Chapter 19

Pedagogical Directions in Creating Interprofessional E–Learning Materials

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ABSTRACT

This chapter will provide new insights around the underpinning pedagogy of e-learning that supports the development of collaborative skills in health and social care. It will provide an articulation of practitioner epistemology concerning the development of e-learning materials designed to promote collaborative practice. To do this it will draw on a qualitative case study undertaken by the authors which aimed to uncover the working theories employed by academics when creating e-learning materials to support interprofessional education initiatives. The introduction to this chapter will set the scene by discussing how the initial drivers for developing e-learning materials are often logistics and efficient resource management. However, what this study uncovered were the underlying pedagogies lecturers used in developing e-learning materials. The introduction will signal discussions to be developed in the chapter of how these theoretical approaches to planning learning experiences are adapted and transferred from classroom based practice to the virtual environment.

INTRODUCTION

The Centre for Interprofessional e-learning (CIPeL) is a collaborative Centre for Excellence in Teaching and Learning (CETL) funded by the Higher Education Funding Council for England (HEFCE). The Centre for Interprofessional e-learning (CIPeL) has been engaged in developing e-learning materials which address some of the barriers to interprofessional education. This chapter will draw on our experience of combining these in the context of undergraduate, pre-

qualifying courses for health and social care. This chapter aims to articulate pedagogical principles of interprofessional e-learning drawn from current evidence and experience. It will examine the main principles of creating and using e-learning materials in interprofessional education and discuss the challenges and suggest solutions to providing e-learning that supports collaborative practice.

BACKGROUND

Interprofessional education (IPE) and e-learning are both high profile issues in the higher education sector. The policy focus on improving health and social care services emphasises the need for integrated services and collaborative working in the UK (DoH, 1999; DoH, 2001). These key ideas continue to be re-emphasised, underlining the continuing drive towards an agenda of improvement in health and social care services (Wanless, 2004; Department of Health, 2004a; Department of Health, 2004b; Department of Health, 2004c). The Climbié report focused attention on the need for improved communication between agencies and individuals involved in the education and welfare of children. The reports of disasters resulting from failures to safeguard individual children have provided a strong driver for identifying the knowledge and skills required for developing effective integrated services (Taylor, Whiting & Sharland, 2007).

The Bristol Enquiry Final Report (Kennedy, 2001) and the Victoria Climbié Report (Laming, 2003) represent significant breakdowns in service delivery in the UK and the UK Government has responded through policy initiatives. Successive policy initiatives around this area signal that effective collaborative working between agencies and with patients/service users must be supported by education and training that is genuinely multi-professional (see The NHS Plan (DoH, 2000), Expert Patient (DoH, 2002) and the green paper Every Child Matters (DfES, 2003)). This has led

to a requirement for interprofessional components within health and social care courses in Higher Education Institutions (DoH, 2000a, 2000b). This policy and the contractual requirements through commissioning processes, present higher education institutions providing prequalifying health and social care education with the challenge of ensuring that interprofessional learning is a feature of the courses they offer.

E-learning is a growing phenomenon within higher education and is seen as having the potential to support more learner-centred and personalised forms of learning (JISC, 2008). The Higher Education Funding Council for England (HEFCE) in its strategy for e-learning (2005, 2009) has indicated the need for the sector to embrace the use of the internet and new technologies. Prensky (2001) indicates that today's students are the first generation to grow up with new technology and as such think and process information differently from their predecessors. HEFCE recognises that today's students "are bringing new expectations of the power of technology into higher education" and states that the use of e-learning should become a normal or embedded part of lecturers' activities and that "staff require support so they can effectively exploit the potential of these new technologies" (HEFCE, March 2009, p. 5-6). E-learning, although perhaps to a varied extent across institutions, is already a feature of university life and promises to become a ubiquitous presence that will impact increasingly on learning and teaching.

THE CHALLENGE OF INTERPROFESSIONAL E-LEARNING (IPEL)

The delivery of IPE, as suggested earlier, is a requirement of health and social care programmes. It is not, however, without problems. One of the most compelling of these is the logistical and organisational difficulties of bringing students from a wide range of courses together in order

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