



ALPS first year reflective review (April 2005 - March 2006)

Reflective review

Overview

This report presents an overview of our background, mission and aims together with a reflective appraisal of achievements in year 1. At the outset it is worth recording that all objectives have been met or exceeded.

1. Background

- 1.1 Assessment and Learning in Practice Settings (ALPS) is a collaborative programme between five Higher Education Institutions with proven reputations for excellence in learning and teaching in health and social care: Universities of Bradford, Huddersfield & Leeds (lead), Leeds Metropolitan University and York St John University College. The collaboration works in partnership with the West Yorkshire Workforce Development Confederation (WYWDC) which is part of the Strategic Health Authority. The HEI partners provide a range of programmes across the full spectrum of pre-registration Health and Social Care (H&SC) courses. HEFCE funded programmes include Medicine and Dentistry at the University of Leeds, Pharmacy and Optometry at the University of Bradford, and Social Work across the four universities in the partnership. The NHS funded programmes cover Nursing, Midwifery, Dietetics, Podiatry, Audiology, Diagnostic Radiography, Clinical Physiology, Occupational Therapy, Speech and Language Therapy, Physiotherapy and Operating Department Practice.
- 1.2 Many publications report how newly qualified H&SC professionals taking up their first post feel a lack of preparedness for the role. The key to equipping these professionals for the 'real world' is increased partnership between HEIs, students and stakeholder employers involving work-based learning.
- 1.3 All students value assessment processes that accurately and fairly measure their capabilities and provide effective feedback as a basis for reflection. ALPS aims to:
 - enable students to collect a wide range of workplace mini-assessments, both formative and summative, comprising professional assessor, self, peer, and service-user ratings to provide a comprehensive portfolio of competences
 - enhance substantially the reliability and validity of assessments in existing work-based settings and permanently change the culture of the organisations involved, in line with relevant strategic changes in workforce planning and the delivery of patient care.

ALPS forms a centre which draws together the collaborative uniprofessional expertise in workplace H&SC assessment and which can then disseminate good practice both within and across the institutions.

- 1.4 Groups of health and social care professionals will be encouraged and enabled to provide improved assessments of students' practice in the workplace. These will be well-grounded in pedagogical theory and consistently measure students' competence, so that students and professional bodies can be confident that an assessor from any of the relevant professions will be equally able to assess common outcomes for any students in practice settings. Inclusivity will enable existing excellence in defined subjects to expand across professions and within programmes. The development of effective and creative assessment will enhance scholarship in education, focusing on the student learning experience and lifelong learning outcomes. This presents a means through which the status of teaching may be raised, teachers may come to teach more knowledgeably and the quality of teaching may be more explicitly measured.

2. Mission:

2.1 Building on existing strengths across the partnership, the Centre for Excellence in Assessment and Learning in Practice Settings aims to ensure that students graduating from courses in health and social care are fully equipped to perform confidently and competently at the start of their professional careers so improving the standards of care.

3. ALPS Strategic Aims

- A1. to develop and improve assessment and thereby learning in practice settings for all health & social care students
- A2. to develop and promote skills of assessors in practice-based assessment
- A3. to develop the role of service-users and carers in practice assessment
- A4. to develop project management and partnership working
- A5. to research, evaluate, disseminate and change professional cultures
- A6. to respond to and influence policy changes nationally and internationally

4. ALPS activity & progress

The following reports on the work which has taken place in ALPS' first year. The work is reported on with reference to the Strategic Aims and the Operational Plan. "Action points" are noted in bold for particular attention and action.

Common Competences and Common Assessment Tool (A1)

ALPS identified three generic competences - ethical practice, team-working and communication skills – which are common to the QAA benchmarks and professional bodies' regulatory guidelines/occupational standards for all 16 courses covered by ALPS. Thus representing competences, assessed in practice, that any undergraduate student of health and social care is required to achieve.

ALPS has carried out an initial mapping exercise across the 5 partners and 16 courses, and so has details for the three competences, performance criteria, range and assessment method across each undergraduate/pre-registration course, at each year/level.

A workshop, involving all partner subject leads (c.40 staff) took place in May to:

- share the underpinning ideas behind mapping these core competences
- identify work and associated resources that has previously taken place across the partnership on common competences and assessments
- agree a shared understanding of the work on common competences and take that back to Partner Site Implementation Groups (PSIGs)

Following the workshop a Common Competences Working Group has been established to progress this work on behalf of the partners. It will:

- define and agree terms - what is a common competency mapping tool? what should it include? what is a common assessment tool? what should it include?
- develop a shared and agreed understanding and definition of the common areas (communication, team working, ethical practice - starting with communication)
- identify work already done and agree a methodology for future work
- identify and disseminate existing good practice
- provide the Knowledge Management Tool Working Group with a specification, and the information needed to develop appropriate IT solutions

The Knowledge Management Tool Working Group will investigate and recommend IT solutions for knowledge and information management, to support the development and delivery of a common framework and assessment tool.

We are also meeting with the regulatory and professional bodies to identify any barriers to interprofessional assessment and mechanisms for ongoing engagement. We are using members of our Advisory Board, some of whom are members of the regulatory bodies, to work with us on this.

Action point:

- **Maintain the Common Competences and Common Assessment Tool as the main focus of ALPS work over the coming months**

Interprofessional Learning (A1, A2, A4, A5 & A6)

A successful seminar and workshop were held on Interprofessional Learning with partners exploring ways in which IPL can contribute and be integrated into ALPS. We are grateful to Professor Hugh Barr, a member of the ALPS Advisory Board, for facilitating these two sessions. Current health and social care policy requires that agencies work together to provide a more complete and user-focused service. The ALPS Advisory Board are to discuss aspects of IPL in practice and we hope to continue our collaboration with Hugh in this area.

Action point:

- **Progress Advisory Board recommendations & integrate Interprofessional Learning into work programme**

Development of a virtual assessment environment & range of reusable assessment resources (A1, A2, A3, A5 & A6)

A key part of the ALPS programme is to develop the use of mobile technologies to support innovative ways of assessing students in practice settings. ALPS is investing £1 million across the five partners to develop and extend existing mobile technologies involving students, academic and practice-based staff. All five partners are currently completing pilot projects to test the usability and feasibility of using mobile technologies. In some cases this has involved practice settings but the main purpose of the pilots have been to identify issues which need addressing before the main mobile technologies project is launched early in 2007. The appointment of a Project Manager to develop the mobile technologies strategy and support partners has enabled ALPS to make good progress and we are on schedule to purchase and implement the technologies.

ALPS has also been successful in gaining an additional £350,000 of capital funding from HEFCE to develop a searchable web-based database/knowledge management tool and an online repository for learning and assessment resources. The knowledge management tool will be used to make the outcomes of the common competency mapping exercise available via the web.

The IT strategy for ALPS was agreed at the June meeting of the Joint Management Group. This strategy takes forward the plan to develop an environment which supports the infrastructure (VLE) to enable electronic assessments in practice (mobile devices) with access to repositories of assessment tools.

Action points:

- **IT Management Group to work with Common Competences Group and Knowledge Management Tool Working Group to ensure mobile technologies are used appropriately and to best effect**
- **Implement mobile technologies plan with regard to ALPS learning objectives and capital expenditure deadlines**

Research (A1, A2, A3, A4, A5 & A6)

The Research Group has drafted an outline for the remit of the group which includes a preliminary research strategy which will be fleshed out by the Research Officer in collaboration with other members of the Research Group. The research strategy will be drawn up to support the aims of the implementation strategy, highlight the evidence that will underpin the goals of ALPS and support the direction of travel in the development of cross-disciplinary practice assessment.

ALPS is establishing a research profile having been invited as a partner in three project proposals (one of which has been confirmed as successful), had one paper accepted for a journal, and one conference poster and workshop abstract accepted. We are also aware that a number of partners are developing institutional research activities in which ALPS is cited.

Action point:

- **Research Group to finalise research strategy & initiate research across collaboration**
- **Research Officer to co-ordinate & support agreed research plan**

Profile raising (A1, A2, A3 A4, A5 & A6)

Much of the first year has been raising awareness of ALPS amongst partners and NHS colleagues. Using existing networks, from partners and WYWDC contacts, we have aimed to disseminate via established channels and have set up very few new networks. To do this we have relied heavily on partners and the Core Team to attend meetings and use mail lists to raise awareness of ALPS.

As ALPS Management Groups and Partner Site Implementation Groups (PSIGs) have become established close attention has been given to membership to ensure that all stakeholders are represented at a level at which they can contribute and influence. This strategy has had benefits in that existing relationships have been strengthened or new ones established. As part of the basic specification for a PSIG membership we have included students, practice staff and service users/carers. We have some service user/carer representation on ALPS Management Groups and we are encouraging their involvement on other Groups. The WYWDC have made available a register of user/carers who are willing to participate in such work. We have collaborated on a project bid, "Development and Training to Enhance the Patient and Public Voice in Professional Education: a collaborative project" which has been awarded funds. This project will develop capacity in four of the five partners supporting patient involvement and the work will be developed across the wider partnership.

We are working closely with the WYWDC to ensure that practice-based staff are informed of ALPS' programme of work, and we anticipate this relationship will become much more participatory and active as the focus of ALPS moves into the practice setting. ALPS staff are members of a number of WYWDC's operational groups including the Interprofessional Learning Group, and the Practice Learning Support Group which is developing a West Yorkshire wide common programme for mentors and assessors. A communications plan to ensure effective engagement with practice colleagues is being undertaken. This includes contacting the new Chief Executive of the Yorkshire & Humber Strategic Health Authority, writing to the Chief Executives of the Trusts to ask for their support of current and future staff involvement and inviting (practice) members of the Strategic Partnership Groups to become members of the ALPS Management Groups. Included in the plan is communicating ALPS work to the 16 subject service managers, eg. radiography, midwifery, etc, and working with Practice Learning Facilitators.

A Bulletin is produced every two months and circulated to approximately 350 people providing an update on ALPS work and a summary of health and social care resources. Dissemination material and activities (website, leaflets, poster, meeting attendance and presentations) have been undertaken over the year. The ALPS launch and first partner workshop was well attended by strategic as well as operational contacts. Senior managers from the five partners and the West Yorkshire Development Confederation were invited along with regional Directors of Nursing, Practice Placements Facilitators and partner colleagues. Whilst partners have continued to network and disseminate, the ALPS Dissemination & Impact Group have developed a strategy which partners and the ALPS Core Team are implementing.

ALPS has established links with related projects and CETLs but has had to be selective in doing so. Currently there are numerous CETL related events and networks being established. Strategic links are being established with health and social care, eg. CETL4HealthNE, partner institutional and pedagogic-related CETLs, eg. professionalism. We are enthusiastic in linking with projects and CETLs where we identify common links but are aware of the time resource involved. In early July we are hosting a workshop of CETLs involved in work-based learning and hope that this will provide productive contacts.

Action points:

- **develop stronger links with practice based staff and their managers**
- **raise awareness amongst students**
- **continue to raise ALPS' profile with service users and carers**
- **need to identify emerging stakeholders**

Management (A4 & A5) (see attached organisational structure)

The ALPS Strategic and Operational Plans were agreed by February and are now being implemented. As of February 2006 all ALPS partner teams have been established and all

Partner Site Implementation Groups have met at least once. All partners have recruited or seconded staff to lead, both strategically and operationally, the work on ALPS at their institution. In all cases partners have bought out existing staff time, at Associate Dean and/or Senior/Lecturer level. In addition, one partner has recruited two Teaching Fellows and a similar appointment is expected at another partner site. Partners are currently working on integrating ALPS staff reward and development activities into their institutional human resources strategies and some are making available monies to staff to develop related projects. Efforts are being made by partners to strengthen engagement with their own institutional senior managers. Partners have recently completed their year end financial reports. Whilst all partners show an underspend, this is because of the October 2005 start to the programme with funding starting in April 2005. An agreement has been reached with HEFCE that ALPS has an additional six months beyond the official programme end to ensure that all work is completed.

The Monitoring & Evaluation Group have carried out an initial exercise in evaluating operational effectiveness. Partners have reported on how they are establishing their PSIGs within their institutions and what resources and practices are being used to embed ALPS activity. A workshop was held in June to develop the evaluation strategy and how we will develop capacity to monitor and evaluate aspects of the programme.

All partners are represented on all ALPS Management Groups. Management and reporting structures ensure that these representatives are members of their Partner Site Implementation Groups, thereby strengthening communication channels to and from all the Groups. Partner leads have recently started to meet to implement the ALPS Operational Plan comprehensively across the partners. This is also a forum for sharing and exploring new ideas. Members of the Core Team also attend these meetings. Following the first year of ALPS, a meeting is planned for the autumn between the ALPS Core Team and the Chairs of the Management Groups to review the changing role of the Groups.

Recruitment of the ALPS Core Team is now complete with the addition of a Research Officer and a Mobile Technologies Manager in April 2006. A part-time Project Officer, funded by the School of Medicine, has joined the Core Team to work on aspects of the mobile technologies programme. They join the Programme Manager, Learning Development Officer and Programme Co-ordinator. The Learning Development Officer will be leaving in August and we are currently recruiting to this post. We have reviewed and rewritten this job description with a more practice-based focus as this will address an identified knowledge gap in the Core Team.

As part of the original bid all partners requested capital funds (total £0.5 million) to develop physical space for students and staff working on ALPS-related courses. In a number of cases the funds were a contribution to a larger university project. The additional capital which was successfully bid for added another £64,000 to capital refurbishment funding. The funding made available for the Core Team to refurbish offices has been redirected to develop an area of the University of Leeds Health Sciences Library for group work by students and staff. Advanced IT equipment will be provided through the use of ALPS funding reflecting the theme of interprofessional working and mobile technologies. The Core Team will be accommodated in existing School of Medicine plans to bring learning and teaching staff together in the Worsley Building.

Financial procedures have been established and at the time of writing this report all revenue payments for the first year have been paid to partners, capital refurbishment and mobile technology pilot project payments are being paid or in the process of being so.

Issues of Risk

The Risk Assessment Group is an internal audit group based at the University of Leeds, as lead partner, with a specific remit to:

- monitor management of performance against targets (set both by ALPS and the University of Leeds/Faculty of Medicine & Health)
- identify any issues of a strategic nature and report accordingly to the Advisory Board
- monitor expenditure against budget and agree budget setting
- monitor Core Team performance

As part of their recent meeting the risk register, as it appeared in the original bid document, was updated. Whilst the following risks (as an extract from the full risk register) are not raised as being of specific concern, they did form part of a discussion on reviewing risk. Comments from the Risk Assessment Group have been included in the register below. As one of the Terms of Reference of the Advisory Board is to understand and minimise risk the views of members of the Board are invited to comment.

Risk Assessment Register (updated May 2006)

AREA	RISK	IMPACT (1-5)	LIKELIHOOD (1-5)	SCORE (I x L)	STRATEGY TO MINIMISE RISK	UPDATE (May 2006)
Change management	Institutions fail to build on complementary strengths and govern themselves as an effective partnership in a changing environment	3	3	9	a) NHS WDC, NHS trusts and academics extensively involved in the development and proposed implementation b) Joint stakeholders on governance committees c) Robust arrangements for assessment and evaluation	<ul style="list-style-type: none"> Some reticence on partners to engage in early stages ALPS Operational Plan meeting with each partner & subsequent meeting with Director to clarify competence issues Meeting organised to involve social work (appears to fall outside "health-dominated" faculties) 2 meetings organised to develop work on single competences/identify courses for next stage of work Early issues of lack of progress in 2 management groups addressed by Manager & Partner leads
Change management	The capacity and capability of the partnership to effectively disseminate 'good practice' falls short of requirements.	4	2	8	a) Track record in working with WDC and subject networks b) Clinical outreach (clinical teachers' workshops, practice placements, teaching tools etc.) c) HEA & WDC dissemination partners d) Strategy for pedagogic research	<ul style="list-style-type: none"> Good relationship established with WDC (Core Team) Partners work closely with WDCs, PPFs & practice colleagues Dissemination activities allocated to partners to undertake (reporting back to Joint Management Group built in) Core Team strong links with HEA subject centres, & partner links also ALPS Research Group developing research strategy with Research Officer to take up post April 06
Impact on all health professionals	Coverage across all professionals is too ambitious using pedagogic processes across sectoral and professional boundaries	4	3	12	a) Phased programme of work b) Development of work based assessors c) Individual development portfolios d) Programme of awareness, understanding and embedding e) Piloting of new tools f) Impact on 9,000 students	Awareness raising incorporated in Dissemination Plan & central & partner plans include health professionals involvement throughout programme
Performance	The consortium and partners fail to secure the specific objectives of the core strategic aims and there is slippage in timescales for implementing the CETL	3	2	6	a) Robust governance arrangements: - Joint Advisory Board - Joint Management Group - Partner Site Implementation Groups b) Delivery against hard and soft key performance indicators c) Monitoring and evaluation arrangements	a) Operational Plan agreed Feb 06 with partners developing own Operational Plan. These to be reviewed by JMG for comprehensiveness. PSIG Lead Group established to co-ordinate academic/practice work across PSIGs b & c) M&EG developing monitoring measures & success factors against Operational Plan
Continuation	Recurrent costs not picked up beyond 2 years of the initiation of the CETL as a result of mismatch between partners priorities and views of stakeholders. Consequently there is a failure to embed continuation funding from HEFCE/DoH to deliver the strategic arm of the bid	4	3	12	a) NHS WDC, NHS trusts and academics extensively involved in the development and proposed implementation b) Commitment across the partnership for new models of working c) Joint stakeholders on governance committees d) Robust arrangements for assessment and evaluation	RAG meeting April 06 agreed that continuation funding will be looked at in more detail in years 2/3 when: <ul style="list-style-type: none"> ALPS has clearer idea what funding would be required for impact on who & what becomes clearer, can be measured & will involve other disciplines ALPS engages with the new NHS regime

appendix 2.c

AREA	RISK	IMPACT (1-5)	LIKELI- HOOD (1-5)	SCORE (I x L)	STRATEGY TO MINIMISE RISK	UPDATE (May 2006)
					e) ALPS central to HEI L&T and HR policies	
Capital expenditure (refurbishment)	Capital funds for refurbishment are not allocated/spent by partners & Core Team	3	1	3	Reprofiling of capital refurbishment expenditure agreed Nov 05. Payments scheduled & due to complete before deadline.	At May 06 payment schedule up to date with outstanding payments scheduled to be paid before March 07 deadline. Core Team funds rescheduled to be used to develop student space in Health Sciences Library
Capital expenditure (mobile technologies)	Capital funds for mobile technologies are not allocated/spent by partners & Core Team	5	2	10	Involvement of key ALPS staff in monitoring & progressing mobile technologies work. Appointment of Mobile Technologies Project Manager.	Work progressing & closely monitored at May 06. Expenditure on schedule.
VKP	Uni of Leeds decommissions the VKP with result that ALPS loses communication system & is liable for additional costs in setting up a replacement	4	3	12	Negotiate (financial & support issues) replacement & plan accordingly.	Contact made with VKP Team requesting update & stating ALPS position on requiring replacement at no extra cost.

GLOSSARY:

ALPS – Assessment & Learning in Practice Settings
 HEA – Higher Education Academy
 PPF – Practice Placement Facilitators
 WDC – Workforce Development Confederation



