Making a Difference to Patient Care with Service User Involvement in the Education of Health Care Students

Abstract

The involvement of service users in the education of students undertaking mental health and social work programmes has had a positive impact in three key areas: students’ understanding of the service user perspective, students’ communication skills and students’ motivation to improve services (Morgan and Jones, 2009). However, there is limited research around service user involvement in education and its impact on patient care. This paper describes:

1. The implementation of service user involvement in the classroom across a range of health care education programmes.
2. The results of an innovative practice requiring students to make and fulfil a pledge to improve the patient experience, following their exposure to service user involvement in the classroom.

Keywords

service users, health care education, patient involvement

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Introduction
Patient involvement in decision-making and the planning of health services have been central to many health policies over the last two decades. Patient groups have now embraced the shift in the balance of power in health care from a medical paternalistic approach to a patient-centred and patient-driven approach.

In the education of health care workers the involvement of service users (the umbrella term for patients, clients and their relatives) has been patchy. However, commissioning bodies in the UK are now required to evidence how service users have been consulted in the services commissioned (Department of Health (DOH), 2009). Commissioners consequently require HEIs to provide tangible evidence of service user involvement in all health care programmes.

In developing the active involvement of service users in health care programmes in the Faculty of Health, Social Care and Education (FHSCE), it was anticipated that health care students would learn to understand health care from the service user perspective. Whilst meeting the requirements of the commissioners, our aim was to take this learning further and support students to make a difference to the care they give to patients.

Aims of Project
1. To support academic staff in the FHSCE to actively engage with the concept of service user involvement in health care programmes.
2. To enhance the learning of health care students by involving service users in the delivery of health care programmes.
3. To consider the impact of service user involvement in education on the clinical practice of health care students.

Project Outline
Supporting academic staff to engage with service user involvement in the classroom
Over the period May – July 2011, the following strategies were developed to support academic staff in their engagement with service user involvement:

- All health care staff were invited to attend service user workshops delivered by mental health colleagues, mental health service users and students, all of whom had previous experience of service user involvement in the classroom. The opportunity to explore issues around recruitment, support, preparation and payment of service users proved valuable and supported the development of guidelines in these areas.

- A Faculty service user policy was developed (with service users) to promote a consistent approach across all programmes and clarify roles and responsibilities of academic staff.

- A team of academic staff with knowledge and insight into each of the pre-registration programmes worked with module leaders to provide further support and promote active engagement with service user involvement in their modules.

- University central finance officers developed a payment policy for service users, ensuring that service users are paid both travel expenses and attendance fees on the day of attendance, as recommended by the DOH (2006).

- A Faculty web-based service user and carer forum has been developed, allowing the general public to view the current involvement of service users in the health and social care programmes and inviting participation from those who may be interested (http://www.anglia.ac.uk/serviceusers)

Over the period January to May 2012, a service user database was developed. This includes data of service users and their individual input to specific programmes. The database supports cross-referencing across all health and social care programmes, encouraging an inter-professional approach to service user involvement. Payment details of all service users are also populated on this database supporting a record of Faculty expenditure.
Development of service user involvement in health and social care programmes
Since September 2011, an inter-professional team approach to the development of service user involvement has resulted in this concept being embraced across the FHSCE.

Module guides for all appropriate health care programmes now identify service user involvement as a significant mode of learning for both theoretical and practical components of health care modules. This involvement includes the physical attendance of service users in the classroom, the use of service user vodcasts to highlight their experiences, the participation of service users in simulated practice in the skills laboratories to prepare students for clinical practice and the use of patient stories.

Evaluations of these sessions in all modules have been consistently positive with students identifying this learning as inspirational, providing them with greater understanding of the service user’s perspective, the importance of good communication and multidisciplinary support. This learning is further explored during small group work sessions.

The application of theory to the clinical setting is pivotal to the development of safe health care practice (Frankel, 2009). When this learning becomes inspirational, developments in practice have the potential to become much more than just safe. Following attendance at the service user involvement sessions the student is required to identify one significant area of learning that they will apply to their future clinical practice, through a formal pledge. This pledge is recorded by the student in their clinical practice assessment document and shared with their clinical mentor. Mentors confirm achievement of the student pledge at the completion stage of the student placement.

Impact of service user involvement in education on the clinical practice of health care students
To gain insight into the impact of the service user involvement sessions on the clinical practices of students, a review of the student pledges made by 185 adult, 84 mental health and 15 child branch pre-registration nursing students was undertaken.

Students pledged to address some practical aspects of patient care such as ensuring patients received adequate fluids or the opportunity to wash their hands following toileting. Each of the pledges made reflected one of the six Essential Cluster Skills identified by the Nursing and Midwifery Council (NMC) as being at the core of nursing practice. Where students were unable to meet their pledge, reasons for this were discussed with their mentor.

Table 1 indicates the percentage of student pledges made by each nursing discipline, their correlation with each of the NMC cluster skills and the number of pledges that were achieved by these students.

<table>
<thead>
<tr>
<th></th>
<th>Adult Nursing Pledges</th>
<th>Child Nursing Pledges</th>
<th>Mental Health Nursing Pledges</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>No. of pledges made</td>
<td>%</td>
<td>Pledges fulfilled</td>
</tr>
<tr>
<td>Care and Compassion</td>
<td>47</td>
<td>25</td>
<td>44</td>
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<tr>
<td>Fluid and Nutrition</td>
<td>47</td>
<td>25</td>
<td>41</td>
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<tr>
<td>Communication</td>
<td>44</td>
<td>23</td>
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<td>Organisation of Care</td>
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<td>18</td>
<td>28</td>
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<tr>
<td>Medicines Management</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Infection Control</td>
<td>11</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>185</td>
<td>145</td>
<td>15</td>
</tr>
</tbody>
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Table 1: Student pledges in relation to nursing discipline and NMC Essential Cluster Skills
The pledges made by each nursing discipline have been determined by the individual service user experiences that each of the disciplines was exposed to during the service user involvement session in the classroom. Variation in the types of student pledges between the three nursing disciplines was therefore inevitable. Of the 219 pledges fulfilled by student nurses, 171 of these were in the care / compassion, and communication and fluid / nutrition categories. These reflect the areas that are most commonly cited as causing distress to service users (Parliamentary and Health Service Ombudsman, 2011).
Those unsuccessful in meeting their pledge to improve the experiences of service users cited reasons such as poor resources or at times the patient's condition itself as impacting on this.

**Conclusion**

Service user involvement in the classroom can make a significant difference to the clinical practices of nursing students from all disciplines. Students engaged with these sessions and were keen to promote practices that put service users at the centre of their care. Service user involvement in the classroom is therefore a powerful tool. With perseverance and appropriate guidance this has the potential to overturn the tide of negativity around patient care and improve the patient experience.

The service user programme and student pledge initiative have now been integrated into the pre-registration midwifery and operating department practitioner programmes. The success of this project will also be developed in post registration programmes where we anticipate the outcome to be even more effective. Registered practitioners have greater control over their clinical environment and practice than students and are therefore in a better position to overcome barriers to improving patient care.

**References**


