

# MAKING PRACTICE BASED LEARNING WORK: OUTPUTS AND OUTCOMES

This sections relates to the outputs and outcomes specified by HEA guidelines

www.practicebasedlearning.org

## Authors



Joan Mulholland Project Director University of Ulster

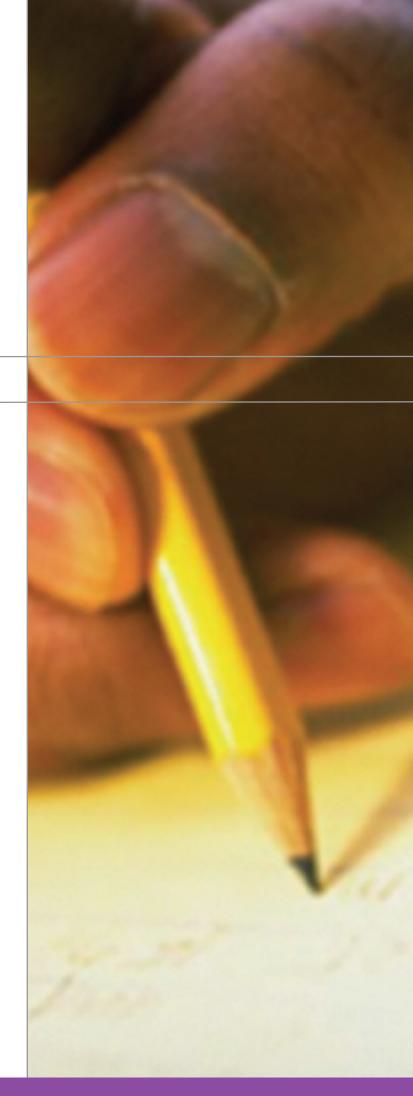


Chris Turnock Project Manager Northumbria University





Barbara Gregg Project Administrator University of Ulster



© 2005





contents

Introduction	02
Deliverables and Outcomes	03
Products of the project	13
Dissemination	14
Evaluation	17
Continuation Strategy and Associated Activities	20

section two

#### Introduction

#### 2.1 INTRODUCTION

The "Making Practice Based Learning Work" project intended to make practitioners more effective at supporting and supervising students in the workplace across a range of healthcare disciplines. The Department of Employment and Learning (Northern Ireland) and the Higher Education Funding Council for England awarded £250,000 for this collaborative project involving staff from Ulster, Northumbria and Bournemouth Universities.

This three year project commenced in January 2003. The first year, Phase One of the project, focused upon five professions: Dietetics, Nursing, Occupational Therapy, Physiotherapy and Radiography as to the nature of the roles, responsibilities, preparation and professional requirements and standards for the practice educator. This investigation resulted in publication of five discipline specific case studies. As a result of this exercise themes were identified. These provided the framework for the development of resources for the practice educator and were mapped against professional and occupational standards. These themes are:

- Learning & Teaching in Practice
- Supporting Learning & Teaching in Practice
- Reflection on and in Practice
- Assessment in Practice
- Interprofessional Learning in Practice
- Diversity in Practice
- Generic & specific skills resources

Phase Two identified best practice and then developed interprofessional open learning (to include E-learning) resources to enhance the preparation of Practice Educators. The resources include a web portal of links into materials which would support practitioners' development and learning. Learning materials were commissioned by the project team and developed by a range of authors. The materials are freely accessible on the website or on DVD. These materials include workbooks, video clips, interactive materials and multimedia presentations in the areas of reflection, dyslexia, the failing student, communication, practice education development and skills development. All are available on the project website at, www.practicebasedlearning.org. Peer review of all materials ensured the quality of the resources hosted and materials developed.

Phase Three focused upon disseminating, implementing and evaluating the effectiveness of the resources and materials. This was achieved by regional working groups, on-line questionnaires, evaluations, meeting with statutory and professional bodies and feedback from practitioners.

The Steering Group took overall responsibility for the management of the project and had within its membership representatives from the three universities and major stakeholders. A Working Group comprising the Project Director and Project Managers took responsibility for the day-to-day running of the project. A Project Evaluator was appointed to the Project with a defined role and responsibilities. A project room was established at the University of Ulster from which the project was managed and run on a daily basis.

## Deliverables & Outcomes

#### 2.2 DELIVERABLES AND OUTCOMES

#### 2.2.1 Deliverables:

#### 2.2.1.1Goals and Outcomes

Original Project Goals	Actual Deliverables And Outcomes	Variations From Original And Reasons For Change
1 Identification and documentation of good practice on how practitioners are prepared for their educational role	<ul> <li>Literature , codes of practice, and existing practice reviewed</li> <li>Focus groups (profession specific) of students, practitioners and academics identified the components of the role of the practice educator</li> <li>Output of focus groups analysed to identify the skills, knowledge and resources needed by practice educators</li> <li>Points of commonality and divergence in roles, skills and knowledge across disciplines identified</li> <li>The knowledge and skills acquired through initial professional education were mapped against specifications</li> <li>Five case studies published on website and executive summary</li> </ul>	<ul> <li>No variation: All goals achieved and materials published as per goals and outcomes</li> </ul>

	<ul> <li>and CD ROM circulated to the wider academic and practice community (1000 copies) (Annex 1)</li> <li>A thematic analysis of data undertaken</li> <li>Commonalties and differences and 6 themes identified.</li> </ul>	
	Teaching and Learning in Practice Supporting Learning in Practice Assessment in Practice Reflection in and on Practice Interprofessional Learning in Practice Diversity in Practice	
	<ul> <li>The themes were mapped against knowledge and skills framework and professional standards and template created on the website for practitioners use</li> </ul>	
2 Learning materials developed and evaluated by and for five health care disciplines for use by practitioners.	Developers contracted to deliver resources within an agreed timeframe and format, delivered by Jan 2005 (Ten learning materials developed)	<ul> <li>Resources identified for web portal and ten learning materials developed (Section Four). All materials produced to project branding specification. More resources produced than at first</li> </ul>
	<ul> <li>Key personnel identified and involved in the review of learning materials and web portal resources representing the professional groups, the practitioners and the</li> </ul>	anticipated.

	<ul> <li>academic community</li> <li>Publication of Occasional paper by Health LTSN</li> </ul>	
3. Learning materials that will be made available in a number of efficient media, eg paper, electronic, CD-ROM and web- based.	<ul> <li>Website to reflect the Project branding and design redesigned</li> <li>Learning materials developed and made available in a range of media</li> <li>Leaflets and information materials produced in paper format regarding learning resources(Annex 2)</li> <li>DVD produced of learning materials (Annex 3)</li> <li>All materials available on the project website. Software purchased to check web-links to ensure updated and valid</li> </ul>	<ul> <li>Editing time was greater than expected</li> <li>Delay due to design issues but achieved by completion of the project</li> <li>Web links constantly changing so require regular monitoring</li> </ul>
4.A programme applicable to interprofessional and uniprofessional contexts.	<ul> <li>All materials produced in a interprofessional and uniprofessional format</li> <li>Web-portal provides a wide range of resources across all subjects and disciplines</li> <li>Resources mapped against all professional standards</li> </ul>	<ul> <li>No programme developed as felt to be unacceptable to professional bodies. Following discussion with the Steering Group it was agreed to develop resources and materials to be made available to all practitioners, students and academics. This was considered to be a preferred option</li> </ul>
5. Widened access for a multicultural workforce	<ul> <li>All materials and resources produced in a manner that is accessible to the diverse workforce</li> <li>Website compliant for visual</li> </ul>	<ul> <li>Limited information on diversity available during scoping exercise</li> </ul>

	<ul> <li>disability and available in text format</li> <li>Learning materials available for the dyslexic person</li> <li>Section on Diversity within the resources</li> <li>All learning materials produced with diversity in mind</li> </ul>	
6. Embedding best educational practice through the establishment of an academic-practitioner network	<ul> <li>Website links with HEA connect search facility</li> <li>Learning materials on the establishment of a academic practitioner produced</li> </ul>	<ul> <li>It was recognised that networks needed to be locally available and resources made available to support institutions in developing them, therefore no national network developed</li> </ul>
7. Dissemination of a range of materials and processes across the wider academic and health and social care communities.	<ul> <li>A regional and national awareness of the project for all potential stakeholders was created</li> <li>Information was regularly sent to all higher education institutions in the UK</li> <li>Web-based materials were highlighted in professional journals, LTSN - HEA</li> <li>Links were established with and from other websites HEA Subject Networks, NMC</li> <li>Abstracts, papers and presentations submitted and made at professional and education conferences</li> </ul>	A wide range of dissemination events and strategies were adopted

Publicity materials developed and disseminated	
<ul> <li>Workshops held annually at all associated universities and across disciplines</li> </ul>	
<ul> <li>Communication occurred regularly with stakeholders</li> </ul>	
<ul> <li>Contributed to subject centres events and conferences e.g. "Festivals of Learning"</li> </ul>	
<ul> <li>All stakeholders higher education organisations and interested parties details held on the Project Database</li> </ul>	

## 2.2.1.2 Major Project Activities

Title Of Organisation	Manner Of Involvement	Comments
Institute of Learning & Teaching for HE	Attendance at conference and presentation of workshops by two project managers	Useful networking opportunity. Workshop well received and promoted discussion and interest
Institutional Teaching & Learning Committees	Update reports tabled at University Teaching & Learning Committees	Updates received and noted by all partners through these final Teaching & Learning reporting systems
Professional bodies	Presentation and information given to: NMC; MCC; OT; Physiotherapy; Dietetics; Radiography. Professional bodies have been contacted	NIPEC and HPC represented on Steering Group. Presentations and Information sent to all professional bodies of disciplines involved in the project. All have given support to the project.
Multiprofessional Projects	DHS Trust "First Wave Projects"	Interfacing with full range of projects in UK. Communication and regular update maintained. Conference September 2003
Republic of Ireland Professional Bodies and HE Institutes	Participating in data collection and review of current practice	Facilitates a wider dimension to the project. All are interested and wishing to be involved
Clinical Placement Co- ordinators	Presentation and discussion with the professional groups	General agreement to be involved in the project providing information and testing resources when produced

#### Deliverables & Outcomes

## 2.2.1.3 Record of Meetings Conferences Workshops - 2003

STEERING GROUP	WORKING GROUP	WORKSHOP	CONFERENCE / MEETING ATTENDANCE
3 April 11 September	<ul> <li>6 January</li> <li>18 March</li> <li>8 May</li> <li>16 June</li> <li>10 September</li> <li>4 November</li> <li>1-2 December</li> </ul>	Belfast - 12 Sept B/mouth – 30 Oct Dublin – 1 Dec Newcastle – 5 Dec	<ul> <li>Interprofessional Learning Forum (Jan)</li> <li>LTSN Conference, Edinburgh (Mar)</li> <li>SEDA Conference (Apr)</li> <li>Innovations Conference (May)</li> <li>Multidisciplinary Workshop, London (Jun)</li> <li>Radiography Conference – Post Presentation</li> <li>ILT Conference, Coventry (Jul)</li> <li>Northumbria Staff Conference (Jul)</li> <li>Nurse Education Tomorrow 2003 (Sept)</li> <li>Employability Network Conference, Bristol (Oct)</li> <li>Enhancing Students Employability Conference, Durham (Nov)</li> <li>Multidiscipline Conference (Sep)</li> <li>FDTL – Nottingham (Nov)</li> </ul>

#### Deliverables & Outcomes

## 2.2.1.4 Record of Meetings Conferences Workshops – 2004

STEERING GROUP	WORKING GROUP	WORKSHOP	CONFERENCE / MEETING ATTENDANCE
23 January 13 May 24 September	11-12 March 25 May 17 August 26 November	Belfast – 1 April B/mouth – 25 May Glasgow – 8 June Newcastle – 11 June 1-3 March – Development Group Meetings Belfast London	<ul> <li>IPL – Sheffield Hallam (Mar)</li> <li>Employability – Brighton (Mar)</li> <li>Employability Residential (May)</li> <li>Reflection (Jun)</li> <li>OT Congress – Athens (Jul)</li> <li>ILT Conference (Jul)</li> <li>Employability – HEFCE – Penrith (Sept)</li> <li>IPL Education, Leeds –(Nov)</li> </ul>

## Deliverables & Outcomes

## 2.2.1.5 Record of Meetings Conferences Workshops - 2005

STEERING GROUP	WORKING GROUP	WORKSHOP	CONFERENCE / MEETING ATTENDANCE
26 January 7 June 22 September -	25 January 21 March 4 May 7 June 11 August 15 September 17 November	Newcastle – 16 Sept Glasgow – 13 Oct Dublin – 2 Nov Belfast – 18 Nov B/mouth – 13 Dec	<ul> <li>Chartered Society of Physios. (Jan/Feb)</li> <li>College of Occ. Therapists (Jan/Jul)</li> <li>NMC (Aug)</li> <li>The Society of Radiographers (Mar/May)</li> <li>British Dietetic Association (Ap/May)</li> <li>RCN Education Conference, Harrogate (Feb)</li> <li>Workforce Planning – Leeds (Feb)</li> <li>FDTL4 Conference – Manchester (Feb)</li> <li>IP Workforce –London (Apr)</li> <li>LTSN Practice Education –London (Apr)</li> <li>SEDA Conference – Belfast (May)</li> <li>HPC –London (Jun)</li> <li>IP Conference – Middlesex (Jun)</li> <li>L&amp; T Conference – Middlesex (Jun)</li> <li>Festival of Learning (Jul)</li> <li>Conference – Leeds (Sept)</li> <li>London – Improving Student Learning Symp.(Sept)</li> <li>Beryl Gillespie, East Anglia University (Nov)</li> <li>Susan Lea, Plymouth University (Sept)</li> <li>Sibyl Coldman /Elizabeth Miles, Westminster Un. (Oct)</li> <li>Monica Deasy, Lifelong Learning UK (Oct)</li> <li>RCN Practice Educators Forum (Oct)</li> <li>Annual Inter Disciplinary Conf. TCD – Poster (Nov)</li> <li>HEA Subject Centre (Nov)</li> <li>RCN Education Committee(Dec)</li> </ul>

#### Deliverables & Outcomes

## 2.2.1.6 Record of Meetings Conferences Workshops – 2006

STEERING GROUP	WORKING GROUP	WORKSHOP	CONFERENCE / MEETING ATTENDANCE
16 January	17 January 2-3 February 17 March 8-9 April 29 May		<ul> <li>RCN - Cardiff (Feb)</li> <li>John Haycock –North of England Prac. Grp. (Feb)</li> <li>NEPEG, Nottingham (Feb)</li> <li>Huddersfield (Feb)</li> <li>FDTL, York (Mar)</li> <li>HEA – Practice Learning &amp; Support Coventry (Mar)</li> <li>Altogether Better Health, London (Apr)</li> <li>Pharmacy, Birmingham (Apr)</li> <li>HEA IPL/PE Interest Group (May)</li> <li>An Altranais Bord (May)</li> <li>Burlington Group –Edinburgh (April )</li> <li>NWSHA, Bolton (May)</li> <li>SEDA, Liverpool (June)</li> <li>IPL Special Interest Group(June)</li> <li>NW (June)</li> <li>PIPE, Oxford (July)</li> <li>HEA, Nottingham (July)</li> <li>Reflective Practice, Cambridge (July)</li> <li>Reflections on Practice Learning, York (July)</li> </ul>

## Deliverables & Outcomes

## 2.2.2 Products of the Project

PRODUCT NAME	DESCRIPTION	LOCATION
Website	Project website housing all resources and materials.	www.practicebasedlearning.org
Case Studies	Five case studies, Dietetics, Nursing, Physiotherapy, Occupational Therapy, Radiography. Literature review, Methodology, Recommendations and Conclusions	www.practicebasedlearning.org
Executive Summary and CD ROM	Contains all of above (Annex 1)	Project Office
Occasional Paper (HEA 2005)	Literature Review published	Higher  Education Academy LTSN Health)
Leaflet	Details of the project	Project Office
"Reinventing the Wheel "	Details of web portal Resources (Annex 2)	Project Office
"Learning in Practice"	CD ROM and leaflet of 10 Learning Resources (Annex 3)	Project Office
Stands, posters and stationary	A range of posters representing the various phases of the project and the conferences they were displayed at Conference stands for each partner institution, Conference folders and bag. Letter heads ,compliment slips and business cards	Project Office and Project Team members offices
Project Report Executive Summary and CD ROM	Final Report and materials	Project Office

#### Dissemination

#### 2.3 DISSEMINATION

Dissemination of findings and their embedding across healthcare disciplines was pivotal to this project. Dissemination ran in parallel with other project activities as defined in the original Project Plan (Section 2.2.2) and began immediately on the commencement of the project through consortium, professional and multidisciplinary working groups and activities.

In the second and third years of the project, further dissemination resulted in engagement with staff from a range of organisations in the identification, development and piloting of materials and resources. A comprehensive communication and dissemination strategy was put in place including a website, liaison with Professional Bodies, and collaboration with the HEA Generic and Health Sciences and Practice Subject Centres. In all years of the project, activities focused upon road shows that provided the opportunity to review progress and generate new ideas.

#### Dissemination

Dissemination Strategy	Activity	Comments
From the outset, ensure awareness of the project across institutions and stakeholders	<ul> <li>Five focus groups and five working groups within each institution for each of the professional groups being scoped</li> <li>Structured information gathering by focus groups, questionnaires and interaction with professional and statutory bodies</li> <li>Active engagement with practitioners through annual regional workshops</li> <li>Consultation with individuals and groups through workshops and conferences</li> <li>Disseminate information on case studies and identified themes to all stake holders and interested parties</li> <li>Publicity materials and press release circulated. Bags with printed logo distributed to key personnel, website links with other key stakeholders</li> <li>Leaflets and publicity materials circulated widely</li> <li>Data base created of all interested parties</li> </ul>	<ul> <li>The project has interacted with a great range of groups and individuals as evidenced by the project data base of over 1000 people</li> <li>The development of individuals both professionally and personally is evidenced by the quality of the productions of the Case Studies, Learning Materials and Resources. All are acknowledged on the materials and in the project website</li> <li>The regional workshops had high attendance and participation with very positive evaluations</li> </ul>

#### Dissemination

<ul> <li>Give ownership of project outcomes to professional groupings who will embed them into practice and standards</li> </ul>	<ul> <li>Professional and statutory bodies have adopted the website and promoted the materials through their websites</li> <li>Interfacing with full range of projects in UK. Communication and regular update maintained. Inputting into National Strategy for Interprofessional Workforce</li> </ul>	<ul> <li>Professional Standards are being reviewed in the light of the project findings particularly in the areas of Interprofessional working and Diversity</li> </ul>
<ul> <li>Use existing academic and professional body conferences and communication systems, HEA and the NCT</li> </ul>	<ul> <li>A wide range of conferences and events were attended by the project team and presentations made.</li> </ul>	<ul> <li>Details of all conferences attended are outlined in Section 2.2.1.2</li> </ul>
<ul> <li>Dissemination occurred via publications, workshops, road shows, development and training.</li> </ul>	<ul> <li>Publications in professional and educational journals also disseminated information to a wider audience</li> <li>Regional Workshops were held annually and included North England , South England , Wales Scotland Ireland and Northern Ireland</li> <li>Road shows were hosted and attended if requested by practitioners, e.g. Strategic Health Authorities</li> <li>Presentations were made annually at the HEA conference and at special interest groups in Health , Employability and Interprofessional Learning</li> </ul>	<ul> <li>Details of all activities are outlined in Section 2.2.1.2</li> </ul>

#### 2.4 EVALUATION

#### 2.4.1 The qualities of the products and deliverables

The project achieved all its proposed outcomes, albeit with some variation dictated principally by the feedback from the sector and the practitioner community. In addition a constructive attempt was made to capitalise on all project successes (see Section Five, Appendix 5.3). The project team was committed to developing products that would not be destined to 'sit on the shelf', but would actually be used by practice educators. They were also well aware from their roles in the consortium HEI's of the electronic information revolution that was taking in place in health care sector education provision. The project team had to take into account what was achievable and most likely to have impact within the project time frame.

In terms of deliverables, the project team has received very positive feedback. All projects have limitations; however, these were managed as opportunities rather than setbacks. The project team hoped to complete the case study within the first year. Due to the adopted approach to involve experts in each discipline outside the project team there was some slippage, in order to ensure the publication was coherent and cohesive. Similarly the theme-based review of the learning resources used panels of experts and practitioners and this approach relied on their availability. Despite this, the project team remains committed to the evaluation approach as the products were consequently more diverse and peer evaluated as a result. One final issue related to the technical development of the website; much of this was developed by web and design colleagues working with the project team on a consultancy basis. Some technical issues took more time than anticipated to fully resolve but the strategy to include feedback from users on an on-going basis was able to be accommodated due to this approach and the website is richer and more userfriendly as a result.

# 2.4.2 The extent of take-up and use of products and deliverables.

The central aim of the project was 'to make practitioners more effective at supporting and supervising students in the workplace across a range of healthcare disciplines'. The role and importance of the practitioner in supporting work-based learning is well documented (Mulholland et al. 2005). The unifying theme of the project outputs was to provide resources to enhance this role. It is argued that in so doing, the educational experience of the student undertaking work-based learning will also be enhanced particularly in terms of the acquisition of employability skills. The actual use of the project products and deliverables nationally, at HEI level, by departments or by individual teachers and thereby their impact on student learning is difficult to establish in a quantitative way, but a number of indicators are very positive. These include the following:

#### 2.4.2.1 Workshops

The project team ran regional workshops each year (13 in total). These were advertised widely and a range of participants mainly from the health care education sector participated.

Overall comments from all evaluations were very positive. The format was to introduce participants to the project and then to give them an opportunity to explore the resources and learning materials on-line or in some instances in paper format. Where negative comments were received, these related in the main to venue issues and the amount of time available for the activities. Feedback from the workshops was gathered in two ways; first as part of a paper based questionnaire, secondly participants looked at the resource areas, and were then asked to complete an on-line evaluation form. In some cases this was completed as a joint response from a small group.

#### Evaluation

#### 2.4.2.2 Informal feedback

The project had a part-time secretary. The contact details were provided on all publicity material. This has been extremely useful because it enabled people to contact the project team (who are geographically widely-dispersed and receive responsive and friendly telephone and/or e-mail help with any enquiries. Even at the end of the project, the secretary received a steady stream of requests for information and publications. The secretary was a part of the project team working group receiving informal feedback via the practitioner network about the web-portal and fed this in to discussions. In this way the group was able to respond rapidly to technical difficulties experienced in Phase One around the use of the case-study CD-ROM.

#### 2.4.2.3 Consultations with professional groups

Throughout the project significant efforts have been made to engage with relevant professional and education groups. This approach has been effective and significant in-roads have been made. In terms of professional group contacts, meetings with Nursing and Midwifery Council (NMC) representatives provided information on the teacher standards under preparation at that time and a link from the NMC website to the project website was made. Discussions with the statutory body for allied health professionals (HPC) and professional bodies for individual groups such as the College of Occupational Therapists, Radiologists, Chartered Society of Physiotherapists, British Dietetic Association provided an opportunity to promote the project inter-professionally. Valuable discussion resulted, findings from the case study were highlighted and it was apparent that the resources on diversity, reflection and inter-professional working would be useful to these groups, as these were areas for development within their own practice educator programmes.

#### 2.4.2.4 Consortium Institutions

The means by which the project outputs have been embedded in the provision of the Consortium partner universities has been three-fold; first through representation of each university by a senior management colleague on the Steering Group; second through quarterly reporting of project activities and outputs to the Learning and Teaching Committees of each institution; and, finally, through project manager activities within each university. One focus of the latter has been to present the project to a wide range of practice educator groups with a view to promoting the use of the web-portal resources in preparation and update activities for these staff. This has proved very successful and is receiving active support from some local NHS Trusts; in the South of England, the open access and selfstudy nature of the education materials is viewed as a costeffective and flexible means of education provision.

#### 2.4.3 Effectiveness and impact of take-up and use

The effectiveness of the project, the impact of take up and use has been high. This is evidenced by the number of enquiries received via the website and the general awareness of participants attending conferences and workshops. The project outcomes are currently informing the Department of Health strategic development on workforce planning in interprofessional working. The interface with professional and statutory bodies and their links into the project website further evidences the national impact of the project. All HEI involved in professional training have been involved in the project scoping and many strategic health authorities have requested inputs into local conferences and workshops. The employability agenda has also been informed by and informing the project outcomes at both national and local level.

More recently, engagement with practitioners in the USA, Canada and Australia has resulted in invitations to participate in their development of the Practice Educator which is an increasingly recognised educational need in these countries. A recent grant application to work with Athens, Greece, also extends the project into Europe.

#### Evaluation

# 2.4.4 Lessons learnt of value to future HEFCE initiatives, FDTL and TLTP co-ordination, and other FDTL and TLTP projects

The lessons learnt by the project team are developed further in Section Six of the project report. The formal outputs of the project are only one of the major benefits of these types of initiatives. The opportunity for personal and professional development of a wide range of personnel, the acquisition of project management skills whilst also engaging with the wider academic and professional community are also value added to the project and hence to the institutions involved. Other lessons learnt included:

- Development of an effective communication strategy
- Respect and acknowledgement of all project participants
- Networking widely and identifying champions in the project's subject areas
- Producing high quality materials which denote a high quality project
- Writing Materials in language that is understandable and accessible to the wider community
- Contracting all work with clear guidelines and time frames so there was no risk of misunderstanding.
- Engaging senior management from all partner institutions and stakeholders in the steering group so that responsibly for the project and authority was shared and when necessary enforced
- Time scales are often longer than first expected for example design and publishing of materials and booklets
- Viewing problems as opportunities and not as obstacles.

#### 2.4.5 Brief summary of any external evaluation

The role of the External Evaluator was to monitor the implementation of the evaluation strategy, provide advice on the methods and procedures to be used in the collection and analysis of evaluation data and provide independent judgements on the outcomes of the evaluation. Partly due to the late appointment of an evaluator for this project, the main concerns of the first year were to establish clear communication links and clarify boundaries of activity. At the end of the second year, perspectives on the project from those outside the core team were taken, including members of the steering group and people contacted as part of the project's survey work. This was helpful to the project team to help provide a flavour of how the project was being received by others at this mid-way stage.

As the project unfolded and the outcomes had to be adapted in the light of contemporaneous developments in the sector and feedback from practice educators, the evaluator understood the need to move from the development of a staff development programme for practice educators to development of a website of educational resources for this community. Much of work at this time involved identifying relevant content for the website, designing and testing it out. The evaluator commended the involvement of others outside the core team for this work and the wide-ranging set of resources that was created as a result. Some concern was expressed about the intention to adopt a similar process to evaluate the content and user-friendliness of the site as being 'somewhat ambitious and complex' and indeed this was limited in certain respects. However, as has been seen (Section 5.3.4), feedback from workshops in Phase Three directly fed into on-going website development activities, making the process an iterative one with the community that the site was being designed to serve.

Continuation Strategy and Associated Activities

#### 2. 5 Continuation Strategy and Associated Activities

# **2.5.1** Further project activities, including funded initiatives, beyond the life of the project

The project team submitted a proposal to the HEA for transferability funding which was successful. This additional activity will enhance the role of work-based educators who support students on placements as part of undergraduate degrees within new partner institutions. It will build upon the Making Practice Based Learning Work project, which identified areas for development and subsequently produced web-based resources for health care professionals involved in all aspects of work based learning. These resources will be transferred for use in developing the role of work-based educators in the context of work based learning as part of the academic experience. This will be achieved by facilitating the new partner institutions to adapt and contextualise existing resources. The subject centres of Hospitality, Leisure, Sport and Tourism and Health Science and Practice will be pivotal to the transfer and application of this activity.

# 2.5.2. How end users can gain access to project products and expertise

The project team continues to make the website available to all interested parties. Software to access dead links has been purchased so that a monthly assessment of externally hosted resources can be undertaken. The format of the website continues to develop and will change to accommodate the wider remit of the transferability phase.

All learning materials are available on line or on CD ROM and a limited supply in hard copy. The project administrator is employed on a part-time daily basis to answer enquiries and to forward any materials requested. All information regarding the project, contacts and resources are available on the project website www.practicebasedlearning.org

# 2.5.2 Networking and information arrangements for those using, or interested in, the products

Members of the project team are committed to making themselves available to undertake presentations, consultations and to answer enquiries from relevant stakeholders. The membership of the project team on groups and committees which inform the strategic development of work-based learning will continue, as will the networking opportunities which will occur as part of their personal and professional life.

#### **PROJECT AIMS**

The Project aims to make practitioners more effective at supporting & supervising students in the workplace across a range of healthcare disciplines.

The professions involved in the project are:

- Dietetics
- Nursing
- Occupational Therapy
- Physiotherapy
- Radiography

The principal questions to be addressed in this project are:

- What constitutes effective practice in placement education?
- How can effective practice be implemented at organisational, professional and practitioner levels so as to maximise student learning on placement?
- How can this good practice be developed and embedded in the contexts of health and social care within a multicultural workforce?

Project Administrator Telephone: 028 90 368 458 www.practicebasedlearning.org





