Foundation Degree Health and Social Care

Evaluation of the course and its outcomes
2008 - 2011
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Foundation Degree Health and Social Care Evaluation 2008 – 2011

Part 1: End of Year 1 2008-09

Context:

The first intake of 23 students commenced the 2 year Foundation Degree Health and Social Care in September 2008. The course had been developed as a collaborative partnership between local employers and the HEI, Oxford Brookes University, in response to the changing face of the health and social care workforce nationally and within the county.

The course is delivered through 2 days a week over two 12 week semesters at the HEI and a minimum of 2 days a week for 45 weeks spread over the year through Work Based Learning undertaken in the students’ place of employment. The 2 days in the HEI allow for 2 half days of taught modules, a half day of tutorials or workshops and a half day for students’ own study.

Students are required to be supported by their managers for release to the taught components, agreement over the suitability for the work based learning taking place in the place of employment and the provision of a Supervisor to act as a facilitator for the student but not necessarily to work directly with them.

The first co-hort of 23 comprised of 5 students from the Acute sector, 9 students from the PCT (3 of whom were employed by Social Care but supported by the PCT), 7 from the Mental Health sector, 1 from Learning Disability and 1 from the Independent Care sector (self funding).

One student withdrew towards the end of the first academic year due to a change in direction in her career needs.

The teaching team comprised of 2 part time University Lecturers and a Work Based Learning Team from the NHS Trusts (4) and Lecturers (1).

There was a variety of profiles of both Managers and Supervisors within the students’ work places; a single manager plus a supervisor, a manger who also acted as supervisor, a team manager with more than one supervisor etc. etc. Not all students had the same manager or supervisor for the whole year.

Design of Evaluation:

3 versions of a questionnaire were designed for all Students, all Managers and all Supervisors. Those for the Managers and the Supervisors had many similarities but each also had a few more specific questions. In recognition that some Managers were also undertaking the Supervisor role, they were asked to complete both questionnaires but only to address the different, specific, questions in one of them to avoid them wasting their time over duplicate questions.

There was a mixture of open and closed questions allowing for both qualitative and quantitative data to be gleaned.
• **Students’ questionnaire:**
  - What their role was currently and for how long
  - How they found out about the course
  - Their motivation for applying
  - Their expectations of the course
  - How well prepared they felt before starting
  - How they rated their manager’s and their supervisor’s understanding of the course and their new role
  - What they had found enjoyable and what had challenged them

• **Managers’ questionnaires:**
  - We asked about their relationship with the student
  - How they had found out about the course
  - What motivated them to support the student
  - What they thought the course would give the student in personal and professional development
  - What they thought of the information they received about the course and the WBL component
  - Their role in designing specific competencies
  - Changes in the student’s practice
  - How the new role fitted into the service delivery
  - Tangible benefits to their work area.

• **Supervisors’ questionnaire:**

As there are several Supervisors who are also Managers, many of the questions were similar.

  - In addition we asked how many hours they spent being a supervisor
  - The part they played in developing the competencies and the student’s portfolio

Ideally each questionnaire would have been sent out to named individuals but as we became aware that several of the managers and supervisors had changed over the year, it was decided the students were the best vehicle to deliver each to the correct person.

The questionnaires and covering letters in envelopes were given to the students, one for them, one for their supervisor and one for their manager. The questionnaires were identified as for whom they were intended and each pack of three given to the individual student was numbered on the envelopes with the same number. This ensured there was an indication that the manager was also the supervisor (as in some cases) but did not identify any of the respondents by name and so maintained their anonymity.

A date for return was given on each of the questionnaires and the students were reminded to ensure their managers and supervisors received their questionnaires in good time.

Returns ** were:

  - 11 students completed questionnaires
  - 7 managers completed questionnaires
  - 6 supervisors completed questionnaires
** several late returns have been received since and will be incorporated within this report as they do add to the overall picture.
Only 1 full set of the three responses was received. 4 sets of student and supervisor, 4 of student and manager, 3 student only, 2 manager only and 1 supervisor only.

The information within these responses were sorted by type of respondent and then further into themes. The two reviewers worked together to identify themes and to report the findings. Each response was read initially by both reviewers and then again by one while the other inserted the findings into a thematic format. The main themes that emerged from all responses were

- Changes seen by managers and supervisors in the students’ practice
- Changes seen by students in their own practice
- Changes in perception of the new role by work colleagues
- Tangible benefits to service delivery

** Changes in students’ practice as seen by managers and supervisors **
- Increased skills and development of their practice
- More confidence to take on responsibility
- Increased knowledge
- Ability to pass on knowledge
- Informed decision making/clinical reasoning
- Broadening of their remit in practice
- Keen to get involved in trickier aspects of care
- Independent working
- Increased IT skills

** Changes in students’ practice as seen by the students **
- Know how to look for knowledge & information
- More self critical
- More professional approach to practice
- Reflective
- Proactive in learning
- Having knowledge to support my reasoning

** Changes in colleagues’ perception of the new role **
- Taken more seriously
- Actively giving student more responsibility
- Unsure but supportive
- Senior staff have better understanding than junior staff

** Tangible benefits **
- Reduced in-patient stay over Xmas and NY
- Reduction in triage waiting times
- Better use of therapy time; freeing up of clinicians
- Taking the lead eg. Policy making
- Already working beyond band 3
- Increasing others’ knowledge & understanding
- Varying skill mix within area
Challenging current practice

The comments made by students, supervisors and managers were

**Comments by students**

- Pride in student status
- Need more time for own study
- Want to learn more and more
- Opportunity to expand experience & visit other areas
- Supportive class
- Patchy understanding of role
- Being taken seriously
- Knowing why things are done in a certain way
- Family suffering
- Guilt about other colleagues’ workload

**Comments by Supervisors**

- Want more examples of competencies and feedback
- More clinical skills focus
- Clearer guidelines on limitations

**Comments by managers**

- Concern over existing band 4s without Fd
- More funding for AP students needed
- Difficulty in accommodating study and practice times
- Great role for support for nursing staff

The majority of the managers and supervisors felt reasonably well prepared but not by any means all of them felt everything had been covered in that preparation. Looking at this in light of their reported and apparent understanding of the new role and the purpose of the course the following was identified:

- A direct correlation between the level of preparation and understanding of the new role and the course can be seen
- Better, earlier preparation of both managers and supervisors is needed
- More proactive timetabling and information giving across all partners needs to be set up.

It was clear from early in the delivery of the course that the tight timescale between the course being developed, validated, recruited to and the actual start of delivery had not allowed for optimal preparation of any parties involved. The main areas that will be addressed as immediately as possible are:

- Earlier recruitment to be instigated with simultaneous identification of managers, supervisors and Work Based Learning Team members assigned to the named students. This will need to be in tandem with programmes of training days set up for the supervisors and managers in time before the new intake commences in September 2009.
- The need for earlier recruitment will be emphasised both to the funding bodies for clarity of numbers and the employers supporting the potential students.
A systematic approach to communication between the University, the Work Based learning Team, Trust Leads and all employers needs to be investigated and set up for all to access on a regular basis.

**Part 2 : End of 2009 – 10**

the second year 2008 intake of the Foundation Degree Health and Social Care Evaluation

**Context:**

At the end of the second academic year the remaining 21 of the initial 24 2008 intake completed their Foundation Degree. These students were given their evaluation questionnaires to complete during the final taught session of the year. They were given the other two questionnaires to give to their managers and their supervisors. Of the 21 questionnaires sent out to the 3 sets of respondents, the return rate was:

Students: 19  
Managers: 10  
Supervisors: 10  
This was a substantial increase on the returns the previous year.

**End of Second Year (Completion) of Foundation Degree:**

The questions asked of the Students, Managers and their Supervisors were given similar questionnaires as they had at the end of the first academic year. The actual questions were reviewed to reflect the stage the students had now reached; a few were discarded with a few new questions included in their place. The main focus of the new questions was to ascertain the future employment status on completion of the 2 year course, the perceived changes in practice, the benefits seen for service delivery and the Continuing Professional Development (CPD) seen as a future requirement for their employees.

The results, using a similar format as before can be stated as:

**Student Questionnaire:**

- What they saw their new role being – AP, band 4, band 3, or unsure  
- Would they look for an AP role if one was not forthcoming in their current place of employment  
- If the course met their expectations for personal and professional development  
- Did they feel prepared for the new role  
- What they thought of the WBL component  
- How they saw their manager’s understanding of aspects of the course  
- Changes in own practice and how their colleagues saw their new role  
- Beneficial aspects and challenges of the course  
- Benefits and disadvantages of having undertaken the course
Managers’ Questionnaires:
- Role employees moving into on completion
- Course expectations – were they met
- Involvement with designing specific competencies
- Effectiveness of course in developing employee’s new role
- Changes in employee’s practice
- Benefits to delivery area
- Would they send other employees to the course
- CPD requirements

Supervisors’ Questionnaires:
- How often have they met with student
- Comments on ease of use of the WBL Portfolio
- Their understanding of the role the students would move into
- Involvement with designing specific competencies
- Effectiveness of portfolio in developing students
- Involvement in development of new role
- Change in practice
- Benefits to service delivery area

Again, it was acknowledged that some supervisors were also the student's manager. Unfortunately, although there was a significant evidence that certain students had given both their managers and supervisors the questionnaires and that both had returned them, there was nothing specific to indicated whether the two questionnaires were answered by the same person.

The responses elicited the following sense of level of success of the course’s purpose:

- Changes seen in practice
- Benefits to the service
- Development of role and employee
- Use of WBL & portfolio
- Future development

• Changes seen in practice

  ➢ Managers and Supervisors:

  • Taking more responsibility
  • Attempting to problem solve
  • Huge increase in confidence
  • Actively seeks out new knowledge - More aware of why they do things
  • Working more autonomously – more independent working

  ➢ Students:

  • Can put theory into practice
  • Have slowed down how I do things
  • Grown in confidence
  • More inquisitive - Question what I am doing
  • Look for evidence
• More focused
• Thinking before things happen
• Feel more professional

  ➢ Students’ Colleagues:

• Accept I am a competent practitioner
• Still unaware of remit of role and level of responsibility
• Supportive but confused about role
• Look forward to me joining the them as an AP
• Proud and confident of what is being achieved

• Benefits to the service

  ➢ Managers and Supervisors:

• Very useful team member
• More skill mix in area
• More scope than an HCA
• Specific new roles and skills to increase area’s service delivery
• Gives AP more satisfaction
• Allows AP to develop others, including students
• AP taking roles traditionally done by bands 5 & 6
• Confident, competent practitioners

• Development of role and employee

  ➢ Managers and Supervisors:

• Can carry a caseload of non-complicated clients
• Early Days
• Already well integrated
• Gives senior staff time for complex tasks
• Important role model for other non-registered staff
• A stand alone role
• Similar to SEN
• Autonomous resource for carers

  ➢ Students:

Role:
• Not sure what the role will be
• Prepared but not sure if there will be a role within the team
• Very well prepared from the course; not so sure about manager
• Confident support will continue
• Goal posts have moved
• Confident and excited
• Still waiting final job description
• Ready for the challenge

Self:
• Gave more confidence
• Feel more assertive
• Have more confident and knowledgeable about approaching CPD needs
• Pride in achievements
• Understand more about people
• Confident in patient contact

• **Use of WBL & portfolio**
  
  ➢ Managers and Supervisors:

  • Helpful in identifying service gaps
  • Very effective in developing employee into role
  • Worked well for individual and team needs
  • Gave good grounding into how to use evidence based practice
  • Good – it was linked to the KSF
  • Would have liked more time to work clinically on it
  • Yes, met student’s needs
  • Over-emphasis on nursing competencies
  • Lengthy and repetitive
  • Very involved – too high a work load
  • Too reliant on a formulaic approach

  ➢ Students:

  • More time to consolidate learning
  • Time constraints at work
  • Helpful but a bit vague at times
  • Assisted me to understand
  • Confidence grew
  • Unsure initially
  • Relating to experience – using reflection
  • Better understanding of role
  • Gives a more comprehensive direction

• **Future development**

  ➢ Managers:

  • More clinical competencies – competencies specific to area
  • In house opportunities
  • Mentoring
  • Moving towards autonomous learning
  • Additional modules leading to a degree
  • Maybe registration

In addition the following quantitative information was gleaned:

According to the managers 9 of the 10 said their employee would be moving into an AP role with one saying it would depend on funding.
17 of the 19 students said they were moving into an AP role with 12 of those knowing they would be on a band 4 and 2 being unsure if a band 4 was available. 14 of them said that if an AP role was not available they would look elsewhere for one, one said possibly and one said they would not. Although several of the supervisors had not felt they understood the role their supervisee was moving toward at the beginning of the 2 years, the majority had a better understanding by the end of the course. The majority of the students felt both their manager and supervisor had a good understanding of the course outcomes and the role that the students were working towards. Some felt it was fair and two thought it was excellent. There was a very mixed response from supervisors when asked about their involvement in competency writing, ranging from completely to not at all. Those who were involved commented that it took a lot of time to do. General comments from the managers and supervisors indicated they needed better and earlier information about the new role and expectations of the course. Some felt it was too clinical a course, some wanted more clinical assessment. Less written assignments, some wanted more clinical emphasis.

General comments from the students were rich in expressions of their own development of self awareness and self satisfaction:

- Would do it all over again
- More tolerant and respectful of others
- Opened my eyes to learning opportunities
- New lease of life
- Great friendships
- Benefitted 100%
- Boosted confidence
- Gave work a different perspective
- Challenging – surprised myself, huge opportunity
- Developed critical thinking
- Group work and team working improved – team player

And some negative aspects of undertaking the course:

- Never enough time to do everything
- Loosing sense of purpose in work place
- Role problems

Overall the following can be said to have been elicited from the questionnaires given to completing students, their managers and supervisors:

i. The 2 years have allowed a better understanding and appreciation of the role. There is, however, still work to be done on preparing those supporting the students in the work place.

ii. Despite the apparent enthusiasm for the development of the role, there remains a question mark over the future employment status for these students mainly due to current availability of funding to support a band 4 AP worker.

iii. Although there is good evidence of benefit to service delivery and to the development of non-registered staff, there is little evidence that this will is seen as a stepping stone in future development of the individual and collective workforce as shown by the paucity of suggestions for CPD by managers.

iv. It would appear, despite the above, that there is still significant variation in perception of what the AP role is, what it could be and how it can be further
developed. This, in spite of real enthusiasm for the new role and for the course as preparation of the non-registered carers.

Part 3: 9 Months Post Completion of Foundation Degree Health and Social Care Evaluation using First Destination Information.

Context:

It had been decided at the beginning of his evaluation process that those first intake students who completed the Foundation Degree in July 2010 should be followed up once they had been back in full employment for 6 – 9 months, along with their managers at that time. It was felt that this would give a better overview of the success of the educational course and of the development of the new AP role across the care areas the students came from.

All 20 ‘completer’ students were sent an e-mail setting out the purpose and intention of the last part of the evaluation with a questionnaire attached. They were also asked to confirm their managers’ contact details (to ensure those who had either moved place of employment or any changes in local management were not missed) and to volunteer for a couple of focus group meetings in a mutually independent environment.

Of the 20, 12 responded (60%) with completed questionnaires, 8 of them were amenable to taking part in a focus group although 2 of those could not commit to the proposed dates and we received information about 17 of the managers. We received 5 questionnaires back from the 17 managers approached (just less than 30%). Although most of these managers were connected to the students who responded, there was one who was not.

The response rate was disappointing, especially when compared to the good response rate we had achieved while the completers were still students. This was somewhat to be expected as 6 months after completion the students’ mind sets had moved on (their relationship with us had changed) and interest in the course was not their priority. Being aware of their and their managers’ other commitments and the increase in their work loads, we persevered gently to improve this rate but eventually had to admit we had probably got as many responses as we were going to.

2 Focus Group meetings took place a fortnight apart. Again, attendance was disappointing as each time one of the initial three who had signed up for it failed to make it, leaving just two at each meeting. It was, however, deemed worth doing as the information gleaned was rich and relevant.

The questionnaires covered a similar range of areas as the previous ones with the exceptions of the value of Work Based Learning and the students’ supervisors understanding and involvement in the course in general.

The emphasis was on the development of the AP role and its impact on the delivery of care.
Of the 12 student respondents 10 declared themselves to be undertaking the Assistant Practitioner role, 1 was a Support Worker and 1 was still called a trainee AP. All the managers declared there employees to be APs.

All but three of the 20 completers were still in the same place of work as when they were students. Of the three who had changed their work area one had done this internally to their Trust and the other two had changed not only their Trust employer but also had taken on a role in an area of care they had never worked in before. The students were asked how well prepared they felt for their current role.

7 of them felt they were well prepared, either because they had been working steadily towards the AP role or because the course gave them the tools to take on the changes. They felt well supported by their managers and colleagues.

The others felt fairly well prepared; one commented that the course did not focus on the speciality needs of their work area, one that the changing nature of the NHS and the area of care they work in, in particular, meant that the role was very undefined and that they and their colleagues “were not sure how …. role fits in with the rest of the team.”

On the question put to the completers about any support provided for the newly appointed APs (and the 2 other completers)

7 reported good, formal support either in the form of ongoing supervision, regular study days or regular one to one meetings with their manager.

5 did not receive any formal support.
The 5 managers all confirmed that their employees had had formal support

A Summary of comments from Managers’ responses:

**Effectiveness of Fd**

“promoting and developing academic abilities and curiosity”

“kick started a genuine passion for knowledge, research and evidence based practice”

“communication skills and knowledge base expended enormously and to the benefit of the unit”

“made her think outside the box”

**Role fitting into service**

“role become a very valuable resource”

“taken a lead on developing a support group for the support workers”

“more involved with care planning and structuring of patients’ individual needs”

“provides a high leve

I of support for the named nurse”
Impact on patient care

“yes, quality of care has been excellent”
“new role has enabled qualified DN to take part in working….gives them more time”
“greater patient satisfaction in triage”
“reduced patient length of stay”

All 5 managers would support another trainee AP.

A Summary of comments from students responses:

About the Course

“without this course I would not have been able to develop the role I have undertaken …… I don’t feel my role has finished developing either … there is still a lot of scope n developing skills and responsibilities”
“so many benefits from taking this course both personally and professionally”
“felt the course was very nurse focused”
“credibility amongst peers”
“I have realised my own competency level and when to stand back and allow for help”
“more confidence to question and challenge peers due to academic grounding”
“I have improved my critical thinking skills and my confidence in my own ability”
“very useful”
“could have presented more opportunities .. did not feel prepared for this role”
“gained confidence, knowledge, skills, experience, a qualification and a lifetime affiliation with lovely people”

About their practice and the impact on care

“I am more resourceful”
“I have been taking a lead in health promotion in my work place”
“am much more involved in the evaluation of care … am working autonomously with my own case load”
“with our trust moving into community health the insight into areas other than MH”
“the knowledge, skills that enables me to implement care and support that is requirement to provide individual patient quality of life”
“developing the confidence to communicate with other professionals that enabled me to put an action plan in place”

It would not be unreasonable to expect the comments from both sets of respondents would (ideally) mirror each other; on the whole they do. Equally, the responses from the students about the course and about their practice were frequently interchangeable, demonstrating a connection between the course and their new caring practices and ability.

Focus Groups:

These were held in a neutral environment on two different occasions. The leaders began by asking questions form a set script but then let the groups take their answers to whichever direction they chose. Again the main aim of the meetings was to gauge their feelings and interpretation of the role they were now in and to compare it to the role they had been in before commencing the course. They were asked to look at their role in the delivery of patient care and their position in the team.

These are some of the sound bites gleaned from their conversations:

- Critical thinking – problem solving – less direction.
- Self management of case load.
- Course – gave them confidence – ability to seek out information, knowledge – confidence to apply new knowledge - parameters in boundaries of own practice – more able to adapt and learn new skills and competencies.
- Assessing care & anticipating care needs “outside tasks”
- More confidence in reporting / referring back to appropriate person.
- Freeing up of qualifying staff time
- Feelings of alienation by being absent from practice 2 days a week.
- Potential discrepancy of specific competencies and care delivery needs – changing face of care delivery
- Goal setting for patients as a competency – patient health etc.
- Care delivery – all of the above
- Transferable skills

A summary of the Themes shown throughout this study:

- Problem Solving
- Knowledge
- Confidence
- Communicating with others
- Case load
- Shift from task orientation to more competency based care
- Changes to service delivery impacting role
It is of interest that these were being evidenced through the first year (see part 1 of this report) and have remained central to the students progress into the AP role.

Completers’ Data:

Two of the three completers who had changed their area of practice were in the focus groups. It was clear from their comments in particular that the confidence they gained from attending the Fd and the transferable skills they had acquired were the triggers to them seeking new employment. In the case of the AP who was now working not only in a different area of care but also in a different geographical area it was reported that it was the evidence about the outcomes and learning gained from the course they presented at interview that influenced the appointment into a brand new AP role.

The information gleaned from the questionnaires and from talking to the respondents has given us some idea of what various completers have gone on to.

1 completer has begun their full NMC level 1 registration at OBU, supported by their employer
1 has an offer of a place to study for a BsA in Social Work commencing 09/11
1 is seeking to achieve full NMC registration through further study
2 are studying on OBU modules as Associate Students to give them more specialist knowledge and credit in their own chosen area of practice
1 has attained a Band 5 post as a GP’s specialist Practice AP

It is clear that many of the others we heard from are leading the development of their roles and are demonstrating their ability to function at a higher level than before undertaking the course.

Future Developments:

Inevitably, there are changes due to take place in the design of the Fd. These are driven by the external requirements of the national development of the AP role and the national dynamics of the NHS and Social Services delivery of care. Internal, local forces are also requiring a new pattern of delivery and a wider choice of curriculum through specialist competencies and seminars. As more areas of care delivery elect to include the AP role into their skill mix and to support those working up to this role, the Foundation Degree is keeping up with that new demand. The flexibility of the original design allows for this and funding issues are being constantly investigated. The changing pattern of commissioning education within the NHS, Social Care and the University is bound to be a challenge over the coming years. As will the general funding for resources to continue the delivery of the course.

A stronger focus on supporting the care areas to ease the transition from Trainee AP to full AP status needs to be addressed by all parties with a guaranteed band 4 being offered on completion of the Fd. Equally, there needs to be consideration of a more formal CPD programme with managerial support for the new APs, allowing them to develop their role and their practice to best advantage.

We are indebted to all those who took part in this study and on the compilation of the report. The good working collaboration between all parties has been a very positive factor in the success to date of the development of the AP role. Special thanks should go to the WBL team and the employers’ support without which the Fd would
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