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Feedback and clinical practice improvement: A tool to assist workplace supervisors and students

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ABSTRACT

In work integrated learning, students may report difficulties applying theory learned at university to clinical practice. One contributing factor may be students' inability to engage in meaningful reflection and self-correcting behaviours. This paper reports the evaluation of a tool, process and resources developed to assist students to reflect on feedback and engage in self-assessment. Students were assisted to develop self-assessment skills by reflecting on, and engaging with feedback from previous workplace experiences to develop goals, learning outcomes and strategies to improve performance with mostly positive results. A secondary aim was to identify common learning strategies or barriers that impacted on student outcomes. Four themes emerged from the qualitative data: 1) preparing for clinical learning, 2) relationships and engagement levels, 3) shared awareness and, 4) developing clinical practice. Overall students felt the tool assisted them to narrow their attention on what needed to be improved. While supervisors believed the tool helped them to focus on specific needs of each student. Common barriers to clinical practice improvement related to a lack of opportunity in some settings, and lack of staff willingness to support students to achieve identified goals. Students and supervisors found the use of the tools beneficial and assisted students to demonstrate a greater understanding of how to apply feedback received to support their learning in the clinical environment.

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Introduction

In undergraduate health care programmes students completing workplace integrated learning (also known as clinical placement) often experience a disparity between theory and practical application, and this referred to as a 'theory practice gap' (Chan et al., 2011; Jonsson et al., 2014; Scully, 2011). One contributing factor for this phenomenon is students' limited ability to engage with feedback and apply meaningful reflection to self-correct behaviours (Scully, 2011; Wells and McLoughlin, 2014). It has been suggested that a consistent structure for reflection applied throughout a program can facilitate learning and increase the use of critical reflection and application of knowledge by students when on clinical work experience (Asselin, 2011).

Feedback on performance is essential to assist students to learn effectively and to meet professional standards during work integrated learning placements. Numerous ways to assist students to engage with feedback have been applied and evaluated (Cant and Cooper, 2011; Cramp, 2011; Hatziapostolou and Paraskakis, 2010; Tang and Chow, 2007; Wells and McLoughlin, 2014), however these approaches only address aspects of students engaging in and receiving feedback, or workplace supervisors providing feedback. An example can be seen in Cramp's (2011) research which utilised templates to increase consistency in supervisor feedback, but this did not assist students to understand their feedback. There has not been any research to explore strategies that support students and workplace supervisors' to collaborate, develop and implement goals related to feedback.

In a large School of Nursing in XXXX, academics have anecdotally highlighted that many students do not engage with or utilise the feedback provided to them whilst on clinical work experience to improve their performance for subsequent

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placements. In 2009, we attempted to address this by implementing a self-assessment tool within a third year undergraduate bachelor of nursing clinical subject in an attempt to ameliorate this disparity, with encouraging results. Students' who used the tool, demonstrated improvement in identifying individual learning needs based on previous feedback and reported that it would be advantageous to utilise this tool and process throughout their course. Similar issues related to clinical placement feedback were experienced in the same university's radiation therapy cohort. As a result, the self-assessment tool was revised for implementation in different clinical subjects and the health disciplines of Nursing and Radiation Therapy. This paper reports on the evaluation of the self-assessment tool implemented to assist students to effectively engage with feedback received on clinical work experience, along with common conduits or barriers to learning. The tool (an example of this tool can be seen in Fig. 1) was used to assist students to identify goals and strategies to improve performance on their next workplace experience.

Background

Most work integrated learning placements, where students have an assessment component that contribute to final grades in the subject, usually require that students receive both verbal and written feedback as part of assessment of their performance. Feedback on student performance in the clinical environment is an important and widely used method of supporting learning (Glover, 2000; Rowntree, 1987; Wells and McLoughlin, 2014). Students often report a want and need for feedback from their clinical placement supervisors (Cant and Cooper, 2011; Colletti, 2000; Glover, 2000; Wells and McLoughlin, 2014). This feedback should enable students to make goals and set clear learning objectives in an effort to improve future clinical performance (Tang and Chow, 2007). It also promotes student development, gives an indication of how a student is performing and justifies assessment outcomes, while increasing student motivation and confidence in their abilities (Cant and Cooper, 2011; Hatziapostolou and Paraskakis, 2010; Glover, 2000; Tang and Chow, 2007; Wells and McLoughlin, 2014). Despite expecting feedback, students often find it difficult to interpret and apply for future performance improvement (Hatziapostolou and Paraskakis, 2010; Rathgeber, 2014). Multiple sources (Chanock, 2000; Hatziapostolou and Paraskakis, 2010; Bailey, 2009; Winter and Dye, 2004) state that students do not try to collect feedback, as they often find it difficult to engage with, do not understand it, or know how to use it effectively (Hatziapostolou and Paraskakis, 2010; Poulos and Mahony, 2008). Most literature surrounding feedback indicates the need to use reflective skills to process and deal with feedback effectively (Embo et al., 2014; Johns, 1995; Schon, 1987).

Students and placement supervisors often report that undertaking feedback together can be uncomfortable and sometimes stressful or difficult. Regardless of this difficulty, students who receive feedback following clinical placement are expected to apply this information to improve future performance (Hatziapostolou and Paraskakis, 2010; Tang and Chow, 2007; Wells and McLoughlin, 2014). This is based on the premise that by reflecting, students will be more motivated to make positive changes to improve performance. Supervisors assume that students have made sense of feedback, judged how and when to make changes, set goals and are trialling new strategies for improving their performance (Rathgeber, 2014; Tang and Chow, 2007). This process is a form of 'feed-forwarding' (Rathgeber, 2014; Tang and Chow, 2007) into future clinical placement learning, allowing the student to gain the skills of a self-aware, lifelong learner. By applying this process students should be able to take ownership of their learning and become more self-monitoring (Sadler, 2005). However, as mentioned students often do not engage with their feedback, hence why we developed and implemented the tool and processes discussed in this paper. The purpose of this research is to evaluate the implementation of the feedback and clinical practice improvement tool and processes, and identify common conduits and barriers identified as impacting on learning. As it had previously been evaluated in relation to nursing students, input was sought from other health disciplines within one faculty of the university. Radiation therapy is the treatment of cancer with X-rays; a highly technical profession requiring well developed interpersonal skills. It was hoped the results would elicit not only which strategies were most helpful for meeting identified goals, but also what hindered students in implementing and achieving them across health students not just one specific discipline.

Methods and intervention

The intervention was implemented in two cohorts of undergraduate Bachelor of Nursing students (2nd and 3rd year) and one cohort of Radiation Therapy students (2nd year). A supported reflective practice activity underpinned the intervention where students were expected to engage with and reflect upon previously provided feedback. The intervention consisted of a self-assessment tool (see Fig. 1 for the nursing specific tool) that prompted students to engage in self-assessment using reflection on previous experiences, verbal and written feedback from clinical workplace supervisors and other relevant forms of feedback. Students self-assessed their abilities against their discipline's professional standards and course learning outcomes, to gain an understanding of their strengths and areas for improvement. Guided by the tool, students developed a personal learning plan, identifying individual goals and strategies for performance improvement, when undertaking their next clinical placement.

On the first day of placement students submitted their plan to the workplace supervisor who reviewed the plan and provided guidance to implement the identified strategies. A number of online support resources were developed to assist both students and supervisors to use the tool effectively. Engagement with the flexible online learning package was optional, but students were informed about the tool and process during a clinical placement briefing at the beginning of semester.

Evaluation of the self-assessment tool was completed through a questionnaire that consisted of both quantitative questions (5 point Likert scale response) and qualitative open ended questions, conducted after completion of students' clinical placement. The purpose of the questionnaire was to elicit data regarding students and supervisors perceptions of the usefulness of the tool and resources, and students' and supervisors feedback on what assisted implementation of strategies and what barriers they encountered. Nursing students and supervisors were contacted by email and asked to complete an anonymous on-line survey. Radiation therapy students and their workplace supervisors did not have access to the on-line resources as the clinical work experience placement time was prior to the release of the resources, so feedback was solicited using the same survey questionnaire, but in a paper based format. Ethics approval for this project was granted by the university Human Research Ethics Committee.

Qualitative results were analysed using thematic analysis. This method identified themes and captured important interpretations about the data being analysed and represented a level of patterned response or meaning within the data set (Braun and Clarke, 2006). Braun and Clarke's (2006) six phases of conducting thematic

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