EDUCATIONAL PLATFORM

Department of Care Science

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INTRODUCTION

The composition of an educational platform for the Department of Care Science has as its foundation the necessity to both ensure and further develop the quality of the education offered by the faculty, in both the first and the second cycle. Lifelong learning can be held up as a central foundation for the department's underlying educational philosophy with regard to future activities. This means that teaching should support the student's independent knowledge development, critical thinking, reflection and problem solving ability. Furthermore, the educational format should facilitate an active and creative involvement in teaching, in order to stimulate the student's development of professional competence. In addition, teaching at the institution should create such conditions for students that they acquire knowledge of equal health and sustainable development in relation to future professions and, where appropriate, specialization.

Educational Theory

The basis for the department's educational platform can be traced back to Aristotle's thoughts on the forms of knowledge: episteme, theoretical scientific knowledge, techne, practical productive knowledge and phronesis, political ethical knowledge (Gustavsson 2000). Our basic educational philosophy emanates, however, from educationalists such as Rogers¹, Vygotsky², Piaget³ and Dewey⁴. These educationalists highlight the significance of giving students the opportunity to actively take part in the learning process, that knowledge is built up through interaction and communication and that theory, practice, reflection and action constitute each other's conditions for continuous lifelong learning (Jarvis 2010).

The complexity of education is described further in the theory of sociocultural learning. Learning thus involves the whole individual, not only in relation to specific activities, but also in relation to a social solidarity and how

¹ American psychologist (1902-1987) who, together with A.H. Maslow, founded humanistic psychology and developed ideas from psychology for an educational setting.
² Russian psychologist and educationalist (1896-1934) whose theories about learning as sociocultural, where relationships, communication and culture are central, were pioneering for their time and influence educational theory even today.
³ Swiss educationalist and philosopher (1896-1980) who is best known for his theory on the development of children, but has also been of significance to adult education as it has been shown that adults' thought and reflection processes change and develop throughout life.
⁴ American educationalist and philosopher (1859-1952) who decreed a pragmatic view of learning, i.e. that learning should be of practical benefit. Dewey coined the term "learning by doing".
learning is construed in teamwork (Säljö 2000). To summarise, the courses at the Department of Care Science aim to promote lifelong learning. This is well reflected throughout the breadth of our educational programmes, from the first to the third cycle, as well as in the large number of stand-alone courses which we offer in the first and second cycle.

**Constructive Alignment**

Biggs and Tang (2007) describe how the content of a course should be a motivating, but also challenging experience for the student. Constructive alignment (CA) involves clearly linking learning goals with working practices and examinations in the course plans and with clear progression within and between programmes in the first and second cycles. Constructive means, simply, that students construe the purpose, i.e. understanding of a phenomenon (that which will be learned) through relevant learning activities or that which we call study formats. Alignment refers to the structure, from the teacher's point of view, that the learning goals, working practices and examinations complement one another, i.e. that the student is given the opportunity to learn that which is later examined.

**Research integrated education**

Higher education should be pursued so that research and education go hand in hand and where knowledge is contextually based on science and experience where students and teachers with a critical attitude exchange and compare perspectives. At the Faculty of Health and Society, research attachment is defined as "activities that will stimulate students to actively seek, compile, analyze information and apply knowledge, thus contributing to both knowledge development and the ability to critical thinking and self-reflection". The research link will be based on an approach that allow students to acquire a scientific approach through different learning activities. Jenkins and Healy (2010) describe how research integration needs to be integrated into both course content and research projects for which students can be invited to participate (Figure 1). At the Department of Care Science, research integration is made visible and viable through the different forms of learning activities ranging from teacher-centered teaching to student-centered seminars. Moreover, research integration is accomplished by the institution’s researchers teaching in all courses and programs.
Social sustainability in an educational perspective

Social sustainability is about issues related to a democratic and just society, and includes equitable access to basic vital social services such as health care and education. It is also about to see cultural differences as positive aspects in a society where cultural integration should be encouraged and supported. Social sustainability is dependent on available resources and at the Department of Care Science the competence that exist among our faculty and students equal these resources. These can also be understood as the social networks we share through the values that permeate the educational platform. To participate actively in the institution's common development, it is important that students can influence their education through involvement in courses and program evaluations, the institutional program council and the student union.

Core Competences

Globally, health care system faces major challenges such as widening gaps of health / illness, increased risk of pandemics with rapid spread, increasing proportion of older people in society, and the runaway costs of health care and unequal access to health care and education. To meet these challenges and ensure patient safety and high quality care requires the combined expertise of all health professionals in relation to six core competencies:

- Patient-centered Care
- Teamwork and Collaboration
- Evidence-based Practice (EBP)
- Quality Improvement (QI)
At the Department of Care Science, we work consistently in both theoretical and clinical courses to implement the six core competencies at undergraduate and postgraduate level.

**Student active learning in theoretical courses**
The theoretical parts of the institution's programs and courses are characterized by the idea that increased student activity will benefit deep oriented learning. As students apply different learning strategies multiple and varied forms of work are used. Some examples are case based learning, educational seminars and role-play. Critical friends or collegial review is a form of structured feedback used to develop ability for reflection and critical thinking (Dahlgren et al. 2006) which is used in several advanced level programs as a way of developing professional competence.

**Precepting and Clinical Practice**
Clinical training is an important part of the nursing programme. This means that the training at, for example, the simulator centre and at the clinical skills centre (procedural exercises) together with clinical practice constitute the programme's clinical training. At the Department of Care Science, clinical practice is defined as that portion of the training which takes place in proximity to patients in various health and long-term care environments. During the clinical practice portion of the training, the students are precepted by clinically active nurses. The preceptor's function is complex and they should support the student's ability to apply their generalised formal theoretical knowledge to problems relating to the individual in a specific care context. At the Department for Care Science, reflective preceptorship is central. This becomes particularly clear when precepting students who are undergoing specialist training during the second cycle. Reflection is a precepting strategy which may increase the awareness and understanding of nursing situations experienced by the student; it is enabling for the student, and also develops the student's ability for critical thinking (Carlson 2010, Lindell 2014). For this reason, nursing supervision is an additional part of the institution's pedagogical work in matters relating to learning, teaching and supervision in various care-related contexts. Nursing supervision is a compulsory part of the nursing program and runs
as a thread throughout all six semesters with a focus on professional guidance in nursing to support and develop professional competence (Kisthinios, 2015).

The Paired Clinical Nurse Teachers Model
At the Department of Care Science, educational development of clinical practice takes place using the, so called, paired clinical nurse teachers model. The model is constructed around a pair of clinical teachers, one of whom represents the educational institution and the other the hospital or community based care. They share responsibility for providing educational support to the students and preceptors, as well as managing educational development in either a clinic or a number of wards (Islamoska 2014).

Precepting in the Clinical Education Ward
A training format which is increasingly attracting interest as a way of training healthcare personnel is interprofessional training. Since 2005, the Department of Care Science, in collaboration with SUS in Malmö and the Faculty of Medicine in Lund, has had a successful collaboration with the clinical education ward (KUA). The educational philosophy behind the training at KUA can be summarised as "working together to learn together". The students who come together at KUA are from the medical nursing, physiotherapy and occupational therapy programmes.

Collaborative Learning
Collaborative learning involves collaboration between students in which involvement, independence, critical thought and problem solving are central. The focus is on learning, not on teaching, and some of the models used are peer learning (Stenberg and Carlson, 2015; Nygren and Carlson, 2016) and Critical friends (Dahlgren et al., 2006).

Internationalization
Internationalization at home (IaH) is highly prioritized at the Department of Care Science. We offer, on a continuous basis, one full semester in English for undergraduate nursing students open for local and international students alike. The global perspective is incorporated in selected courses and visible in curricula and study guides. The aim is to provide all students and teachers with the opportunity to
develop cultural awareness and intercultural experiences. Faculty has plenty of options for teacher exchange at several international partner universities. For students, other opportunities such as participation in conferences and international guest lectures, as well as shorter and longer exchanges is provided by the department.

Educational Development and Research at the Institution
The continued development of our educational efforts and research is an important part of the department's work to ensure quality. Several educational reports have been published with regards to, portfolios (Bengtsson and Wann-Hansson, 2011), peer-learning (Karlsson and Vuckovic, 2013), group-supervision (Lindell, 2014; Kisthinios, 2015; Kisthinios, 2017) and the clinical teaching model in Malmö (Islamoska, 2014). The educational research is an integral part of the department's care science research that has a multi-disciplinary and interprofessional character so that the development of the department's educational models can be clearly linked to research.

REFERENCES
Dahlgren L-O m.fl. (2006) To be and to have a critical friend in medical teaching. *Medical Education* 40, 72-78.


