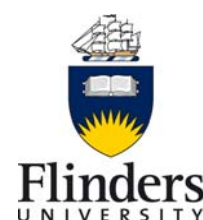


Final report for ALTC Associate Fellowship

Developing agentic professionals through practice-based pedagogies

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10th March 2009

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March 2009

Executive Summary: Developing agentic professionals through practice-based pedagogies

Currently, in higher education institutions across the world, there is a growing interest in work-integrated learning. In particular, in courses preparing graduates for specific vocational outcomes, the interest has occurred in response to the need to prepare students who are ready and able to practice effectively in their professions on graduation.

This Fellowship has enacted and appraised practices for effectively integrating students' learning experiences across university and practice settings to assist in realising the educational purposes of preparing graduates who are professionally adept and critical practitioners.

The Fellowship's specific focus has been to identify how students can be prepared, supported and sustained as agentic learners in both their learning through experiences in practice settings and as effective professional practitioners.

This goal has been addressed through engaging with and guiding five sets of academic staff in projects across four disciplines (Physiotherapy, Midwifery, Nursing, Human Services) in three universities (Griffith, Monash and Flinders). The key activities comprised:

- (i) integrating practice-based experiences in response to discipline specific teaching and learning issues, including developing students' capacities as agentic learners;
- (ii) enacting and appraising selected approaches to teaching and learning that aimed to develop learner agency;
- (iii) evaluating the outcomes of these interventions and their applicability to other disciplines in each university; and
- (iv) identifying how the approaches deployed within these universities can be replicated across the higher education sector.

Together, the five projects provide a platform to consider and appraise different aspects of and approaches to pedagogic and curriculum practices supporting the development of agentic learners, and ultimately, professionals. That is, the projects focus on a number of practices which may support the development of qualities which students require to learn effectively in both university and practice settings, including critically evaluating the contributions of both settings, in developing their capacities as professional practitioners. Across the projects a series of practices were identified that — if selectively enacted before, during and after student experiences in practice settings — could secure rich learning through fostering and developing agentic qualities in students.

In overview, it was found that:

- preparation for the required level of procedural skills for, and conceptual understandings about, the occupational practice undertaken before students participated in practice settings permitted them to most effectively participate and learn;
- processes to heighten awareness about the capacities required to be agentic were central to effective practice and learning;
- having peer and other forms of support during their participation in practice settings through forums that promoted peer interaction was helpful for developing professional understandings, and the procedures and dispositions required for effective practice;
- students learnt the processes and value of being agentic in their practices through practice and peer-based processes; and
- processes in the university setting after practice-based experiences that gave students the opportunity to share, reflect and critically appraise their experience were central to developing their professional capacities, including those associated with being agentic as practitioners and learners, and to maximising their learning.

Beyond the outcomes associated with the development of these curriculum and pedagogic practices, the Fellowship trialled a process of staff development termed non-directive guidance with some success.

Other outcomes included the extension of these practices within the participating teaching areas, and to their professional communities, the publication of these findings in books and journals, and opportunities to disseminate these findings to other Australian universities and to international audiences.

Professor Stephen Billett,
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Griffith University,
March 2009

Definitions

Work-integrated learning refers to the process whereby students come to learn from experiences in educational and practice settings and integrate the contributions of those experiences in developing the understandings, procedures and dispositions required for effective professional practice, including criticality.

Work-integrated learning arrangements include the kinds of curriculum and pedagogic practices that can assist, provide and effectively integrate learning experiences in both educational and practice settings.

Agentic learners are learners who are pro-active and engaged in making meaning and developing capacities in way that are intentional, effortful and are actively criticality in constructing their knowledge.

Non-directive guidance is a process of advising and supporting the participants in the conception and enactment of their professional development activities.

Acknowledgements

The Fellowship was supported by a range of institutions and participants, whose contributions deserve acknowledgement. Firstly, the Australian Learning and Teaching Council Fellowship scheme provided a vehicle, direct support and a prestigious institutional context that made possible enactment of the project and eased interactions with participating institutions. Secondly, the participants in each of the five subprojects who worked effectively individually and as a group made possible the Fellowship activities and also a trialling and evaluation of an approach to academic professional development (i.e. non-directive guidance), and the identification of tentative practices associated with developing students as agentic learners. These were Dr Liz Molloy, Dr Jenny Newton, Professor Brian Jolly and Professor Jenny Keating (Monash University), Associate Professor Pauline Glover and Dr Linda Sweet (Flinders University) and Dr Jennifer Cartmel, Dr Jane Thomson, Associate Professor Marie Cook and Dr Marion Mitchell (Griffith University). Thirdly, the three universities that supported the Fellowship activities (Monash, Flinders and Griffith) and have engaged with the findings directly contributed to the success of this Fellowship. Fourthly, Griffith University's direct support of the activities of the Fellowship was instrumental in realising its outcomes. Fifthly, Professor Amanda Henderson (Queensland Health) provided support and an independent evaluation of the Fellowship activities, both of which are well received.

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The key messages I'm getting from this week are to be proactive in my learning during clinicals in terms of critically reflecting and not leaving it to the supervisor to make times with me for feedback. To be professional and show interest in what I am doing, be punctual and be prepared with notes. To concentrate on the patient rather than the fact that I am being tested and to understand that I am not the priority- the patient is. To be socially aware of people, adapting to my supervisor's style of teaching.

(physiotherapy student — Molloy and Keating)

1. The Fellowship context

Currently, there is a growing interest in work-integrated learning across higher education institutions (HIEs) world-wide. This interest responds to an increased emphasis within higher education on courses that prepare people for specific vocational education outcomes, and for graduates to be job-ready. Consequently, educational programs in universities are now being positioned as providing 'higher vocational education', with accompanying expectations that graduates will enjoy smooth transitions into professional practice (DIUS, 2008). Aligned with the emphasis on occupational preparation within higher education is an increased interest in work-integrated learning, albeit taking different forms across different countries and universities within and across those countries. Many Australian universities have now identified work integrated learning as a key focus for improving their teaching and learning provisions. For instance, all of the Innovative Research Universities of Australia have specific strategic goals for work-integrated learning provisions being embedded across their programs. Such learning experiences are seen as highly accessible and greatly valued by students and their employers (e.g. DEEWR, 2008). Moreover, the effective integration of these experiences into higher education is now seen as central to addressing growing societal (BIHEC, 2007; Universities Australia, 2008) and governmental (DEST, 2002; DIUS, 2008; DEEWR, 2008) concerns about improving the quality and quantity of professional occupational competence (DEEWR, 2008). Certainly, governments, employers and students all hold high expectations that these programs will secure the kind of capacities that are (i) required for effective professional practice, and (ii) ready to be applied in practice on graduation. However, because these expectations are high and not always easy to achieve, meeting them represents a significant educational challenge. It follows, therefore, that there are important teaching and learning issues not only about the educational worth of students engaging in practice-based experiences, but how the integration of these experiences should best occur within higher education. Without responses to these issues, it may be difficult to organise teaching and learning experiences in ways that can approximate or realise the expectations of those who sponsor and employ graduates and make judgements about the quality of higher education provisions.

This Fellowship has sought to respond to a part of this challenge by seeking to identify practices for effectively integrating students' learning experiences across the university and practice settings to assist in realising the educational purpose of preparing graduates who are professionally adept and critical practitioners.

The particular focus in this Fellowship has been to identify how students can be prepared, supported and sustained as agentic learners in both their learning through experiences in practice settings and preparing to be effective professional practitioners.

This goal has been addressed through engaging with and guiding five sets of academic staff in projects across four disciplines (Physiotherapy, Midwifery, Nursing, Human Services) in three universities (Griffith, Monash and Flinders). The key activities comprised:

- (i) integrating practice-based experiences in response to discipline specific teaching and learning issues, including developing students' capacities as agentic learners;
- (ii) enacting and appraising selected approaches to teaching and learning that aimed to develop learner agency;
- (iii) evaluating the outcomes of these interventions and their applicability to other disciplines in each university; and
- (iv) developing the capacity to enact these approaches within these universities in ways that that can be replicated across the Australian higher education sector.

In this way, the Fellowship responds to educational challenges arising from demands for universities to prepare their graduates for specific occupations and for these graduates to enjoy a successful and smooth transition to practice. This expectation is difficult to realise, because the particular requirements for professional practice can differ quite widely across occupations as do the settings in which practitioners work. The educational provision for some occupations already has highly ordered and regulated arrangements for practice experiences (e.g. teaching, nursing). Other occupations follow different kinds of long standing practice-based arrangements (e.g. medicine, physiotherapy, accountancy, law). However, far more, and perhaps the majority of disciplines, have practice-based arrangements that are generated on a more ad hoc basis by universities offering preparatory occupation programs within the discipline. Moreover, there is a need to develop the canonical knowledge of each profession (i.e. the knowledge required by all who practice that occupation), and also a requirement for this knowledge to be learnt in ways that make it adaptable to the practices that graduates will encounter during their courses and directly upon graduation in particular practice settings (Billett, 2009).

It is for these reasons that there is a need for graduates to have practice-based experiences throughout their programs of study. But importantly these formative and constructive experiences should be effectively integrated within the curriculum. More than simply being settings in which to experience the occupational practice and apply what has been learnt in university settings, practice settings provide essential learning experiences in their own right (Billett, 2001b). Practice-based experiences need to be positioned to strengthen and augment what is learnt through experiences in educational institutions, as well as make their own contributions. Yet, if students are to participate effectively in, and learn from, their experiences in both university and practice settings, they will need to have the personal capacities required for this approach to learning. Furthermore, this capacity as an agentic learner is also central to what constitutes an effective professional practitioner: that is, someone with the capacity to be able to independently appraise the processes and outcomes of their practice, and make judgements about its efficacy and how it might be improved.

Consequently, this project aims to understand how to maximise students' learning experiences by developing and appraising pedagogies for practice-based learning in four discipline areas (nursing, physiotherapy, human services and midwifery) that integrate work-based and academic learning in developing students as agentic professionals (i.e. independent practitioners and intentional learners).

2. The issue: Effectively utilising practice experiences to develop professional competence

Today, university graduates are increasingly expected to possess the capacities to make a smooth transition into effective professional practice. In concert, higher education institutions are expected to direct curriculum and pedagogy to realising that expectation. The realisation that participation in university-based activities alone is insufficient to develop the competence required for effective professional practice is far from new and has long since led to the inclusion of practice based-experiences in courses of professional preparation (e.g. Jolly & McDonald, 1989). However,

experiences in practice settings may still be seen as largely providing opportunities for students to practise what they have learnt in the academy, rather than as rich and legitimate learning experiences in their own right (Billett, 2001b; Boud & Solomon, 2001), and ones that provide particular and salient contributions to professional competence (Henderson, Twentymann, Heel, & Lloyd, 2006). Despite recognition of their potential, it is perhaps the exception to identify circumstances where students' experiences in practice-based settings are seen as being legitimate and making a significant contribution on their own terms to students' higher education experiences (Billett, 2006). Hence, the practice of maximising knowledge learnt from practice settings through their integration with university teaching has yet to become a central pedagogical tenet of higher education. This Fellowship has sought to redress this situation through its consideration of how student agency can be generated in ways that support the integration of experiences in both settings.

The Fellowship activities in each of the five projects were informed by four key premises.

First, authentic practice (i.e. workplace) experiences can make particular and potent contributions to students' learning (Billett, 2001b; Henderson, Winch, & Heel, 2006). These experiences provide access to authentic instances of professional practice and expert practitioners in ways that are simply unavailable in university settings.

Second, the kinds of activities individuals engage in shape their learning: "activity structures cognition" (Rogoff & Lave, 1984, p. v). Therefore, providing access to activities and interactions that are authentic in terms of the performances required to be learnt and practised becomes essential for learning effective practice. Currently, much of higher education students' learning is shaped by universities' institutional practices, which are distinct from professional practice. While substitute experiences (e.g. moot courts and mock hospital wards) are useful in providing a benign environment in which to develop initial capacities, they do not provide access to the array of dispositional, procedural and conceptual contributions available in authentic professional practice (Billett, 2001a). So 'canonical' professional concepts, procedures and dispositions that might be learnt in university-settings need augmenting by understandings, procedures and sentiments learnt through experiences in authentic instances of professional practice: practice-based experiences.

The third premise is that understanding some of the variations of professional practice stands to make that knowledge more applicable to diverse instances and requirements of practice that graduates will encounter (i.e. more robust). Early views of human performance suggested that adaptability was premised on generally-applicable capacities (Bartlett, 1958), and then, on the possession of domain-specific knowledge and the capacity to manipulate it (Ericsson & Smith, 1991). However, more recently, understanding the specific and situational bases for performance to be enacted has been emphasised (e.g. Brown, Collins & Duguid, 1989; Engeström & Middleton, 1996; Billett, 2001b). Hence, the development of adaptability and the competence required for practice might well be found in utilising a range of these experiences within the university setting.

The fourth premise is that practitioners need to be effective self-directed and agentic learners throughout their professional lives. That is, students need to intentionally develop, through their engagement with practicum environments (Jolly & Ho Ping Kong, 1991), effective personal epistemologies which will support the initial and ongoing learning required for their professional practice. Hence, there is a need for educators to engage with students' experiences in practice settings to secure the development of competent professional practice. To realise these outcomes, teaching and learning approaches need to be developed to effectively utilise and integrate practice-based experiences, and secure changes in university curriculum and pedagogy.

3. Fellowship goals and questions

The goals of the Fellowship, it follows, are to:

- (i) enhance students' learning of their professional practice, including making efficacious the transition to competent practice;
- (ii) improve teaching and learning practices through using practice-based experiences;
- (iii) develop and sustain the use of those practices through changes to their institutions' commitments, curriculum and pedagogy; and
- (iv) engage in an active dissemination of those practices in the participating universities and across others.

The Fellowship's central question is:

How best can practice-based learning experiences and those in the university be integrated to provide effective teaching and learning for professional practice?

The associated sub-questions are:

What teaching and learning practices need to be enacted to maximise the contribution of learning from practice based experiences?

How should activities be enacted in practice settings to secure rich learning outcomes?

How can teaching practices within universities promote students' capacities to be agentic in their learning and further develop effective professional practice?

4. The Fellowship process: Non-directive guidance

As foreshadowed, this Fellowship has identified ways of developing students' professional competence through teaching and learning approaches that integrate experiences in practice settings with those within university environments. This was realised by identifying and attempting to address particular teaching and learning issues in each of the teaching areas (midwifery, physiotherapy, nursing, human services) that comprised the projects within this Fellowship. The process goals were to develop further and sustain capacities to enact this integration within higher education institutions.

The process selected for achieving this outcome was based on four premises.

First, in order to engage and make relevant the Fellowship activities to participants, they were asked to identify and respond to institutionally and disciplinary distinct teaching and learning issues that were central to integrating students' practice experiences. Consequently, each set of participants identified a particular issue that was pertinent to their area of teaching.

Second, the approach taken by the Fellow was one of non-directive guidance; that is, a process of advising and supporting the participants in the conception and enactment of their development activities. For instance, the first meeting was used to assist participants identify not only the area for their engagement and innovation, but also some of the key factors they needed to consider.

Third, collaborations and interactions across the participants were a deliberate feature of the Fellowship process. For example, in both the initial and concluding Brisbane workshops, the key outcomes were derived from collaborative exchanges and considerations of issues, responses and their worthiness (see Appendices C and D).

Fourth, for the adoption of the Fellowship's findings to be maximised, the development of both conceptual and procedural aspects of participants' capacities was desirable. That is, the Fellowship comprised a process that aimed to develop the kinds of understandings that can guide practice, and

the capacities associated with enacting selected approaches to and strategies for realising these outcomes.

Overall, the development of the tentative teaching and learning practices and principles that effectively integrate the particular contributions from practice-based settings within higher education programs were identified and enacted. These teaching and learning practices and principles (i.e. pedagogy and curriculum concepts and practices) were generated through a process of guided engagement from the distinct projects enacted across the participants' areas of teaching. Yet, there are also conclusions that have a more general application. For instance, the need for student practitioners to be pro-active in their engagement and learning across academic and practice settings is likely to be a desired educational goal for all programs.

The Fellowship process focussed on academic staff identifying, enacting and evaluating approaches that secure integration in preparatory programs in four discipline areas (nursing, physiotherapy, human services and midwifery). These professional fields were selected because of their importance in providing and maintaining an effective national healthcare work force, in the face of significant skill shortages and issues of low retention of these workers, along with an ageing population increasingly in need of good care. The Fellow worked directly with groups of academics and practitioners at Monash (Nursing – Professor Jolly and Dr Newton, Physiotherapy – Professor Keating and Dr Molloy), Flinders (Midwifery – Associate Professor Glover and Dr Sweet) and Griffith (Nursing – Dr Mitchell and Dr Cook, Human Services – Dr Thomson and Dr Cartmel). The process attempted to build a sustainable capacity in these institutions to integrate practice based teaching and learning experiences in other academic areas through developing the agentic capacities of students. The academics and their institutions are working to disseminate their findings across the discipline areas and their university (see Section 8).

5. The Fellowship Activities

The Fellowship activities comprised ten discrete activities, focussed on:

- identifying, enacting and appraising teaching and learning strategies to better integrate the contributions of students' experience in academic and practice-based settings in each of the participants' teaching areas;
- proposing means of developing and extending students' agency and personal epistemology within each of the 5 projects;
- developing the capacities of academics in the participating universities and disciplines to provide and sustain teaching and learning experiences likely to maximise academic/practice-based integration; and
- initiating the development of teaching and learning capacity more widely within the participants' universities and disciplinary fields.

Professor Amanda Henderson (Queensland Health) supported the Fellowship throughout as a critical friend, progressively appraised its findings and means of dissemination and conducted an independent evaluation of the project (see appendix D).

In the sections below, the set of ten discrete activities which comprised the Fellowship are briefly described, and are summarised in Table 1 that follows.

Activity 1: Pre-commencement planning (December 2007 and January 2008)

Pre-commencement activities occurred during December 2007 and January 2008. These comprised familiarising with the participants with the aims of the project, and with the expectations of participation. Griffith University sponsored a 'pre-commencement' symposium for project partners and advisory members in January (21st and 22nd) 2008. The symposium's purpose was to familiarise participants with the project's planned activities, negotiate roles and activities, and begin to build the kinds of collaborative relations that worked to secure the effective sharing of experiences in the later phases of the project. There was also input and discussion about the means by which the project might best integrate practice experiences, and engage with clinical practitioners about how to develop the students as pro-active learners to maximise their practice experiences. An evaluation framework for the project was also established at the symposium with the assistance of Professor Henderson. Importantly, the symposium provided the opportunity for all participants to come together to share their understandings and work focuses and consider the particular emphasis they would pursue in their project. The symposium, also provided an opportunity to negotiate the bases upon which the Fellowship would proceed and the expectations of the separate projects.

Phase One: Identifying responses (January–February 2008)

Activity 2: Identifying discipline-specific teaching and learning issues

This first phase focused on examining the specific teaching and learning issue to be addressed in each of the areas and develop teaching/learning responses to be enacted in Phase Two. Each project had to develop a Project Plan by the 8th February (see Appendix A). These plans were used to guide the projects over the period of the Fellowship. For instance, through a process of discussion it was decided that the key focus for physiotherapy at Monash was to be on how to best utilise and integrate the lengthy periods of practicum experience that are a key feature of their program. In the area of human services at Griffith the focus was on preparing students for the personally confronting nature of human services practice. The issue for nursing at Monash was to maximise the learning potential of short periods of student nurses' hospital-based experiences, through the use of reflective meetings with students. In each instance, the focus was on how the experiences in both

the academic and practice setting could together best contribute to improving the students' learning experience. To undertake this activity, the Fellow engaged with the academic staff and clinical practitioners to identify the teaching and learning issues, and select teaching and learning approaches that were to be enacted in addressing these issues. This included face-to-face meetings with the academic staff at each institution and visits to the practice sites to explore options and potentials with clinical staff. The outcomes of the planning phase are evident in the full project descriptions that are provided in Appendix A, with summaries provided in Section 6. Each of these project plans addresses the project's purpose and significance, with whom and how it will be enacted, and then its findings will be disseminated.

Activity 3: Developing students as agentic learners

In this activity, specific consideration was given to how best to develop students as engaged, proactive and reflective learners. A framework — developed and discussed at the Brisbane planning symposium — was used to identify the kinds of experiences that would be provided, how students would likely engage with these experiences, and the expected learning outcomes. The goal here was to identify the pedagogic properties of experiences in both the university and practice setting, especially when they were integrated. This included how the experiences might be best organised to develop student-practitioners as active and critical learners in relation to the participating institutions' specific teaching and learning goals. Importantly, the face-to-face discussions within and across the projects focused on the particular issues being addressed in each of the projects. That is, rather than having an abstracted approach towards understanding developing attributes, the discussions were grounded in the particular issue to be addressed in each of the projects. The outcome of identifying issues was achieved through the Fellow providing non-directive guidance to each of the project participants via a series of face-to-face meetings (see Table 1) and e-mail and telephone conversations.

Activity 4: Developing Understanding for Capacity Building

During this activity, the Fellow involved academic staff development units in workshops and discussions. For instance, a member of the Griffith Institute of Higher Education (GIHE), Dr Calvin Smith, participated in the planning symposium. Moreover, the Fellow participated in seminars organised by GIHE on work-integrated learning at this time, thereby assisting build institutional commitment. At Monash University, staff from the Centre for Clinical Practice Studies (Kara Gilbert) both hosted and participated in meetings associated with the Fellowship. This member of the Centre subsequently became involved in contributing to a book proposal arising from the Fellowship work. Throughout, there was discussion with participants about how dissemination might best proceed. During the Fellowship, the dissemination involved participants presenting at a number of forums, conferences and meetings to share the ideas and findings of the Fellowship activities. Academics from each area thus developed further their capacity to reflect upon, understand and establish bases for effectively integrating students' experiences of the academic and practice settings.

Phase Two: Enacting integrations (February–September 2008)

Activity 5: Considering curriculum and pedagogic practices

Phase 2 comprised the enactment of the teaching and learning approaches in each of the five academic areas across the three universities.

The Fellow's activities through this phase were to:

- (i) work with the academics in the three universities in monitoring, guiding and assisting reflections upon the enactment of the teaching and learning experiences; and

- (ii) act as a critical friend to each of the higher education and clinical settings, catalogue and monitor the progress and share experiences progressively across the five projects.

Again, this was realised through a process of non-directive guidance in which the Fellow provided support and advice and sought to build up an effective working relationship with each of the projects' participants. This included assisting partners in the projects to consider and share options for curriculum and pedagogic practices as they appraised the enactment and utility of their tentative principles and practices. Through these activities, the participants worked to develop further their capacity to organise effective teaching and learning experiences for their students focused on the integration of the contributions of both the academic and practice settings. This perception is supported by the findings of the independent evaluation provided here in full in Appendix D, and an initial report provided in Section 10. This phase coincided with teaching in semester one of 2008, with the intention of providing opportunities for refinement of practices in the second half of that year.

Activity 6: Appraising responses to curriculum and pedagogic practices

Within Phase 2, academic staff were monitored and guided by the Fellow about how best to evaluate how the particular approaches could be appraised for their capacity to secure each project's intended outcomes. Evaluations of the processes enacted were mainly gathered from students, but also from individuals in hospital workplaces, through survey sheets, interview transcripts and processes designed to capture whether the strategies were achieving their intended purposes. The approaches used in this activity were those that have been applied successfully in the past by the Fellow when identifying contributions to learning in workplace settings (e.g. Billett, 2001b).

Phase Three: Appraising practice and development (October 2008)

Activity 7: Effectiveness of the curriculum and pedagogic practices

In Phase 3, partners appraised the teaching and learning processes they had enacted across the first semester and their outcomes individually and then engaged with the other participants at a Development Conference held at the University of Technology, Sydney on the 30th of September. The discussion at this meeting focussed on the effectiveness of the selected teaching and learning approaches in addressing the participants' particular teaching and learning issues. At this meeting, a presentation of findings by each of the project teams was followed by a discussion involving all participants about how the findings related across projects. From this discussion, a set of tentative principles and practices for the effective integration of learning experiences in practice settings was identified.

The Fellow's activities here comprised:

- (i) working with each of the teams in appraising their activities;
- (ii) identifying their wider applicability; and
- (iii) organising and facilitating the Development Conference and guiding its outcomes.

In particular, the organisation of the meeting and generation of the tentative principles for supporting the development of agentic learners was undertaken by the Fellow.

Phase Four: Consolidation and Dissemination (November--December 2008)

Activity 8: Establishment of principles and practices for developing agentic student learners

In Phase 4, the tentative findings presented and discussed at the Development Conference were consolidated into a set of principles and practices to guide the development of instruments for facilitating, monitoring and evaluating the integration of learning experiences in higher education and practice settings. The development of this tool was important in that it could be used to guide

and appraise the effectiveness of practice for generating agentic learners who are able to maximise their experiences in and across university and practice settings. The Fellow supported and assisted the participants through considerations of these tentative practices and principles by finding ways that they related to the five areas of teaching. The Fellow also assisted academic partners to secure publications in their professional field about the outcomes of the Fellowship, thereby promoting strategic change in teaching and learning.

Activity 9: Project evaluation (December 2007–December 2008)

The evaluation of the Fellowship included progressive feedback about the processes, and measures of desired outcomes to the Fellow by Professor Henderson throughout the Fellowship, and also through independent interviews between Professor Henderson and the project participants. The former occurred across 2008 and took the form of discussions after meetings and occasional phone conversations. The latter were undertaken in late November 2008 and February 2009. It was largely this independent assessment, as informed by the participants, which shaped the evaluation of the Fellowship which is provided in Appendix D in its full form, and of which a two-page summary is provided in Section 10.

Activity 10: Dissemination of outcomes (January–December 2008)

The dissemination of the project's outcomes occurred progressively through the period of the Fellowship.

Initial scene setting and project focuses were discussed at the meeting organised by the then Carrick Institute in Sydney in March 2008. At that meeting, an overview of the project, and the particular focuses of the five projects were presented and discussed with other Fellows. These discussions helped to sharpen the scope and focus of the Fellowship activities.

Other forms of dissemination occurred throughout the Fellowship period. The fellow provided a keynote presentation at a work integrated learning symposium in Brisbane, hosted by the Griffith Institute of Higher Education in April 2008. The Fellow was also invited to present at two symposia organised by universities in the fields of law and nursing. He also used the tentative findings of the Fellowship in a keynote address at the World Association of Cooperative Education (WACE) that was held in Sydney in early October 2008. In addition, he has presented a keynote conference in Singapore using these findings (December 2008), and has been invited to present keynotes in two other international conferences in 2009 to report the findings. He has also published a paper in *Studies in Higher Education* arising from work on the Fellowship (Billett, 2009). The Fellow has also led the development of an edited book proposal for Springer — *Promoting Professional Learning* — that includes all of the projects (see abstracts from participants in Appendix E).

Other participants have also engaged in dissemination activities. Dr Molloy and Dr Newton presented their findings at an event in Melbourne which emphasised how research can inform practice in the health sector. Dr Newton, Dr Sweet and Associate Professor Glover presented symposium papers at the WACE conference. Moreover, each of the participants is seeking to have the findings of their projects implemented within their faculties. For instance, Dr Molloy is using the findings to improve experiences in the pre-practicum experience week which she organises for her students. Dr Cartmel used her experiences of learning circles to provide a more balanced preparatory experience for her students in the human services area. Dr Newton is seeking to have clinical supervision introduced more widely into the nursing curriculum at Monash University. Associate Professor Glover and Dr Sweet will be seeking to improve midwifery students experience with follow through births, including students' preparation for and engagement in critical reflections on these experiences. The set of tentative pedagogic principles and practices that have been developed through the Fellowship are still being refined and circulated. They will be made available to audiences through published work (such as the article in *Studies in Higher Education*)

and also through book chapters and further articles. Moreover, the Fellow is now working with staff at Griffith University to have these principles and practices enacted more widely. This is being achieved through a Griffith work-integrated learning working party (WILWP) and also through working with practicum experience offices.

Table 1 summarises the activities that occurred across the phases of the Fellowship including the meetings that occurred, their dates and principal focuses and functions, and the kinds of engagements enacted. The footnotes list other activities related to the Fellowship's phases.

Table 1: Fellowship planning activities (Phases, activities and dates)

January	February	March	April	May	June
Phase 1 - Identifying responses 1 Pre-commencement planning 2 Identifying teaching & learning issue 3 Students as reflective learners 4 Plans for capacity building		Phase 2 - Enacting integrations 5 Considering curriculum and pedagogic practices 6 Appraising Responses to curriculum and pedagogic practices			
21–22 Jan Planning conference, Southbank Brisbane	Fellow — engage 3 unis Participants - Prepare project plan by 8 th Feb	March — Melbourne meeting 14 March; Griffith Meeting (Logan campus) 17 March			June — Flinders Meeting 16 th June; Monash Meeting 17 th June; Griffith 20 June
<u>Focus of activities</u> Identifying teaching & learning issue Students as reflective learners Plans for capacity building		<u>Focus of activities</u> Considering curriculum and pedagogic practices Appraising responses to curriculum and pedagogic practices			
July	August	September	October	November	December
Phase 2 — Enacting integrations 5 Considering curriculum and pedagogic practices 6 Appraising Responses to curriculum and pedagogic practices			Phase 3 — Appraising practice & develop 7 Appraise curriculum & pedagogic practices	Phase 4 — Consolidation and Dissemination 8 Consolidation and dissemination	
	Teleconference for all — 15 ^h August		30 September at UTS Development conference	Nov 27 ^h Consolidation Meeting, Southbank Brisbane -	
	<u>Focus of activities</u> Sharing findings		Appraise curriculum & pedagogic practices	<u>Focus of activities</u> Consolidation and dissemination	

Other events

March 11 — presentation of project in Sydney Vibe Hotel — ALTC forum

April 16 — keynote WIL symposium at Griffith University — Integrating work experiences in higher education programs: Its educational worth

October 2 — keynote World Association of Co-operative Education conference, Sydney — Realising the educational worth of integrating work experiences in higher education

6. The Five projects

This section describes the purposes, significance, process and findings of the five projects. The full descriptions of these projects are provided in Appendix A.

In different ways, the projects all came to focus on teaching and learning interventions to occur: (i) prior to, (ii) during and/or (iii) after students had engaged in practicum experiences (see Table 2). However, for each project, the analytical reach was not restricted to the point in time at which the intervention was enacted. Instead, data gathered in the appraisal of each project identified implications for interventions before, during or after the practicum experience. Table 2 summarises the range of teaching and learning interventions across institutions and teaching areas.

Table 2 — Focus of project activities and initiatives.

University	Teaching area	Selected approach	Interventions enacted:	Implications for interventions:
Monash	Physiotherapy	Clinical preparation week	Before practicum	Before and during practicum
Monash	Nursing	Clinical supervision	During practicum	Before, during and after practicum
Flinders	Midwifery	Reflecting on follow through experience	During practicum	Before, during and after practicum
Griffith	Human services	Learning circles	Before practicum	Before, during and after practicum
Griffith	Nursing	Engaging with co-workers	During practicum	Before and during practicum

Each of the reports in the following sections identifies the purpose and significance of the intervention used to promote agentic learners in a work-integrated learning context, and also presents the findings from the appraisal of the interventions. As noted, the participants in each of the projects identified a particular practice-based concern for student learning in their programs and then enacted interventions of different kinds to trial and appraise potential curriculum and pedagogic responses to those concerns. In these ways, the approach, method of appraisal and findings are of a different kind. However, in each, there is a discussion specifically focussed on what did and should occur prior to, during and after each student's participation in the interventions.

The individual project reports are followed by a synthesis of their findings which attempts to understand how best to provide experiences that engender agency in students through participation in learning experiences in both higher education and practice settings.

Project Title: Targeted Preparation for Clinical Practice: Implementation and evaluation of the 'Transition Week'

Liz Molloy and Jenny Keating (Monash University)

Purpose

This project aims to develop and assess an innovative curriculum to prepare students to meet the demands of clinical education. Undergraduate physiotherapy students consistently report that they feel underprepared for the complexity and uncertainty of clinical practice (Molloy & Clarke 2005; Ansari 2003; Neville & French 1991; Cupit 1988). Health care work is inexact by its nature. Yet, students entering the arena of clinical practice are expected to apply theory to practice, to form professional and productive relationships with patients and colleagues, and to navigate institutional norms. Additionally, students are required to interpret and respond to the changing expectations and knowledge base of the physiotherapy profession and wider health care community, and are assessed on their capacity to achieve these goals. The aim of engaging students in a one-week pre-clinical program is to make transparent these expectations of clinical education, to provide them with explicit skills in adult learning, and to, therefore, ease the difficulties to transition between the academic and clinical learning environments.

The innovation will be enacted as a one week university-based preparatory program undertaken by third year students prior to entering clinical placements. The pre-clinical week will have two aims:

- 1) to make transparent the often implicit expectations of clinical education; and
- 2) to provide students with knowledge and skills in adult learning and critical reflection.

These skills are likely to provide students with agency in their professional learning (Molloy & Clarke 2005). Students will be asked to rate their perceived level of readiness for practice pre and post intervention, and will appraise the value of this one-week program in preparing them for the clinical environment both immediately following the intervention, and after 15 weeks of clinical education.

Significance

Both students and educators have identified 'the hidden curriculum' in clinical education, defined as the implicit expectations and practices of the profession (Henderson 2005; Rose & Best 2005). Through the process of engaging in clinical education, students begin the process of appropriating professional values including what knowledge, skills and behaviours are deemed suitable by the profession. The aim of this preparatory program is to make explicit these expectations and nuances of practice so that students can become active agents in the education process rather than being subject to a clumsy and idiosyncratic 'enculturation' process into the profession and over time.

Contemporary health education literature advocates the importance of producing self-directed and reflective learners (Higgs et al., 2004, Kilminster & Jolly 2000). Although there is consensus in the literature that generating students' capacity for self-regulation is a key curricular goal, there is little information, or evidence, to guide methods of achieving this goal (Baxter & Gray 2001). That is, the literature emphasises *purpose* (i.e. to produce self-directed learners) and not *process* (i.e. how to produce self-directed learners). This preparatory week initiative is driven by the assumption that these adult learning skills need to be scaffolded by educators in the academic setting. Ironically, we are arguing for an explicit and didactic mode of the teaching of self-directed learning. Facilitating students' development of skills in self-evaluation, self-regulation and critical thinking within the safe, academic environment, is more likely to aid students' transition into clinical practice. As Henderson (2005) argued, skills such as giving and receiving feedback should be taught both conceptually and practically in the academic curriculum so that "the use of these skills becomes second nature and not an act of bravery in the clinical setting" p. 6.

Findings

The principal outcome of this project might be best captured in the following quote:

“The key messages I’m getting from this week are to be proactive in my learning during clinicals in terms of critically reflecting and not leaving it to the supervisor to make times with me for feedback. To be professional and show interest in what I am doing, be punctual and be prepared with notes. To concentrate on the patient rather than the fact that I am being tested and to understand that I am not the priority- the patient is. To be socially aware of people, adapting to my supervisor’s style of teaching.” (Student 10)

In the feedback from students on their experience of the physiotherapy curriculum, it was suggested that, through their participation in the workshop, they have come to appreciate the importance of three contributions to their learning to be a physiotherapist. Firstly, they report the importance of learning the canonical knowledge of physiotherapy, including important conceptual content, (e.g. anatomy, normative values for arterial blood gases) and the procedural skills to be able to practice the occupation. Secondly, they learnt something of the heuristics (i.e. tricks of the trade), about what can go wrong in clinical practice, and the strategies to deal with complex clinical problems within physiotherapy practice. Here, instances and vignettes about practical experiences were provided by fourth year students, and informal ‘story telling’ from lecturers were highly valued. This relaying of experience of the clinical interface appeared to be an important mechanism for helping them understand the kind of context and ways in which their university learned knowledge will be applied in practice. Also, it emphasized the depth and scope of their roles in this work. Thirdly, the importance of engagement in the practice was emphasized in the feedback. Students reported the importance of being able to see the *relevance* of the content they were being asked to learn. Specifically, they reported the value of contextually-bound learning interventions (e.g. case studies and practitioner war stories: “if you don’t pick up strength deficit, and sensation loss, may miss a sinister pathology such as a spinal tumor”), in assisting establish the learning context for them. In doing so, they identified the need to know these things because of the consequences of knowing, (or not knowing) that information. Although mainly familiar with learning in a university setting, they report the importance of learning through ‘doing’; that is, the need for them to be informed and active in their decision-making.

In evaluating the transition program, students reported that the context-setting activities were reported to provide a useful bridge to activities within practice and the stories they were told by more experienced students and lecturers also provided such bridges:

“It was good to raise awareness [about palliative care], like ... giving us some strategies about this is a good way to cope, and this is how people ... or, here are some examples of things people say.” (Student 2)

“You know what was good was when Pauline [Lecturer] was telling us when she was in third year she had a patient, and she was in the gym and she had to get them walking on bars or something and she got them to stand up and they had a DVT and ended up ... they died, right in front of her. And she was just sort of went through how she felt and then said that you know, what would you do if you were the supervisor and that happened to your student?, and we were like “give them counseling” so she was like, well my supervisor sent me to the pub.” (Student 1)

Beyond the benefits of educators’ heuristic contributions in the transition program, the study identified specific interventions that might best be enacted before, during and after placements in order to best prepare physiotherapy students for clinical practice.

Before practice placements

Some students suggested that the opportunity to observe practice early in their studies was particularly useful. This seemed to provide a basis for them to understand the goals for and expectations of practice, and in ways that probably would not have been realised through engagement in university teaching alone.

“I think the most beneficial thing for [preparation for] clinics was the nine hours or so of observation that we had last year.” (Student 3)

Yet, despite this experience, students expressed concern about how they would cope with actual physiotherapy practice, including dealing with ‘real patients’.

“It would make it a lot easier to practice effectively if we dealt with patients before.” (Student 4)

The focus group data revealed the students’ anxiety about their level of competence, and interestingly, they expressed concern that their clinical supervisors would detect their lack of knowledge/practice competence early in the placement.

“Will I be any good? I’ll open my mouth and they will know that I am not competent.” (Student 1)

It was notable that students did not seem to use exam marks or OSCE results as a proxy for their likely clinical competence, thereby emphasizing in their minds the difference, or disconnection, between performance in university-oriented activities and performance in authentic practice.

“It’s a good point. So for example, for your OSCEs when you’ve had your simulated patients, the APA [physiotherapy] seniors, did you feel that talking to those patients felt different to talking to your peers?” (Interviewer)

“Yep” (Student 4) — “But not to the same level as the actual patient, because you know that they’re a physio, like they were good ... they do more what you expect, where as like [real] patients, you can’t expect anything because they can do anything.” (Student 3)

Students were concerned about how they would be perceived by clinicians, and were concerned that they were unclear of expectations in clinical placements.

“Exactly what are the clinicians expecting us to do in that first week?” (Student 3)

Certainly, it seemed that the kind of briefing to prepare students for that practicum needs to secure a balance between being informative, outlining the parameters for practice (including highlighting the pitfalls of novice practice) while remaining reassuring (i.e. you have the necessary platform of knowledge and skill to take on these new set of challenges). Hence, the relative advantages and disadvantages of briefing and debriefing with older students prior to clinics were described variously as being a ‘Witch hunt’ and ‘scare tactics’ through to providing helpful heuristics to ease the transition to practice.

During practice placements

The students reported the importance of the authenticity of engaging in practice placements and being immersed in practice.

“So clinics are going to be about real patients.” (Student 1) “Yeah, actually *doing*” (Student 2), “And heaps more responsibility” (Student 1), “... and actual pathologies” (Student 3), “Like you do things here in pracs, like you’ll do an anterior drawer test on someone that doesn’t have an ACL problem. You’ve got no idea what you’re actually feeling for.” (Student 1), “Like a neuro patient, we don’t know what a hemiplegic limb actually feels like when you’re lifting it. And if you are working on someone who’s completely dependent on you ... it feels completely different to when we’re doing it [on students] because I know you guys, I’m comfortable being around and touching you guys.” (Student 2) FG Transcript p. 2

They were also able to make some clear distinctions between the kinds of experiences that they had in the university setting compared with those that they would encounter in the practice setting.

“The sort of practice that we do here seems to be insignificant compared to what we’re going to be doing because like she said, it’s like, I know Tom [student], I don’t care if he falls.” (Student 2)

Given this praise for ‘immersion in practice’, the students were asked for their suggestions to improve the Transition Program. They suggested the importance of having: (i) more practicums, and therefore more opportunities to develop technical/procedural skills; and (ii) less lecture material and more interaction. In doing so, they point to the tensions between didactic teaching of foundational/canonical knowledge and application of knowledge (interactive learning), such as those that require principles of conceptual knowledge prior to application. Demonstrating the power of hindsight, students stated that they did not see the relevance of learning certain aspects of conceptual material until they have engaged in clinical practice.

Overall, it seems that the Pre-clinical Program served as an important vehicle in beginning the process of integrating experiences within the university based components of the physiotherapy degree with those that would comprise their practice experiences.

The bridging for those experiences appears to reside in two kinds of sources:

- (i) the opportunities for students to observe physiotherapy practice in the first two years of their degree; and
- (ii) the interaction and structured ‘pre-briefing’ with more experienced students and lecturing staff during the Pre-clinical Program.

There is clearly a need to strike a balance here between ‘war stories’ that outline the consequences of poor performance and potential pitfalls awaiting novices and creating unnecessary anxiety about practice. Some of those anxieties seemed to be easily generated because students were mindful of the distinctions between performance in university based activities and those in practice. They are aware that there is a very real audience awaiting them and potentially to make judgments upon their performance in practice: patients and practitioners. Consequently, this realisation added both an urgency and a focus for the concerns about procedural matters such as being able to perform assessments and treatments effectively in practice settings. The concern here, as with other forms of practice engagement, is that anxious novice practitioners may come to focus too much on procedural protocols/recipes at the cost of informed and reflective practice.

The study highlights that incremental and guided participation in authentic practice is important in reducing students’ experience of the theory-practice gap. A dedicated transition week, and activities including peer practice, work with simulated patients, practitioner story-telling (heuristics) and supervised immersion in clinical placements (with structured de-briefing episodes) should be key curricular directives.

Project Title: Preparing undergraduate nursing students for their professional role

Jenny Newton and Brian Jolly (Monash University)

Purpose

This project seeks to enhance final year undergraduate students' preparation for their role as a health care professional by enabling an effective transition to the workplace through engagement in critical reflection activities. For novice practitioners, interacting with a range of health discipline staff can be challenging. This is being accentuated in contemporary healthcare settings where the dynamics of constantly changing patient/client care needs can add to an already existing sense of feeling under-prepared for the workplace by novice practitioners (Newton & McKenna, 2007). Through processes of supported reflection it is anticipated that nursing students will develop an enhanced capacity for and awareness of facing issues and challenges they may encounter as newly qualified graduates. Associated with the students' development of their professional role is a concern to gauge whether the existing curriculum assessments support the development of an agentic learner. It is anticipated the reflective practices will illuminate and assist addressing this issue.

Significance

Recent findings emerging from an ARC Linkage project — “Developing nurses’ work as a learning practice” (Newton et al.) — and previous research (Newton & McKenna, 2007; McKenna & Newton, in press) identify that new nursing graduates feel inadequately prepared for the workplace and the associated responsibilities required as a practising nurse. This issue is identified as being the product of a mismatch between experiences provided in the university setting and the practice setting. In particular, the pedagogical approaches currently employed in academia do not always adequately prepare graduates for the transition to their professional role. Thus, new graduates struggle with the tensions between the ideals and values they brought into nursing with the reality of professional practice (Maben et al., 2006). The complexity of health care delivery is increasingly challenging along with the dynamics of engaging in a health care workplace. The opportunities for learning about how best to cope with these increasing complexities and role transition may well assist in developing and retaining a skilled and engaged nursing workforce. The task is how the graduate is able to apply the values and practices acquired in the university setting with the demands of nursing practice through negotiating with other healthcare professionals.

Findings

Through a process of guided reflection upon their practical experiences, this project was able to identify sets of concerns and responses that might be, respectively, addressed and enacted before, during and after the student nurses’ experiences on clinical placements, mainly in hospital wards, but also in community settings. These reflections were organised through a series of meetings between Jenny Newton and third year student nurses and came to reflect a model of professional development principled in action learning.

Before practicum experiences

The issue of professional identity and ‘socialisation’ to the role of being a nurse was held to be best realised through access to providing the kinds of capacities that were required of effective nurses, and, in particular, their heuristic capacities. Yet along with the procedural capacities that such experiences provide, the importance of the students’ conceptual foundations - knowledge that underpins practice - was discussed within the reflective learning group. Perhaps more so than the procedural capacities, it was suggested that this conceptual knowledge most likely arises from effective instruction and well selected content within the university setting. Consequently, before engaging in actual clinical nursing practice, it is necessary to provide the kinds of the procedural skills and conceptual premises required by nurses. Students believed that these procedural

capacities could best be developed through well organised experiences in the university setting, including the use of the clinical laboratories.

Beyond these forms of general preparation for the kinds of procedures that nurses are required to use effectively in clinical situations, students also need to prepare for the particular requirements of the clinical setting in which they would be practising and developing further their nursing capacities. This placement preparation began with the development of professional boundary awareness. This involved, clarifying (a) expectations — including scope of practice, relationships, and the kind of learning objectives for students in each practicum experience, and (b) competencies — that they currently possess and those that they would be required to develop in the particular practicum. It also entailed an understanding for student nurses of whom they would meet and need to work with (the members of health care team at all levels). Learning the kind of language that is used within the occupation was an important part of this understanding as it would permit student nurses to engage in the discourses and practice of nursing. It was suggested by informants that this usage most likely is developed through role modelling, as well as listening to the interactions between nurses and actively monitoring the language that they use.

However, it was also understood from the informants that, beyond the development of technical nursing skills and understanding per se, other capacities are likely to be helpful in an effective engagement with clinical practice. Through their placement experiences, students had come to understand the importance of conflict management skills. These kinds of skills were suggested by informants as being developed effectively prior to practice and experienced through the use of role plays, practice based learning experiences and simulations. Associated with these kinds of skills was the perceived need for interpersonal/professional protocols that would provide guidelines for their interpersonal/social and practice engagements. These learning goals were suggested as being realised by having access to stories about practice (i.e. war stories), the use of analogous situations provided by academic staff to help students develop a repertoire of understandings and procedures to use in certain circumstances, and to assist in their awareness about the kinds of cultural norms and practices which will shape how they engage in the hospital wards as nurses, and how they can shape their roles in that engagement within the boundaries of what is reasonable for and expected of a student nurse.

In addition, and specifically related to the focus of this project, the reflective learning groups discussed issues of preparing students as agentic learners. The discussions identified observations, interactions and activities through which the students would learn as important factors. It was emphasised that, although there were established practices for nursing, these may well vary from situation to situation depending upon patient need, patterns of treatment and so on. Reflecting upon the students' instances of practice, they agreed that there was no one right way to proceed with many of these outcomes. Included here were heuristics about how relatively powerless student nurses might come to play 'the game' of them being a novice nurse effectively in the clinical environment and when working with other nurses.

It was concluded that the means for preparing students to be agentic learners also included advising them about (a) the importance of and means for conducting self evaluation, (b) effective communication with other workers, and (c) an understanding of adult learning principles and their emphasis that they give to self-directed learning. Reflecting on their experiences was also held by these novice nurses to likely to be helpful for developing further their capacities to be self-directed in their learning and practice.

Overall, beyond the kind of preparation which the students accessed, it was suggested in the reflective learning group that the workplace environment also needs to be prepared in some ways to maximise the students' learning. This might be achieved by briefing and preparing staff in clinical

settings about the expectations they have about students and the degree of student involvement in nursing practise, the goals students need to learn, and the important role that experienced nurses play as skilful ‘teachers’.

During the practicum experiences

The students described the clinical environment as being patient centred, complex and unpredictable. While agreeing it should not necessarily be student focused, they suggested it should be more learning focused. They were aware that students are guests in the healthcare environment which has a patient centred/care focus. However, as well as patient care, the more personal goal of student learning needs to be considered since this learning is essential for the continuity of the health care system. Indeed, the evidence of it being a learner focused environment was found in the kinds of support for the students’ learning that was available from clinical educators, buddies, and other nursing students; opportunities to reflect on practice; and engagement with faculty staff. What was deemed to be the most effective form of learning support was that provided through direct guidance, including modelling by other nurses. This included the clinical unit’s role in promoting effective peer interactions (i.e. collaborative learning). In addition, opportunities for engagement in authentic learning experiences provided by the clinical setting, including the sequencing and combination of activities that student nurses can have access to on clinical placements, were identified as important. The authenticity of these experiences could be enhanced, by accepting and even seeking opportunistic learning (even out of synch with other experiences), as events and incidents occur on placements. Students also noted the value of identifying and utilising pedagogically rich work activities or interactions (e.g. handovers) to support their development through practice.

As part of this learning environment, the students talked about the importance of their being resourceful and agentic (i.e. self directed and self regulating to a degree and within the boundaries of practice). Part of that agency is learning to play the game. This includes understanding the boundaries of their agency or “bounded agency”. Students have agency but are constrained by what is possible and permissible within the clinical environment. Certainly, learning by doing and from observation of practice are both important processes of learning that are shaped by the active engagement of the student as a learner. In these ways, the students in the reflective learning group referred to the influences that both the environment and the students themselves had on the learning of nursing practice. This seems to represent a constructive and informed challenge of historical models of nurse preparation. That is, it moves the onus for learning from the nursing environment to the nurse. Here, there is a greater role for the learner in negotiating learning opportunities.

There were also suggestions about how the assessment of student learning might progress in the clinical setting.

First, greater acknowledgement and recognition of the students’ prior learning was proposed as a device to organise and maximise their learning. That is, nurses in the workplace need to be aware of students’ achievements in order to plan for experiences aligned with their developmental needs.

Second, the experiences in practice settings should be available opportunities for both formative and summative assessment.

Third, practice settings should provide a mode of and basis for valid assessment through appraisals of performance in practice settings and through engagement in nursing practice.

After experiences in hospital wards

The reflective learning group was effective for assisting student nurses to reflect upon their experiences on clinical placements. In particular, it provided a forum for them to share experiences

with other student nurses and learn from them. The students reported that it provided an opportunity for them to make links to what is taught (learnt) in the university setting and practice setting. For instance, it reinforced the process of learning the norms of practice for that particular hospital ward. Using examples from practice provided a basis to integrate learning from practice into theory. The learning group experience provided a basis for reflecting on experience by describing and discussing those experiences, yet within an environment which was distant from the actual clinical setting. In addition, through guidance of the facilitator, it was possible to engage in critical perspectives on work and learning processes. For example, in sharing and elaborating their experiences, students were able to make comparisons across settings, identifying common and distinctive features, and ultimately the canonical and situational requirements for practice. The fact that much of the learning occurring within the reflective learning group was generated and mediated by the learners emphasises the agentic and selective qualities of learning through practice (i.e. the role of personal epistemologies). In addition, the host practicum experiences provided the opportunity to discuss feedback on student assessments and performance as nurses in the practicum setting. Finally, it provided an environment in which goal setting for the next clinical experience and future nursing careers could be discussed and organised.

In summary, the reflective learning group provided both a context and a forum which allowed students to develop the procedural capacities through comparing their experiences and outcomes with other students and monitoring their own progress. It also extended their capacity to understand and evaluate the kinds of experiences and learning that arose through the clinical experiences. Importantly, students became aware of workplace requirements and developed criticality in considering those requirements. For instance, they came to understand the importance of knowing the language and professional discourse as well as the norms and practices of each of the clinical settings. These were identified as being essential for effective practice in enabling them to engage more fully as participants in the clinical settings. The reflective learning groups were helpful in making these kinds of learning explicit and shared, and the subject of critical reflection. All participants emphasise the need for students to be active in their learning to understand the particular requirements for work in the settings to which they would subsequently practise nursing. The kinds of criticality that these students demonstrated extended to requests for improving their experiences in clinical settings. They acknowledged that clinical settings are essentially for patients, but suggested that they could be more learning focused. The student nurses argued for more appropriate sequencing of activities to ensure an effective transition into clinical practice. Yet, they also proposed the need for greater opportunities for sharing experiences which are essential to understand the distinctiveness of particular kinds of experiences but also the commonalities across these instances of practice. However, in recognition of the kind of agentic learning role that they had played, the students also acknowledged the importance of being able to organise their own goal setting and effectively communicate their goals and needs within clinical settings. In these ways, reflective learning groups appear to provide an effective forum for not only developing agency in student nurses, but also for extending the kind of learning that they were able to secure through individual experiences in clinical settings. In many ways, learning groups provided a space that sat somewhere between the requirements and processes of university, and those of the clinical settings in which they practised their nursing. Within such learning groups, the openness and non-directedness of their facilitation seemed to be a crucial factor. Developing an environment which is non-judgemental and encourages discussion, comparisons and reflection represents a particular kind of pedagogy which might be quite distinct from the didactics of both university teaching environments and the demands of clinical practice.

Project Title: Midwifery learning through a continuity model

Pauline Glover and Linda Sweet (Flinders University)

Purpose

This project seeks to understand the midwifery learning that occurs through a continuity clinical practice model called the Follow Through Experience (FTE). The FTE is a mandatory component of the national midwifery curricula standards requiring students to undertake 30 FTEs across the duration of the three year Bachelor of Midwifery degree. The students' clinical involvement in the FTE is dependent on their year level. This involvement moves from undertaking an observational role under the direct supervision of a registered midwife to increasing participation in a more active role for the woman and her family. Students are required to provide a written summary of the FTE with each woman that includes: an introduction to the woman and her family, and a brief reflection upon the student's understanding of the experience of pregnancy, birth and postnatal period for the woman and what this means for the student's learning about midwifery. This project is designed to understand whether the FTE supports the development of agentic midwife learners.

Significance

The FTE has been mandated by the midwifery peak professional body (Australian College of Midwives) without clear evidence to support this teaching and learning strategy. Whilst some midwives believe the FTE is a valuable learning opportunity, there is no peer reviewed research evidence to support its efficacy and, in particular, its potential to develop agentic (i.e. self-directed and regulated) midwives. Anecdotally, midwifery students report that this experience is valuable in their learning. However, they find it difficult to articulate the learning that occurs. During the past five years, since the large number of FTEs was introduced into the curriculum, we have noted some progression of the student's awareness of their learning; however this has never been adequately appraised. Given the significant learning opportunity that these experiences present and the time commitment from both the student and the woman, we believe that it is important to ensure that this approach is optimal and, if not, to optimise it.

Midwifery students are required to contract and manage the FTE with women themselves. The FTEs are essentially not formally facilitated by university staff. During the FTE, learning is focused from the interaction and relationship with the woman and her family, and the student's opportunities are dependent on the generosity and willingness of the woman to have the student involved during this intimate time of their life.

Traditional clinical placements in midwifery education are held to be problematic, because students may not have a logical sequence of experiences that follow birthing women through from the first antenatal visit, to the final postnatal visit which parallels with current models of midwifery care. The FTEs have been designed and mandated to address this aspect of midwifery learning and in ways not achievable through short term clinical placements. The FTE enables continuity of the student with individual women and their families, regardless of health status or type of care chosen. Students, therefore, have exposure to many maternity care providers whilst undertaking the FTEs and hence many learning opportunities.

Findings

The findings were derived through a qualitative study that comprised focus groups with 1st, 2nd, 3rd year current midwifery students, and midwifery academic staff, and document analysis of reflective logs provided by graduands from the Bachelor of Midwifery. These data were subject to a thematic analysis.

The key findings are those associated with:

- (i) developing awareness of the role of the midwife;
- (ii) developing their personal midwifery identity;
- (iii) skill development;
- (iv) development from lay to professional language; and
- (v) progress from description to reflection.

There was also consideration given to personal costs — students' positive and negative sentiments about midwifery. These findings are briefly overviewed below.

Developing awareness of the role of the midwife

It was found that the participants learnt richly about models of care and the key tenets of the:

- (i) value and importance of continuity of care;
- (ii) continuity of carer for the birthing woman; and
- (iii) continuity of learning/mentor for the midwifery student.

In addition four key areas of learning were generated through the FTEs about the concept of 'continuity'. These are:

- (i) the importance of learning from birthing women;
- (ii) learning from engaging with midwives;
- (iii) that the bases for both of these sources of learning is dependant on relationships with the birthing women and midwives; and
- (iv) that whilst useful for initial preparation of midwives, the FTE is not a realistic model of midwifery continuing learning because of its demands upon birthing women and midwives.

Developing their personal midwifery identity

Through the FTE model it was found that students' understanding of personal and professional boundaries were generated and exposed in ways that, when carefully managed, are generative of effective deployment. In addition, the follow through experiences provided a range of role modelling opportunities. These included the possibility for students to identify good and bad role models, the exposure to a range of different practices by midwives and by ancillary and related practitioners, and staged and incremental opportunities to participate in clinical decisions, as their knowledge and skills developed. Given the comprehensive way in which the FTE experiences are enacted, they provided opportunities for student midwives to understand the totality of the experiences, decisions and negotiations that confront birthing women, and how these may vary not only through health-related factors, but through those associated with their familial, economic and social standing. Hence, the premises for becoming an advocate for birthing women were provided by these follow through experiences. The realisation and potential generation of capacities by the students for being strategic in their activities about numbers of birthing women and time allocations for them was aligned with the nature of the requirement of the 30 FTEs.

Skill development

Perhaps not surprisingly, much of the student effort through the FTEs was focused on procedural learning: that is, on the procedures required to effectively assist the birthing process. In this way it constitutes a birth-centric enacted curriculum, and appears to be experienced by students as such. However, there were outcomes which were not always as were intended. For instance, there was learning that occurred outside of the preferred sequence for developing midwifery competence. For instance, when working with experienced midwives students were sometimes requested to be involved in procedures about which they had little understanding. Certainly, the emphasis on procedural learning went beyond that intended in the early phases of their development. The students craved task learning associated with 'midwifery work', and provided rich and enthusiastic accounts of their 'first experiences', which overrode some of the staged intentions for the midwifery

program. Certainly, the students used their midwifery skills as evidence of, and a proxy for, their developing knowledge and ability as midwives.

Development from lay to professional language

The follow through experiences and students' reflections upon them, when guided, provided a useful device for developing their professional language. Indeed, the reflective logs mapped the journey from the use of lay to professional language. Initially, some of the students struggled to write about their experiences in professional language, preferring instead to use lay language. Then, there were instances of the incorrect use of professional language that arose through working alongside and with experienced midwives and in birthing settings. While these demonstrated both a growing awareness about practice and exposure to that practice, they indicated that the concomitant conceptual knowledge had not been developed adequately. In addition, the use of midwifery slang by the students signalled acculturation in ways that were sometimes misaligned with the intended midwifery curriculum. However, over time it seemed that the exposure to practice and the opportunity to generate the reflective logs and feedback on those logs were together generative of the students becoming proficient in the correct use of professional language.

Progress from description to reflection

A key feature of the capturing of the follow through experiences within the reflective logs was a progression from description to reflection. It is this very development that assists midwives to become agentic in their practice. The reflective logs were useful because it seemed that all students were comfortable in describing their experiences. However, initially there was limited reflective writing and an emphasis on describing the experiences through the students' perspectives, rather than from the birthing women's. Also, the logs initially demonstrated a lack of awareness by the students of their learning. There were also concerns about birth-centric descriptions, which tended to be privileged at the cost of a broader consideration of the midwifery role and competencies. However, assistance with students' engagement with, and development of, the logs was shown to lead to the generation of more reflective learning logs.

Personal costs — Positive and Negative feelings

There is always likely to be an affective component to undertaking a preferred occupation. However, midwifery, like some other occupations, has within it a component of work which is strongly affective. The students reported a range of positive affects associated with observing the birthing process, particularly for the first few times. These included statements such as "amazing", "enjoyable", "privilege", "delighted", "fortunate", "lucky", "lovely", and "grateful", which featured strongly in their learning logs. Yet, there were also negative affects which arose from the demands and frustrations with working across a large number of follow through experiences. These were reported in the use of terms such as "anxious", "frustrated", "guilty", "helpless", "shock", "angry", and "sad". All of this is particularly worth noting because in many ways the midwifery students epitomised what is being asked of students in work integrated learning arrangements. That is, to engage actively, professionally, and conscientiously in professionally-premised activities. Yet, while this can lead to rich learning, it can also constitute experiences that have powerful personal impacts. Many of these may be appropriate and helpful. However, others may be more personally challenging and confronting.

Implications for teaching

A range of implications for teaching and learning arose from these findings, particularly for experiential and work integrated learning. These included the importance of finding ways to continue to support midwifery students during their practice experiences which may go on over time and in locations and circumstances which are not always easily able to be managed, from the perspective of student learning. It also is clear that these experiences will provide exposure to both good and bad role modelling. Hence, it is important for the learning through these experiences to be

guided and scaffolded in some way. It suggests the importance of preparing both clinicians and students for practice and the importance of reflection on practice. Moreover, and quite specific to this midwifery program, there is a concern to enhance the quality of the experiences of the entire birthing process rather than simply to emphasise the quantum of those experiences. That is, reducing the number of FTEs from the current level of 30 may well be necessary for the improvement of the quality of the overall learning outcomes.

Considerations for activities before, during and after the practical experiences

As indicated above, there are a range of considerations for how these learning experiences might be maximised before, during and after their occurrence.

Before the FTE

Before the FTEs, the following might be enacted.

Firstly, students should be broadly prepared for the kinds of concepts, practices and language that they are likely to encounter in their initial experiences. They need to be made aware of the boundaries of that professional practice and have the opportunity to consider ways in which they might be best managed. Exposure to some of the scenarios that the student midwives might face and opportunities for developing procedural capacities for negotiating those scenarios might be undertaken before the FTEs commence. Having some initial procedural skills will ameliorate their concerns to engage in midwifery work, but in ways that are appropriate and helpful. Further, reinforcing the goals about midwifery work being more than the birthing process may well help the students position this process within the broader scope of midwives' work. In addition, even with the independent nature of this set of experiences, and the use of the reflective logs to capture and enrich their learning, some further assistance with understanding the purposes of the log and on how best to use them may well be helpful. In order to enhance students' reflective practice it is suggested that learning logs be introduced earlier in the curriculum, accompanied by an improved approach to inform students about what a learning log is and how to write it.

The organisation of FTEs are likely to be enhanced by:

- (i) better guidelines for learning for student and organisation/staff;
- (ii) teaching students how to engage in the FTE process regarding relationships, recruitment, and closure with women, but also with midwifery and medical staff; and
- (iii) by having the FTE more effectively embedded in the assessment processes to increase students' engagement and learning.

During the FTE

During the FTEs it is important that students have the opportunity to share their experiences with peers and also with their lecturers. This can have a powerful impact upon all students' learning, as it can expose the midwifery students to the range of birthing women and their economic, social and well-being circumstances, and to the range of actual birthing processes. So, opportunities for students to reflect upon and share their experiences with other students and lecturing staff likely provide a rich base to maximise their experiences. These opportunities likely will need to focus upon issues of practice, learning, and delineations of professional engagement. The very comprehensive nature of the FTE sees it as being a central device for the development of midwifery skills and identity, and warrants integrating it effectively within the overall midwifery curriculum.

After the FTE

Given the continuous nature of students' engagement in FTE, many of the teacherly concerns will need to be exercised before and during them. Yet, on the completion there is a need to engage students in reflecting upon their experiences and, in particular, the development of their capacities

as midwives, including their ability to separate personal and professional engagements and to reflect upon the development of their agency as learners operating in quite autonomous circumstances.

Overall, it was concluded that FTE helps develop students' agentic learning capacities as previously shown. However, this development comes at a significant personal cost with time, resources, finances, and the impact on the students' social and family lives. It can also generate learning which is out of sequence or inconsistent with what is intended to be learnt through the university and also can lead to incomplete, naïve, ill informed connections through lack of conceptual knowledge. The extent and close proximity of the engagement with birthing women can lead to an embedding of the student with women, but not with the profession or health system. Consequently, it seems that these experiences can be improved by reducing the number of FTEs, enacting the FTEs within the broader role of the midwife, yet having assessments of practice through the totality of the students' FTEs. The preparation for students to engage with and effectively use the learning logs provided the kind of intervention that was appropriate to and helpful for students who really work quite independently when engaged in their follow through experience. The project also raised further questions about whether students come to their courses with a personal epistemology or whether these should be developed over the course of their education and, if so, how these should be best developed.

Project Title: Learning to deal with confronting experiences: Preparing students for the human services.

Jenny Cartmel and Jane Thomson (School of Human Services, Griffith University)

Purpose

Students undertaking field placements in human service organisations often encounter experiences that are confronting for novices, yet comprise routine aspects of human service work. The purpose of this project is to develop and trial strategies to guide students' learning in order that they be prepared for, respond appropriately to, and maximise their professional learning from these experiences. Overall, these strategies aim to enhance students' capacities to respond productively to these confronting experiences as agentic professional learners.

Significance

The teaching of strategies to assist students' learning is critical to the preparation for effective practice as human service professionals. Professional practice in the human services can be confronting and demanding. Students often refer to being ill-prepared for the challenges they experience in their field placements. This project seeks to engage students in an honest appraisal of the professional issues and assist them to develop personal strategies for effective practice and personal coping. The goal of the project is to ensure that students then feel well equipped to understand, and respond effectively to, situations which require them to facilitate change for individuals, groups, and communities. The development of this agentic quality is essential for a productive and healthy professional life in human services.

Findings

The findings of this project were drawn from data gathered during the learning circles that were a key educational intervention. The focus of the learning circles was for students to be prepared for, but mainly reflect upon, their experiences in practicum settings and also share their learning with other students. The initial motivation for this project was that human service students had reported being unprepared for the confronting situations they experienced in their practicums. Consequently, the learning circles concept was introduced with a particular emphasis on preparing students for potentially confronting experiences through the development of resilience. 'Resilience' here refers to the capacities to engage professionally and maintain a professional and personal sense of self in participation in human service work. Yet, the confronting experiences students reported were not only associated with the dealing with clients but also referred to working with co-workers and supervisors who were not always supportive or considerate of the students' novice status. The learning circles approach used adult learning principles. Therefore, the process was driven by students' need to be prepared for their practicum and also have the opportunity to discuss and reflect upon issues in that they found difficult or confronting. Table 3 presents examples of the issues students reported having to confront, their responses and reflections on their actions. Thus, the learning circles approach sought to develop a considered agentic response directed towards achieving the development of professional capacities and resilience.

Beyond demonstrating the potential of learning circles to assist the development of agentic professionals, these instances represent potentially useful vignettes for use in the preparatory sessions for subsequent student cohorts. It is these kinds of experiences, responses and reflections which might well provide an effective context for the students to consider how they will manage their placement and develop resilience.

The students also generated a set of potentially useful approaches to practice for students including:

- (i) managing the balance between work and personal life (e.g. don't take reading home, drawing boundaries, the importance of debriefing before getting into the car to drive home);
- (ii) the realities of human service work and the differences between what is espoused in university course and what transpires in practice (e.g. difference between ethics in practice and has taught at the University);
- (iii) practical and ethical issues, (e.g. approaches to and concerns about contacting people unknown to you); and
- (iv) factors which emphasise the demands made by the practicum experience (e.g. balancing practicum experience with necessary paperwork).

Student comments also provided suggestions for improving educational provision (e.g. more preparation and debriefing for challenging situations, more preparation in interacting with clients and other professionals) In these ways, the learning circles approach seeks to develop a considered response to practicum issues which strengthened the student's agentic capacities directed towards achieving the development of professional competence and resilience.

Table 3 - Developing Resilience

Issue I was confronting on prac	What I did positively to address it	How my actions helped me develop my resilience as a worker
Negative and unprofessional supervisor.	Speak to supervisor to voice my concerns.	This has empowered me for future practice- self reflection; treat others with respect.
Attending- dealing with things I'm not comfortable with. Identify issues- push through.	Sought help- talked to professionals and uni faculty.	Have my goal in my head of success and push through.
A client with mental health issues pestered me for a turn to wear my glasses. I almost let him wear my glasses, as like my son, this client was very manipulative.	I was firm and told him not to ask again and that I would not let wear my glasses. I wanted to stand by my boundaries, and felt very empowered.	Awareness. I could reflect on my personal life and realise that I could say 'no' to a client, I can say 'no' to my son, when he indulges in his manipulative behaviour.
A mother with a child with a disability who feels isolated and unsupported without any social networks.	Listen and suggest linking with organisations that can help and support her needs. In addition I relayed my personal experience and my coping strategies.	I helped a situation through my own personal experience. I feel this lady realised someone does care about her.

Thus, the learning circles generated helpful suggestions for experiences before, during and after the placement which might help to develop agency in learners through effectively integrating experiences in the practice settings with those provided in the university course. Interestingly, some students reported that concerns about confronting situation and the need to develop resilience had been overplayed and may have even caused unnecessary anxiety ahead of the practicum experience. Consequently, for these students some of the preparatory work seemed to be irrelevant because the reality had been far more benign than what had been predicted.

Before the placement

The students suggested that preparation for the placements should include opportunities to:

- reflect upon and be advised about what was expected of them in their placement;
- discuss professional boundaries and how to maintain those when interacting with clients and other human service workers;
- discuss strategies for leaving work behind at the end of the day (i.e. not taking the problems home with you);
- develop strategies for dealing with phone calls and difficult people; and
- develop strategies for developing resilience.

Yet, in planning preparatory activities, students suggested that course organisers need to maintain a fine balance between providing such opportunities and overly emphasising the potential for confronting circumstances that might be generative of anxiety about the practicum and the professional practice more generally.

During the placement

The students reported that the learning circles used during the time they were in their placements, were helpful because both the issues discussed and the focus of those discussions included activities that are helpful for them to manage their practicum experiences. This included a consideration of debriefing processes, professional boundaries (i.e. their development and maintenance), and sharing and reflecting on challenging situations.

After the placement

Here, the learning circles model can be directed to two distinct purposes. Firstly, it can be used to provide the opportunity for students to reflect upon the totality of their experiences and share those experiences across the members of the learning circle. Secondly, the operation of the learning circle provides a model for students to engage in and practice throughout their professional life as a model of ongoing professional development. Specifically, after placement learning circles provide opportunities for debriefing about expectations, work requirements, professional practices, capacities to work effectively, and managing difficult circumstances.

Overall, the findings here suggest that the learning circles approach was helpful in preparing students for the possible eventuality of confronting experiences in particular, but also the requirements for professional practice within the human service sector more generally. Developing an understanding about professional roles and boundaries is essential for maintaining professional relations and engagements with clients. The learning circles provided a safe space in which issues about practice could be raised, discussed and critically appraised by the participants. In this project, an emerging issue was the degree to which the preparation could generate unnecessary and unhelpful anxiety in students about what they might encounter in human service work. This is a critical balance. Across a number of the projects comprising this Fellowship the issue of student anxiety about their preparedness, competence and ability to perform in practice settings was raised as an issue. In particular, having a focus upon confronting experiences and how they might best be managed within a professional context might be counter-productive. Instead, a preparation which focuses on the requirements of practice in a positive way — which includes negotiating professional boundaries and dealing with confronting situations — appears to be a productive way of progressing. Yet, the use of learning circles mediated many of these concerns and likely provided a supportive environment for those students who found themselves engaged in confronting circumstances. As with other approaches, the agentic quality of the learners became an essential quality of effective participation in these learning circles. The capacity to reflect, consider and arrive at judgements about practice were all exercised in these learning circles by learners who were engaging agentially with what they encountered in their practicum experiences.

The learning circles were certainly critical to provide a supportive space for students if and when confronting circumstances arose during their practicums.

Project Title: Developing agentic student nurses through a Clinical Progression Portfolio

Marion Mitchell and Marie Cook (School of Nursing, Griffith University)

Purpose

The project aims to evaluate the usefulness of Clinical Progression Portfolios to support student nurses' preparation for practicum experiences. This project evaluates the utility of a practical and handy booklet for students to use throughout the Bachelor of Nursing program. The evaluation assesses the usefulness of the Portfolio as a tool to support student preparation for clinical practicum, and to enhance communication with Registered Nurse 'buddies' during the clinical practicum.

Rationale

Currently, there is a reported lack of effective communication within clinical settings between students and Registered Nurse 'buddies' regarding the development of students nurses' clinical capacity. This has led to unsatisfactory clinical experiences and learning. The Clinical Progression Portfolio has been designed as a resource to enhance and support communication during the 19 weeks of clinical practicum within the Bachelor of Nursing.

Findings

A survey of 2nd year Bachelor of Nursing students on the Nathan campus (n=165) was undertaken during the two-week clinical practicum in May/June 2008. The survey comprised 20 items to gather student demographic data and information about their use of the Clinical Portfolio. Students were also asked to evaluate the usefulness of the 8 sections of the Portfolio.

A total of 129 students from 20 clinical practicum groups completed the questionnaire, providing a 78.7% response rate. Approximately 60% (n=79) claimed to have used the Portfolio during their clinical practicum. Two reasons were commonly given by students for not using the Portfolio. Some stated that they had difficulties due to time constraints (n = 23) and others that they believed the Portfolio was an unnecessary aid to learning (n=20). In addition, 39 students responded that they did not use one section of the Portfolio which permitted note taking on "what have you learnt today". Around 80 students (60%) claimed 'never' to have worked with their buddy to complete another section on 'how am I doing today' and 'what you should work on tomorrow' items in the portfolio.

It was found that (when used) the Portfolio helped students become more agentic in their learning by aiding students to clarify their learning and to target appropriate practicum opportunities. This was particularly the case for the 'scope of practice' subsection, which students reported helped to develop a shared understanding of learning between the student and Registered Nurse buddy (workplace mentor). Students reported liking the size of the Portfolio as it is small enough to fit in pockets and is easily accessible. It was also claimed that, the portfolio enables students to develop a shared understanding and appropriate learning focus in the negotiations with their Registered Nurse buddy. This was a positive outcome because the principal purpose of the Portfolio was to facilitate the process of negotiation with their buddy. Certainly, the emphasis is on a collegial relationship rather than one which requires formal feedback. Students also reported that the Portfolio was helpful in preparing for their clinical placement.

From these findings, it is possible to postulate that there are particular utilities associated with the Portfolio that can be enacted before, during and after clinical placements.

Before clinical placement

The findings of the project suggests that the Portfolio is likely to be more generative in assisting the integration of learning experiences and developing student agency in their learning and practice, if it is introduced early into the curriculum and embedded within the curriculum. For instance, some students reported that it was useful to help them think about and prepare for their clinical placements. This included planning for goal setting and achievement to specify learning. Moreover, as the Portfolio was intended to generate communication with their buddy, the processes through which it might be enacted stand to be supported if this is given specific attention and opportunities for rehearsal prior to the clinical placement. Students also might discuss how they can use their folio discreetly, because some believe that the Portfolio marks them as a novice in the clinical workplace.

During clinical placement

During the placement, the Portfolio can be used to plan and organise experiences across the days that comprise the clinical placement. For instance, some students were advised by their buddies that it is best to take a day at a time, rather than plan a week's work ahead of time. "Experts say not to focus on what I should do tomorrow — but look at the book in the morning and deal with tasks at hand". In this way, the heuristic power of the Portfolio is as a tool to manage the load and demands of learning a new practice. However, it is acknowledged that it is often difficult for students to find time during their clinical placement work to reflect upon their experiences and their Portfolios. Setting assessment tasks associated with reflection may provide an additional incentive for this to occur for students, albeit outside of the time of their clinical placements.

After clinical placement

Given that opportunities for reflection on, and use of, the Portfolio are quite limited within clinical placements, it might well be useful to provide structured opportunities for students to reflect upon their practicum experiences, their learning and development as novice nurses within the university setting.

In summary, the use of the portfolios provided a device which could assist students to bridge the two environments in which they practise and learn (i.e. university and hospital settings). Yet, they were used in different ways depending upon the circumstances and students' comfort with their use. In some clinical settings, students preferred not to be seen using these portfolios as they were emblematic of being a learner with all the consequences that implies in a place where the focus is on providing patient care. Moreover, distinct ways in which students used the logs to inform or respond, as a checklist or premises for evaluation, were all helpful in providing a platform for integrating experiences across university and clinical settings. The agency of the students in the use of these portfolios appeared to be central to their effectiveness. Consequently, with adequate preparation, engagement and the kinds of critical reflection that strategies such as reflected learning groups and learning circles can offer, the contributions of these portfolios to student learning might be extended.

7. Fellowship outcomes

The outcomes of the Fellowship reported here comprise a synthesis of the findings of the five projects, the processes of dissemination that have occurred and are planned to continue, and also the outputs that have been secured to date.

7.1 Synthesis of findings

Given the imperative to prepare graduates who can move directly and effectively into practice, it is important to advance approaches to curriculum and pedagogic practices within higher education that can support the effective integration of practice-based experiences. Here, it has been proposed that developing students as agentic learners is a necessary component of providing and securing effective learning experiences. A helpful starting point is to acknowledge that both kinds of settings make particular contributions to students' learning (Billett, 2009). The academic setting can provide access to a range of conceptual bases, premises for procedures and access to norms associated with a particular occupation. Moreover, academic settings can provide experiences in which to reflect upon this knowledge, and what is experienced in other settings, such as those where practice is conducted. Practice settings, as evidenced above, provide a range of experiences that are authentic enactments of an occupation in particular work situations. These experiences provide access to a range of contributions that are richly informative in terms of conceptual, procedural and dispositional development. It follows that a key consideration for integrating practice-based experiences in higher education curriculum is to utilise their key contributions and, if possible, redress or prepare students for the potential limiting experiences that they might encounter (Billett, 2009)

Given the central role of learners in taking up these invitations, it is also important to emphasise the salience of students as agentic learners. It is students who participate in, negotiate and learn in and across both practice and university settings. They are the meaning makers who negotiate learning across the settings, not their teachers or mentors, although these can mediate that learning. Students learning is ongoing and ubiquitous, yet is shaped by what students encounter in educational institutions and practice settings and how they construe, construct and engage with what is afforded them. Therefore, active engagement and learning by university students is a pre-requisite for the higher order learning required for the principle-based and codified forms of occupational knowledge. Moreover, this kind of engagement is applicable for many, if not most, forms of occupational practice, and not only for the top-end professions (e.g. law and medicine). Indeed, the expectation for those whose occupation carries the moniker of 'professions' is for practitioners to be self-directed in their learning to maintain the currency of the professional practice: to profess. The point here is that, the qualities needed to be an effective student in higher education — a proactive and agentic learner — are those required for effective professional practice. In essence, the agentic qualities of learners are essential for effective professional practice and rich learning. Consequently, more than attempting to organise experiences for students in educational institutions and workplace settings, there is a need to focus on preparing students as agentic learners, as part of their professional preparation (Billett, 2009).

From the project findings advanced above, some tentative pedagogic and curricular considerations are advanced for promoting the integration of students' experiences in both academic and practice settings. These considerations are presented in overview and organised under three headings: those associated with what should happen before, during and after practice-based experiences.

Considerations for curriculum

The sequencing of student experiences — firstly in the university setting, then in the practice setting, and then back to the university setting — provides a course of experiences that are fundamental to the concept of curriculum: the course to be run. That is, the intended set of

experiences is, in part, enacted in particular ways and experienced differently by students. University teachers, course and program convenors can plan for, and organise, particular sets of experiences (i.e. the intended curriculum), and these may be enacted with greater or lesser fidelity within university settings depending on shared understandings, resources, facilities and so on. However, what is enacted in practice settings is far more difficult to plan for or shape. Hence, within practice settings the 'enacted curriculum' seems to dominate, and its correspondence with the university-intended curriculum may be tenuous. As well, of course, whatever is experienced in both settings is shaped by the prior experiences and learning of the students. Their ways of experiencing the curriculum will be as diverse as their prior experiences. Some student nurses have previously worked in patient care roles, including being an enrolled nurse, and may well 'experience' what is enacted in the university and healthcare settings in ways that are distinct from those who are entering the program from schooling, for instance. However, beyond the diversity of what constitutes the experienced curriculum is its centrality to learning. For many, the experienced curriculum is the most salient of curriculum conceptions, as it constitutes the process of student learning. Also, and taking this salience further, unlike the intended and enacted curriculum, this conception of curriculum not only focuses on the learner, but also the agency of the learner. Table 4 provides a list of goals for curriculum that have been identified through the projects described and discussed above.

Considerations for pedagogy

Just as it is important to expand on notions of curriculum when considering learning experiences across university and practice settings, it is also helpful to view pedagogy more broadly when considering how to support and promote student learning across both kinds of settings. Pedagogy is cast here in particular ways in both settings: one designed for, and enacted within, settings where student learning is held to be the central concern; and one in which the imperatives of practice are central. So, although the pedagogy of classrooms has not been the principal focus of this project, it is evident that pedagogic practices which have the capacity to inform and prepare students for the practicum experiences, and to engage with them during those experiences and then assist reflection after them are likely to be useful. In particular, it has been found that approaches such as learning circles, the linking of 'follow through experiences', by using reflective logs, and reflective learning groups all comprise pedagogic practices that can assist maximise and effectively manage the continuity of learning experiences across the different settings and can promote effective learning about practice as well as utilising and developing student agency. Yet, both of these views of pedagogy are concerned about the provision of experiences for students and their engagement with them. They each have a range of potentialities, not the least to be effectively integrated and complementary. It is these kinds of pedagogic practices that stand to provide support for student's negotiation of experiences across both practice and university settings. Table 4 identifies a series of pedagogic focuses that will be helpful for the development of student capacities before, during and after practicum experiences. These are classified in terms of securing key curriculum goals through support for learning, developing situational awareness and capacities to engage critically and reflectively, promoting the agency of the learner and extending learning from practice. Thus, Table 4 synthesises the findings of the five projects reported above and offers an analysis in terms of curriculum goals and focuses for pedagogy in three time frames: before, during, and after practicum.

Table 4 – Emphases within each period of preparation (i.e. before, during, and after practicum experience)

Before practicum	During practicum	After practicum
Curriculum goals: <u>Professional capacities (i.e. focus for pedagogy)</u> Considering professional identity Developing capacities for practice — procedural things Professional boundary awareness — being clear about expectations, including scope of practice, relationships Interpersonal/professional protocols Conceptual foundations — knowledge that underpins practice Acquiring the language of professional practice Pedagogic focus: <u>Situational awareness</u> Placement preparation: Who they will work with, the members of health care team at all levels Consideration of workplace ‘socialisation’ Interpersonal/professional protocols — interpersonal/social and practice Learning the particular language of professional practice Patient-centred complex environment (student is a guest) Support for learning <u>Capacities to engage and learn and agentially</u> Developing conflict management skills Prepare students as agentic learners — the importance of observations, interactions and activities through which they learn Develop interpersonal capacities for engaging in social and practice Learning about how to play ‘the game’ Learning to reflect Identify resources for learning <u>Education provision</u> Preparing the venue to receive students Preparing arrangements for student’s reflection Managing anxiety	Curriculum goals: <u>Support for learning (i.e. focus for pedagogy)</u> Guidance – modelling Scaffolding learning Maximising opportunity for engagement – authentic learning experiences Formative and summative feedback Assessment — validity in practice Recognition of existing knowledge Sequencing and combination of activities Pedagogic focus: <u>Agency of learner</u> Resourceful (agentic, self directed, self regulating (within boundaries/to a degree) Learning to play the game — “Bounded agency” Constructive and informed, but critically appraising existing practices Reflecting on experiences Negotiating learning opportunities Seeking and accepting opportunistic learning Engaging in clinical protocols <u>Education provision</u> Identifying and utilising pedagogically rich work activities or interactions Promote effective peer interactions (i.e. collaborative learning)	Curriculum goals: <u>Support for learning (i.e. focus for pedagogy)</u> Guiding reflection on learning from the game – the norms of practice Student centred environment +/- picking up the pieces reflecting on experiences from a distance Feedback on assessment/performance Pedagogic focus: <u>Extending learning through a reflection on practice</u> Encouraging a sharing of experiences — reflecting upon and learning from others. Making explicit links to what is taught (learnt) in university settings Encouraging critical perspectives on work and learning processes Using examples from practice — integrating learning from practice into theory Sharing and drawing out experiences (i.e. articulating, and comparing - commonalities and distinctiveness) (e.g. identify the canonical and situational requirements for practice) Emphasising the agentic and selective qualities of learning through practice (i.e. personal epistemologies) Goal setting — for next clinical and for career <u>Agency of learner</u> Reflecting on learning from the game (e.g. the norms of practice) Sharing experiences — learning from others. Engaging in drawing out experiences (i.e. articulating, and comparing — commonalities and distinctiveness) for instance identify canonical and situational requirements for practice)

In overview, these considerations are as follows.

Prior to the practice experience, it helpful to:

- establish bases for experiences in practice setting, including developing or identifying capacities in practice settings (i.e. practice based curriculum, interactions);
- clarify expectations about purposes, support, responsibilities etc. (i.e. goals for learning);
- inform about purposes, roles and expectations of different parties (e.g. advance organisers);
- prepare students as agentic learners (i.e. develop their personal epistemologies) — emphasise the importance of observations, interactions and activities through which they learn;
- develop the procedural capacities required for practice; and
- prepare students for contestations (e.g. being advised to forget everything learnt at university).

During practice-based experiences it is helpful for there to be:

- direct guidance by more experienced practitioners (i.e. proximal guidance);
- sequencing and combinations of activities (i.e. 'learning curriculum', practice based curriculum);
- active engagement in pedagogically rich work activities or interactions (e.g. handovers);
- effective peer interactions (i.e. collaborative learning); and
- active and purposeful engagement by learners in workplace settings.

After practice-based experiences, it is helpful to:

- facilitate sharing and drawing out experiences (e.g. articulating, comparing to identify common and distinctive features i.e. canonical and situational requirements for practice);
- explicitly make links to what is taught (learnt) in the academy and what is experienced in practice settings;
- emphasise the agentic and selective qualities of learning through practice (i.e. personal epistemologies); and
- generate critical perspectives on work and learning processes in students. (Billett, 2009)

These experiences also require students to move across and participate in environments that are student-centred and practice- (i.e. patient-) centred environments. So, the kind of pedagogic activities will focus upon the different emphases and seek to reconcile them across the series of student experiences. For instance, the activities prior to the practicum seek to maximise preparation and contributions from the practice centred environment, and those after the practicum likewise seek to utilise more fully those experiences.

The importance of students adopting an agentic approach to their learning are emphasised in the findings. Essentially students' engagement in, and critical considerations of, practicum experiences become central to the way in which the integration of these experiences can best proceed. Importantly, since it is the students who are engaged in all of these experiences, and particularly the practicum-based ones in the absence of teachers and teaching, the kinds of learning that arise will be very much premised upon students' active and critical engagement with their experiences.

The curriculum and pedagogic activities are presented here as tentative, and are likely to be manifested in particular ways across different programs (e.g. those with shorter or longer durations of practicum experiences), and will be more applicable to some occupations than others. However, they offer a starting point for considering the effective integration of experiences in university and practice settings. From these, and considerations associated with the integration of experiences for higher educational purposes, the following renderings for pedagogy, curriculum and personal agency are worth previewing.

To realise the educational worth of integrating practice experiences within higher education provisions there is a need to:

- identify and acknowledge the pedagogic potential of practice experiences, and consider how these can be engaged and integrated within higher education curricula to maximise students' learning experiences;
- include within curriculum considerations for higher education about how best to prepare for, position, sequence and identify the most appropriate duration of practice experiences, and consider support for learning from those practice experiences; and
- identify what kinds of experiences might best develop, sustain and utilise students' personal epistemologies, including their critical engagement and reflection.

In sum, it is proposed that effective occupational preparation and prospects for 'smooth' transitions to professional practice will most likely be enacted by graduates who are informed, prepared and have capacities for professional practice, including critical insights and personal agency directed to those purposes. This includes preparing students to be proactive learners, capable of exercising critical, but productive agentic learning. Moreover, the generation of these capacities likely arises through including and integrating episodes of practice-based experiences within the totality of the higher education curriculum. In order to realise these kinds of experiences and their potential benefits, mature relations between academics and practitioners, and academic institutions and practice-settings are likely to be helpful. However, these are difficult to generate and sustain, given the different imperatives of educational and practice-based settings, and tensions that can arise between their distinct goals and priorities. Nevertheless, these arrangements stand to be the most effective when they are supported by mature relationships between institutions focused on education and practice, and between and among practitioners from higher education and professional occupations.

Mature relationships are those that acknowledge and accommodate collaboration, and recognise different imperatives and contributions. Importantly, practice based experiences should not be seen as being opportune, or as a side issue, but brought centre stage within educational provisions. The key challenges for us as higher educators is to overcome existing orthodoxies that resist the idea of learning through practice as legitimate and productive, but rather support and acknowledge it and understand that effective curriculum and pedagogy are constructed differently in practice and educational settings, albeit shaped by consonant concepts.

8. Dissemination activities

A key and ongoing process associated with the Fellowship is the dissemination of its processes and outcomes. As planned, this dissemination will occur in a variety of ways.

First, there will be initiatives within each institution to utilise the findings and use them to inform practice.

Second, outputs will include publications in journals and books, some that have already commenced, and some whose proposals are currently being considered by publishing houses. The publications will consider curriculum goals and pedagogic processes that need to be integrated before, during and after practicum experiences, as well as activities (e.g. learning circles, reflective groups) which have been reported positively in the studies undertaken as part of the Fellowship.

There will also be the consideration of specific curriculum and pedagogic practices as they apply in both educational and practice settings.

Thirdly, the process of non-directed guidance that has been used in this Fellowship has been suggested as a helpful process of academic staff development.

Much of this dissemination work has already begun. Progress with dissemination activities, including some initial outputs, is listed below.

Griffith University

At Griffith University, the findings of this Fellowship are being integrated through a broadly-based dissemination and engagement strategy that is aimed to shape views about and the practice of WIL at Griffith. The Acting Pro-Vice Chancellor (Teaching and Learning Quality) has arranged a series of engagements at a strategic level including presenting to the University's Teaching and Learning Committee, participating in celebrating teaching week, and advice to projects promoting work-integrated learning at Griffith. These projects include the programs being offered through Griffith Institute of Higher Education (GIHE) to promote knowledge about and competence with WIL. In addition, presentations have been made to the Work Integrated Learning Working Group, which advises the university on approaches to organising and achieving its goals for work integrated learning. Moreover, contributions from the Fellowship will likely be imparted in a certificate program offered by GIHE associated with work integrated learning. These activities have the endorsement of the PVC (Teaching and Learning Quality), and the teaching and learning committee that makes decisions about policy and practice. In addition, activities are being planned for the findings to be engaged in specific areas of teaching that have existing work integrated learning components (i.e. teacher education).

Monash University

At Monash University, activities are being undertaken to include the findings of the projects through the teaching and learning programs within Health faculty. The findings about reflective learning groups are being considered for inclusion in the nursing education program. In addition, there are activities taking place in the Centre for Medical and Health Sciences Education. Dr Jenny Newton and Dr Liz Molloy have been invited to be involved in dissemination activities that are operating across the Health division and also at Southern Health forums. These have included making presentations at a breakfast meeting for faculty staff and engaging in the education week at Southern Health.

Flinders University

At Flinders University, activities are being undertaken for revising the midwifery program, to more effectively utilise the Follow Through Experiences (FTEs). It is anticipated that the findings of the Fellowship activities at Flinders will also inform the work integrated learning agenda across the university more generally. In addition, there is the potential that the work undertaken through the Fellowship at Flinders will be used to inform the midwifery registration process review, including how FTE can be used effectively and the importance of student midwives engaging with reflective logs whilst undertaking their follow through activities with birthing women.

9. Outputs

A range of outputs have already been realised, are in preparation, or are planned. These kinds of outputs are essential for not only disseminating the findings of the Fellowship but also for establishing its legitimacy in the educational sector where scholarship and publications are key focuses and activities. These outputs comprise keynote presentations by the Fellow, and activities directly related to the Fellowship.

Keynote presentations

- Billett, S (2009) Learning throughout Working Life in a Globalised World, *Inclusion and Exclusion in a Globalised World – VET and Culture Conference*, University of Zurich Switzerland, 27th August.
- Billett, S (2009) Towards learning practices: Developing capacities for the professions, Teaching and learning in the workplace: Towards effective practices, Centre for Medical and Health Sciences Education., Monash University, 21st May 2009.
- Billett, S (2009) Developing agentic professionals: realising the educational worth of integrating work experiences and practices in higher education (Keynote presentation) *Learning for a Complex World: Learning to be Professional through a Life-wide Curriculum*, University of Surrey 31st March.
- Billett, S (2009) “Exploring dualities across learning, work and welfare” (keynote presentation) *Work, Learning and Welfare: Changing identities and practices*, University of Jyväskylä, Finland, 1–2 April.
- Billett, S (2008) Learning through and for work: Conceptions, evidence and potential for workforce development in Singapore, *Understanding Adult Learning: Insights for practice*, Institute of Adult Learning, Singapore, December 4th.
- Billett, S (2008) Realising the educational worth of integrating work experiences in higher education, (keynote), *Work Integrated Learning (WIL): Transforming Futures: Practice, Pedagogy and partnerships*, World Association of Co-operative Education conference, Sydney, 2 October.
- Billett, S (2008) Integrating work experiences in higher education programs: Its educational worth, *Work Integrated Learning symposium*, Griffith University, 16 April.
- Billett, S (2008) Realising the educational worth of integrating work experiences in higher education (keynote presentation), *Learning matters conference*, Victoria University, 11th December.

Book Chapters

- Billett, S & Newton, J (2009) Learning practice: Conceptualising professional lifelong learning for the healthcare sector. In N Frost, M Zukas, H Bradbury & S Kilminster (eds) *Beyond reflective practice: New approaches to professional lifelong learning*. Routledge, London.
- Billett, S (2009) Integrating contributions of workplace and college experiences in developing vocational knowledge. In R McClean, D N Wilson & C Chinien (eds) *International Handbook on Education for the World of Work*, Springer Academic Publication, Dordecht, The Netherlands.

Journal articles

- Billett, S (2009 in press) Realising the educational worth of integrating work experiences in higher education, *Studies in Higher Education*, 34 (8).

Conference presentations

- Molloy, L and Newton, J — Educate 08 presentation — Two parallels? Professional and academic cultures in practice 10th October 2008 <http://www.monash.edu.au/educate08/events/20081010-two-parallels.html>

Other Fellowship activities

The Fellow has undertaken a range of activities that are directly associated with the work within the Fellowship.

1. Development of book proposal — *Promoting professional learning* —currently under review by Springer the contributions of the Fellow and participants is central to this proposal and are provided in Appendix E.

2. Development of a WIL strategy (July–October) – working with staff at Griffith to develop and advance a plan for engaging more broadly the provision of work integrated learning across the University.
3. Invitation to assess the AAUT applications (August 2008).
4. Convenor, of an Innovative Research Universities of Australia (IRU Australia) Leadership of Learning and Teaching Forum on Work Integrated Learning (October 30th and 31st)
<http://www.irua.edu.au/lltf2008.html>
5. Developing principles and practices for work-integrated learning across the IRU Australia group (November 08–January 09).
6. Providing advice to a number of Australian universities about work-integrated learning (Victoria University (Dec 2008), Southern Cross University (2009), University of Canberra, July 2009))

10. Independent report of Stephen Billett's fellowship

This summary of the report of Stephen Billett's fellowship provides feedback about his interactions and the processes that he evolved for academic leadership during the fellowship.

Overview

Stephen Billett through strategic engagement across different areas of the academic health sector engaged and facilitated five small groups/pairs of academics interested in the concept of students as 'agentic' learners. His knowledge, experience and communication skills have resulted in a cohesive partnership of the majority of the academics that initially agreed to this process.

Stephen's friendly approach encouraged commitment of all the academics. He facilitated exploration of domains outside of their traditional practice which they discovered immensely informative to the questions they were exploring as part of their participation in the fellowship. Stephen's open demeanour was very positive, it encouraged good two-way communication between the group members. Stephen did not have a detailed understanding of learning within the health care context and this was seen as positive as he was not socialised into the context and therefore not constrained by the dominant thinking paradigms that prevail about learning in health care contexts.

The resultant interactions were positive between members of the group. There was continued energy and enthusiasm throughout from the first workshop, to the individual meetings and videoconference, and finally to the final workshop. The money provided as part of partaking in the fellowship activities although not large was an excellent catalyst to assist the small groups/pairs in the analysis of what their particular project entailed.

Overall participants stated they enjoyed the networking across universities and across disciplines with the diversity of participants (including junior to senior academics); they intended to continue the partnerships and sharing that commenced in the workshops; and that they were motivated and encouraged by the approach, finding reassurance in the similarities across the different areas that assisted participants validate their own findings.

The two most salient features were:

1. The participants commented that they felt well supported through the process, and;
2. The participants enjoyed 'learning a new language' and 'thinking differently' which facilitated the opportunity to think outside the square.

Areas to be strengthened to enhance the outcomes of future similar endeavours

Ensure clear communication so that all participants benefit from all aspects of the processes – This may just need to be achieved through more gazetted time at the completion of each workshop so that everyone is clear about the next steps.

Prior to engagement it would be useful to outline the major commitments of time and expectations about what the outcomes.

Some of the participants had internal politics at their own institution. The experience of the researchers meant that this was clearly able to be sorted out. Potentially however, some of these internal institutional politics could interrupt the work and therefore awareness of the outset of these politics by the facilitator may be useful.

Stephen developed through his fellowship a formula for affecting academic leadership through the following process:

Communication

- sought interest in the project
- assessed commonality of interest
- determined the interest of the different groups prior to their arrival at the first workshop

Engagement

- organised a series of workshops (and other forums to communicate and disseminate)
- detailed the issues around 'agentic' students ie establishing them as active learners in the practice environment (exploring the concepts)
- discussed the component of the curriculum where this was apparent (and worthwhile exploring), for example, the purpose of the learning experience, the duration of the experience, the sequence of the experience
- clarified the related projects that would be undertaken
- obtained commitment from the participants that they would proceed and systematically investigate the selected area/field

Support

- provided a small amount of money to each group to assist with the collection and/or analysis of their findings
- visited the groups to discuss their progress
- provided a professional view (from an outsider) to assist in the exploration of new meanings at the stage where they had started to collect and analyse their findings
- discussed at a joint video conference concepts that assisted in validation of the interpretation of the data that emerged as there were similarities across the data sets

Professional outcomes

- affirmation in the value of the findings
- encouragement to present findings at forums outside the academics regular discipline groups (WACE Conference)
- clarification and development of concepts at a standard suitable for publication
- forging of networks across universities and across disciplines

I would be happy to discuss any aspects of this report

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APPENDICES

Appendix A: The five project plans

Title: Preparing physiotherapy students for clinical practice: Implementation and evaluation of the ‘pre-clinical week’ model

Liz Molloy and Jenny Keating (Monash University)

Purpose

This project aims to develop and assess an innovative curriculum to prepare students to meet the demands of clinical education. Undergraduate physiotherapy students consistently report that they feel underprepared for the complexity and uncertainty of clinical practice (Molloy & Clarke 2005; Ansari 2003; Neville & French 1991; Cupit 1988). Health care work is inexact by its nature. Yet, students entering the arena of clinical practice are expected to apply theory to practice, to form professional and productive relationships with patients and colleagues, and to navigate institutional norms. Additionally, students are required to interpret and respond to the changing expectations and knowledge base of the physiotherapy profession and wider health care community, and are assessed on their capacity to achieve these goals. The aim of engaging students in a one-week pre-clinical program is to make transparent these expectations of clinical education, to provide them with explicit skills in adult learning, and to, therefore, ease the difficulties to transition between the academic and clinical learning environments.

The innovation will be enacted as a one week university-based preparatory program undertaken by third year students prior to entering clinical placements. The pre-clinical week will have two aims: 1) to make transparent the often implicit expectations of clinical education and 2) to provide students with knowledge and skills in adult learning and critical reflection. These skills are likely to provide students with agency in their professional learning (Molloy & Clarke 2005). Students will be asked to rate their perceived level of readiness for practice pre and post intervention, and will appraise the value of this one-week program in preparing them for the clinical environment both immediately following the intervention, and after 15 weeks of clinical education.

Significance

Both students and educators have identified ‘the hidden curriculum’ in clinical education, defined as the implicit expectations and practices of the profession (Henderson 2005; Rose and Best 2005). Through the process of engaging in clinical education, students begin the process of appropriating professional values including what knowledge, skills and behaviours are deemed suitable by the profession. The aim of this preparatory program is to make explicit these expectations and nuances of practice so that students can become active agents in the education process rather than being subject to a clumsy and idiosyncratic ‘enculturation’ process into the profession and over time.

Contemporary health education literature advocates the importance of producing self-directed and reflective learners (Higgs et al. 2004; Kilminster & Jolly 2000). Although there is consensus in the literature that generating students’ capacity for self-regulation is a key curricular goal, there is little information, or evidence, to guide methods of achieving this goal (Baxter & Gray 2001). That is, the literature emphasises *purpose* (to produce self-directed learners) and not *process* (how to produce self-directed learners). This preparatory week initiative is driven by the assumption that these adult learning skills need to be scaffolded by educators in the academic setting. Ironically, we are arguing for an explicit and didactic mode of teaching of self-directed learning. Facilitating students’ development of skills in self-evaluation, self-regulation and critical thinking within the safe, academic environment, is more likely to aid students’ transition into clinical practice. As Henderson (2005, p.6) argued, skills such as giving and receiving feedback should be taught both conceptually and practically in the academic curriculum so that “the use of these skills becomes second nature and not an act of bravery in the clinical setting”.

What will be enacted

The Pre-Clinical Week will include teaching and learning around the following themes:

The health system and patient discharge options

The clinical educator's role

The student's role

Adult Learning and learning styles

Critical Reflection

Feedback and assessment

Leadership in clinical practice

Practical sessions: technical skill application and clinical reasoning

A questionnaire, along with focus groups, will be used to evaluate the students' perceptions of the effectiveness of this curriculum initiative in preparing them for learning in the clinical environment. Students will be provided with opportunities to suggest changes to the preparatory program to better facilitate their transition from the academic to the clinical setting. Both the immediate perceptions of the program will be captured along with the retrospective value of the preparatory week, given that students can draw on 'the realities' of 15 weeks of clinical practice to inform their appraisal. The questionnaire data will be analysed using descriptive statistics and the focus group and open ended questionnaire responses will be analysed for themes using a Grounded Theory Approach. The results of this study will be used to refine the Physiotherapy Pre-Clinical Week initiative, and may also influence teaching approaches in other health care disciplines.

When and how this will be enacted

February/March: Ethics approval sought (low impact)

March-April: Development of the Pre-Clinical Week Curriculum including recruiting lecturers/tutors

April: Recruitment of focus group participants. Development of Pre and Post Questionnaire

May: Implementation of Pre-clinical week (26th–30th May)

Focus Group One (30th May)

Email out electronic questionnaire (via survey monkey) to all third year students (30th May).

June-August: Analysis of Questionnaire 1 and Focus Group 1 data

September: (Email out electronic questionnaire 2 (via survey monkey) to all third year students. Conduct focus group 2.

October: Present preliminary analysis for October ALTC Conference

October- December: Analysis of data from questionnaire 2 and focus group 2. Dissemination of findings

Engaging with others about this project

Jenny Keating and Liz Molloy will work in conjunction with the physiotherapy third year co-ordinator, Stephen Maloney, in operationalising the Pre-Clinical Week model. The research team will also liaise with faculty staff with expertise in questionnaire development.

Summary presentations of both the curriculum initiative and the students' analysis of the initiative in facilitating clinical learning, will be organised both within the School of Primary Health Care and the Centre for Medical and Health Science Education (CMHSE) at Monash University.

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Project Title: Midwifery learning through a continuity model

Pauline Glover and Linda Sweet (Flinders University)

Purpose

This project seeks to understand the midwifery learning that occurs through a continuity clinical practice model called the Follow Through Experience (FTE). The FTE is a mandatory component of the national midwifery curricula standards requiring students to undertake 30 FTEs across the duration of the three year Bachelor of Midwifery. The students' clinical involvement in the FTE is dependent on their year level. This involvement moves from undertaking an observational role under the direct supervision of a registered midwife to increasing participation in a more active role for the woman and her family. Students are required to provide a written summary of the FTE with each woman that includes: an introduction to the woman and her family, and a brief reflection on the students' understanding of the experience of pregnancy, birth and postnatal period for the woman and what this means for the student's learning about midwifery. This project is designed to understand whether the FTE supports the development of agentic midwife learners.

Significance

The FTE has been mandated by the midwifery peak professional body (Australian College of Midwives) without clear evidence to support this teaching and learning strategy. Whilst some midwives believe the FTE is a valuable learning opportunity, there is no peer reviewed research evidence to support its efficacy, and in particular its potential to develop agentic (i.e. self-directed and regulated) midwives. Anecdotally, midwifery students report that this experience is valuable in their learning. However, they find it difficult to articulate the learning that occurs. During the past five years, since the large number of FTEs was introduced into the curriculum, we have noted some progression of the student's awareness of their learning; however this has never been adequately appraised. Given the significant learning opportunity that these experiences present and the time commitment from both the student and the woman, we believe that it is important to ensure that this approach is optimal, and if so to optimise it.

Midwifery students are required to contract and manage the FTE with women themselves. The FTE are essentially not formally facilitated by university staff. During the FTE, learning is focused from the interaction and relationship with the woman and her family, and the student's opportunities are dependent on the generosity and willingness from the woman to have the student involved during this intimate time of their life.

Traditional clinical placements in midwifery education are held to be problematic, because students may not have a logical sequence of experiences that follow birthing women through from the first antenatal visit, to the final postnatal visit which parallels with current models of midwifery care. The FTEs have been designed and mandated to address this aspect midwifery learning and in ways not achievable through short term clinical placements. The FTE enables continuity of the student with individual women and their families, regardless of health status or type of care chosen. Students, therefore, have exposure to many maternity care providers whilst undertaking the FTEs and hence many learning opportunities.

What will be enacted

This study will involve multiple research methods to explore the FTE including:

- Analysis of the three years of FTE reports from the 2007 cohort of Bachelor of Midwifery graduates at Flinders University.
- Focus group interviews of current first, second and third year Bachelor of Midwifery students about the teaching and learning embedded in the FTE
- Focus group interview with the midwifery teaching team about the teaching and learning embedded in the FTE and how they perceive this assists in the development of agentic professionals
- Detailed literature review of FTE in midwifery teaching and learning

- To review the medical education literature that involve family follow through experience across an extended period of time and explore similarities and differences in teaching and learning

This study aims to identify ways to improve learning from the FTE in order to develop a more agentic professional.

When and how this will be enacted

Month	Planning	Ethics approval	Recruitment	Document retrieval	Focus groups	Analysis	Conference preparation	Report writing	Book Chapter
Feb	X	X							
Mar	X	X							
April			X	X					
May				X	X	X			
June					X	X			
July					X	X			
Aug						X	X		
Sept							X	X	
Oct								X	X
Nov									X
Dec									X

Engaging with others about this project

This project will engage the midwifery teaching team at Flinders University through focus group participation and sharing progress and outcomes of this research. A future extension of this project will occur through collaboration with Dr Lisa McKenna at Monash University. The outcomes of this research will be presented to the Australian College of Midwives to provide evidence to underpin the FTE mandate and improve its teaching and learning nationally.

Title: Preparing undergraduate nursing students for their professional role

Jenny Newton and Brian Jolly (Monash University)

Purpose

This project seeks to enhance final year undergraduate students' preparation for their role as a health care professional by enabling an effective transition to the workplace through engagement in critical reflection activities.

For novice practitioners, interacting with a range of health discipline staff can be challenging. This is being accentuated in contemporary healthcare settings where the dynamics of constantly changing patient/client care needs can add to an already existing sense of feeling under-prepared for the workplace by novice practitioners (Newton & McKenna, 2007). Through processes of supported reflection it is anticipated that nursing students will develop an enhanced capacity for and awareness of facing issues and challenges they may encounter as newly qualified graduates.

Associated with the students' development of their professional role is a concern to gauge whether the existing curriculum assessments support the development of an agentic learner. It is anticipated the reflective practices will illuminate and assist addressing this issue.

Significance

Recent findings emerging from an ARC Linkage project – 'Developing nurses' work as a learning practice' (Newton et al.) and previous research (Newton & McKenna, 2007; McKenna & Newton, in press) identifies that new nursing graduates feel inadequately prepared for the workplace and the associated responsibilities required as a practising nurse. This issue is identified as being the product of a mismatch between experiences provided in the university setting and the practice setting. In particular, the pedagogical approaches currently employed in academia do not always adequately prepare graduates for the transition to their professional role. Thus, new graduates struggle with the tensions between the ideals and values they brought into nursing with the reality of professional practice (Maben et al., 2006). The complexity of health care delivery is increasingly challenging along with the dynamics of engaging in a health care workplace. The opportunities for learning about how best to cope with these increasing complexities and role transition may well assist in developing and retaining a skilled and engaged nursing workforce. The task is how the graduate is able to apply the values and practices acquired in the university setting with the demands of nursing practice through negotiating with other healthcare professionals.

What will be enacted

Third year undergraduate students enrolled in a clinical nursing subject will be invited to participate in fortnightly audio-taped active reflective learning group. The transcripts of the active learning group will be thematically analysed to establish what factor(s), if any, impact on the student's learning and integration of their knowledge. A secondary analysis will be undertaken using Mezirow's (1981) levels of reflectivity to elicit if there is a development of the students' reflectivity over the term of the active learning group.

Students will be encouraged to journal or use anecdotes to capture issues in relation to their learning both within the classroom and practicum placements to identify and share learning issues for the active learning group. Following this exploratory work, all 2nd & 3rd year undergraduate students will be invited to participate in survey designed to elicit what happens with their learning when they approach theoretical or clinical assessment and how they perceive the assessments assisting in their development as a health care practitioner.

When and how this will be enacted

February–mid March 2008 — seek ethical approval and recruit participants

Mid March — set up & facilitate first active learning group

Mid-March — August facilitate fortnightly active learning group

April–June — develop student assessment survey

July 2008 — survey undergraduate students

August–September 2008— analysis of data, preparation of outcomes for Oct conference

Engaging with others about this project

Professor Jolly & Dr Newton will in consultation with Monash University's Centre for Advancement of Learning & Teaching (CALT) and appropriate Faculty staff develop an assessment survey that specifically focuses on what assessments do for students' learning and their learning styles. Presentations will be arranged through the Faculty and CALT.

Dr Newton through participation in a peer active learning group within School of Nursing & Midwifery, Monash University will engage her colleagues about the project.

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Learning to deal with confronting experiences: Preparing students for the human services.

Jenny Cartmel and Jane Thomson (School of Human Services, Griffith University)

Purpose

Students undertaking field placements in human service organisations often encounter experiences that are confronting for novices, yet comprise routine aspects of human service work. The purpose of this project is to develop and trial strategies to guide students' learning in order to be prepared for, respond appropriately to and maximise the professional learning from these experiences. Overall, these strategies aim to enhance students' capacities to respond productively to these confronting experiences as agentic professional learners.

Significance

The teaching of strategies to assist students' learning is critical to the preparation for effective practice as human service professionals. Professional practice in the human services can be confronting and demanding. Students often refer to being ill- prepared for the challenges they experience in their field placements. This project seeks to engage students in an honest appraisal of the professional issues and assist them to develop personal strategies for effective practice and personal coping. The goal of the project is to ensure that students then feel well equipped to understand and respond effectively to situations which require them to facilitate change for individuals, groups and communities. The development of this agentic quality is essential for a productive and healthy professional life in human services.

What will be enacted

Students in the Bachelor of Human services will be engaged in reflective processes utilising a participatory action-research approach (Kemmis & McTaggart, 2000). Staff will engage students beyond surface level support to achieve deeper level interactions that result in students reflecting, analysing and strategising to develop approaches to develop their personal agency to be well adjusted competent practitioners. The students will be engaged in intentional interactions: Fortnightly learning circles (Noble, Macfarlane & Cartmel 2006), eb-based discussion board, and face to face consultations

When and how this will be enacted

February — Ethics clearance, briefing meetings with students

March — June: collection of data from learning circles and discussion boards

Engaging with others about this project

Presentations

Griffith University Community of Practice — Engaging Students in Work Integrated Learning

School of Human Services Field Supervisors Forum — July 24, 2008

SE Qld Universities' Human Services Field Practice Group

Professional discipline conferences— Australian Association of Social Workers National

Conference, November 2008, Sydney

Social Work and Early Childhood

ACEN

PEPE

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Title: Developing agentic student nurses through a Clinical Progression Portfolio

Marion Mitchell and Marie Cook (School of Nursing, Griffith University)

Purpose

The project aims to evaluate the usefulness of Clinical Progression Portfolios to support student nurses' preparation for practicum experiences. This project will evaluate the utility of a practical and handy booklet for students to use throughout the Bachelor of Nursing program. The evaluation will assess the usefulness of the Portfolio as a tool to support student preparation for clinical practicum, and to enhance communication with Registered Nurse 'buddies' during the clinical practicum. Currently, there is a reported lack of effective communication within clinical settings between student and Registered Nurse 'buddy' regarding the development of students nurses' clinical capacity. This has lead to unsatisfactory clinical experiences and learning. The Clinical Progression Portfolio has been designed to provide a resource to enhance and support communication during the 19 weeks of clinical practicum within the Bachelor of Nursing.

Significance

There is a lack of understanding in the clinical environment about the monitoring and development of student nurses' learning needs and processes that can lead to ineffective use of time and resources (e.g. repetitious tasks) which limits effective learning about nursing practice. In particular, because of external influences including time pressures, patient acuity, workload, rostering schedules and lack of experienced staff, there are reduced levels of effective communication between student nurses and their Registered Nurse buddies regarding teaching and learning. This portfolio will be used to focus the learning-related activities and outcomes of the students and provide a device that will guide their Registered Nurse buddies their role modelling and provision of appropriate opportunities for student practice in the clinical setting.

What will be enacted : Students within the second year clinical practice course on Nathan Campus, Griffith University will be:

- (1) Informed about the Clinical Progression Portfolio and provided with a copy of the portfolio, and guided in its use. Similarly, advice about the portfolio will be provided by the students to their 'buddies'.
- (2) Evaluated following implementation in the form of a survey to all 2nd year nursing students at Nathan campus. In addition, a small sub-sample of students and buddy Registered Nurses will participate in focus group interviews to evaluate the usefulness of the Clinical Progression Portfolio as a tool to help students prepare for clinical practicum and focus their learning and communication with buddy Registered Nurses.

When and how this will be enacted

Students will be informed of the Clinical Progression Portfolio through a face to face presentation in core lecture time in NRS2971 (Acute Nursing) one to two weeks prior to the clinical practicum period (early May 2008). The evaluation will occur on the final two days of the students' clinical practicum in a focus group interview with 10-12 students in three focus groups and one on one interviews or focus groups with buddy Registered Nurses in the week following the clinical practicum. In addition, all students will be given a survey to complete.

Engaging with others about this project

Findings from this project will inform enhancements to the Portfolio and will be used to consider its capacity to be extended across all clinical courses within the SONM Bachelor of Nursing program at GU (6 courses). Successful implementation of the portfolio will encourage the portfolio to be embedded within the nursing curriculum. Success of the portfolio will subsequently be shared with the clinical coordinator network (this includes clinical coordinators from all teaching hospitals in

the south east Queensland corner and clinical coordinators from Queensland universities (seven in total). In addition a conference and refereed publication will be prepared.

Appendix B: Partners bio statements

Dr Jennifer Cartmel, PhD, Dip T (Pre-Pri), B. Ed Stud, M. Ed, M.A.C.E.

Jennifer Cartmel is a member of the Child and Family Studies teaching team in the School of Human Services at Griffith University, Logan campus. She has worked in TAFE colleges and universities preparing practitioners to work in a range of children's services including outside school hours care and early education and care settings. She was a member of the team for Awarded the Griffith University Innovation across the Institution 2005 for the project "Circles of Change: Challenging Orthodoxy in Practitioner Supervision" which enhanced the field education experience for practitioners undertaking practicums in child care settings. Her research interests include the role of practicum in undergraduate and postgraduate courses and the many facets of outside school hours care services. She has presented at local, national and international conferences on features of practicums in the Human Services sector and on aspects of school age care including the European Network for School Age Care, Denmark.

Pauline Glover BEd,MNngSt,EdD, FACM

Dr Pauline Glover is currently employed in the School of Nursing and Midwifery at Flinders University as an Associate Professor in Midwifery and Nursing. She has responsibility for teaching in both the undergraduate and postgraduate programs. She has over thirty years experience and expertise as a midwife and has worked in the clinical, management and education. She has been very involved with the development of midwifery curricula and competency standards for midwives. She is interested in how learning occurs in the clinical area given the requirements of curriculum, declining birth rate, increasing Caesarean Section rates and competition for learning experiences in the field. She is an active member of the Australian College of Midwives and she was the editor of the Australian midwifery journal for 6 years. She remains a member of the Editorial Board. She is well published in the area of midwifery and is a reviewer on two national journals, and two international journals. Dr Glover has been a successful recipient of grants and she has been awarded two Vice Chancellor's Awards for Teaching Excellence. She has also been awarded a Distinguished Alumni Award by Flinders University (2006) for her services to midwifery.

Professor Amanda Henderson PhD MScSoc GradDipNurs(Education) BSc RN RM

Professor Henderson is a Clinical Title holder at Griffith and Nursing Director, Education at the Princess Alexandra Hospital. She plays an important leadership and co-ordination role across Southern Area Health Service (14 districts). She has been instrumental in co-ordinating the articulation between Queensland Health workplace education programs in specialty practice such as Intensive care nursing and university postgraduate programs, the implementation of an innovative and equitable model of clinical education, and development of evidence-based clinical teaching and learning processes. Professor Henderson has published over 40 peer-reviewed papers related to clinical education and practice and is finalising an important nursing text on conducting research in clinical settings.

Associate Professor Marie Cooke, PhD , MSPD, BAppSc, DAppSc(Nurs&UnitMgt), RN

Associate Marie Cooke is Deputy Head of School (Nathan), Nursing and Midwifery at Griffith University. Her research interests include in Health planning, Acute/chronic nursing, Problem-based learning, Complementary and alternative medicines, Qualitative research methodologies and methods, Life history , Randomised Controlled Trials, Mixed Methods, Current research: Music and anxiety/pain/discomfort; Music and agitation in older people with dementia; Effectiveness of Pulmonary Maintenance Program for COPD; Clinical learning and teaching. She has secured an Australian Learning and Teaching Council grant to trial the use of Clinical Progression Portfolios with student nurses

Professor Brian Jolly, BSc, MA(Ed), PhD.

A graduate in Psychology, Brian Jolly began working in medical education in 1972. He participated in the design and construction of the first UK course on education for teachers of health sciences from developing countries. He transferred to Barts Hospital Medical College in May 1979 to develop teaching resources, including the use of educational video, and to provide academic input to a service department. There, he established a reputation as a leading creator of educational material in medicine for the University sector. In 1983 he helped develop the 'Cambridge Conference' concept: an intensive workshop style conference designed to merge British and American approaches to the assessment of clinical competence. This series of conferences has had major international outcomes. Shortly afterwards he obtained a grant for staff development and student-centred education (£752,000) at that time the largest ever grant awarded in the UK for medical education.

In 1994 he co-led a successful bid for a 3 year grant to a consortium of four schools in North Thames for development of Community-based medical education (£852,000), and was awarded a PhD on clinical education by the University of Maastricht. In 1993 he co-led a team in a successful tender to the Commonwealth Government of Australia to evaluate nationally the training scheme for general practitioners in Australia. In 1995 he was invited to be the Secretary of State for Education's nominee and a founder member of the General Osteopathic Council. In March 1999 he became a Professor of Medical Education in the newly formed Department of Medical Education at the University of Sheffield. In October 2001, he became an international Consultant to Monash Medical School and in 2002 Professor of Medical Education and Director, Centre for Medical and Health Sciences Research Education.

Professor Jenny Keating

Jenny Keating is a physiotherapist with postgraduate qualifications in musculo-skeletal physiotherapy. She completed her PhD in 1997 and was appointed inaugural Professor of the new Bachelor of Physiotherapy course at Monash University in 2005. She has developed subjects and coursework to teach research methods and statistical analysis for postgraduate students from post graduate diploma to doctoral level. Her research interests are in the assessment of musculoskeletal health and the development of high quality, practical ways to measure health. She is an active Cochrane reviewer on two reviews (Schonstein E, Kenny DT, Keating J, Koes BW. Work conditioning, work hardening and functional restoration for workers with back and neck pain; de Morton NA, Keating JL, Jeffs K. 2006 Exercise for acutely hospitalised older medical patients. (Protocol)). Her career research funding totals \$1.3 million and she has published 39 papers in peer reviewed journals. Professor Keating has supervised to completion 7 successful Honours theses, 2 Masters by Coursework theses, 3 Doctoral theses. She is currently supervising 5 doctoral students and developing the honours research program in the new Physiotherapy program at Monash. She teaches research methods and statistics to undergraduate and postgraduate students and brings quality outcome measurement and qualitative data analysis skills to the project. She is committed to the development of an outstanding clinical education program for her students and welcomes collaboration in this project.

Dr Elizabeth Molloy PhD BPhysio (Hons)

Dr Molloy is a practising physiotherapist, lecturer and researcher in Physiotherapy in the Centre for Medical and Health Sciences Research Education at Monash University. She is assisting in the development of the physiotherapy clinical education program at Monash, including running workshops for both students and clinical educators in order to optimise their engagement in clinical education. Her PhD investigated the feedback process in physiotherapy clinical education and the results from this research have informed the development of the academic and practice-based curricula, emphasising principles of adult learning and critical reflection. Dr Molloy has run a number of workshops for clinical educators in the health sciences, has presented her research at national and international conferences, has published one peer-reviewed paper and is involved in the writing of a text book on clinical education in the health professions.

Dr Marion Mitchell, RN, RM, CHN, BN (Hons), Grad Cert Ed (Higher Ed), PhD.

Dr Mitchell is a Senior Lecturer in the School of Nursing and Midwifery at Griffith University and conducts research in innovative teaching and learning strategies. Currently she is chief investigator in two funded multidisciplinary clinical education projects. One project is evaluating aspects of interdisciplinary communication within clinical laboratory groups of combined nursing and medical students. The second project is seeing the development of best practice principles and core outcome objectives for Objective Simulated Clinical Assessments within nursing. A national panel of experts form an integral part of the project. Dr Mitchell convenes and teaches clinical courses and has been the Undergraduate Course Convenor and is currently Acting Deputy Head of School on Logan campus which has approximately 650 nursing student enrolments. Dr Mitchell is the Queensland President of the Australian College of Critical Care Nurses and is a member of two education committees for the Queensland Nursing Council. She is a peer reviewer for four journals and on the editorial board of the Australian Critical Care.

Dr Jennifer Newton, EdD, BA (Hons) Nurs Ed, RNT, RN RM

Dr Newton currently is an APDI Fellow for an ARC Linkage project examining workplace learning in nursing. She has an extensive background in nurse education gained both in the UK and Australia. She is a proactive researcher in the field of clinical nurse education and practice development. Her doctoral research involved an examination of students' transference of learning into clinical practice. Subsequent studies have explored the congruency of clinical staff's expectations of the knowledge and skills of undergraduate students, with academia; and the development of graduates' knowledge and skills. Prior to accepting her APDI, Dr Newton was the Coordinator of the Bachelor of Nursing, School of Nursing & Midwifery, Monash University. Dr

Newton has several international peer-reviewed publications, presented at numerous international conferences and is on the international advisory board for the Reflective Practice journal and the editorial board of the Royal College of Nursing journal, Collegian.

Dr Linda Sweet, BN, MNgS, PhD, IBCLC

Dr Linda Sweet has recently joined the School of Nursing and Midwifery at Flinders University as a lecturer in nursing and midwifery with responsibility for teaching in the undergraduate and postgraduate programs. Prior to this appointment, she spent 7 years at University of South Australia as a contract lecturer for both nursing and midwifery programs and more recently was Midwifery Educator at The Queen Elizabeth Hospital and Women's & Children's Hospital. She has had a long involvement in work integrated learning for undergraduate students and hospital employees. She has a particular interest in midwifery competence development and using contemporary teaching and learning approaches in midwifery. Dr Sweet is an active member of the Australian College of Midwives Inc (ACMI). She is currently a member of the ACMI Clinical Advisory Committee, is the ACMI representative on the inter-disciplinary Joint Consultative Committee for the national Anti-D prophylaxis program and is on the editorial panel for the journal Women and Birth. Dr Sweet recently participated in the development of the Lifescripts for Pregnancy, a commonwealth funded tendered project in conjunction with the Australian Division of General Practice.

Dr Jane Thomson, BA (Qld), BSW (Hons), PhD, GCTT (JCU)

Dr Jane Thomson has recently joined the School of Human Services at Griffith University as a senior lecturer in social work with responsibility for practicum. Prior to this appointment, she spent 21 years at James Cook University where she was senior lecturer and more recently, Head of School in the School of Social Work and Community Welfare. She has had a long involvement in work integrated learning. She has a particular interest in inter-disciplinary field education and has conducted a number of successful workshops around Queensland for field educators in the health area from a range of disciplines on this topic. She retains links with academics in a number of Universities who are working in the practicum area. She has published in this field. Dr Thomson is a member of the Work Integrated Learning Committee at Griffith University. Dr Thomson is also a National Vice President of Australian Association of Social Workers (AASW) and is currently a member of an AASW committee conducting a major review of the Australian guidelines for social work practicum.

Appendix C — results of initial identification of issues for integrating professional learning experiences (January 22nd)

	Issues for integrated professional learning experiences	Students ¹	Pract ²	Curricul ³
1	Managing cultural dissonance	X	X	x
2	Understanding the cultural context of practice (behaviours and norms, workplace values) (associated with 1)	X	X	X
3	'Surviving' (managing- transiting) the journey towards developing autonomous practice. (survival tips – e.g. maintain peer contacts, heuristics,) (associated with 2)	x		x
4	Developing and maintaining professional self (associated with 2)	X	X	
5	Personal (S)/institutional preferences/requirements (WP) (subsumed under 1) – (associated with 3)	X	X	
6	Interpersonal skills of practitioners – an essential quality – privileging time for talking (have you practised these?)	X		
7	Impacts of changing context of practice (e.g. changing staff composition, roles, work requirements) – associated with 2	X		X
8	What constitutes a 'model' practice (practitioner)? (associated with 2, 5)			
9	The efficacy of different models of learning support.(linked to 7 – what is possible)	X		X
10	What students should expect and how they should engage with what they encounter? (associated 2, 3 and 9)	X		X
11	Effective preparation for those who provide support in practice setting.(whose responsibility)			X
12	What models of institutional support/rewards likely support effective student learning by workplace experts?			X
13	Providing supportive, effective and valid feedback (linked to 6) – how students should request and react to f/back	S		
14	Learning from sharing other models of practice-based support including other professions			X
15	Models of professional reflection/development (associated with 9, 14)	X		X
16	Placement options and issues (paid, unpaid, (associated with 2 and 7)			
17	Shared Expectations of clinical education	X		X
19	Interacting (negotiations) across disciplinary boundaries – (associated 11, 8)	X		X
20	What constitutes the values and qualities that underpin professional practice (associated with 8)			
21	Emphasising learning through practice	X		X

Notes: 1 refers to issues pertaining to student; 2 refers to practice and 3 refers to curriculum

Appendix D — Independent Assessor's evaluation of the Fellowship (full version)

Evaluation of 'developing agentic professionals through practice-based pedagogies'

Associate Fellowship of Stephen Billett

Prepared by:

Amanda Henderson BSc(physiol/psych) GradDipNurs(educ) MScSoc PhD (UNSW)
Nursing Director, Nursing Practice Development Unit, Metro South, Queensland Health.
Professor, Griffith Health, Griffith University, Gold Coast, Queensland

Aim:

To explore how practice-based learning experiences and those in the university are best integrated to provide effective teaching and learning for professional practice.

Overview:

This project brought together five different groups within the field of health sciences from different parts of Australia to explore learning initiatives where students take the lead. The five domains and the geographical location were as follows:

Midwifery (South Australia)
Acute care nursing (Queensland)
Acute care nursing (Victoria)
Physiotherapy (Victoria)
Health Welfare (Queensland)

Method of data collection for evaluation:

This evaluation has been prepared from both observation data of the first workshop, project meetings, videoconference, and interviews with the Fellowship participants who consistently attended the workshops. The interviews were the key source of data. These were undertaken in Brisbane and Melbourne and were always done in the absence of the Fellow (Professor Stephen Billett), but always with his knowledge. The interviews were of approximately 1 hours duration each and were all face-to-face.

The participants were aware of my role as an evaluator, which was outlined by Professor Billett at the first project meeting in January 2008 in Brisbane. Consequently, my only involvement in the project meant that I became familiar with both the work of the Fellow and also the participants in the five projects that comprised the Fellowship.

Moreover, throughout the period of the Fellowship, I met with the Fellow on a number of occasions, usually after meetings, to discuss aspects of the progress of the project and to provide progressive feedback. The evaluation was conducted within what was proposed in the application, and in a spirit of the process of discussions throughout with the Fellow and also the participants.

Sections in this evaluation:

The process the Fellow adopted in engaging and working with the participants, he described, as 'non-directive guidance'. That is, a process of providing support for participants in a development process without being overly directive. This was exercised through providing choice to the participants, being flexible with processes organised for the workshops and meetings and

attempting to be responsive to the needs of the participants. He argued that this approach was consistent with a developmental strategy for academics who are used to being self-directed and making decisions about their practice. However, this is not to suggest that this approach was laissez-faire or without structure. Indeed, a feature of the workshops, meetings and videoconference was thorough planning and well ordered progress. Moreover, the participants have reported that, when requested, a more directed approach to providing advice and suggestions was undertaken.

Consistent with this approach, which is in itself worthy of further consideration and appraisal, the evaluation proposed here focuses on both the process and the outcomes of the Fellowship process and this strategy of non-directive guidance. This report is divided into three sections which address these goals. These three sections:

1. Securing involvement and engagement of the participants
2. Sustaining momentum
3. Outcomes

1. Securing involvement and engagement of participants

Stephen sought involvement through

- knowledge of staff participating in existing projects,
- invitations distributed through education networks, and
- links within his home institution.

There were five discipline groups with one or two key members of the group who participated in the fellowship activities. At the commencement of the project there was commitment and interest across all five groups.

Involvement and clarity of the projects progressed with the first workshop. This was a two-day workshop. Participants introduced themselves and their background and interest in student learning. Stephen clearly articulated his approach to improvement in student learning in the workplace. Participants developed a clear understanding of this approach.

During this workshop there was much discussion about the scope of the impacts on student learning, in particular, those impacts that could potentially make a significant difference to students as 'agentic' learners. External representation from an educationalist (a member of the Griffith Institute of Higher Education) outside the health care disciplines was also present to add a critical perspective on the discussion. Over the two days, participants were challenged to identify situations where students operated as 'agentic' learners. From the situations identified, the participants were challenged to explore the capacity and value of these situations where students needed to be 'agentic'.

Participants were open about sharing the range of attitudes they observed in students, and the environments where students were placed to 'learn'. The participants shared examples of learning practices that occurred based on tradition, political imperatives, beliefs and understanding of local supervisors, and best practice initiatives. This discussion assisted the group to explore the gaps between actual and ideal learning experiences. The environment created by the Fellow appeared to foster an openness and sharing by the participants. The Fellow permitted significant departure from his planned process at this first workshop, in order to allow the participants explore issues that emerged in the discussion and were expressed as key concerns. From time to time, however, the Fellow felt the need to direct the focus back on to the process he had organised for the meetings.

The gap between ideal and actual learning experiences was the key consideration when examining the potential contribution of students as ‘agentic’ learners. Scaffolding around work based learning experiences can assist students to become ‘agentic’ learners.

Initially, the interest areas of the projects discussed were:

- promotion of active learning through informal student group discussions
- establishment of mechanisms to assist students deal with difficult situations off campus
- exploration of the value that repeated reflective practices can contribute to student learning
- pre-preparation that can assist students to maximise clinical learning situations
- contribution of a clinical progression portfolio to assist students to be responsible for their own learning.

All of this reflected the non-directive guidance approach that was aimed to be implemented by the Fellow.

Strengths

The strengths of the approach taken to involve and engage participants lay in the following initiatives:

1. Organising for participants to attend a face-to-face workshop at the outset of the project to ensure clarity, respond to questions, and gain agreement on the timeframe of the project.
2. Clarity of the intent of the project through the workshop. Clarity was assisted through the following -
 - formal presentation
 - handouts
 - responsive discussion
3. Stimulating discussion was achieved through -
 - an introduction that ‘sets the scene’ for tone of discussion
 - participation of professionals with extensive clinical and academic experience
 - presence of a critical friend
4. The open and frank discussion assisted in sharing ‘truths’. Identification of such similarities enhanced the dialogue through building a shared sense of the teaching and learning experience. This shared sense of experience created an energy and enthusiasm throughout the group that assisted the momentum.

Overall, the non-directive guidance approach seemed an appropriate model of engaging participants in a development process in which they could become engaged and was directed by their interests and concerns.

Recommendations to build on strengths

While clarity was achieved with the participants prior to commencement there was a last minute substitution within one group that eroded some of the enthusiasm within that group. Rules or mechanisms around changing participants might be worthwhile to consider in the future to ensure maximum interest in participation. Maybe, it would be worthwhile considering a ‘drop-out’ clause after the project has been explained to everyone. [It would be important to organise this as a short information session rather than after the first day of a whole day workshop.]

2. Sustaining momentum

Following the energy that was created from the initial workshop it was imperative that this was successfully embraced and sustained, particularly because the participants still had existing work

commitments and were working in isolation from one another. The activities of the fellowship (as outlined below) successfully continued this energy outside of the workshop times.

Strengths

Strategies used to sustain the momentum for the individuals /pairs were:

- clarity around the topic of interest that was presented
[at subsequent meetings the concept was summarised]
- participants shared their local knowledge pertaining to the other topics of interest
- methods that the participants considered using to collect their data was shared with the group. The group assisted through discussion of how to improve the quality and ease of data collection.
- A clear schedule of meeting dates [that was attainable] was agreed upon eg
 - + individual on-site meetings were conducted with each group at their home institution
 - + video conferencing was organised mid way through to share issues across all the groups
 - + a workshop at a relevant conference to encourage participation in the wider field of work based learning
 - + a final face-to-face workshop to consolidate and 'draw the threads' together
- the provision of a small amount of money to assist the teams in data collection/ and or management [while this money was not a large sum it gave the impetus for beginning systematic exploration or change into what was being discussed]
- the commitment of Stephen in his role as the Associate Fellowship Recipient to assist the individuals/pairs make sense of their data

Recommendations to build on strengths

Stephen had a wealth of knowledge that he drew on when he interacted with the pairs and assisted them make sense of their activity. Stephen was keen for ideas to be freely expressed and therefore adopted the role of facilitator after the initial introduction period, however it may have been useful at different stages to hear more of Stephen's views and feedback to increase the power of commonalities in the projects. In this way, a more directive approach may have been useful in developing further the ideas of some of the participants.

Strengths

Each project was able to define local outcomes that could directly inform education practices around optimising student learning in real-world clinical contexts, for example...

- the value of undergraduate students coming together to reflect and discuss their learning experiences
- the questionable educational value of asking students to perform reflective activities on too many occasions
- managing the tensions of ensuring students are ready 'in a practical sense' however not so that it detracts from the rich learning experiences that are afforded to them

- assisting students to proactively manage difficult situations in the real world when there appears to be little support for them due to the perceived isolation of the 'real-world' experience
- identifying the desired content of a communication tool and how this should be used by the students and supervisor of clinical education during their real-world experience.

Recommendations to build on strengths

Drawing common themes from across the projects to better assist in the development of a body of knowledge that can contribute to work based learning initiatives would make a substantial contribution to a body of knowledge in work-based learning. While this has only been partially achieved to date I understand that the Fellowship recipient intends to undertake this task further.

Appendix E Participants abstracts for the edited book — Developing learning professionals: Integrating experiences in university and practice settings

Targeted Preparation for Clinical Practice

Liz Molloy and Jenny Keating (Monash University)

This chapter reports on a range of curriculum initiatives designed to prepare undergraduate physiotherapy students for transition from university based learning to learning in clinical practice. The physiotherapy program is a 4 year Bachelor degree. The first two and a half years are based in the university setting with remaining time predominantly spent in workplace learning. Students undertake a total of 42 weeks of clinical education. The chapter reports the implementation and assessment of a one week transition program designed to enhance student preparation for the demands of clinical education. The aims of the transition program included: (i) to make transparent the expectations of students taking clinical education and (ii) to advance student knowledge and skills in applied adult learning to facilitate negotiating the complex challenges and uncertainty of the clinical environment and physiotherapy work.

Although students reported high levels of satisfaction with the transition program, focus groups revealed a disjunction between educator and student objectives in preparing learners' for workplace learning. Educators designed the transition program to provide learners with agency through the development of generic skills in communication, leadership and critical thinking. In contrast, students' priorities reflected a 'survival focus', and a preoccupation with the attainment and demonstration of technical skills. Survey results supported that students placed greater value on discipline-specific practical classes than activities designed to promote generic skill development such as lectures on adult learning principles and leadership in practice. Despite this preference for activities promoting technical skill development, students acknowledged the benefit of educators and fourth year students providing heuristic, or 'tricks of the trade' information during the transition week including how to negotiate the supervisory relationship, and what to expect from assessment procedures.

To align student and educator agendas, it may be better to prepare teaching and learning activities that promote skill development in the context of clinical activities where students perceive that they are attaining tangible skills with utility and transferability. Physiotherapy students praised learning activities characterised by perceived relevance and authenticity, and examples of such curriculum initiatives designed to engage students are presented in this chapter.

Reflective learning groups for student nurses

Jennifer Newton (Monash University)

Interacting with other health care professional and from other disciplines can be challenging for novice nurses. Recent research (Newton & McKenna, 2007; McKenna & Newton, 2008) report new nursing graduates claim to be inadequately prepared for the clinical workplace and the associated responsibilities required as a practising nurse, including interacting with other and more experienced practitioners. These issues are held to be the product of a mismatch between experiences provided in the university setting and the practice setting. In particular, the pedagogical approaches currently employed in academia do not always adequately prepare graduates for the transition to their professional role. Thus, new graduates struggle with the tensions between the ideals and values they brought into nursing with the reality of professional practice (Maben et al., 2006). The complexity of health care delivery is increasingly challenging as is the dynamics of engaging in a health care workplace. This chapter discusses an approach to assist in the facilitation of student nurses development of their professional role through the process of supported reflection. This is realised through the experiences of six students' participation in a reflective learning group during the final year of their undergraduate degree. Discussion of how the reflective learning group supports the development of an agentic learner will be illustrated through appraisals of the students' learning and growth that emerged from their participation in this group.

Optimizing the Follow Through Experience for midwifery learning.

Linda Sweet and Pauline Glover (Flinders University)

The Australian College of Midwives standards for the Bachelor of Midwifery mandate that a portion of clinical learning be achieved through a Follow Through Education (FTE) program. The FTE program is a

continuity model for midwifery students whereby they experience pregnancy and childbirth in partnership with women. The FTE in Australia is unique to midwifery education throughout the world. The establishment of this integrated clinical learning requirement has challenged educators to develop strategies for implementation and evaluation to maximise student learning. This chapter discusses the findings of focus groups of current students and educators, along with analysis of the documentation of the FTE from past students. The midwifery learning process through the FTE is illuminated and discussed through the findings of this study. The intent of the FTE program is for students to progress from observation to participation in progressively more central roles in the care of pregnant women, in midwifery practice settings over the three years of study. The analysis will demonstrate the positive aspects of the intended curriculum, as well as aspects we consider to be the hidden curriculum which offers powerful learning for students. Overall, it is proposed that the FTE is a useful clinical learning opportunity and process for initial preparation of professional practitioners and offers the development of the canonical knowledge required for midwives that facilitate a smooth transition into practice. Whilst the current FTE program goes some ways to developing agentic professionals, it is our intention to identify how these clinical experiences can be further enhanced to benefit the students learning experience.

Preparing Human services practitioners

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Students undertaking field placements in human service organisations often encounter experiences that are confronting for novices, yet comprise routine aspects of human service work. Students need to support in their learning in relation to these confronting circumstances in order to be prepared for, respond appropriately to and maximise the professional learning from these experiences. This chapter discusses the complexity of strategies used to prepare human services practitioners about confronting situations they will deal with in their workplace experiences in human services. It is divided into two parts. Firstly, it highlights the dilemmas faced by students as they engage in lengthy practicum period in organisations that support the well-being of community members, and yet provide different kinds of experiences for novice. Secondly, it examines the issues for the practitioners who prepare human service students for the field.

Professional practice in the human services can be confronting and demanding. Students often refer to being ill- prepared for the challenges they experience in their field placements. Hence, securing a balance in curriculum design and teaching practice that support students' engagement with the practicum experience is a key educational goal. Here, strategies are appraised that seek to engage students in an honest appraisal of the professional issues and assist them to develop personal strategies for effective practice and personal coping. These strategies are designed to ensure that students are well-equipped and placed to understand and respond effectively to situations which require them to facilitate change for individuals, groups and communities. The challenges of exposing students to real-life scenarios are explored as these teaching approaches have the potential to make students resilient as professional. However, these strategies have the potential to create the opposite outcome. They, also, are likely to 'frighten' them away from a career in the sector, unless carefully managed. The development of this agentic quality of being to deal with confronting situations is essential for a productive and healthy professional life in human services.