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Adams, Karen

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The education needs of Practice Teachers

Karen Adams
The research questions

- What are the perspectives of practice teachers, students, managers, course leaders and other key stakeholders regarding the role of a Practice Teacher and attributes of a good Practice Teacher?

- How should Practice Teachers be educationally prepared to undertake their role?
The research context

- HV Implementation Plan 2011-15 (DH)
  - 4200 extra HV’s by 2015
  - Delivering a new & enhanced model of service
- Healthy Child Programme (DH & DCSF 2009)
- Practice Teacher Standards (NMC 2008)
- NMC circular 08/11 (2011) Practice Teachers supporting more than one (health visitor) student in practice
- Financial constraints in NHS
Design & methodology

- Grounded theory (Charmaz 2006)
- Constructivist / naturalistic paradigm (Denzin & Lincoln 2008)
- One to one interviews and a focus group were used to gather qualitative data
• Purposive sampling strategy
• Semi-structured interview format
• Open-ended questions
Data analysis

- Digitally recorded

- Transcribed

- Concurrent data collection and analysis (Birks & Mills 2011)
Preliminary findings
Early findings suggest that the role of a Practice Teacher is operationalised differently both within and across organisations and disciplines.

- This creates confusion around the professional identity of the Practice Teacher and
- affects the recognition that Practice Teachers are afforded for their role.
Dual / triple role

- Managing competing demands of caseload & student
- Planning learning alongside planning / prioritising caseload work
- Managing a team & caseload & student
- Managing more than one student, including preregistration students alongside caseload
- Impact of economic crisis – increased workloads
Leadership role

- Perceived differently by different stakeholder groups and across different organisations
  - Caseload responsibilities have to be balanced with meeting the learning / support needs of students. These demands limit the opportunities for PT’s to take on the broader leadership role expected by managers in terms of them meriting a band 7.
- Developing standards for HV practice
- Identifying learning needs & planning training of wider workforce
- Developing good practice
- Staff JDR’s
- Leading clinical & CP supervision
- Leading teams
- Expert resource for staff
- Additional specialist roles
Professional identity

• ‘I’m just a practitioner as part of the team. I certainly don’t big myself up as a Practice Teacher’. ........’I’m a health visitor fundamentally. I see the Practice Teacher as an additional role’.

• ‘I think there was a lot of ambiguity about what our role was and how expendable we were and that certainly was the feeling that was coming through that we were an expensive commodity’.
Organisational context

- Economic crisis
- NHS reorganisations
- Target driven culture in NHS
- The decline in workforce numbers of Health Visitors over the past 10 years has impacted upon the capacity that HV PT’s have had to develop their role.
‘I know quite a few CPT’s (PT’s) did projects in the past but I think because Health Visiting has been in such a crisis that the CPT’s (PT’s) have fundamentally been trying to deliver the service as well as train up the students’.
Brun & Dugas (2008)

- Humanistic and existential view of recognition
  - Recognising the unique distinctive characteristics of people
  - If you provide people with proper working conditions – financial, material, relationships, communications, power and independence it will be easier for them to approach their work more positively.
  - Individuals are granted a right to voice their opinions about and influence decision-making
Personal recognition for role

- PT’s are valued by managers and seen as essential for getting a good quality workforce
- Past students (now in PT or manager roles) indicated that their PT had a huge influence on their future practice
- PT’s enjoy the role & find it rewarding
- Peers often did not have a good understanding of the PT role
Existential recognition

- All PT participants did receive additional remuneration for their PT role but indicated that the situation for new PT’s was uncertain and some would not receive additional pay
- Some PT’s described enhanced access to training & professional development that they were afforded because of their PT role
- Supervision processes varied
Supervision and support for PT’s varied

- ‘we have quarterly meetings for the Practice Teacher forum’
- ‘I didn’t have a mentor and there weren’t many PT’s around at that particular point and we didn’t meet up........ I didn’t have any sort of preceptorship and I didn’t know really...I was making up the rules as I went along’
- PT’s valued the mentoring and supervision processes that were in place to support them in learning and developing in their PT role. Where these processes hadn’t been in place PT’s described how they had set up these processes themselves
‘We organised them (meetings) as Practice Educators (Teachers)......we didn’t have the opportunity (to) meet up as a group so we asked for that and then on the back of that came, Can we have somebody there as well from.....management to sort of lead us in that respect’. This highlights an approach that Practice Teachers use to have a voice and increase influence within their role. By developing strategies to enhance formal recognition of the role Practice Teachers are attempting to increase the stability of the role.
Existential recognition

- PT’s felt that their role was not valued by the organisation
  - No reduction in caseload to give time to support the student
  - No dedicated resources
  - Target driven culture which doesn’t acknowledge the time required to support the student
  - Reluctance to train PT’s because of banding implications
‘The offices I’ve worked in have been very loud and very busy and I think it would be good in each area perhaps to have an office set up with a computer that you could just book.......to do some one to one work with a student’.

This quote seems to suggest that the Practice Teacher might be seeking some existential recognition that her role exists.
‘I don’t think the organisation uses it’s CPT’s (PT’s) ......enough to do more of the leadership and change management stuff’.

‘The focus of what I was doing as a CPT (PT), was ......training the students but over this last year things are moving forward in the organisation and so the CPT’s (PT’s) have been asked to do more’.
Conclusions – Preparing Practice Teachers

- Data analysis is still at an early stage

- Role recognition is key to building professional identity

- The development of a clearer professional identity is essential if educational preparation is to be tailored more specifically to the needs of those undertaking a Practice Teacher role.

- Educational preparation will need to incorporate strategies that PT’s can draw upon to overcome organisational issues in the Practice Teacher role.

- The research will need to consider what PT’s need to learn in order to undertake their role.
References

References

- NMC (2008) Standards to Support Learning and Assessment in Practice. NMC London