Service improvement as an experiential tool for postgraduate students and service providers

Jason Schaub discusses how a research project partnership is helping to improve health and social care programmes

Abstract
A project developed at Buckinghamshire New University is connecting postgraduate students in health and social care programmes, including nursing, social work and safeguarding, with service providers seeking to undertake service improvement evaluations. The Service Improvement Research and Evaluation Partnerships project was evaluated using participatory action research (PAR) and found that students gained a variety of skills through experiential learning and that service providers gained postgraduate-level evaluation from enthusiastic students with minimal staff input. This article describes the project and explains how it can assist service providers to complete robust evaluations, and help students to engage in ‘live’ evaluations in situ for experiential learning. It also details the PAR evaluation.

Keywords
Service improvement, experiential learning, problem-based learning, students, education, service evaluation

Introduction
The Service Improvement Research and Evaluation Partnerships (SIREP) project was developed at the faculty of society and health at Buckinghamshire New University. The aim is to support postgraduates in health and social care deliver final projects in response to live briefs from health or social care providers. Previously postgraduate students working independently had struggled to find suitable sites and topics for their final dissertations; for example, if they identified an appropriate topic they often struggled to find a site at which they could explore it, and sometimes found it challenging to find topics that were as clearly related to improving patient experience as they would wish. To address these issues the SIREP initiative was designed in 2013 with an initial 18-month phase, funded by the Higher Education Academy, which included curriculum design, brokering and evaluation.

The aim of SIREP is to increase graduates' employability by improving the operational application, experience and ‘reality’ of their final projects. The SIREP project team, which comprises university academics, requests project briefs from NHS trusts, local authorities and voluntary agencies, the briefs then being collated and disseminated to prospective students. A period of negotiation and ‘matching’ then takes place, during which the needs of the different organisations and students are identified (see case study).

One of the main elements of SIREP is brokering connections between the students and the organisations, and this is undertaken by the SIREP team. Postgraduate students are introduced by the university and each is supported by an academic supervisor, which gives them quicker and greater access to host organisations. The brokers also help design the organisations' service improvement projects, which need to be challenging enough to encourage innovation and focus, but not so difficult that students feel overwhelmed or distressed. This latter possibility is mitigated by the support of academic supervisors, which is standard practice for dissertations, but an important difference is that host organisations are also required to supply a sponsor or main contact in each case, which students report is central to the success of their projects. This three-way relationship is crucial to ensure that the organisations are clear about what is being undertaken, by whom, as well as the timescales and expected outcomes, and that students are clear about what they are undertaking, their timescales and expectations. Meanwhile the supervisors must help both parties understand the needs and constraints of the other.
Quality improvement
Service improvement is one strand of quality improvement and is a way of analysing performance and improving patient care by examining processes (Baillie et al 2014). The complex nature of health and social care services and organisational efficiency makes analysis and evaluation challenging. Continuous improvement of the quality of services experienced by service users and the public is based on principles enshrined in the Health and Social Care Act 2012 and the NHS Constitution (Department of Health (DH) 2013). One way to create an improvement culture and enhance patient safety is by introducing service improvement learning to pre-registration education (Christiansen et al 2010).

Strands of activity
There are several different strands of activity in SIREP including ‘engagement days’, student impact evaluations and an annual student colloquium. Once service improvement project ideas are sent to the university by providers, an engagement day is held and attended by relevant postgraduate students, a range of service provider representatives, academic supervisors and service users.

These gatherings enable students to meet service providers, discuss improvement issues and explore potential topics and sites, while the service providers can inform students about possible projects and outline their service objectives. The inclusion of service users is important as they often direct conversations to whether the proposed projects will improve patients’ and their families’ lives.

The ongoing process of evaluation includes gathering students’ and service providers’ views throughout the projects through focus groups and interviews, while the annual student colloquium is a celebratory event at which students present their project outcomes by paper or poster presentations, and an award is given to the one voted the best by the attendees.

Evaluation
Participatory action research (PAR), which mainly uses qualitative research methods, was used to evaluate the SIREP project’s overall effects on students and its usefulness for the organisations involved rather than individual projects. Originally designed for use in adult education (Thiollent 2011), PAR is widely used in programme evaluation for university courses (Jacobson and Goheen 2006, Thiollent 2011).

The composition of the inquiry team is an important part of the methodology as the ‘subjects’ form part of the team, which dissolves the divide between the researcher and the researched. The SIREP evaluation research team, therefore, included students, academics and service users; having students and service users as part of the team resulted in changes to the programme throughout the process, such as setting up engagement days.

Data were gathered in multiple ways, including through discussions on engagement days and colloquiums, in focus groups with students and in interviews with students after qualification. Methodologists recommend using multiple methods.

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### Case study

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<th>Jennifer (not her real name) works for a mental health trust as a senior occupational therapist in the emerging role of peer-support clinical lead. This involves managing peer-support workers with lived experience of mental health problems to support service users in inpatient services and the community.</th>
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<td>Her project explored how to improve the use of the recovery approach to mental health. The connection with a ‘real’ site enabled her to link the topic to a service and to speak with clinicians about her ideas. These ideas, when discussed and explored with her supervisor, enabled Jennifer to make recommendations about using peer-led recovery in the service.</td>
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<td>The project was suggested by the organisation, but in collaboration with her supervisor, Jennifer broadened the topic to include her area of interest and meet the organisation’s needs. Overall, the project allowed Jennifer to gain valuable experience and later employment.</td>
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<td>‘My role as peer-support clinical lead is exciting and challenging. As one of the few practitioners in this emerging role, it is important to network with other clinicians who share your passion for shaping, improving and informing best practice in order to enhance the lives of our service users.</td>
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<td>Jennifer says: ‘SIREP’S ethos of promoting research that focuses on service improvement gave me the confidence to share the recommendations from my research with the host organisation, which enabled me to make a positive difference to recovery-focused interventions with service users.</td>
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<td>‘SIREP has been pivotal in helping students like me be confident that we can make a positive contribution that goes beyond simply doing a “good” job. By raising questions that can change, challenge and improve our practice, we can all do a “great” job.’</td>
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data-gathering methods when research is exploratory (Creswell 2007), and since SIREP is an innovation the project team thought it was important to gather perspectives from students at different points of their projects, which also required using a variety of methods.

Findings
Evaluation found that students had some anxieties about their projects, particularly in relation to choosing a topic and organisation, but also in terms of time pressures. Service providers were pleased with the projects’ outcomes and impressed with the students’ capability and knowledge. Some employed the students on completion of the project, while others asked them to extend their projects to provide broader accounts than a dissertation allows.

Students said that meeting providers at engagement days helped them understand what the projects would entail and develop contacts at the care providers. Some students did not use the topic originally provided having identified a more appropriate one at the engagement day. One senior nurse from an NHS trust said that SIREP had equipped the students ‘with the foundation knowledge and practical skills necessary to build research and service development early enough in their career pathways’, and that it had enabled her trust’s service to evaluate independently a pilot that was being trialled. The manager of a voluntary organisation, meanwhile, commented that ‘the student I was lucky enough to recruit produced a thorough, autonomous report, with comprehensive outcomes and recommendations’.

Challenges
Time pressures, unfamiliar surroundings and uncertainty about undertaking projects independently are familiar anxieties for any postgraduate student completing a final dissertation. In the SIREP project, clear communication between the students, the academic supervisors and the organisational contacts helped prevent students from becoming overwhelmed and worried that they had no control over their projects.

Changes in staffing in host organisations or the university also negatively affected students’ experience, and often resulted in projects requiring significant alteration before completion. For example, in one trust the main contact went on sick leave and no one in the organisation could support the student to engage with the project. Therefore the student had to find another site, which the student was able to do with the help of the supervisor.

The evaluation identified a number of benefits of the SIREP project for students and service providers:

□ Service providers report that SIREP helps make research more accessible to and achievable by a wider group of clinicians.

□ Service providers are pleased that service improvement projects are completed to a postgraduate level with minimal resource implications.

□ Students successfully engage in ‘live’, practice-based research or undertake literature reviews with potential employers.

□ The annual student colloquium showcases students’ work and some of the abstracts are published, which improves students’ professional profiles and employability.

□ Students report improved confidence, increased awareness of service improvement issues and an overall positive experience.

□ A website is used to promote and assist the ‘brokered’ process between postgraduate students and service partners.

Conclusion
The SIREP project team continues to seek service improvement projects, broker arrangements between postgraduate students and host organisations and engage in ongoing evaluation of students’ satisfaction. The evaluation described above has provided evidence of SIREP’s effectiveness and applicability, and the university is planning to use the model for other programmes such as undergraduate nursing or social work.

Engaging students in ‘real-life’ situations to energise their learning and make it current is challenging, but the approach used in SIREP has supported a wide range of students from across several postgraduate programmes. Strong relationships with important contacts at host organisations, as well as consistent and effective communication between the parties, are crucial to success.

References


