Chapter 23

A Case Study Exploring a Multi-Disciplinary Collaborative Initiative to Use E-Learning to Meet the Professional Learning Needs of Health and Social Care Practitioners

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ABSTRACT

This chapter explores the early development stages of an interactive interprofessional online learning package that updates and supports health and social care professionals who mentor students in practice settings. The package aims to present content that is relevant and useful to fourteen different disciplines accessing it. A benefit of online content is that learning can be undertaken when convenient for the mentor, 24 hours a day-7 days a week, with the facility to stop and restart as needed. Additionally the package is constructed so both individuals and groups can use it; this both meets a regulatory body's requirement for having a face-to-face update every year, and provides support for interprofessional learning between mentors from different disciplines.

INTRODUCTION

This chapter outlines the process of developing an interactive and interprofessional online e-learning package that updates and supports health and social care professionals who mentor students in practice settings. The concepts of e-learning are explored, including the potential benefits, the importance of ensuring it meets the learners' needs, and how barriers to developing this tool were overcome. Finally the package is presented; identifying the

steps mentors need to progress through to ensure they have developed the knowledge necessary to be effective in the role, to meet the standards set by professional bodies.

BACKGROUND

Health and social care students undertake placements within the workplace because practice environments are excellent for gaining experience and building confidence and competence (Benner, 1984; Schön, 1987). Qualified members of staff are expected to support them on placement, facilitate learning, and in some disciplines assess them, to ensure the student has the necessary psychomotor skills and underpinning knowledge base required for autonomous practice (Cope et al., 2000; Jones at al., 2001). Certain professional disciplines require these members of staff to regularly undergo mandatory updating (e.g. nursing, midwifery and operating department practitioners); for other professional groups this is a possible aspiration for the future.

Traditionally, for professions having mandatory requirements, update sessions are timetabled to be available many times throughout the year in a face-to-face event held in the placement areas. The purpose is to inform the clinical practitioners of curricula amendments, any changes within the Higher Education Institution (HEI) that may influence students' learning, as well as offering a forum to discuss issues and to ask questions. Each event is facilitated by a member of academic staff (a health or social care professional) from the university placing students within this area. Whilst sessions may include content that may seem relevant to more than one profession, particularly with generic content such as the role of staff in supporting learners, they tend to focus on one profession's content for curriculum and course structure. Therefore, in a placement area that supports students from more than one HEI or discipline, multiple sessions tend to be held,

all of which must be attended if staff wish to be up-to-date.

This way of delivering the updates is very resource-hungry for academic staff, however, the staff presenters consider it a 'necessary evil' in order to provide sufficient opportunities for the vast numbers of practitioners to access all the necessary information. The academic staff would rather utilise this time to visit placement areas and discuss activities that are taking place; indeed, both Pulsford et al. (2002) and Hutchings et al. (2005) determined that members of staff supporting students wanted more contact with the HEI, which matched findings from previous research (Atkins & Williams, 1995). In addition, this delivery mode made it extremely difficult to exploit the opportunity that the update sessions offer for interprofessional learning between mentors from different disciplines and institutions.

Despite the many available opportunities to attend, increased workloads and limited staffing resources are making it progressively more difficult for healthcare professionals to attend any activities requiring them to leave the practice environment. Pulsford et al. (2002) found that fewer than half of the members of staff surveyed had attended an update session in the past year, and 20 per cent had never attended one. When further questioned on what prevented them from attending, "Staff Shortages" was the most significant barrier, with "Lack of Prior Notification" and "Inconvenient Times" being also cited as problems. A positive note was that respondents appeared committed to the principle of updating, with only 2% citing lack of interest as a reason for non-attendance. However, this last point was contradicted by Joshua-Amadi (2002) who believed that staff often lacked incentive, motivation, encouragement and leadership to attend training.

Whilst concurring with Pulsford et al. (2002) that the staff members desired to provide support, Wilkes (2006) found similar problems within the working environment, such as lack of resources or time. More recently Myall et al. (2008) identified

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