

## Editorial: How is Quality Addressed Within Practice-Based Learning?

In 2011, the [World Health Organization \(2011\)](#) proposed a three-pillar radical plan of educational reforms addressing the quality, quantity, and relevance of health professionals to address global health challenges and improve health outcomes. Seven years on, it seems pertinent to consider how educators are addressing the three pillars outlined in this bold plan in the context of practice-based learning. The increasing pressure on higher educational institutions to produce graduates who are adequately equipped for the workforce ([Cooper, Orrell, and Bowden 2010](#)) validates the critical contribution of practice-based learning in preparing health professionals for the future. Practice-based learning provides an ideal forum for educating health professionals who are not only “technically competent and efficient” but are also “able to work in teams, to adapt to a changing practice environment and to initiate change where needed” ([World Health Organization 2011](#): 7). But, how is quality addressed within practice-based learning?

The importance of practice-based learning in affording opportunities to consolidate learning, apply theory in practice, and develop professional identity has been documented elsewhere; but, with the increasing numbers of health professional students and the resulting demands on academics, educators are increasingly needing to be accountable for quality within practice-based learning experiences. When considering quality, multiple perspectives are needed; most notably those of students, placement sites, and education providers ([Cooper, Orrell, and Bowden, 2010](#)). The articles in this issue of the *International Journal of Practice-based Learning in Health and Social Care* address quality from these and various other viewpoints including new ways to increase capacity within education programmes, extending classroom-based teaching into – and beyond – practice-based learning, and using technology to improve access to health care and improve health outcomes.

Evaluations of quality within health and social care settings should also acknowledge what students contribute to service provision, particularly where they provide services that are not offered by health professionals. Two articles in this issue, look at student experiences of practice-based learning placements. Kyte, Frank, and Thomas’s research into physiotherapy student experiences of role-emerging placements highlights the variability of experiences across these placements and substantiates their value both professionally and personally. The authors propose that the attributes and skills developed through these placements may make graduates more employable. Li, Nagarajan, and du Toit investigated occupational therapy student experiences working with older adults. The students felt they had a positive impact on services for older persons and developed competence in this area. The findings suggest that students have the potential to improve services for older adults.

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From a placement site perspective, McAllister, Nagarajan, Scott, Smith, and Thomson developed and tested a multidisciplinary instrument to measure placement quality. The study drew on perspectives of students, university academics, supervisors, and placement site managers to reach consensus on the features of quality clinical placements. Their study contributes to the evidence base in providing a robust suite of measures “designed to clearly indicate features for improvement, and allow for a comparison of outcomes against local and sector-wide reforms”. Turnbull, Currie, and Drynan similarly address the issue of evaluating placement quality. Using a modified validated instrument, they obtained the perspectives of occupational therapy practice learning educators on the quality of practice-based learning experiences. Although quality was perceived to be consistent across practice settings and practice areas, the authors recommend further study to identify the factors contributing to the quality of practice-based learning experiences.

From an educator’s perspective, Reece, Hill, and Penman considered quality in assessment within speech pathology. They involved students as peer raters in standardised patient interviews, and investigated the level of agreement between clinical educators and student peers. In light of their findings which revealed unacceptable agreement levels, they recommend training, increased collaboration, and use of peer raters with more clinical placement experience to improve inter-rater reliability. They advocate further research into the use of peer assessment. Recognising the need for better links between theory and practice, Barradell, Blackstock, Mastwyk, Tang, Leo, and McConville explored the potential of involving practitioners in education, a role they liken to that of a *pracademic* (a clinician who bridges the education and practice dimensions). Their findings refute the assumption that clinicians with experience in clinical education can easily fulfil the role of an educator in a classroom since this requires different capabilities to those of clinical teaching. Their work affirms the potential of involving practitioners in health professional education in new ways, but emphasises the time and resources required to ensure successful outcomes for both staff and students.

The final two articles take a slightly different view of quality. From a curriculum perspective, Pollard, Nisbet, Kenny, Sheepway, Jacobson, Tartakover, Kilgour, and McAllister approach quality from the angle of ethics training directed at improving the quality of care. They argue that opportunities to extend ethics teaching beyond the classroom into practice settings are often not recognised or utilised. They share strategies from their own experience of ways in which opportunities can be created for health professional students to engage with ethics issues before, during, and after practice placements. Marshall and Bidmead consider the merits of telemedicine and identify the challenges hampering its implementation. Despite the promises telemedicine holds in increasing access to health services and improving patient experiences and staff productivity, some of the barriers to its adoption are due to negative staff perceptions. To enable a full-scale adoption of telemedicine, they therefore propose an organisational and system-level approach.

While the articles in this issue collectively address issues of quality, they also point to the relevance of health professional education in contemporary health service contexts through introducing role-emerging placements in practice-learning offerings and technological solutions to improve health outcomes. The articles also hint at ways of addressing *quantity* (of health professional students) through approaches such as peer assessment and the potential of *pracademics* in extending teaching capacity.

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## References

Cooper, L., Orrell, J., and Bowden, M. (2010) *Work Integrated Learning: A Guide to Effective Practice*. Abingdon, UK: Routledge

World Health Organization (2011) *Transformative scale up of health professional education. An effort to increase the numbers of health professionals and to strengthen their impact on population health*. Geneva: World Health Organization. [online] available from <[http://apps.who.int/iris/bitstream/handle/10665/70573/WHO\\_HSS\\_HRH\\_HEP2011.01\\_eng.pdf;jsessionid=BDDFB415B476FA7CC0CF2127AA290777?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/70573/WHO_HSS_HRH_HEP2011.01_eng.pdf;jsessionid=BDDFB415B476FA7CC0CF2127AA290777?sequence=1)> [2 Nov 2018]