

Faculty of Health Sciences


Interprofessional Practice Placement Program

Interprofessional Practice Facilitator Guidelines

2014

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| Designed | Margo Brewer | November 2011 |
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Interprofessional Practice Placement Program Overview

Curtin University's Faculty of Health Sciences has a very successful Interprofessional Practice (IPP) Placement Program which has grown exponentially over the past three years. The program began with a small number of pilot interprofessional placements in 2009 to its current position of 1,000s of students having completed a placement with the program. This successful program has attracted several million dollars in federal government grants, won several university teaching and learning awards as well as a national teaching award.

The program has been designed to facilitate students' acquisition of a range of interprofessional capabilities to ensure they are able to work in interprofessional teams to deliver safe, high quality client centred services. Complementing this interprofessional experience, students will develop the profession specific capabilities required for completion of their course.

More information on interprofessional education, practice and research can be obtained by visiting our website at (http://healthsciences.curtin.edu.au/faculty/ipe_practice.cfm).

The Program Team

The Interprofessional Practice Team is located on Level 4 of Building 400 and Level 3 of Building 404 at Curtin's Bentley Campus. **Enquiries** should be directed to the program lead Margo Brewer at M.Brewer@curtin.edu.au 9266 9288

Important Policies

Curtin University is committed to providing a safe and suitable environment for all students and staff. The university and its agencies are bound by the obligations in the current legislation as well as a number of key policies which relate to fieldwork including:-

Legislation

Racial Discrimination Act (1975) (Commonwealth)
Equal Opportunity Act (1984) (WA)
Sex Discrimination Act (1984)(Commonwealth)
Human Rights and Equal Opportunity Commission Act (1986)
Disability Discrimination Act (1992) (Commonwealth)
Disability Services Act 1992 (WA)
Freedom of Information Act 1992 (WA) Racial Hatred Act (1995) (Commonwealth) Workplace Relations Act 1996 (Commonwealth)
Equal Opportunity for Women in the Workplace Act 1999 (Commonwealth)
Privacy Act 1988

Curtin Policies

Harassment Policy and Resolution Procedures
Cultural Diversity Policies
Intellectual Property Policies
Health and Safety Procedures

For more information please visit the fieldwork at Curtin website <http://fieldworkeducation.curtin.edu.au/>

Key Definitions

Interprofessional education "occurs when two or more professions learn *with, from* and *about* each other to improve collaboration and the quality of care" Centre for the Advancement of IPE UK (2002).

What is it NOT:

It is NOT a merging of or dilution of roles (Nisbet, 2004)

It is NOT the substitution or blurring of roles (Glen & Reeves, 2004)

Multiprofessional education occurs "when members (students) of two or more professions learn alongside one another: in other words parallel rather than interactive learning" (Barr et al., 2005).

Collaborative practice occurs “when multiple health workers from different professional backgrounds work together with patients, families, carers and communities to deliver high quality care” World Health Organisation (2010).

Principles of Effective Interprofessional Education

A number of key principles have been established in recent literature that apply to interprofessional education in any setting:

- Invest time in pre-planning with all stakeholders
- Focus on improving client care/service
- Establish a comfortable learning environment for students
- Allow time for the interprofessional student team to develop
- Make the role of the facilitator very clear
- Acknowledge and use other’s professional expertise
- Ensure clear communication, e.g. address use of profession specific terminology
- Ensure open communication, e.g. explore different perspectives, address conflict
- Employ adult learning and reflective practice principles
- Encourage students to reflect on both their clinical competencies and their Interprofessional collaborative practice capabilities
- Explore assumptions & myths of each profession
- Provide context & ensure relevance to each profession involved

Student Clearances

All students are required to undergo several security checks prior to commencing any fieldwork placements depending on the organisations with which they are placed. These include but are not limited to:

- The Department of Health and Ageing police certificate
- The Department of Education and Training criminal record check
- The Working with Children Check.

Students are required to carry proof of **all** security checks with them at all times during their placements. It is the student’s responsibility to maintain these throughout their course i.e. they must notify the relevant unit of any change in their circumstances as relates to these security checks. If the university is notified of any change in a student’s status the relevant IPE Facilitators will be notified.

Immunisation

All students are required to provide proof of screening for and vaccination against the following conditions prior to commencing clinical placements: hepatitis B, measles, mumps, rubella, varicella (chicken pox), diphtheria, tetanus, pertussis (whooping cough) and tuberculosis. Methicillian-resistant *Staphylococcus aureus* (MRSA) clearance is also required if a students has been a patient or students or has worked in any hospital or residential facility outside of Western Australia in the 12 months prior to commencing a placement. They are also required to have an annual influenza vaccination.

If a student refuses or conscientiously objects to be screening and/or vaccinated against these conditions Curtin will advise the health facility. If there is a risk that client safety may be comprised the student may be refused access to the facility and therefore their ability to complete the course will be compromised.

Occupational Health and Safety

It is critical that all facilities provide an environment that is, as far as practicable, safe and without risk to the student’s physical and emotional health. Any policies and procedures relating to OH&S must be conveyed to the students at orientation. This includes but is not limited to emergency procedures, safe handling of clients and infection control.

All staff and students must report, as soon as possible, all events, hazards, injuries and near hits or misses via Curtin's online incident reporting system. For further information about the New Online Event Reporting System or to report an event, please visit:-http://healthandsafety.curtin.edu.au/event_and_hazard/index.cfm. These procedures are to be supplemented by specific information provided in Curtin University's documents available at:-
http://healthandsafety.curtin.edu.au/safety_management/policies.cfm

Insurance

All students are covered by Curtin's accident and professional indemnity policies whilst on clinical placement. This includes direct travel to and from clinical activities. Certificates of Currency are available from
http://riskmanagement.curtin.edu.au/insurance/certificates_of_currency.cfm

Dress and Grooming

Students are representing not only the university but also their profession at all times whilst on placement and so are expected to present themselves appropriately.

Any student who does not adhere to the dress requirements set out below may be sent home from their placement.

Requirements

- Personal hygiene must be of a high standard
- Curtin name badge is to be worn and uniform where applicable
- Closed shoes must be worn when in a hospital setting (or when otherwise requested)

Attendance

Punctuality is ESSENTIAL. Students are expected to allow sufficient time to travel, park and arrive in the placement site 10 minutes prior to the specified start time. Students must attend all placement sessions during the course. In the event of illness or injury the student must notify the key supervisor of their inability to attend that day at the earliest possible time (by phone call NOT text messaging), but no later than the start time on that specific day. The student must also comply with their school/course specific requirements as to the circumstances in which they need to notify the relevant staff in their school. For more information on this please refer to the students course specific requirements.

Staff and Student Conduct

Occasionally situations arise where a student or staff member fails to meet professional standards of behavior. For example, students are required to maintain the confidentiality of clients and their information. Any information which directly or indirectly identifies a client must not be discussed in a public place or be included on written documentation unless it is the final draft of a report to be printed in the placement organisation/site. Access to client medical records/files is limited to clients for whom the student is providing management and is restricted to the period of the placement. Any access outside of normal hours of operation is at the discretion of the Facility Manager or their nominated delegate. Students are able to take notes on information from a client's file/medical notes but these notes must not contain any identifying information.

If a student breaches this confidentiality or behaves in any other way that may be thought to be misconduct the IPE Facilitator should:-

- 1) highlight this breach with the student and discuss the potential consequences for the client and others involved
- 2) notify the relevant fieldwork staff for that student's course of any significant or second breach

For more information on requirements and how to address any issues or concerns that arise please visit Curtin's website: Student's Rights and Responsibilities at <http://students.curtin.edu.au/rights/>
Information on both staff and student standards/conduct can be found at: <http://complaints.curtin.edu.au/>

It is also important to be aware of the university's Assessment and Student Progression policy:
<http://policies.curtin.edu.au/findapolicy/docs/Assessment%20and%20Student%20Progression%20Manual%20-%20May%202012%20v4.pdf>

Student Confidentiality

IPE Facilitators should respect the student's right to confidentiality regarding the results of their placements and must only discuss the performance with those involved in the evaluation of the student. A student must not be identified in any discussion between the IPE Facilitator and others not involved directly in the students placement.

Students at risk

If you have significant concerns about a student's progress in the placement please contact the relevant course staff early in the process to discuss your concerns and identify the necessary steps to support the student. The University may withdraw a student from a placement but this process must adhere to strict policies which can be found at:

<http://policies.curtin.edu.au/policies/viewpolicy.cfm?id=f2cc9a5b-43a3-11e0-8120-1706e21d5a89>

Students in distress

If you become concerned about a student during the placement you should encourage them to contact Curtin's counselling service. More information on this can be found at <http://counselling.curtin.edu.au/>. Counselling do provide a crisis response if the situation requires this. Please see the link to this on their website.

Fieldwork and Clinical Education Agreements

Health Department Sites

Curtin University has an agreement with the Health Department which was finalised in 2006 (currently under review) and has a number of implications for both Curtin staff and students as well as for all Health Department staff who have students on placement with them. The document sets out the responsibilities of the facility and Curtin University with regard to insurance for students whilst undertaking a clinical placement, the minimum facilities and the level of support that the student can expect in the placement, etc. If you are not familiar with this contract then please contact your administrator to discuss this or to ask to view an Agreement. Some of the implications of this agreement for Health Department staff include the need to:-

- Provide emergency care for Curtin staff and students
- Provide Curtin staff & students with access to policies, regulations, rules, procedures manual, etc
- Provide access for Curtin staff & students to facilities including conference rooms, interview areas as per the usual booking arrangements
- Ensure any Health Department vehicle driven by a student has insurance to cover this scenario
- Give permission for Curtin staff and students to drive Health Department vehicles
- Notify Curtin in writing of any other diseases that staff & students require vaccination or screening for which are not in the current agreement
- Comply with the assessment requirements of Curtin University
- Provide access for Curtin staff and students to library, resource material, lectures for duration of placement & for purposes of participation in clinical education
- Assign tasks appropriate to the student's level of training and experience
- Assume responsibility for patient care
- Refer any matters of student discipline to Curtin
- Withdraw or exclude any students from a clinical area to maintain patient or student safety and report the reasons for this to Curtin as soon as possible
- Provide orientation to Curtin staff and students including induction to security, emergency, and safety policies and procedures
- Negotiate access to parking for Curtin staff and students (usual fees apply)

If any dispute arises under this agreement the Health Department will nominate a senior negotiator, advise the Curtin Head of School in writing and will meet with a Curtin negotiator within five working days to resolve the problem.

Non Health Department Sites

Curtin University has a standard agreement that all schools in Health Sciences use for their student placements. The document sets out the responsibilities of the facility and the University with regard to insurance for students while undertaking a placement, the minimum facilities and level of support that the student can expect in the placement, etc. If you are not familiar with this contract then please contact your administrator to discuss this or to ask to view an Agreement.

The IPP Facilitator

A facilitator is “someone who embraces the notion of dialogue, is self-aware, learns with the team but is able to provide the appropriate learning resources and create an environment for effective interprofessional education” (Howkins & Bray, 2008 pg. xviii).

The facilitator should plan the processes ahead of the team but not the outcomes. The achievement of the team learning will be far more enduring when the members have ownership of the journey. Understanding the stages of the group development (see Appendix 1) along with the team needs and problems that may occur, can increase the possibility of the facilitator responding constructively.

The facilitator is responsible for ensuring that the student team is well organised and functions effectively. It is important to encourage everyone’s contribution, to facilitate team interaction and to maintain a positive atmosphere.

The UK Promoting IPE project (Howkins & Bray, 2008) surveyed experienced interprofessional facilitators to ascertain the skills and knowledge needed to promote effective interprofessional learning in practice settings and a number of themes emerged.

These, along with some general principles for IPE facilitation are as follows:

| | |
|--|--|
| Awareness and use of self as a facilitator | <p><u>Personal qualities:</u> be aware of the impact of your own behaviour on the team and the outcomes achieved. Ensure you provide a positive model of collaborative practice.</p> <p><u>Potential role conflict:</u> be aware of your own professional identity and personal biases. Ensure that your own identity, both professional and personal, is secondary to the team’s needs.</p> <p><u>Confident risk taking:</u> be willing to tackle sensitive issues and to challenge stereotypical, racist, sexist or ageist statements.</p> <p><u>Reflective practice:</u> make a conscious effort to monitor your own performance in the process of facilitating. Request feedback from both the student team and a peer(s).</p> <p><u>Objectivity:</u> ensure that statements made are supported by evidence whilst acknowledging differing viewpoints.</p> <p><u>Open mindedness:</u> do not make assumptions about individuals and teams.</p> |
| Dealing with difference and conflict | <p>Respect and welcome difference in all people and professions.</p> <p>Make time to explore similarities and differences. Be aware of and manage diversity.</p> <p>Challenge views expressed and not the person expressing them.</p> <p>Recognise that, although it may remain hidden, conflict is natural and can be productive.</p> <p>Make professional jargon explicit in the team.</p> <p>Maintain a comfortable atmosphere that encourages open communication.</p> |

| | |
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| Group process and relationships | <p>Be explicit about the goals and objectives whilst openly reviewing and revising these.</p> <p>Focus the outcomes of the IP experience or activity on improving client care and improving collaborative practice.</p> <p>Recognise the student as the most important resource for IPE.</p> <p>Acknowledge and use other's professional expertise.</p> <p>Invest time in group development (see Appendix 1)</p> <p>Remain flexible and assist the team to make choices and decisions.</p> <p>Actively facilitate learning about other professional roles.</p> <p>Actively facilitate the social aspects of team learning.</p> <p>Recognise that participants may have their own agenda.</p> <p>Ensure activities are authentic and interactive.</p> <p>Recognise the importance of evaluating the interprofessional dimension of team. Reflect on and respond to feedback from the team.</p> |
| Power dimensions: | Acknowledge power and status issues within your organisation, e.g. that many professionals work in hierarchies. |
| Facilitator and team | <p>Understand that these power relations are linked with role stereotypes and professional teams.</p> <p>Be aware that an unequal power base affects individual perceptions, identities, behaviours and beliefs.</p> <p>Being aware of your own power - the facilitator does not remain 'neutral'. Empower all students in the team to participate.</p> |
| Context and planning | <p>Facilitation skills are best developed when:</p> <ul style="list-style-type: none"> • Sessions are pre-planned • Prior consideration is given to sensitive or contentious issues • Practical matters and external factors that may impact on the session, e.g. organisational policies, processes, procedures and, in some cases, politics, are taken into account • Workplace culture ensures commitment and support at all levels. |

Establishing the learning environment

The IPP Facilitator can foster a positive and effective learning environment by:

- Welcoming the students to the team
- Involving students in your discussions and decisions
- Clarifying any discipline specific terminology
- Recognising students may not have a clear understanding of different discipline
- Creating a safe environment where all questions are valid and welcomed
- Allowing students to say when they don't know or are unsure of something
- Encouraging and creating conditions for reciprocal feedback
- Sharing your own experiences working in collaborative practice (positive, negative, humorous)
- Having students reflect on their contributions to the team
- Being aware of the students level of collaborative capability
- Recognising and appreciating the individual differences among students
- Applying adult learning principles (see below)

Adult Learning principles

Students learn best when:

- Motivated
- Environment is supportive and safe
- Clear goals are set
- Information is relevant to their learning objectives (See Appendices 1 and 2)
- Information is pitched at appropriate level
- Actively involved (see Appendix 9)
- Receive regular, constructive feedback (see Appendix 14)
- Given time for reflection

See Appendices 2 & 3 for sample checklists which you can use to prepare for the placement.

First student contact (phone or email)

This first contact is your opportunity to begin establishing a **good working alliance** with your student(s) and to exchange some important information. When a student contacts you, you might like to ask them to fax or email you a CV (see Appendix 5 for an example structure for this) which outlines their previous clinical experiences, their learning needs, any particular experiences or opportunities that they hope to gain. This information should help you in planning for the placement.

You may wish to have a pre-prepared information package that you provide to the student at this time.

Initial orientation session

Orientation to the placement should inform the students of:

- Their responsibilities while in the clinic regarding diagnosis, treatment, administrative duties, message taking, phoning, contact with other staff, etc.
- The timetable of experiences during the placement including the time allocated for feedback, report writing, planning, discussion with other professionals or team work, etc.
- The expectations of the frequency and type of observation opportunities both for the student to observe staff and other students working and also staff to observe the student(s) working
- The expected completion of project work, case studies, site staff education, peer to peer learning and sharing of knowledge with other students
- The personnel and organisation of the clinic/service/facility
- The assessment tools that must be completed by the end of the placement

The first meeting sets the stage for the expectations and learning environment that will take place over the course of the placement. The goal is to start the students working together as a team. It should be an opportunity for the team to get to know each other and to develop an initial understanding of each other's professional roles. It is also important to identify common goals, interests, knowledge, previous experiences and what they would like to learn from the IPE placement. This meeting also allows you to more fully gauge the student's current level of knowledge, experience and expectations. See meeting agenda template provided (Appendix 4).

Ongoing Team Meetings

- Rotate the role of team leader.
- Encourage students to take the initiative in these meetings to encourage self-direction, autonomy and team collaboration.
- Ensure there is an agenda for each meeting so that discussions can be kept on track.
- Ensure that some time is allocated each week to reflecting on the working dynamics of the team (i.e. the group process) and how this can be improved.
- Provide resources as required, e.g. flip charts, whiteboard, butcher's paper, electronic documents projected on a screen, etc.

Several facilitators/supervisors

As the student will be working with more than one supervisor, the staff sharing the facilitation/supervision should meet together before the placement to establish the way in which they will work, when they will meet during the placement to review the placement, when they will meet together to discuss the students' progress and who will complete the mid and end of placement assessment with the student.

The student will need a timetable at the beginning of the placement showing who they will work with and when. It is important when staff share students that they make clear to the student that every clinician works differently. Less experienced or less confident students may believe that different ways of doing things is a reflection of lack of consistency between staff which they can find disturbing.

The many advantages of working with staff with different clinical experience, expertise and perspectives should to be stressed to the students.

Tips for Co-Facilitation

As a role model for collaborative practice it is ideal if you work with your colleagues at times to co-facilitate the

student team. Some tips for you to consider are:-

- Take time to get to know each other - both personally and professionally
- Develop plans for meetings, case discussions, tutorials in advance
- Plan to share the leadership
- Develop a plan for receiving and implementing feedback from students
- Develop a strategy for communication before and during student sessions
- Debrief - provide feedback to each other; reflect on process and outcome issues; negotiate differences
- Facilitate dealing with differences between yourselves and between the students by opening up discussion that has the students' reflecting on why they think they are observing difference, how it is different to their approach to practice, and a critical examination of whether they are judging the difference as 'better', 'worse', etc.
- Arrange regular meetings that all facilitators can attend from your facility to debrief and to ensure the consistent quality of the placement.

Interprofessional Capability Framework

All activities undertaken within the IPP Program are underpinned by the Faculty's Interprofessional Capability Framework (see diagram below) which is designed to provide a model for teaching and assessing the capabilities required to be a collaborative, practice-ready health professional who can work effectively and efficiently in an interprofessional team to provide safe, high quality service/care to clients, families and communities.



Note: The booklet that includes this framework is available on our website
<http://healthsciences.curtin.edu.au/faculty/ipe.cfm>

Brewer & Jones, 2013

Program Outcomes

Students have both discipline specific and interprofessional learning outcomes although there is significant overlap between these as many outcomes are generic and are aligned with Curtin University's graduate attributes.

Discipline Learning Outcomes

Each discipline has its own learning outcomes relevant to the student's progression within their course. The fieldwork staff in each course will ensure that you are provided with the unit outcomes for the cohort of students you have attending the placement(s).

Interprofessional Learning Outcomes

Students are expected to achieve the following outcomes during their interprofessional placement. Achievement of these will depend on the learning opportunities provided to the student (e.g. length of the placement) and the student's progression within their course.

By the completion of their IPP placement, students are expected to be able to:

1. Describe their own professional knowledge, skills, attitudes and values and limitations relevant to these.
2. Describe the contribution of other professions to health service/care.
3. Demonstrate effective communication with clients, relatives, students, health professionals and relevant

staff to ensure safe, high quality service/care.

4. Work in partnership with the client and other professionals to plan, implement and evaluate evidence- based service/care including referring on as appropriate.
5. Facilitate effective team interactions, manage conflict and provide leadership when appropriate.
6. Evaluate the outcomes of interprofessional team collaborations, their own contribution to these, and suggest improvements.

As you will see in the Interprofessional Capability Framework document students are expected to progress in their development of these capabilities from first year through to their final year passing through the three levels described below.

The levels described equate approximately with the following:-

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|---|--|
| 1 | The novice student at the completion of the first year of an undergraduate degree. |
| 2 | The intermediate student at the end of the second or third year of an undergraduate degree or at the completion of the first year of a graduate entry masters degree. |
| 3 | The entry level student at the end of the final year of an undergraduate or entry level masters degree. |

This progression links to Miller’s (1990) model of assessment in medical education: Knows – Knows how – Shows How – Does. Information on critiquing students’ performance and providing effective feedback is available in Appendix 14.

Assessment

Students’ achievement of their learning outcomes generally takes two forms: (1) university based assessment tasks such as exams, quizzes, reflective journals, portfolios or practical examinations; and (2) practice based assessment most often using a competency based tool. Once the cohort of students for your interprofessional placement are finalised the relevant assessment tasks will be provided to you and any training in undertaking these can be requested from the fieldwork staff within each school. These assessments are linked to the learning outcomes for the unit that the students are undertaking along with the learning outcomes for the IPP Program. The key assessment tool for the program is the

Interprofessional Capability Assessment Tool (ICAT) which provides a measure of the students’ knowledge, skills, attitudes and values suitable for use in a diverse range of practice settings.

The ICAT assessment is conducted at the middle and at the end of placement. The inclusion of the mid- point assessment is designed to allow the student and the IPP Facilitator to plan more thoroughly for the student’s learning for the second half of the placement. The final evaluation should be a brief summary of where the student’s capabilities are at that point in time. NOTE: For placements that are 2 weeks or less ONLY the end of placement evaluation is required.

The student **and** the IPP Facilitator complete the evaluation separately and then meet face-to-face to discuss this, focusing particularly on points of difference.

The ratings are along a continuum from **novice** to **intermediate** to **entry level**. Behavioural descriptors are provided in the rubric to guide the rating of the student’s performance on the scale.

If a student is performing below the level expected for their stage in the course then an action plan to address the most significant areas of concern must be developed. For further information on this see Appendix 6.

Students’ progress at different rates and with different patterns of strength and areas for improvement. Staff should match their style of supervision with the student’s progression along the continuum of competence.

A guide for this is outlined below:-

| <i>Capability level</i> | <i>Student Behaviour</i> | <i>Optimum Supervision Style</i> |
|-------------------------|--|---|
| Novice | Student has some knowledge but not necessarily how to apply this knowledge to the practice setting Student may have a high level of anxiety & wary of others observing them | Direct – The IPE Facilitator directs the students activities and provides much of the feedback |

| | | |
|---------------------|---|---|
| Intermediate | Student takes more control of their learning & the evaluation process Student focuses more on the clients than on themselves | Collaborative - Student does increasingly more of the talking in the form of self-evaluation, questioning & commenting to the other students & staff |
| Entry Level | Student does most of the initiating and talking with the staff | Consultative - Student uses the staff as consultants but may need additional support with more complex clients/activities & with caseload management |

When staff feel that the student's management of the client is safe and effective the level of supervision provided can be reduced. This will allow the student to develop the appropriate level of independence and self-reflection required to reach an entry level of competence. Continued observation and feedback is required to ensure that the end of placement evaluation on the ICAT is fair, objective and valid.

If you would like the students to evaluate your facilitation skills please see a sample evaluation form in Appendix 16. You must ensure a process where students are able to complete this evaluation at their own choice and anonymously.

Working effectively in your team

An effective team works together to complete a task in the required time, with each member contributing to the team according to their knowledge, skill, experience and personality.

In productive teams:

- People listen and pay attention to each other
- People stay on the topic at hand
- Everyone's ideas and suggestions are welcomed
- The facilitator summarises the discussion and ensures that everyone has had a chance to speak
- The team members are clear about the teams decisions and are committed to them

| Task roles for facilitator | Actions and behaviours |
|-----------------------------------|---|
| Starts the team working | Clarifies the task to establish a shared understanding of what is to be achieved and the timelines for this |
| Seeks information and opinions | Asks for facts, opinions, ideas or suggestions and restates them in summary form. Reframes information to clarify |
| Summarises | Pulls together related ideas or suggestions and restates them in summary form. Reframes information to clarify |
| Coordinates | Demonstrates the relationships between the various ideas and activities |
| Energises | Stimulates the team to work to high standard |
| Tests | Stimulates the team to examine ideas to see if they are practical and workable; considers alternatives |
| Encourages evaluation | Facilitates the team's evaluation of its achievements in the light of the goals and timelines |

| Process roles for facilitator | Actions and behaviours |
|--------------------------------------|---|
| Listens actively | Welcomes others' ideas without expressing their own; is receptive to others' ideas and give verbal and non verbal feedback to the speaker |
| Encourages | Warmly encourages participation from all team members, clearly values and accepts contributions |

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| Compromises and harmonises | Tries to reconcile disagreements when opinions differ or conflict arises |
| Relieves tension | Suggests breaks, makes jokes or proposes fun approaches to team work |
| Enhances communication | Ensures that each team member contributes to the discussion; asks for clarification or repetition if there seems to be a lack of detail or understanding |
| Monitors the climate | Checks how the team is feeling about their work and about the progress being made |
| Observes the methods by which the team is working | Observes members' behaviours and team strategies and uses these observations as the basis for developing more effective group processes as required |
| Checks progress | Helps the team to meet expectations |
| Builds trust | Supports openness from other team members; reinforces individual risk-taking |
| Solves interpersonal problems | Helps minimise and resolve conflicts between team members |

Further information on group development, collaborative peer learning along with an evaluation form for peer learning can be found in Appendices 8, 9 and 10

Managing problems in your student team

It is likely that teams will experience difficulties at some stage in both tasks and processes. Some of the more common problems with suggested solutions are listed in the table below.

| Problems | Suggested solutions |
|---|--|
| Some students are shy | Draw them out. Encourage them and give them time and the opportunity to respond. This can be done non-verbally or you may need to be more direct e.g. "Let's hear what the others have to say..." Don't try to fill the silence – wait for students to participate. |
| Some team members talk too much | Create time limits. Ensure that each team member has a chance to speak e.g. "Let's structure this discussion by everyone taking turns". Acknowledge the comment (don't expand) and move to another team member. |
| One team member dominates the talk time or cuts off others when speaking. | Use any opportunity to interrupt politely and say that time is limited and it is useful to hear other people's ideas. This is important as otherwise all opinions are not explored and others might become resentful E.g. "I think we might have to cut X off. Did you have more you wanted to say?" |
| The team gets off task and wastes the time gossiping or telling stories | Remind the team of the timelines and the tasks that need to be completed in that session e.g. "can we go back to where we were a few minutes ago and see where we were at?" or "I'm wondering if we are ready to move on to..." Use flip chart with team goals listed, redirect, use agreed upon learning objective that were development by the team to guide discussion. |
| Team productivity is low | Ask team how they would like to address the time problems. Set goals and time schedules. Delegate tasks. Display team goals and discuss progress on these. |
| One person is less patient and more action-orientated than the others | Slow down the pace of the team when one member rushes ahead e.g. "Are we ready to make a decision on this?" "Let's go around and see where everyone stands on this". |

| | |
|--------------------------------|--|
| Team gets stuck | Check for consensus within the team as to where they are at with the discussion. Ask if anyone has anything to add. Prompt the discussion forward. |
| Facilitator is too controlling | It can be tempting to intervene and lead the team where you think it should go. This is not the role of the facilitator. You need to let the students find their own way and discover things for themselves. |
| Conflict arises | Identify conflict openly e.g. "There seems to be a conflict here. How should we as a team address this?" Work to identify the source of the conflict. Understand that everyone deals with conflict differently – it may be important for each team member to become aware of their own reaction to conflict. |

Further information on dealing with students having difficulty is available in Appendix 15.

Reflective Practice

Students need to learn the ability to reflect not only on their own performance, but also on the outcomes of the session and what the client and /or their caregivers learned from the session, as well as the outcomes of the interprofessional team. IPP Facilitators often report that students are too focused on themselves instead of on the client. Students report that this behaviour is reinforced for them by their IPP Facilitators when the emphasis of any post-session discussion/debrief is on the student's behaviour rather than the outcomes of the session. IPP Facilitators can assist the students to develop this client focus by asking questions that help shift this focus. For example,

- What did the client achieve/learn in the session?
- What did you learn from that session?
- Did the session follow your plan? Why or why not?
- What theoretical knowledge did you use during the session (or could you have used)?
- What past experiences did you draw on in the session (or could you have drawn on)?
- What do you need to learn or find out about before the next session?

Observation

If the student has not had previous experience with a particular disorder/client population, the student should be given an opportunity to first observe an assessment and/or treatment by staff if they feel that this will assist their learning. Staff should provide observation opportunities for specialised assessment tools, techniques or therapy models

Caseload/Learning Experience

An appropriate caseload should consist of sufficient number and variety of clients to broaden the student's experiences and to develop a range of assessment and treatment techniques, along with other more general skills such as organisation, prioritisation and their interprofessional capabilities. Generally the number of clients would be less at the beginning of the placement and would increase as the students demonstrate their ability to manage more.

To be an effective member of an interprofessional team, health professionals must be competent in both their profession and in working collaboratively. Therefore a balance of interprofessional and profession specific learning experiences should be provided. These should NOT be viewed as separate or independent undertakings as the capabilities that are the focus of our framework and ICAT (communication, role clarification, team function, conflict resolution and reflection) are required to practice interprofessionally but also to practice in a profession specific environment.

Students should be provided with time and opportunities to complete most administrative work during the hours of the placement e.g. recording progress notes, report writing, reading client's medical notes/files, developing case studies and projects where applicable. Students can expect that they will need to complete some preparation outside of the placement hours. This should, as much as possible, be confined to planning and preparing for sessions including thinking, reflecting, practising test administration, as well as

reading/research

(See Appendix 3 for a sample placement schedule)

Appendix 1

IPP Facilitator Checklist Template

| | |
|--|--|
| Before placements commences | |
| Complete IPP facilitator training – workshop face to face or online | |
| Ensure all staff, clients and caregivers are aware of the program e.g. start date, number of students, learning outcomes, etc. | |
| Prepare orientation to site and service | |
| Finalise students access to facilities e.g. room, computers, internet &/or intranet, | |
| Finalise placement schedule including what, who, where and when; and distribute to all involved | |
| Check leave arrangements for all staff involved in the program to ensure adequate cover and continuity for students | |
| Familiarise yourself with all assessment requirements both IP and profession specific | |
| Ensure all relevant staff have access to the key documents for the program including development guidelines, facilitator handbook, student handbook | |
| Finalise planning for at least the first week, with particular focus on the first day of the placement – orientation and first team meeting (sample agenda provided Appendix 4) | |
| Week one of placement | |
| Schedule mid placement feedback sessions with each student | |
| Mid placement | |
| Student assessment <ul style="list-style-type: none"> • Complete all students mid placement ICAT and any profession specific assessment required at that point • Ensure students completed mid placement ICAT and other assessment • Meet with students to discuss ICAT and profession specific assessment | |
| Ensure action plan completed for any students performing below expectation | |
| Schedule end of placement feedback sessions with each student | |
| Gather feedback from all staff and clients/caregivers re the successes and challenges of the program. | |
| End of placement | |
| Student assessment <ul style="list-style-type: none"> • Complete all students end of placement ICAT and any profession specific assessment required at that point • Ensure students have completed end of placement ICAT and other assessment • Meet with students to discuss ICAT and profession specific assessment | |
| Provide students with time and opportunity to complete the post placement evaluation | |
| Ensure students handover caseload to incoming students | |
| Ensure students have completed all documentation for the placement including client progress notes and reports | |
| End of program for the year | |

Appendix 2

Student Checklist Template

| Before placements commences | |
|--|--|
| Complete IPE orientation online – see Blackboard (Curtin students) or website (Other university students) | |
| Contact site/placement IPP Facilitator to introduce yourself and enquire as to all pre-placement information. Read or complete all orientation provided by the site | |
| Ensure that you have introduced yourself to the other members of your placement team i.e. the other students who are on placement at the same time as you | |
| Ensure you have the following items: relevant police clearance, working with children check, name badge, student ID card, copy of IPP program handbook, copy of ICAT | |
| Familiarise yourself with all of the assessment requirements both interprofessional and profession specific in particular the ICAT | |
| During the placement | |
| Ensure you have a clear understanding of where you need to be when | |
| | |
| Mid placement | |
| Completed your mid placement ICAT and any other assessment | |
| Meet with your IPP Facilitator to discuss ICAT | |
| Ensure your action plan is developed and implemented if required | |
| End of placement | |
| Completed your end of placement ICAT and any other assessment | |
| Provide a copy of the final ICA to your IPP Facilitator whom you will then meet to discuss | |
| Complete the post placement evaluation | |
| Provide handover of your caseload to incoming students | |
| Complete all documentation for the placement including client progress notes and reports. Provide this to the IPP Facilitator | |

**Appendix 3
Sample Timetable**

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|-------|---|---|---|---|--|
| 8.00 | Orientation session Introduction Team building | Meeting with IPE Coordinator. Team building activity & discussion | Student team meeting to discuss activities for the day | Student team meeting to discuss activities for the day | Student team meeting to discuss activities for the day |
| 9.00 | Policies & procedures Site tour Introduction to key staff | Student team meeting to discuss activities for the day | <u>Music Group</u> Preparation Implementation Debrief/reflection | Manage discipline specific caseload. Ensure joint assessment & treatments where client requires services from more than one disciplines | Interprofessional client-focused assessment & interventions |
| 10.00 | | Manage discipline specific caseload. Ensure joint assessment & treatments where client requires services from more than one disciplines | Attend staff meeting | | |
| 11.00 | Observe stroke rehab group | | | | |
| 12.00 | Lunch | Student team meeting to discuss client caseload, seeking advice form others where required or referral for assessment/management | Lunch | Shadow staff from another discipline | Run a staff professional development event |
| 1.00 | Discuss observations/learning from stroke group & plan group for following week | Lunch | Home visits | Lunch | Lunch |
| 2.00 | | <u>Stroke Group</u> Preparation Implementation Debrief/reflection | | Interprofessional client-focused assessment & interventions | Case study presentation/discussion |
| 3.00 | Meet with discipline supervisor or discuss caseload. Read client files. | | | | Student team debrief with IPE coordinator &/or facilitators NOTE: Complete ICAT if final day for students |
| 4.00 | Prepare for following day | Project work | Meet with IPE coordinator &/or discipline supervisor | Project work | |
| 4.30 | Finish | Finish | Finish | Finish | Finish |

Appendix 4

Initial Team Meeting: Suggest 1.5 hrs for the initial meeting

| | Timing | What |
|---|------------|--|
| 1 | 10 min | <p>Welcome and introduction of team members</p> <p>Check if students have completed the pre-IPE experience survey in the online IPE orientation – encourage students who haven't done so to do this by the end of day 1 (via internet access or hard copy)</p> |
| 2 | 15-20 min | Icebreaker - The goal is to build rapport whilst learning more about each other as individuals and as health professionals, their fieldwork experience, their individual learning objectives |
| 3 | 30 min | Discussion around IPE and client-centred care (students will have completed the University IPE induction) |
| 4 | 15 min | Discuss/clarify role and responsibilities of IPP Facilitator, discipline supervisor, students and other staff |
| 5 | 20 min | Group process - expectations, establish ground rules, communication strategies, develop and circulate an email and phone contact list |
| 6 | 10 -15 min | Introduction to services, client population and programmes |
| 7 | 5-10 min | Provide and discuss timetable for placement (at least week one) |
| 8 | 10 min | <p>Reflection on process, individual and group learning/s – <i>How does everyone feel? What are your concerns? Are there any immediate barriers that anyone can see? What are your hopes for the placement?</i></p> |

Appendix 5

Student Curriculum Vitae

Student name:

IPE Coordinator's name:

Placement:

Overview of my previous clinical/fieldwork experience

Competencies/capabilities I most want to develop:

Profession specific

Interprofessional

Appendix 6

STUDENT ICAT ACTION PLAN

What is an action plan?

An action plan is a negotiated agreement between a student and their IPE coordinator/facilitator that enables the student to take control of their own learning through a process of:-

- Determining their most significant needs
- Creating strategies and resources necessary to achieve their learning needs
- Implementing the strategies and using the learning resources
- Evaluating the achievement or otherwise of the learning goals and the process by which they were achieved

Why use an action plan?

Adult learning research has shown that when adults go about taking responsibility for their own learning and learn naturally, rather than being taught they are more self-directed, learn more deeply and retain what they learned. The action plan enables the student to take responsibility for their own learning and is therefore more committed to this process. The structure and direction provided by the plan can help to alleviate some of the student's anxiety about what seems to be overwhelming. The plan also allows the facilitator and the student to agree on the goals of the placement, therefore formalising the verbal negotiations that have taken place.

How do you use an action plan?

Following the mid or end of placement assessment the student should select 3-5 learning goals which they discuss with the facilitator. Once the goals are finalised the student writes them up in an action plan using any format they find useful (a template is attached)

To assist the students in this process the following checklist may be useful:-

| | |
|--|--|
| Learning goals/objectives | What do you want to achieve? |
| Proposed action plan (learning strategies) | How will you get there? |
| Proposed timeframe | When will you achieve it by |
| Resource implications | What and who will you need to help you? |
| Measurement | How will you demonstrate that you have reached your goals? |

Adapted from Kennedy-Jones, in Rose & Best (2006)

Assessing the plan:

Learning goals:- Are the goals

- clearly stated
- appropriate for both the placement i.e. opportunities can be provided to develop these
- realistic for the student's experience and stage of professional development

- achievable in the timeframe
- comprehensive i.e. including knowledge, skills and personal qualities

Learning strategies:- Will the

- Action plan support and be consistent with the learning goals
- Student have adequate opportunities to practice and demonstrate these

Facilitator monitoring of student's progress:- Does the facilitator have a plan for:-

- Gathering information about the student's relevant capabilities
- Routinely observing the student's performance (face-to-face, video recording, etc)
- Gathering information from others who are in a position to provide helpful feedback e.g. clients, caregivers, other staff and student team members.
- Provide sufficient opportunities for the student to self-evaluate his/her own performance and progress
- Provide feedback to the student

ACTION PLAN TEMPLATE

| Learning Goals <i>WHAT</i> | Action Plan <i>HOW</i> | Timeframe <i>WHEN</i> | Criteria for success |
|-------------------------------|------------------------|-----------------------|-------------------------|
| | | | |

Appendix 7

Experiential Learning (Kolb)

American educational theorist David A. Kolb believes “learning is the process whereby knowledge is created through the transformation of experience” (1984, p. 38). The theory presents a cyclical model of learning, consisting of four stages shown below. One may begin at any stage, but must follow each other in the sequence:

- concrete experience (or “DO”)
- reflective observation (or “OBSERVE”)
- abstract conceptualization (or “THINK”)
- active experimentation (or “PLAN”)

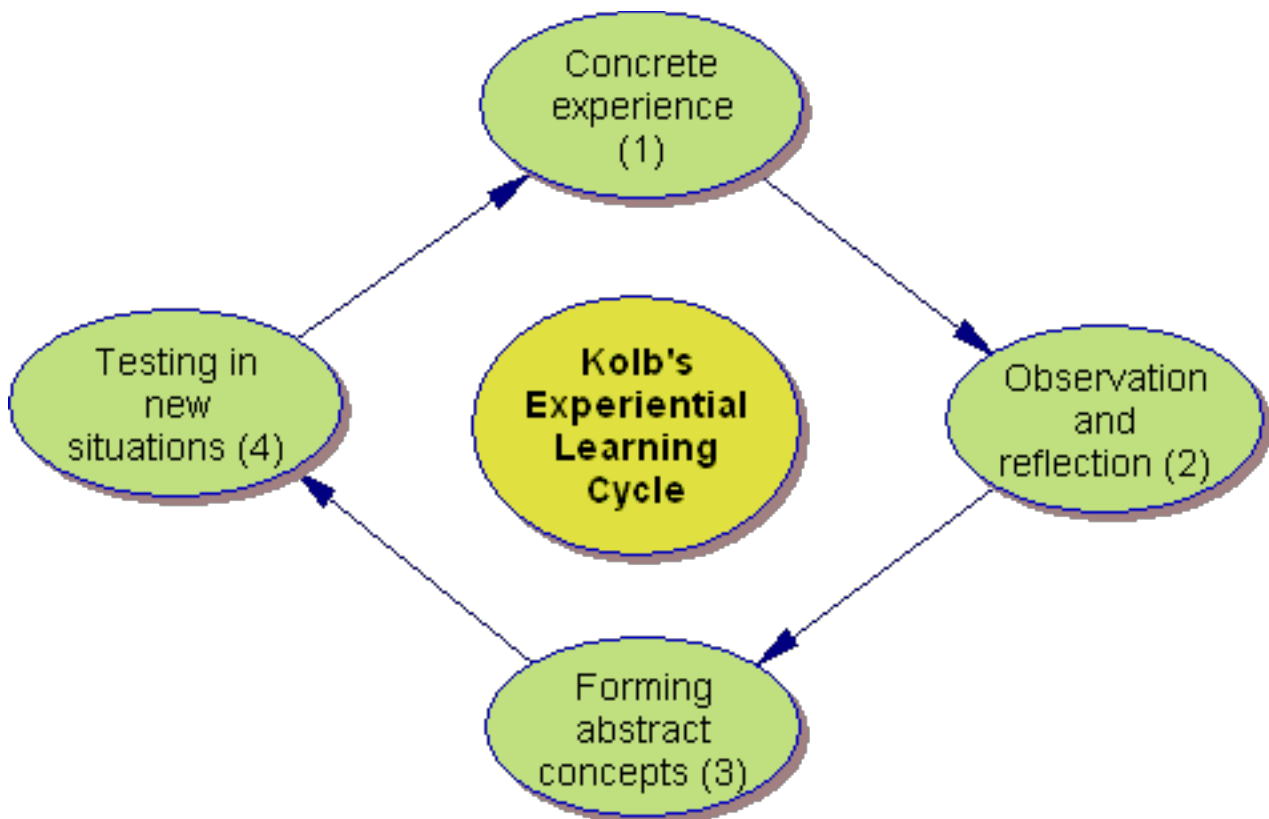


Figure 1. *Kolb's Experiential Learning Cycle.*

Kolb's four-stage learning cycle shows how experience is translated through reflection into concepts, which in turn are used as guides for active experimentation and the choice of new experiences. The first stage, *concrete experience* (CE), is where the learner actively experiences an activity such as a lab session or field work. The second stage, *reflective observation* (RO), is when the learner consciously reflects back on that experience. The third stage, *abstract conceptualization* (AC), is where the learner attempts to conceptualize a theory or model of what is observed. The fourth stage, *active experimentation* (AE), is where the learner is trying to plan how to test a model or theory or plan for a forthcoming experience.

Retrieved from: <http://www.learning-theories.com/experiential-learning-kolb.html>

Appendix 8

| <i>Group Development</i> | | | |
|--------------------------|--|---|--|
| Stage | Summary | Feelings | Behaviours |
| Forming | Members are introduced. Boundaries of the group are explored. Transition from individual to group member. Each person wants to feel accepted and wants to figure out how this group will benefit them. | Tentative Excited Optimistic Anxious | Define goals & how they can be achieved. Acceptable group behaviour is established. |
| Storming | All have own ideas as to group process. Personal agendas are rife. Rely on own experience. Resist collaborating. (NB. Good things can arise from conflict: personal growth, improved efficiency, improved trust and communication, and clarity.) | Disunity Tension | Resist tasks. Establish unrealistic goals. Argue. |
| Norming | Group adapts norms after working through conflicts in storming phase. There is consensus. All accept team, rules, role & individuality of others. | Enthusiastic Acceptance Friendly Team cohesion | Constructive criticism. Avoid conflict. |
| Performing | Atmosphere informal. Each member is comfortable offering their opinion. Together group solve problems and make changes. Accepted strengths & weaknesses. | Constructive self-change Attachment to team | Insight into processes. Prevent or resolve group problems. |
| Adjourning | Completes last debriefing | Reluctance to say goodbye | |

Tuckman (1965)

Appendix 9

Collaborative Peer Learning

Collaborative peer learning = process of student pairs or small groups engaging in a 2-way reciprocal learning experience through which they share their knowledge and ideas.

- Peers are often the least recognised, least used and possibly the most important resources available in student learning.
- Usually needs to be initiated by staff.
- Consistent with principles of adult learning
- May facilitate deep learning and reflection
- Expression and analysis of negative emotion through reflection with peers may enhance learning
- Task or problem is broken up into subcomponents and takes collective group effort to enable the team to complete the task
- Provides a safe learning environment and culture – OK to not know, ask questions, make mistakes, get it wrong.
- Peers focus on the events that have been observed/experienced; make descriptions specific; focus on what went well; discuss the information, the evidence and the feelings; encourage observers to ask questions

Fieldwork Educator tips:

- Ensure students have a time and place for discussion with each other in clinic.
- Fieldwork educator can model peer learning by consulting with colleagues in presence of students.
- Students can be directed to observe peers, manage cases jointly, use a peer to get an objective opinion, give another student feedback on a clinical session, consult students with a similar client, caseload or problem
- Can teach peer learning strategies through using role playing to teach students how to ask
 - questions of their peers that facilitate problem solving and deep learning in clinical education – best questions are broad or open-ended questions, divergent questions and evaluative questions
- Fieldwork educator assumes a non-dominant, facilitation role in Fieldwork educatory conferences –
 - promoting case presentation, mutual problem solving, idea sharing, role playing, discussion and goal setting – members offer each other support, recognize each others' contributions, promote confidence and self esteem of members and form a group identity
- Observation of peers interacting with clients then discuss their observations, collect specific data on
 - the interaction or write feedback for the Fieldwork educator

Benefits:

- Reduces problems of isolation
- Students talking together help each other understand material being studied, clarify issues, trial ideas and activities and provide support and encouragement when motivation is waning
- Combining collaborative peer learning with reflection achieves greater depth of learning
- Removal of fieldwork educator can assist some students who may not participate comfortably when the fieldwork educator is present – in student lead discussions students work their way through authority-dependency relationships more effectively
- Students more likely to hear and internalise a message that may change their attitudes and behaviour if the messenger is a peer with similar lifestyle and the same concerns and pressures

Disadvantages:

- Depends on students' interest in developing interpersonal relationships
- May be harder for some cultural backgrounds
- Learning to work together may take time and energy that student is unwilling to invest

Appendix 10

Collaborative Practice Peer Evaluation

Student being evaluated: _____ Date: _____

| | Very Poor | Poor | Average | Good | Excellent |
|--|------------------|-------------|----------------|-------------|------------------|
| Actively listens to the knowledge & opinions of other team members | 1 | 2 | 3 | 4 | 5 |
| Respects the competence & contribution of other professions to patient | 1 | 2 | 3 | 4 | 5 |
| Effectively communicates own profession's role in a way that promotes positive interaction | 1 | 2 | 3 | 4 | 5 |
| Effectively communicates knowledge in a way that promotes positive | 1 | 2 | 3 | 4 | 5 |
| Works collaboratively with team members to provide safe, high quality patient-centred care | 1 | 2 | 3 | 4 | 5 |
| Actively engages in team meetings | 1 | 2 | 3 | 4 | 5 |
| Actively engages in reflection on team structure, function & roles | 1 | 2 | 3 | 4 | 5 |

Other constructive comments:

Appendix 11

Asking Questions

Dialogue is the most crucial stage of a teaching session. Interaction between the teacher and learner during this stage depends on the types of questions asked. The questions you ask will promote thinking and active learning during teaching.

There are three types of questions.

Yes/No questions

A question that requires an answer that is 'yes' or 'no' does not stretch the learner. However, if you have a learner who is shy or lacking confidence, this is a basic type of question that will get the talking going. Closed questions

A closed question is the sort of question for which there is a specific and correct answer. For example, what are the most common causes of difficulty in swallowing? This type of question is useful because it enables you to check the learner's knowledge base, but not necessarily their level of understanding. It can also be stressful if the wrong answer is given and may reduce participation and thinking.

Open questions

An open question usually begins with 'why' or 'how'. There are generally no right answers and the questions allow you to probe the reasoning process of the learner. Open questions usually require some evaluation, comparison, and/or problem solving. They can also be used to allow and encourage divergent thinking or novel responses. Open questions can be closed off quickly depending on how the teacher responds to the learners answer.

Types of Questions and Examples

| | | |
|--------------------------|--------------------------------|---|
| <i>Testing questions</i> | Checking knowledge | These mainly begin with words like: what, where, when, how, which, how many/big. (Eg What is the name of ...?) |
| | Comprehension and interpreting | Compare, distinguish, show, find evidence, try to prove, interpret, re-arrange, restate, and explain differences (eg Which are more alike? What do you infer from these results? How are these common? What is different?) |
| | Applying/Analysing | Specify conditions for, arrange, demonstrate, make use of, illustrate/ give an example, explore, discover, form and hypothesis. (Eg What are the consequences? What conclusions? What is necessary? Under What circumstances? What are the problems? What are the causes? How could you? What relevance does that have in...?) |
| | Synthesis | Solve this, think of an approach, create, devise, speculate, imagine, design. (Eg What do you suggest? If the...changes? What alternatives? How many different ways? What would happen if? Can you summarise...?) |
| | Evaluation | Check the results to prove a point, evaluate data against standards, rank, argue from all sides. (Eg What do you think will is best? Why do you think that? Was it good/bad, right/wrong? Will it work?) |

| | | |
|--|---|--|
| <i>Clarifying questions</i> | To help the learner clarify their thinking on a point or topic. | Can you rephrase that? What did you mean by...? Can you give me an example of...? |
| <i>Elaborating questions</i> | These help students express themselves more fully. | Can you tell me more? Can you elaborate on that? Uh-huh, what else? |
| <i>Reflecting and deflecting questions</i> | Use these questions if the learner wants an answer from you or wants to know what you think – and you do not wish to give the answer. | Well, what do you think? Do you have any ideas about what it means? (If applicable) What do others in the group think? |
| <i>Supporting and valuing questions</i> | Use these questions if the learner has gone off the track and you need to bring them back without making them appear foolish. | Could you think about that again? How does that fit with what you said before about...? |
| <i>Checking and building questions</i> | This could be used if the learner is having difficulty formulating ideas for the first time. | Let me just check that I understand you, are you saying...? How does that connect with what you said before? (If in a group) Would anyone else like to comment on what Jo has said? |

Pauses

Once you have asked a question be prepared to wait for an answer. Short silences are not necessarily a bad thing – they often get the learner to talk more freely if they know you require and are prepared to wait for an answer. Avoid jumping in too early and answering your own question because you are embarrassed by silences. Avoid jumping in and rephrasing the question as often we rephrase in a different way which adds confusion for the learner. A useful thing to do is;

- Pose (a question to the whole group)
- Pause (so they can all think)
- Pounce (on someone, by using their name)

Appendix 12

Critiquing a student's performance

Critiquing a student's performance is in itself a valuable skill and needs to be learnt. Constructive or positive critiquing is very valuable to a student's outcome whilst arguably a negative critique may markedly reduce the value of an educational experience.

After the student or students have completed an activity, the following four step approach to critiquing can be applied:

1. What the student thought went well.
2. What the other students/facilitators thought went well (when applicable).
3. Opportunities for improvement identified by the student.
4. Opportunities for improvement identified by the other students/fieldwork educators

Try to focus on three specific items when critiquing as a student is unlikely to walk away remembering more than three points. Avoid using words like "but" and "however" in a critique as these tend to turn the critique "upside down" converting your comments from positive to negative.

Feedback should help learners to make sense of what they have done. It should help learners to clarify and take ownership of the need to learn as defined by the competencies they are working to achieve. It should also enhance learners' desire to learn, by increasing their self-esteem and confidence whenever possible, and by helping them to believe that they can indeed achieve the learning outcomes and demonstrate this in ways where they will be credited for this achievement i.e. on the assessment tool. Feedback should motivate learners to move forward into their next sessions of learning by doing, and focus their efforts towards bringing the experience from their past sessions to make their next sessions better

Tips for giving feedback

- Be specific and constructive
- Avoid giving meaningless praise
- Focus feedback on the impact of behaviours on the client/session outcomes
- Avoid emotional language
- Give a balance of strengths and areas of improvement
- Be specific using examples
- Use data collection to support your observations
- Suggest possible alternatives or options for improvement
- Post questions that will facilitate learning
- Be sensitive about when & where you give feedback to the supervisee
- Put yourself in the student's place
- Keep feedback limited to the essential/important issues, as excessive feedback will not be processed.

(From "Foundations to Supervision", Combined Universities Centre for Rural Health)

Generic Vs Expert Feedback

As an IPE facilitator at times you will be called upon to give feedback on an area that is within your area of expertise. This will mean that you can be very specific. At other times you will be required to give feedback on more generic skills such as communication, professionalism, and team working. Again, be specific in your feedback so the student is aware their strengths as well as areas for improvement.

Feedback in the Group Setting

Feedback within a group needs to be managed carefully. Some sensitive issues may be best discussed in a one-to-one context. It should be noted health professionals RARELY give feedback when professional behaviour (being rude, disrespectful) is poor. Studies have shown supervisors use a variety of indirect ways to show they are unhappy through walking away, looking on disapprovingly, stiffen, look grim, skirt around the behaviour, ignore it, use humour, point out it might be bad for future practice (rather than being bad for the client or client's care) but do not give a clear message that they think it is wrong. In these circumstances students and trainees do not

get the message. You need to be clear and simple, explaining the impact of the student's behaviour on the client, other students or staff.

Getting feedback on your feedback

Ask the student to respond selectively to your feedback on their sessions. This could for example include asking them to complete sentences such as:

- 'the part of the feedback that puzzled me most was...'
- 'the comment that rang most true for me was...'
- 'I don't get what you mean when you say...'
- 'I would welcome some advice on...'

Ask the student to send you an email after they have received your feedback, focusing on their feelings. In particular, this might help you to understand what emotional impact your feedback is having on the individual student. It can be useful to give them a menu of words and phrases to underline or ring, perhaps including:

| | | | |
|--------------------------------------|---------------------------------------|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Exhilarated | <input type="checkbox"/> Very pleased | <input type="checkbox"/> Miserable | <input type="checkbox"/> Shocked |
| <input type="checkbox"/> Surprised | <input type="checkbox"/> Encouraged | <input type="checkbox"/> Disappointed | <input type="checkbox"/> Helped |
| <input type="checkbox"/> Daunted | <input type="checkbox"/> Relieved | <input type="checkbox"/> Other..... | |
| <input type="checkbox"/> | | | |

Ask the student to tell you what they would like you to stop doing, start doing, and continue doing in relation to the feedback you give them. This is likely to help you to understand which parts of your feedback are helpful to specific learners, as well as giving them ownership of the aspects of feedback that they would like you to include next time.

Get the student to make a short action plan based on your feedback comments. This should then give you some confidence that they are noting what you have said, and planning to use your advice in relation to the next sessions.

Encourage the student to build on your feedback. For example, ask them to include with their next session plan an indication of how they have incorporated their own self-reflections and/or your previous feedback(

Don't miss out on noticing the difference. Comment positively where you can see that the student has incorporated action resulting from your advice and/or from their own self-reflections. This will encourage them to see the learning and assessment processes as continuous.

Appendix 13

Dealing with Students Experiencing Difficulty

A number of issues can arise during any student placement. It is very important that the issue(s) are identified and dealt with early to ensure a positive experience for all parties.

Barriers that might be impacting on a student

- Anxiety (lack of confidence)
- Fear of making mistakes (perfectionist)
- Lack of experience, knowledge and/or skills
- Personal issues/problems
- Attitude, personality, learning style or value clash
- Cultural differences

Barriers that might be impacting on the facilitator

- Failure to establish a safe, learning environment
- Lack of clarity
 - o Roles
 - o Goals
 - o Expectations
- Lack of supervisory experience and/or skills
- Lack of commitment to student learning
- Misuse of power
- Communication issues
- Time & availability for students
- Too busy in other areas of life
- Respect for students

The conflict resolution process

STEP 1: Create an effective atmosphere

1. Choose a time that is appropriate
2. Choose a place where everyone feels comfortable
3. Choose who should be present
4. Open on a positive note to show a willingness to approach the problem in a collegial manner and ensure trust

STEP 2: Clarify perceptions

You can't solve a problem if you don't know what it is Sort out the key issues - focus on needs not solutions Ignore any side issues

Listen carefully

Recognise each other's needs and values

Ask why they feel the way they do - when feelings are strong you need to deal with the emotional aspects of the conflict first

Clear up any misconceptions

You need to understand other's viewpoint not necessarily agree with it

STEP 3: Build shared solution

1. Aim for a win/win solution

2. Strive for power with rather than over someone
3. Be forgiving
4. Learn from past conflicts but look to the future
5. Generate novel alternatives
6. Make sure options are workable for everyone involved

STEP 4: Action Plan

Need small, discrete, achievable goals

Goals need to be tracked

Make mutual agreements – clarify exactly what is expected of everyone i.e. who will do what, where and by when

Celebrate accomplishment of goals and then move on to new ones

Taking an authoritarian approach

If you assume you are right because you know more and have more experience then you generally don't get a real solution. This leads to passive resistance, sabotage, emotional distance, or reduced productivity. If you impose your own solution you will have to keep on at the student to stay compliant as it doesn't meet their needs

Skills you need to develop for effective conflict resolution

- Listening
- Assertion
- Collaborative problem solving

REMEMBER TO

Deal with one major issue at a time

Generally start with the most easily resolved

Failing students

We all have an obligation to safeguard the community, the profession and the student. If you are concerned that a student is at risk of failing the placement, it is critical that your concerns are communicated with the relevant university staff as soon as possible.

Possible strategies that may be recommended:

- Establish (or review) a learning contract which focuses on a small number of critical learning needs
- Video and/or audio recording of sessions for self evaluation purposes
- Decrease the workload and/or caseload of the placement to focus on the student's consolidation of foundation skills
- Role playing scenarios prior to conducting with clients or others
- Schedule regular supervisory discussion times

Good readings

DeVito, J.A. (2004). The Interpersonal Communication Book. Sydney: Pearson

Bolton, R. (1987). People Skills: How to assert yourself, listen to others, and resolve conflicts. Pymble, N.S.W: Prentice Hall

Appendix 14

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