

Augmenting students' learning through post-practicum educational processes

A project funded by the Office of Learning and Teaching

Dialogue Forum Handbook

February 10-11th 2016 (updated 23rd June 2016)

Gold Coast, Queensland

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Introduction to handbook

This handbook is intended as a resource to guide activities across the first two stages of the *Augmenting students' learning through post-practicum educational processes* project that has been funded by the Office of Learning and Teaching within the Commonwealth Department of Education and Training from August 2015 until November 2018.

The aim of this project is to understand and promote the educational worth of higher education students' experiences in practice or workplace settings, through identifying, trialling and evaluating educational interventions (i.e. teaching and learning strategies) enacted after these students have completed elements of those experiences. The concern is to identify the ways in which different kinds of interventions (i.e. teaching and learning strategies) can be enacted to secure a range of learning outcomes for the students and then appraise their application across a wide range of disciplines and programs. The initial trialling and evaluation of these strategies will be undertaken within the healthcare sector across six Australian universities. The healthcare sector has been selected because of long-standing traditions and practices associated with the provision of practice-based experiences and attempts to integrate them within their educational programs. It is anticipated that the educational goals, processes and outcomes from this sector will offer a platform through which those teaching in universities from other disciplines can come to engage, evaluate and implement the strategies within their disciplines in an informed way.

But, first and foremost, this project is a teaching and learning grant whose principal focus is on teaching and learning strategies that can promote the educational worth of higher education students' experiences in work settings in ways that are applicable across a range of disciplines.

The first two stages of this project are to undertake preparatory work, which includes: i) identifying a range of teaching and learning strategies, ii) reviewing what existing literature suggests about post-practicum experiences; iii) identifying student preferences for the purposes and processes of post-practicum interventions; iv) preparing a range of interventions to be undertaken across 2016; v) enacting those interventions across a range of universities; vi) evaluating progressively and summatively those experiences; and vii) preparing the process of engaging others from other academic disciplines about the strategies, processes of implementation, findings and recommendations.

Through these activities, it is anticipated being able to inform the higher education sector about how the educational worth of students' experiences in work settings can be maximised.

Stephen Billett and Melissa Cain, January 2016 (updated 1st May 2016)

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Introduction to project

This project, as noted, aims to understand how best to augment the educational worth of higher education students' experiences in practice or workplace settings, through identifying, trialling and evaluating educational interventions (i.e. teaching and learning strategies) that can be implemented after students have completed elements of those experiences. Its concerns include identifying for what educational purposes such teaching and learning strategies should be used, and how these strategies can be best used to advance purposes through engaging with students' experiences as part of their programs of study.

A particular concern in this project is to identify how such strategies that can be enacted easily and without recourse to significant resources by those teaching in universities. That is, to identify strategies that busy (time jealous) university teachers can use, and whose use is likely to be sustained because those teachers see benefits for their students in utilising processes that fit within the scope of their work.

Quite deliberately, this project commences in healthcare disciplines because of their long track record of providing and integrated practice-based experiences. However, this teaching and learning grant, principally, is about promoting the quality of teaching and learning across a range of disciplines, not just healthcare. Hence, in the activities within this grant, a conscious focus is placed on how the particular kinds of educational goals that are aimed to be addressed through and through a range of teaching and learning strategies apply to higher education provisions more generally.

Consistent with these concerns, the stated aim of the funded project is to:

promote student learning associated with their employability through post-practicum interventions.

The specific goals associated with this aim are to:

- identify and appraise the effectiveness of post-practicum interventions promoting outcomes associated with students' employability, including readiness to practice;
- identify how these interventions are aligned with achieving specific educational goals across a range of occupational sectors;
- generate and test principles and practices supporting the effective enactment of these interventions realising across a range of disciplines and occupations; and
- initiate and support a systematic process of trialling, evaluation and adoption of these processes across Australian universities.

It is this aim and these goals that direct the activities of this grant across its four stages (see Table 1), although this particular resource refers quite specifically to the focus and activities of the first two stages of this grant whose activities extend from August 2015 until December 2016.

In all, the project progresses through a series of four stages to realise these goals.

In Table 1 below are set out these four stages, their key activities, duration and anticipated outcomes.

Table 1: stages, activities duration and outcomes

Stage	Activities	Duration	Outcomes
1	Preparatory stage including Dialogue Forum	Aug 2015 to Feb 2016	Identifying approaches and selecting how each project will proceed
2	Trialling and refining selected processes	Feb to Dec 2016	Appraisal of the efficacy of the enactment and outcomes of selected strategies
3	Consolidation & extension incl. Development Conference	End of 2016 – beginning of 2017	Generate key principles and practices, and engaging with a broader range of disciplines
4	Embedding in practice and dissemination	2017-2018	Embedding these practice across participating institutions

Progress to date

After an initial review of the literature on post-practicum experiences, the project has progressed through developing and administering an on-line survey of students' preferences for the purposes of post-practicum experiences, what kinds of interventions are preferred and how best they might progress. In addition, the process of participants identifying projects that are of interest to them and the preparation of draft projects has progressed, including processes and means of gathering and analysing data about their particular interventions.

This document captures much of these initial findings in terms of what the literature is proposing, what kinds of teaching and learning strategies might be used and for what purposes, and some initial findings from the student survey.

It is anticipated that these contributions will support the discussions and deliberations at the Dialogue Forum which is used as the key device for setting up the project work across 2016.

Introduction to Dialogue Forum

The aims of this Dialogue Forum are to:

- elaborate the purposes of the overall project, how it will progress across two years and the kinds of outcomes to be realised;
- share and discuss the intended purposes of individual projects and the teaching and learning strategies used in the post-practicum interventions across 2016;
- outline the processes by which these interventions will be enacted;
- share the intended procedures through which data about the efficacy of these interventions will be gathered and analysed; and
- establish means for progressing the project, engaging/communicating/sharing across the entire project.

It is anticipated that through a process of engagement and interactions that each of the participants will be informed about others projects, develop greater insights about how their own might progress and refine approaches within their projects, and how data gathering and reporting might best progress.

Process of engagement and interactions

Essential to the success of the Dialogue Forum is the engagement of participants and interactions amongst them.

The following seem to be important principles to enact an effective dialogue:

- all participants are equal and deserve respect in consideration of their contributions;
- an openness to and valuing of others' perspectives, approaches and possibilities;
- demonstrating the importance of both making contributions and assisting others' contributions; and
- identifying opportunities for collaboration is within these projects for the benefit of individual projects and the entire project that comprises this grant.

It is on these kinds of bases that, hopefully, the Forum will be helpful for participants.

Key considerations

This project is about teaching and learning processes after practicum experiences that support employability.

Employability is taken as having the capacities required for employment: securing initial employment and sustaining that employment across working life.

So, it can have a focus on:

- i) developing occupationally-specific capacities;
- ii) identifying and securing situationally-specific capacities and

iii) iii) developing capacities to engage in on-going learning, and possibly others.

So, educational goals or purposes are associated with initial preparation, including smoothing the transition to employment, but also preparing graduates to be active and intentional in their personal practices that supports their learning. Hence, being active and agentic in practicum situations, purposefully engaging with practice experiences and integrating them within their coursework, hopefully, establishes habits and practices that that support on-going development that sustains employability in the longer term. So, more than being about the teaching of content associated with an occupation, there are considerations about the requirements for practice and how they vary across work setting (hence, preparing for effective transitions) and also preparing students to be effective in directing and managing their learning across lengthening working lives

So, the focus for the projects that comprise the first year of the teaching and learning grant is on the kinds of teaching and learning strategies that can assist with the development of those capacities.

We want to identify the ways in which the teaching and learning strategies can support this learning.



Dialogue Forum Program

Venue (rooms booked): Gold Coast campus G40_4.111– 8.00 – 5.00 (10th and 11th) break out rooms G40_4.112 & G40_4.113 for 11th 9.30 to 2.30

Day One: Wednesday 10th February 2016 (G40_4.111)		
8.30–9.00	Tea/coffee on arrival (G40_4.111)	
9.00–9.30	Introduction Introductions Goals for Dialogue Forum Processes and conventions	SB
9.30–10.30	Progress to date Post-practicum processes (PPP): A review Possible models/options for PPP: list and discussion Integration of teaching and learning	SB led discussion MC to lead
10.30–10.50	Morning tea/coffee break	
10.50–12.00	Findings from PP students survey and discussion about those findings	SB Led discussion
12.00–1.00	PPPs in prospect Scholarship of teaching and learning Project plans (each project has 10 minutes to present and discuss aims of project and T & L strategies intended to be used) Followed by 5 minutes of discussion (2 x 15 mins)	Discussion
1.00–1.45	Lunch	
1.45–3.15	4/5 x 15 mins (each project has 10 minutes to present and discuss <u>aims of project and T & L strategies</u> intended to be used) Followed by 5 minutes of discussion (6 x 15 mins)	Participants' presentations and discussions
3.15–3.35	Afternoon break	
3.35–4.45	4/5 x 15 mins (each project has 10 minutes to present and discuss <u>aims of project and T & L strategies</u> intended to be used) Followed by 5 minutes of discussion (6 x 15 mins)	Participants' presentations and discussions
4.45–5.00	Summary of projects Review of day's progress Issues arising	SB to lead

Day Two: Thursday 11 th February 2016 (G40_4.111)		
8.30–9.00	Tea/coffee on arrival (G40_4.111)	
9.00–9.15	Review of Day One Discussion of issues arising Introduction: Processes for implementing interventions and assessing process and outcomes	SB led discussion PPT
9.15–10.30	Considering processes of enactment: Issues for implementation: FELD process Responses	FELD process: Participants group work
10.30–10.50	Morning tea/coffee break	
10.50–12.00	Gathering and reporting data about projects What kinds of data, how gathered and analysed	3 groups – group work
12.00–12.30	Lunch (working) reporting back	
12.45–2.15	Planning processes – discussions about progress, roles Critical issues Progression from here Teleconferences/videoconferences/visits Focussing on the Developmental Conference	SB led discussion
2.15 – 2.30	Review of Dialogue Forum progress and farewell	



Teaching and learning principles informing the project

Some teaching and learning principles informing this project are as follows.

Experiences in work settings can assist students learn the kinds of occupational goals and processes that are important for their transition to effective practice and employability.

Yet, those experiences can be diverse and varied, as are the goals and processes are enacted for and in work settings. Therefore, these require means for learners to mediate those experiences to secure effective and comprehensive learning and educational outcomes.

Not the least here is understanding something of the diverse goals and processes for the enactment of the same occupation.

Learning processes are not hybrid or reserved for experiences in particular settings (e.g. universities), but are instead a part of everyday thinking and acting.

However, if that thinking and acting can be augmented in productive ways the likelihood is that the learning outcomes can be richer, far more effectively directed and have greater intentionality.

Augmenting students' workplace experiences through post-practicum interventions has potential to achieve these kinds of educational objectives.

In particular, the ability to articulate, share, compare and critique those experiences are likely to lead to informed and adaptable outcomes that go beyond what can be achieved through students' own mediated experiences.

Yet, whether experiences alone are being considered or processes of augmentation, the learning process needs to be interdependent, rather than independent, or dependent.

That is, learners actively engaging with and being informed by the contributions of social and physical environments in which they think and act.

Ultimately, experiences provided in educational programs and work settings are nothing more than invitations to change; it is the learners who decide how and for what purposes they take up that invitation.

Hence, finding ways of engaging students, placing them in the 'driver's seat', supporting their construction construal of what is provided for them will be central to the success of educational programs and interventions.

Participants – role and contacts

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Review of Literature

A review of recent relevant literature was undertaken to establish the types of teaching and learning interventions and techniques that had been implemented after student work placements. A total of 41 journal articles and reports covering the discipline areas of general medicine, psychiatry, nursing, social work, dentistry, pharmacy, speech pathology, physiotherapy, chiropractic practice, tourism, business, commerce, law, journalism, engineering, education, and information technology were considered.

A key and initial finding from the search is that there is a dearth of reporting on post-practicum interventions. That is despite a broad number of studies stating that feedback from students, academics, and industry professionals provides clear and useful recommendations for improvement. Beyond this, four main themes emerged from this review:

- 1) Work placements are highly valued by students, are essential in bridging theory and practice, and play a vital role in educating students to meet graduate outcomes and industry standards.
- 2) Students may experience cultural, religious, and ethical conflicts in their placements which can be stressful as students are often not provided ways to reconcile theory with diverse and unfamiliar situations in practice.
- 3) Work placements play an important role in introducing students to non-traditional career options, such as remote and rural practice and aged care. Placement experiences provide important support for students who may choose these careers options.
- 4) Reflection-in-action and reflection-on-action in the work place “plays a critical role in maximising learning potential” (Macleod et al. 2011, p. 32) and provides important information for academics; such as indicators of the success for placement programs and feedback for improving learning both in the work place and at universities.

The importance of reflective practice

Doel (2008) reports on professional development logs kept by university engineering students while on their work placements. For most students, this was an unfamiliar practice but was scaffolded in a two day workshop prior to their placements. Feedback on this assessment tool was gained through surveys and focus groups, and provides evidence that reflective thinking encourages students to analyse learning incidents rather than merely stating what occurred. In addition, placements are held to be more valuable experiences if students reflect on the learning environment and their participation, and then reorganise their processes to improve outcomes (p. 164). Bain et al. (2002) also support the use of reflective journals for pre-service teachers in their research in an Australian university. Feedback on reflections was carefully structured to assist students to ‘move’ towards the use of higher order thinking skills and to reflect in greater depth on their work place experiences (p. 172). Stockhausen (2004) in reporting on post-practicum feedback from

students in a hospital in Queensland demonstrates that reflection “provides a focus for students as they work through clinical situations that contribute to their professional socialisation and identity” (p. 13). Reflecting through generating individual journal entries and peer debriefing sessions allows students to consider what is most important in their clinical experiences, and thus, Stockhausen (2004) urges clinical educators to build upon this feedback to facilitate more effective learning experiences.

Dean and Clements (2010) regard reflection as “critical to professional development and learning” (p. 290) because carefully structured tasks can allow students to “identify links between theory and practice, as well as uncover other issues that concern or puzzle them” (p. 290). The advantages of structuring reflective assessments for commerce students at the University of Wollongong in the Commerce Internship were investigated by Dean et al. (2012) as part of improving the assessment of work integrated learning experiences. This included a daily *eLog*, reflections on key areas of placement, and a reflective journal (p. 107). Results of the study revealed a significant misalignment between assessment tasks and reflective practice, with some students in the study reported the reflective tasks as irrelevant or a waste of time. A more holistic approach to reflection was recommended as an intervention with templates to help structure reflective tasks. Dean and Clements (2010) note with regard to the same study, that the development of ‘soft skills’ required for students to engage effectively in the workplace might be achieved by embedding work placement programs into the academic curriculum in partnership with the business community. Lindgren et al.’s (2005) introduction of ‘reflective practice’ for Swedish students on nursing clinical placements found that reflection, when used as a means for students to gain a deeper awareness of self and others, is widely accepted in the literature. It is held to be compatible with processes of clinical supervision, and that group supervision and reflection served as an important support to students during their placements. Holt, Mackay and Smith (2004) also note that post-placement feedback from students and industry connections are crucial for university staff to refine courses in rapidly changing areas such as information technology. It may well be that the opportunities for students to share their experiences of dynamic areas of occupational practices can provide understandings and procedures for working in such environments or occupations.

Cultural and ethical considerations

As work-integrated learning experiences are situationally, socially and culturally based, some of the sources accessed provided illuminating evidence about the nature of ‘culture shock’ amongst students unfamiliar with the Australian workplace context—such as International students (Macleod et al., (2012) —as well as Australian-trained students on international placements. Student feedback (e.g. through interviews and discussion groups) from four case studies at Flinders University (Macleod et al., 2012) revealed that when students are placed in situations where cultural expectations differ from what they have experienced in their university classes, ethical challenges are created that can induce stress and anxiety. Fuscaldo’s (2013) OLT project report on health ethics education presents

detailed evidence concerning how challenging it can be for students to “resolve ethical issues that arise when health care involves culturally divergent approaches, beliefs and values” (p. 5). A variety of case studies is presented in this research demonstrating how ethics as applied in theory may clash with the cultural and religious values of patients and their families. For example, a student found it challenging when a Malay family requested that doctors conceal the diagnosis of a terminal illness from their elderly father; a practice common in many Asian cultures. Post-placement feedback suggests that Western health ethics is not (always) cross-culturally applicable and that students need a framework “to assist them to negotiate between abstract principles and particular cultural contexts” (p. 6). Hence, post-practicum interventions can be used to mediate personal experiences with these expectations.

Non-traditional placements

The University of Notre Dame’s Rural and Remote Health Placement Programme (RRHPP) places medical students in remote placements to develop a community-centred perspective on health care and to help students better understand issues associated with the healthcare in rural populations. To optimise their learning, students attend pre- and post-placement briefings, and complete a reflection on their placements (Mak & Mifflin, 2012, p. 605). Feedback from members of the communities in which the RRHPP operates indicates that the program is positively viewed, highly valued, and fosters empathy. The ultimate effectiveness of the program, however, will be measured by future graduates electing to practice in rural and remote communities as a result of the program.

Abuzar et al.’s (2009) presentation of Rural Dental Rotation (RDR) program at the University of Melbourne also supports the importance of rural placements in assisting students to appreciate cultural safety and understand the specific oral health needs of Indigenous Australians. Feedback regarding student experiences affirmed that the RDR program increased the possibility of students taking up practice after graduation in rural and Indigenous communities (p. 223). In placement assessment tasks, students reflected on the discrepancy between the oral health status of the rural and metropolitan communities, and appreciated the opportunity provided to build skills in teamwork in these longer placements. Abuzar et al. (2009) suggests that post-placement strategies need to be adopted to attract and retain dental professionals in rural areas (p. 223). Johnson and Blinkhorn (2012) also support such programs as 80% of Australian dentists practice in the major metropolitan cities. They suggest that one of the roles of clinical placements should be to encourage students to consider working in a rural location after graduation. Post-placement interviews with faculty at James Cook University indicate that students who participated in the rural placement program were clinically more advanced post-placement than those students who did not (p. 106). Evidence presented by Cleland et al (2015) suggest students’ abilities to engage effectively in these experiences will shape their effectiveness. Yet, given that not all students are able to secure these kinds of placements or have equal capacities to utilise these experiences that post-practicum processes that involve those who are not able to access these experiences are likely to be helpful for those

students, and if facilitated in some way are likely to generate optimal outcomes for all students.

In researching Iranian students' preference for medical specialities, Amini et al. (2013) refer to an Australian study (p. 198) by Pailhez et al. (2005), indicating that although 14.5% of medical students voiced an interest in psychiatry as a specialty, only 1.4% of students named it as their first choice. Amini et al. (2013) note research indicating medical students' attitudes toward psychiatry as a career option is highly dependent on placement experiences and the quality of those experiences is a powerful predictor of students' decision to choose a career in psychiatry (cf Sierles et al., 1995). Although Amini et al.'s (2005) research results did not correlate with the findings in the literature, he suggests that more experience with actual psychiatric work might persuade students to consider psychiatry as a possible vocation. Bernsten and Bjørk's (2010) report similar findings with aged care nursing being less preferred as a career choice by nursing students. Norwegian students consider clinical studies in nursing homes to be extremely challenging, particularly first-year students with limited training in this area (p. 18). The results of Bernsten and Bjørk's study indicate that "major work is needed to develop the learning context for students in nursing homes" (p. 17) and present this area of nursing as a positive choice for graduate students. It is these challenging experiences in and uninviting workplace contexts that may be mediated by post-practicum experiences.

Impact of post-placement intervention strategies

The potential impact of reflective practice as post-practicum experiences was highlighted by Curran (2004) who described the Clinical Legal Education program offered through the School of Law and Legal Studies at La Trobe University. By engaging in 'de-briefing' sessions, students reflected on their experiences in weekly placements in the most disadvantaged communities in Victoria. The aim of the program was for students to work for positive change in the community through initiating actual law reform (p. 300), thereby generating their own post practicum interventions. Forde and Meadows (2012) report the dimensions of student workplace learning in journalism internships in Queensland, and the resulting impact on their journalism education. Feedback from peer reflective sessions, individual interviews, and student focus groups contributed to evaluating the relevance of content and effectiveness of assessment, as well as industry partners' reflections on the dimensions of internships (p. 4); in turn prompting refinements to the current model. Forde and Meadows (2012) advocate the use of interventions before, during, and after practice-based experiences, as 'workplace variability' (i.e. vastly different individual experiences in similar placements) an important factor highlighted in reflective sessions, and which influenced curriculum design and pedagogy.

Findings from case studies at Flinders University (Macleod et al. 2012), have resulted in interventions such as the development of models for effective practice, and working towards providing a more effective overall experience for International students. Maire (2010) reports on four post-work placement seminars for students of Chiropractic practice

at Murdoch University who completed a voluntary placement in Siliguri, India. In the seminars, students shared experiences of different practices encountered whilst on placement, made explicit links between their WIL experience and theory in academic classes, and challenged students to think critically about existing models of chiropractic practices. Results of this intervention support post-practicum seminars as promoting greater integration between academic and workplace settings, and effective and critical learning experiences for chiropractic students.

Several studies underscore the importance of clinical work placements as vital components in the education of student nurses (Chan 2001a, Chan & Yip 2007, Hartigan-Rogers et al. 2007, Papathanasiou et al. 2014, & Ruth-Sahd et al. 2010). Clinical placements provide students with optimal opportunities to “observe role models, to practise by oneself, and to reflect upon what is seen, heard, sensed and done” (Chan 2001b, p. 447). Nash (2011) and Ralph et al. (2009) note that the ‘student voice’ is frequently missing from placement evaluations, and that clinical settings can be particularly challenging learning environments, as students “frequently find themselves involved in unplanned and often complex activities with patients” (Nash 2011, p. 1). Courtney-Pratt (2012), Nash (2011), and Peters et al. (2013) highlight mounting pressures on clinical placements as student enrolments in nursing courses continue to increase, and highlight that intervention strategies are required as a result of the shortage of these opportunities. Chan (2001a, 2001b, 2002) presents data from undertaking clinical placement in 14 metropolitan hospitals in South Australia. Using the *Clinical Learning Environment Inventory* (CLEI) students’ perceptions of the outcomes of their clinical placement strongly reflect the five areas of the CLEI - Individualisation, Innovation, Involvement, Personalisation and Task Orientation in providing positive clinical experiences. Findings from students’ post placement interviews suggest that clinicians’ management style and the provision of learning opportunities were more valued than teaching (2001b, p. 449) and that there were significant differences between students’ perceptions of the actual clinical learning environment and their preferred clinical learning environment (Chan & Yip 2007, & Papathanasiou et al. 2014). The results here provide a clearer picture of what constitutes quality clinical education from students’ perspective and can be utilised to develop better educational experiences.

Courtney-Pratt (2012) points to an identified gap between theory and practice in nursing education and suggests a new model of employment to increase the integration of hospitals and universities to close this gap. English (2014) notes that the ‘preceptor only’ model, which is frequently used in nursing work placements, contains many problems, especially those regarding student nurse assessments. These problems are due, in part, to the lack of continuity of assessors with an increasing part-time workforce. Nash (2011) also underscores the importance of practice-based experiences that give students the opportunity to “share, reflect and critically appraise their experiences” (p. 30), as central to developing their professional capacities, and that future intervention strategies should include peer mentoring, peer teaching, the development of clinical reasoning skills, and

critical reflection” (p. 31). Hartigan-Rogers et al. (2007) and Henderson et al. (2006) point to the importance of supportive learning environments, positive socialisation, and individualisation within placements, as their research reveals that positive experiences in nursing placements are related to “how valued and supported students feel than to the physical aspects of a placement itself” (p. 9). Personalisation was also a critical factor in the success of nursing placements in Midgley’s (2006) research with nursing students in the UK (no university specified). The most important factors in successful placement in Papathanasiou et al.’s (2014) study with nursing students in Greece (also utilising the CLEI) were participation, and a feeling of acceptance and ‘belonging’ to a group.

With regard to the training of dentistry students, Owen and Stupans’ (2008) research reveals a need for a stronger focus on outcomes-based programming within work placements with all stakeholders having a clear outline about what is to be achieved. Owens recommends a national repository of experiential placement learning and assessment tasks, “the development of standardised developmental descriptors related to competencies as applicable to university students at the novice and advanced beginner levels” (p. 11) and that collaborative engagement is utilised to identify “quality experiential placement success indicators in relation to preceptors, students, university, site and overall environment” (p. 11). Peters’ research with practice nurses revealed a need for further consultation and better communication with universities regarding the allocation of student placements, as poor organisation and communication between universities and clinical facilities greatly impacts the success of placements.

Post-practicum experiences

In sum, the search found that the quantum and extent of literature on post-practicum interventions was quite limited. Much of what is reported related to practices that could be used for a range of purposes and not specifically those associated with exploiting students’ post-practicum experiences. So, reflections on practice, peer-based reflections and use of logs were emphasised. However, some strategies such as de-briefs and feedback were features in this literature. From the available literature, four main themes emerged from this review:

- Work placements are highly valued by students, and seem essential for bridging what is referred to as theory and practice, and play a vital role in educating students to meet graduate outcomes and industry standards.
- However, students may experience cultural, religious, and ethical conflicts in their placements which can be stressful as students are often not provided ways to reconcile theory with diverse and unfamiliar situations in practice.
- Work placements play an important role in introducing students to non-traditional career options, such as remote and rural practice and aged care. Placement experiences provide important support for students who may choose these careers options.

- Reflection-in-action and reflection-on-action in the work place “plays a critical role in maximising learning potential” (Macleod et al. 2011, p. 32) and provides important information for academics; such as indicators of the success for placement programs and feedback for improving learning both in the work place and at universities.

What is noteworthy is that many of the areas referred to in the students’ survey (see below) were not addressed. Almost absent were the sets of concerns about classroom based activities (apart from Meadows and Forde (2012) and Maree (2010)). That is, the whole array of potential classroom-based activities were largely absent in the reported studies. All of this suggests that the kinds of projects that are being advanced through this project stand to make particular contributions.

It is anticipated that this review and these literature will be helpful in shaping the project.

The list of references is provided in Appendix One



Possible models for post-practicum interventions

As previously circulated, in preparing for or planning your projects, it might be useful to consider some possible kinds of purposes for and interventions that were developed as we prepared the survey instrument. Here, slightly tweaked, are the statements of educational purposes, considerations of timing and kinds of interventions included in the survey.

Educational purpose(s)

Some educational purposes for participating in post-practicum activities are:

- discuss experiences during placement you found worthwhile/interesting/confronting
- linking what is taught at university to practice
- learn more about preferred occupation
- learn about other students' experiences during their practicum
- learn how preferred occupation is practiced in across different work settings
- secure feedback on your workplace experience
- linking work experiences with course work and assessments
- identify how these experiences can make you more employable
- make informed choices about career, work options or specialisations
- make choices about selection of subsequent courses/majors
- improve the experience for the next cohort of students undertaking practicum in that venue

Timing of interventions

Options for timing of interventions include:

- early in the program, perhaps after your first practicum
- after having had a number of practicum experiences
- towards the end of your course
- after every practicum experience

Interventions

Options for interventions include:

- one-on-one with teacher
- one-on-one with a peer (another student)
- one-on-one with a more experienced student
- small self-managed groups (3 to 6 peers) across your course
- small groups (3 to 6 students) facilitated by more experienced students
- small groups (3 to 6 students) facilitated by teachers/tutors
- shared classroom-based group activities
- whole of class activities (i.e. large group processes 10-100 students)
- small groups (3 to 6 students) meeting periodically facilitated by placement supervisor
- individually completed activity with feedback from teachers
- presentations to peers
- as part of usual scheduled class activities

- a special event each semester
- something students should organise
- on-line with peers
- on-line moderated by tutor

Many of these factors have been the subject of the analysis of the survey data that is provided below.



Survey data and initial findings

It was decided early in the project to administer a survey of students to ascertain their interests in the educational purposes of post-practicum interventions, the frequency and means by which these interventions might be enacted. A survey was developed through many iterations and rounds of development by members of the project group. Ethical clearance was sought and secured for the use of the survey as an on-line survey across the participating universities and this was administered through Lime Survey and participation was supported in particular ways across the discipline areas and institutions.

Respondents

A total of 484 student informants were recorded as responding to the survey by the 31st January 2016. However, of these only 399 provided workable responses. Consequently, for an initial descriptive account of these data, it was decided to draw upon only those responses. The data presented here are from that cohort. The respondents to the survey were drawn from across the six participating higher education institutions, if Tasmania is included as Helen Courtney-Pratt has transferred to that institution from Newcastle. As indicated in Table 1, the respondents providing complete responses were from across these institutions, which are listed in the left hand column, the frequency in the middle and percentage in the right hand column.

Table 1: Institutional affiliation

HIE	Frequency	%
Griffith	103	28.5
Notre Dame	81	22.4
Newcastle	56	15.5
Monash	50	13.8
Tasmania	50	13.8
Flinders	21	5.8
Total	364	99.8

A range of demographic information about these informants indicates the factors associated with the composition of this overall cohort. Firstly, they reported being overwhelmingly female (80%), with only 19% indicating being males (see Table 2). In this table, the reported gender of the informants is indicated in the left column, the frequency in the middle and percentage in terms of the overall cohort of informants in the right column. This distribution of the gender may well reflect the large numbers of respondents indicating they came from Nursing (90% Female) and Midwifery programs (see Table 4), yet whilst this distribution may be representative of those programs it fails to be representative of the gender distribution across Australian higher education. The respondents' reported age groupings are well distributed, with a predominance of those at school leaving age through to the late 20s. However, there were reasonable samples from each age grouping. So, as indicated in Table 3, there is representation across age groupings in the complete responses to the survey. The age groupings, which are those used by the Australian Bureau of Statistics, are listed in the

left column, the frequency of responses to those groupings in the middle column and percentage of respondents reporting that age grouping in the right column.

Table 2: Respondents' gender

Gender	Frequency	%
F (Female)	296	80.2
M (Male)	69	18.7
Total	365	98.9

Table 3: Respondents' age groupings

Age groups	Frequency	%
15-19	20	5.4
20-24	130	35.2
25-29	81	22.0
30-34	45	12.2
35-39	28	7.6
40 and over	60	16.3
Total	364	98.7

Table 4: Respondents' disciplines

Discipline	Frequency	%
Nursing	162	43.9
Medicine	109	29.5
Midwifery	38	10.3
Dietetics	28	7.6
Physiotherapy	15	4.1
Pharmacy	2	0.5
Occupational Therapy	5	1.4
Speech Pathology	3	0.8
Education	3	0.8
Exercise Science	2	0.5
Social work	1	0.3
Total	368	99.7

The disciplines represented in this cohort are uneven, with Nursing (44%), Medicine (30%), Midwifery (10%), the strongest elements, followed by Dietetics (8%) and Physiotherapy (4%), as indicated in Table 4, which reports the discipline in the left column, the frequency in the middle and percentage of informants in the survey in the right column. They were small numbers of respondents from Pharmacy, Occupational therapy, Speech Pathology, Education, Exercise Science and Social Work. This finding indicates that the survey responses represent perspectives from some disciplines more than others. Hence, the findings here are offering general patterns of responses that some disciplines can claim as being more predictive of what is occurring in their programs than others.

The respondents represent perspectives of those who attended higher education as those full and part-time students with the former predominating (Table 5) and also those of both domestic and international students (Table 6), again with the former predominating. In

addition, and as indicated in Table 7, those reporting as both undergraduate and postgraduate students are represented in the respondents. Moreover, these informants report participating in the range of year levels of study (i.e. 1 through to 5), with the majority having had more than one year of study as indicated in Table 8. Hence, the survey respondents are from students to report participation as the full and part-time students, from Australia and overseas and both at undergraduate and postgraduate levels of study, and across a range of year levels, but broadly representing students who have had more than a year of higher education.

Table 5: Respondents' mode of study

Mode of study	Frequency	Percentage
Full-time student	337	91.3
Part-time student	24	6.5
Total	361	97.8

Table 6: Respondents' nationality

Student nationality	Frequency	Percentage
Domestic student	341	92.4
International student	17	4.6
Total	358	97

Table 7: Respondents' level of study

Level of study	Frequency	Percentage
Undergraduate student	233	63.1
Postgraduate student	123	33.3
Total	356	96.5

Table 8: Respondents' year of study

Year	Frequency	Percentage
1 st	44	11.9
2 nd	99	26.8
3 rd	173	46.9
4 th	27	7.3
5 th	21	5.7
Total	364	98.6

In sum, the respondents offer perspectives from a cohort of informants that are distributed across 6 higher education institutions and from different disciplines in healthcare and from both genders, diverse age groups and at different year levels in their higher education programs. These data, that can be collectively considered or analysed on the basis of any of the variables set out above. Here, these variables are presented as descriptions of frequencies and percentages of respondents to offer broad sets of findings about student preferences and goals. Further analyses can be undertaken on the basis of specific variables, however.

Educational purposes

The survey respondents were asked to indicate their preferred reasons or educational purposes for participating in post-practicum interventions. They were given a list of options for educational purposes that were identified during the development of the survey, and asked to indicate levels of interest in each of these purposes (i.e. *Very interested; Some interest; Interest; Not interested; and Irrelevant*). They were also given the option of stating other purposes and indicating a level of interest at the end. Table 9 presents the frequencies of responses to these options in terms of numbers and percentages for each of the stated purposes and categories of interest. The data has been arranged hierarchically in this table on the basis of levels of frequencies of reported *Very Interested*.

Table 9: Respondents' preferred educational purpose

Educational purpose (aggregated Very Some interest, and Interest N/ %)	Very interested N (%)	Some interest N (%)	Interest N (%)	Not interested N (%)	Irrelevant N (%)	Total N (%)
make informed choices about career, work options or specialisations (341/92.4)	190 (51.5)	96 (26)	55 (14.9)	15 (4.1)	3 (.8)	359 (97.3)
identify how these experiences can make you more employable (339/91.9)	180 (48.8)	104 (28.2)	55 (14.9)	16 (4.3)	3 (.8)	358 (97)
secure feedback on your workplace experience (337/91.3)	179 (48.5)	101 (27.4)	57 (15.4)	19 (5.1)	1 (.3)	357 (96.7)
learn more about your preferred occupation (338/91.6)	179 (48.5)	98 (26.6)	61 (16.5)	22 (6)	0 (0)	360 (97.6)
linking what is taught at uni to practice (341/92.4)	172 (46.6)	113 (30.6)	56 (15.2)	17 (4.6)	1 (.3)	359 (97.3)
learn how your preferred occupation is practiced in across different work settings (335/90.3)	168 (45.5)	104 (28.2)	63 (17.1)	22 (6)	0 (0)	357 (96.7)
linking your work experiences with course work and assessments (333/90.1)	150 (40.7)	118 (32)	65 (17.6)	25 (6.8)	2 (.5)	360 (97.6)
improve the experience for the next cohort of students undertaking practicum in that venue (335/90.3)	150 (40.7)	115 (31.2)	70 (19)	16 (4.3)	3 (.8)	354 (95.9)
discuss experiences during placement you found (332/89.9)	140 (37.9)	109 (29.5)	83 (22.5)	25 (6.8)	0 (0)	357 (96.7)
worthwhile/interesting/confronting (332/89.9)	140 (37.9)	109 (29.5)	83 (22.5)	25 (6.8)	0 (0)	357 (96.7)
learn about other students' experiences during their practicum (327/88.6)	110 (29.8)	114 (30.9)	103 (27.9)	31 (8.4)	1 (.3)	359 (97.3)
make choices about selection of subsequent courses/majors (312/84.6)	136 (36.9)	109 (29.5)	67 (18.2)	22 (6)	19 (5.1)	353 (95.7)

Across the cohort of respondents, the most frequently preferred purposes, indicated a strong interest in learning more about their selected occupation, including specialisms, and how these students performance within the workplace can lead them to being employable. Hence, feedback on individual performance, how that relates to occupational requirements and learning more about the occupation were purposes that these students

reported as being the strongest focus of the interest. In many ways, these responses are not surprising and are aligned with why practice-based experiences have been included in higher education courses. Just below these key interests were those associated with performance within that program, with interests associated with linking what had been experienced in the work setting with what they need to learn for their preferred occupation, and linking those experiences with their course requirements and assessment.

Also associated with the educational provision was about improving the experiences for subsequent cohorts of students, which was of less interest than the items above. The three least valued purposes were those associated with enriching the learning from specific kinds of experiences, making informed choices about subsequent subject selection, and, finally, an interest in learning about other students' experiences during practicums. So, the overall interest in enhancing understanding about the occupation and individuals' engagement with it, then improving the educational experience. The least level of interest was on utilising both their own and others' experiences to enhance educational processes. All of this is a little concerning given that this project is strongly focused on the latter. That is, using students' experiences, their sharing, comparing and critical engagement to enrich the quality of the learning outcomes.

Respondents were also asked to indicate preferences amongst a set of desired outcomes from the practicum experiences identified during the development of the survey (Table 10), again, responding on a scale (i.e. *Essential, Very important, Important, Not very important, and Irrelevant*). Their responses are presented in Table 10 with a data ranked again in terms of frequencies, with the items having the highest frequency in *Essential* at the top of the table and then moving down to those which are seen as being less essential or important. The most frequently desired outcome reported was the development of capacities for coping in the workplace, followed by input they would receive from a practising professional as part of their practicum experience, and then providing feedback to the practicum site about the kind of experiences that were provided.

The next ordering of responses are those associated with elements of the course (i.e. content, assessment and engagement with peers, and with as many perspectives as possible, and through some kind of structured experience. So, these suggestions indicate a desire for there to be structured experiences whose focus relates their experiences to the content of the course, their assessment and this is to be realised through engagement with other students and their perspectives. Of less interest was engaging with students at different stages in their programs, and activities that are organised by students to promote learning. Of interest, given the context of a healthcare orientation of the respondents, there was the lowest interest in engaging with students from other disciplines.

Table 10: Respondents' desired outcomes

Features (aggregation of Essential and Very Important n/%)	Essential N (%)	Very important N (%)	Important N (%)	Not very important N (%)	Irrelevant N (%)	Total N (%)
development of coping skills for the workplace (262/71)	157 (42.5)	105 (28.5)	61 (16.5)	19 (5.1)	3 (.8)	345 (93.4)
input from a practicing professional (251/68)	127 (34.4)	124 (33.6)	78 (21.1)	12 (3.3)	3 (.8)	344 (93.2)
opportunity to provide feedback to the practicum site about student experiences (239/64.8)	121 (32.8)	118 (32)	86 (23.3)	17 (4.6)	4 (1.1)	346 (93.8)
focussed on work activities of selected occupation (225/34)	113 (3.6)	112 (30.4)	92 (24.9)	24 (6.5)	2 (.5)	343 (65.9)
focused on course content (223/60.4)	116 (31.4)	107 (29)	90 (24.4)	29 (7.9)	5 (1.4)	347 (94.1)
linked to assessment items (218/59.1)	111 (30.1)	107 (29)	76 (20.6)	49 (13.3)	5 (1.4)	348 (94.4)
engaging with students at similar stages in the program (206/55.8)	95 (25.7)	111 (30.1)	117 (31.7)	16 (4.3)	4 (1.1)	343 (92.9)
opportunity to share and discuss with peers (182/49.3)	88 (23.8)	94 (25.5)	127 (34.4)	25 (6.8)	7 (1.9)	341 (92.4)
engaging as many students' perspectives as possible (185/50.2)	80 (21.7)	105 (28.5)	116 (31.4)	35 (9.5)	5 (1.4)	341 (92.5)
opportunity to share and engage in structured consideration of experiences (176/47.7)	75 (20.3)	101 (27.4)	122 (33.1)	35 (9.5)	7 (1.9)	340 (92.2)
teacher-led and implemented (170/46.1)	72 (19.5)	98 (26.6)	142 (38.5)	26 (7)	5 (1.4)	343 (93)
engaging with students at different stages in the program (147/39.9)	50 (13.6)	97 (26.3)	109 (29.5)	74 (20.1)	10 (2.7)	340 (92.2)
student-led and implemented (99/26.8)	37 (10)	62 (16.8)	127 (34.4)	102 (27.6)	13 (3.5)	341 (92.3)
engaging with students from other disciplines (87/23.5)	30 (8.1)	57 (15.4)	84 (22.8)	130 (35.2)	42 (11.4)	343 (92.9)

Of course, these analyses are just patterns across the entire cohort. Further analyses based on cross tabulations of these two measures of educational purposes and desired outcomes, and the occupational disciplines, plus other measures such as year of study, for instance. Overall, what these undifferentiated data suggest that the respondents are keen to use post practicum experiences to understand more about their preferred occupations, and how they are progressing towards being prepared adequately to participate in the work, including learning more about the work, its variations and how this might inform their actions as students.

Interventions

The respondents were also asked about their preferences for the timing and focus of post practicum interventions. In the first question they were asked to indicate their preference for the timing of these interventions (i.e. *early in the program, after a number of practicum experiences, towards the end of the course or after every practicum experience*).

Respondents could indicate more than one preference. Table 11 presents these data, which are ordered hierarchically with those most frequently preferred being placed at the top of the table. The informants could indicate more than one preference. The strongest preference was for that to be interventions after every practicum (58%) followed by a preference for early in the program, perhaps after the first practicum (46%), after a number of practicum experiences (40%) and towards the end of the course (25%). It would seem that from these responses the students would welcome interventions after practicums, particularly at the beginning of the program with a suggestion that these are seen as being highly valued as students come to engage with practicum experiences, and seeking guidance and feedback.

Table 11: Respondents' preferred timing for post-practicum interventions

Timing of interventions	N	%
after every practicum experience	215	58.3
early in the program, perhaps after your first practicum	170	46.1
after having had a number of practicum experiences	147	39.8
towards the end of your course	93	25.2

In terms of the kinds of interventions the informants would engage in preferred to engage in, some patterns emerge from these data. The students were presented with a list of interventions and as to indicate their preference (i.e. *High preference, Okay, Low preference* and, with an option to indicate they *Would not participate*). Table 12 presents the responses to these options. In the left column are the kinds of interventions, with also a measure of aggregating *High preference and Okay*. Although ordered hierarchically based on the frequencies of respondents indicating '*High preference*', the columns to its right present frequencies and percentages of measures of interest. It is also worthwhile considering measures which the respondent suggested those in which they *Would not participate*.

Throughout, so far, the assumption has been that through ranking the responses in terms of frequencies of preferences that patterns of desire processes and outcomes could be identified. However, these data also provides a different kind of preference associated with students being resistant or reluctantly engage. This measure is important because student engagement is essential in such activities, even when they are teacher or expert-led. The strongest patterns of preferred interventions are those associated with small group work being led by either teachers or placement supervisors. This is followed by one-on-one interactions with teachers. Then, there is a considerable gap to the next set of preferred responses. Across these options, peer-organised or led processes are far less well supported, and generate the highest frequency of reluctance by the informants. Those

responses associated with *Would not participate* offered a similar pattern, with ‘Online with peers’ (114-30.9); ‘on-line moderated by tutor’ (107-29); ‘something students should organise’ (105-28.5); ‘presentations to peers’ (99-26.8); and ‘as part of scheduled classes’ (24-6.5) indicating interventions that would meet with high levels of reluctance, when taken as being reported by at least 25% of the respondents (see also bolded in Table 12).

Table 12: Respondents’ preferred kinds of interventions

Intervention (aggregation of High preference and Okay/%)	High preference N (%)	Okay N (%)	Low preference N (%)	Would not participate N (%)	Total N (%)
small groups (3 to 6 students) facilitated by teachers/tutors (299/81.1)	184 (49.9)	115 (31.2)	38 (10.3)	11 (3)	348 (94.4)
small groups (3 to 6 students) meeting periodically facilitated by placement supervisor (280/75.8)	154 (41.7)	126 (34.1)	54 (14.6)	11 (3)	345 (93.4)
one-on-one with teacher (259/70.2)	146 (39.6)	113 (30.6)	79 (21.4)	12 (3.3)	350 (91.9)
shared classroom-based group activities (219/59.4)	104 (28.2)	115 (31.2)	93 (25.2)	32 (8.7)	344 (93.3)
small groups (3 to 6 students) facilitated by more experienced students (238/64.5)	106 (28.7)	132 (35.8)	75 (20.3)	33 (8.9)	346 (93.7)
one-on-one with a more experienced student (261/70.7)	106 (28.7)	155 (42)	65 (17.6)	19 (5.1)	345 (93.4)
small self-managed groups (3 to 6 peers) across your course (231/62.6)	90 (24.4)	141 (38.2)	84 (22.8)	31 (8.4)	346 (93.8)
individually completed activity with feedback from teachers (198/53.6)	89 (24.1)	109 (29.5)	112 (30.4)	32 (8.7)	342 (92.7)
one-on-one with a peer (another student) (214/58)	68 (18.4)	146 (39.6)	97 (26.3)	36 (9.8)	347 (94.1)
as part of usual scheduled class activities (216/58.6)	66 (17.9)	150 (40.7)	101 (27.4)	24 (6.5)	341 (92.5)
a special event each semester (169/45.8)	48 (13)	121 (32.8)	130 (35.2)	42 (11.4)	341 (92.4)
whole of class activities (i.e. large group processes 10-100 students) (137/37.1)	38 (10.3)	99 (26.8)	132 (35.8)	70 (19)	339 (91.9)
on-line moderated by tutor (108/29.2)	33 (8.9)	75 (20.3)	125 (33.9)	107 (29)	340 (92.1)
on-line with peers (95/25.7)	27 (7.3)	68 (18.4)	131 (35.5)	114 (30.9)	340 (92.1)
presentations to peers (101/27.3)	23 (6.2)	78 (21.1)	146 (39.6)	99 (26.8)	346 (93.7)
something students should organise (82/22.2)	19 (5.1)	63 (17.1)	152 (41.2)	105 (28.5)	339 (91.9)

Overall, the data across the entire cohort indicates that interventions in small groups led by the person in authority/standing, but outside of student group is the most highly preferred option. This is consistent with some of the findings above about students wanting feedback from that practicum from either a teacher or a workplace supervisor.

Student nurse responses

As the largest single cohort of respondents, it is worth considering the responses from nursing students, to identify particular patterns pertinent to these students and their educational processes, and also to compare the findings with the entire cohort. There were a total of 161 complete responses identifying as nursing students whose data was calculated to be complete. Below, some selected findings are drawn from that student cohort.

Table N 1 presents the year level of study reported by these informants. What this table indicates is that it is students in the second and third year of their nursing programs who largely responded to the survey. It seems reasonable to assume that these students have had practicum experiences, not the least because in Table N7 indicates high numbers of practicum experiences across this cohort. So, it would seem here that the informants have had practicum experiences and are reporting in an informed way on the basis of those experiences.

Table N1: Year of study

1 st N (%)	2 nd N (%)	3 rd N (%)	4 th N (%)	5 th N (%)	Total
24 (15)	66 (41.3)	68 (42.5)	0	2 (1.25)	160 (100)

The modes of study reported by these students in Table N2 are overwhelmingly as full-time students with 88% of this cohort indicating that mode of study, and the remaining 12% indicating they were part-time students. In Table N 3, the nationality of the students is reported with again, even more overwhelmingly these students presenting as being domestic (99.5%) and a total of seven students across this cohort reporting as being international (4.5%). Also overwhelmingly the students reported in Table N4 as being undergraduate students (95%) and only seven students or 5% reporting being postgraduate students.

Table N2: Mode of study

Full-time student N (%)	Part-time student N (%)	Total
137 (88)	19 (12)	156 (100)

Table N3: Student status

Domestic student N (%)	International student N (%)	Total
149 (95.5)	7(4.5)	156 (100)

Table N4: Level of study

Undergraduate student N (%)	Postgraduate student N (%)	Total
148 (95)	7 (5)	155 (100)

The age cohort of the students is quite diverse, yet with key clusters around the 20 to 40 year age grouping (42%) and 40 years and over (26%), as is reported in Table N5. This suggests that a combination of student experience, which includes school leavers as well as mature age students, likely bring particular kinds of attributes, including those who have undertaken vocational qualifications in nursing and may already be enrolled nurses or nursing assistants. The reason for mentioning this is that such students may well have had extensive work experience prior to undertaking the course and engaging in university organised practicum experiences and in ways distinct from school leavers.

Table N5: Age groupings of student cohort

15-19 N (%)	20-24 N (%)	25-29 N (%)	30-34 N (%)	35-39 N (%)	40 and over N (%)	Total
9 (6)	67 (42)	12 (8)	15 (9)	14 (8)	42 (26)	159 (99)

Table N6: informants' gender

F (Female) N (%)	M (Male) N (%)	Total
144 (90)	16 (10)	160 (100)

The gender of the informants is overwhelmingly female (90%) and with 16 informants (10%) reporting as male, as presented in Table N6.

Practicum experiences

The respondents were asked to indicate the number of practicums included in the current degree program. They reported this against a scale which had numbers from zero through to 10 or more. As indicated in Table N7, the nursing students indicated a wide range of practicums would occur in that current higher education program. The most frequent numbers were 5 and 6 practicums (25.4% and 22.8%, respectively) with those reporting 7 and 8 practicums also at reasonable numbers (14.3% and 17.6%). In this way, the students indicate that practicum experiences are an inherent part of their programs and that all report having practicums as part of their degree programs.

Table N7 Number of practicums included in your current degree program

1 N (%)	2 N (%)	3 N (%)	4 N (%)	5 N (%)	6 N (%)	7 N (%)	8 N (%)	9 N (%)	10 or > N (%)	Total
5 (3.3)	1 (.65)	0	13(8.5)	39(25.4)	35(22.8)	22(14.3)	27(17.6)	2 (1.3)	9(5.6)	153

The informants were also asked to make preferences in terms of their interest in particular educational purposes to be realised through post-practicum interventions. The survey comprised a list of different purposes and respondents were able to indicate along the continuum of interest (i.e. *Very interested*; *Some interest*; *Interest*; *Not interested* and *Irrelevant*). In Table N8, the responses to these items are presented. The table has been

organised with those purposes reported most frequently on the Very interested measure are at the top of the table and progress downwards to lower reporting measure.

Table N8: Respondents' preferred educational purpose

Educational purpose	Very interested N (%)	Some interest N (%)	Interest N (%)	Not interested N (%)	Irrelevant N (%)	Total
make informed choices about career, work options or specialisations	103 (65.6)	29 (18.5)	21 (13.4)	4 (2.57)		157
identify how these experiences can make you more employable	101 (64.3)	35 (22.3)	17 (10.8)	4 (2.57)	-	157
secure feedback on your workplace experience	100 (63.7)	34 (21.7)	18 (11.5)	5 (3.2)	-	157
learn more about your preferred occupation	99 (62.7)	38 (24.1)	17 (10.8)	4 (2.5)	-	158
learn how your preferred occupation is practiced in across different work settings	96 (61.1)	42 (26.8)	16 (10.2)	3 (1.9)		157
linking what is taught at uni to practice	92 (58.2)	43 (27.2)	21 (13.3)	1 (.63)	1 (.63)	158
make choices about selection of subsequent courses/majors	87 (55.8)	42 (26.9)	22 (14.1)	2 (1.3)	3 (1.92)	156
improve the experience for the next cohort of students undertaking practicum in that venue	86 (54.8)	44 (28)	23 (14.6)	3 (1.9)	1 (.64)	157
linking your work experiences with course work and assessments	84 (53.2)	46 (29.1)	20 (12.7)	7 (4.4)	1 (.63)	158
discuss experiences during placement you found worthwhile/interesting/confronting	75 (47.8)	46 (29.3)	32 (20.4)	4 (2.57)	-	157
learn about other students' experiences during their practicum	66 (41.8)	43 (27.2)	39 (24.7)	9 (5.7)	1 (.63)	158

The four most frequently reported purposes are associated with using these experiences to make informed choices about nursing work and also to become more employable, which extended to securing feedback about performance and also learning more about the occupation of nursing. In the fifth most ranked response, this emphasis extends to understanding how the occupation is practised across different healthcare work settings. So, the first and most weighted responses were those associated with using these experiences to understand the nature of nursing work and how these respondents can learn and work towards being employable and effective in those settings. Following this, the purposes were associated with making links between what is taught within the University and practice settings and also making choices about courses and specific majors (i.e. educational specialisms). The next most frequently reported purpose was to provide feedback to improve the experiences for the next group of students undertaking practicum in that particular workplace setting. Then, perhaps surprisingly, given the emphasis on pragmatic concerns about employment and employability above, there was the concern about linking the work experience with the requirements within the respondents' higher education courses (relevance to coursework and assessments).

Also, surprisingly was the relatively low ranking of using post-practicum experiences that were seen to be worthwhile, interesting or confronting to reconcile those experiences with the study focus of their courses and are personal responses to what they had witnessed or experienced directly. Finally, and most lowly ranked, was the purpose of learning about other students experiences during their practicum.

The respondents were also asked to indicate their preference for the timing of any post practicum intervention using a set of prompts comprising “early in the program, perhaps after your first practicum”; “after having had a number of practicum experiences”; “towards the end of your course” and, “at every practicum experience”. Table N9 presents the responses to this item of the 161 students by providing the frequency of responses to each prompt and also indicating a percentage Association with each response. As can be seen in this table, the most frequent response is that students prefer to have post-practicum interventions after each practicum experience with 66.5% of the respondents reporting this preference. The second most frequent preference was early in the program after the first practicum (38.8%). Least preferred was having an intervention towards the end of the course. What such figures are taken to indicate is the perceived importance of such interventions and to achieve the kind of educational purposes that were advanced in Table N8 above. This then leads into a consideration of what kind of interventions are the students requesting and those to be held frequently. This is discussed in Table N10.

Table N9: Timing of interventions (n=161)

Timing of interventions	Yes N (%)
after every practicum experience	107 (66.5)
early in the program, perhaps after your first practicum	62 (38.8)
after having had a number of practicum experiences	44 (27.3)
towards the end of your course	27 (16.8)

The nursing students were also asked to indicate their preference for post-practicum interventions. They were provided with a list of interventions, and also the option to add their own preferred approach, not contained within the list. They were requested to weight each of these suggestions in terms of their preferences: *High preference; Okay; Low preference and, Would not participate*. The aim here was to capture not only their most preferred options but also to identify interventions that would meet with resistance or reluctance, and which might require particular kinds of actions to enact should they be seen important enough. The findings are reported in Table N10 which indicates the interventions and the level of preference in terms of frequency of responses and also the percentage of that response. The listing of options has been ordered in terms of those which were reported with the highest level of frequency in High preference from the top of the table to those with the lowest frequency at the bottom.

Table N10: respondents' preferred approach to post-practicum interventions

Intervention	High preference N (%)	Okay N (%)	Low preference N (%)	Would not participate N (%)	Total
small groups (3 to 6 students) facilitated by teachers/tutors	82 (55.4)	45 (30.4)	15 (10.1)	6 (4.5)	148
small groups (3 to 6 students) meeting periodically facilitated by placement supervisor	72 (49)	50(34)	20 (13.6)	5 (3.4)	147
one-on-one with teacher	66 (43.7)	47 (31.1)	32 (21.2)	6 (4)	151
shared classroom-based group activities	56 (37.8)	42 (28.3)	36 (24.3)	14 (9.5)	148
small groups (3 to 6 students) facilitated by more experienced students	49 (33.3)	55 (37.4)	26 (17.7)	17 (11.6)	147
individually completed activity with feedback from teachers	45 (31.3)	41 (28.4)	47 (32.6)	11 (7.6)	144
one-on-one with a more experienced student	37 (25.5)	68 (46.9)	31 (21.4)	9 (6.2)	145
small self-managed groups (3 to 6 peers) across your course	37 (25)	67 (45.3)	33 (22.3)	11 (7.4)	148
as part of usual scheduled class activities	32 (22.2)	60 (41.7)	40 (27.8)	12 (8.3)	144
one-on-one with a peer (another student)	29 (19.5)	61 (40.9)	45 (30.2)	14 (9.4)	149
whole of class activities (i.e. large group processes 10-100 students)	26 (18.1)	40 (27.8)	48 (33.3)	30 (20.8)	144
a special event each semester	23 (16)	46 (31.9)	51 (35.4)	24 (16.7)	144
on-line moderated by tutor	13 (9.2)	30 (21.1)	53 (37.3)	56 (39.4)	142
on-line with peers	8 (5.6)	28 (19.7)	55 (38.7)	51 (35.9)	142
presentations to peers	8 (5.5)	31 (21.2)	61 (41.8)	46 (31.5)	146
something students should organise	6 (4.2)	23 (16.2)	66 (46.5)	47 (33.1)	142

The first of four preferences most frequently reported in this table indicates that these nursing students most value small group work that involves or is led by individuals who are either teachers or practicum supervisors. There is a pattern here which seems consistent with some of the findings about educational purposes reported in Table N8. That is, a concern to secure advice and feedback from individuals who seem to be informative and authoritative. The fifth most proposed intervention is of small group processes led by a more experienced student, again emphasising a desire to be engaged in discussion and informed by a more informed partner than through peer interactions alone. This pattern then continues with individual activities and feedback from a teacher, and on to one-on-one with more experienced students. The first instance in peer support processes is the eighth most preferred option and only 25% of the students see this as a highly preferred option.

The ranking of preferences then move through one-on-one with peers and large group activities. At the same time, the percentage of students claiming they would not participate in particular interventions increases as the high level of preference decreases.

For instance, whilst 18% of the students suggests that whole group activities is a highly preferred option more than that number (20.8%) claim they would not participate in such an activity. This pattern then follows with a special event each semester being supported by 16% of the students whilst 16.7% of the students suggest they would not participate; online activity is mediated by a tutor attracts only 9.2% of responses as a high preference but 39.4% of the students (almost 4 times that number) suggests they would not participate in this activity. Then, online interaction with peers and presentation to peers are supported by only 5.6% and then 5.5% of the students respectively were as 35.9% and 31.5% of the students indicate they would not participate in such activity. Then, in reflecting the strong emphasis above on guidance and advice from the authoritative figure, the responses to the option for students to organise something themselves attracts only 4.2% as a high preference and 33.1% as something in which students suggest they would be reluctant to participate.

Some further analyses of the nursing data were undertaken to discern whether there are difference amongst age grouping of nurses in their interest in the purposes for post-practicum interventions. This analysis was prompted by presence of distinct clusters of ages in the nursing informants and knowledge of there being two distinct pathways into nurse training. Two tables were generated through a three way cross-tabulation to provide a descriptive analysis of any patterns of differences in frequencies of preferences for interventions the purposes of educational.

Table N12, presents the data about preferences of purpose for Nursing students as delineated on the basis of age groupings as gathered in the survey. Table N11 below presents the same data but collapsed into three age groupings (i.e. 15-24; 25-34 and 35 and above years). In each of these tables the respondents indication of interest is against the labels of *Very interested* (v); *Some interest* (s); *Interest* (i); *Not interested* and *Irrelevant* (n), except the latter two are presented under *Not interested*.

Common across all three age groups was the high frequency of Making informed choices about career, work options or specialisation. So, regardless of age grouping and level of clinical or other kinds of work experience, the informants want to use these experiences to inform future planning it seems. Seemingly different amongst the three age cohorts were the following. The younger (school leaver?) gave high priority to wanting to learn about their selected occupation, which was of less interest to older students, perhaps for reasons mentioned above (i.e. older students having already had some experience of this work). Securing feedback on clinical performance was more highly valued by the younger cohorts than the older one, perhaps again because of the lack of procedural experiences and capacities. Yet, shared across both the younger and older cohorts was high levels of interest in processes informing about employability

Table N11 – frequencies of preference for educational purposes across age groupings

Purpose	15-24 n (%)				25-34 n (%)				35+ n (%)			
	76 (48)				27 (17)				56 (34)			
	V	s	i	n	v	S	i	n	v	S	I	n
discuss issues that you found interesting	31	28	13	2	12	6	9	0	31	11	9	2
linking what is taught at uni to practice	38	26	10	0	14	9	4	0	41	7	6	1
learn more about your preferred occupation	45	22	8	0	18	5	3	2	36	11	5	2
learn about other students' experiences during their practicum	25	21	23	4	13	6	7	1	28	15	8	4
learn how your preferred occupation is practiced in across different work settings	38	29	5	2	19	5	3	1	39	8	7	0
secure feedback on your workplace experience	41	20	5	0	20	3	3	1	36	11	5	1
linking your work experiences with course work and assessments	33	27	9	6	16	6	5	0	34	13	5	2
identify how these experiences can make you more employable	41	24	8	1	17	5	3	2	42	7	4	1
make informed choices about career, work options or specialisations	44	20	8	2	25	9	9	3	40	6	8	0
make choices about selection of subsequent courses/majors	38	23	9	1	15	6	5	1	36	8	7	2
improve the experience for the next cohort of students undertaking practicum in that venue	33	25	13	2	16	7	4	0	36	12	5	1

Note: labels of *Very interested* (v); *Some interest* (s); *Interest* (i); *Not interested* and *Irrelevant* (n), except the latter two are presented under *Not interested*.

Table N12 – Composite data of nursing students preferences for purposes of post-practicum interventions

Purpose	15-19				20-24				25-29				30-34				35-39				40+			
	n (%)				n (%)				n (%)				n (%)				n (%)				n (%)			
	9 (6)				67 (42)				12 (8)				15 (9)				14 (8)				42 (26)			
	v	s	i	n	V	s	i	N	v	s	i	N	v	s	i	N	V	s	i	n	v	s	i	n
discuss issues that you found interesting	5	2	1	1	26	26	12	1	7	1	4	0	5	5	5	0	9	3	1	0	23	8	8	2
linking what is taught at uni to practice	4	4	1	0	34	22	9	0	9	2	1	0	5	7	3	0	14	0	0	0	27	7	6	1
learn more about your preferred occupation	5	4	0	0	40	18	8	0	11	1	0	0	6	4	3	2	11	3	0		25	8	5	2
learn about other students' experiences during their practicum	2	2	3	2	23	19	20	2	7	3	2	0	6	3	5	1	9	3	1	1	19	12	7	3
learn how your preferred occupation is practiced in across different work settings	5	4	0	0	33	25	5	2	10	1	1	0	8	4	2	1	12	1	1	0	27	7	6	
secure feedback on your workplace experience	4	3	2	0	39	17	3	0	11	0	1	0	9	3	2	1	10	3	0	0	26	8	5	1
linking your work experiences with course work and assessments	3	4	2	0	30	23	7	6	10	1	1	0	6	5	4	0	12	1	0	0	22	12	5	2
identify how these experiences can make you more employable	5	2	1	1	36	22	7	0	10	0	1	1	7	5	2	1	12	2	0	0	30	5	4	1
make informed choices about career, work options or specialisations	5	2	1	1	39	18	7	1	16	7	6	2	9	2	3	1	13	1	0	0	27	5	8	0
make choices about selection of subsequent courses/majors	5	3	1	0	35	20	8	1	8	1	3	0	7	5	2	1	12	1	0	0	24	7	7	2
improve the experience for the next cohort of students undertaking practicum in that venue	4	4	0	1	29	21	13	1	8	1	3	0	8	6	1	0	11	2	0	1	25	10	5	0

Note: labels of *Very interested* (v); *Some interest* (s); *Interest* (i); *Not interested* and *Irrelevant* (n), except the latter two are presented under *Not interested*.

Post-practicum interventions

The following are some of key findings and deductions from the survey data.

1. Students are motivated to optimise the educational potential of their work experiences, albeit for diverse reasons.
2. There is an expectation by these students that their teachers or supervisors will play a role in this process through:
 - a. Engaging them in activities
 - b. Providing advice
 - c. Feedback on their performance and progress
3. They want interventions that lead to applicable (i.e. practical/tangible) outcomes related to their ability to practice.
4. They prefer that these interventions occur frequently (e.g. after every practicum)

A key educational question arising from such data is the degree by which and on bases is it appropriate to accommodate students' preferences or contest them. That is, whether the findings here suggest agendas and priorities that need to be addressed, or alternatively worked to overcome.

For instance, the findings on purposes identify issues and concerns that stand as bases to be addressed through educational (i.e. teaching and learning) interventions. However, some of the preferences for interventions indicate that these are preferences that need to be redressed and changed. For example, preferences for others to take action may work against those in which students should be engaging

Specific findings

Educational purposes

These students reported priorities for using the post-practicum experiences for learning more about:

- their particular occupation, including specialisms
- their performance within the workplace
- what can lead/assist them to being employable

The lowest level of interest was on utilising both their own and others' experiences to enhance educational processes. This is of concern, given the focus of this project is strongly focused on the latter. That is, using students experiences, they are sharing, comparing and critical engagement to enrich the quality of the learning outcomes. Such a project is made tough if students are reluctant to engage.

Hence, feedback on individual performance, how that relates to occupational requirements and learning more about the occupation were purposes these students reported as being the strongest focus of the interest.

Forms of interventions

The strongest patterns of preferred interventions are those associated with small group work being led by either teachers or placement supervisors. This is followed by one-on-one interactions with teachers.

Overall, the data across the entire cohort indicates that interventions in small groups led by the person in authority/standing, but outside of student group is the most highly preferred option.

All of these findings hopefully provide helpful guidance on how to proceed with the individual projects.



Project Outlines

	Project	Participants/contacts	Institution	Discipline
1	Post-Practicum Clinical Reasoning Oral Exam	Tracy Levett-Jones, Helen Courtney-Pratt and Natalie Govind	Newcastle	Nursing
2	Peer group simulation activity post-practicum	Helen Courtney-Pratt and Tracy Levett-Jones	UTAS/ Newcastle	Nursing
3	Post-practicum strategies to translate clinical experience to attributes of employability	Garry Kirwan, Neil Tuttle, Ben Weeks and Liisa Laakso	Griffith (AH)	Physiotherapy
4	Post-placement week – using students’ experiences to enrich understandings of distinct kinds of nutrition and dietetics practice	Lauren Williams and Lynda Ross	Griffith (AH)	Nutrition and dietetics
5	Post-practicum debrief focussing on the development of resilience and occupational identity	Andrea Bialocerkowski, Libby Cardell and Shirley Morrisey	Griffith (AH)	Speech therapy
6	Integrating the Employability Framework into Grad Dip of Exercise Science Post-Practicum Debrief	Kelly Clanchy; Grad Dip Ex Sci Teaching Team.	Griffith (AH)	Exercise Physiology
7	Individual student feedback: critical reflective piece of writing	Gary Rogers	Griffith	Medicine
8	Feedback from practicum using web-based engagements with peers	Julia Harrison and Liz Molloy	Monash	Medicine
9	Reflective learning circles	Julia Harrison and Liz Molloy	Monash	Medicine
10	Graduate entry students community practice/facilitating reflective group activities	Jenny Newton	Monash	Nursing
11	Midwifery continuity of care experiences: enhancing learning through reflective practice	Linda Sweet, Trudi Mannix, Kristen Graham, Janice Bass, Mary Sidebotham & Jenny Fenwick	Flinders/Griffith	Midwifery
12	SUCCEED 2.1: Learning circles to develop inter-subjectivity	Laurie Grealish, Lyn Armit, Thea van de Mortel and Marion Mitchell	Griffith/GCH	Nursing
13	Using programmed de-briefs to augment students’ experiences	Niamh Keane and Carole Steketee	Notre Dame	Medicine
14	Feedback strategies at end of practicum	Christy Noble, Lyn Armit, Leigh Collier and Christine Sly	GCH	Medical, Allied Health, Nursing, Midwifery

Projects: Principal focus for teaching and learning strategies and participants

	Project	Actors	Principal focus (Day One)	Implementation (Day Two)
1	Post-Practicum Clinical Reasoning Oral Exam -	Tracy, Helen & Natalie	Peer feedback	Approximately 100 second year undergraduate nursing students
2	Peer group simulation activity post-practicum	Tracy & Helen Newcastle - Nursing	Simulation – pre-brief activity	60 first year nursing students
3	Post-practicum strategies to translate clinical experience to attributes of employability	Garry K, Neil, Ben & Liisa, Griffith, Physiotherapy	Specific post-placement learning tasks	72 second year students
4	Using students' experiences to enrich understandings of distinct nutrition and dietetics practices	Lauren & Lynda, Griffith, Nutrition and Dietetics	Sharing and comparing group activities during week-long debrief event	All final year undergrad ND students
5	Debrief focussing on the development of resilience and occupational identity	Andrea, Libby & Shirley, Griffith, Speech therapy	Debriefing workshops	All first and second year masters students 35-40 per year)
6	Integrating the Employability Framework into Grad Dip of Exercise Science Post-Practicum Debrief	Kelly & Grad Dip Ex Sci Teaching Team	Enhancing debriefing sessions	20 students enrolled in
7	Individual student feedback: critical reflective piece of writing	Gary R, Griffith, Medicine	Reflective writing pieces based on critical observation task	150 final year medical, ~30 pharmacy, ~80 physiotherapy, ~20 exercise physiology, ~30 clinical psychology students
8	Feedback from practicum using web-based engagements with peers	Julia & Liz, Monash, Medicine	Online engagement with critical thinking, reflection and peer discussion	500 final year medical students via on-line forums
9	Using reflective learning circle post clinical placement	Julia & Liz, Monash, Medicine	Facilitated learning circles	120 final year medical students
11	Students discussing placement experiences through producing a	Jenny, Monash, Nursing	On-line discussion forums	60 masters level nursing practice students

	video clip			
12	Midwifery continuity of care experiences: enhancing learning through reflective practice	Linda, Trudi, Kirsten (Flinders), Janice, Mary & Jenny (Griffith) Midwifery	Reflective writing and group discussion	1 st year: 60 (approx.), 2 nd year: 60 (approx.) and 3 rd year: 40 (approx.) midwifery students
13	SUCCEED 2.1: Learning circles to develop inter-subjectivity	Laurie, Lyn, Thea & Marion, Griffith, Nursing	Facilitated student appraisal of practice	2 nd and 3 rd year nursing students (70-120)
14	Using programed de-briefs to augment students' experiences	Niamh & Carole, Notre Dame, Medicine	Debriefs of work activities	Two groups of 20 Fourth year medical students
15	Feedback strategies at end of practicums	Christy, Lyn, Leigh, & Christine GCH	Combination of self-evaluation and feedback from expert others	Three groups of 6-8 students from allied health, medical, nursing and midwifery

Project title: Post-Practicum Clinical Reasoning Oral Exam

Institution: The University of Newcastle

Staff involved:

Tracy Levett-Jones

Helen Courtney-Pratt

Natalie Govind

Students involved (kind, numbers, etc):

Approximately 100 second year undergraduate nursing students will be invited to participate in the pilot; participation is voluntary.

Purpose (problem being addressed – educational goal(s) to be achieved)

Nurses with effective clinical reasoning skills have a positive impact on patient outcomes. Conversely, those with poor clinical reasoning skills often fail to detect impending patient deterioration resulting in a “failure-to-rescue”. It is vital for students to understand the process and steps of clinical reasoning and demonstrate their ability to ‘think like a nurse’.

What is aimed to be achieved by providing post-practicum interventions for your students?

The aim of the oral exam is to provide opportunities for students to demonstrate what they have learned during their previous two weeks of clinical placement by describing how they would prioritise, plan and manage the care of four allocated patients using the clinical reasoning cycle as their organising framework.

How will you know whether you have achieved this goal?

The pilot will evaluate student performance in the clinical reasoning oral exam and students’ and staff perceptions of the value of this form of assessment will be explored.

Significance

Why is this goal (s) worth addressing?

Clinical reasoning is an essential skill for safe and effective nursing practice and this form of assessment offers a novel approach for assessing students’ skills in this area.

Procedures

What kind of post-practicum interventions will you probably adopt?

Students will be provided with a verbal clinical handover and the health care records of four patients. In the oral exam that follows students will be required to describe how they would prioritise, plan and manage the care for the four patients using the clinical reasoning cycle as their organising framework. The exam will be marked by an allocated academic staff member.

Why this kind of intervention?

Written assessment items are not always an effective approach for students to demonstrate understanding and application of clinical reasoning in an authentic manner. However, an oral exam has the potential to facilitate students’ ability to describe their practice more fully without the constraints

imposed by formal academic writing.

When and how this will be enacted (i.e. what you will do, time lines)?

Dates (approx.)	Action	By whom
July 2016	Ethics submission Development of evaluation survey	Tracy Levett-Jones
September 2016	Recruitment of students and staff for the pilot	Tracy Levett Jones and Natalie Govind
October - November	Pilot takes place	Natalie Govind
November 2016	Data Analysis	Tracy and Helen
December 2016	Reporting	Tracy and Helen

What data will be gathered to ascertain student processes and outcomes?

Surveys with closed and open ended questions and focus groups.

How will this data be gathered and analysed?

On completion of the oral exam students will be invited to complete a short evaluation. In addition, they will be invited to participate in focus groups. Staff will also be invited to participate in focus groups. Qualitative data will be thematically analysed and quantitative data will statistically analysed.

Project title: Peer group simulation activity post-practicum

Institution: University of Tasmania (in collaboration with University of Newcastle)

Staff involved: UoN: Tracy Levett-Jones and; UTas: Helen Courtney-Pratt, John Cooper and Danielle Williams

Students involved (kind, numbers, etc):

Approximately 60 first year undergraduates will participate in a peer group simulation experience and associated debrief; participation is voluntary. They will comprise two groups of 15 during each cycle.

Purpose (problem being addressed – educational goal(s) to be achieved)

The purpose of the simulation is to provide an opportunity post-practicum to apply, explore, recognise, and consolidate learning that has resulted from participation in clinical practice. The focus is on communication skills and clinical safety through undertaking a patient assessment during the simulation. We have elected to focus on first year students immediately following their first clinical placement, a time recognised as challenging not only in relation to application of clinical skills but also communication and exposure to complex workplace cultures, which may each impact on attrition, future placement experiences and academic progress.

What is aimed to be achieved by providing post-practicum interventions for your students?

The aim of the pilot simulation is to enable exploration of a clinical scenario consistent with a typical placement experienced. In a safe supported environment students can both explore past events (reflection on practice) and reconsider outcomes and alternate actions. Providing an opportunity to explore a scenario immediately following placement will allow students to consider what they might do differently in future placements (reflection for practice). This approach is suitable for health care undergraduates and could be extended to a multidisciplinary simulation following the pilot.

How will you know whether you have achieved this goal?

Successful delivery of the simulation. Analysis of outcomes will inform ongoing development of the simulation.

Significance

Why is this goal (s) worth addressing?

Patient safety can be negatively impacted by poor communication between health care professionals and between health care professionals and care recipients. As such it is an important professional skill and one that is relevant throughout the undergraduate degree and in future practice. In simulation much of the key learning occurs in debrief where critical reflection, led by experienced facilitators allows a safe environment to explore the interaction and application to patient safety and communication.

Procedures

What kind of post-practicum interventions will you probably adopt?

Preparation: students will commence the simulation with a pre-brief (10 minutes) that includes highlighting confidentiality, and explaining the expected behaviours and approach to simulation. The scenario will focus on an older person (played by a live actor) who is being admitted to a general ward following a fall at home.

Simulation: Following pre-brief students will volunteer for roles in a group scenario where each pair (5) are required to undertake a component of admission screening, e.g.: medication, skin integrity, falls risk

assessment and delirium screen guided by current protocols in place in NSW/TAS public hospitals. The remaining students will act as observers who will contribute to feedback during debrief.

Debrief is the final component of the simulation where the clinical reasoning cycle will be utilised to guide the reflection on and learning from the simulation experience. The skill of reflection and use of clinical reasoning is critical to the safety of patients and to the continuing professional development of nurses well after graduation. Undergraduates will also be asked to reflect on the links between theory and practice and how they informed the simulation experience.

Why this kind of intervention?

Participation in the post practicum simulation will allow students to draw on their placement experience and previous learning to enhance application of theory into practice.

When and how this will be enacted (i.e. what you will do, time lines)?

Dates (approx.)	Action	By whom
June 2016	Ethics submission	John Cooper/ Danielle Williams
July 2016	Recruitment first year undergraduates	John Cooper/ Danielle Williams
September 19 th -23 rd 2016 October 3 rd – 7 th 2016	Cycle one simulation delivery Cycle two simulation delivery	UoN/UTas academic staff
November 2016	Data Analysis	All
December 2016	Reporting	All

What data will be gathered to ascertain student processes and outcomes?

The simulation participants and observers will complete the CARE inventory tool, and Satisfaction with Simulation Experience Scale (SSES), both are validated instruments. The simulation will be recorded and analysed.

How will this data be gathered and analysed?

The CARE inventory and SSES will be completed immediately post-simulation and descriptive statistics will be generated from analysis. Video recordings of the simulation and debrief will allow thematic analysis, which will add to the depth of data and understandings of the impact of the intervention.

Project title: Demonstrating employability for physiotherapy job applications by translating clinical experiences into employable attributes

Institution: Griffith University, School of Allied Health Sciences, Physiotherapy Program

Staff involved: Mr Garry Kirwan – Physiotherapy Clinical Education Manager (Project Lead)

Dr Neil Tuttle – Senior Lecturer

Dr Liisa Laakso – Associate Professor

Students involved and Program: Masters of Physiotherapy program

Year – 2nd year students

Number – 73 students

Purpose

Physiotherapy has a long history of incorporating WIL into its programs under the term ‘clinical placement’. At present, students enrolled in the Griffith University Masters of Physiotherapy program undertake 27 weeks of assessable, full-time clinical practicum. Clinical placements are integrated throughout the program. The program currently provides a comprehensive suite of pre-placement planning (briefing and preparation) as well as post-placement reflective practice sessions. Aligning with the pedagogical philosophy of the program, these sessions are designed to scaffold onto the students’ previous learning to develop their clinical capabilities as they progress through the program.

The objectives of the pre-placement sessions are firmly focused on the student’s readiness for placement and the development of the professional and clinical skills through experiential learning. Post-placement interventions have focussed on extending the learning from clinical experience as a transition to the next stage of the students on campus learning. However, linking these skills to attributes of employability (such as the ability to effectively communicate, work autonomously or show leadership) has not been a part of the program to date. Furthermore, student feedback has highlighted a perceived lack of readiness to successfully use their clinical experience to demonstrate job suitability when transitioning from university to vocation.

Therefore, our aim is to develop a set of post-placement learning tasks that are focused on students’ translation of previous clinical experiences into attributes for new graduate employment. In line with current professional practice the modalities to be utilised will be the writing of job applications and mock interviews based on key selection criteria typically found in new graduate applications.

How will you know whether you have achieved this goal?

Qualitative evaluation of the project will be in the form of determining student perceptions of the value of such session through facilitated focus groups. In addition, gain feedback on methods to improve the effectiveness of future post-placement activities

Quantitative evaluation will determine the change in students’ perceived confidence in applying for new graduate physiotherapy positions. Furthermore, student success in applying for new graduate positions at the completion of the course can be compared to previous student cohorts.

Significance

A primary goal of students graduating the Master of Physiotherapy program is to gain employment within the profession and preferably a position to which they aspire. Therefore, developing methods that enhance graduate employment success are essential to a quality program. Furthermore, graduate employability is a critical factor to the Master of Physiotherapy reputation and future recruitment of students

Procedures

Second year students returning from their second clinical experience will undertake a task involving a written application for a new graduate physiotherapy position. Students will be provided multiple options that represent various clinical areas and settings for students to select a position that is most appealing to them.

Using an online platform (such as Smart Sparrow) students will be required to complete various employment related tasks (e.g. address selection criteria, write a cover letter etc) relevant to the type of position they select. The students will be required to draw on experiences gained through their previous clinical placement to form the basis of their application.

Students will be divided into groups based on the position they select, which will be facilitated by a person with experience in employing graduates in the relevant sector. A review of the applications by both peers and facilitators will form the basis of discussion and feedback. Students will then attend a facilitated group session that is designed to discuss the attributes that were most desirable from an employment perspective and explore the reasons behind such decisions. On completing the sessions, students will outline key attributes that need to be developed and set goals for their next clinical placement to assist in achieving these skills.

In the second iteration of the project, after completing subsequent clinical placement, students will be asked to complete the same task drawing on the feedback from the first session as well as the incorporating additional skills and attributes developed in the intervening clinical placement. The task will be to write their application for a job that they wish to apply for as a new graduate physiotherapist.

Session one will be delivered in semester 1 2016 and the facilitated session will run during the scheduled clinical education debrief session. Session two will occur in Semester 2 2016 and will be incorporated into Clinical Conference as an assessable item.

What data will be gathered to ascertain student processes and outcomes?

Qualitative evaluation of the project will be in the form of determining student perceptions of the value of such session through facilitated focus groups. In addition, gain feedback on methods to improve the effectiveness of future post-placement activities

Quantitative evaluation will determine the change in students' perceived confidence in applying for new graduate physiotherapy positions. Furthermore, student success in applying for new graduate positions at the completion of the course can be compared to previous student cohorts.

Additional measures to assess outcomes may include conducting thematic analysis or text matching analysis to identify common words and phrases that effectively demonstrate attributes that meet key selection criteria

Proposed Costing

4 facilitators with experience in recruitment of graduate physiotherapists

- Representative from Private Hospital, Public Hospital, Private Practice and community sector
- Read and provide feedback on approx. 20 student applications
- Facilitate a 2 hour focus group to discuss desirable attributes from applications
- Participate in mock interviews (approx. 1 day per facilitator)

NB: There are current staff that would have experience in some of these roles and it may not need external input. However, having external input would be desirable

Project title: Reflections and Future Directions: Making the Transition from Dietetic Interns to Accredited Practising Dietitians

Institution: Nutrition and Dietetics, School of Allied Health Sciences

Staff involved: Nutrition and Dietetics Placement teaching team (Program Convenor, Domain Leads and Placement Academic)

Students involved: Final year Bachelor of Nutrition and Dietetics students who have just successfully completed 20 weeks of their final professional placement

Purpose (problem being addressed – educational goal(s) to be achieved)

Most of the practicum in the Bachelor of Nutrition and Dietetics sees students placed in hospital in pairs, away from the majority of their cohort. It occurs at the end of the degree program, and historically the students only returned from placement to the University as a group for a single day to each deliver a five minute presentation on their experiences. This left the teaching team unable to prepare students for making the transition to the workforce, and meant that students lacked the opportunity to formally and collectively reflect on their learning in the field.

In 2015 the Post-Placement Day was extended to a week, with some opportunity for reflection and an emphasis on employment skills. Feedback from students has been positive, but the event would benefit from redesign in order to better address the goal of reflection and integration of learning.

The title of this project reflects the transitions that dietetic students can make to the role of health professional by reflecting on their fieldwork learning in a post-practicum intervention.

The aims of the intervention are to:

1. Assist students in processing their experiential learning and in order to integrate it with their learning from other sources such as their theoretical knowledge base using the model of Kolb's Learning cycle
2. Facilitate their identification of future learning goals for continuing professional development according to the program of the Dietitians Association of Australia necessary for their attainment of Accredited Practising Dietitian status
3. Provide students with opportunities to translate their coursework and practicum experience into marketable skills to enhance their employment opportunities

How will you know whether you have achieved these goals?

Goal 1: Students will complete a written reflection as part of the workshop that will be assessed to examine learning integration.

Goal 2: Assess the learning contracts submitted by the end of the workshop and follow up with graduates to measure participation in the Accredited Practising Dietitian Program

Goal 3: Assess Curriculum Vitae of students before and after participating in the workshop (short-term) and measure employment success (longer term).

Significance

This project has the potential to enhance the University based learning of students about to graduate, to apply this learning in development of lifelong learning skills, and to enhance graduate employability. As health professionals in an evidence-based field, continuing professional development (CPD) is vital to high quality patient outcomes. In Dietetics, CPD is a professionally audited but self-directed process, and students need to make the transition from having their learning directed by academics to directing their

own learning as graduates. Enhancing employability of graduates, and thus the reputation of the University, is worthwhile for the current and future students.

Procedures

What kind of post-practicum interventions will you probably adopt?

We will continue with a post-placement workshop model, where all the students will return to the University as a cohort for one week together. The workshop will be redesigned on pedagogic principles, with more emphasis given to the reflective learning aspects, especially through small group discussion with peers. The CV writing component will be moved to earlier in the degree to allow more time in the week for reflection (Days 1 and 2) and for presentations by Dietitians in different domains of practice (Day 3). The Accredited Practising Dietitian component (half of Day 4) and Interview preparation and practice component (half of Day 4 and Day 5) will still be included.

Why this kind of intervention?

The students will have been relatively isolated from their peer group and from the academic teaching team while on placement. The face-to-face format will allow enhanced communication, and the small group format of the reflective component will build trust and honesty necessary to debrief over what may have been difficult experiences (for example, many of our students have never visited a hospital, yet are likely to experience patient death and dying while in the acute care setting). Attendance face to face will also enhance networking and create a realistic environment for the practice job interviews.

When and how this will be enacted (i.e. what you will do, time lines)?

The first cohort of students will return to the University at the end of June, 2016.

We will commence work in February to revise the Post-Placement week program and materials, and to engage and train group facilitators.

Evaluation materials will be developed at the time of program planning.

An evaluation report will be completed by the end of July.

What data will be gathered to ascertain student processes and outcomes? How will this data be gathered and analysed?

- Process evaluation to assess satisfaction with workshop materials and delivery will be conducted at the end of each workshop day using Survey Monkey
- Impact and outcome evaluation will be conducted by:
 - Written reflection completed by students after participation in small group discussion to examine learning integration.
 - Learning contracts will be completed by students using the format of the Dietitians Association of Australia.
 - Graduates will be surveyed to measure participation in the Accredited Practising Dietitian Program and employment outcomes
 - Students will complete a Curriculum Vitae after a CV writing workshop conducted prior to placement, and again after participating in the workshop
 - Measure employment success (longer term).

Project title: Enhancing professional identify and resilience in Master-level speech pathology students.

Institution: Griffith University

Staff involved: Elizabeth Cardell, Andrea Bialocerkowski and Shirley Morrissey

Students involved: All Year 1 and 2 Master of Speech Pathology students enrolled in 2016 at Griffith (~35-40 students per year, in the 2-year graduate entry program)

Purpose Intensive professional preparation programs, such as the Master of Speech Pathology, require students to develop their professional identify, as well as knowledge, skills and attributes of the profession within a very short time frame (2 years). Students have reported high levels of stress associated with this accelerated learning trajectory that has focused on professional knowledge and clinical competencies. Although standardised tools have been developed and implemented to evaluate student competencies, no evaluation tool exists which focuses on important attributes, such as professional identity and resilience, which are known to enhance student outcomes and employability. Moreover, there is a paucity of evidence on the development and impact of professional identity and resilience in Master-level students. Professional identify is developed over the course of study and consists of a range of beliefs and attitudes about the chosen profession, its boundaries and interactions alongside other professionals.¹ Resilience can be defined as the ability to cope with life's uncertainties and challenges, and to be able to rebound quickly to a positive, productive state.² Arguably, resilience is a corner stone of being able to handle the demands of higher education as well as those associated with employability and the workplace. This proposal is novel and will systematically track the development of professional identity and resilience, to identify points of vulnerability where targeted interventions may enhance these important attributes, and student outcomes.

The **aims** of the study are, thus, to: 1) Track students' perceived levels of professional identity and resilience across the Master of Speech Pathology program to identify points of vulnerability following practicum experiences; and 2) implement post-practicum activities/workshops to build professional identity and resilience. Initially cross sectional and then longitudinal professional identity and resilience data will be collected to identify points of vulnerability pre-mid and post practicum. Anecdotal evidence suggest points of vulnerability occur following practical emersion. Post practicum workshops will be developed and implemented based on empirical evidence collected. The impact of these workshops will be evaluated using multiple methods, such as standardised questionnaires, focus groups and standard university data.

Significance

There is a paucity of evidence underpinning the development of attributes related to professional identity and resilience which are central to professional preparation programs. Historically, attrition, in the Griffith Master of Speech Pathology program, has been the greatest at the end of semesters 1 and 3. The data gathered will assist the provision of support to students in areas which are typically not inherently visible but are important to student outcomes and employability This in turn may aid in student retention. In the future, the activities/workshops developed as part of this project may become part of the "normal" curricula, as practicum de-briefing modules.

Procedures

The intervention proposed, i.e., debriefing workshops, will be based on the empirical data collected during this study. Debriefing workshops will be introduced at the end of each practicum and will provide guided opportunities for students to relate their experiences and perceptions around professional identity and resilience during their placement. The workshop format was chosen to facilitate deeper

levels of learning with peers in a safe and supported environment. During the workshop, students will develop individualised and explicit goals related to the development of their professional identity and resilience, which they will share with their next clinical educator in a well-established process, as part of their learning contract.

Timeline

Jan-Feb 2016	Ethics preparation submission & approval Workshop development (based on anecdotal evidence)		
March 2016	Data collection (pre-)	Year 1 & 2 students	Pre-practicum questionnaires
April 2016	Data collection (mid)	Year 1 & 2 students	Mid-practicum questionnaires
June 2016	Data collection (post)	Year 1 & 2 students	Post-practicum questionnaires; focus groups; debriefing workshops
July 2016	<i>Additional data analyses: Identification of additional vulnerability points or themes to inform further workshop development</i>		
August 2016	Data collection (pre-)	Year 1 & 2 students	Pre-practicum questionnaires
September 2016	Data collection (mid)	Year 1 & 2 students	Mid-practicum questionnaires
October 2016	Data collection (post)	Year 2 students	Post-practicum questionnaires; focus groups
November 2016	Data collection (post)	Year 1 students	Post-practicum questionnaires; focus groups; debriefing workshops
Dec – Feb 2017	<i>Additional data analyses & workshop development for 2017</i>		

Data collection

Pre-practicum paper-based questionnaires will include the standardised tools which evaluate students' perception of professional identity, resilience and anxiety levels, as well as custom-designed items which evaluate preparedness for the practicum, students' perceived level of competence in addition to . Mid-practicum questionnaires will include a small sub-set of questionnaires which were administered pre-practicum. Post-practicum questionnaires will mirror those used at the pre-practicum time point. In addition, focus groups will be conducted post practicum to gather rich data regarding experiences associated with developing professional identity and resilience. Volunteers will be sought for the focus groups, with representation across different caseloads and areas of practice. In addition, the level of student competence, as measured by the COMPASS (a standardised Australian speech pathology assessment tool which is routinely to evaluate the level of student competence at the end of the practicum) and standard university SEC / SET data will be used for triangulation in this study. Moreover, custom-designed questionnaires, containing closed and open ended items) will be used to evaluate the students' perception of the usefulness of the debriefing workshops.

Data analyses

Descriptive statistics will be used to describe professional identity, resilience and anxiety at each time point throughout 2016. Significant changes over time in professional identity, resilience and anxiety will be identified using parametric or non-parametric tests, depending on the normality of the data. Descriptive statistics will also be used to analyse the closed ended questions from the custom-designed survey evaluating the workshops. Descriptive content analysis will be used to identify themes from the focus groups and open-ended custom designed questionnaires, evaluating the usefulness of the workshops.

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Project Title: Integrating the Employability Framework into Grad Dip of Exercise Science Post-Practicum Debrief

Institution: Griffith University.

Staff Involved: Dr Kelly Clanchy; Dr Greg Reddan; Dr Surendran Sabapathy, Mr Nathan Reeves; Mrs Jane Desbrow; Mr Ganeshan Rao; Professor Andrea Bialocerkowski.

Students involved: 20 students enrolled in the Graduate Diploma of Exercise Science.

Purpose: This project aims to integrate the employability framework into the Grad Dip of Exercise Science (GDES), through the development of employability skills in the context of work integrated learning (clinical practicum). Achievement of this goal will result in the following proposed outcomes:

- Enhanced integration of theoretical and practical coursework in clinical practicum;
- Facilitation of stronger engagement in practicum activities and extra-curricular activities for career development;
- Development of a database of extra-curricular learning opportunities for career development in order to target student learning towards their intended career path;
- Improved student outcomes and satisfaction; and
- Identifying generic employability skills and provide a framework for the tailoring of their content to different streams (e.g., Exercise Science) to improve employability outcomes across the School of AHS.

How will you know whether you have achieved this goal?

Achievement of this goal will be evaluated in the following ways:

- Qualitative analysis through the use of validated employability measures including the Measure of Guidance Impact Scale^[1] and the Work Readiness Scale^[2];
- Quantitative analysis through closed (Likert-scale) and open-ended questions evaluating the effectiveness of post practicum debriefs to assist in career development, activities considered to be the most beneficial, perception of how the activities improved their employability and suggested workshops ideas for improved employability;
- Determination of students participation in self-initiated extra-curricular learning (e.g., independent study or work experience) through target survey questions immediately- and 6-months post intervention;
- Evaluation of engagement in online learning communities including discussion forums using statistics tracking feature in Blackboard;
- Evaluation of Student Experience of Course Forms including specific questions tailored to employability in addition to the standard university-wide questions; and
- Determination of the number of students who are working in the field 6-months post-graduation.

Significance:

Career development learning is proposed to “inform, guide and assist students to critically appraise not only the world of work, but also the specific occupation they have selected... and may be deployed to raise students’ awareness of employability and how to self-manage their studies and extra-curricular activities to optimise the employability.”^[3] The increased importance of integrating employability related activities into the curriculum is enforced by studies that indicate that economic motivation is more important than the pursuit of knowledge for students undertaking higher learning and that activities directed towards employment are increasingly expected of higher education courses.^[4] From these studies, it can be hypothesised that the inclusion of activities relating to employability will

promote higher student engagement in learning and increased student satisfaction. Preliminary research regarding the importance of employability activities for undergraduate students enrolled in Bachelor of Exercise Science at Griffith University has previously been undertaken (summarised below).^[5-7] Despite the perceived importance and benefits of these interventions for the students, this type of intervention has not been evaluated in students enrolled in the GDES, a program specifically tailored towards the profession of Exercise Physiology. The potential positive outcomes of this project have been summarised above.

Procedures: Currently GDES students attend practicum debrief sessions at the conclusion of each placement block. The content in these sessions is geared towards successful completion of Exercise Physiology ESSA accreditation application with minimal content relating to employability. This project aims to modify the content of these sessions to enhance the employability content. A summary of the major proposed changes is included below:

1. Collation of practicum supervisor interviews. To provide students with a better understanding of the requirements for undertaking clinical practicum and also the requirements to transition to an entry level practitioner, a series of semi-structured interviews will be undertaken with key external practicum providers from key service provision areas. The interviews will demonstrate what is expected of newly graduated exercise physiologists. These interviews will be placed on Learning@Griffith for students to review prior to undertaking clinical practicum. It is proposed that these interviews will allow students to identify skills achievable through curricular and extra-curricular means and hence begin to contemplate participating in extra-curricular activities tailored towards their chosen field. These resources will be available to the students through their program of study to keep revisiting and self-evaluating their progress.
2. Introduction of a pre-practicum briefing session. In this one-day briefing session, students will participate in workshops including: essentials of practicum (i.e. components relating to successful completion of practicum and accreditation processes); clinical reasoning; reflective writing; and introduction to resume writing (on the basis students will begin to develop their resume based on their experiences and current study and will continue to develop this resume while on clinical practicum). Students will be encouraged to submit a job of interest to identify essential and desirable selection criteria in order to identifying activities or experiences they wish to experience during the practicum period.
3. Introduction of online communities of practice and discussion forums. Discussion forums will be introduced where students are able to post questions regarding practicum, accreditation and extra-curricular activities identified or undertaken. Practicum staff will also use this forum to post job advertisements and training opportunities. Students can also use these forums to discuss their experiences about practicum or relating to particular clinical populations. Online communities will be developed in consultation with Blended Learning in order to promote maximal engagement.
4. Introduction of modules relating to career skills and career development. Introduction of these activities prior to- and post-practicum will allow students to: a) map their current skills and experiences and identify curricular and extra-curricular opportunities/ required areas for further career/ skill development; b) continue to develop their resumes and E-portfolios while engaging in practicum activities; and c) identify key practice areas of interest and tailor their documentation and extra-curricular learning towards this area.
5. Inclusion of modules relating to key practice based areas: A number of questions regarding the environments/ business models Exercise Physiologists work in, how to best market yourself and

legal requirements have been fielded by Graduate Diploma academic staff. This strategy allows this information to be communicated while students are engaging in the environments this information will ultimately be applied in.

6. Establishing communities of practice: Students are required to present a case study of interest in a workshop towards the end of the semester. It is proposed that implementing a more structured outline to this activity and including a clinical facilitator will improve the high-order learning outcomes of the students by facilitating problem-based learning. Additionally, it will provide students with practice regarding responding to panel questions and providing clinical practice based examples.

Why this kind of intervention?

Preliminary research by Reddan (2012) identified the five highest ranked employability related activities of perceived importance for Exercise Science students: gaining experience in being interviewed; developing job application writing skills; gaining insight into professional work; the enhancement of research and/or practical skills; and improved development of career path. As a result of participating in the employability interventions students perceived the following benefits: improved self-awareness (i.e., synthesising their key strengths, goals and motivations as they apply to job searching); improved opportunity awareness (i.e., demonstrating an understanding of the requirements of graduate recruiters); improved decision making (i.e., relating to self-awareness of different employment opportunities); and transitional learning (i.e., demonstrating understanding of effective job search strategies).^[7] The interventions contained in this study aim to build on this seminal work and contextualise the intervention to the field of Exercise Physiology.

The structure of this project and the activities included are also aligned with preliminary data from the Post-Practicum Survey Data administered through the *Augmenting Students' Learning for Employability through Post-Practicum Educational Processes* project. This survey indicated that 43.6% of students (most frequently selected option) would prefer employability interventions after every practicum experience with the activities included relating to: feedback regarding workplace experiences (46.2%); identification on how the experiences result in the student being more employable (44.6%); promoting informed decision making regarding career, work options or specialisations (44.6%); and learning more about the students preferred occupation (44.6%).

When and how this will be enacted (i.e., what you will do, time lines)? Students enrolled in the GDSE will undertake practicum from May-November 2016. Each student participates in 2 x 6 week placement blocks during this time. All students attend a compulsory practicum debrief session on the last Friday of each placement block, irrespective of whether they attended practicum during this block. This model aims to facilitate peer learning.

What data will be gathered to ascertain student processes and outcomes? Information regarding the intended outcome measures has been summarised above. Demographic information and participant information that may influence the effectiveness of the intervention will be collected including but not limited to previous work experience in the field and previous engagement with work readiness services. The quantitative analysis will be undertaken at two time points- immediately prior to the intervention and immediately post intervention in order to evaluate the outcome of the intervention. Qualitative data on student engagement will be collected immediately post-intervention and student employment outcomes will be collected 6-months post intervention. In addition to this analysis, the intervention will

be evaluated regarding its cost, successful implementation and any challenges or obstacles to be addressed.

How will the data be gathered and analysed? Ethical clearance will be secured from the Griffith University Human Research Ethics Committee. Both qualitative and quantitative data will be gathered using an electronic survey format for ease of student use. Demographic information regarding the participants of the study will be presented using means and standard deviations (continuous variables) or frequency and percentage (categorical variables). In order to evaluate the differences in the quantitative outcome measures pre and post intervention a dependent t-test (normally distributed) or Wilcoxon paired signed rank test (nonparametric equivalent) will be used. Categorical qualitative information will be presented using frequency and percentage. Short response answers will be evaluated using content analysis, with both key response themes and responses of interest presented. The results of this study will be submitted for publication to a peer reviewed journal.

References:

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Project title: Consolidating interprofessional collaborative practice understanding through critical observation during clinical placement

Institution: Griffith University

Staff involved: Prof Gary Rogers (medicine and interprofessional learning), Ms PC Chan (interprofessional learning), Dr Kathy Brotchie (medicine), Ms Fiona Ellem (pharmacy), Mr Gary Kirwan (physiotherapy), Dr Kelly Clanchy (exercise physiology), A/Prof Shirley Morrissey (clinical psychology) Prof Ruby Grymonpre (visiting professor in interprofessional learning) (+ possibly Ms Elizabeth Elder [nursing] and Prof Elizabeth Cardell [speech pathology])

Students involved: ~150 final year medical students, ~30 pharmacy students, ~80 physiotherapy students, ~20 exercise physiology students, ~30 clinical psychology students. (+ possibly nursing and speech pathology students)

Purpose

To consolidate student learning in relation to the understandings, skills and attitudes required for effective interprofessional collaboration that have been gained during health professional education, through a 'capstone' critical observation exercise

How will you know whether you have achieved this goal?

The activity is an assessment piece and so the assessment outcomes will measure fulfilment of the goal. Additionally, group interviews with volunteer students who have completed the assessment activity will be conducted to examine their experience of undertaking the activity and its subjective impact on consolidation of their learning.

Significance

Interprofessional collaboration capabilities are critical for effective professional practice in the health professions but have only recently been formally identified as learning outcomes to be met and assessed for health professional students. The Griffith University Implementation Framework for Interprofessional Learning specifies ten threshold learning outcomes to be fulfilled by all health professional graduates from the University, as well as a three-phase pedagogy to facilitate this learning. The first two phases (acquisition of 'health professions literacy' and participation in simulated interprofessional practice experiences) are already well under way for many health professional programs but the third phase (real patient or client care interprofessional practice experiences) and the assessment of higher order learning in this area have proven more difficult to implement. This proposal affords a realistic opportunity to utilise the placement in interprofessional teams that students already undertake to consolidate their learning and simultaneously to assess their achievement of higher order interprofessional learning outcomes through their critique of those teams.

Procedures

The activity is a piece of critical reflection writing based on student's observations of the interprofessional functioning of a team into which they have been placed. They are provided with details of the critical observation task prior to their clinical experiences and asked to observe the interprofessional function of one of the teams of which they have been part with the requirements of the task in mind. They will be asked to choose one interprofessional team into which they have been placed during the period and then note aspects of the team's functioning that represent effective and less effective collaborative practice, offering reasons for each evaluation on the basis of their understanding of interprofessional collaborative practice gained earlier in their programs. They will then

be required to make well-reasoned and feasible suggestions on how the collaborative practice of the team might be improved.

Why this kind of intervention?

Students in some professions (medicine in particular) undertake multiple, continuous practical placements in a wide variety of clinical settings. Consequently, large and small group activities are extremely difficult to organise across the whole cohort. This methodology is practically feasible and additionally is partially self-evaluative. It is intended both to bring about the consolidation of learning described, through placing the student in a critical posture, and also to assess the learning it has engendered. The requirement that students observe the team into which they have been placed 'from above' figuratively is intended to assist them to develop the ability to observe and resist the adverse effects of cultures in clinical environments that undermine collaborative practice in their future work.

When and how this will be enacted (i.e. what you will do, time lines)?

Students will undertake the activity during placements in the first part of 2016. In the medical program, and where possible in other health programs, the activity will be a compulsory, graded assessment piece, which is expected to engender student engagement with the task and convey the impression that interprofessional capabilities are taken seriously by the professions and the University.

What data will be gathered to ascertain student processes and outcomes?

The assessment pieces will be marked (with written feedback) in the second half of 2016 and additionally group interviews with volunteer students who have participated in the activity will be conducted after marking and feedback are complete.

How will this data be gathered and analysed?

Qualitative methodologies of a broadly phenomenological nature will be developed and utilised for both the assessment marking and analysis of transcripts of the group interviews.



Project title: Is time out good for time in? Exploring the use of web-based reflective activities to enhance clinical learning

Institution: Monash University

Staff involved: Dr Julia Harrison, A/Prof Liz Molloy, A/Prof Margaret Bearman and A/Prof Jenny Newton

Students involved: 500 final year medical students from Monash University (Australia and Malaysia).

Purpose

Medical students report feeling underprepared for clinical practice, and report a sense of being overwhelmed by the steep transition from the university to the workplace. With variable exposure to patients, clinical conditions, team members and supervisory styles, students may need some additional prompts, away from the 'bedside', to help them reflect on their learning experiences to better prepare them for practice. With a view to enhance students' reflective skills, and make the most of the learning experiences encountered in the complex workplace, a series of online reflective activities were established for final year medical students at Monash University.

Specifically the online reflective package aim to:

- Encourage students to make sense of recent workplace experiences and observations
- Encourage reflective practice (as a skill or disposition) beyond the online task and beyond the time of formal university education
- Cultivate peer discussion and normalise (or challenge) reactions to certain scenarios or encounters
- Stimulate critical thinking by comparing literature on key topics to their own experiences in the workplace
- Expose students to literature on professional issues in practice such as patient safety, professional dilemmas, team-based care, ethical decision making, etc
- Introduce complex concepts and aspects of work that are not traditionally taught – eg hidden curriculum (the ecology of the healthcare setting, socio-political influences on education and health care, team-based practices)
- Encourage students to observe the workplace with a critical eye (that is, to encourage consideration of multiple perspectives and to challenge established practices if there is evidence to suggest those practises might be improved)
- Encourage knowledge, attitudes and behaviours that promote patient safety

How will you know whether you have achieved this goal?

Individual student engagement in the discussions – beyond the minimum requirements of the task (tokenistic engagement)

A change in the complexity/'maturity' of students reflections from task 1 through to 7 throughout the year

Multiple peers respond to the online posts (evidence of engagement, again beyond the requirement to comment on one student's response)

Student evaluations of the online activities- did they like them, did they find them valuable, relevant, would they recommend them for the next cohort of students coming through or might there be alternative ways to better prepare them for clinical practice?

Significance

Studies have reported a link between individuals' clinical expertise and their capacity for reflection. The ability to reflect on one's own practice and the practice of others is key for lifelong learning and agile

and safe practice in the workplace. Some of the key, and growing concerns, around workplace education in medicine is the capacity of the system to train (or better, educate) students to become doctors. With increasing numbers of students, direct supervision opportunities are decreasing. This means that there can be less time for priming students before they watch or attempt clinical tasks, less time for feedback post task and less time for peers to debrief with clinical educators to make sense of their experiences in the clinical setting. Not only might this online reflective program enhance students' learning through supplementing what they see on the wards, it also may provide equity. The program provides a way to connect students who may be isolated, or who may have been exposed to a smaller mix of experiences compared to peers at other locations.

The other important facet of the online program to support clinical immersion is that it aims to promote the development of 'non-technical' skills and behaviours that will help with on the job learning. This content is not covered elsewhere in the program.

Procedures

Online peer activities on the Monash University Moodle Platform (see accompanying document 'online activities information for content'). In 2015, there were 6 activities. In 2016, we plan to include an additional 2 reflective activities (book ends) for students to write narratives about what they are looking forward to in relation to clinical practice, and what they are worried about in clinical practice. In the final reflective entry, they will be encouraged to look back to their ideas at the start of the year, and to comment if they have been any changes (why/why not).

Why this kind of intervention?

To achieve the objectives as per outlined in the Objectives Section.

In terms of web-based modality, this is a much more resource-efficient way to achieve this level of student engagement and 'teacher moderation' compared with face to face tutorials

The requisite peer engagement (students must commit their own response, and comment on one other student's response to complete the hurdle task) encourages learners to critically reflect on their own knowledge, values/ 'frame' and set of experiences.

When and how will this will be enacted (i.e. what you will do, time lines)?

Online activities refined and 'put up' March 2016. Student engagement in the activities May-Sept 2016

What data will be gathered to ascertain student processes and outcomes?

- 1) Student survey: evaluate the perceived value of the online reflective program in terms of preparing them for clinical practice (NB this data is available from 2015 with potential retrospective ethics, as well as planned prospective ethics approval for 2016)
- 2) Evaluate student online responses/posts (thematic analysis of their responses to prompts as well as the nature of the interactions between peers) Are there any changes to these responses (reflective maturity etc are the interactions more polite, less polite, what is the degree of peer challenge/ validation in the data set? Are there any cultural differences observed between the level of engagement of the type of topics students raise in the Australian and Malaysian cohorts?
- 3) Four focus groups with learners at the end of final year – finishing placements (heterogeneous, and 2 x Malaysian, 2 x Australian) to gain insight into their experience of the online learning program, and how the utility of this activity compared with other methods of learning throughout the medical program.

Analysis: Survey: Quant data- descriptive statistics (? Pooling of 2015 and 2016 data to raise the n), Qual data- thematic analysis (Miles and Huberman 2010) 2 independent researchers, Online posts: thematic analysis and positioning/interaction analysis for measuring nature/quality of peer engagement

Project title: Learning from practice...vicariously: What might reflective learning circles achieve in the workplace?

Institution: Monash University

Staff involved: Dr Julia Harrison, A/Prof Liz Molloy, Dr Fiona Kent, A/Prof Jenny Newton

Students involved: 120 final year medical students- undergoing 6 week placements

Purpose

Final year medical students at Monash University spend most of their final year on clinical placement as student interns. Each student will have a varied experience. For example, a surgery rotation could be in orthopaedics, neurosurgery, plastic surgery or general surgery. The students will all learn a great deal, but they will all learn different things.

Teachable moments will occur on the wards, but only for one student at a time. There will also be lots of time that is less rich with learning opportunity than would be ideal, such as clerical work. The aim of the reflective learning circles is to bring the students together once a week to share their teachable moments with colleagues. The aim of the activity is to improve learning efficiency by multiplying the learning of one student by 4 or 40 or more.

A secondary aim is to prime students to recognise teachable moments while on placement and encourage them to build on what they have learned in preparation for the session.

The activity would also provide an opportunity for exploration, clarification, explanation and extension from the clinician facilitator, about highly relevant issues/topics that arise.

How will you know whether you have achieved this goal?

Student feedback about the activity – evaluation form at the end of 6 weeks and a focus group with a researcher (not the facilitator of the reflective circles)

Teacher feedback about the activities

How useful did the students find the sessions?

What worked well?

How could the sessions be improved?

What was the most useful thing you learned today?

Did anything change about the way you approached your learning on placement as a result of the previous session(s)?

Do the students find it easier to identify teachable moments over the course of the 6 weeks?

Does the session run better if the students are given a broad topic to focus on – eg a mistake, something to do with prescribing, an interesting case etc. Does priming on the topic beforehand help?

Significance

Clinical placement time is a precious commodity, and therefore it is important to optimise the educational value from each experience. However, often clinical learning on placement is limited due to tasks being repetitive (e.g. holding retractors in surgery, filling in discharge summaries, clerical work) or in fact, there can be so much 'action' that students are not given enough time, or invitations to debrief on what they have seen, and how these new experiences might be incorporated into their notions of what it means to be a doctor. Reflective learning circles are a simple way to harness the teachable moments of one student and make them available to a larger group.

The content will be highly relevant because it relates directly to the students' experience and they will choose topics that are significant for them at their level of training.

Procedures

What kind of post-practicum interventions will you probably adopt?

Each week, for six weeks, while on placement, 40 students will come together for a one hour session. The students will be divided into 10 groups of four. Each student, in each group of four will take turns sharing something(s) they have learned during the previous week while on placement. This will take approximately 20 minutes. Then one student from each group will share something with the entire group of forty. This large group work will be facilitated by an experienced clinician who will optimize the learning through discussion, confirmation, clarification, sharing, extrapolation, exploration etc. This will be repeated for 3 consecutive groups of forty students over eighteen weeks.

Why this kind of intervention?

This modality privileges peer learning, active learning and reflection

Likely to be interesting and satisfying for the learners

May reduce the isolation and stress characteristically reported by clinical learners in UG medicine

Minimal preparation required for clinician facilitator

Allows for modelling of healthy teaching/facilitating behaviours (prompts, feedback etc) as well as promoting sensitive group dynamics

Cost effective (groups vs one-to-one conversations more resource efficient)

When and how this will be enacted (i.e. what you will do, time lines)?

There will be three x six week lots of 40 students rotating through Dandenong Hospital in the second half of 2016. Julia Harrison will be responsible for their weekly face to face teaching one afternoon a week. The rest of the time they will be on placement.

What data will be gathered to ascertain student processes and outcomes?

Survey data at the end of the placement

Focus group data (With independent FG facilitator – not JH)

Facilitator/teacher reflective audio diary at the end of each session.

How will this data be gathered and analysed?

Surveys will be distributed at the end of the six week block. Probably paper based.

Anonymous

Focus group conducted by a fellow researcher who is not part of the teaching team.

Thematic analysis

Triangulation of survey data, focus group data and facilitator observations/feedback about the sessions via the audio-diaries.

Project title: One week and sixty seconds of community health – what is learnt?

Institution: Monash University

Staff involved: A/Prof Jennifer Newton and Ms Susan Irvine

Students involved (kind, numbers, etc): Master of Nursing Practice (MNP) (graduate entry)
approximately 60 students

Purpose (problem being addressed – educational goal(s) to be achieved)

What is aimed to be achieved by providing post-practicum interventions for your students?

Currently the MNP students undertake just a one week clinical placement for community health and aside from asking to keep a clinical portfolio there is no post-practicum follow-up as to establish or share what they learnt through this very brief placement.

The aim of the post-practicum intervention is to provide an engaging student-led platform for sharing their key learning experiences of community health placement.

How will you know whether you have achieved this goal?

A short survey will be set up to elicit students' feedback on the intervention.

Through content analysis of the videos uploaded and forum posts.

Significance

Previous research has clearly identified that student nurses spend their first week assimilating into a new clinical setting and it is only in subsequent weeks that they are able to focus on their learning needs. To compound the current situation the community facilities the students attend are quite varied in what they might offer in terms of opportunities and engagement. Within the MNP program, this particular community health component has been problematic since the inception of the course in mid-2009.

Procedures

A discussion forum on the students' Moodle unit site that incorporates the student uploading a 60-second video clip sharing their personal learning experience of their placement.

Why this kind of intervention?

In teacher education, video has been used extensively to capture the complexities of learning to teach to assist teacher education students to develop and notice what is occurring in the classroom. An essential component of the use video has been to assist teacher students to develop their critical reflective skills.

The Master of Nursing Practice is a truncated graduate program and hence it is important to utilise the most pragmatic means for developing the students' skills in reflection on their learning. The registering board requires that nurses are competent reflective practitioners. Participation in a clinical practicum does not necessarily provide opportunities for students to develop their reflection skills (Nagle, 2009). Students need to be provided with opportunities to purposefully facilitate the development of these skills. My experience in teaching into the MNP program, the students seem to engage with material that is interactive and not too onerous. The MNP students have articulated in other teaching/evaluation projects due to the intense nature of the program that they constantly feel under pressure. It is anticipated that making a 60-second video on completion of their community

health practicum maybe an appealing interaction and provide a platform for students to engage in learning about the diversity in community health.

When and how this will be enacted (i.e. what you will do, time lines)?

To get a base understanding of MNP students' current experiences of the learning from this placement, an analysis of the summer semester (2015/2016) students' clinical portfolios will be undertaken.

Summer semester students will be invited in February to give permission to undertake an analysis of their community health clinical portfolios.

The focus of the analysis will be on a portfolio question: *'Reflecting on your personal objectives for the week what is the key learning that you are taking away with you?'* This is to explore how does a reflective question augment a clinical experience?

Analysis will be undertaken in March/April 2016 – this will guide the structuring of the post-practicum development of the on-line forum and video activity.

Second semester 2016 the MNP cohort undertaking the unit NUR5003 will be recruited to participate in a pilot post-practicum intervention.

Collection of data will occur in October/November on completion of NUR5003,

What data will be gathered to ascertain student processes and outcomes?

A survey will be utilised to determine students' processes. Monitoring of the Moodle site discussion forum (number of students' post) and reviewing of students' videos.

How will this data be gathered and analysed?

The survey will be done on-line using Qualtrics and data entered into SPSSv22 for analysis. Content and thematic analysis will be undertaken of the students' forum posts and videos.

Reference

Nagle, J. F. (2009) Becoming a reflective practitioner in the age of accountability. *The Education Forum*, 73, 76-86

Project title: Midwifery continuity of care experiences: enhancing learning through reflective practice

Institutions: School of Nursing and Midwifery, Flinders University and School of Nursing and Midwifery, Griffith University

Staff involved: Flinders University

- Associate Professor Linda Sweet
- Dr Trudi Mannix
- Ms Kristen Graham

Staff involved: Griffith University

- Ms Janice Bass
- Associate Professor Mary Sidebotham
- Professor Jenny Fenwick

Outline of collaboration

The named staff agree to collaborate on the OLT funded project aimed to understand how best to augment the educational worth of higher education students' experiences in workplace settings, through identifying, trialling and evaluating teaching and learning strategies that can be implemented after students have completed elements of those experiences.

The strategies that will be undertaken draw on work previously done at Griffith University with regard to developing students' capacity for reflective practice. Griffith University colleagues agree to share the Bass holistic model of midwifery reflection and the rubric developed to assess students' written reflections. The Flinders University colleagues will provide an evaluation of the Bass model of holistic midwifery reflection and the associated marking rubric through applying it in the midwifery program as detailed below. Griffith University agree to share de-identified examples of their students reflective writing with the research team for the purposes of marking moderation, as well as the data set of their reflective writing grades using the rubric throughout 2016.

It is acknowledged that the engagement with Griffith University is to be of mutual benefit through allowing any data generated to be used for the purposes of Janice Bass's PhD research which focuses on exploring the ways in which students develop their reflective practice.

Timeline

2016, semester one May

Griffith University to provide the marking rubric in full as well as the instructions or guidance provided for students for their reflective writing using the Bass model.

2016, semester one June/July

Flinders University and Griffith University undertake marking moderation with de-identified examples from both universities student cohorts across the three years.

Flinders University to modify the instructions and guidelines to students for their reflective writing, incorporating the Bass holistic model of reflective practice.

2016, semester one June/July/Aug

Flinders University to assess the quality of the written reflections from the midwifery students across all three years using the Griffith University marking rubric.

Griffith University to provide copies of marking rubric outcomes from the written reflections from the midwifery students across all three years for comparisons to be drawn.

2016, semester two possibly September or October

Griffith University to host focus group discussions with midwifery students about the ways in which they develop their reflective practice of their post practicum experiences. To be co-facilitated by the project lead, Linda Sweet, and Janice Bass, with the invitation being extended to Prof Stephen Billett.

Flinders University to host focus group discussions with midwifery students about the ways in which they develop their reflective practice of their post practicum experiences. To be co-facilitated by the project lead, Linda Sweet, and Janice Bass, with the invitation being extended to Prof Stephen Billett.

2016, semester two November/December

Flinders University to assess the quality of the written reflections from the midwifery students across all three years using the Griffith University marking rubric

Griffith University to provide copies of marking rubric outcomes from the written reflections from the midwifery students across all three years for comparisons to be drawn.

2017, semester one

Flinders University to amend the reflective practice processes based on the outcomes of the 2016 data collection

Flinders University and Griffith University staff to attend the project forum at Gold Coast campus in February 2017

Key responsibilities

Associate Prof Linda Sweet to retain leadership and control of the project at all stages.

Janice Bass to provide input into the questions for the focus group to enable collection of data relevant for her PhD.

Outcome agreements

Publications that are a direct result of the OLT project will be first authored by Linda Sweet.

Secondary analysis of the data for the purposes of Janice Bass's PhD will be first authored by Janice Bass.

Funding arrangements

- Current funding arrangement between Flinders University and Griffith University for the purposes of the OLT project to remain in place.
- Flinders University will employ a research assistant for the purpose of undertaking the marking of the reflective writing using the rubric, and associated project work as deemed relevant by A/Prof Sweet. Any associated work requested of the research assistant, to be approved by Linda Sweet.
- Funding is available for the transcribing of all focus group discussions data.
- Funding is available for the travel arrangements for A/Prof Sweet to visit Griffith University, and for Ms Janice Bass to visit Flinders University for the purposes of conducting the focus group discussions.
- The only additional work requested of Griffith University is the time taken to collate and provide copies of the marking rubrics, and for the planning and conduct of focus group discussions. Some funding can be made available to cover the costs of these if necessary, including refreshments etc for the focus group discussions.

Project title: SUCCEED 2.1: Learning circles to develop inter-subjectivity

Institution: Gold Coast Health and Griffith University

Staff involved: Laurie Grealish (Griffith University & Gold Coast Health), Lyn Armit (Gold Coast Health), Thea van de Mortel (Griffith University), and Marion Mitchell (Griffith University & Princess Alexandra Hospital).

Students involved: Bachelor of nursing students in years 2 and 3 (n=70-120).

Purpose: The Collaborative Clusters Educational Model (CCEM) provides the foundation for this project. CCEM is a hospital-led program of learning support for newly qualified nurses and nursing students from participating universities and technical colleges. In the CCEM, nursing students are integrated into clinical work units, as a member of the interprofessional team. Nursing staff members allocate students work to complete, based upon students' specific learning objectives, year level, and the opportunities afforded by the workplace. The Clinical Facilitator (CF) provides support for student learning across several clinical units.

In the CCEM, students learn through guided learning where they work with experienced nurses. Nursing staff use established strategies such as modeling, guided practice, monitoring process and gradual withdrawal of direct guidance (Billett 2001; Collins, Brown & Newman 1989; Rogoff 1995). The CFs carry responsibility for establishing the learning curriculum, recommending ordered work activities with low consequences when errors occur to those work activities where errors can be high (Billett 2002), based on students' progress in the bachelor's program. They also provide advice on workplace pedagogies to registered nurses, and are responsible for student assessment, including assessing students' understanding of practice.

The CCEM introduced in 2015 and was found to be feasible. However, CFs indicated that supporting individual student reflection on practice, provided as a learning and assessment strategy, was more difficult to enact due to the number and geographic distribution of students. This project aims to establish an evidence-based pedagogy, learning circles, within the CCEM at Gold Coast Health, with a view to supporting student development of interprofessional teamworking skills and providing the CFs with an opportunity to support and assess students' understanding of practice. The learning circle aims to (1) develop student knowledge about practice, integrating theory with practice experiences, and (2) develop group process skills necessary for interprofessional teamworking. Specifically, the interactions between students in the learning circles are expected to develop inter-subjectivity or shared understanding (Billett 2014). This is a particularly helpful device for developing students' knowledge of nursing through checking, aligning, and comparing experiences. It is also the kind of activity that can develop inter-subjectivity for work teams, both nursing and inter-professional teams.

Student views on the learning within the learning circle will provide information about whether the learning circle has helped them develop knowledge about practice. Students' recollections of the learning circles and usefulness of learning in future placements (interprofessional teamworking) will be determined through brief interviews. CF perspectives on student learning will provide feedback on the value of the learning circle for student learning and development and feasibility of the learning circle pedagogy.

Significance: This project aims to evaluate a structured learning circle approach, designed for diverse student groups with a shared interest in learning for work and the benefit of developing capacities required in interprofessional teamwork. The group process skills that can be developed in learning circles, including shared purpose, critical reflection, innovation, and leadership, are considered to be important skills for interprofessional teamworking (Sims et al 2015), therefore important for

employability. The strength of the learning circle pedagogy, i.e. the value of diversity of participants (Hiebert, 1996), recognises the increasing diversity of nursing and other professional student populations, in terms of age, work experience, and personal socio-cultural histories. The learning circle approach has the potential to be adopted across a range of health and professional disciplines.

Procedures: The learning circle is a cooperative way of learning based on natural patterns of human interaction (Hiebert, 1996). The goal of the learning circle is to improve student understanding of complex topics emerging from practice experiences, while developing group process skills for collaborative learning (Hiebert, 1996) and working. The key strength of the learning circle as a clinical education pedagogy is that the level of ability and personal characteristics can be diverse, requiring the development of attributes for open, respectful and trusting relationships (Hiebert, 1996).

The learning circle is the key post-practicum intervention that will be held weekly during student placements. Student participants will be different from week to week but the CF will be stable. The structure of the learning circles will address student preferences for experiences that: make them more employable, provide feedback on the workplace experience, and help them learn more about their occupation and how it is practised across settings (source pre-project survey conducted November 2015). The learning circle will follow the four steps of critical reflection found to be successful in creating effective learning communities in nursing (Walker et al 2013): 1. Deconstruct a particular practice or topic to develop questions; 2. Confront difficult or ‘untouchable’ topics that the questions raise; 3. Explore the possibilities how practice could be done differently, what information is still required; and 4. Generate alternatives for consideration and research.

The learning circle brings together students with diverse backgrounds and experiences to share and critically reflect on a topic of common interest/concern. The features of the CCEM include the full-time hospital-employed CFs and the distributed nature of student experiences, provides an ideal structure to investigate the effectiveness of learning circles. The learning circles will be held weekly, at day, time and place advertised to students and relevant wards (to facilitate release to attend) at the beginning of the placement. The learning circles will be facilitated by the CFs, with the topics for discussion emerging from the student group. Students who are rostered on the day are expected to attend. It is expected that between 6 and 12 students will attend each learning circle.

The project timeline is outlined in the GANTT chart below:

Activity	J	F	M	A	M	J	J	A	S	O	N	D	J
Finalise protocol	X	X											
Dialogue forum		X											
Training for CFs		X				X							
Implementation		X	X	X	X	X	X	X	X	X	X	X	
Post-session data			X	X	X	X	X	X	X				
Six-month interviews								X	X	X	X		
Data analysis				X	X	X	X	X	X	X	X	X	
Feedback to CFs					X		X		X		X		
Prepare manuscript for publication									X	X	X	X	
Dissemination forum													X

Multiple sources of data will be used. In addition to the student and CF questions (see attachment 1), university collected data on student satisfaction with placements will be used to determine student satisfaction. The number of students who attend placement and the percentage who achieve a satisfactory performance will also be monitored.

Transcription of student and CF responses will be funded from the OLT grant. The research team will undertake data analysis. University collected data and anecdotal feedback is already collected and can easily be collated for this study. Records of student completion and performance are held by the hospital education department and can be descriptively summarised.

References

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Attachment 1 – Proposed questions for students and CFs

On completion of each learning circle, students will be invited to respond anonymously in writing to three questions:

- 1.1 What did you learn during this learning circle?
- 1.2 How is this learning important to your work as a nurse in the future?
- 1.3 What would you still like to learn more about?

Six months after participating in the learning circle, students who consented to future contact will be invited to participate in a brief 15-minute telephone interview. During the interview, they will be invited to recall the specific placement experience and respond to three questions:

- 2.1 What was the most important learning from the [named] placement experience?
- 2.2 What did you find helpful about the learning circles?
- 2.3 What was not helpful about the learning circles?

At six months, CFs will be invited to respond to three open-ended questions:

- 3.1 What are the benefits of the learning circle for you? For students?
- 3.2 What are the limitations of the learning circle for you? For students?
- 3.3 How could the learning circles be improved?

The information gained from the CF feedback will be used to make modifications to the learning circle structure.

Project title: Consolidating clinical learning through post-rotation small group activities

Institution - University of Notre Dame Australia, Fremantle Campus WA

Staff involved: Professor Carole Steketee, Dr Niamh Keane

Students: Fourth (final) year medical s (two groups of approx. 20 students)

Purpose:

In conducting the survey with third year medical students that asked them to identify reasons why post-practicum activities might be useful for them, the sorts of issues they identified are as follows:

- discuss experiences during placement you found confronting
- linking what is taught at uni to practice
- learn about other students' experiences during their practicum
- learn how preferred occupation is practiced in across different work settings
- secure feedback on your workplace experience
- linking work experiences with course work and assessments
- improve the experience for the next cohort of students undertaking practicum in that venue

Therefore, the educational purposes for conducting post-practicum activities with our final year medical students is primarily to enhance their clinical rotation learning experiences by exposing them to activities that provide an opportunity to address the points listed above.

How will you know whether you have achieved this goal?

Students will be surveyed a second time, using an online survey, post the educational intervention activity, potentially after their second clinical rotation at the beginning of June to determine the success of the activity, specifically enhancement of their learning experience. In addition, the survey will request comments and suggestions from the students for further improvement of the educational activity.

Significance

Often, medical students graduate and commence their internship feeling under-prepared for the realities and stresses of the clinical setting. Internship surveys conducted with Notre Dame graduates confirms this. Therefore, this proposal is important as it aims to provide students with an opportunity to consolidate learning during clinical rotations such that they can draw links between them and the realities of the clinical setting. Activities will aim to link clinical rotation experiences with what actually happens in the workplace such that students will feel less intimidated upon graduation. In supporting the transition from student to intern, the post-practicum activities will not only enhance clinical rotation learnings experiences, but help them identify their own strategies for adapting to the realities of the workplace.

Procedures

The educational activity will consist of small groups of 3-6 students facilitated by an active clinician rolled out at the end of the first clinical rotation in a relaxed discussion format. The topics for discussion will include sharing of experiences and knowledge, trouble shooting problems and feedback to the students and the practicum site. It is proposed that this activity will take place during existing small group 'clinical debriefing tutorials' that already occur at the end of students' clinical rotations.

Why this kind of intervention?

Clinical debriefing tutorials are already in place in the clinical Curriculum. They occur 6 times a year in March, April, May, July, August and September with specialised clinical tutors respected by the students. Using this format would ensure no disruption to, or extension of, the existing full medical curriculum. In addition, students are familiar with this type of activity.

When and how this will be enacted (i.e. what you will do, time lines)?

The MED400 students complete their first clinical rotation at the end of March (25th of March 2016). The intervention is therefore most likely to be rolled out on the Monday of that last week, the 21st of March 2016. This would ensure full student engagement in their current rotation before they commence a new practicum experience on Monday March 28th 2016. This would also coincide with the clinical debriefing tutorial planned for March. The activity will consist of small group discussions of 3-6 students facilitated by a clinical mentor active in the profession.

What data will be gathered to ascertain student processes and outcomes?

The investigators will plan to attend the debriefing tutorials in an observational capacity. Comments made during discussion can then be compared with responses collected in a post intervention survey from the same students. It is likely that a post intervention survey will be conducted after the students' second practicum experience at the end of May (27th of May 2016). The survey will be rolled out on the Monday 23rd of May 2016, coinciding with a planned Clinical debriefing tutorial. The survey questions will focus on the benefits of the intervention activity and any negative aspects with the aim to improve the educational intervention.

How will this data be gathered and analysed?

The survey data responses will be collected in paper format or online from students and analysed through the *survey monkey* software program similar to the pre practicum survey data collected for this study.

Project title: Enhancing the workplace-based feedback process post-practicum: a learner-centred approach to feedback

Institution: Gold Coast Health

Staff involved: Christy Noble (Medical Education and Allied Health); Lyn Armit (Nursing and Midwifery); Leigh Collier (Allied Health); Christine Sly (Medical Education)

Students involved: Three groups of students (6-8) from each of the health care professional disciplines including allied health, medical, nursing and midwifery from different year groups.

Purpose

This project seeks to enhance the feedback process in the post-practicum period. In particular, the intervention aims to implement a learner-centred feedback process for students completing their practicums at Gold Coast Health. There is a tendency for feedback to be viewed as a process in which the educator or supervisor provides students with information about their performance, that is, it is an educator-centred process (Boud & Molloy 2013). With this approach, the student role is often passive. This intervention aims to support a feedback process where students are actively engaged and encouraged to seek feedback on their performance. Moreover they will be evaluating that feedback, making judgments about and planning strategies for their progress.

Significance

The initial survey findings from this OLT study suggest that students would like more feedback on their placement performance. This learning intervention aims to enhance the workplace-based feedback process for students.

Receiving meaningful feedback has been identified as a feature of high quality practicum learning experiences (Smith, Ferns et al. 2014). However, the ways in which employers contribute to the process of feedback is an under-studied paradigm especially in the post practicum phase (Smith, Ferns et al. 2014). This is important because contemporary evidence suggests that employer feedback to students following their practicum can improve student learning and understanding of employability (Smith, Ferns et al. 2014, Jackson 2015). Despite recommendations being made to increase the engagement of employers in feedback provision to students it has been reported to occur infrequently and when it does occur students often find it difficult to interpret and respond to the feedback provide (Smith, Ferns et al. 2014, Jackson 2015).

These challenges faced by students could be attributed to the assumptions that tend to be made about feedback. That is, it is an educator or supervisor-centred process whereby information is provided to the learner on their performance rather than being learner-centred, in that, “learners obtain information about their work in order to appreciate the similarities and differences between the appropriate standards from any given work, and the qualities of the work itself, in order to generate improved work” (p. 18 Boud & Molloy 2013)

Procedures

This learning intervention will focus on three groups of students from allied health, nursing and medicine and will be enacted at least twice in 2016. These student groups will be identified by the researchers and through collaboration with the clinical educators. The intervention is based on a student-active model of feedback. This model comprises the students being invited to self-evaluate their performance during their practicum, seek and receive feedback from their clinical supervisors, make comparisons between internally and externally derived feedback and use these comparisons to generate a plan for improved practicum work (Boud and Molloy 2013).

In particular for this learning intervention, the students towards the end of their practicum will be invited to self-evaluate on their performance and to ask for feedback from their clinical supervisors. Both of these forms of feedback will be documented. Then, a facilitated discussion session will be conducted with each group of students. Students will be invited to share their feedback and then compare their self-evaluation with the external feedback received. Finally, an activity will be planned whereby the students generate a plan for improvement for next placement and for their return to university. Strategies and approaches to improve performance in the workplace will also be discussed.

Month	Planning	Ethical approval	Recruitment	Facilitated discussions	Evaluation of student plan	Data Analysis	Report writing	Writing for publication
Jan	X	X						
Feb	X	X						
Mar			X	X				
April				X				
May				X	X			
June				X	X			
July				X	X	X		
Aug				X	X	X		
Sept				X	X	X	X	
Oct							X	X
Nov								X
Dec								X

The facilitated discussions will be recorded and copies of the students' plans will be obtained. These data will be analysed with a focus on identifying strategies for improved learner-centred feedback in the workplace.

References

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Appendixes

Appendix One: Literature review – references

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Appendix Two: Survey instrument
Post-practicum project (student survey/focus group items)

Dear students – Staff at Griffith, Newcastle, Monash, Flinders and Notre Dame universities have recently been funded by the Commonwealth government for a teaching and learning project that aims to identify how to optimise students’ experiences in work placements (e.g. practicum, clinical experiences). The project focus is on engaging with students **after** they have completed those placements so that they can discuss, share, contrast and compare their experiences with peers and their teachers. We aim to trial and evaluate a range of individual, small group and large group educational activities designed to optimise work placements with students across a range of programs. So, we would like your perspective and ideas about these activities before we trial them.

Your responses to this survey will assist the design and enactment of these activities. It will take about 10 minutes to complete this survey. Your responses will be anonymous and treated confidentially. No one who teaches you or assesses you will be able to identify you or your responses. So, your anonymity is assured.

Please note: the term practicum is used here to capture the range of students’ work experiences.

1. Your host university is (please indicate):

Griffith	Notre Dame	Newcastle	Monash	Flinders

2. Please indicate your field of study (indicate two areas if you are undertaking a double major)

Field of study		Field of study			
Education		Speech pathology		Exercise physiology	
Nursing		Pharmacy		Occupational therapy	
Midwifery		Psychology		Rehabilitation	
Dietetics		Social work		Medicine	
Physiotherapy		Other (please state)			

3. What year level do you identify as a student (please indicate):

Year level	1 st	2 nd	3 rd	4th	5th	6 th

4. Are you a:

Full-time student	Part-time student

5. Are you a:

Domestic student	International student

6. Are you an:

Undergraduate student	Postgraduate student

7. Your age grouping is:

15-19	20-24	25-29	30-34	35-39	40 and over

8. Your gender is:

Female	Male	Transgender, (inter-sex)

9. How many practicums are included in your current degree program?

0	1	2	3	4	5	6	7	8	9	10 or >

10. In what format do you undertake practicum and for how many days?

Format	Duration (days)
Full-time, intensive blocks during the program	
Full-time during the latter part of the program	
Part-time, continuously throughout the duration of your program	
Part-time, one day per week....	
Other (please describe)	

Purposes

This project is about optimising the educational worth of students' practicums after their completion.

11. How interested are you in participating in post-practicum activities for the following reasons?

Educational purpose	Very interested	Some interest	Interest	Not interested	Irrelevant
discuss experiences during placement you found worthwhile/interesting/confronting					
linking what is taught at uni to practice					
learn more about your preferred occupation					
learn about other students' experiences during their practicum					
learn how your preferred occupation is practiced in across different work settings					
secure feedback on your workplace experience					
linking your work experiences with course work and assessments					
identify how these experiences can make you more employable					
make informed choices about career, work options or specialisations					
make choices about selection of subsequent courses/majors					
improve the experience for the next cohort of students undertaking practicum in that venue					
Some other purpose (please specify)					

12. Please provide 1 or 2 statements about why having the opportunity to discuss/share/compare practicum experiences is educationally important for you

1

2

OR:

If you believe that there is **no need** to discuss and consider your practicum experiences, please say why that is:-

1

2

Timing and process of engagement

13. Having opportunities to engage in structured discussions about your practicum experience would best support my learning:

Timing of interventions	Yes	No
early in the program, perhaps after your first practicum		
after having had a number of practicum experiences		
towards the end of your course		
after every practicum experience		
some other time (please state)		

14. What are your preferences for engaging in post-practicum activities with other students and/or teachers? Please respond to all items.

Intervention	High preference	Okay	Low preference	Would not participate
one-on-one with teacher				
one-on-one with a peer (another student)				
one-on-one with a more experienced student				
small self-managed groups (3 to 6 peers) across your course				
small groups (3 to 6 students) facilitated by more experienced students				
small groups (3 to 6 students) facilitated by teachers/tutors				
shared classroom-based group activities				
whole of class activities (i.e. large group processes 10-100 students)				
small groups (3 to 6 students) meeting periodically facilitated by placement supervisor				
individually completed activity with feedback from teachers				
presentations to peers				
as part of usual scheduled class activities				
a special event each semester				
something students should organise				
on-line with peers				
on-line moderated by tutor				
Other – please specify				

15. What would be important features of post-practicum experiences for you?: (please respond to all items)

Features	Essential	Very important	Important	Not very important	Irrelevant
focused on course content					
linked to assessment items					
focused on work activities of selected occupation					
student-led and implemented					
teacher-led and implemented					
engaging as many students' perspectives as possible					
engaging with students at similar stages in the program					
engaging with students at different stages in the program					
engaging with students from other disciplines					
opportunity to share and discuss with peers					
opportunity to share and engage in structured					

consideration of experiences					
input from a practicing professional					
opportunity to provide feedback to the practicum site about student experiences					
development of coping skills for the workplace					

16. If you had the opportunity to organise a post-practicum experience for yourself and other students, what would it seek to achieve, what would it comprise, and when would it occur?

<p>Purpose of activity -</p> <p>What would happen? -</p> <p>How and when would it occur? –</p>
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Thank you for your time and contributions to this survey

Stephen Billett for the project team

Appendix Three: Glossary of premises

Active or agentic learners - Being active and agentic in practicum situations, purposefully engaging with practice experiences and integrating them within their coursework, hopefully, establishes habits and practices that support on-going development that sustains employability in the longer term.

Employability is taken as having the capacities required for employment: securing initial employment and sustaining that employment across working life.

The educational goals associated with initial occupational preparation, including smoothing the transition to employment, but also preparing graduates to be active and intentional in their personal practices that supports their learning.

Educational processes associated with employability are more than being about the teaching of content associated with an occupation. Promoting employability includes considerations about the requirements for practice and how they vary across work settings, thereby preparing students for effective transitions and also preparing them to be effective in directing and managing their learning across lengthening working lives.

Educational purposes – the reasons for and anticipated outcomes of educational processes and provisions. Educational processes and practices should be intentional in so far as they seek to achieve particular kinds of purposes. These purposes can be broad or narrow with statements of educational intent capturing those purposes in ways that guide the provision of educational experiences, assessment of students' learning and the evaluation of those provisions

Educational intents – are the intentioned outcomes of educational experiences. They are described as intentions because they can only ever be that: intended outcomes. Ultimately, students decide how and what they learn. There is usually a hierarchy of intent from aim, goals and objectives.

Aims are usually broadly cast statements of intent (e.g. to develop and demonstrate nursing capacities of the kind that will secure quality care and high levels of patient safety). These are taken as broad statement that indicate the overall outcomes of educational experiences (e.g. – the completion of the course).

Goals are more specific (e.g. to develop and demonstrate the conceptual knowledge of human physiology, and procedures to assess human health measures and enact procedures to address injury, illness and disease.

Objectives are even more detailed statements of intent (e.g. to develop and demonstrate the capacities to take pulse, temperature, and blood pressure and make diagnoses about patient health and progress.

Educational interventions – activities that see to promote learning, such as the use of particular strategies to achieve particular outcomes that might be otherwise learnt.

Interdependence – rather than viewing processes of learning being independent (individually premised) or dependent (subject to social press or circumstance), it might best be understood as being reciprocal (i.e. between the learners and the social and physical environments in which they experience and learn). That process of engagement is interdependent as the learner needs to social and physical environment from which to learn knowledge derived from it, on the one hand, yet for social processes,

practices and institutions to be enacted and progress, they required learners to engage with, remake and transform them.

Post-practicum educational processes/interventions - these are educational activities that utilise and augment students' workplace experiences after they have had those experiences and as directed towards some educational goals.

Practicum experiences – refers to the range of experiences students can have in workplaces or work settings. These are variously referred to as placements, clinical experiences, rotations, practicums, internships etc.

Occupationally-specific capacities – these comprise the particular conceptual, procedural and dispositional capacities that are required to effectively practice an occupation.

Conceptual knowledge refers to facts, concepts, propositions and causal links and associations.

Procedures are the means by which we achieve goals through thinking and/or acting. They range from specific procedures such as manual skills, through to the ability to respond strategically to occupational tasks or problems as they arise.

Dispositions are the value, attitudes and intentions that individuals exercise and that shape how they go about their work activities.

Notes

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Augmenting students' learning through post-practicum educational processes

A teaching and learning grant funded by the Office of Learning and Teaching, Commonwealth Department of Education and Training

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