





Place Based Learning across Primary Care Networks

Implementation & Impact Framework

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This word cloud was developed using the words share by the participants at the five East Kent Place Based Learning across Primary Care Networks workshops to co-create the Implementation and impact framework

Introduction

This framework has been developed from participants' contributions derived at five Place Based Learning (PBL) workshops across East Kent Primary Care Networks (PCNs). The 'Synthesis of Place Based Learning across Primary Care Networks' document provides the audit trail used to create the framework, definition, underpinning values, ultimate purpose as well as facilitator skills and attributes for PBL.

1	Place Based Learning ² Definition
2	Values
	supporting
	PCN approach

Place Based Learning refers to all learning that takes place in or about the context³ of where the learning will be used. Place Based Learning allows for the use of a variety of learning methods across health and social care settings. The focus is upon experiential learning where meaning is constructed through interaction allowing development of knowledge. This knowledge is then able to be applied in practice and evaluated to ensure that broad understanding has been achieved rather than focusing upon individual skills and one aspect of care delivery.

People centred learning, that recognises everyone is an asset, invests in all people⁴ and sees

the educative potential of all

Cultures of learning at the heart of everyday work in teams

Networks that enable learning together across the PCN, and the sharing of best practice and what works well

3 The purpose

Learning

to Place Based

The ultimate purpose of PBL across Primary Care Networks is to grow, develop and sustain an effective health and social care workforce equipped with the skills, knowledge and expertise to deliver effective, safe, compassionate, consistent holistic care. The aim is to improve patient pathways, outcomes and the wellbeing of the local population and evolve with changing needs.

4 Facilitator⁵ expectations LEARNING

Facilitators of Place Based Learning

Learning, skills and knowledge

- Take responsibility for their own learning and development
- Have the knowledge, competence, expertise, skills and experience required to develop, improve, supervise and give feedback to multi/inter professional learners
- Identify different learning styles, effectively using a variety of fun approaches
- Set objectives, monitor and assess using conversation, observation and written work appropriately

Embracing the vision and people

- Embrace the vision, values, purpose and direction of PBL
- Embrace all people equally recognising everyone is an asset

Attributes of facilitators

- Are enabling, approachable, supportive, flexible, adaptable, empowering and pragmatic
- Actively listen
- Facilitate reflection
- Are realistic, set boundaries and manage expectations

Resources

Use & signpost to learning resources and experts appropriately and effectively

Networking

 Network learning opportunities across the system to help learners understand patient pathways, the wider system and the implications of individual actions

Investing in people

- Promoting, supporting and encouraging PBL in all people
- Identifying and reviewing individual, personal, team and organisational learning needs based upon the needs of the local population and what matters to people

Needs based approaches

 Recognise and understand competing demands and priorities in the workplace reframing barriers and obstacles to enable problem solving and focus upon need

Guiding and advising

Give guidance and advise all people appropriately

ENABLERS required for Place Based learning

SHARED VISION⁶, VALUES, PURPOSE, DIRECTION

 A shared vision, values, purpose and direction that can evolve flexibly across the PCN

TEAM LEARNING CULTURES have:

- A PBL champion
- Designated facilitators of learning to support staff
- All staff committed to, supporting and/or delivering PBL
- A learning and development menu available for all
- Systems to:
- recognise, record and value all learning
- Engage citizen⁸, student and staff using feedback to inform learning and care priorities
- Access local population/people data to inform learning needs
- Opportunities to participate in learning networks across the system and contribute to research and evaluation that informs learning, development and improvement.

PRIMARY CARE NETWORK & SYSTEM have in place:

- Inclusive Multi-disciplinary career frameworks
- Facilitators of L&D with consistent terms and conditions
- Specified Curricula and competences/capabilities
- Leadership development for learning cultures
- Systems in place with transparent processes; equity of opportunity and good governance to:
- ✓ Listen to and acknowledge what matters to people
- Identify people's needs with consideration of geography (access/location), sustainability & environmental footprint, reviewing L&D provision and roles
- ✓ Recognise, value and evaluate L&D impact
- ✓ Grow & retain workforce, widen participation, promote health and social care careers, work with schools, colleges and Higher Education Institutes
- ✓ Build integrated care partnerships with all stakeholders across health & social care to ensure seamless working across boundaries & enable rotational placements
- Networks to enable:
- ✓ Share learning and good practice across the health & social care system
- Access to skills development, knowledge & expertise, resources & learning opportunities

ATRIBUTES: what would be happening in good Place Based Learning Cultures

VALUES OBSERVED IN ACTION Person centred learning

- Everyone is recognised as an asset and invested in to develop individual potential
- Respectful relationships & peer support
- Staff and students seek understanding and can ask for help and support.

Cultures of learning

Team members

- Understand, engage with and are committed to learning and support
- Involve and include all people in learning
- Take ownership for and prioritise learning,
- Are responsive, reflective, positive & creative
- Challenge traditional ways of learning
- Develop trust, share responsibly, bond as a team

Team systems in place to:

- Celebrate and share success
- Identify, analyse and review learning, feedback, reflecting & acting constructively to inform improvement and innovation
- Allow the freedom to try and the right to fail, and a process to learn from mistakes
- Use & develop learning opportunities through ways of working that are, flexible, proactive, pragmatic with effective & efficient use of resources

Networks that enable learning together across the system to:

- share best practice and 'what works'
- work together, network, collaborate and share resources,
- participate in improvement & innovation.

CONSEQUENCES: including impact, outcomes and outputs

STAFF/WORKFORCE/LEARNERS

- Experience an inviting positive, creative, supportive, happy, learning environment that enables them to:
- ✓ Feel respected, cared for, recognised, empowered & sense of belonging
- Have courage & confidence to ask, speak up & challenge without blame
- Want to learn, exceed expectations and be ambitious,
- ✓ Build resilience and emotional intelligence
- ✓ Enjoy being at work, and have job satisfaction
- Be up to date and skilled with equitable access to learning & career development opportunities.

TEAM

- Increased capability and capacity in facilitation of L&D
- Increased input to identifying system needs & service design
- Improved staff wellbeing & morale, less sickness and stress
- Improved indicators of high quality (patient/citizen experience) safe
 & effective care.

PRIMARY CARE NETWORKS & SYSTEM:

Learning system demonstrates impact of PBL across the system.

- Increased capability and capacity in inter-professional facilitation of L&D across the system
- Positive feedback from all learners and people,
- Improved standards and key performance indicators
- Increase reporting of incidents/adverse events with learning from mistakes and significant events

System outcomes

- Citizens signposted correctly to the right people at the right time
- Positive impact on local people, addressed health inequalities and improved population health: good reputation
- Outstanding CQC results
- Reduced over medicalisation
- Attract research funding and investment.

Workforce outcomes

- Increased effectiveness & productivity of partners across system
- Multi-professional skill mix & new roles to meet identified needs and what matters to people
- Improved retention & recruitment of workforce

Notes

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Minster Surgery New Dover Road Surgery New Hayesbank Surgery Newton Place Surgery NHS East Kent Clinical Commissioning Groups Northgate Medical Practice Pilgrims Hospices Queen Elizabeth Queen Mother Hospital Red Zebra Community Solutions Sandwich Medical Practice Sellindge Medical Practice St Richards Road Surgery **Sydenham House Medical Group** The Grange Practice The Heron Medical Practice The Old Vicarage Residential Care Home **University Medical Centre Canterbury** Whitstable Medical Practice

Lydden Surgery

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¹ Participants represented all stakeholder groups

² Learning refers to learning, developing, improving, education and training

³ Context refers to physical or virtual environments or professional relationships and peer learning groups

⁴ People refers' to individuals from all stakeholder groups

⁵ The term facilitator refers to educator, teacher, mentor, etc.

⁶ The shared vision of PBL will be created from the unfolding stories and shared at a later date

⁷ Facilitator skills and attributes can be seen in table 4.

⁸ Citizen refers to people from the local community and is wider than patient and service users as it also includes carers and also those who might access services but are not doing so or may need to do so in the future