

# EMBEDDING LEARNING IN PRACTICE

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## THE GOOD OLD DAYS!!!



### HOW DID WE TEACH AND LEARN IN PRACTICE?

- OBSERVATION- WATCH ONE, DO ONE!
- ROLE MODELLING, LEADING BY EXAMPLE
- TEAMWORK
- LEADERSHIP
- POSITIVE LEARNING ENVIRONMENT
- LINK BETWEEN THEORY AND PRACTICE



## • HOW WAS THE POSITIVE LEARNING ENVIRONMENT CREATED?

- CULTURE OF LEARNING AND SHARING IN PRACTICE
- HANDOVERS/WARD ROUNDS/ COMMUNICATION
- POSITIVE COMPETENT ROLE MODELS, LEADING BY EXAMPLE, SHARING BEST PRACTICE, PRIDE IN THE ROLE IN SOCIAL AND HEALTH CARE!
- DE-BRIEFING SESSIONS, SHARING EXPERIENCES
- TEAMWORK- CLINICAL TUTORS, EXPERIENCED SENIOR COLLEAGUES WORKING ALONG SIDE
- CRITICAL THINKING/ COGNITIVE FLEXIBILITY

## • WHAT CHANGED? GAP BETWEEN THEORY AND PRACTICE!

- NURSING EDUCATION? THE LIMITED END-OF-LIFE CARE TRAINING FOR UNDERGRADUATE NURSES IN AN EVER EVOLVING CURRICULUM?
- COMPASSION FATIGUE- CONFLICTING COMPETING DEMANDS, NURSING CHALLENGES!
- RESOURCES?
- EXPECTATIONS OF HEALTH PROFESSIONALS? EXPECTATIONS OF PATIENTS/ FAMILIES?
- DIVERSE AND MULTICULTURAL WORKFORCE?
- CULTURE AND BELIEFS RELATED TO END OF LIFE CARE?

## CURRENT DAY PRACTICE!

*6 CS- WHY DO WE NEED TO CONSIDER WHAT SHOULD BE THE BACK BONE OF HEALTH AND SOCIAL CARE?*

- CARE
- COMPASSION
- COMPETENCE
- COMMUNICATION
- COURAGE
- COMMITMENT

## WAY FORWARD ➡

- RE-CREATION OF THAT POSITIVE LEARNING ENVIRONMENT- MENTORSHIP, ROLE MODELLING , LEADING BY EXAMPLE
- CONTINUED PERSONAL DEVELOPMENT- LEARNING IN PRACTICE, STRONG LINKS BETWEEN ACADEMIA AND PRACTICE, COLLABORATIVE WORKING BETWEEN HEALTH CARE ORGANISATIONS AND UNIVERSITIES- MAKING IT HAPPEN- BRINGING EDUCATION INTO THE WORK PLACE!
- EFFECTIVE LEADERSHIP FROM THE TOP DOWNWARDS, TO ENSURE ADEQUATE AND ONGOING LEARNING IN PRACTICE

## WAY FORWARD ➔

- UNDERGRADUATE NURSE EDUCATION- TEACHING STRATEGY FOR END-OF-LIFE CARE EDUCATION
- **REVALIDATION**- TIME FOR CHANGE, LEARNING EMBEDDED IN ALL WE DO! IT HAPPENS FOR MEDICAL STAFF, PROTECTED TEACHING TIME? WHY NOT FOR NURSING AND ALLIED HEALTH PROFESSIONALS?
- PRACTICE EDUCATORS- RESEARCH IS CLEAR, “ A VALUABLE RESOURCE TO SUPPORT MENTORS IN PRE AND POST REGISTRATION TRAINING”

## NMC GUIDELINES

### 22. FULFIL ALL REGISTRATION REQUIREMENTS

TO ACHIEVE THIS, YOU MUST:

- 22.1** MEET ANY REASONABLE REQUESTS SO WE CAN OVERSEE THE REGISTRATION PROCESS
- 22.2** KEEP TO OUR PRESCRIBED HOURS OF PRACTICE AND CARRY OUT CONTINUING PROFESSIONAL DEVELOPMENT ACTIVITIES, AND
- 22.3** KEEP YOUR KNOWLEDGE AND SKILLS UP TO DATE, TAKING PART IN APPROPRIATE AND REGULAR LEARNING AND PROFESSIONAL DEVELOPMENT ACTIVITIES THAT AIM TO MAINTAIN AND DEVELOP YOUR COMPETENCE AND IMPROVE YOUR PERFORMANCE

NMC (2015)

## PRACTICAL APPROACHES TO ENSURE CULTURE OF LEARNING IN END OF LIFE CARE!

- TEAMWORK- HAPPY WORK FORCE WILL ENABLE SHARING OF EXPERTISE AND KNOWLEDGE, CPPD, APPRAISAL, EQUALITY, RECOGNITION OF SKILLS
- PRACTICE COMPETENCY- TAKING TIME TO ENSURE STAFF ARE COMPETENT, JOB SATISFACTION
- HANDOVERS/ WARD ROUNDS- TIME FOR LEARNING, USING THE EXPERIENCE AND KNOWLEDGE OF THE TEAM TO TRAIN AND EMPOWER JUNIOR COLLEAGUES
- INDUCTION INTO CLINICAL AND SOCIAL CARE AREAS CRUCIAL, " LEARN ON THE JOB"! TIME SPENT WITH EXPERTS, I.E PALLIATIVE CARE TEAMS, HOSPICE VISITS, ATTENDING MDT

## CONTINUED:

- LEARNING SETS, JOURNAL CLUBS, TEACHING SESSIONS WITHIN CLINICAL AREAS- CAN DO ATTITUDE, MAKING TEACHING HAPPEN DESPITE THE CHALLENGES!
- REGULAR DE-BRIEFING SESSIONS- SHARING OF EXPERIENCES, REFLECTIONS ON EMOTIONS, CRITICAL THINKING!
- E-LEARNING, DISTANCE LEARNING, ACCESS TO PALLIATIVE/ END OF LIFE CARE EDUCATION! THINKING OUTSIDE THE BOX- COLLABORATIVE WORKING WITH UNIVERSITIES

## THE DREAM!



- A COMPETENT, KNOWLEDGEABLE, PROFESSIONAL AND HAPPY WORK FORCE
- EXPERT CARE AND COMPASSION FOR ALL PATIENTS AND FAMILIES
- ENABLING DYING WITH DIGNITY
- THE “ GOOD OLD DAYS RETURN” WHERE EXPERTISE, COMPASSION, EFFECTIVE COMMUNICATION ARE THE NATURAL PART OF PRACTICE IN ALL ELEMENTS OF CARE!

**THE 6 CS???**

“You matter because you are you. You matter to the last moment of your life and we will do all we can, not only to help you die peacefully, but to live until you die”



*Dame Cecily Saunders*

## REFERENCES:

- GROVES, W (2014) PROFESSIONAL PRACTICE SKILLS FOR NURSES. *NURSING STANDARD*, 29, 1, PP 51-59
- WHEELER, C, ANSTEY, S, LEWIS, M, WAY, H (2016) THE EFFECT OF EDUCATION ON COMMUNITY NURSING PRACTICE IN IMPROVING THE PATIENT-CARER EXPERIENCE AT THE END OF LIFE. *BRITISH JOURNAL OF COMMUNITY NURSING*. 19, 6, PP 284-290
- JEFFERS, S ( 2014) NURSE FACULTY PERCEPTIONS OF END OF LIFE EDUCATION IN THE CLINICAL SETTING: A PHENOMENOLOGICAL PERSPECTIVE. *NURSE EDUCATION IN PRACTICE*. 14, PP 455-460.

## REFERENCES:

- MC CALLIN, M (2011) MODERATED GUIDING: A GROUNDED THEORY OF NURSING PRACTICE IN END OF LIFE CARE. *JOURNAL OF CLINICAL NURSING*. 20, PP 2325-2333.
- GALLANT, C, VAN DER RIET, P, JEONG, S (2014) END OF LIFE CARE EDUCATION, PAST AND PRESENT: A REVIEW OF THE LITERATURE. *NURSE EDUCATION TODAY*. 34, PP 331-342.
- CARLISLE, C ,CALMAN, L, IBBOTSON, T (2009) PRACTICE BASED LEARNING: THE ROLE OF PRACTICE EDUCATION FACILITATORS IN SUPPORTING MENTORS. *NURSE EDUCATION TODAY*. 29, PP 715-721.
- NMC ( 2015) THE CODE, ACCESSED ONLINE