

Learning Disability Evaluation

Part 1: Evaluation of the BA(Hons) Applied Nursing
(Learning Disability) and Generic Social Work

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Evaluation of the BA(Hons) [Applied Nursing (Learning Disability) and Generic Social Work

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Introduction

An evaluation of the BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work programme was commissioned by the Strategic Health Authority in March 2009. This report documents the model and process of the evaluation, the methods used for collecting data and the key results, concluding with recommendations for improvement.

A bid to evaluate the joint BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work was submitted to the SHA by SpeakUp Rotherham www.speakup.org and The Centre for Professional and Organisation Development, Sheffield Hallam University www.shu.ac.uk/cpod

This evaluation is part of a broader evaluation of learning disability training at Sheffield Hallam University and a Part 2 report will be available in April 2010. The Part 2 report will review the learning disability evaluation in relation to world class commissioning.

Aims of the evaluation

The evaluation aimed to:

- explore the extent to which the BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work programme produced graduates 'fit for purpose' for the local workforce (Sheffield, Barnsley, Doncaster and Rotherham)
- explore the experiences of students through years 1, 2 and 3 of the BA(Hons) Nursing and Social Work - programme

About this report

Section 1 of this report will explore background information on the joint course and its emergence across England in the 1990's, outlining the driving factors that led to a demand for the commencement of a course in Sheffield in 2006. An outline of the course, the students it recruits and attrition rates will be presented. Details of the model of evaluation and a framework for presenting the findings from the evaluation will be addressed in this section.

Section 2 of the report will present the results of the evaluation data against the two main objectives of this study: 1. The extent to which the BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work programme produced graduates 'fit for purpose' for the local workforce (Sheffield, Barnsley, Doncaster and Rotherham) and 2. the experiences of students through years 1, 2 and 3 of the BA(Hons) Nursing and Social Work - programme. Findings will be presented using Bloom's taxonomy, drawing upon the six levels of knowledge as illustrated in Figure 1:

Figure 1: Bloom's taxonomy and student experience

Knowledge level	Student experience
Knowledge	Define, identify, state, list, differentiate, discriminate, recognise,
Comprehension	Explain, translate, interpret, match extrapolate
Application	Construct, Choose, predict, demonstrate
Analysis	Distinguish, separate, organise, infer, classify
Synthesis	Compose, formulate, create, produce
Evaluation	Debate, judge, critique, assess, compare

The use of Bloom (1956) in Part 2 of this report will specifically present evaluation data in relation to Bloom's 6 levels of knowledge. Bloom's taxonomy is used in educational settings to identify the levels of knowledge acquired by students on a particular professional training programme. The framework is useful for this evaluation when seeking to evaluate the impact of the joint training programme, as it enables the evaluation to: explore knowledge development over years 1, 2 and 3 of a programme and helps to understand the development of knowledge in nursing and social work of students who are undertaking the joint BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work programme. Figure 1 above illustrates that the higher level knowledge areas are analysis, synthesis and evaluation. This section will explore student perceptions of their knowledge in nursing and social work over the three year programme and draw upon the observations of student knowledge and practice of employers and commissioners.

Section 3 of the report will discuss the findings presented in part 2, by drawing upon evaluation data from placements, commissioners and tutors of the programme. This section of the report will draw upon the work of Dave Sims (2007) who undertook an Educational Doctorate entitled: *The Influence of Joint Training in Learning Disability Nursing and Social Work on the Professional Identity, Skills and Working Practices of Graduates* at the Institute of education, London.

Section 4 will present recommendations for improvement of the programme in relation to improving the experiences of students and strategies to continue the 'fitness for purpose' of the programmes graduates.

Section 1:

The emergence of a joint programme in Nursing and Social work - Learning Disability

In 1988 the two professional bodies for nursing and social work (the then General Nursing Council GNC and the Central Council for Education and Training in Social Work CCETSW) decided to pilot two jointly validated programmes which would enable students to jointly qualify as a social worker and a learning disability nurse. At the time it was recognised that there was an overlap in the interests, function and competence of nurses and social workers (Mathias and Thompson, 1992, cited by Sims, 2008). In 1994 the then Nursing Midwifery Council (previously the English National Board for Nursing) and the Central Council for Education and Training in Social Work CCETSW) agreed a joint strategy for shared learning and in 1996 they developed a policy on conjoint approval of joint training in learning disability nursing and social work (Sims, 2007:33). The English National Board clarified at the time that "all nurses needed inter professional and multi-disciplinary team working skills, the ability to network and skills in multi-professional assessment and care planning (Sims, 2007).

During the 1990's further joint training programmes developed in universities in England, including: Portsmouth, South Bank, Hertfordshire, Teeside, and Salford. These programmes were initially based on integrating the professional requirements of the Diploma in Social Work and the Registered Learning Disability Nurse qualification in a three year programme. It was later that the degree in Social Work became the standard pre-qualifying training for social work. The demand for the joint course was led by Chief Executives of Learning Disability services and aimed to provide professional training that met the holistic needs of people with a learning disability as well as to ensure practitioners are able to work in many of the newly emerging joint services for people with a learning disability. Interestingly very few joint courses for learning disability have emerged since the 1990's (apart from Sheffield Hallam University) although three universities have validated joint courses

in mental health and offer a BA(Hons) Nursing and Social Work - mental health. These universities include: South Bank, Salford and Bedfordshire University.

The Sheffield BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work

In 2004/5 the Heads of Learning Disability Services at the Sheffield Care Trust, Doncaster and South Humber, Rotherham, Derbyshire and the Assistant Director of Social Services Barnsley became part of a steering group to influence and shape the curriculum content of the joint programme. There was a consensus view from the steering group that a BA (Hons) Nursing and Social Work - learning disability might be more appropriate to train practitioners in the field of learning disability, than the singular learning disability nursing programme which had been running locally. The steering group worked with a programme facilitator, who in turn worked with staff from the nursing and social work departments in the Faculty of Health and Wellbeing at Sheffield Hallam University to create a structure and operational procedure for recruiting and ensuring the course was operational from September 2006. A user and carer group worked with the steering group to ensure that the views of service users and carers were represented throughout the programme. The innovative 'experiential family and carers' placement emerged as a result of consultation and engagement with service users and carers.

The core curriculum of the joint programme

The joint BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work (2006) was originally designed on the Teeside joint course model, where the joint course drew upon existing modules from nursing and social work programmes and used tutorials and seminars to bridge the learning. One of the disadvantages of this model at the outset was that a small cohort of joint students might struggle to share their learning with a much larger cohort of singly trained professionals in both nursing and social work. The revalidation in 2009 gave the team an opportunity to revise the structure of the programme to create more integrated modules of nursing and social work:

"one of the significant flaws of the original programme is that it relied on parachuting modules in from another course, the social work course, and it didn't work for students and it didn't work for the team. So the bits we had control of, we had control of and the bits we didn't have control of we didn't have control of and they never met. And the problem was that the students felt the same way" (Tutor)

The joint course was service led and at the time placed considerable challenges on staff at the university to consider new ways to work to facilitate the operational delivery of the newly validated programme:

"Its been difficult, its been a complicated course to run and it hasn't always received the support it should have done from the university and it hasn't always received the support it should have done from people outside of the university, so placement providers and so on ... but what has been

enjoyable is first of all we've got to the end of three years and they're [the students] are good by anybody's yardstick and it has been enjoyable to get them there" (Tutor)

In the spring of 2006 the BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work took its first cohort of students. At this stage it was identified that there were some seconded places to the programme which were as follows:

Figure 2: Secondment Arrangements for the joint programme commencing September 2006

Area	Strategic Health Authority Funded places	Take up of secondments
Rotherham	1 place	No take up
Sheffield Care Trust	2 places	1 student graduated 2009
Doncaster and South Humber	2 places	1 student graduated 2009 Other applicant rejected as they didn't meet the entrance requirements

Doncaster and the South Humber Trust (now, Rotherham, Doncaster and South Humber Mental Health Trust (RDASH) have not seconded staff since 2006 and Rotherham have had no seconded staff on the programme. The Sheffield Care Trust has maintained their secondment arrangements, seconding one member of staff onto the programme for each cohort intake since 2006. In an interview for this evaluation the issue of secondments was raised identifying that joint health and social care services may experience difficulties providing equality of opportunity to social care staff to access a secondment to the joint course:

"Can I just say, the difficulty about that is, from our point of view, but you might need to be aware of, is if it's a health person, health part of our service who gets the secondment, it's relatively straightforward, the process is straightforward. If it's someone employed in neighbourhoods and community care, because the placement is health funded, we have real difficulty in whether we have to second them into our service to second them into the course or whether we get neighbourhoods to invoice us for the funding back for their post. Because for the first time that's happened, we've got a seconded staff member who is neighbourhoods and community care contracted, so we're struggling through that, but it might have an impact on how they are on the course" (The Sheffield Care Trust)

The recruitment strategy to recruit to the programme used a range of local and national press releases and even secured David Brindle writing a piece in The Guardian on the innovative family placements.

Twenty three students were finally recruited to the programme to commence the programme in September 2006. Since this time the following students have been recruited to the programme:

Figure 3: Numbers of recruited students since 2006

Year	Students recruited	Students graduated/still on the programme as of July 2009
2006	23	17
2007	22	19
2008	28	22
Total students	73	58

The course appears to attract a high number of students who have learning contracts for a learning difficulty (and other areas of need). Most of these students do not have their need for a learning contract identified until they are actually on the programme.

Figure 4: Numbers of students with learning contracts

Number of learning contracts (LC)		
Year	Number of learning contracts	Total number of students
2006	7 (41%)	17
2007	1 (5%)	19
2008	3 (13%)	22

The majority were/are for dyslexia; one student had a chronic health condition, another student a mental health condition and one with ADD. From the 2006 cohort all but one of the 7 students with a learning contract have completed their programme of training (two are currently completing their written work within an agreed extension).

Attrition of students on the programme

Attrition has been relatively high on the course to date. There is evidence to suggest that students who are older on entry are more likely to complete the programme than younger students and those who had only the minimum educational qualifications on entry were less likely to complete than those with higher level qualifications (Prymachuk et al, 2009).

Model of evaluation

A stakeholder evaluation was undertaken to ensure that all stakeholder groups would be able to contribute to the evaluation, this included:

- Year 1, 2 and 3 students of the course
- Placement mentors/assessors in health, social care, education and the voluntary sector
- Practice Assessors (from social work)
- Tutors teaching on the programme
- Commissioners of the programme

Design of the evaluation

Speakup and SHU set up a project team to explore and agree a design of the evaluation. Some key elements that shaped the design were as follows:

- People with a learning disability to be involved in all stages of the evaluation and trained as interviewers (via support from Speakup)
- Training in evaluation methods to be provided to people with a learning disability and their support person
- Support and debriefing (post interviews) to be provided to people with a learning disability who are involved in the evaluation
- The evaluation to involve a sample from all stakeholder groups
- The evaluation data to be analysed using Bloom's taxonomy in assessing knowledge

Involving people with a learning disability as interviewers

We identified the individuals who had expressed an interest in becoming involved in the evaluation programme and Jodi, Jonathon and Hayley were key representatives

from Speakup. In addition we were advised from the project team that Mark from CHAD, a Doncaster based advocacy service also wished to be involved as an interviewer. Mark, Jodi, Jonathon and Hayley then worked with Sheffield Hallam University to refine the interview schedules and to re-write the questions in a way that made more sense to them. For example instead of referring to the 'jointly trained practitioner' the preferred term for Speakup was 'combined nurse and social worker'. All interviews were tape recorded using small digital recorders and each interview was transcribed. The transcript was used by Sheffield Hallam University to explore the quality of interviewing (ensuring no leading questions were being used) and the use of probing was being used appropriately. Feedback was given to Speakup and CHAD on particular areas of development of each of the interviewers and this process was continued throughout the evaluation process.

Engaging Students in the Evaluation

An initial quantitative scale questionnaire was sent to all 58 joint programme students, informing them of the evaluation study as well as inviting them to participate in the evaluation. Students were then invited to provide their contact details if they wished to be invited to an interview.

Our methodology to engage students via an electronic questionnaire was twofold: 1. it aimed to reach all students wherever they were in terms of geographical placement location and 2. Interviewers would be able to respond to all students who were interested in being interviewed (without needing to access placements or tutors in the first instance). The response to the electronic questionnaire was poor and eventually we obtained a response from one third of the student group. This sample size was too small to present findings for this report.

We followed up the request to be involved in the evaluation by telephoning or texting the students. We finally interviewed 23 students out of a potential 58, which represented a 37% sample of the students. Details of the student sample (with pseudonyms) are detailed in Appendix 1 and the interview schedule is found in Appendix 2.

Engaging Placements in the evaluation process

The placement team at Sheffield Hallam University has a discrete placement officer for each undergraduate professional programme. The placement officer for the joint course supplied details of all the placements currently being used by 1st 2nd and by 3rd year students (approximately 40 placements). A letter was sent to all placements and placement supervisors by post (Appendix 3). Additional details of independent long-arm practice assessors (these are social work practice assessors recruited to jointly assess the student in the third year) were posted the letter via email. While some placements made direct contact on receipt of the letter, Speakup actively rang placement areas to try to arrange interviews with the mentors and assessors as well as to arrange an interview with the joint programme student placed with them, on the

same day. A total of 15 placements out of 40 were interviewed which represents a sample size of 40%. Details of the placement sample are provided in Appendix 4.

Engaging Commissioners of the joint programme

It was a difficult process to identify key individuals who were responsible for local workforce planning and who were instrumental in commissioning the BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work programme. This became even more complex when the evaluation team learnt that the commissioned numbers for the programme had increased by 2 for the September 2009 intake. The evaluation team were keen to identify the individuals who were in positions to influence the commissioned numbers for the programme and to learn more about the drivers in practice that appear to steer services towards supporting the joint course. The starting point was to revisit the key individuals who had initially steered the demand for the joint course.

Two of the individuals had retired so we set out to identify and interview a sample of key individuals from Health and Social Care organisations from services in the locality. To ensure confidentiality of the sample interviewed we will refer to the sample as illustrated below in Figure 5:

Figure 5: A summary of the sample of interviews of commissioners of the joint programme

Health Organisation A	Senior Manager (telephone interview)
Social Services A	Director (telephone interview)
Health and social care Organisation B	Director (face to face)
Social Services B	Director (telephone interview)

We are assuming that Sheffield, Rotherham, Doncaster and Barnsley all have at least four health and four social services areas of responsibility for people with a learning disability. We made contact with four individuals out of a possible eight areas and interviews were carried out with senior/Director level individuals. This represented approximately 50% of the sample of commissioners of the programme. Individuals were emailed and telephoned informing them of the study and asking if an interview could be arranged at a time of their convenience. Three telephone interviews and one face to face interview were finally undertaken by Sheffield Hallam University, taped and transcribed.

Engaging tutors of the programme

The joint programme initially commenced in September 2006 with four learning disability nurse tutors and one social work course leader. Since this time and since a revalidation of the programme, more tutors from social work and nursing have become involved in the teaching and support of the programme. This evaluation includes interviews with three of the initial team of five: namely 2 learning disability nurse lecturers and the social work course leader. An email was sent to all of the tutors on the programme advising them of dates that Speakup would be available for undertaking interviews. The three tutors were those who were available on these dates and who made contact with Speakup to secure and arrange an interview.

Summary of the stakeholder sample for the evaluation

The evaluation interviews were scheduled for June, July and August 2009. The urgency to ensure interviews commenced over this period was that the first cohort were completing the programme in July 2009.

The sample obtained for the evaluation was predominantly a convenience sample and would seek out and interview students and placements that were available and willing to be interviewed in this time. Speakup took complete charge of the interview schedule and an added complication was that each interviewer needed a support person and travel to and from placement areas had to be planned in advance. Sheffield Hallam University undertook four out of the 23 interviews when it was identified that Speakup was unable to be in two places at the same time or if there was a support person/interviewer available. A summary of the sample for the evaluation is detailed in Figure 6:

Figure 6: summary of the sample interviewed for the evaluation

Stakeholder group	Numbers interviewed	Potential number available for interview	Percentage of sample
Students	23	58	37%
Placements	15	40	40%
Commissioners	4	8	50%
Tutors	3	8	37%
Total interviews	45		

Section 2: Results

Data Analysis

All forty five interview transcripts were imported into a qualitative software data analysis programme NVivo 8. This enabled a series of codes to be developed from the data, 'working up' from the data inductively. Positive and negative aspects of the course were identified from a range of perspectives (for example: classroom teaching, placements and support). Analysis was undertaken by attributing the transcripts into sets, so that an exploration of themes emerging from student's tutors, placements and commissioners could be examined separately. The data has been presented in a way which aims to illustrate in its entirety all of the negative and positive aspects identified through the interview process. The data has been presented within Bloom's taxonomy to help illustrate how there is change and progression across student learning over the three year programme.

Students likely to study on the joint programme

Apart from one student 22 out of 23 students from the sample (please see appendix 1) had either a relative with a learning disability (10 out of 23) or had previous paid or unpaid work experience with people with a learning disability (12 out of 23). It is very likely that the previous personal experience with people with a learning disability is the single most powerful factor to influence the choice of people to undertake professional training in learning disability. This has implications for the recruitment of students to the programme.

Most of the students from the sample came from the north of the country (the furthest afield was from South Wales). It is clear that the programme recruits from a wide northern geographical area but also recruits from its local regions specifically, Sheffield, Doncaster, Barnsley and Rotherham. Many continue living at home while studying for the course and have an already established home life. Some live in halls of residence but in the sample this proportion was small.

Students' positive aspects of the course are presented in Figure 7 and difficulties they have encountered are presented in Figure 8. A more detailed account of the issues raised by students is presented as Appendix 6.

Figure 7: Student's best aspects of the joint nursing and social work programme:

Issue	Number of times issue raised from the sample of 23 students	Example:
Placements	11 (48%)	oh I have had too many I think so far. Definitely with people on a one to one basis while on placements and noticing that you have made, even if it's a tiny difference but you've made a difference while you've been there (Samantha yr2)
Tutors	8 (34%)	the lecturer (social work) she seems to be the one who is just consistent with everything. If ever I've asked her for anything she says well I'll ring you back, I'll find out right now (Jenny yr1) my tutor (nursing) I think she is lovely. I asked her for some help and she said oh try this book and this book and then that night she'd sent me an email with link to a website I feel as though she has always got time for me (Holly yr1)
the modules	1 (4%)	some of the modules I've really enjoyed as well (Catherine yr3)

Figure 8: Some of the difficulties the students have encountered have been:

Issue	Number of times issue raised from the sample of 23 students	Example:
Organisation of the course	11 (48%)	.. see what its like next year when they have said that they've integrated it a bit more - hopefully they have. I don't want to, I mean when we qualify I'll feel better if next years more integrated because otherwise I wont be comfortable going into a social work role (Sandra yr2)
problems with blackboard	6(26%)	BB was quite difficult at first (Jane yr 1)
High workload	5 (21%)	the workload is extremely high, difficult really, (Jackson yr 2)
Negative perceptions of the course by others	5 (21%)	some of the students are like your only the joint people, and we are not only the joint people (Katie yr 2)
Placement issues	5 (21%)	it wasn't possible for us all to have placements with both a nurse and a social worker in our final year .. if I was to do the course again then I'd like a placement opportunity like that to

		see nurses and social workers working together (Kyle yr3)
poor communication	4(17%)	confusion and disorganisation about word counts (Jenny, yr1)
level of support	4 (17%)	In the first year we should have had more tutorial one to one support (Danielle yr3)
content of the course	4 (17%)	would love to do Makaton sign language .. I think its nice if someone walks in and says hello in a way that the person communicates (Amy yr2)

Bloom's taxonomy

At the outset of this report Bloom's taxonomy was presented as a framework to aid data analysis. The taxonomy is represented below:

Figure 1: Bloom's taxonomy and student experience

Knowledge level	Student experience
Knowledge	Define, identify, state, list, differentiate, discriminate, recognise,
Comprehension	Explain, translate, interpret, match extrapolate
Application	Construct, Choose, predict, demonstrate
Analysis	Distinguish, separate, organise, infer, classify
Synthesis	Compose, formulate, create, produce
Evaluation	Debate, judge, critique, assess, compare

The data presented in Figures 9, 10 and 11 identify how data presented from 1st year students are differentiated from second and third year students:

Figure 9: joint course Knowledge of nursing and social work by 1st years

	Nursing	Social Work
Knowledge	<p>I am learning a lot more about the health issues (Peter yr 1)</p> <p>You get exposed to different health needs that you didn't know about (Peter yr 1)</p> <p>we have been talking quite a bit about the health concerns because they are complicated in learning disabilities (Sally yr 1)</p> <p>Yeah I have learnt a lot on this second placement about health issues (John yr 1)</p> <p>I don't feel I know enough about health issues - no not yet (Jack yr 1)</p> <p>I have recently bought an A - Z of disorders and syndromes, I am naturally inquisitive and want to know everything (Holly yr 1)</p>	<p>we have not done much social work in the first year, so I wouldn't say I know enough at the minute (Sally yr 1)</p> <p>I haven't really done any social work yet (Jane yr 1)</p> <p>I am not really sure where learning disabilities fits into social work yet (John yr 1)</p> <p>No not yet because we've not really done much on social work (Jack yr 1)</p> <p>I am getting exposed to it more on placement and hope that this will continue in year 2 and 3 (Peter)</p> <p>I feel I know as much as I need to know and I will expand on that in my second year (Jenny yr 1)</p>
Comprehension (Understand meaning, translation)	<p>I have been learning from my brother and on placement learning about a lady who is diabetic .. so its understanding each client and figuring out their health needs (Jane yr 1)</p>	
Application		
Analysis		
Synthesis		
Evaluation		

Figure 10: joint course knowledge of nursing and social work year 2

	Nursing	Social Work
Knowledge	We have learnt all about the different syndromes and the people on the autistic spectrum and not just health issues but its life issues and problems that people face and the stigma that they face and the prejudices they need to overcome (Jackson yr 2)	
Comprehension (Understand meaning, translation)	<p>My knowledge is definitely improving. I've been doing some workbooks what the university provide and my own research (Samantha yr 2)</p> <p>Probably not in depth but I know quite a bit about the health problems through the teaching, the advanced learning disabilities modules (Tanya yr 2)</p>	<p>And there are things that you wouldn't think are social work but are. You know all the assessments and things, I would have put this down to the nursing side because I've done assessments from the nursing point of view, but it is a big crossover (Katie yr 2)</p> <p>I don't feel I know enough about social work issues and people with a learning disability (Tanya yr 2)</p>
Application	<p>I'd like to say I am reasonably confident and if there were issues that maybe I didn't know about I think that I communicate well with my mentor and he would give me advice on things ... I would know where to seek more information or who to ask (Chloe yr 2)</p> <p>I think there's always that feeling oh I don't know this and that about this syndrome but a lot of its through you learn through experience and I think in 20 or 30 years time I'll still be thinking I don't know enough about it (Amy yr 2)</p> <p>its obviously giving us the base, the knowledge that we need to work with people with learning disabilities. And obviously like reading about different health issues and then on placement your around all the health issues like autism or dementia and all sorts (Hilary yr 2)</p>	<p>I don't feel I know enough about social work issues and people with a learning disability as my social work placement is working with people with dementia (Samantha yr 2)</p>

Analysis	I would have like more in-depth. For example Down's syndrome, what that meant for the person, what effects the Down's syndrome would have or cerebral palsy or spina bifida or you know the whole different things I though it would look into and it hasn't (Katie yr 2)	
Synthesis		
Evaluation		

Figure 11: joint course knowledge of nursing and social work by 3rd years

	Nursing	Social Work
Knowledge		
Comprehension (Understand meaning, translation)	<p>I hope I know enough about health issues but its also something that I'd develop further throughout my career just to be able to keep up to date (Kay yr 3)</p> <p>I think I have learnt quite a bit. I don't think I know enough, I don't think you can ever know enough, but I think this course has taught me quite a bit about health issues that people with learning disabilities do have. But no I don't think I know enough (Sadie yr 3)</p>	<p>I am not as confident in social work as I am in nursing (Kay yr 3)</p>
Application		<p>I know more about social work issues than I do about nursing issues, yes but that's purely from the placements that I've had (Catherine yr 3)</p> <p>Whilst being out on placement .. thats really taught me a lot about social issues that people with a learning disability face (Kyle yr 3)</p>
Analysis	<p>There is still a lot more to learn and I think the more you learn sometimes the more you realise you don't know. But its helped I think its helped if you know where to go to solve the problem or to get support (Erin yr 3)</p> <p>I don't think you ever know enough. I'd hate to think that I knew everything. So no, I'll never know enough and there is always something new to learn, and I'll never feel prepared to go out there but I am prepared to learn (Danielle yr 3)</p>	

Figure 12: Commissioner/employer observations of joint training students knowledge levels

Blooms (1959) Taxonomy - Cognitive Domain - Knowledge

6 levels	Nursing	Social Work	Combined new paradigm knowledge
Knowledge			I will just say I was at a Mental Capacity Act Awayday on Monday and the course came up, because people were complaining that nurses didn't have enough safeguarding and Mental Capacity Act deprivation of liberty information on their training courses. And there were a couple of people who had come across this particular course and were very complimentary about it saying well they do on the joint course. But then we said well that might be because that's part of the social work curriculum as opposed to the nursing curriculum. But I think that's a good example of where even if someone chooses to be a nurse at the end of the course, their practice is a much better informed practice because of the joint training that they've done. (Social Services Organisation A)
Comprehension			
Application	"But as I say we've felt probably five to ten years ago, ten years ago and maybe then up until Sheffield Hallam taking over the skills that weren't happening were; really good robust care planning skills. Clinical skills as in, you know, you get a qualified nurse in that's so but, you know, I never got the opportunity to give an injection when I did my training. Assessment skills, a lot of the basics that then enable a nurse to actually go on and become really skilled at being a really good assessor, setting up a good programme of care, being able to communicate with lots of different professionals. We have found that the course that Sheffield Hallam has been running and the calibre of students that have applied, we've just found that really very good" (Health Organisation A)	although it's low secure and assessment and treatment, they're really impressive though it is extremely a person-centred, a person's rights, you know, consent, capacity, deprivation of liberty, all of which still needs to be	So it's that breadth of knowledge that we get from them as well that's got to benefit service users because it keeps everybody on their toes, and they're a good source of information, so it's quite a two-way process. You know, we are learning from the students that their experience, and the theory that they're instilled with, as much as it's vice versa, we're showing them how we run the service and how we manage our service. The only disadvantage to service users would be if the students were not appropriate in any way, and we haven't had any cause for concern. (Health Organisation A) Especially lately as we're getting the third years

		<p>considered. So the students have to be aware and demonstrate a knowledgebase that's appropriate to the area they're working in of all those issues, and Angela has said that they have done. (Health A)</p>	<p>through on placement, the person who was in that placement was extremely good, extremely competent and was quite an autonomous worker, because the support the person had, the clinical supervisor was off sick for quite some time, so it's enabled the nurse to mentor that person so they weren't on their own, but it was a social care placement. But he was extremely good, and the team are very impressed with the work he did, and I think that shapes their feelings around this is exactly what we need. (Health and Social Care B)</p> <p>but from what I've heard from the team leaders and other practitioners in the teams were that they'd got a good knowledge of what a social worker does. I mean the bread and butter work of a social worker to move people through services and to move them on and coordinate the services around them, but they'd also got a good knowledge of health issues and how they might impact on someone, which they found extremely beneficial. Especially in clinical team meetings, they felt they were more able to contribute in a more holistic way, so that if a nurse was saying something around the health needs, they could contribute to that clinical discussion and planning for the person, if you like, whereas the social worker may have stepped back and not engaged in that type of discussion. And likewise, they could also advise the team on the social care aspects and what they needed to do in relation to funding and moving people through the system so.(Health and Social care Organisation B)</p> <p>all the students from the joint course have shown particularly good values, a really good philosophy, very person-centred, a real awareness of how services need to be shaped around individuals rather than slotting people into services that are there. So it's a new mindset, if you like, that is really instilled in people of</p>
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			<p>the need to look at different sources of funding, self-directed support, different packages of care, and what that might mean in their role.(Health and Social Care B)</p> <p>I think they should bring something, but I think it depends on their practice rather than what you can teach, or they could be taught. But they should bring something about that grey area. And, you know, the medical model versus the social model. and they should bring a richness to the work that we're needing to do now in looking at what is healthcare and what is social care. And I can certainly see them being instrumental, again once they've got a deal of practice behind them, in relation to issues like continuing care. And challenging behaviour. (Social Services Organisation A)</p>
Analysis			<p>And that seems to make them as people, people that are willing to learn and knuckle down and get to the nitty gritty of research and evidence base, and crossing the Ts and dotting the Is in care plans, and not being blasé when it comes to thoroughness of risk assessment, or you know really thinking a problem or a scenario through, and being able to problem solve, and being able to look at the big picture, and also take everything into consideration. And the knowledge that they have about the laws of the moment, you know, certain acts that they need to know about, what's topical, what the initiatives are, what the Government is telling us we should do, what policy says, they seem to be geared in all the right directions. (Health Organ. A)</p>

Synthesis			by the time we're getting third year students and even second year students, these are students that could leave us standing, you know, they're the ones with the finger on the pulse and the most up-to-date research, evidence, or we'll find that when we've been doing training sessions on the Mental Capacity Act, and we get the students in and they know all about it, and they either know a bit more besides or they've had a different take on it.(Health Organisation A)
Evaluation			But we at the moment are doing a large safeguarding investigation, and in another three years when these people who are just coming off now have got three years experience, they would have been perfect to have acted as the investigators for this safeguarding investigation.(Social Services Org A)

Section 3: Discussion

Are the joint training graduates fit for purpose?

Section 2 utilises the data to illustrate how the spread of data can be understood within Bloom's taxonomy. For example the data illustrates that students' on the joint programme tend to develop nursing knowledge rather than social work knowledge on year 1 of the programme. Students express uncertainty about social work issues in this year. In year two students appear to express clear aspects of nursing knowledge citing syndromes and conditions of learning disability. In year 2, the students feel that they are able to combine their knowledge in nursing and social work (after their generic social work placement) but still feel unsure about knowledge of social work in learning disability. In year 3 it is likely that the levels of confidence about either nursing or social work will have a direct correlation to the type of placement they have in the third year.

It is unfortunate that not all students will be able to work alongside a social worker in learning disability for this final placement. This is something that all the students express would be the ideal and most appropriate placement for year 3. In year 3 the students appear to acknowledge their limitations and instead of citing conditions of learning disability are able to confidently express that they do not know all they need to know about health and social care in learning disability but they are keen to find ways to identify gaps during their career. In contrast however employers and commissioners observed some examples of higher order knowledge of the joint programme students, which suggests that the graduates may not immediately identify their use of higher order knowledge (combined nursing and social work knowledge) in practice.

The use of Bloom (1959) in Section 2 of this report highlighted that students are able to use knowledge from the discipline of nursing and knowledge from social work to enlarge their *breadth of perspective* as observed by employers and commissioners (Part 2: Figure12). Sims (2007:129) argues that within his study *breadth of perspective* became a key feature of the identity of the jointly trained practitioners and resulted in widening their perspective on what is possible in practice and with a higher likelihood a desire to "push back the frontiers of individual practice" (Sims2007:129).

A competition for third year learning disability social work placements

For undergraduate combined nursing and social work students, fitness for purpose depends on acquiring the competence in both professional specialties. This competence is only possible if the undergraduates have access to social work placements equally to nursing placements. Currently there may be a risk to the programme if third year social work placements are not available. The data outlined in Section 2 suggests that third year students will gain confidence to practice from

placements in the third year. The under graduate and Masters pre-qualifying programmes in Social Work have been running in Sheffield for some years. Both Sheffield University and Sheffield Hallam University have a high demand for social work placements. The BA(Hons) Applied Nursing (Learning Disability) and Generic Social Work commenced in 2006 and this placed an additional demand on social work placements. This had had quite a severe impact on the third year students who do require a social worker in practice as well as a learning disability nurse to dually assess their practice and competence. The difficulties of obtaining suitable placements led to some students having to leave Sheffield to obtain a suitable placement. The following extract relates to one of the seconded students:

"But also she had real difficulties in placements. Not so much health placements ... the placement officer had real difficulty in placing people, and I know our first person had to go out of city quite a way for one of her placements. I suppose that's our issue as much as the university's issue because of the amount of social workers we've got or able to support people in placement. So she did have problems with that, but we worked with her and with the placement officer in trying to sort that out, and we did that quite effectively" (Health and Social Care Organisation B)

The course team have tried to work with the placement team to explain the need for third year students to have learning disability social work placements in their third year. The response to this request has not been favourable as the learning disability social placements are viewed as accessible to all social work students. Yet there does appear to be some argument to support ring fencing the learning disability placements for the joint course as this might help improve the quality of the experience of the students on the joint programme in social work areas.

"I have tried to ask for a learning disability placement for the final year and if we could ring fence those and the answer has been well that wouldn't be fair. And I am not sure who its unfair to because they seem to say well students on the social work course may want to do that. Well if they do want to be learning disability social workers then surely they should apply for the joint course"(Tutor)

A suggestion from one of the commissioners of the joint training course was that more communication with the university needs to take place to resolve the issue of placements with social workers:

"So I think that is still an issue that needs resolving and the amount of placements available in Sheffield for the social care elements of the course. Whether the university can start some type of communication with us from their side what are the barriers and what are the problems they have in placing people then we can address that. I do raise it in senior management teams all the time. The difficulty is within health I expect every qualified nurse to be able to take students and mentor people as part of their role, and we put that in the job descriptions. Social workers don't. It's in addition to their role" (Health Care Organisation A)

Joint training Nursing and Social Work - how is it possible?

While evaluation data in section 2 supports the model of a three year combined nursing and social work degree - learning disability, there were suggestions from individuals that a three year course was unable to produce practitioners who were 'fit

for purpose'. The suggestion from a minority of respondents was that the course might better equip students if it was a four year course. This study found that there was some resistance to the idea of joint training by singly qualified practitioners. One of the tutors commented on this resistance as being more of an issue about not understanding the needs of people with a learning disability:

"outside of the university people in practice don't get learning disability services, because what they want to do is pigeonhole people, they want to say this person is a nurse or this person is a social worker. What they are failing to understand is that for a person with a learning disability it is irrelevant what qualification an individual has. It is highly relevant what skills that person will bring to the table to assist them in whatever outcomes they wish to achieve" (Tutor)

Resistance was suggested even when it was couched with praise for a jointly trained student:

"I suppose the first thing to say is that the feedback is that she was an extremely good student, and she did pass the placement without any problem. It was a third year student, and I think she started out more interested in nursing and ended up perhaps being more interested in social work. But the sort of feeling I suppose around it was that trying to do the two disciplines it all felt really quite sort of squashed and diluted. And that, although the student was excellent, she did appear kind of like confused at times when looking at the two separate roles (Social Services B)

Although the above extract recognises that the student was an 'extremely good student' and that she 'passed the placement without any problems' there was still a suggestion that the course might require being extended to a 4 year programme:

"So the feeling that we have, and I have actually asked some colleagues from the local authorities as well at a lead officers meeting recently, is that the course probably as it is leaves people, you know, they're not quite at the level that we'd expect for newly qualified social workers, nor at the level that we'd necessarily expect from newly qualified nurses. So whether the course, if it continues as a joint course, whether it actually needs to be longer, maybe needs to be four years" (Social Services B)

There was some suggestion that the source of this feedback might reflect the perspective of an individual practitioner:

"Again, just give you some feedback from the team manager, because I think he was the practice teacher at the time, and this may be coming from his own perspective because I know he's social work qualified. But he really did think that the student wasn't prepared in terms of social work theories, theories and models" (Social Services B)

One of the students challenged the idea that the course should be a four year course:

"yeah but they're combined, so that's the whole point of the course. A lot of it overlaps so you would just be repeating things if it was a four year course. Whereas people who haven't done it don't understand, people who are nurses and don't know about social workers don't understand what a social worker's role is and the other way around. So people who have done this course understand how they overlap and the similarities in the post" (Toni yr 3)

Another student added:

"I feel like I'm ready to get out there. You can never have too much, there's never enough and yeah you could make it a four year, but then you could make it a five year do you know what I mean? the overall course has been fantastic for me as an individual, but I still feel unprepared. But I could still feel unprepared after four years, after five years, after six years". (Danielle yr3)

The issue of resistance or thinking that joint training is "unthinkable" has been a finding from other studies (Sims 2007:129; McCray, 2002). Within this study the resistance was more likely to come from social work rather than from within nursing.

"I must say I have heard but I've not experienced directly that some of the students have experienced a little bit of resentment from social workers about the qualification. I can't give you any more details, it wouldn't be fair, but I do know that they have experienced difficulties in some placement areas around the support they are getting or are not getting because of a view of dual registration and qualification" (Health and Social Care B)

Over Assessment?

While some Practice Placement Assessors felt that the students did not have enough 'depth' in terms of social work theory and one assessor described one of the students as being "rushed" the student perspective suggests they feel that in some situations they may be over assessed:

"an obscene amount of work - nursing and social work documentation" (Catherine yr3)

"the workload was very high" (Sadie yr3)

"The workload is extremely high, difficult really" (Jackson yr2)

Tutors on the course have attempted to streamline the practice placement documentation but this was resisted as there was a preference for consistency of placement documentation across the singly trained social workers:

"We engaged with the placement team about practice placement handbooks. They informed us that they wanted them to be the same as social work. So we have two course handbooks for placements; a social work course handbook that is the same as the social work course and a nursing handbook which is our handbook. When we met with Practice Teachers and Practice Assessors, they told us well why cant we have a joined up book"? (Tutor)

Making a choice about employment

Although the joint course has been running since 1991 through six universities across England, there have not been significant developments in practice to develop joint roles/positions in health and social care in learning disability services. Sims (2007) found that from his research with 47 jointly trained practitioners in learning disability that 25 people were employed as social workers and 17 were employed as nurses with 5 working in the independent/voluntary sector. Only 4 of these individuals had got a job which referred to joint training as an entry requirement for the post. Of the 47 joint practitioners, 16 had qualified before 2003 and 31 had qualified since 2003. Sims argues that for the jointly qualified graduates there was "a conflict between the assumed identity (forced into singularity of role) and the

internal joint identity aspired to" (p128). He goes on to explain that "they expected to be able to use their skills upon qualification and continued to believe that this was what they had trained for" (p128). This is also a finding that has emerged from this evaluation:

"Probably, some feedback we've had from the students is, when we did our training, you only had one way to go. You were trained as a registered nurse, therefore you went and got a job as a registered nurse, and even then there were probably less avenues to go down as a registered nurse for learning disability. Now they get to the end of the third year and they actually aren't sure whether they're going to be a social worker or a nurse in LD, I think that must be quite difficult for the students"(Health Organisation A)

Sims argues (2007:130) that unlike other professional graduates the jointly qualified practitioners have to make a career choice and "are forced to select one of two directions" (Sims, 2007:130). This choice he argues is likely to be "influenced towards the discipline where there was less anxiety (p130) His own study suggests that social work was a slightly more popular career choice than nursing (25:17). The Sheffield evaluation suggests that the graduates have moved equally into nursing and social work and a tutor believes that the trend reflects the jobs available at the time:

"a couple of students have got jobs in disabled children's support teams as social workers, one has got a job within youth offending but wants to specialise with young people on the autism spectrum, we have 2 or 3 students who have got jobs as care managers where they are using a broad range of skills. One student went to work in Guernsey as a family support planning co-coordinator. We've got a couple of students who have jobs as staff nurses in community learning disability teams and one student who's working in a care home in Doncaster for people with profound and multiple learning disabilities. Another student went to Chesterfield in the Assessment and Treatment unit. Another couple went to the Care Trust so quite a broad range"

In terms of 'fitness for purpose' and the employability of the newly joint qualified graduates, most of the graduates are employed locally:

Sheffield Care Trust:	3
Sheffield Social Services	2
Doncaster Health	2
Doncaster Social Services	2
Derbyshire Health	1
Derbyshire Social Services	1
Guernsey Social Services	1

Employment prospects for joint practitioners

The employers of the services (placements and commissioners) see the joint training as developing a 'holistic practitioner' in learning disability rather than having a need to create a specific post for the jointly trained practitioners. There were examples of how a joint practitioner might better enhance the service by undertaking a particular role in safeguarding:

"And I could see that as more people entered the profession with these joint roles, they would be best suited for some of the principal practitioners' jobs. And certainly very well suited, dependent on what career ladder they took, for future management jobs. But we at the moment are doing a large safeguarding investigation, and in another three years when these people who are just coming off now have got three years experience, they would have been perfect to have acted as the investigators for this safeguarding investigation" (Social services Organisation A)

The term joint practitioner appears to be problematic as Sims (2007:128) argues it is a term that has been framed by educators, but is not a term which is current in practice. One joint practitioner suggested that the term is a 'misnomer' and would like to be referred to as a *jointly qualified practitioner* (Sims, 2007:128). Sims argues "the result was a term [joint practitioner] that was inspirational to students and visionary for educators but paradoxical because even after nearly two decades no respondents had occupied such a role in practice" (p157)

An interest in joint training as a development concept

Practice placements and commissioners of the course were generally supportive and favourable in the concept of joint training:

"I'd like to see generally in all social work training a lot more joint training. I don't have a problem with a general health and social care professional degree, that everybody does the same course for the first eighteen months, and then it's your specialism that kicks in at the end that does the, you do your placements in and one thing and another. But I do think we are, both in adults and children, going to have to have a much better understanding of the role of the other one, of the other profession, and the boundaries within that. And I mean of course in both disabilities and adult social work it's combined with the profession for physio and OT. You know, it's a very very complicated picture for your man in the street who's receiving care, and the more that we can do to overcome that the better". (Social services A)

CPD requirements for the jointly qualified practitioners

One of the joint course leaders recognised that there will be a need to develop a CPD strategy for the joint programme students. This strategy will need to meet the requirements of the GSCC and the NMC in terms of newly registered practice status. It may be possible for graduates to maintain dual registration but they may need to negotiate with an employer some time to enable them to maintain CPD requirements of the profession that they are not practising in.

"You know, if they move between social work and nursing for example to keep up their skills in both areas, I think my concern would be that they'd go into one or the other, and whilst they'd have maintained their basic knowledge and their good understanding of the other profession, they wouldn't necessarily develop their practice in that area" (Social Services organisation A)

Sheffield Hallam University has an *Advanced Professional Development (APD)* framework which comprises of a range of nursing, social work, inter-professional and uni-professional modules at Masters level. It is possible for a student to plan a Masters Programme through the APD framework and to draw upon the open work based learning units to specialise in research into learning disability practice.

Section 4: Recommendations for programme improvement

1. More learning disability social work placements needed

Securing the right placements is one of the successful elements of this course. The students rated their placement experience highly and most of the placements have been the right placements for the students to acquire the learning outcomes for the course. However more work is required to secure more placements particularly in the third year for the jointly assessed placement in nursing and social work. Appreciation should also be made of the time lecturers invest in nurturing the placements and providing appropriate support to students throughout the programme

2. Explore a strategy for a post-qualification Masters programme for the joint students

This is an area that the team needs support with in terms of development time and assistance from the heads of nursing and social work. It will be important not to lose sight of this jointly qualified practitioners in terms of their Continuing Professional Development needs.

3. Pro-active work with qualified social workers and nurses:

There is a need to market the course, to disseminate information and literature that helps break down the barriers of understanding about the course. This evaluation report may go some way to move in this direction.

"That's something that we need to work on with the social workers. that might be something we could do together as well, just to improve the experience of the student going through, because there's nothing worse than a student struggling to come to terms with the course and the academic pressures and different placement areas and then having to deal with - resentment might be a too strong a word but that type of atmosphere when they're on placements"

4.. Communication with commissioners in health and social services

There is a call from the service side to become more involved with Sheffield Hallam University.

"So there is some work I think we need to do on placement areas, and I don't think we've had enough joint working in that. But I mean I would welcome a steering group being really set up. I mean maybe just meeting every three months or something like that but to explore issues like that". (Health and Social Care B)

"Well I don't know if there is a steering group or a resource group that maybe meets twice a year or whatever, talks about issues in relation to the course, developments on the course. But I know that when, because we thought you were from Sheffield Hallam, my assistant director said oh I'll ring her because I'd really like to talk about the course. And we'd like to be more involved. But we'd like to be more involved with social work training generally. So it's kind of, it feels to me, and I mean I know that's at my level and my colleague in Sheffield might have an entirely different view because they are much more involved with the University than we are. But it feels to one of the outliers without a university of their own, like it's something that happens over there, and we get involved about placements. And that might have as much to do with our resources as anything; I'm not putting the onus on the University". (Social Services B)

A steering group was set up March 2009 (which last met in November 2009) to look at enhancing the social work placements among other things. Being dual award students mean that the students must be proficient in both social work and nursing contexts. Information on the steering group to be made available to all social services and health departments across Barnsley, Rotherham, Sheffield and Doncaster.

Conclusion

This evaluation was carried out as a partnership between Sheffield Hallam University and Speakup. The course team have developed and improved the joint programme year on year since it was validated and the team is constantly responding and adapting the programme to help improve the learning experience for students. The course has been successful and continues to be, even though it faces several challenges such as identifying appropriate placements and seeking support from a whole host of placements and practice assessors. The success of this first cohort of graduates is cause for celebration for all the hard work and perseverance the team have undertaken. On the whole there is support from employers and placements and most placements identified that they would employ joint practitioners in their service. This was not just learning disability services, but education and mainstream social work teams. This in itself speaks volumes of the success of this programme.

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Appendix 1 Detail of sample of students interviewed

Year	Student	From	Gender	Relative with a learning disability	Growing up with contact with people with a learning disability	Previous paid/unpaid work with people with a learning disability	Not until starting the course
1	Holly	Sheffield	F		Dad's fish and chip shop		
1	Sally	Sheffield	F		Through a social group		
1	Jane	Middlesbrough	F	Brother			
1	Dawn	Barnsley	F	Sister			
1	Peter	Crewe	M	Auntie			
1	John	Doncaster	M		Mum worked with LD		
1	Jack	Worksop	M			College placement	
1	Jenny	Barnsley	F	Cousin			
2	Hilary	Sheffield	F	Great uncle			
2	Jackson	Doncaster	M	Uncle			
2	Samantha	Retford	F			my first job	
2	Tanya	Rotherham	F			College placement	
2	Chloe	South Wales	F			Barnados	
2	Amy	Bolton	F	mum's cousin			
2	Sandra	Chesterfield	F			Leonard Cheshire	
2	Katie	Rotherham	F	Auntie			
3	Kylie	Hartlepool	F				x
3	Erin	Gainsborough	F	Daughter			
3	Danielle	Sheffield	F		Nursery/school		
3	Toni	Doncaster	F			Children's ward	
3	Kay	Sheffield	F	Brother			
3	Catherine	Sheffield	F		Neighbour		
3	Sadie	Sheffield	F		Friend's brother		

Appendix 2 Interview Schedule for students

Interview Schedule for students

Hello my name is and I am here to ask you some questions about the joint course. Can you please tell me your name

Which year of the course are you on? 1st 2nd or 3rd?

Have you completed the on-line questionnaire? It was sent out to you very recently Yes No

1. When did you first meet a person with a learning disability?

Probe: can you tell me a bit more about this experience

2. Why did you apply for the joint course?

Probe: so what was it that attracted you to apply

3. How have you got on settling here at the university?

Probe: did you have to move to a new home?

4. What are some of the difficulties or problems you have come across while being at the university?

Probe: in the classroom? with written work?, with tutors? on-line learning? and use of the library

5. What are some of the difficulties or problems you have come across while being on placement?

6. What have been your best experiences on the course?

7. Which parts of the university course have helped you to develop as a combined nurse and social worker?

Probe: why is this?

8. Which placements have helped you to develop as a combined nurse and social worker?

Probe: why is this?

9. What support have you had to develop as a combined nurse and social worker ?

10. What support would enable you to develop as a combined nurse and social worker?

11. Do you know enough about health issues and people with a learning disability?

12. What support would you need to develop more knowledge and skills in health issues?

13. Do you know enough about social work issues for people with a learning disability?

14. What support would you need to develop more knowledge and skills in social work?

15. How is the training preparing you do develop your inter-professional learning with other professions?

16. What sort of job would you like to do when you qualify?

17. Do you have any ideas on improving the course?

Thank you for talking to me.

Would you like a copy of the report when it is completed?

Appendix 4 letter to placements

6th July 2009

Dear Sir/Madam

Re: Evaluation of the Joint BA(Hons) Nursing and Social Work (learning disability) course

We have been running the above course since 2003 and the first group of 17 students are due to graduate from the course this summer. We have been funded by the Strategic Health Authority to evaluate the course and are currently undertaking interviews with mentors/managers in the placement areas to ask for your feedback on the course.

We are particularly interested in learning about your views on how knowledgeable and competent the students are and your experience of the student's attitudes and values while working with you on placement.

The interviews will follow a semi-structured format and will be tape recorded. If you would like to take part in this evaluation then please give me a call on 0114 225 5619 or Jacqui Brewster on 0114 225 5692 or email me on j.aylott@shu.ac.uk . We can then arrange to book a date and time that would best suit you.

If you have a student placed with you at the moment, we would also like to take the opportunity to interview the student on the same day that we visit you.

Many thanks for your support

Kind Regards

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Appendix 5 Detail of sample of placements interviewed

Role of interviewee	Location	year of placement	Employ LD nurses?	Employ social workers?	Employ joint practitioners in the future?
Registered Manager	Rotherham	year 1 and 2	yes	no	yes
Team Leader	Barnsley	year 1	yes (4 of them)	no	yes
Deputy Team Leader	Doncaster	year 1 and 2	yes	no	yes
Staff Nurse	Rotherham	year 1 and 2	yes	no	yes
Registered Manager	Rotherham	year 1, 2 and 3	yes (10 of them)	no	yes
Team Manager	Rotherham	year 2 (Social Work)	no	yes	no (mental health)
Team Manager	Doncaster	year 2 (Social Work)	no	no	yes
Manager	Rotherham	year 2 (Social Work)	no	no	yes
Long arm practice assessor	Derbyshire	year 2 (Social Work)	no	yes	yes
Long arm practice assessor	Sheffield	year 2 and 3 (Social Work)	no	yes	yes
Mentor/assessor	Barnsley	year 1	no	no	possibly
Long arm practice assessor	Sheffield	year 3	no	no	yes
Mentor/assessor	Sheffield	year 3	yes	no	yes
mentor/assessor	Doncaster	year 2	yes	no	yes
mentor/assessor	Doncaster	year 2	yes	no	yes

Appendix 6 Student interview Results

1. When did you first meet a person with a learning disability?

ten out of the 23 students had a relative with a learning disability and the other students (apart from one) all had previous contact with people with a learning disability either when growing up or as paid/unpaid employment (details in Appendix 1)

2. Why did you apply for the joint course?

For all students apart from one, the motivation to apply had arisen from their personal contact with either a family member with a learning disability or their previous contact with people with a learning disability. The one student who had no previous contact decided to apply on 'a whim' to the course.

3. How have you got on settling here at the university?

Most of the students have come from the north of the country (details in Appendix 1) with one person coming from as far as South Wales. Many of the students were still living in their family home and had not needed to move to attend the course.

4. and 5 What are some of the difficulties or problems you have come across while being at the university?

Issue	Number of times referred to	Student reference
High workload	5 (21%)	an obscene amount of work - nursing and social work documentation (Catherine yr3) last 6 months crammed full of work (Toni yr3) The actual university work for the first two years is really really hard going (Danielle, yr3) workload, the workload was very high (Sadie yr3) the workload is extremely high, difficult really (Jackson yr2)
Negative attitude about the course	5 (21%)	it would help the students' morale if the university were aware that we exist - we can sit in a lecture in fact all of what is said is not directed at us whatsoever (Katie yr2) when we were having a lecture in the lecture hall on psychology, the lecturers were directing their questions to other professional groups, they weren't directing it to learning disabilities and a lot of time it were like so nurses in the middle (meaning us). Not specialised nurses, its just you were there in the middle and it felt a

		<p>bit like, why are you not acknowledging we're different and that we're on this new course, you do feel a bit like that (Jenny yr1)</p> <p>some of the students are like your only the joint people, and we are not only the joint people, we know twice as much as you (Katie yr2)</p> <p>people's attitudes to our course because they think we should be doing either the learning disability nursing course or the social work course, we shouldn't be combining it and if we are combining it then it should be done over more years .. and its fighting that type of attitude really that we've found, a lot of us have found difficult (Sadie yr3)</p> <p>we fel a bit outside social work in a way because they have more in-depth learning especially about things like law and that, that we struggle a bit really (Jackson yr 2)</p>
poor communication	4(17%)	<p>some lecturers do not even answer your emails .. so we've been a bit stuck (Sandra yr2)</p> <p>its probably not clear enough sometimes whether your in or your not in and some confusion over placements (Jack yr 1)</p> <p>confusion and disorganisation about word counts (Jenny yr 1)</p> <p>on our course we don't actually meet or see much of the social work lecturers and that's caused difficulties in the past (Jackson yr2)</p> <p>youve got questions relating to the course itself, like i was saying i wasnt sure what i was going to practice as a nurse or a social worker and i wanted more light to be shared but i think ... i feel we didn't really get that kind of information (Dawn yr1)</p>
problems with BB	6(26%)	<p>have never been able to send email from BB (Catherine,yr3)</p> <p>Initially i had problems with BB and it took a couple of months to get used to it - which was difficult when you had to print off the lecture notes for each session (Hilary yr2)</p> <p>At first it was all confusing to me but we got support so it wasn't really difficult (Dawn yr1)</p> <p>each year they take the modules off from the year before, so you cant revise some material from the BB site from the previous year (Toni yr3)</p> <p>BB was a bit daunting at first because at school and college everything was on paper - but i really like it now Sally yr1)</p>

		BB was quite difficult at first and getting in touch with tutors while on placement is difficult (Jane yr1)
Organisation of the course	11 (48%)	<p>we have SW lectures and then nursing lectures and it all seems a bit jumbled (Peter, yr 1)</p> <p>sometimes it seems to be, to lack a bit of structure and organisation but apart from that the actual course is all right (Jack yr1)</p> <p>The organisation of the course, the tutors don't meet really to make it clear about assignment feedback and giving info about placements (Kyle, yr3)</p> <p>In one of the interprofessional modules, they (the tutor) wasn't sure what bit we should have been focusing on , if it was the nursing or the social work side, so we all opted to the nursing side as we can write about that (Katie, yr2)</p> <p>Tutors not working together in terms of social work and the learning disabilities side not working together and setting dates while we are on placements for essays to be in .. its been like two separate courses, social work and nursing (Kay yr3)</p> <p>We were put on social work modules and forgotten about and missed out ... lecturers would say you would have done this module and that module and we would start to panic and think they know more than us ... but we had the same sort of stuff coming through a different module and maybe said in a different way and taught in a different way (Chloe, yr2)</p> <p>parts of the course have been unorganised .. but I hear about students on other courses who say its unorganised so I don't think its been too bad considering its been brand new (Toni, yr3)</p> <p>my year group have had to do modules with the social work students, there's not always been enough support to look at it from both angles (Amy yr2)</p> <p>they are now integrating social work and nursing and there's going to be more tutorials within our lectures .. we have been at a disadvantage to the social work students when we have had to do assignments while on our placement and they were not on placement (Danielle)</p>

		<p>yr3)</p> <p>they're supposed to be joint, but they've not quite mastered that. I think that's what the new programmes for that starts next year. This year we've had like social work lectures with all the social workers who have already done like a lot of stuff ... and we're thinking, I aint got a clue (Sandra yr2)</p> <p>.. see what its like next year when they said that they've integrated it a bit more - hopefully they have. I don't want to, i mean when we qualify i'll feel better if next years more integrated because otherwise i wont be comfortable going into a social work role (Sandra yr2)</p>
Placement issues	5	<p>while on placement, difficult getting access to computers and learning and keeping contact with the university at the same time (Erin yr3)</p> <p>my social work placement i had to leave, i didn't end up doing what i was supposed to do - it upset me and it wasn't a suitable placement (Danielle, yr3)</p> <p>attitudes again, about the course .. my placement was in Rotherham and many of the practice assessors there held a meeting about our course and how they didnt think it would work and things like that, and you had to, I mean they would say these things in front of you and ive even had a nurse say to me that if she was looking to employ a nurse, she wouldn't be employing anybody from the joint course and that were really difficult (Sadie yr3)</p> <p>commute from Sheffield to Nottingham for a placement for 20 weeks, tiring but i will say it was worth it (Catherine yr3)</p> <p>wasn't possible for us all to have placements with both a nurse and a social worker .. if i was to do the course again then id like a placement opportunity like that to see nurses and social workers working together (Kyle yr3)</p>
level of support	4	<p>in the first year we should have had more tutorial one-to-one support (Danielle yr3)</p> <p>we have been left to our own devices and i cant say i have had as much contact as i thought i was going to have (Sandra yr2)</p>

		on placements we need more recall days .. thirteen weeks with no contact time is a lot of time (Sandra yr2) sometimes its like pulling teeth trying to get an answer from a tutor via Blackboard - i have never had an experience like blackboard in my life. If your at college or school you go up to a tutor and you have a 1;1 time ... i find it really awkward and uncomfortable sometimes communicating via an internet site you know (Jenny yr1)
Parking/travel	2	I live in Gainsborough so travel arrangements have been difficult (Erin yr3) There are problems with parking but it wasn't a massive problem (Holly yr1) the only thing I dislike in the university is the parking (Jenny yr1)
Disability access issues	1 student	taking notes difficult because i am dyslexic (Peter yr1) it took me so long to get my learning contract sorted (Peter yr1)
Content of the course	4	more on the nursing elements, e.g. biology and LD (Catherine, yr3) would love to do Makaton sign language .. i think its nice if someone walks in and says hello in a way that the person communicates (Amy yr2) I want to see some Makaton training and death awareness (Jenny yr1) More on pharmacology (Danielle yr3)
library	2	while on placement in Doncaster, i cant get to the library and you ring up to explain .. i must have paid £100 quid in fines (Toni yr3) a lot of the times i go to the shelves and the books are not there. I am actually going to the library next and not looking forward to it really because i don't think i'll get what i want (Jackson yr 2)

6 What have been your best experiences on the course?

issue	number	student
placements	11(48%)	just getting involved in giving proper work, not token student work, proper sort of things to get stuck into, which are like ongoing and changing all the time (Tanya, yr 2) oh I've had too many I think so far. definitely with people on a one to one basis while on placements and noticing that you have made, even if it's a tiny difference but you've made a difference while you've been there (Samantha yr2) the placements definitely. I mean we do quite a lot more

		<p>placements than the social work students. we do two a year and the third years quite long. But definitely the placements because its more, you've got to learn (Sandra yr2)</p> <p>I suppose its spending time on placements with service users. It reminds me that its something that I really want to do and it reminds me than I can help other people and sometimes I can make a difference(Chloe yr2)</p> <p>some of the placements that I've had have been really enjoyable (Catherine yr3)</p> <p>the people I've me, the different clients that I've met definitely, its been marvellous that yeah (Sadie, yr 3)</p> <p>Working with all sorts of abilities that's been a fantastic experience. I mean I've worked with children, I've worked with adults, I've worked with teenagers, ive worked with able bodied and disabled people (Danielle, yr3)</p> <p>I came in thinking oh no I'm not going to like this (social work placement) and now I would actually consider doing it as a job the best experience so far is being here (social work placement). I mean I really enjoyed the placement before here which was a respite unit for people with a learning disability - I really did enjoy that (Katie, yr2)</p> <p>getting used to all the different groups like speak up for yourself and keyring (Sally yr1)</p> <p>well I've had a lot of support while ive been here from my mentor and the manager - shes really good (Jane yr1)</p>
modules		some of the modules I've really enjoyed as well (Catherine, yr3)
tutors	8	<p>my personal tutor (nursing) is great, she helped me a lot, the support is there if I need it (John yr1)</p> <p>my tutor (nursing) I think she is lovely. I asked her for some help and she said oh try this book and this book and then that night she'd sent me an email with a link to a website .. I feel as though she has always got time for me (Holly yr1)</p> <p>the lecturer (Social work) - she seems to be the one who is just consistent with everything. If ever I've asked her for</p>

		<p>anything she says well I'll ring you back, I'll find out right now (Jenny yr 1)</p> <p>my personal tutor (social work) knows what he is talking about, so any problems I have with an assignment I just go to him and he helps me (Hilary yr2)</p> <p>and then definitely tutorials with my personal tutor (nursing) and stuff. That's helped me to think outside the box and develop (Kay yr 3)</p> <p>I've had brilliant support off my personal tutor (nursing) she has been fantastic and I think that throughout this course I probably wouldn't have done as well or maybe not even be here if it weren't for her because she has just been supportive so much to us. Other lecturers have been as well (Kay yr3)</p> <p>My personal tutor (nursing) is fantastic . . . I remember in my first year I had a problem with one of the girls that I lived with and it really upset me. She said oh well have a coffee and talked to me until I was calmed down about it (Amy yr2)</p> <p>I think the tutors on the nursing side are absolutely brilliant, well my personal tutor and I get on really well.. but on our course we don't actually meet or see much of the social work lecturers and that's caused difficulties in the past (Jackson yr2)</p>
meeting people	1	I think meeting all different individuals has been really good (Sally yr1)

7, 8 & 9 combined Which parts of the university course have helped you to develop as a combined nurse and social worker? (placements, support

Issue	number	student reference
variety of placements		I think the different places because I've had a varied range of placements The final placement was really good and that helped a lot as it was combined (Catherine, yr3)

		<p>you know more of its been through placement (Jenny yr1)</p> <p>Placements, definitely placements, I think they have helped push you further and you begin to learn once your out in placement actually doing the work (Kay yr3)</p> <p>I suppose just having experience in diverse placements really, so its good that you don't get used to just using one set of skills (Peter yr1)</p> <p>I think definitely being on placement because I don't think you really learn what your doing until you go out on placement (Kyle yr3)</p> <p>I think all different organisations helped me to develop, so raise my awareness (Sally yr1)</p> <p>my placements I'd say its given me a good broad overview (John yr 1)</p> <p>I understand now that, how I can link social work and nursing together, before I was thinking well can you do both. But being on this nursing placement , now I can actually see how you can link the social work with it. well when we 've been trying to sort things out and other professionals want to know what benefits they are on, what they're claiming, and the nurses there don't really know because they're not into the social work side of benefits and things like that. so now I can see, understand that if you get that side of it how it'll help the service users (Jack yr 1)</p> <p>the placement the learning disability community team (Jackson yr2)</p> <p>I would say the placements and modules from nursing and social work, but it's the way they are combined and to see how they link. You know it's the way I think the tutors explain or try to link both the social work side and the nursing together (Dawn yr1)</p>
tutors/lecturers		<p>I think that's more the tutors who have helped develop that for me, but the mentors themselves have tried to manage the two strands (nursing and social work) (Erin</p>

		<p>yr3)</p> <p>I think its within uni, like from our course leaders, it's a constant theme that runs through. They don't just say well today were doing nursing or today were doing social work, you sit in the lecture and you talk about the social needs and you talk about the health needs and you talk about how they affect each other and its almost like they allow you to develop that idea on your own (Amy yr2)</p> <p>Having the joint experiences of the tutors, the lecturers, I mean combined they've all worked well together to give us a good broad understanding of our sort of development. I would definitely say the tutors experiences and bringing all that together has been absolutely wonderful. But at the time in year 1 and 2 you don't see that, its only when you get to year 3 and you suddenly think, ahh that's why I know that, because you know and that's why this is coming together. You don't think at the time that it does, but it does (Danielle yr3)</p>
and nursing and sw modules		<p>and the fact that we have done both nursing and social work modules (Catherine yr 3).</p> <p>and also lectures and things (Sally yr1)</p> <p>most of the modules have actually. We've had one social work module, then we've had a few nursing ones and then we had one and it was like linking them both together and like showing us like how you'd work as a nurse and a social worker but joining them as well (Jane yr1)</p> <p>I think really like on our next placement with being social work, if its more in the community, going out to see people in their homes and things, then that might help a bit more. But at the moment because its just nursing I haven't had the chance to like develop my social work side of it (Jane yr 1)</p> <p>no its probably more the lectures than the placement (Sandra yr 2)</p>
crossover		<p>and there are things that you wouldn't think are social work but are. Your know all the assessments and things,</p>

nurse and sw		<p>I would have put those down as the nursing side because I've done assessments from the nursing point of view, but it is a big crossover (Katie yr2)</p> <p>it is amazing how many skills crossover. my background is learning disabilities and I can relate to doing assessments with just that client group, but then when your put in somewhere new (social work placement) it is absolutely no different. You just find a different way of communicating (Katie yr2)</p> <p>the social work placement that helped me develop definitely as a social worker, but I could bring my nursing background into it (Kay yr3)</p> <p>You see how things are overlapped by like doing, like free social work lectures with other social workers and doing our lectures on nursing and then you do see how things overlap. Like when people say well I don't see how that's going to work, well you can say well actually learning disability nursing and social work are kind of alike, they do overlap a lot. so you recognise that from doing it, but I cant really say that one module one particular module has learned me more about .. (Toni yr3)</p>
Perspective of the combined role		<p>having done both, doing it combined, I think its given me a better perspective of the two roles and how one complements the other and having the knowledge of both to complement the other, so yeah (Catherine yr3)</p> <p>I suppose all of it in its own way. I mean its about putting the theory that you learn into practice isn't it and I think its not until you go out and practice as a, in a nursing environment or a social work environment that you learn which bits, you know you can link them together then. And I think a lot of it that was taught, actually most of the course was taught by nurses so at that time I thought its quite difficult to understand and link to social work. But from doing the social work placement now I think I've seen the link. So I think most of its been quite well combined. Just maybe the links to it being combined</p>

		<p>weren't so clear (Chloe yr2)</p> <p>its hard to combine them. I think some of them have had like good combined placements but your nurses are focused on the nursing side of it and the social workers are focused on social work, they don't really combine that much themselves while they are out there, so for you to go on placement your either with a nurse or with a social worker (Toni yr3)</p> <p>I worked in a community team for just learning disability and so I worked with community nurses, social workers, physiotherapists all in one office, so it enabled me to see how our role could be, but they all worked separate. they didn't really combine. And there's a lot of conflict between the nurses teams and the social work teams and that needs addressing. But that placement helped me to see how a joint practitioner could be in services (Sadie yr3)</p>

17. Do you have any ideas on improving the course?

Issue	number	student reference
more personal tutor support		<p>I would have benefited from more support from a personal tutor (Catherine yr 3)</p> <p>more support for people who are actually eligible for bursaries and payment for travel expenses .. I have struggled financially and it's a real strain (Peter yr 1)</p> <p>more contact with a personal tutor or lecturers (Chloe yr 2)</p>
more content		<p>pharmacology, downs syndrome (Catherine yr 3)</p> <p>Makaton (Amy yr2)</p>
over assessed		<p>The course is far too over assessed I think (Catherine yr 3)</p>

		not as much theory while your out on placemebt, you are doing 37 hours a week and then you have all your social work units to do and youve got assignments on top of that (Chloe yr2)
4 year course		it should be a four year course (Kyle yr 3) make it a longer course (Sandra yr3)
Structure of the course		and maybe some of the social work seminars to be separate but not to isolate us but to help us find out what we need to know before we go into the lecture (Katie yr2)
more organisation of the course		<p>the course should be more organised and I think we need a lot more teaching on the social work side, like social work theories and models (Kyle yr 3)</p> <p>we need to be clear on course content .. they have changed things but we need to be clear and to have personal tutor meetings every 3 weeks (Jenny yr1)</p> <p>tutors working together a bit better .. like social work people linking with nursing people and that's it really (Jenny yr 1)</p> <p>the course needs to be more integrated - we cant just be going to social work lectures and feeling like we dont know anything (Sandra yr2)</p> <p>I think the course should be specific to the people on the combined course, not to integrate us with people that are just doing the social work degree (Samantha yr2)</p> <p>you tend to get lost in a group of 200 people and some people dont feel confident to speak up which is me, whereas in a smaller group I will be more likely to speak up (Tanya yr 2)</p> <p>the first few days of the course, we felt its not really properly structured. Like the issuing out of placements well there were delays, there were, you know bits and bobs about, which needed time to sort out (Dawn yr1)</p>
more information		what kind of roles we would be playing and what employers would like to employ us when we finish/ I

	<p>think there's a bit of confusion about that (Sally yr1)</p> <p>It would be good to have somebody coming in that had the qualification to say right this is what I've been doing with it (Katie yr2)</p> <p>so it seems to be that were going to qualify and we either go down a nursing path or a social work path, but then it seems a waste of time that we did both in university because were only going to go down one path. Aint there one, aint there some, a path that like entails the two? (John year1)</p> <p>It would improve morale if the university staff were aware that we exist (Katie yr2)</p> <p>and I think were seen to be just a naff course, because people say well how can you be a social worker and a nurse and do it only in three years, that's not possible you know . I think well if you don't believe in us, who is going to? are employers going to believe in us, is anybody going to believe in us when we've qualified? (Jenny yr1)</p>
placement	<p>the first placement might have been too long - if you shorten that by a couple of weeks (Jack yr1)</p> <p>more placements with nurses and social workers in (Hilary yr2)</p>