

COST, VALUE AND QUALITY IN PROFESSIONAL LEARNING: PROMOTING ECONOMIC LITERACY IN MEDICAL AND TEACHER EDUCATION

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A report from one of the BERA Research Commissions

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Executive Summary

How are we to understand the cost, value and quality of university-based professional learning and development? This BERA Research Commission has examined the role of universities in professional development, focusing especially on teacher education and medical education. What can the medical profession and the teaching profession – and the two sets of educators who train them – learn from each other? What evidence should be used to evaluate the cost of professional learning in universities, as well as the benefits that come from this kind of close engagement between academics and practitioners?

The Research Commission's aim was to test the assumption that teacher educators and medical educators can learn from each other, and that both communities can benefit from learning from economists, in developing more sophisticated modelling and producing better evidence for the cost, quality and value of university-based professional development. Through seminars, presentations at symposia and conferences and ongoing activities, the Research Commission has scoped out a future research agenda in this area, and brought together a Community of Inquiry to take it forward.

The BERA Research Commissions

The British Educational Research Association (BERA) is a membership association and learned society that aims to inform educational policy and practice, by promoting high-quality educational research.

BERA's Research Commissions are a major initiative, and represent a new departure for the organisation. The aim of the Research Commissions is to identify and address issues that are of current importance for the study and practice of education. Each Research Commission shows how research can respond to the challenges and opportunities created by the changing nature of education, across the four UK jurisdictions.

The Research Commissions provide an evidence base in important areas of educational research, which will help to set BERA's strategic direction, and influence how it engages with other learned societies, with the Research Councils, with the UK Government and with the education community more broadly.

The subjects chosen vary widely, but each Research Commission aimed to develop a community of researchers and practitioners, that will have a lasting impact. BERA intends to support further Research Commissions in the future.

The final reports of the Commissions reflect the views of their authors. While they do not necessarily aim to represent the position of all BERA members or indeed of BERA itself, they do identify key issues for debate, and develop arguments on the basis of a wide range of excellent research evidence which is documented in the full reports. BERA is grateful for the hard work and efforts of all those involved in the Commissions' work.

How are we to understand the cost, value and quality of university-based professional learning and development?

Like medical education, teacher education has a long history of taking place within universities, and in many cases it continues to have both a university-based and a practice-based element.

What can the medical profession and the teaching profession – and the two sets of educators who train them – learn from each other? And what evidence should be used to evaluate the cost of professional learning in universities, as well as the benefits that come from this kind of close engagement between academics and practitioners?

This BERA Research Commission has examined the role of universities in professional development, focusing especially on teacher education and medical education. This includes both the initial training of teachers and medics and their continuing professional development. There has been a recent trend within teacher education of looking

at medical models, while a statement from the 2014 REF panel suggested that there are opportunities for learning across the professions, with medical educators and teacher educators in particular having much to gain from coming together, working outside of their silos and understanding one another.

There has also been a wider tendency for universities to think about their role in professional development: there has been a questioning of the efficacy and cost of professional education located in a university context. This debate is taking place across the professions, in relation to teacher education, medical education and legal education. Where is professional learning best located: what is the role of the university in this respect, and what are the costs and benefits when professional learning is located in universities?

Universities need greater clarity in calculating the costs of professional development, as well as better criteria for evaluating the quality and benefits of what they do. There are changes happening within universities in terms of their understanding of their missions. Medical and teacher education programmes are costly to run, and there is also a debate around whether the activities that professional development involves distract academics from the kinds of research that count towards the REF and grant funding. The research-intensive Russell Group universities in particular have been questioning the nature of their engagement with professional development, what it costs them and what benefits they gain from it. Yet this goes beyond a simple financial calculation: universities may be better able to demonstrate impact and engagement through their professional development work.

Another overarching theme of the Research Commission relates to economic literacy. There has been a lack of the sophisticated economic tools of analysis that are needed to understand the quality, value and cost of professional development in universities: the involvement of economists with the Research Commission has helped to introduce better techniques of

modelling, and discussions of cost that lead to a more sophisticated debate. The input of colleagues from BMJ Learning was particularly helpful in this respect, as they have been carrying out a great deal of recent work around costing models, looking at cost-benefit analysis and opportunity costs for example.

The Research Commission's aim was to test the assumption that teacher educators and medical educators can learn from each other, and that both communities can benefit from learning from economists. Research work looking at professional learning and the relationships between professions is ongoing, but a consistent effort to focus on the three factors of cost, quality and value is new.

The Work of the Research Commission

The first phase of the Research Commission's work involved seminars at the University of Exeter, which were organised loosely along the lines of Parliamentary select committees, with expert witnesses being called. Participants included members of the BERA Practitioner Research Special Interest Group, the Association for the Study of Medical Education (ASME), BMJ Learning, and the Universities' Council for the Education of Teachers. The aim was to foster a Community of Inquiry, with invited participants including those who could give expert input on the nature of evidence in this area: the kinds of evidence base that can be used to justify university-based professional learning in education, and how that evidence might address issues of cost, quality and value.

Contributions came from the four jurisdictions of the UK to ensure that the different teacher education contexts were examined. There are very different takes on the position of the university in the four jurisdictions, with each responding to global pressures in different ways. These pressures include a wider debate concerning neo-liberal models of education and the questioning of the traditional hierarchies and traditional authority that the professions have been seen as representing. There has been increasing scepticism in relation to experts and expertise, and a view since the 1980s that the professions are merely interest groups protecting their own interests, rather than upholding professional values or an ethos. The opinion, in some quarters, has been that greater accountability is needed in the professions, as well as greater competition through a free market, to counter the kinds of cartel that professionals are sometimes seen as operating.

Professionals in turn have been arguing that they cannot be subject to micro-management or political interference: that it is important that lawyers, doctors and teachers are independent. They argue that accountability should be safeguarded by professional bodies and by a professional ethos, rather than through managerial structures and standards. The tension between authority, accountability and responsibility is not easy to resolve, and the professions have certainly been perceived as being elitist in the past, in terms of excluding women or members of ethnic minorities for example.

The Research Commission seminars involved expert witnesses (including Dr Kieran Walsh, Clinical Director, BMJ Learning and Quality, Catherine Serjeant, Assistant College Manager, Finance, in the Medical School at the University of Exeter, and Professor Alison Bullock, Director of the Cardiff Unit for Research and Evaluation in Medical and Dental Education) being interrogated by equally expert audiences, who were from teaching, medical education and economic backgrounds. This questioning helped to tease out the key themes and issues that are fuelling ongoing debate in this area, which is continuing beyond the term of the BERA Research Commission.

Emerging Findings

The work of the Commission has helped to scope out a future research agenda around the cost, value and quality of university-based professional learning and development.

The main finding that emerged from the Research Commission was that there are sufficient grounds for dialogue that would be productive both to medical educators and teacher educators.

The Research Commission hypothesised that if these two constituencies were brought together, the commonalities would ensure a useful dialogue. Similarly, the Research Commission demonstrated the proof of concept that teacher and medical educators can benefit from engaging more actively with economists, and that there are sufficient grounds for thinking that this is a useful exercise. Continuing collaborative research shows that the Research Commission has found a constituency of people for whom this is an important area that they will continue to work on beyond the initial funding from BERA.

Beyond this overarching finding, the Research Commission seminars have helped to map out areas of potential research. The accompanying literature search has shown how little work has so far been carried out in this field: for example in the development of criteria for evaluating the social impact of professional learning, who benefits from it and how, in both the long and short term, and how that relates to professional learning. Through the Research Commission's seminars, presentations at symposia and conferences and subsequent activity, a future research agenda has been scoped out by some of the key people working in this area. The Research Commission's Community of Inquiry has identified a clear list of subjects that need further attention: the invitation remains open for researchers and practitioners to engage in this activity.

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Points for a Future Agenda

In terms of the cost, value and quality of university-based professional learning and development, the following subjects have been identified as being particularly important:

- The metrics of cost that are currently used in universities should be reviewed. Staff workload and workload hours is the metric that is commonly used as a measure of cost in many universities, but there are reasons to be sceptical as to what it means. There are questions around the metrics that universities currently employ: what they are measuring, and whether they are capable of measuring cost, quality and value. Do we need to look at the metrics that we have, to see if they could be used in a smarter way? Do we need new metrics, and if so what might they be? Without being able to model a realistic alternative to the way that university finance departments currently operate, those departments are not likely to be persuaded to do things differently. The economists who were called as expert witnesses introduced a range of tools to improve understanding of the cost, value and quality of university-based professional education, and help improve decision-making.
- It is important to evaluate different routes into training (such as fast-track teacher training programmes) and their cost, quality and value, to provide an evidence base for political decision-making. The involvement of economists has been valuable in this area, helping to differentiate between the short, medium and long term. What kinds of outcome are sought from professional development, and in what timescale? Teacher educators and medical educators face a challenge, in that while professional learning involves up-front training, the learning has to extend beyond that. It may be a long time before it is apparent what the consequences of a given approach might be, making it difficult to see which forms of professional learning and professional formation lead to long-term and sustainable retention.
- In relation both to teaching and medical education, it is important to ask not just what it costs up-front, but what the long-term impact is. For example, any evaluation of the initial learning cannot take into account whether students stay in the profession, or how many complaints or cases of malpractice they are subsequently responsible for. An educational approach that seems to represent good value up-front can produce further costs down the line. Again, there is scope here to bring economic modelling to a genuine problem: there are different training routes available, and so what is the evidence base for comparing one against another? There are short-term, medium-term and long-term benefits and costs, but there is also the question of who pays. Whatever the model, someone is paying for training and development, whether it be the State through the taxpayer, the professionals themselves (since this is how they gain their professional qualifications), or the professions (in terms of institutions), because that is how they get

their workforce.

- We need a better understanding of how people make decisions about their training: why they might choose a school-based rather than university-based programme, for example, or how doctors choose what subject to specialise in. Do we need different career trajectories for different people? In the past training and development was very much 'one size fits all', but education may need to be more responsive, with greater flexibility. Having a professional 'closed shop' can deter people who are not traditional entrants into the professions. The Research Commission found that there is a lack of evidence when it comes to students' reasons for making these decisions.
- We have an imperfect understanding of the nature of professional learning itself. Debating the different ways of supporting professional learning begs the question 'what is professional learning?' What does it require? Are there elements that are the same, within and between professions? Are there individual issues around learning: are there different ways of learning, for example, that suit different people? The different economic models of professional development will also have different implications for the instructional models that sit within them. What can be learned in the academy, or in the hospital or school? What can be gained through distance learning? Can students learn by being mentored, or by sitting in a lecture theatre, or by having an apprenticeship or an internship? Professional learning probably requires several of these elements in different proportions at different times, but there is a lack of evidence for the way that they work.
- Many early-career doctors and teachers are lost in the crucial years after their transition to practice. It is important to understand when and why this happens, and whether they leave the profession temporarily or permanently. Again this is very much a cost/ value/ quality question: to what extent, whatever their initial professional learning experience has been, have they been prepared for the profession itself? Whose responsibility is it to continue to support teachers and doctors through their professional lives?
- More work is needed on a number of modelling tools that have been put forward by economists, to help evaluate the cost, quality and value of professional development. These tools include outcome measures and proxy measures, such as choice-based analysis. Many of the members of university finance departments who took part in the Research Commission were very open to the idea of more sophisticated economic modelling, based on something more than narrow metrics of cost.
- Finally, 'entrustability' – the willingness of people to put their trust in a professional – came through strongly as a key theme in the Research Commission, as an important

goal of professional development. But can entrustability really be taught, and can it be measured? One of the biggest challenges for professional educators, in both teaching and medicine, is ensuring that their students are fit to practice: that they can make wise judgments in an uncertain and unpredictable world. What quality is this? Whatever the model, and whatever form professional learning takes, there is a struggle to measure this intangible fitness to practice. Are there particular forms of training that might emphasise it more than others, and is it the case that the more instrumental and cost-conscious the training, the less it deals with this aspect?

Recommendations

This Research Commission has demonstrated that it is possible to bring medical and teacher educators together. Provided that a forum is found (this Research Commission's Community of Inquiry was based very much on a pragmatic model of democratic engagement), significant progress can be made.

The Research Commission's principal recommendation to BERA is that it should facilitate further inter-disciplinary dialogue; that it should provide the means whereby key educational problems can be addressed by bringing together members of different professions – and not just teaching educators and medical educators.

Future and Next Steps

Much of the work of the Research Commission is ongoing, through the Centre for Research in Professional Learning. A close partnership between BERA and ASME, the two main research associations for the two constituencies of teacher educators and medical educators, now exists through personal contacts and through the Research Commission, but this could be made more formal. Other follow-on work includes the development of a toolkit for decision-making in professional education.

Finally, the Community of Inquiry will continue to look for ways of involving economists in its work, possibly through the Academy of Social Sciences or the Economic and Social Research Council.

With regular activities still taking place, the Community of Inquiry established by the Research Commission is continuing to work together and share ideas, and continuing to build partnerships.

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