The MSc Person-centred Practice Framework Curriculum: Philosophy and Model

Dr Savina Tropea (member of the STTI QMU Edinburgh Honor Society)
Lecturer, Division of Nursing, School of Health Sciences
Background

Curriculum development literature - some key emerging issues:

• *Consensus* on the values and beliefs about the learning process (Keating 2010)
• What is the purpose of health and social care education? (Rolfe 2012)
• What knowledge is most worth? What is the role of curriculum in changing and transforming the present? (Pinar 2012)
• How do we ensure that the philosophy is translated into the curriculum and kept alive?
Aims

To focus on:

➢ The philosophy underpinning the new MSc Person-centred Practice Framework curriculum
➢ The curriculum model: the Hourglass
➢ The process of co-creation of the philosophy and of the model through critical dialogues
➢ The process of co-creation of the visual representations utilised to capture key concepts and principles
I am very grateful to Dr Cathy Bulley for the original work she undertook on this graph which we have discussed together. This has been adapted and modified to capture some of the work undertaken in the Division.
A spiralling process...

**PG**
- April 2014
- May
- June
- July
- August
- September

**UG**
- May 2017
- June
- July
- August
- September

**Dialogue I:** Our vision for the philosophy that will inspire PG education in 2015-16

**Dialogue II:** The philosophy underpinning our teaching and learning

**Concepts and Principles identification and formulation:** The Ripple

**Translation of concepts and Advanced Practice Dimensions and Curriculum**
The underpinning values

- Respect for the ‘personhood’ of others (‘human valuing’)
- Mutual respect and understanding
- Engagement and collaboration
- Self and collective right to self-determination
- Equity and equality
The development of the ripple (first draft): core concepts and principles

- Health and Well-being
- Supportive Environment
- Practice Potential and Development
- Human Potential and Development
- Healthful relations
- Person-centredness
- Personhood (P-P-P/S-C-S)
The dynamic nature of the ripple

The ripple intends to capture the dynamic nature of the constantly evolving process of developing a shared understanding of person-centred practice in a collaborative way.
The development of the ripple (second draft)

The person-centred practice and teaching and learning ripple

Health and Well-being
- Health and well-being are not an absolute or fixed state; they are related to the fulfillment of the conditions which allow human potential to develop at personal, community, and global level. There are interconnections between the physical, psychological, social and spiritual as these are part of a whole. Health and well-being are holistic in nature, multidimensional, and transdisciplinary and they need an INTEGRATED APPROACH and PARTNERSHIP to be achieved.

Supportive Environment
- Supportive environment: promotes personal awareness and critical understanding of the health and social care context to overcome barriers and to bring about change in practice. ORGANIZATIONAL, CULTURAL, and CONTEXTUAL aspects are part of a continuous learning. By promoting environments facilitating shared power and decision making, the creation of COLLABORATIVE SPACES and the building of NETWORKS is essential.

Practice Potential and Development
- Practice has the potential for improvement through a continuous process by employing RESEARCH EVIDENCE, generating evidence for practice, and ETHICAL DECISION MAKING to ensure the needs of the PPP are met and by supporting staff's and social care teams to develop the knowledge and skills to transform the CULTURE and CONTEXT of CARE.

Human Potential and Development
- Every individual has hidden potential and potentialities for growth and development. The satisfaction/fulfillment of a set of conditions is required for the development of human potential, personhood, and health and well-being.

Healthful relations
- Healthful relations are at the centre of human, social, environmental interactions by focusing on the quality of relationships and of social environment, in order to enhance the person to fulfill their potential and to be healthy. These include relationships between professionals, people and their significant others, and communities (COLLABORATIVE and INTERPROFESSIONAL PRACTICE, PARTNERSHIP).

Person-centredness
- Person-centredness: placing people's needs, values, and beliefs, and expectations (placing HUMANITY) at the centre of human interactions, provision of health and social care, re-organisation of health services.

Personhood (P-P-P/S-C-S)
- Being a person means being in relationship with others and being located in the social world. People have an innate form of humanity and capacity to make autonomous decisions. Acknowledgment and respect for personhood is at the centre of health and social care practice, and of teaching and learning.

STUDENT AT THE CENTRE - TEACHER AS FACILITATOR
- LEARNING IS RECIPROCAL, MUTUAL, AND CURRICULUM CO-CREATED
- EDUCATION HAS THE POTENTIAL FOR TRANSFORMATION OF SELF INDIVIDUALS
- GENERATING NEW UNDERSTANDING OF CONTEXT & CULTURE
- CREATING COLLABORATIVE SPACES & COMMUNITY OF LEARNERS
- INTERPROFESSIONAL EDUCATION & INTEGRATED APPROACHES TO
- HEALTH & WELL-BEING
The person-centred practice and teaching and learning ripple
What does it *mean* to be a person?

Adapted from McCormack and McCance (2010): *Four dimensions of being*
Co-creating the curriculum model

‘The Skeleton’

‘The draft model’

Thanks to Kristina Mountain for this drawing.
The Hour Glass Curriculum

Practice development and improvement / Health and Well-Being

Collaborative Learning

Person-centred Evidence Based Practice

Collaborative Practice

Learning in and from practice

Grounded in Practice Praxis

Reflection

Stakeholders Involvement

Community of Learners

Research and Scholarship

Community of Practice
## Curriculum implementation: an example

### The centrality of the learner: a blend of humanistic and constructivist theory

<table>
<thead>
<tr>
<th>Teaching and Learning activities</th>
<th>Humanistic Theories</th>
<th>Constructivist theories</th>
<th>Underpinning philosophy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learners exploration of questions around their</td>
<td>Learner/person-centred</td>
<td>Learner/person-centred</td>
<td>Person as a whole.</td>
</tr>
<tr>
<td>own personhood, the personhood of others,</td>
<td>Self assessment and evaluation</td>
<td>Learner actively constructing knowledge and understanding starting from previous beliefs and experiences</td>
<td>Relational notion of the person.</td>
</tr>
<tr>
<td></td>
<td>Person as a whole.</td>
<td>Personhood across the lifespan</td>
<td></td>
</tr>
</tbody>
</table>
Relevance and conclusions

Ripple effect?  Creating ripples of change

Creative Commons ‘ripple’ by peace6x licensed under CC BY-SA 2.0

Thank you to Kristina Mountain for this picture
Relevance and conclusions

- Impetus to revise BSc (Hons) curriculum
- Development of two new MSc Person-centred Practice pathways
- Further development of conceptual basis and links to practice
- Ongoing refinement of underpinning philosophy
References


Acknowledgements

Thanks to all my colleagues who have contributed to and supported, at different stages, this work: David Banks, Margaret Colquhoun, Jan Dewing, Caroline Dickson, Jan Gill, Erna Haraldsdottir, Lindesay Irvine, Bill Lawson, Kath MacDonald, Dolly McCann, Kristina Mountain, Gillian Morris and Margaret Smith.

Particular thanks to:
Prof. Brendan McCormack for triggering this work and for his contribution to scholarship and research on person-centred care and practice.

Kristina Mountain for her drawing, pictures and for her support and contribution during the process.

Thanks to Dr Cathy Bulley for our discussions on the TPGF.