

A Guidance Document for the British Dietetic Association and Health Education England

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International Practice-Based Learning Provision for Dietetic Pre-registration Learners



Dietetic Workforce Development Programme

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2 International Practice-Based Learning Provision for Dietetic Pre-registration Learners

1. Introduction

In 2021 the British Dietetic Association (BDA) and Health Education England (HEE) commissioned a feasibility scoping study on United Kingdom (UK) dietetic learners undertaking Practice Based Learning (PBL) hours internationally.

A project manager was commissioned by HEE to undertake the scoping project, working closely with the BDA and approaching Higher Education Institutions (HEIs)/Practice Educators in the UK and internationally, as well as other stakeholders, and produce a feasibility report [1]. This guidance is a companion document to the feasibility report intended to help support HEIs planning for implementation of international PBL.

Aims of the feasibility project:

- Scope the feasibility of international PBL provision to provide new innovative dietetic PBL and increase PBL capacity
- At the same time, scope the feasibility of international PBL for other Allied Health Professional (AHP) learners
- If appropriate, production of guidance document for implementation

Field work for the feasibility scoping was undertaken April to October 2021. HEls/Practice Educators in the UK and internationally, UK dietetic learners, Nutrition and Dietetic managers as well as other stakeholders, were spoken with to find out their views on the feasibility of international PBL. The Health Care Professions Council (HCPC), British Medical Association (BMA) and School of Medical Councils were contacted to learn from their experiences of medical students' electives. In total 40 people from the UK and internationally were communicated with for the feasibility report.

The overall view of those spoken with was that they believed that AHP international PBL **is feasible**. A number of challenges were consistently raised, in particular -

- work load capacity for arranging and monitoring international PBL
- cost of international PBL
- language and culture
- future fitness to practice in the UK

The most important consideration was that of capacity of PBL internationally and the need to ensure reciprocity between potential host countries and the UK.

From those spoken to the main potential for international PBL for dietitians and other AHPs would appear to be working on group type work within -

- research collaborations
- public health projects
- third sector and non-traditional type PBL (in for example care homes)

Possible types of PBL suggested included groups of 2-4 UK learners working on project/ research, potentially with a group of learners from the home country. This type of project/ research work also lends itself to virtual working which would not put a financial strain on the learners or their HEI.

At the time of writing the feasibility report, it was envisaged that with two/three HEIs looking to undertake PBL of groups of two/four learners this would give around eight to ten international PBL opportunities in the academic year 2022/23. Due to the uncertainty of travel in the COVID-19 era these could easily be virtual PBL of four to ten weeks.

The main purpose of this guidance document is to support UK HEIs exploring the idea of international PBL by discussing some questions which will need to be considered, including policies and procedures to ensure the smooth running of the international PBL and the learners' safety.

Below are a number of helpful links regarding medical students' elective placements. These may be helpful for planning purposes of AHP international PBL.

Your Final Year Elective - Planning and Approval UCL Medical School - UCL – University College London . Home page on University College London's (UCL) Medical School, giving advice to medical students on considerations for planning their own elective.

<u>Medical students and electives in resource-poor settings - Ethics toolkit for medical students -</u> <u>BMA</u>. British Medical Association's (BMA) page for medical students on ethic considerations on undertaking an elective in a resource-poor setting.

<u>Elective resources | Medical Schools Council (medschools.ac.uk)</u>. Medical School Council's resource page for UK undergraduate medical students planning an elective.

2. Country of choice for an international PBL

The first question to be answered by a UK HEI is which international countries to consider for developing partnership PBL. Nearly all the UK HEIs spoken to have existing links with other countries such as international campuses or links with visiting lecturers. It seems a reasonable approach to consider investigating developing an international PBL partnership where there are already links established with an international institution.



3. Practice Based Learning Type

Agree type and length of PBL

As explored in the companion document there are a number of options that international PBL could look like. It was highlighted in the feasibility scoping that most international countries would consider facilitating non-clinical PBL, such as -

- a research project
- a Public Health campaign
- developing a training package for Nurse Home staff
- project work with the third sector

Consideration should be given to whether the PBL would be at an individual or group level. Group PBL was seen as being more supportive, however there are definitely circumstances where an individual international PBL would be sought by learners. A further consideration is around whether this is a joint PBL with learners from the host international institution. This type of joint PBL was generally considered an ideal pilot of international PBL.

There were a range of opinions to the optimal length of international PBL. There emerged a consensus of a PBL length of 4 – 16 weeks. The most important consideration was that the length of an international PBL enabled the agreed Learning Outcomes (LO) to be met. While allowing sufficient time for settling into a new country and environment. There was an agreement that length of PBL might also be influenced by whether it was an in country or virtual PBL. Virtual international PBL (see below) gives the potential for a split PBL, for example 2 days per week over 12 weeks on a virtual international public health campaign combined with 3 days per week over 12 weeks of a traditional UK clinical PBL.

There was no particular consensus over whether PBL A, B or C were best suited to international PBL. Once again, the LO consideration may indicate which was best. There was however, strong agreement that for any learner who wished to subsequently practice in the UK NHS that they required to complete a suitable length of PBL hours in the NHS so that they had experience and knowledge of the workings of the NHS.



Practice Based Learning Type

The Health Care Professions Council's Standards of Education and Training

The HCPC was engaged with for the feasibility study and was supportive of international PBL hours for dietitians and other AHPs. Their main stipulation was that the Standard of Education and Training (SETs) were met by the PBL and this was the responsibility of the UK HEI to ensure this. A written overview of HCPC expectations was given during the feasibility work and is reproduced here as <u>Appendix A</u>.

Quality Assurance Agency for Higher Education Guidance

The Quality Assurance Agency for Higher Education (QAA) have a number of important documents around ensuring standards for practice-based learning as part of higher education, including international PBL. Most UK HEIs will be aware of these documents but links to them are given below for completeness.

QAA document links – <u>Work-based Learning (qaa.ac.uk)</u> <u>Contingency Planning for International Placements (qaa.ac.uk)</u> <u>COVID-19: Thematic Guidance - Work-based Learning (including placements/partnerships/</u> <u>apprenticeships/study abroad) (gaa.ac.uk)</u>

PBL contract between UK HEI and host international institution

As with any PBL, a formal contract requires to be agreed and signed between the UK HEI and the host international institution. The HEI's legal department will be involved in drawing up this document and give specific legal advice. As this is a legal agreement across international borders there needs to be early agreement on which country's laws apply in the contract and in resolving any legal disputes.

Learning Outcomes

An important part of the discussions with an international institution will be specifying and agreeing the Learning Outcomes for the PBL. The feasibility report gave a high-level overview of potential mapping with the BDA 2020 Curriculum [2] and this is replicated here as <u>Appendix B</u>.

Host country's legislation on learner practice

It is worth considering any pertinent regulations around learners' fitness to practice in a host country while undertaking PBL. This will vary between country to country but along with professional insurance for practice (see below) requires to be explored.

4. Virtual PBL

There were mixed opinions on the usefulness of international virtual PBL. However, there were examples during COVID-19 lockdowns of successful virtual PBL or AHP learners within the UK and internationally that showed that this type of PBL could be viable [3]. There are a number of considerations.

Time zones

Varying time zones across the world could be a barrier to some types of virtual international PBL. Project type PBL are more suitable for working across differing time zones.

Sharing confidential information

Policy and standard operation procedures (SOPs) would need to be in place should a virtual international PBL include the need to share service user and other confidential information. Data protection, and for European countries General Data Protection Regulations (GDPR), needs to be considered especially if transferring research data. Some institutions' internet and intranet security may not allow use of shared drives with certain other countries and this needs to be clarified.

Internet capability

A stable and consistent internet connection is important for any virtual meetings and PBL. Therefore, learners would need to be assured that they had a sufficient and strong internet connection from either their residence or their HEI base, and relevant IT equipment.



5. Travel

There are a number of considerations which need to be in place for learners undertaking international PBL, particularly if the PBL is in another country. This section is based on responses from learners spoken to for the feasibility study and from helpful information given by the Medical Schools Council and the British Medical Association.

Most of the learners in the feasibility study said they would appreciate a check list of the travel information and regulations from their UK HEI and/or the host institution. There seemed to be a consensus that there should be joint responsibility between the HEI and learner in ensuring all travel needs and regulations are met.

Home Office Advice

There are a number of significant issues around travel that require to have been considered or in place before a learner will be able to leave the UK. These should be checked prior to planning, during planning and again immediately before learners are due to travel to the host country. Foreign travel advice - GOV.UK (www.gov.uk) gives up-to-date information on

- visa and entry requirements
- safety and security issues including travel warnings
- COVID-19 travel rules including testing and need to demonstrate vaccination status
- other types of health vaccination requirements e.g. yellow fever.

Learner visas

A learner undertaking in-country PBL will need to ensure that any particular student/ learner visas are obtained in a timely manner. The need and requirement for these will vary from country to country. The host institution will usually be a good initial point for clarification on student/learner visa requirements.

Insurance

The type and extent of travel insurance required to be taken out by the learner to cover loss of property during travel and while in the host country needs to be explored. Health insurance will need to cover the costs of health care within the host country and health evacuation if this was necessary.

Thought should also be given to whether there are any further issues around insurance for learners practicing during PBL that are required by the host country. The host institution and/or the host country's Dietetic Association should be able to help with consideration on this topic.

6. Pastoral care/support

This issue was raised by a number of people during the feasibility project including learners, HEI UK supervisors and the HCPC. It is important all learners have a supportive network and contact while they are in a host country.

Supervision with UK HEI / host country

As part of the PBL agreement the level and type of supervision should be clearly stipulated and the balance of how that is divided between the UK HEI and the host countries' institution should be explicit.

Frequency of contact with UK tutor

Separate from the actual PBL supervision there should be regular contact with the UK tutor to 'touch base' on pastoral issues of living and working in a different country and different cultures. All the learners spoken to agreed that they would find this exceedingly helpful.

Emergency contact

As with the above the learners suggested that they would appreciate having details of an emergency contact with the UK HEI/tutor in the case of any unforeseen circumstances.



7. Culture

Language

Language was often discussed during the feasibility project and is a consideration when deciding on appropriate countries for international PBL. For countries where English is a first language such as Canada, New Zealand, Republic Ireland and Australia this will not necessarily be a significant consideration. For countries where English is not a first language this may not necessarily rule them out for hosting international PBL. For example, a learner who is an international learner in the UK may wish to undertake some or all of their PBL hours in their home country. There will be learners from whom English is their first language and are sufficiently fluent in other languages to be able to undertake PBL in other countries. Also, if the PBL is a research based environment then there may be the option for English to be used as the main working language.

Food and dietetic products

There were a number of discussions around the need for learners to have awareness sessions prior to starting an international PBL on the local foods and where applicable of dietetic products. This is best done prior to an PBL to help the learner become comfortable with dietary habits of different cultures. These awareness sessions could be delivered jointly between the UK HEI and the institution being visited.

Cultural Acceptance

It was suggested that it would be helpful if a session on acceptable terms, words and dress code was given to UK learners prior to the PBL being undertaken by the overseas host institution.



8. Funding

This was an important issue raised by many of the UK HEIs and UK learners. Most, but not all felt that costs of travel, accommodation and living expenses should not be met by the learners. The Medical Schools Council noted that for medical students' electives the model of funding varied by institution with some financially supporting elective placements while in others the learner met the full costs of their elective.

Any UK HEI exploring international PBL needs to make a decision on their expectations of who will pay for the travel, accommodation, etc. There is potential that the new Turing Scheme will be able to support some of these expenses. Below is some clarification given by the Turing Scheme.

'To take part in the Higher Education (HE)Turing Scheme Mobility, participants must be:

- registered at a UK or British Overseas Territories HE provider and enrolled in studies leading to a recognised degree or another recognised tertiary level qualification (up to and including the level of doctorate)
- recent HE graduates, who may participate in a traineeship and must carry out and complete their traineeship abroad within 12 months of graduating. Graduates do not need to be selected before they graduate'.

Helpful links –

Turing scheme to open up global study and work opportunities - GOV.UK (www.gov.uk) Higher education Funding | Funding Opportunities | Turing Scheme (turing-scheme.org.uk)

Payment to host institution

For most international PBL the host institution would expect a payment for undertaking the PBL hours. In discussions with HEE, they noted that they pay a small remuneration to host institutions in England for undertaking AHP PBL hours. HEE did not anticipate that they would pay a fee to an international host institution. Therefore, the source of funding to the host international institution would need to be clarified by the UK HEI.



9. Acknowledgements

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10. References

- 1. Stewart L. Feasibility Scope of International Practice-Based Learning Provision for Dietetic Pre-registration Learners: A Report for the British Dietetic Association and Health Education England. 2021.
- British Dietetic Association. A Curriculum Framework for the pre-registration education and training of dietitians. Revised edition 2020. Birmingham: 2020. <u>https://www.bda.uk.com/uploads/assets/939f176b-8999-44f4-8c30a725baa7df28/ BDACurriculum2020FINAL0505PRINT.pdf</u>
- Twogood R, Hares E, Wyatt M, et al. Rapid implementation and improvement of a virtual student placement model in response to the COVID-19 pandemic. *BMJ* Open Qual 2020;9. doi:10.1136/bmjoq-2020-001107

Appendix A - HCPC written notes

International practice-based learning as part of HCPC approved programmes

Would the HCPC consider international practice-based learning feasible?

Our Standards of education and training and processes do not preclude practicebased learning outside of the United Kingdom. In fact, some approved programmes already provide learners with this opportunity.

As approved education programmes retain ultimate responsibility for all aspects of their programme, they are responsible for any practice-based learning undertaken outside the United Kingdom. In doing so, it is very likely these programmes will meet some of the standards differently to ensure this practice-based learning provides an effective learning experience, keeps learners and service users safe and provides the necessary resources.

For example, the programme will need to:

- ensure their system for approving and monitoring the quality of practice-based learning remains thorough and effective (SET 5.3);
- ensure practice-based learning takes place in an environment which is safe and supportive for the learner and service user (SET 5.4);
- ensure the practice-based learning utilises appropriate teaching, learning and assessment methods to effectively deliver and measure the learning outcomes (SET 4.6 and 6.5); and
- ensure that appropriate support is available to meet the wellbeing and learning needs of the learner (SET 3.13).

This is not a definitive list of the standards which may be affected. Approved programmes considering this, should review any changes they may need to make to their policies / processes across the standards in order to be continue to offer safe and effective practice-based learning, albeit internationally.

Is the HCPC happy for potential international practice-based learning to be in any country or is there a list of preferred countries?

There is no restriction on where practice-based learning can occur as our standards are not prescriptive about how or where practice-based learning takes place. However, as outlined above, the approved programme is responsible for ensuring the standards are met while this occurs. Therefore the programme is responsible for determining whether practice-based learning, in a particular country, is safe and effective.

Would supervision of the international practice-based learning need to be undertaken by a UK HCPC registered dietitian?

The standards state:

- There must be an adequate number of appropriately qualified and experienced staff involved in practice-based learning (SET 5.5); and
- Practice educators must have relevant knowledge, skills and experience to support safe and effective learning and, unless other arrangements are appropriate, must be to the relevant part of the Register (SET 5.6).

SET 5.6 recognises it is sometimes not possible for learners to be supervised by HCPC registrants. Other individuals may have the knowledge, skills and experience which means they are well suited to support and develop learners in a particular area.

Approved programmes would need to explain their decision and how they make sure the practice educators are appropriate to carry out the role, including how their experience, qualifications and training are relevant to the practice-based learning they are involved in. The programme would also need to demonstrate how the practice educator is appropriately informed and trained about the programme (SET 5.7) and supported to undertake the role (SET 5.8).

Appendix A - HCPC written notes

Would there be any consideration from the HCPC on which placement would be appropriate i.e. for dietetics A, B or C placements?

As our standards are flexible about how and where practice-based learning takes place, there is no restriction about the stage of the programme this could apply to. However, we would recommend programmes carefully consider the learning outcomes and, Standards of proficiency (SOPs) to be achieved during the practice- based learning, to ensure it is an appropriate learning experience at that particular time of the programme.

Would there be any consideration from the HCPC on how many placement hours could be undertaken internationally?

Our standards require programmes to consider, and have clear reasons for, the structure, duration and range of practice-based learning to support the achievement of the learning outcomes and SOPs (SET 5.2). However, we do not set requirements about the structure, length or range of practice-based learning either in the United Kingdom or internationally.

The British Dietetic Association may provide guidance about this.

Is there any particular person within the HCPC an approved programme should contact if they wished to take this forward?

If an approved education programme wanted to introduce international practice- based learning, they should contact the <u>education@hcpc-uk.org</u> inbox. One of the executive members would then be in touch to discuss this further.



Appendix B - Possible learning outcomes of international project/research PBL mapped to the <u>BDA 2020 - Curriculum Framework[1]</u>

Domains	Sub-domains	Learning outcomes examples	
Dietetic knowledge	(Page 21-32 of BDA 2020 - Curriculum Framework)		
	K1 Dietetics	a, b, k	
	K2 Nutrition	d, j	
	K3 Food	a, c, e, f	
	K4 Biomedical	q	
	K5 Social, education and psychological theory	c, g	
	K6 Public health	a, b, c, d, e, f, g, h, I, j, k, l, m, n, o, p, q	
	K7 Wider systems	a, b, c, d, e, f, g	
	K8 Research and information	hedfabiiklnonret	
	b, c, d, f, g, h, i, j, k, l, n, o, p, r, s, t	D, C, U, I, Y, II, I, J, K, I, II, O, P, I, S, L	
Dietetic skills	(Page 33-44 of BDA 2020 - Curriculum Framework)		
	S1 Communication and education	a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p	
	S2 Applying nutrition and dietetic process	c, e, f, j, k, m, n, o, p, q, s, w, x, y, z, aa, bb, cc, ff, jj, ll, mm, nn,	
	S4 Nutritional analysis	a, c, d	
	S5 Research	a, b, c, d, e, f, g, h, k, l, m	
Dietetic values and behaviours	(Page 45-53 of BDA 2020 - Curriculum Framework)		
	V1 Professionalism	a, b, c, d, e, f, g, h, i, j, k, m, n, o, p, q, r, s, t, u, v, w, x	
	V2 Evidence and behaviour	b, c, d, e	
	V3 Safe and ethical practice	a, c, d, e, f, g, h,	
	V4 Quality improvement	a, b, d, e, f, g, i, j, k, l, m, n, o, p, q, r	
	V5 Teamworking and leadership	a, b, c, d, e, f, g, h, i	



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