agency and professional bodies such as the Nursing and Midwifery Council (NMC) have provided the platform for the further development of healthcare practice, encouraging new ways of working and the expansion of traditional roles, leading to the requirement for new and on-going learning.

We constructed a series of work-based learning awards up to Master level, to enable qualified healthcare professionals to recognise and develop their expertise. Our work-based learning programmes provide a creative and imaginative strategy to embrace and recognise learning that takes place in the practice setting. Whilst the majority of students enrolled on the programme are nurses, there is a significant proportion of physiotherapists, occupational therapists and podiatrists. However, the programme is open to any qualified healthcare professional. The programme is individually negotiated with students and their employers to meet personal development needs, strategic objectives and health improvement agendas.

Although traditionally, many programmes of work-based learning in the UK have been prescribed, our programmes are entirely student-focused with each student developing their own learning outcomes for their award, ensuring individualisation of learning through a unique programme of study. To build upon the considerable anecdotal evidence the School has, we sought to provide empirical evidence that these awards have a positive impact on practice. The programme was due for revalidation and we sought to ensure that it was meeting the educational requirements of our clinical partners and the students. The aim of the research was to evaluate the effectiveness of the programme and to assess its impact on practice, to ensure a high quality programme is delivered. A major limitation of the study is that the findings are not generalisable to work-based learning (WBL) programmes outside of the School of Health, University of Wolverhampton, although the research design is repeatable elsewhere.

THEORETICAL FRAMEWORK

Over the last decade funding opportunities for post-qualifying education have gradually been eroded. Simultaneously, Government initiatives
Armsby et al. (2006) asserts that some completed in a university. Secondary learning, inferior to learning undervalued by many in society and is seen as al. (2005) argue, workplace learning is effectively to practice. However, as Felstead et al. have control of their learning and link learning can take place in the work area where students have traditional acted as the gatekeepers of knowledge and students attended university if they wished to achieve credence and universal recognition of learning (Nikolou-Walker and Garnett, 2004). Hamilton (2006) questions the relevance of educational settings when learning can take place in the work area where students have control of their learning and link learning effectively to practice. However, as Felstead et al. (2005) argue, workplace learning is undervalued by many in society and is seen as secondary learning, inferior to learning completed in a university.

Armsby et al. (2006) asserts that some universities find the recognition of knowledge gained outside of the university system threatens their traditional view of knowledge acquisition. They argue that the use of work-based learning programmes has been more clearly established within post-1992 universities. Lester (2007) however, argues that there is considerable scope for further development of work-based learning awards and that this type of programme should be viewed as part of mainstream university activity.

Felstead et al. (2005) contend that formal education is made up of a set of abstract ideas which are universally applied and can easily be conveyed to others and any other education is viewed by society as not of equal value. Thus work-based learning, where knowledge is often specific, implicit and difficult to convey to others is seen by some as second-rate and not worthy of attention (Hamilton, 2006 and Solomon et al., 2006). Conversely, Eraut (2005) argues that the transfer of knowledge from the classroom is fraught with difficulty, as students struggle to find meaning which fits with their previous learning and experience. He states that this is because abstract learning often cannot be effectively applied to practice, therefore the value to the individual is limited. Yeilder (2004) found that the underpinning knowledge base linked with interpersonal skills resulted in changes to practice and Eraut (2005) goes on to emphasise that learning must be relevant to the learner or it will be discarded. He asserts that a commitment or motivation to learn is more positive if learning can be effectively linked to a student’s everyday practice or lifestyle. Bridger (2007) supports this view and states that success is more difficult to achieve when learning seems to have no relevance to practice.

We have considered these opposing arguments and the result is a programme of learning which meets the needs of the modern NHS through work-based learning activity. The University equips the participants with the necessary tools to enable them to critically conceptualise and analyse practice through the completion of an initial planning module; whilst work-based learning activity results in the enhancement of expertise through situated learning which is highly relevant to specific and dynamic roles. Based on Eraut’s (2005) theoretical viewpoints, the programme is student-led, as individual students design their own learning outcomes, learning methodology and assessment strategy for each work-based learning unit. Students have the opportunity to study a proportion of taught modules if this ensures a coherent pathway of study is followed. This enables appropriate, meaningful and deep learning to take place, which is applicable to the student’s specific area of practice and provides an award which is of value to both clinicians and educators.
METHODOLOGY

An interpretive phenomenological approach was used to explore the students' experiences of work-based learning activity. Phenomenology is defined by Creswell (2007) as an exploration of the subjects' lived experiences. Initially, all students (n=182) who had been on the Master programme during the previous five years were sent a questionnaire, from which there was a very good return of 74 (40.6%). The questionnaire consisted of a series of open questions relating to student satisfaction, personal and practice development, level of learning, content, assessment strategies and processes, influences on their practice and progress through the programme. Thematic analysis of the questionnaire responses was undertaken, from which five major themes emerged, namely: health outcomes; quality and equity of service delivery; efficiency; cost-effectiveness and professional development. Whilst these pre-determined themes formed the basis of the discussion in the subsequent focus group, participants were encouraged to share their experiences and reflections that they felt were important.

Of the 74 students who had recently completed the Master programme and the subsequent questionnaire, twelve respondents were asked to take part in a focus group discussion. This would enable deeper understanding of their views on the impact on practice as a result of undertaking the programme. For a useful discussion to emerge from a focus group, Chioncel et al. (2003) highlight that the maximum number of participants should be twelve. As part of the Master programme, students complete either an evidence based practice project or research dissertation. As these activities are essentially different, we wished to ensure we captured the experiences of students undertaking both research techniques. We therefore chose a purposive sample of healthcare professionals who had completed the programme. The sample consisted of six students who had completed the evidence based practice project and six students who had completed the research dissertation, which would provide a representative sample, as suggested by Bowling (2002).

The focus group discussion was to be tape-recorded and subsequently transcribed however, the tape recorder failed to work and therefore detailed notes were taken during the discussion. The notes were written up and participants were given the opportunity to review them, which ensured reliability and validity of the findings (Bowling, 2002). Once the participants had agreed the content of the notes, thematic analysis was undertaken and issues were identified which will influence future programme content and delivery.

Confidentiality was maintained throughout and the anonymised notes are stored in a secure environment, which can only be accessed by the researchers. The notes will be destroyed after a period of three years. Ethical approval was sought but not required, as this was a phenomenological review to quality assure the programme prior to the revalidation process. It sought the opinions of students who had recently completed the programme regarding its effectiveness relating to the impact on practice. However, issues of informed consent, choice and rights of participants were addressed.

RESULTS

Several issues were highlighted by participants relating to the five major themes of health outcomes; quality and equity of service delivery, efficiency, cost-effectiveness and professional development.

Health outcomes:

As a result of undertaking the programme several participants highlighted new initiatives within their Trusts with which they had been involved or indeed instigated. For example, participant F developed an operational policy to enhance the critical care outreach service; ensuring patients in the emergency department were assessed for their need for high dependency or intensive care. Participant C instigated a service which ensures stroke patients receive thrombolysis more appropriately. Participant L commented “it allows the amalgamation of theory to practice, enhancement of skills e.g. leadership are directly transferable to practice”. Participant B proposed “learning is relevant to my current or developing role and meets service objectives”. Participant F discussed “the WBL programme developed the potential for assisting managers to meet service objectives, improving health outcomes”.

Quality and equity of service delivery:

Participant K stated “I have gained better insight into audit processes, leadership roles and research enabling quality enhancement”. Participant G commented “I have been able to apply policies and structure to a specialist service”. Participant E stated “the programme has been of benefit to others as I manage my time better and structure reports better so the quality of service has improved”. Participant A felt that “my written and verbal communication skills have been greatly enhanced”.

Participant A felt that my written and verbal communication skills have been greatly enhanced”. Participant B stated “The programme has allowed me to improve my skills in...” Participant C commented “I have been able to...” Participant D argued “The programme has...” Participant E stated “The programme has...” Participant F noted “I have been able to...” Participant G commented “I have been able to...” Participant H argued “The programme has...” Participant I stated “I have been able to...” Participant J commented “I have been able to...” Participant K noted “I have been able to...” Participant L argued “The programme has...” Participant M noted “I have been able to...” Participant N commented “I have been able to...” Participant O noted “I have been able to...” Participant P commented “I have been able to...” Participant Q noted “I have been able to...” Participant R commented “I have been able to...” Participant S noted “I have been able to...” Participant T commented “I have been able to...” Participant U noted “I have been able to...” Participant V commented “I have been able to...” Participant W noted “I have been able to...” Participant X commented “I have been able to...” Participant Y noted “I have been able to...” Participant Z commented “I have been able to...”
Efficiency:

Participant A was required to undertake the implementation of a new IT system within the Trust where she is employed. As a direct result of undertaking the WBL programme, she felt she was empowered to carry out the project in a more effective manner, than if she had undertaken it as part of her normal working activity. Similarly, she felt that the staff she was working with responded well to the change she was implementing because of the strategies she had formulated as part of her programme of study. Participant B stated “the award provides an opportunity to create a tailored programme of learning which can be utilised to help staff lead or contribute to service initiatives thereby benefiting the Trust”. Participant K commented that “real-time practice-based learning helped me focus on what I needed to learn, rather than a taught module which prescribes the learning outcomes”.

Professional development:

Participant D commented that she had “developed many transferable skills which is high on the Department of Health’s current agenda”. Participant G felt the programme had “made me think differently”. Participant H commented that the programme had “improved my questioning of the ways things are done and improved my clinical reasoning skills”. Participant I felt that the programme “encouraged critical reflection on relevant issues which has developed me both personally and professionally”. Participant J stated “you can structure the programme around your ward and department so that you can develop yourself and your service. You can fit it around your home life with self-directed learning”. Participant K commented that “from gaining knowledge, I have gone on to feel more confident in my role and led several audit projects and been a more effective leader by implementing change based on evidence”.

Cost effectiveness:

Participants stated their employers found the award cost-effective as they were able to apply for APL (Accreditation of Prior Learning) for up to 50% of their award; together with the accreditation of learning in the workplace and therefore reduction in study leave reduced costs within the Trusts. However, although this is advantageous to the employer, participants J and L felt they were granted less study leave than those students undertaking taught modules and were therefore somewhat disadvantaged. Participant I stated “the programme has helped me to develop Masters level thinking and to develop more strategic ways of working. I feel I am a more productive employee”.

DISCUSSION

From analysis of the outcomes of the discussion, all participants felt their ability to approach care delivery utilising a critical, innovative approach had been enhanced by undertaking the programme as had their skills of reflection in and on action as described by Schön (1983). It is clear from the results that our work-based learning programme emphasised the importance of relating theory to practice and practice informing theory i.e. praxis. It was felt the programme facilitated participants’ reflection on their own practice and enabled them to challenge the practice of others. This resulted in care enhancement and the improvement of health outcomes and the quality and equity of service delivery, confirming the views of Cross et al. (2004) and Thorpe (2004) who state that reflection strengthens the link between theory and practice.

Work-based learning awards which are based on the development of reflective skills, should meet the needs of the NHS as the influence of theory on practice should be apparent as students develop deeper understanding, enabling them to develop and improve their practice. Yeildier (2004), Cross et al. (2004) and Thorpe (2004) argue that reflective practice helps to make implicit knowledge explicit, thus effectively linking knowledge with practice.

It was also felt that undertaking the programme had improved communication within healthcare teams and led to a more holistic approach to service delivery. Participants found that individualised programmes of learning related effectively to workplace needs as suggested by Lester (2007) and it was perceived by many participants that documentation had improved as a result of the learning that had taken place. In addition, critical thinking ability had been developed and care delivered was now more effectively based on best evidence. The discussion related to professional development was particularly detailed with all participants feeling the award had benefited them extensively. The professional development activity, it was felt, greatly enhanced client care and service delivery in general. Due to the enhancement in care delivery and efficiency, it was felt by participants that resources were utilised more effectively, hence cost-effectiveness had improved.
CONCLUSION

The research findings would have been further enhanced by consideration of the views of managers and academic staff which would have improved triangulation of the findings. However, as a result of undertaking the programme, a number of students constructed and implemented new policies and protocols. These directly influenced service delivery and health outcomes, most notably, for patients following cerebral vascular incident and patients in the emergency department requiring high dependency and/or intensive care.

From the discussion with participants and analysis of the results, it is clear that our work-based learning programme facilitated the development of reflective skills, which enabled participants to challenge practice and they were enabled to develop theoretical concepts from practice, the development of praxis. The issue of study leave is currently being addressed with employers throughout the revalidation process. Although some students felt disadvantaged through being unable to take as much study leave as other students undertaking taught programmes, the knowledge and skills developed throughout the award encouraged innovation, improved written and verbal communication and the development of transferable skills. Thus demonstrating that the programme has a significant impact on practice and strengthens students’ motivation for the pursuit of lifelong learning.

REFERENCES


