Where there’s a WIL there must be a way ........to develop an evidence base.

ACEN 9th May 2013, The University of Sydney

A/Prof Simon Barrie
Director Teaching and Learning, The University of Sydney

Prof Lindy McAllister
Associate Dean, Work Integrated Learning, Faculty of Health Sciences, The University of Sydney
› ‘Curriculum renewal’ is endemic

› Complex outcomes require complex teaching and learning experiences – a complex curriculum (Hounsell, Entwistle, Land, Meyer, Prosser, Kember, Barrie)

› Good WIL can deliver the sort of outcomes society requires

› Why is there still curriculum ‘inertia’?

› Goodwill is expensive
› Goodwill is complicated
› Goodwill is disruptive
› Goodwill is optional (peripheral)
Local story is always more engaging

A framework for evidence

1. Assurance of Learning (outcomes) – ‘assessment’
2. Assurance of Learning (process) – ‘teaching and learning experiences’
3. Assurance of Learning (costs) – ‘resources’

Communicating ‘evidence’
The Context for my remarks

1. The central place of WIL in health profession degrees
2. WIL has a continuum of learning experiences, from classroom to the workplace
   - PBL/case-based learning in the classroom -> skills labs -> simulation -> service learning -> clinical placements
3. Reliance on practicing health professionals outside (the control of) the University to provide supervision to students (e.g., allied health, medicine)
   - Juggling normal workload (client care, admin, staff supervision) with student teaching
   - Duality of focus
4. The complexity of WIL in the health disciplines
   - Volume, timing, multiple stakeholders, competing interests, who pays
5. Complex Quality Assurance – numerous stakeholders, multiple layers
   - WIL QA measures, University course reviews, accreditation bodies, TEQSA
1. Outcomes for whom?
   - Students?
   - Courses?
   - Clients/patients?
   - Clinical supervisors?
   - Placement sites?

2. Assessment of student learning outcomes
   - In WIL placements – the need for valid and reliable assessment tools
     - COMPASS® in speech pathology (McAllister et al., Speech Path. Assoc. Aust., 2006)
     - APP in physiotherapy (Dalton et al., ALTC, 2009)
     - SPEF-R in occupational therapy (Roger et al., Uni Qld., 2008)
     - Diagnostic radiography in development (Kilgour et al. in progress)
   - Whole of course professional development assessment
     - e.g., Portfolios
### What is quality in WIL?

**Thinking about a continuum of WIL:**

<table>
<thead>
<tr>
<th>Research topic</th>
<th>Examples of research (published or in progress)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How can we best prepare students for WIL placements?</td>
<td>Various Quality Assurance projects\nYong et al., (honours project in dev)</td>
</tr>
<tr>
<td>• What? When? How?</td>
<td></td>
</tr>
<tr>
<td>3. What is the impact of different types of learning experiences on the development of students’ clinical competence?</td>
<td>Zhao et al., (honours project in dev)\nBlackford et al. in physio (in progress - Masters degree)\nSheepway, Lincoln, Togher (2011)\nNisbet, Hendry, Rolls, Field (2008)</td>
</tr>
</tbody>
</table>
### Research topic

<table>
<thead>
<tr>
<th>Research topic</th>
<th>Examples of research (published or in progress)</th>
</tr>
</thead>
</table>
| 4. What is the impact of different models of placements & supervision on the development of clinical competence?  
• 1 student OR multiple students:1 supervisor  
• peer learning  
• ‘normal’ vs role-emerging placements  
• intensity & duration of placement  
• single discipline vs inter-professional placements  
• direct vs indirect supervision  
• interprofessional supervision | [Rindflesch et al., 2009 (in OT & PT)]  
Research in development with sites  
Sheepway et al. (paper in review)  
Brunero & Merritt (paper in progress)  
Yang et al., (honours project in dev)  
NSW Health project (in development) |
| 5. Does supervision make a difference?  
• to student learning?  
• to client/patient care? |  |
| 6. What impact do students have on:  
• client care (quantity of services, quality of services)?  
• supervisors? host sites? | Research in development with sites |
Costs

WIL is expensive (even when supervision provided ‘free’ in external sites)

- Admin and academic time to source, organise and support placements; prepare students and supervisors for placements
- Simulation facility costs: resources, staff
- Skills labs: resources, tutor costs
- On placement: facilitation costs

Push for ‘payment for places’

Assumptions and outdated practices

- Students are a cost (e.g., time, energy of supervisor, resources of site)
  - Especially if using outdated placement & supervision models
- Doesn’t consider value adding by students
  - Client services (amount & range, direct & indirect client service activities; quality)
  - CPD and enhanced self-esteem for supervisors
  - Recruitment of new graduates and reduced orientation time