From application to completion: An Overview of the BSc(Hons) Practice Development (infection Control) Programme
• Faculty of health and Life sciences: School Of Health Community and Education Studies:
• winner of Nurse Education Provider of the Year: Post Registration
Continuing Professional Development (CPD) Framework

- **BSc(Hons) Practice Development**
- BSc(Hons) Practice Development (Cancer Care)
- BSc(Hons) Practice Development (Child and Adolescent Mental Health)
- BSc(Hons) Practice Development (Critical Care)
- BSc(Hons) Practice Development (Palliative Care)
- **BSc(Hons) Practice Development (infection Control)**
- BSc(Hons) Practice Development (Sexual Health)
- BSc(Hons) Practice Development (Paramedic Practice)
- BSc(Hons) Practice Development (Mental Health and Learning Disability)
- **Graduate certificates offered in all of the above**

- **BSc (Hons) Emergency Care Practice**

- **At level 7**
  - Post-graduate certificate Practice Development
  - Post-graduate diploma Practice Development

- **MSc Practice Development**
Background

• **Student population**
  – majority professionally qualified health and social care professionals (minority fulfil access criteria)
  - Students attend (part-time)
    - some students have limited academic skills
  - Some students have limited computer literacy
  - Need to apply best evidence to practice

• **Modules Sit within**
  – Continuing Professional Development (CPD) (School of Health Community & Education)
Why is evidence needed to guide practice?

Little thought as to new skills

New ways but same old forms and assumptions

Agreement is reached easily

When you always do what you always did, you always get what you always got!
The Northumbria University CPD curriculum development experience

Key drivers

Coherent CPD framework

Feedback & support opportunities

Meet wide entry behaviours

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Portfolio 1: Learning for Practice development

Portfolio 2: Integrating Evidence for Practice Development

Underpinned by a student owned repertoire of electronic evidence, accessible via a ‘gateway’ for formative & summative feedback

Wide entry gate
Targeted support

Experience rich Academic novice
Academic rich Experience novice

Being a graduate

Module choice
Module choice
Module choice
Pre-entry advice and support

- Streaming documents
- Contract documents/Schedule of deliveries
- Module dates and study days
- Pre-entry profiling “surgeries”
Online Induction

• Induction needs to be flexible and fit for purpose
  http://nuweb.northumbria.ac.uk/library/skillsplus/sublist.html?hcescpd
Welcome to the Continuing Professional Development (CPD) Study Support site. Included in this package is information about the University and the programme, and support to help you with your studies. If you need further assistance with any aspects of this site please contact Northumbria University Library at ask4help@northumbria.ac.uk

Northumbria University Library

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CPD Induction

NHS Libraries
(Only Available to NHS Staff)
BSC(Hons) Practice Development (Award Title) 120 Credits Level 6

Stream 1
AC0205
Principles and concepts of infection control
(Classroom delivery)
Level 6 20 Credits

Stream 2
AC0356
Infection control in primary care settings
Or AC0205
Principles and concepts of infection control
(Distance delivery)
Level 6 20 Credits

Stream 3
AC0356 Infection Control in secondary care settings
Level 6 20 Credits

Portfolio 1
Learning for Practice Development
30 Credits or APL/APEL

Portfolio 2
Integrating Evidence for Practice Development
30 Credits

Scaffolded Progression. Use of Pebble Pad
Real World activity versus Virtual World

• **Real World**
  - Face to face
  - Expectations
  - Help on site
  - Don’t need high degree of computer literacy
  - Study leave from employer

• **Virtual World**
  - Flying Solo
  - May not access all materials
  - Help from a distance
  - Viewed by some as an easy option
  - Need for computer literacy
  - Study leave ? available
Personalised Student Support
Valuing the students’ experiences
Valuing the students’ experiences

• Taught modules
• Blended learning modules
• Master classes
• Accreditation of Prior Learning (APL)
• Accreditation of Prior Experiential Learning (APEL)
• Accreditation of Worked Based Learning (AWBL)
It is important to obtain and evaluate feedback from the students in order to enhance future education programmes.
Do they feel they are a better prepared workforce?
Student comments

“Scary at first but as I progressed developed more confidence in the programme. Found it difficult to get into some of the discussions as previous students had already said what I wanted to say. Makes me think about what I am doing”

“Infection control is massive - I did not realize this until this programme - I see my practice changing. Good range of topics covered, well presented materials”

“This computer based module is very hard - thought it would be easier than attending University.”

“I’m not a nurse and I find the modules very user friendly and applicable to all disciplines - scenarios can be related to my own area of practice and the discussion boards help me develop more insight into the subject.”
EXTERNAL EXAMINER COMMENTS

• an excellent CPD programme which is student friendly and shares sound research based lectures and interesting theme orientated activities. I am particularly pleased that the E learning portals are being used and that the study and support materials are subject orientated.

• a robust mechanism is in place for management of assessments. The IPC modules offer an interesting approach to infection control

• for the IPC specific CBL module - I have worked with some good e-learning packages in the past but find this to be well mapped and student friendly.”
Have we empowered students with infection prevention and control concepts?
Have we instilled a stimulating interest in the field of infection prevention and control and global health?
Have we developed lifelong learners?
“Education is the most powerful weapon we can use to change the world.”

— Nelson Mandela
Are they Clinically Effective?

• “The delivery of care in the most appropriate and evidence based way”

We can prevent and control infections if we provide research evidenced-based engagement in education that has a positive impact on patient outcomes.
Evidence - application to practice

Little thought as to new skills

New ways but same old assumptions

Agreement is reached easily

Creative and critical thinking

Diversity, improvement

Improved Patient Outcomes

NEEDS
- new ways
- new assumptions
- new skills

Diversity, improvement
Northumbria continually strives through CPD activity to Deliver high quality educational outcomes to enable students to be clinically effective.
(IPC) Student progression

• Progression to Higher Awards
• Many now in senior professional posts
• Many students publish their work
• Many take up the challenge of steering/advisory group involvement
• What differences does their education make in practice?
Educating & enabling students to:

– do the right thing (Knowing what one should be doing)

AND

Being able to implement acquired knowledge into one’s practice (doing the right thing)
CONCLUSION

• Healthcare provision is complex with numerous dimensions and dilemmas.
• IPC Practitioners often face challenges in implementing excellence in practice and they need to be supported by knowledge that the interventions and treatments they provide are evidence based and clinically effective,
• All health care workers need to be life long learners with the requisite IPC knowledge/skills and competence to achieve clinical excellence and clinical effectiveness
• CPD is a necessity not an option
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Further Information

• Faculty of health and Life sciences: School Of Health Community and Education Studies:
  
• [www.northumbria.ac.uk/cpd](http://www.northumbria.ac.uk/cpd) or
• [joan.cochrane@northumbria.ac.uk](mailto:joan.cochrane@northumbria.ac.uk)

• CPD Enquiries 0191 2156222
References

• DH (2011) *A Framework for technology enhanced learning* Department of Health
• Lawson M, Nestel D and Jolly B (2004) An e-portfolio in health professional education *Medical Education* 38: 545-546