

An Evaluation of Service Users as an Educational Resource in an Undergraduate Diagnostic Radiography Module.

Background: In 2013, the Health and Care Professions Council (HCPC) introduced a mandatory standard (SET 3.17) to involve “service users and carers” (SU&Cs) in accredited training programmes, as they are now increasingly recognised as a valuable educational resource [1]. This also reflects a continuing shift in modern healthcare towards a patient-centred focus, with increased active involvement from SU&Cs in their own care. In line with this, the University of Exeter (UoE) undergraduate medical imaging (MI) programme incorporates service users in a range of capacities including online and group-based educational activities, group seminars on the “lived experience” of mental health conditions, lectures on service user involvement in NHS Trusts, and as part of our admissions programme.



Aim: To critically evaluate the PAM2012 “Pathology for Radiographers” module and its “service user session” where around three or four invited SU&Cs living with chronic health conditions discuss their healthcare experiences with small groups of stage 2 students.

Methods: Brookfield’s “four lenses of critical reflection” were adopted in order to gain a balanced perspective of key stakeholders, including the students involved (i.e. the “student lens”); medical imaging staff and adopted SU&Cs (the “colleague lens”); and the autobiographical thoughts of the author (the “autobiographical lens”). Evaluation was strengthened by putting these perspectives in context with the literature base (i.e. the “theoretical lens”) [2]. For the “student lens” 12 of 37 (32.4%) students returned an online questionnaire. Four staff and two SU&Cs were also surveyed on their views. Themes such as the benefits, praise, criticisms, barriers and potential improvements for the sessions were identified and explored, along with potential new ways of implementing service users as part of the MI programme.

“THE STUDENT LENS”: THEMATIC ANALYSIS OF STUDENT FEEDBACK

BENEFITS OF THE SESSION	PRAISE FOR THE SESSION	CRITICISM OF THE SESSION	IMPROVEMENTS FOR THE SESSION	IMPROVEMENTS COURSE WIDE
“We can gain a brief understanding of their (SU&Cs) thoughts behind what’s happening, their worries, values and expectations.”	“... All that they expressed is relevant to us as a radiographer. It ... helps us to be a more sensible, sensitive and sympathetic radiographer.”	“I felt this whole talking to patients about their experience had no real aim, it has been covered extensively in patient care in 1st year.”	Timing: should be before clinical placements and should not be around exam times.	Service user sessions should be focused in the first year patient care module
“... it made me more confident to know that patient care is really important and that everything I have done so far is the right way ...”	“...it’s always good to get feedback from patients about the profession, good or bad, it makes you want to improve.”	“... I think most people who care about patients will be that way regardless of the sessions and vice versa.”	Increasing the diversity of service user backgrounds and disease conditions	Service user sessions should be focused prior to the clinical placements
increased awareness of how professional behaviours can affect patients and a resulting appreciation of the importance of good patient care	“... to come all the way and talk to us about themselves and their experiences. It certainly takes courage and commitment.”	“While it is always good to talk to patients it feels rather pointless to just have them come and tell us their medical history.”	Training for students on how to interview service users would help	Service user involvement should be integrated throughout the course
Understanding and empathy for the complexity, diversity and “personalization” of a patient’s illness	“...some students struggle with the emotions suffered by the carers for the young and old. These are areas outside their experience.”		A prior debrief about the service users is required in order to prepare questions	“It applies to many of the modules anyway, it doesn’t really matter that it’s under the banner of PAM2012”

“THE AUTOBIOGRAPHICAL LENS”:

- I enjoyed running the sessions and the positive feedback from most involved.
- I was initially worried the sessions were ultimately reliant on student engagement and also of a “catch-22” whereby those students who engage are generally the more empathetic students and those who do not are likely to be students who in my eyes could benefit the most.
- Ending sessions with a larger group debrief was a useful reflection exercise for students; and gave a demonstration to the SU&Cs of their effect on the cohort.
- I was surprised by how the lecturer still has a big role to play throughout sessions, not just as a facilitator but providing support to both students and SU&Cs.
- In the lead up to these sessions I did share staff concerns on the reliability of SU&Cs, and indeed we did have one service user pull out due to illness.

Brookfield’s “Four Lenses of Critical Reflection”

“THE COLLEAGUE LENS”: THEMATIC ANALYSIS OF STAFF AND SERVICE USER FEEDBACK

BENEFITS OF THE SESSION	PRAISE FOR THE SESSION	BARRIERS OF THE SESSION	IMPROVEMENTS FOR THE SESSION	IMPROVEMENTS COURSE WIDE
Staff: “The students ... develop an understanding of their (SU&C) anxieties, fears, disease processes, physical limitations, pain and mental health aspects.”	Staff commented describing their own experiences as service users could be uncomfortable and were often limited. Their perception of these events were also inherently tainted by being radiographers.	Logistics: Cost, reliability, recruitment and availability of service users	Better student preparation and guidance prior to sessions	Potential use of service users in curriculum design and admissions activities
Staff: “... put the students in a slightly uncomfortable but privileged position of having someone willing to be completely open with them. I think this encourages maturity and respect.”	Service User: “... there are always students who will say things like ‘I hadn’t thought about that’, which shows that they are looking at the situation in a different way (from my perspective as a service user).”	Staff: “My ... concern was on the burden of the service users – logistically it works well to have a number of sessions on the same day, but this is hard going for people who are there because they have poor health.”	Consider a larger “pool” of more diverse service user demographics. Using carers could also help provide an insight into vulnerable groups not possible to approach (e.g. paediatrics).	Potential use of service users in practical demonstrations or role-plays of radiographic practice or patient care principles
Service User: “They hear examples of positive and negative experiences and can gain an understanding of what a huge impact these can have on the individual.”	Service User: “I have struggled with my health for many years ... Being involved in the service user sessions allows me to feel that something positive can come from everything I have been through.”	Service User: “Some groups will have several very quiet and reserved students and it can therefore be difficult to get them to come forward with many questions.”	Further engagement with online resources to contact service users, including wikis, forums and videoconferencing before, during and/or after sessions	Consider training of service users carefully including the cost involved and the loss of the “realness” that may come with training.
Gives service users confidence and trust in healthcare professionals and fosters a level playing field between service users and healthcare professionals	Service User: “I suppose the most important thing is that it makes them (students) think about the patient as a person with feelings.”	Service User: “... Whilst others have several confident outspoken students who are all firing questions one after another.”	More integrated “props” such as associated medical imaging	However: Service User: “... answers to the questions put forward should be individual, spontaneous and honest. Extra training might compromise this.”

“THE THEORETICAL LENS”:

- The other three “lenses” shared many of the benefits and praises of the HCPC consultation preceding SET 3.17, including allowing SU&Cs to influence the training of future healthcare professionals [3].
- Effective recruitment is important. Suitable SU&Cs must be representative of the “real world” without a personal agenda, and including a diversity of backgrounds and conditions [3]. Upon reflection, all of our UoE service users are female, Caucasian and “middle class”.
- Ethical issues exist including the rights for SU&Cs to refuse/withdraw, especially when still undergoing therapies or from particularly vulnerable demographics. The potential for harm needs to be recognised if SU&Cs have not discussed their situation to strangers before. Likewise sessions can be an emotional experience for students (although this can also be a positive thing). Respecting the confidentiality of SU&Cs outside of the sessions is also important [3].

Conclusion: Good patient-centred care can improve diagnostic performance for radiographic examinations as well as patient attendance, compliance and satisfaction [4]. SU&C involvement in associated higher education can help students understand the importance of patient-centred care and foster the confidence to improve their clinical practice. All agreed that SU&C involvement in the UoE programme should remain, and that compulsory SU&C involvement in the training of healthcare professionals is justified, in keeping with SET 3.17.



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Key References:

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- [4] Booth, L., *The radiographer-patient relationship: Enhancing understanding using a transactional analysis approach*. *Radiography*, 2008. 14(4): p. 323-331.