



# Does the use of a university lecturer as a visiting tutor support learning and assessment during physiotherapy students' clinical placements? A survey of higher education institution providers

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## Abstract

**Objectives** To establish the rationale for using a lecturer as a visiting tutor, and to identify the activities undertaken during clinical placements to support student learning and assessment in practice.

**Design** A secure electronic survey was used to incorporate qualitative and quantitative data collection procedures.

**Setting** Thirty-three higher education institution (HEI) providers of physiotherapy education in the UK, registered with the Chartered Society of Physiotherapy.

**Participants** UK HEI physiotherapy placement coordinators.

**Main outcome measures** A questionnaire was used to examine HEI perceptions. A pilot focus group consultation informed the questionnaire content. Surveys were analysed based on the proportion of responses to closed questions on an adapted Likert scale, with further thematic analysis of open questions.

**Results** All 25 respondents (25/33, 76%) indicated their provision of support for students and clinical educators throughout their clinical placements. 'Face-to-face' engagement during the placement visit was viewed as essential to guide the clinical educator to provide a consistent approach to learning and assessment strategies; ensuring cohesion between theoretical and clinical components of the curriculum was viewed as a core objective by visiting academic tutors. However, the emergent themes highlighted key differences between HEIs' perspectives of what this support for clinical placement learning should entail.

**Conclusions** The majority of HEIs endorse the use of a lecturer as a visiting tutor to inform and maintain the standard of learning and assessment within the clinical placement. However, the value of this interaction requires confirmation via other stakeholders, and exploration of other forms of non-face-to-face support processes warrant further investigation.

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**Keywords:** Clinical education; Placements; Physiotherapy; Support; Workplace learning; Visiting tutor

## Introduction

Clinical education is an integral component of all health professional undergraduate programmes [1], and its

importance to physiotherapy curricula is supported at national and international levels [2,3]. Higher education institutions (HEI) are required, in partnership with their placement providers, to support learning in practice [4,5]. One such support mechanism is the common use of university lecturers as visiting tutors (LVT) during student placements [6].

This visit during a student's placement is well-established practice across the university health sector. However, the amount of staff time and travel costs, due to widespread

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geographical placement locations, has created an ongoing debate relating to the value for money of such practice [6,7]. Such economic pressure has led to reduced frequency of ‘face-to-face’ visits with consideration of alternative technological approaches such as video conferencing [6,8], although these non-direct approaches are less able to support emotionally-based communications [6].

Today’s students are recruited into higher education, often having had minimal contact with the health sector until they enter the clinical environment. Learning in clinical settings provides students with opportunities to integrate their theoretical knowledge with practical and professional skills [9]. Placements socialise students into workplace communities at increasingly higher levels of performance and responsibility under the guidance of qualified practitioners [10,11]. However, such learning is not without potential difficulties, and has been identified as a source of student stress [12]. While most clinical settings are student friendly, others are less so [13,14], and the literature indicates that students may only be accepted into some clinical settings under sufferance [15,16]. The multifaceted and uncertain learning situations in a wide range of settings can prove a real challenge for many students, which may, in part, be due to clinical educators adopting different styles of teaching and approaches to learning [17].

The challenging, multidimensional role of a clinical educator – involving maintaining their clinical responsibilities while facilitating learning opportunities when supporting student learning in practice – requires recognition and support [18,19]. Despite the fact that professional and regulatory bodies require HEIs to provide clear information about the support networks available, including named contacts for all students [2,5], many clinical educators are unaware of the wider support mechanisms available to them and their students [20]. Clinical educators are expected to direct the development of the student’s clinical skills by engaging them in critical thinking and reflection on practice [21] to develop their clinical reasoning [22]. Subtle shifts in HEI perspectives on curriculum design and philosophies of learning and teaching may not be clearly articulated to practice settings [9], resulting in a lack of congruence between the understood roles in learning and teaching [23,24]. A disconnect between educator and student conception of their roles may have a negative impact on the organisation of teaching and learning in workplace education [9]. The assumption that experienced clinicians will easily move into roles as clinical educators is unrealistic without both formal and informal education [24,25], suggesting that support for students could be subject to variation in the clinical setting [26].

Whether or not inclusion of the LVT contributes to the optimisation of student learning and ongoing development of clinical educators has not been researched from the physiotherapy perspective, although its value is assumed to be of significance [2,7,27]. A visit from a familiar lecturer can improve satisfaction for students and placement providers [28], presenting a ‘constant’ in the student

educational experience. It also offers students an opportunity to seek information on their progress, and to deal with academic issues or specific placement problems [27] with an informed professional who could offer a different perspective due to not being involved directly in the placement [28].

The value of workplace education for healthcare students is unquestioned, with planned clinical learning experiences providing opportunities for integration and application of theoretical knowledge and skills, which are crucial to developing the professional social skills essential to becoming an effective member of the health team [16]. However, the contribution of the LVT as a support mechanism for physiotherapy students during this multifaceted and complex activity has not been explored.

An online search to access the Directory of Open Access Journals, ERIC, IEEE Proceedings, Informa, MEDLINE, PubMed Central, SciVerse Science Direct, Wiley Online Library and UBRIA ePapers was initially conducted and updated using the following keywords: clinical education; placements; physiotherapy; workplace learning; and visiting tutor and support.

The aim of this study was to investigate how UK HEI providers of physiotherapy education use the LVT to support workplace learning. The objectives were to establish the HEI rationale for using the LVT during physiotherapy clinical placements, and to identify the activities undertaken by the LVT during the visits.

## Methods

A pilot focus group, formed from the five HEI physiotherapy education providers within the North West (NW) region of England, informed the content of the questionnaire. A secure electronic questionnaire was distributed to all UK HEI physiotherapy education providers to survey their use of the LVT during clinical placements. The questionnaire requested the views of each HEI via their ‘placement coordinator’, with questions asked to help interpret the context of their placements and to elicit the activities undertaken by the LVT (Appendix A, see online supplementary material).

A Likert-type scale was used to ascertain the frequency with which activities were performed, and participants were asked to offer a rationale for activities undertaken. An important assumption was that there is a relationship between the lecturers’ perceived view of their role (the purpose) and the activities (the process) they undertake whilst engaged in a placement visit.

Ethical clearance was gained from both universities. Participants were recruited via the Chartered Society of Physiotherapy e-mail circulation list of all HEI members of the National Placement Education Forum [29]. A ‘return request’ email was sent 10 days after the questionnaire was distributed.

An information sheet was included in the preamble to the questionnaire; informed consent was assumed via participant completion of the questionnaire. The questionnaire was

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