



Midwifery education in practice

A framework to facilitate self-directed learning, assessment and supervision in midwifery practice: A qualitative study of supervisors' perceptions

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ABSTRACT

Background: Self-directed learning is an educational concept that has received increasing attention. The recent workplace literature, however, reports problems with the facilitation of self-directed learning in clinical practice. We developed the Midwifery Assessment and Feedback Instrument (MAFI) as a framework to facilitate self-directed learning. In the present study, we sought clinical supervisors' perceptions of the usefulness of MAFI.

Methods: Interviews with fifteen clinical supervisors were audio taped, transcribed verbatim and analysed thematically using Atlas-Ti software for qualitative data analysis.

Results: Four themes emerged from the analysis. (1) The competency-based educational structure promotes the setting of realistic learning outcomes and a focus on competency development, (2) instructing students to write reflections facilitates student-centred supervision, (3) creating a feedback culture is necessary to achieve continuity in supervision and (4) integrating feedback and assessment might facilitate competency development under the condition that evidence is discussed during assessment meetings. Supervisors stressed the need for direct observation, and instruction how to facilitate a self-directed learning process.

Conclusion: The MAFI appears to be a useful framework to promote self-directed learning in clinical practice. The effect can be advanced by creating a feedback and assessment culture where learners and supervisors share the responsibility for developing self-directed learning.

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Background

Increasingly complex and diverse health organizations of the 21st century require nursing and midwifery students to take charge of their own learning (Sharples and Moseley, 2009; Moss et al., 2010). Based on adult learning theories, Knowles (1975) clearly defines self-directed learning as: a process in which individuals take the initiative, with or without the help of others, in diagnosing learning needs, formulating learning goals, identifying human and

material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes (Levett-Jones, 2005; Yuan et al., 2011). To stimulate the development of self-directed learning, clinical education is turning to constructivist perspectives drawing on humanistic and social learning theories (Mann, 2011). Central notions are learner-centred education, self-motivated learning and self-actualization, whilst teachers are expected to facilitate students' self-directed learning (Timmins, 2008). Lave and Wenger (1991) perceived socio-cultural learning as participation in a community of practice and as dialogue. Clinical internships are important communities of practice for nursing and midwifery students and clinical supervisors play a fundamental role in facilitating student self-directed learning (Gignac-Caille, 2001). In the unstructured reality of day-to-day clinical practice, however, this approach poses a considerable

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challenge. The clinical workplace literature presents several barriers to self-directed learning and its supervision which can be clustered according: (1) lack of educational structure (Harden, 2007; Zibrowski et al., 2009), (2) limited learner involvement and student-centred supervision (Timmins, 2008; Archer, 2010), (3) discontinuity of supervision and feedback, and (4) separation of formative and summative assessment (Norcini and McKinley, 2007; Parboteeah and Anwar, 2009; Sweet et al., 2013). To enable clinical supervisors and students to overcome these barriers, we designed the Midwifery Assessment and Feedback instrument (MAFI, Fig. 1) aimed at achieving four goals: improving educational structure, promoting an active role of students and supervisors in facilitating individual learning processes, promoting continuity of supervision, and integrating formative and summative assessment. As such, facilitating self-directed learning occurs and is encouraged in the presence of a facilitative learning instrument, MAFI, with guidelines and is not therefore a fully independent student activity.

(1) To structure clinical education, the MAFI is based on a competency framework (Harden, 2007) comprising the midwifery competencies students are expected to have attained at the end of the three-year Midwifery programme. In relation to each internship, the relevant competencies are emphasized (Fig. 1, column 1). MAFI is a paper and pencil method, integrating a written feedback unit (Fig. 1, column 2) and an assessment unit (Fig. 1, column 3) with the same competency-structure. The purpose of this integrated, competency-based framework is to standardize expected outcomes, match behaviour to the standards (Carver and Scheier, 1981) and facilitate the impact of feedback to empower students to take control of their own learning (Gibbs and Simpson, 2004).

(2) Active involvement of students and the role of supervisors as facilitators of students' self-directed learning processes are supported by the MAFI portfolio. According to the definition of

Knowles (1975) of self-directed learning, students are made responsible for their own learning by the instruction to take the initiative to ask for feedback and to reflect on competencies (Nicol and Macfarlane-Dick, 2006; Bulman et al., 2012). In the feedback unit, there is space for written feedback and reflections about the selected competencies. Oral feedback can be written by the student, the clinical supervisor and by any staff member who observes the student. Written information from students is authenticated by the supervisor by his/her signature. Since self-assessment has been shown to have limitations, effective feedback is an important complementary condition for self-directed learning (Davis et al., 2006; Eva and Regehr, 2008; Sweet et al., 2013). Therefore, learners should be trained in seeking and receiving feedback (Dannefer and Henson, 2007), whilst supervisors need training and sufficient time for providing useful feedback.

(3) To promote continuity of supervision, students are instructed to write reflections and seek feedback on a daily basis to collect information that can be used to monitor their ongoing development (Coward, 2011; Bulman et al., 2012). It is the students' responsibility to ensure that sufficient feedback on their progress in all the competencies has been collected at the end of the internship period. Documenting students' longitudinal development enables students and supervisors to monitor students' self-directed learning activities and remedy weaknesses in competency development (Wilkinson et al., 2002).

(4) To promote self-directed learning, the MAFI portfolio integrates formative and summative assessment in clinical learning (Timmins, 2008). Therefore, the MAFI is designed with a feedback and an assessment unit. In response to criticism directed at both the poor linkage of clinical assessment to students' actual performance and the lack of direct observation of students (Zibrowski et al., 2009), the MAFI checklist is designed to support formative

FRAMEWORK PROGRAMME ROLES and COMPETENCIES		WRITTEN FEEDBACK UNIT		ASSESSMENT UNIT Checklist with LEARNING OUTCOMES (LO) Pass or Fail For the different LEVELS (YEARS)		
ROLE	COMPETENCIES	COMPETENCY 3		COMPETENCY 3		
DIAGNOSTICUS	C1	DATE	FEEDBACK	NAME		
	C2	D/M/Y	Feedback on performances	Student		
	C3			Mentor		
	C4			Teacher		
	C5			Doctor		
	C6					
	C7					
CAREGIVER	C8	The same system is used for all the competencies			The same system is used for all the competencies	
	C9					
	C10					
	C11					
	C12					
	C13					
	C14					
ADVISOR	C15					
	C16					
RE-SEARCHER	C17					
	C18					
MANAGER	C19					
	C20					
PRO-FESSIONAL	C21					
	C22					
	C23					
	C24					

Example competency 18: first, second, third year student

COMPETENCY 18 Give health advice and information		COMPETENCY 18 Give health advice and information	
DATE	FEEDBACK	NAME	
Day 3	You didn't write feedback on this competency.	Teacher	
Day 4	You are very enthusiastic to give information but try to take into account the situation. The mother was too tired to receive such detailed information.	Mentor	
Day 20	Student gave good advice about breastfeeding and also about other care issues. She controlled acceptance.	Mentor	

	YEAR 1		YEAR 2		YEAR 3	
	PASS	FAIL	PASS	FAIL	PASS	FAIL
LO1 - Answering adequate on questions from patient and family	x		x		x	
LO2 - Giving adjusted information: correct, small amount, understandable language			x		x	
LO3 - Controlling if the advice and information is understood and adjusted where necessary					x	

Fig. 1. Midwifery assessment and feedback instrument (MAFI).

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