


Investigating the impact of an accreditation system on physiotherapy undergraduate clinical education

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Purpose

- The aim of this study was to identify if a process of accreditation had influenced clinical educators' perceptions of the advantages and disadvantages of having students on placement.

- ### Background
- Clinical Governance (1997)
 - NHS Plan (2000)
 - Quality Assurance Agency (2003)

What is accreditation?

- *Scrivens (1997)*
“A system of external peer review for determining compliance with a set of standards”.

- ### Components of an accreditation system
- Standards
 - Voluntary Participation
 - Assessment
 - External Review

- ### Subjects
- Sample of convenience
 - 2 groups-
Group A: accredited clinical educators (n=24)
Group B: non-accredited clinical educators (n=24)

Design: 3 stage Delphi type study

- Stage 1- to identify common themes and derive statements
- Stage 2- participants to rank statements in order of importance
- Stage 3- participants to look at their group ranking and re-rank statements if needed.

Stage 1

- **Response rate**
Group A-83%, Group B-67%,
- **Method**
 - questionnaire was sent to all participants.
 - 2 open questions, to identify the advantages and disadvantages of the clinical education process.

Stage 1

- **Analysis**
 - Content analysis was used to identify common themes
 - Statements were then derived from these themes
 - Frequency of themes within groups was recorded
 - Statements were then used in Stage 2

Areas of differences between groups identified at Stage 1

- **Advantages:**
 - Enhances Continual Professional Development(CPD)
 - Provides improved links with Universities
 - Facilitates a learning environment
 - Increases awareness of educational theories
 - Influences future professionals
- **Disadvantages:**
 - Difficulty balancing workload
 - Causes stress due quality of student and staff shortages
 - Students unrealistic expectations of staff
 - Inadequate financial reward.

Stage 2

- **Method**
 - Participants were asked to rank the statements derived from Stage 1 in order of importance
- **Analysis**
 - to identify any differences between groups

Results Stage 2

- **Response rate**
Group A=72%, Group B=68%,
- **Test results**
 - Wilcoxon signed-ranks test showed no significant difference between groups ($p>0.05$).
- However, these results could have been a consequence of poor within group agreement

Stage 3

- **Method**
- Advantage and disadvantage statements were ranked according to the consensus within each group
- These statements reissued to each separate group to determine their agreement or disagreement.
- **Analysis**
 - Kendall's Coefficient of Concordance 2

Results Stage 3

- For Group A and Group B, using Kendall's coefficient of concordance 2, the results demonstrated a significant level of agreement ($p < 0.001$) between both accredited and non-accredited clinical educators' perceptions of advantages and disadvantages of clinical education.

Areas of differences between groups identified at Stage 3

- **Advantages:**
 - Enhances Continual Professional Development (CPD)
 - Provides improved links with Universities
 - Facilitates a learning environment
 - Increases awareness of educational theories
 - Influences future professionals
- **Disadvantages:**
 - Difficulty balancing workload ***
 - Limits flexibility to book time off***
 - Students unrealistic expectations of staff***
 - Inadequate financial reward.
 - Causes stress due heavy workload

Implications of Study

- The findings from this study identify there are differences in the perceptions of clinical educators who are accredited and those who are not particularly in there perceptions of the disadvantages but these are not marked.
- Stages 2 and 3 took place at a later date when the support for clinical educator development in the NW had grown and may have influenced results.

Future study

- Evaluate the impact of accreditation on the learning experience of the undergraduate physiotherapists
- Repeat study on different group of clinical educators who have undergone the more recent process

References

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- Department of Health (2003) *The Quality Assurance Framework*