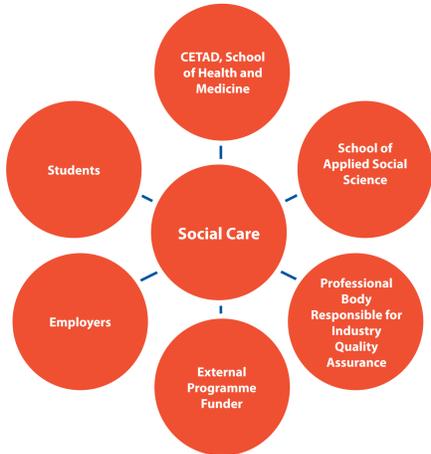


The Learning Partnership: Who are the Partners?

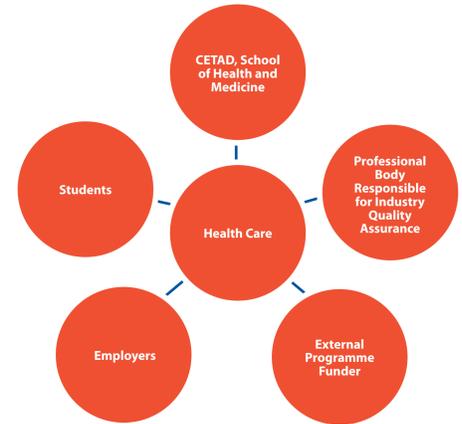
Depicted below are two distinct and very different partnership circles showing a range of types of organisation that collaborate with CETAD, School of Health and Medicine, Lancaster University in order to design, develop and deliver work based learning for practitioners. The names of the organisations involved have been removed in order to make the case study anonymous.

Social Care Partnership Circle

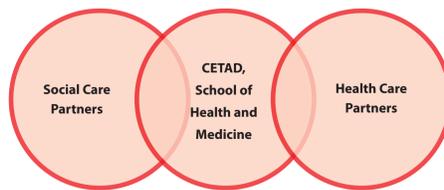


Whilst there are examples of collaborations between the partners within each circle, making a mini configuration of the diagram, there is little evidence of collaboration with partners between the circles especially in relation work based learning.

Health Care Partnership Circle



How do the partners currently inter-relate?



What is the product and why is it important to the partners?

The Certificate of Achievement in the Assessment of Professional Practice is a short 20 credit (single module) award at higher education level 6. In order to undertake the award students must be engaged in supporting a learner within the workplace. During the programme students will attend workshop inputs delivered by the University and will then undertake a series of tasks within the workplace that requires the student to put their class based learning into live practice. The workshops are full day inputs which are interspersed across a number of weeks allowing time for self directed learning as well as reflection upon practice within the work setting.

The award is viewed as continual professional development by the employer partners who commission CETAD to deliver it. The learning undertaken on the programme not only supports trainees within the workplace it also supports the professionals responsible for supervising trainees and provides a quality assurance framework for such support mechanisms.

What do the employers have in common? Why would this certificate be of interest to them?

The Social Care and Health Care employers who work with CETAD have shared work based learning needs. Both sets of employers require key members of their staff to acquire the same skills, knowledge, competencies and approaches in order to support trainees working towards professional qualifications. The trainees are a mixture of: non-employed students undertaking a degree that incorporates an element of supervised work placement; employed students undertaking an in-house route to become professionally qualified.

Product Development History (Designed for Social Workers, Developed for Nurses)

Ellis (2009) outlines that interdisciplinary learning starts from interdisciplinary research and percolates down to interdisciplinary teaching and learning. Whilst this may be true in many Higher Education Institutions, the CETAD approach comes from the opposite end of the spectrum to that noted by Ellis.

Unlike Ellis, CETAD's starting point was with a gap in local provision as identified by an employer. The employer required a 3 day accredited programme to provide development and support for qualified social workers who are required to support and assess BA Honours social work students whilst on placement.

The skills and knowledge to be taught on the programme were selected on the basis of the three things: job role requirements; learners' needs; and employer's requirements. There was also a fourth consideration: in order to make the programme economically viable and give it long term sustainability CETAD required the programme to appeal to a wider audience, beyond that of social work. Understanding the importance of sustainability and the need for transferable skills the employer agreed with this principle.

CETAD therefore identified the common core of transferable skills and knowledge that would apply to any given work based situation where a qualified professional may be engaged in supporting a trainee or a higher education student. For example: one to one guidance and support; creating and monitoring development opportunities etc. This core platform then allowed the programme to be embellished with a small degree of contextualisation such as discipline specific case study examples. Bibliographies were also selected on a core basis with additional discipline specific texts being added to suit the audience. It was of utmost importance to keep the language generic where possible.

Starting Point for Course Design



Within two years of the programme launch for the social work market, CETAD were approached by local National Health Service Health Care Trusts who required the same product to support trainee nurses whilst on work placement. This client group however also required the programme to be approved by their professional body, who are also responsible for quality standards within the nursing profession.

Leading the Learning Partnership (Developing the Programme for the Health Care Sector)

The risks and challenges that endangered the National Health Service proposals are illustrated by using Lewin's (1947) theoretical concept of Force Fields. As the Enabling Factors are key to the shift in force that allowed change to take place, they have also been mapped onto this framework.

Analysing the Forces

Driving Forces	Enabling Factors	Restraining Forces
<ul style="list-style-type: none"> An identified need and a gap in higher education provision Willingness/desire by partners to work together 	<ul style="list-style-type: none"> Availability of new funding stream Ability to be innovative and creative and to take risks Trust between partners Open to ideas Can do approach Flexible staffing model Expertise available from both CETAD and NHS partners 	<ul style="list-style-type: none"> Time Quality assurance – professional body/University Misunderstandings and misperceptions Professional language barriers

Problem 1: Professional Body Approval

Without professional body approval the programme would be worthless to the National Health Service. The challenges in gaining such approval came from: professional body scepticism about CETAD's ability to deliver a quality assured programme given that CETAD had no previous experience of delivering nurse training; the professional body requirement for 5 designated days of learning which meant increasing the existing programme by 2 days; the professional body also felt that an observation of practice would support the assurance of quality within the assessment process. In meeting these demands CETAD were concerned that: the generic programme did not become too discipline specific and remained accessible to other professions; the costs did not significantly increase; the programme remained meaningful to learners and employers.

Solutions to Problem 1:

A) Partnership Working – forming a partnership between CETAD and the National Health Service Trusts concerned created a shared ownership and allowed the sharing of expertise and resources.

B) Generic versus discipline specific – the partnership agreed to increase course delivery to 5 days and include an observation. Expertise was shared and cost kept to a minimum by the National Health Service agreeing to deliver the discipline specific elements of the programme which were the observation and one of the additional taught days. The Trusts' input day was to focus on organisational policy, roles, responsibilities and boundaries of nurse mentors as well as the required assessment criteria for trainee nurses whilst on placement. CETAD strengthened their existing 3 day programme by including a study skills day at the beginning, making 4 days of higher education delivery.

Problem 2: Timeframe

The professional body approval process and the external funder's deadlines squeezed time from the project from both sides. Programme recruitment could not commence until professional body approval had been granted; whereas programmes had to commence and where possible conclude before the funding deadline expired.

Solution to Problem 2:

CETAD decided to take a risk and undertake parallel planning, at the same time as submitting the professional body application work began on selecting and briefing tutors, booking rooms and organising how the programme would be recruited and run. CETAD kept their National Health Service partners involved and informed at all times throughout the process and all parties were careful not to advertise the programme to nursing staff until approval was granted.

In the meantime the National Health Service partners were briefing managers and considering which staff they would offer places to, should approval be granted.

The strength of the project is the innovative new ways of working forged by the necessity to overcome the restraining factors, particularly those posed by the professional body. In their role as catalysts however the professional body fully supported the partners' proposals and were keen to work with them. The energy and tenacity of the partners coupled with the enabling factors outlined, drove the project into being and has additionally generated a platform for new avenues of work to be explored.

What is CETAD's Role in Leading the Work Based Learning Partnership?

- Developing shared language/dialogue
- Pulling partnerships together – introducing and facilitating the partnership
- Clarity of objectives, regulations, agreed ways forward
- Contracting arrangements
- Seeking funding
- Understanding quality assurance and ensuring it
- Monitoring, feeding back, trouble shooting
- Keeping generic transferable skills and knowledge – not allowing any partner to go too narrowly down one vocational track
- Building bridges and links

Outcomes

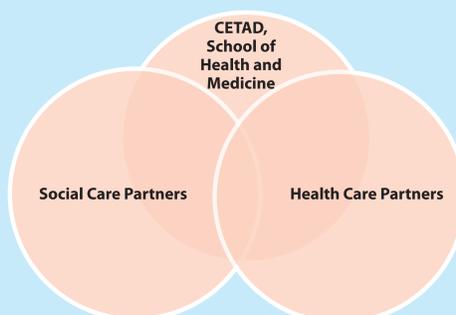
New ways of working:

- Shared delivery and assessment (National Health Service Trusts' delivery day and observed practice).
- Four-way partnership agreement (Three National Health Service Trusts and CETAD).
- Shared understanding between the partners about how each of the partners work, this is also now cascading down to the students who are learning about each others roles and responsibilities (multi-agency; interregional; interdisciplinary).

Increased business:

- Other National Health Service Trusts now wish to become involved.
- The National Health Service Trusts and others now wish to explore how to develop the programme so that allied health care professions such as audiologists can study and learn with the same groups.

The Future



Transcending interdisciplinary boundaries:

- Discussions around new developments are already underway where Social Service and National Health Service employers are considering hosting a joint programme for Social Workers and Nurses.
- There are also plans laid for interdisciplinary groups within health care.
- The programme demonstrates transferability of key skills and knowledge within each partnership circle and also between/across the partnership circles.

Reference List

- Ellis, R.J. (2009), "Problems May Cut Right across the Boards": "Why we Cannot Do Without Interdisciplinarity" in Chandramohan, B. and Fallows, S. (Eds) Interdisciplinary Learning and Teaching in Higher Education. London: Routledge
- Lewin, K. (1947), 'Frontiers in Group Dynamics' in Cartwright, D. (Eds) Field Theory in Social Science, Selected Theoretical Papers. London: Harper Torchbooks, The Academy Library