

The challenges of assessing evidence of practice learning (from an English perspective)

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Title

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Abstract

This paper discusses the complexities of evidencing and assessing work-based learning, within educational, professional programmes at post-qualifying levels.

Through an exploration of how learning takes place in practice situations and the most commonly used method of evidence collection and assessment, portfolio-building, the paper debates the principles, rationale and characteristics underpinning assessment of practice in health and social care. The author concludes that there are two aspects of evidence collection and its assessment that must be clarified. One aspect being that the objectives of collecting evidence need to be understood by all stakeholders, particularly in respect of the interface between professional regulation and professional development. The second aspect relates to the format and focus of the assessment strategy. The paper offers a framework for understanding the nature and purpose of evidence collection and its place in the assessment of practice in the context of post-qualifying continuing professional education.

The author's objective is that this paper and the analytical model proposed, should contribute to the professional knowledge-base about 'practical experiences in professional education' by raising awareness and debate about how professional post-qualifying education and learning in practice is evidenced and assessed.

Key Words 1. Evidence 2. Portfolio 3. Assessment

Author biography

The author is employed as a lecturer within the School of Health and Social Care of a higher education institute in England. Before this, her work was grounded in health, social care and managerial practice. She originally trained as a nurse and later as a social worker and has registered social work practitioner status. In her current role, as well as supporting undergraduate learners in their practice placements, she also has responsibility for post-graduate and post-qualifying programmes, all of which include elements of practice learning. Additionally, the author has many years experience as an assessor of candidates undertaking vocational qualifications by using workplace experience to evidence competence. Therefore the focus of this paper arises from the author's own experiences and current professional responsibilities.

Introduction

The paper starts by providing contextual detail and a brief review of the literature in relation to practice learning and its assessment. The author then develops the debate through a discussion of practitioner perspectives arising from a small exploratory research project. The issue of evidencing and assessing situated informal learning is central to the discussion, which concludes

by considering the implications for post-qualifying professional education and proposing a framework to assist analysis of the different purposes and characteristics of evidence collection and its assessment.

In order to ensure clarity of understanding, key definitions are provided in a glossary of terms as an appendix. It should be noted that for consistency, unless a different term is used within the source materials, the term 'practitioner' is used throughout this paper, to refer to qualified health and social care workers who may be participants in post-qualifying professional education.

Background

This paper has been written in the context of significant, on-going strategic change within health and social care work in England. A number of high profile public inquiries (www.doh.gov.uk), for example into the practices of nurse Beverly Allitt, General Practitioner Harold Shipman and the death of a child, Victoria Climbié, have resulted in the claims that professional self-regulation is not enough and issues of post-qualifying 'fitness to practice' must be addressed (Calman, Hunter and May, 2004). These changes have had particular impact on post-qualifying social work education and have direct relevance for practice learning and its assessment.

Thus continuing professional development (CPD) in social work has been emerging over the past decade (Pietroni as cited in Postel, Edwards, Moon, Rumsey and Thomas, 2002), both in academic debate and in the national subject specific and higher education policy context (Dearing 1997, DoH 1998, DfEE 1998, DoH 2000). The specific strategic changes in post-qualifying social work can be seen to be following a direction that professional nursing in England has already taken. The Care Standards Act 2000 set out the policy framework for registration of social work professionals, with the requirement that from April 2005, everyone who uses the now protected title of 'social worker' has to be registered with the General Social Care Council (GSCC). To maintain this registration, assuming an absence of concerns in respect of adherence to professional codes of conduct, 'every social worker registered with the GSCC shall, within the period of registration, complete either 90 hours or 15 days of study, training, courses, seminars, reading, teaching or other activities which could reasonably be expected to advance the social worker's professional development, or contribute to the development of the profession as a whole' (General Social Care Council n.d.).

Similarly, post-registration education and practice in nursing, follows standards and guidance set out by their regulatory body, the Nursing and Midwifery Council (NMC). Their requirements for continued registration have two strands; a practice standard; and a continuing professional development standard. The first requires that the nurse has worked in a relevant practice area for a minimum of 100 days during a five year period, whilst the second states that practitioners must undertake at least five days or 35 hours of learning activity relevant to their practice during the three years prior to renewal of registration.

The GSCC is currently developing guidance to provide more detail on its interpretation of 'post registration training and learning' (PRTL), and to date offers only a broad outline of the activities that could be included 'such as reading, attending conferences/training courses or gaining a post-qualifying award' (GSCC n.d.). Similarly the guidance for nurses only stresses the requirement for 'relevance to practice', explicitly stating that 'There is no such thing as approved 'post registration education and practice' (PREP) (CDP) learning activity' (NMC n.d.). However, it is apparent within this that both professional groups are required to evidence their learning in practice. Neither the GSCC nor the NMC have stipulated a required format for this evidence, although both organisations offer suggested templates and the NMC require that nurses maintain a personal professional profile (PPP).

In February, 2005, the GSCC launched a new framework for post-qualifying social work education and training awards. The framework is yet in an embryonic form with further details due to emerge prior to 'early-implementer' programmes starting late in 2006. However, the framework is linked to National Occupational Standards, university accreditation and is focused on the assessment of competence in practice and the enhancing the maintenance of the national standards (GSCC 2005).

It is acknowledged therefore, that learning in practice is at the centre of CPD and post-qualifying education, training and development in the health and social care professions, being driven by national policy and standards that require evidence of from practice experience. Additionally, as this paper will proceed to explore, there is potential complexity where learning and education is conceptualised within the compulsory, regulatory context. Hence, those who support, enable and certify practice learning need to be confident that methods for evidencing and assessing practitioner progression have clearly defined purposes and processes.

Literature Review

This brief review of the literature focuses on the nature of learning in practice situations and debates about the ways in which that learning is evidenced and assessed.

Work-based or practice learning is a traditional element of the professional development of health and social care workers, in particular social workers; nurses; psychologists; physiotherapists and doctors (Rickard, 2002). There is a wealth of literature that explores effective learning in practice, taking a social learning theory perspective, describing practice learning as a socially situated, relational process (Lave and Wenger, 1991; Guile and Young, 2002:150; Eraut, Alderton, Cole and Senker, 2002). Eraut (1994:27) suggests though, that learning in practice is not only about informal processes, but that 'in practice contexts theoretical knowledge has to be adapted to suit the particular demands of each situation' thus before knowledge can be used, a connection between it and the situation under consideration needs to be made. Practice learning in such socially situated forums includes knowledge sharing, discussion and communication, observation of co-workers, encouragement and support and opportunities for collective exploration of concepts, dilemmas and innovations. In this way, participation in 'communities of practice' can be seen as essential to the continuing professional development.

Schön (1995) develops a perspective on learning acquired through practice experience, which values individual reflection in learning and practice. He describes tacit knowledge (Schön, 2002, p.50) as that which is implicit and learnt through experience and reflection, as observed from actions but, crucially for this debate, not readily available for either internal or external examination. Eraut (1994, p.111-2) refers to this as 'skilled behaviour' and Hodgkinson et al (2004, p.10) agree that 'these implicit or hidden dimensions of knowledge and skill are key elements of 'mastery''. This literature can therefore be seen to be contributing to the notions of experience, intuition and 'practice wisdom', all of which are potentially important processes of professional development accumulated through experience within practice settings. O'Sullivan (2005) conceptualises practice wisdom as consistent with 'critical, accountable and knowledge-based practice' but notes that practice wisdom and knowledge acquired through informal, tacit processes can be perceived as 'unreliable, personal, idiosyncratic knowledge built up through practice experience'.

Thus, the question arises about how we evidence socially situated learning and how that evidence is verified and assessed. Increasingly evidence and assessment of professional development is undertaken through a portfolio-based assessment strategy (Baume and Yorke, 2002; Pitts, Coles, Thomas and Smith, 2002). The term, portfolio, can be understood in different

ways according to the context and purpose. In a recent paper for the UK Higher Education Academy, Baume (2004, p.1) summarises portfolios as being where the practitioner 'assembles smaller pieces of work into a large whole; makes connections among the items of work done; and gives critical overview of their work and learning'. In the specific context of assessing social work practice, Taylor, Thomas and Sage (1999, p.148) acknowledge that portfolios are well established 'throughout the continuum of social work education' and cite the work of Doel and Shardlow in stating that a portfolio 'is a collection of materials which show practical abilities . . . a good social work portfolio depicts a range of skills and competencies....' (as cited in Taylor et al 1999, p.148). Taylor et al (1999) offer a model for the collection of evidence of practice learning that is based upon Kolb's (1984) theory of the experiential learning cycle. (See Figure 1)

Figure 1: A Model for Presenting Evidence

Adapted from Taylor et al (1999, p.158)

This model provides a useful framework for practitioners to conceptualise specific tangible forms of evidence alongside the learning process. The logical consequence of this approach is that practitioners, educators and assessors can make clear connections between the evidence, the learning that has taken place and the assessment process.

This model is underpinned by an emphasis on reflective practice, which is characteristic of evidence collection and portfolio-building, not only in social work, but also in allied professions such as nursing and physiotherapy. This approach is potentially a resolution in respect of evidencing the less explicit forms of learning. O'Sullivan (2005, p.226) considers critical self-reflection and metacognition as being central to the development of practice wisdom. Reflectivity and reflexivity is often evidenced through specific pieces of reflective writing, commonly reflective diaries or journals (Moon, 2004) or guided essays. Boud and Walker (2002, p.94) provide a powerful critique of the use of reflective journals as evidence for assessment in practice as they argue that because the student is aware that the reflections will be read in order to be assessed, these reflections are then edited to reveal only that which the student feels is appropriate. Concerns regarding confidentiality and 'inappropriate personal disclosure' are also to be found in the literature (Boud and Walker, 1998 as cited in Taylor et al 1999, p.152). Furthermore Boud and Walker (2002) suggest that the inclusion of reflective writing within assessment tasks is not conducive to learning. Moon (2004, p.156) concurs, and adds the more specific suggestion that writing in journals should be as an 'aid to learning', much like taking lecture notes, and that it is more appropriate to assess materials, for example reports or essays, that are a product of that reflective learning. In a nutshell, Boud and Walker state that '..reflection is about uncertainty whereas competence and assessment is about certainty' (1998 as cited in Taylor et al 1999, p.153).

This review of the literature has shown that evidence collected into portfolio format can provide qualitative information from varying contexts that is rich and unique but, as inferred by Boud and Walker (ibid), Tigelaar et al (2005) argue that the inclusion of qualitative material can make 'unambiguous, objective rating' of the content difficult to achieve. Accordingly, there is much debate in the literature about the effectiveness of portfolios as an assessment method, both generally and in specific professional contexts of social work and nursing (Coffey, 2005; Ball et al, 2000). To a large extent the discussion focuses on issues of 'reliability' (Baume and Yorke, 2002; Pitts et al, 2002), in other words whether evidence of learning in practice can demonstrate consistency, equality and coherence.

Research by Pitts et al (2002) into the reliability of portfolio assessment in medical training suggested that consistency could be variable, but that effective mechanisms could be put in place to address this. Accordingly, Baume and Yorke (2002) argue that valid and reliable assessment is integrated within effective learning outcomes and, as such, the various national requirements and standards discussed earlier in this paper should, through the mapping of learning outcomes, direct a reliable assessment structure and grading process. However, there remains concern if '..assessment processes will need to reflect learning progress over time, and the individualization of learning geared to employment, career development and personal fulfilment' (Tuijnman 2002, p.25). Earlier in this review, it has been shown that practice learning is a continuous process grounded in experience and thus, as suggested by the literature, sufficiency of evidence and appropriateness in terms of level of learning may be difficult to assess, even with seemingly robust learning outcomes and benchmarks. Additionally, the potentially increasing need to measure and quantify assessment procedures can be seen as '....retrogressive and ...actively inhibiting the developing of a learning society where individuals are encouraged to develop the skills and attitudes of life-long learning' (Broadfoot, 1998 cited in Taylor et al 1999, p.158).

It is significant that, as shown earlier in the paper, in English social work and nursing professions national requirements for maintenance of professional status hinge upon evidence of CPD. In other words constructions of learning and development in practice are being conceptualised as integral to the regulation of professional registration. In an article related to medical education,

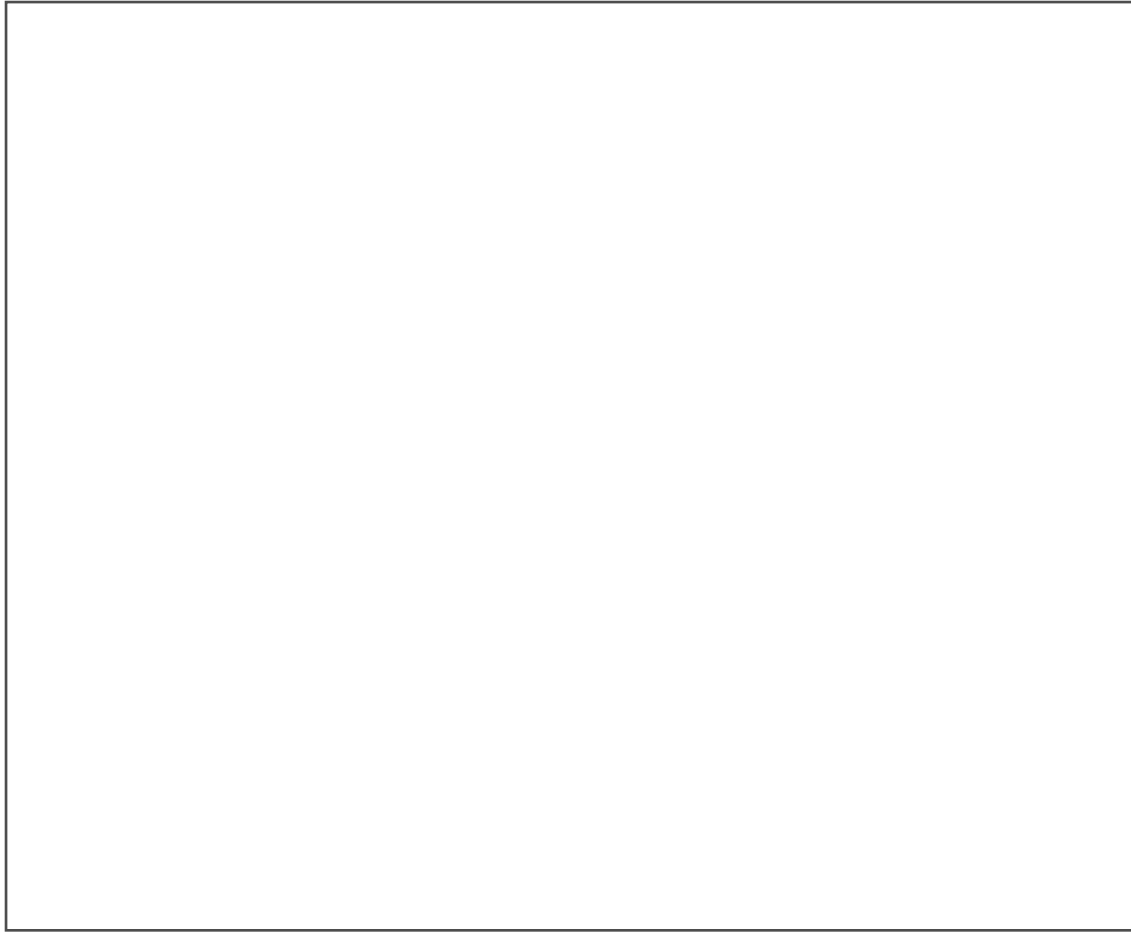
Crossley et al (2002) also draw the two purposes together in asserting that the quality of professional regulation is dependent upon robust assessment of professional performance and that this can have a powerful education impact. Crossley et al (2002) contend that this is so, because they consider structured formative feedback as being integral to the performance management approach. As stated previously, re-registration in social work and nursing is not dependent upon providing evidence of performance or competence to practice, but on providing evidence of participation in relevant CPD activities. Therefore achievement of accredited post-qualifying awards is considered to be one way to meet the CPD requirements which are an aspect of the processes by which the maintenance of professional standards is regulated and monitored. It is this integration of two arguably very different purposes, regulation and learning, that results in the potential for complexity.

This brief review of the literature has shown how situated practice learning is pivotal to professional development in health and social care. It has then debated how this learning can be assessed through the production of evidence in portfolios. The emerging themes, in respect of forms of evidence and assessment processes, can be summarised as drawing out two particular areas of complexity. Firstly the need to maintain clarity of understanding about what is to be demonstrated by the evidence being collected, in respect of the difference between continuing 'fitness to practice' and continuing learning and progression in practice. The second area of concern that emerges is that the nature of the assessment should be explicit and considered, particularly in respect of how issues of validity, reliability and consistency are addressed and whether this then impacts upon the scope for flexibility and individualised approaches.

Practitioner Perspectives

The author has undertaken a small scale, exploratory, qualitative research project which set out to determine the potential impact of new national requirements in the United Kingdom in respect of continuing professional development in social work, from the perspective of registered social workers. One of the areas of interest in the research was to explore practitioners' views on the most effective ways to evidence post-qualifying professional development. A questionnaire, with structured and open questions, and a focus group were used to explore the views of practitioners.

When asked their views on the most comprehensive and appropriate forms of evidence that would demonstrate continued professional development 'certificates from relevant, accredited learning programmes' was most frequently identified as being an appropriate method to evidence continuing professional development. Additionally, 46% of the qualified social workers participating in the research stated that to evidence their own CPD, they would keep certificates of attendance from training/education programmes. As shown in figure 2, whilst various forms of portfolios were rated highly as generally appropriate ways of demonstrating CPD, just under one third of participants, 32%, stated that this is the method that they plan to use to evidence their own CPD. However, it can be seen from the chart that the inclusion of reflective accounts and evidence of participation in learning sets were less frequently considered, by practitioners, to provide comprehensive and sufficient evidence of continuing professional development.



This data would indicate that when considering their own professional development, practitioners will prioritise ways in which they can collect evidence that they perceive as being necessary to meet the national regulatory requirements to maintain their registration. This was substantiated by discussion in the focus group when one participant stated that ‘...in my agency we run courses....but a lot of nurses will say that they can’t really afford the time to come because they are not accredited so they will always look first at the ones that satisfy the registration requirement’ There was also concern articulated in the focus group about the possibility of evidence of CPD being linked to salary and progression, in the future.

It was significant that very few of the participants mentioned the value of service-user feedback and reflective accounts, despite these being key elements of the current, local undergraduate practice portfolios, and potentially mechanisms to evidence less tangible forms of knowledge and skill, for example practice wisdom (Moon, 2004).

This small element of the findings from the exploratory research project has been included here to demonstrate that from a practitioner perspective, evidence of post-qualifying training and learning that is most valued will be that which is certifiable and accredited against the national requirements for CPD in the profession. In a further development of this study, it would be relevant to consider this finding against the explanations of behaviour offered by motivation theorists. Suffice, in this paper, to note that Maslow’s hierarchy of need would suggest that practitioners will strive to fulfil security needs, in this case job or professional security, before social and self-actualization needs (Maslow, 1987).

Challenges for the future

In order to continue to attract practitioners and funding from partner employing agencies, post-qualifying education programmes, in both social work and nursing, face significant challenges for the future. If they are to be valued, programmes will need to be overtly mapped against the national standards of the post-qualifying framework, or at a minimum, be able to demonstrate that attendance will provide the evidence of PRTL necessary for maintenance of registration. Thus the teaching and learning agenda, including the need for evidence and assessment in practice, becomes driven by, or at the very least integrated with, the agenda for monitoring, regulation and enforcement of the professions.

In responding to the requirements of the new social work post-qualifying framework in England, universities will be developing a range of methods for evidencing and assessing practice within all credit-rated programmes. It is likely that the collation of evidence into a portfolio will remain the assessment method of choice and as such may have to meet a range of demands by incorporating flexibility to take account of different practice settings that practitioners represent and individual learning needs, whilst also ensuring equality of standards via the common frameworks of the national professional post-qualifying and academic standards. Additionally, in making decisions about the forms of evidence that should be gathered for assessment, educators will need to be mindful of the purpose of evidence collation and assessment, in particular, whether assessment is formative or summative and whether it aims to facilitate learning and development or whether it has to be more focussed on demonstrating competence against professional standards. This may seem straightforward at present, as in the examples of social work and nursing in England, as shown; maintenance of professional status is secured through evidence of learning and development. However, the requirement is mandatory in respect of continuing professional status and if policy directions continue to move rapidly towards ever more stringent professional regulation, the purpose of evidence gathering and assessment may be less clear.

In the light of this discussion, the framework shown as Figure 3 has been developed to provide a mechanism by which the characteristics of different forms of evidence and assessment strategies can be debated, explained and defined.

Figure 3 - Framework for understanding the nature and purpose of evidence collection and its assessment in the context of post-qualifying continuing education

Vertical axis = Purpose of Evidence Collection

Horizontal axis = Nature of Assessment

Using this framework it is possible to evaluate forms of evidence against four variables, along two continuums. Some potential examples have been plotted, although the position of each of these is open for negotiation dependent upon the detail of the methodology and process for evidence-collection and assessment. In the upper right quadrant of the framework, for example, evidence that is associated with regulatory maintenance of standards in a profession would be located, particularly external examination and quantitative, summative assessment of competence.

In the lower right quadrant of the framework, many traditional forms of academic assessment might be placed. Evidence from practical experiences that is assessed as part of professional continuing education awards, will be subjected to the formal quality assurance and scrutiny processes of the academic institution. Arguably, there will always be a level of accountability, in formal educational programmes, that include monitoring, moderation and external examining. Within this, it is considered good practice to involve practice assessors from partner agencies to scrutinise portfolios and debate issues of consistency, validity and sufficiency. However, as indicated by this framework, high levels of overt measurability can undesirably result in less regard to individual learner differences (Taylor et al, 1999, p.156).

It is likely that different types of formative assessment and progress reviews would feature in the lower quadrants, as, by their very nature, they are ways in which learning is enabled. The lower left quadrant of the framework, is where it is possible to envisage a more flexible and innovative approach, with professional judgement influencing the processes and forms of assessment of practice. Evidence collation and assessment in this sphere would allow for negotiated, individualised learning, evidence of personal achievement and the self-management of professional development.

In the upper left quadrant of the framework, these flexible approaches are tempered by the assessment purpose being one that requires evidence, for regulatory purposes, of continuing professional competence against stated professional standards. Practice assessment mapped in this section of the framework, would enable flexibility, relevance to the practice setting and potentially to the identified development needs of the practitioner. However, the regulatory function of the assessment, would determine the boundaries of this. Due to the mandatory nature of evidence collection for CPD in English social work and nursing and the over connection to National Occupational Standards and professional competence, it could be argued that these processes should be placed in this quadrant.

It can be seen, therefore that using the framework proposed, all stakeholders, including practitioners, partner practice agencies and education institutions can debate and clarify the characteristics and underlying rationale of practice assessment in the context of continuing professional education. The framework also illustrates clearly the potential discrepancy between evidence collected by the practitioner, not within the processes of educational programmes, currently deemed sufficient to prove post-qualifying practice learning and development (potentially in the upper left quadrant) and evidence currently required for post-qualifying professional education programmes (potentially in the lower right quadrant), both being valid in verifying post-qualifying CPD in practice and thus meeting re-registration requirements.

Conclusion

Through consideration of the literature and research, this paper has explored the complexities of evidencing and assessing work-based learning, within academic, professional programmes at

post-qualifying levels. Whilst largely informed by the experience of post-qualifying education developments in English social work, it is suggested that the issues and challenges raised are relevant across a range of professions and educational levels. The paper acknowledges the significance of situated social learning in practice being integrated into post-qualifying professional education and progresses to appraise the ways in which practice learning is evidenced and assessed. The paper evaluates the effectiveness of portfolio building in post-qualifying practice experience and argues that, whilst evidence should be collected in order to demonstrate learning and development, the underpinning practitioner motivation in collating evidence for assessment may be driven by a need to evidence competence for the maintenance of registration.

The author concludes that within educational programmes, the nature and purpose of evidence collection and its assessment needs to be understood and agreed by all stakeholders. Whilst currently the requirements for maintenance of registration status in social work and nursing in England focuses on learning and development relevant to practice, educators need to be mindful of the potentially tenuous interface between that which is defined as professional learning or development and the regulatory standards for continuing professional registration. A framework to assist in defining and comparing different forms of evidence collection and their place in the assessment of practice has been offered and discussed.

Finally, this work forms one element of the author's research interests which are being developed as part of doctoral studies. The author is exploring further the issues of lifelong learning in post-qualifying health and social care field-based professional practice in particular looking at international comparative analysis.

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GLOSSARY OF TERMS AND ABBREVIATIONS

CPD	Continuing Professional Development	Continuing professional development is the systematic maintenance and improvement of knowledge, skills and competence, and enhancement of learning, undertaken by a person throughout his or her working life.' (Institute of Continuing Professional Development www.cpdinstitute.org)
DfEE	Department for Education and Employment	Government Department, the work of which is now undertaken within The Department for Education and Skills whose stated purpose is to create opportunity, release potential and achieve excellence for all. www.dfes.gov.uk
DoH	Department of Health	Government Department that provides health and

		social care policy, guidance and publications. www.doh.gov.uk
GSCC	General Social Care Council www.gsc.org.uk	The workforce regulator and guardian of standards for the social care workforce in England. They were established in October 2001 under the Care Standards Act 2000. They are responsible for the codes of practice, Social Care Register and social work education and training.
NMC	Nursing and Midwifery Council www.nmc-uk.org	An organisation set up by Parliament to protect the public by ensuring that nurses and midwives provide high standards of care to their patients and clients.
PPP	Personal Professional Profile	A record of learning required for continued nurse registration. The PPP is used to record actions, learning activities and application to professional practice.
PREP	Post-registration Education and Practice	A set of standards and guidance from the NMC providing a framework for CPD, which, although not a guarantee of competence, is a key component of clinical governance.
PRTL	Post Registration Training and Learning	This is the term used by the GSCC and is taken here to mean the activities that individuals may undertake in order to achieve Continuing Professional Development (CPD)
QAA	Quality Assurance Agency	An independent body funded by subscriptions from UK universities, colleges of higher education (HE) and contracts with the main UK, HE funding bodies. The QAA set out to ensure sound standards of higher education qualifications and to encourage continuous improvement in the management of the quality of HE. The QAA work with HE institutions to define academic standards and quality.

 To demonstrate continuing professional competence for enforcement and monitoring of regulatory professional standards

*Examination or testing to determine re-registration

* External observation of practice

* Current CPD in social work & nursing

Assessment that can demonstrate unequivocal reliability, validity and consistency

Assessment that is flexible, dynamic, contextual and includes a high level of professional judgement

*Formal written academic work

* Peer observation of practice

To demonstrate effective, relevant learning and development in practice

*Reflective accounts

Evidence of Experience

Minutes of meetings
Case notes
Assessor observation
Service-user feedback
Manager/assessor/
peer feedback

Evidence of Reflection

Diary
Supervision notes showing reflection
Records of post-observation discussion
Process recordings
Extracts from learning log
Notes of reading

Evidence of Active Experimentation

Action Plan
Assessment Plan
Agenda for meeting
Letters
Service-user feedback
Manager/assessor/
peer feedback

Evidence of Abstract Conceptualisation

Student's analysis of practice
Critical Incident analysis
Supervision records showing ability to
conceptualise practice
Essays linking knowledge/theory to practice