Title: Inter-professional learning: innovation in teaching and learning for pre registration student nurses and midwives

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Abstract

A requirement for all health care professionals is to work collaboratively in the provision of safe and effective care. However despite this students are not routinely involved in inter-professional learning, and are often taught in isolation within professional groupings. There is added value in inter-professional teaching and learning- evident from a resource that was developed by lecturers in nursing and midwifery. This was piloted live on an audience of pre registration nursing and midwifery students, as an mock fitness for practice hearing. Inter-professional group activities provided reflection, debate and discussion with students voting on sanctions and taking part in the panel summary and close. Feedback from both lecturers/participants (n=8) and students (n=31) indicated this was a highly valued experience. It is an innovative inter-professional learning resource, in pre-registration education for students in nursing and midwifery and will extend to post registration health care education.

Background

All health professionals are required by the relevant regulatory bodies to work together to provide safe, effective care. Effective multi-disciplinary collaborative working is required to achieve this aim. However, despite this requirement for cohesive team working in day-to-day working life, students are not routinely and systematically involved in inter-professional learning (IPL) and are mostly trained in isolation within professional groupings. This is in direct contrast to the need for collaborative team working within clinical settings when qualified.

In the late 80s, the World Health Organisation stated that if health professionals were taught together and learned to collaborate as a team during their student years, they were more likely to be able to work effectively when qualified (Barwell et al 2013). The need to change the working culture within the NHS has been highlighted by Government policy; the NHS Plan (DH 2000) described the NHS as 'old fashioned' in its approach to care delivery and organisation and cited poor team working as a major factor in failures in the NHS (Timpson 2009).

Examples of poor collaborative working are not unusual within the NHS and are included in the inquiries relating to Baby P (Ofsted 2008), Victoria Climbie (DH 2003) and the Bristol Royal Infirmary (DH 2001). Recommendations arising from these inquiries included the need for health and social care professionals to improve their communication network and team working. These recommendations are reflected the regulatory bodies requirement for

registrants to work collaboratively across professional boundaries (NMC 2008, NMC 2010, GSCC 2008, GMC 2009, HPC 2008). This clearly should be a catalyst for systematic inter-professional learning and working. Unfortunately, this is not uniform across educational facilities.

Inter-professional learning (IPL)

IPL is best defined using the definition from the Centre of Advancement of Interprofessional Education (CAIPE 1997): "interprofessional education occurs when two or more professions learn with, from and about each other to improve collaboration and quality of care....and includes all such learning in academic and work based settings before and after qualification, adopting an inclusive view of professional". IPL is not simply an exposure to students to a different health professional teacher. At its best it has a high level of interactivity between the professional groups, both student and teachers, and leads to professionals working together in logical teams which reflect their future roles in health care (Hays 2013).

Lloyd Jones et al (2006) believed that the educational IPL approach should allow exploration of how people can work together collaboratively. This facilitates an appreciation of each other's role and responsibilities. IPL activities should be designed, implemented and evaluated by a team of inter-professional academic who will have an appreciation of how teams can work across professional boundaries (Hays 2013). The benefits of IPL as described by Cooper et al (2001) include improvement in student knowledge, attitudes and beliefs as well as a greater understanding of professional roles and team working.

Innovation in teaching and learning through IPL

A collaborative approach to teaching and learning with an inter-professional focus was developed for both pre-registration nursing and midwifery students in their final year of study. Preliminary meetings with senior lectures from both nursing and midwifery drawing on their expertise in clinical practice, law and NMC fitness to practice hearings formulated a steering group.

The aim of the project was to enhance the inter-professional learning through a real life experience, in the form of an NMC fitness to practice mock hearing. It was essential that the realism in the resource be authentic. The steering group developed resources based on an actual event, which was modified and developed to meet the learning needs of both student nurses and midwives, and to enhance their inter-professional learning experience. The clinical incident addressed key issues; unprofessional practice; a drug error; failings in patient assessment and reporting; and poor documentation. A midwife practitioner was called to account, as a result of a complaint letter from the family and an internal investigation from the hospital. The resources developed included witness statements and evidence such as clinical notes.

Expertise from the team ensured that the resources were authentic, accurate and representative of a true event with a script developed for key people in the hearing. Therefore the legal, professional regulating body panel and fitness to

practice procedures, and clinical expertise were essential to formulating this teaching and learning resource.

Learning outcomes

The learning outcomes of the teaching and learning resource included 1) to critically explore the knowledge, value and skills needed to manage the adult healthcare environment; and 2) to critically analyse the qualities required for high performance teams in adult nursing and interdisciplinary working. This was achieved from the mock panel hearing where students observed a cross examination of the witnesses and evidence provided.

A clear overview of the process was provided to the students and they served as the audience to the recorded mock hearing. An opportunity for interprofessional learning followed where students were in put into break-out groups. The groups were mixed with both nursing and midwifery students, and these were facilitator led by either a midwife or nurse lecturer. The purpose of the group activity was to discuss and reflect on what went wrong in the case presented. A key learning objective was for students to explore their knowledge and their understanding of the implications this event would have on clinical practice (and for patients and the health care professional).

Guided activities in the groups offered an opportunity to explore and analyse the nature of teamwork; interdisciplinary working and the impact the mistake had on the patient and the practitioner. Students were able to debate and explore their understanding of evidence and worked as a team in their decision-making. They were asked to reflect on whether anything else could have made a difference to the outcome for the patient. Students were required to review the sanctions, identify and vote on an agreed sanction and provide a rationale for this. In their groups they had to nominate a lead who would then present this back to the entire group.

The mock hearing and cross examination was video recorded. Each witness was called in whilst the audience observed. The outcome of the case and sanctions the students voted on served as the close and summary of the teaching and learning event. This was also recorded.

Evaluation and findings

The recording and group activities were used a second time, on further group of nursing students. Evaluation and feedback from both the live and recorded event were collated, capturing feedback from participants, lecturers/facilitators and students. A key finding showed little difference the learning; understanding and the value of inter professional learning where the live versus the recorded version was used. The inter-professional learning was highly valued by both participants, lecturers and students.

Participant feedback (n=8)

In terms of planning and preparation the lecturers who undertook roles commented that the "entire event was facilitated with excellent planning and communication throughout the whole process", with the rehearsal seen as pivotal to feel sufficiently prepared. The rehearsal time allowed "the opportunity to talk to other people involved who had had direct experience of proceedings".

Expertise of NMC hearings and the legislative system from two participants increased confidence and was commented on: "It was great seeing H's law expertise and T's NMC expertiseIt felt like a powerful and highly charged event for me as a participant and I hope some of that came across to the students".

The value of the preparatory materials for students was evidenced in the afternoon's group work with comments from one facilitator "From having facilitated one of the break-out groups in the afternoon I was really pleased to see how much the nursing students had learnt about professional regulation and midwifery..... It was clear the student had read the pre-session documentation-they seemed really engaged with the whole day.... having two midwifery student in the break-out group was wholly beneficial because they were able to 'peer – inform' the nursing students about their clinical practice and how this related to the case hearing that they had just witnessed." She went on to say that "all of the students that I facilitated agreed that this would enhance their EU Directive learning too.

Another facilitator commented "I think it is an excellent addition to the current curriculum and another creative way to facilitate discussion and learning".

Average rating from a) live 8.23/10 and b) recorded 8.43/10

Student feedback (n= 31)

Students, demonstrating their learning and the value of the day for future professionals, echoed this positive feedback. Comments included: "Good idea to teach us what we would encounter in such an environment as we are unlikely to encounter it ourselves unless directly involved". Another student commented "it served as a salutary reminder about how important note taking is – how important it is to think about the consequences of your actions"

"This was a valuable experience and reinforces the need to ensure record keeping is accurate and honest. It also highlights the importance for excellent communication between the team to ensure patients best interests....it demonstrates the need for good leadership within a team to be able to effectively communicate with each other"

The value of inter-professional learning was evidenced from comments such as "The day provided me with the opportunity to learn from my Midwifery peers – their knowledge and feedback was important to me as it enabled to me to understand more about their role, and how they work" and "...having a midwifery student within the group was very beneficial".

Using structured role created an authentic atmosphere encouraging the students to "look outside the box of thinking and see the whole picture or case from all sides" and "it was really well done – it felt very real". The potential to become involved in a regulatory hearing "made me really nervous to watch. The thought of being in that situation frightened me, but made me realise that as long as I uphold the reputation of my profession, abide by The Code, and ensure that I make the care of my patient my first concern, I shouldn't ever be in that position"

The group work where the students decided on the sanctions to be applied helped them focus on their accountability and whilst the whole process was serious and thought provoking the overall feedback was that the "day was excellent and had a good balance of information and discussion"

Summary

The added value from inter-professional learning is evident from this teaching and learning resource, whether live or recorded. Both the participants and the students gained from the partnership learning between health care professionals.

Future

The resource is now being used across fields of practice as a joint teaching ad learning experience with adult, child and mental health nursing students alongside midwifery students in pre registration education. It will also be used in post-graduate education in health care law, ethics and for return to practice nurses.

References

Armitage. H., Connolly, J. & Pitt, R. (2007) Developing sustainable models on interprofessional learning in practice- The TULIP project. *Nurse Education in Practice* **8**, 276-282

Barwell. J., Arnold. F. & Berry, H., (2013) How interprofessioanl learning improves care. *Nursing Times:* **109**, 14-16.

Centre for the Advancement of Interprofessional Education (1997) *Interprofessional Education—A Definition.* CAIPE, London

Department of Health (2000) *The NHS Plan: a plan for investment, a plan for reform.*

http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/publicationsandstatistics/publications/publicationspolicyandguidance/dh 4002960. (accessed 13 August 2014)

Department of Health (2001) *The Bristol Royal Infirmary Inquiry*. http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH 4005620, (accessed 13 August 2014)

Department of Health (2003) *The Victoria Climbié inquiry: report of an inquiry by Lord Laming.*

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/273183/5730.pdf (accessed 13 August 2014)

General Medical Council and Medical Schools Council (2009). *Medical Students: Professional Values and Fitness to Practise.* Guidance from the GMC and MSC. GMC London

General Social Care Council (2010) *Codes of Practice for Social Workers*. GSCC London

Hays. R (2013) Interprofessional education. The Clinical Teacher: 10: 338-341

Health and Care Professions Council (2008) *Standards of Education and Training.* HPC London

Nursing and Midwifery Council (2010) *Standards for the Pre-Registration Nursing Education*. NMC London:

Nursing and Midwifery Council (2008) *The Code: Standards of conduct, performance and ethics for nurses and midwives.* NMC London

Ofsted (2008) *Report into the Death of Baby P in the London Borough of Haringey.* Ofsted, London

Timpson, T. (2009) Interprofessional learning in practice. *British Journal of Healthcare Management* .15. 5. 223-228