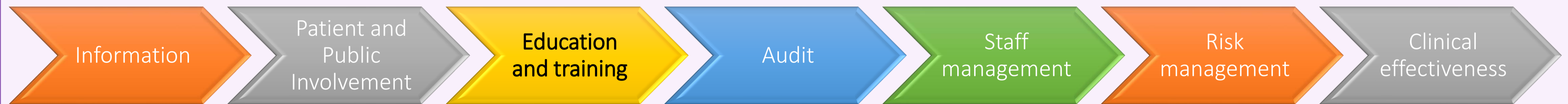# Integrating flipped/blended learning into the ultrasound clinical governance session

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AECC University College — Transforming lives through Health Sciences

Introduction

Clinical governance is the main factor for continuously improving the quality of patient care and developing the capacity of the NHS in England to maintain high standards (Scally & Donaldson, 1998). It is a system through which NHS organizations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which clinical excellence will flourish (DOH, 2022). The components of clinical governance include:

Information → **Patient and Public Involvement** → **Education and training** → **Audit** → **Staff management** → **Risk management** → **Clinical effectiveness**

Education and training of ultrasound practitioners is crucial to ensure that staff have the appropriate training to ensure patient safety and can include various formats e.g. study days, writing case studies and reflective accounts, in-house training, e-learning, multidisciplinary meetings/collaborative work and attending courses. All staff have a duty to ensure that their education and training is maintained to protect their patients, themselves and importantly to comply with HCPC and SOR standards. Clinical governance sessions provide an opportunity for staff to undertake specific hospital/departmental training however opportunities are not always present for all. The NHS People Plan 2020 puts those working in the community and primary sites at the front and centre of the NHS. One way to achieve this is to allow staff to work flexibly, this can take the form of many variants including formal and informal flexible working. This poster presents a new technique to aid the ultrasound clinical governance session to ensure staff have greater accessibility and flexibility to access material for their education and training.

Changes due to COVID-19

The COVID-19 pandemic changed the way of working for the NHS. One factor that was severely affected was the training of students and current staff including clinical governance. The NHS advocated staff using the Health Education England's free e-learning training for staff to refresh their training and undertake new learning packages where applicable during covid (NHS, 2022).

Flexible working is not a new concept to the NHS but the impact of COVID-19 has significantly altered working patterns. The average number of weekday remote meetings rose from 13,521 to 90,253 in weeks 1 to 8 of lockdown. This enabled teams to run virtual team meetings, case presentations, handovers and teaching sessions (NHS,2022). Not only was this concept used in the NHS, it was also successfully used globally within academic institutions across multiple courses including healthcare.

Learning types

Learning types must be acknowledged when designing clinical governance sessions and activities albeit online or face to face. Laurillard (2012) identifies 6 learning types:

Acquisition	Inquiry	Discussion
Practice	Production	Collaboration
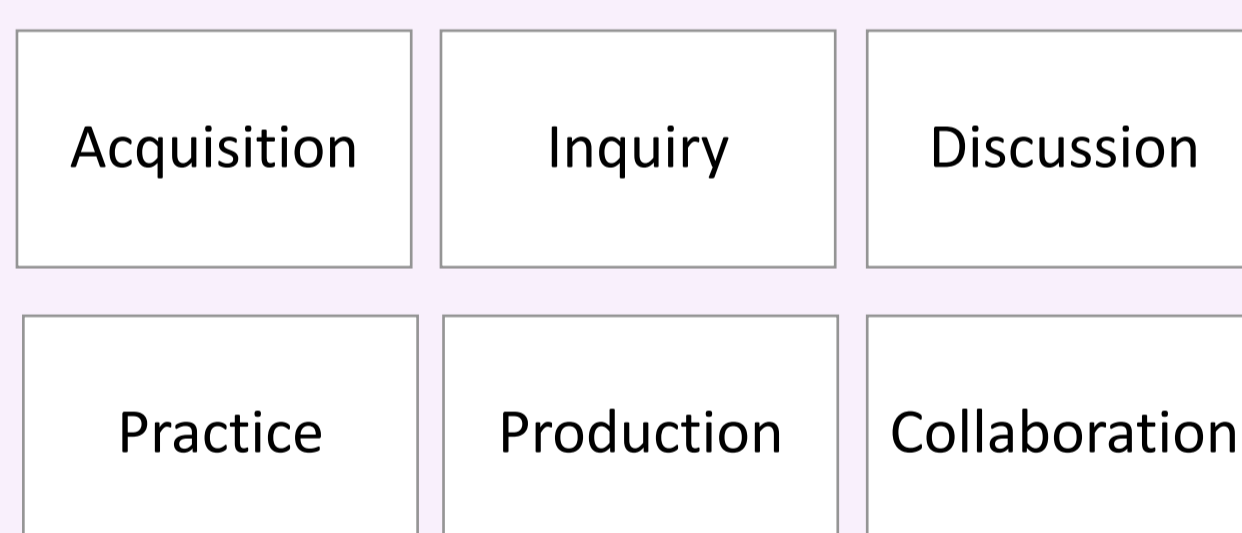
1. Acquisition: learn by giving students information to remember, on which more complex learning can be based
2. Inquiry: learn by requiring students to understand the information and the question they are tackling, so that they can evaluate their sources.
3. Discussion: learn by requiring students to remember and understand the information they present and evaluate alternative points of view.
4. Practice: learn by encouraging students to analyse a problem and apply their knowledge
5. Production: learn by giving students the chance to create something through applying the knowledge they have gained.
6. Collaboration: learn by making students understand and evaluate different perspectives to create a joint outcome that all have ownership of.

Online Learning

Online learning is not a new concept, with many institutions and courses offering online learning. The pandemic forced institutions to move to an online format and although this is not always the best method for all learners/courses, it has proved to be advantageous in many aspects including: remote learning, accessibility at a convenient time and being asynchronous (Mukthar et al. 2020). However, there are some disadvantages to the online format including the risk of unanticipated IT problems. Salmon (2002) identified that live sessions can be disrupted by poor audio and internet signal strength, therefore it is critical that sufficient planning goes into this format to cover any potential issues. One of the ways to overcome this is to record the live presentations and offer a webinar for a discussion as a team. Teaching cannot just include giving a presentation online; blended learning activities must be designed ensuring that students are motivated and engaged to undertake studying. Importantly, all the activities must relate to the intended learning outcomes of the clinical governance session.

Challenges to online learning

Recognition must be given to the challenges and difficulties that may occur in online learning and how these can be overcome. The online governance session gives an opportunity for a staff to attend who may not be able to attend the face-to-face session due to location or a variety of other reasons. However, this type of learning does not suit everyone, and it is important that the department recognises that there may be some difficulties that occur. To overcome some of the difficulties, Salmon's (2013) staged model should be used including:
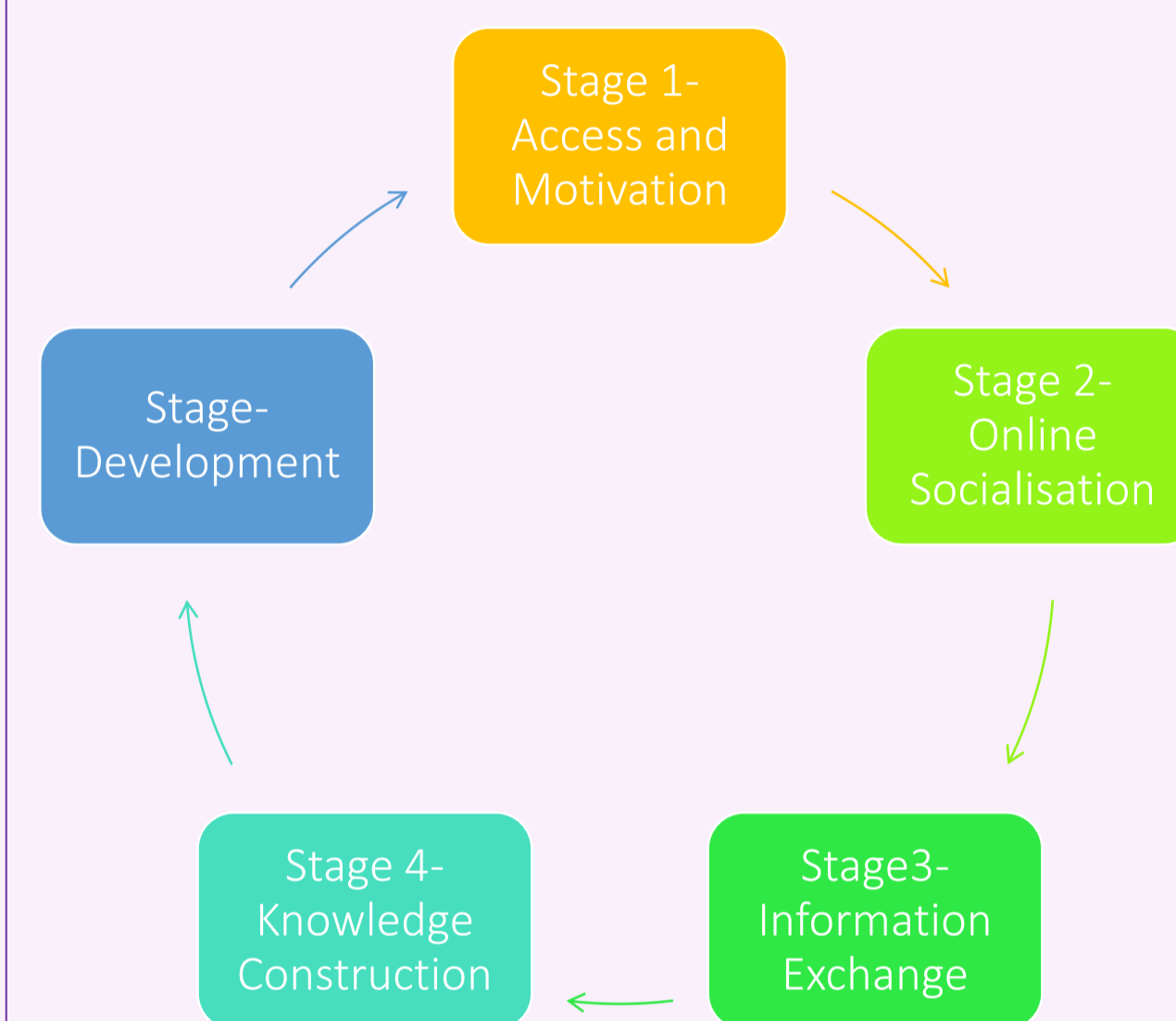
1. Stage 1: Ensure staff know how to access the online group/forum/shared drives.
2. Stage 2: Provide a structure and give a summary of the main discussion.
3. Stage 3: Encourage questions and participation
4. Stage 4: Encourage staff to question theory and relate this to practice.
5. Stage 5: Encourage group members to lead discussion and reflect.

Other methods could be included to a governance session included flipped and blended learning.

Blended Learning

Blended learning combines face to face and online activities in a seamless and complementary flow of learning (Advanced HE, 2020). These resources provide a springboard for students to conduct further online research through personal learning networks (PLN) and digital curation activities.

Flipped Learning

Flipped learning allows staff to undertake work in their own time and at their own pace, and potentially watch clips or listen to clips more than once. Undertaking this work before the face-to-face session has occurred allows more time in the governance session to focus on other tasks. Resources provide a platform board for students to conduct further online research and governance session time could be spent in small groups with the aim of deepening this learning through problem-based activities (Advanced HE, 2020).

Examples for ultrasound clinical governance

Multiple opportunities exist for departments to include online and flipped/blended learning into their departmental clinical governance session.

This project could be implemented by the clinical governance lead or delegated to a staff member/s looking to achieve recognition for the advanced pillars of practice. Multiple opportunities exist, some examples are given below:

- **Case studies**
Staff could undertake case studies and post these to the shared drive. This would give the opportunity for in-depth cases to be explored providing an opportunity for staff to gain experience in evaluating case studies. Comments could be left online or later discussed in an online face to face session.

- **Scoring systems** (e.g IOTA & O-RADS)
The scoring system could be shared on an online drive with an audio/PowerPoint podcast explaining the system. Multiple images could be included to evaluate and provide a score which provide discussion in a face-to face/online format.

- **Online presentations**
Staff often miss clinical governance session/presentations due to working patterns/flexible working. It can be difficult to retrospectively read slides. Presentations could be recorded, or an audio recording undertaken alongside giving an opportunity for all staff to listen and watch at a time convenient to the individual.

- **Audio Podcasts**
Emails are frequently sent to give information including new policies, procedures and guidelines. These could be given alongside a podcast giving further information and explanation.
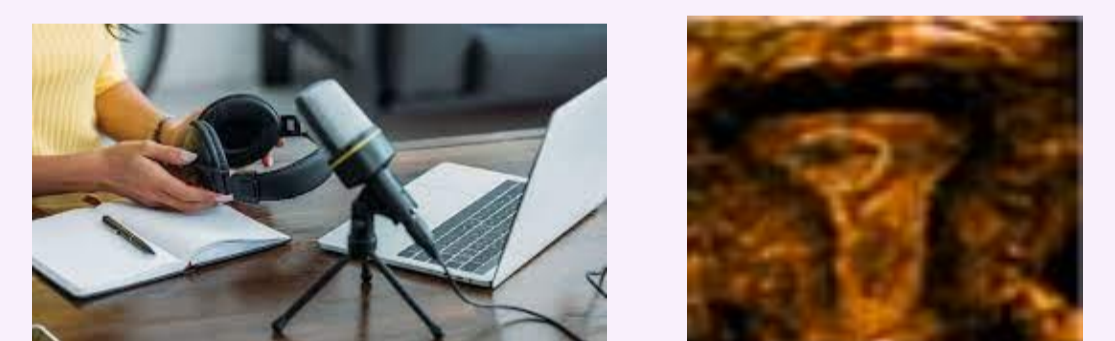
Conclusion

Clinical governance is the main factor to continuously improve the quality of patient care and maintaining high standards. Multiple pillars contribute to governance, the education and training pillar is important for ultrasound practitioners for their development as well as patient care/safety. There are multiple formats in which staff can undertake education and training including clinical governance sessions. It can be difficult for staff to attend face to face sessions due to flexible working, subsequently, staff can miss sessions. This poster has demonstrated an additional way that staff can undertake governance using an online format combining blended and flipped learning.

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