

# A partnership approach to learning about accountability

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## Abstract

Clinicians and healthcare providers are frequently reminded that they are 'accountable' practitioners – but what is the definition of accountability, and how does it apply in a practical and legal context? To clarify these issues, the University of Nottingham School of Nursing has formed a partnership with Browne Jacobson Solicitors. Together they have developed a 7-stage training programme for nursing students which covers the key aspects of accountability, including ethical concepts, the law of negligence, and scenario-based training on being called as a witness in an investigation. This article introduces the implications of accountability and describes the structure and syllabus of the programme, including participants' feedback on the benefits of the experience.

**Key words:** Accountable practice ■ Training ■ Specialist healthcare law

'Accountability' is a fundamental component of healthcare practice. Clinicians and healthcare providers are reminded that they are accountable or autonomous accountable practitioners in policy documents and codes of practice (NMC 2008). However, despite the term being in daily use, the definition of accountability is complex and difficult, as is well understood by those responsible for facilitating learning in this area, helping students and clinicians understand the frameworks by which practitioners are held to account, and by lawyers who defend allegations made against healthcare staff.

This paper describes the development of an initiative to enable 400 pre-registration nursing students to develop an understanding of accountable practice. A similar learning experience has also been developed to promote a critical understanding of accountable practice with experienced nurses and other health professionals undertaking the MSc in Advanced Clinical Practice.

A unique partnership has been developed between the University of Nottingham School of Nursing and Browne Jacobson Solicitors, who are specialists in the health and social care sectors, including acting for the NHS Litigation Authority to defend clinical negligence claims. The partnership stems from a joint interest in law and ethics in health and social care environments and the development of LEIGHs (the Law and Ethics Interest Group in Health and Social care – [www.nottingham.ac.uk/leighs](http://www.nottingham.ac.uk/leighs) – developed initially by staff in the School of Nursing and now hosted by Browne Jacobson at their offices in Nottingham City centre). The interest group has brought together in excess of 200 academic staff and clinicians from all professional backgrounds and disciplines for regular seminars and discussions on subjects relevant to legal and ethical issues in contemporary health and social care practice.

Defining what we mean by the term accountability was described by Tingle (1995) as an 'almost tautological exercise'. Nevertheless, the difficulty inherent in defining a concept which is dynamic and context driven does not negate the necessity for practitioners to develop an understanding of accountable healthcare practice. Indeed it is the complexity of the issue which makes education in this area a necessity, while challenging both the learner and facilitator to develop an understanding of accountability which promotes best practice, influences change and empowers both practitioner and patient.

## Accountability

Batey and Lewis (1982) defined accountability as the 'fulfilment of a formal obligation', while the Nursing and Midwifery Council (NMC 2008) inform nurses that they are 'personally accountable for your actions and omissions in your practice and must always be able to justify your decisions'. While there has been much discussion as to whether accountability and responsibility are one and the same thing, it is evident that accountable practitioners are able to utilise evidence in providing efficient and effective healthcare (McSherry and Pierce 2002) which meets the needs of patients, service users and their carers. The practitioner is accountable ethically, professionally and legally for their acts and omissions, being accountable to their employer, their patient, the regulatory body, society and to themselves (Dimond 2008). The challenge is to enable the learner to develop an understanding of the frameworks which hold them to account in order that they may practice in confidence within the sphere of their competence and in the interests of their patients and society.

**Learning about accountability**

A problem- or enquiry-based learning approach has been adopted. This is defined by Kahn and O'Rourke (2005) as an umbrella term to describe approaches to learning that are based on the principle of enquiry. Learners are required to work with a facilitator on a trigger or problem provided for them. Students are viewed as active participants in learning and are encouraged to draw upon their own previous knowledge and experience before identifying what evidence they need to acquire in order to critically analyse the scenario and formulate their response as a group. This approach enables learners to follow their own

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line of enquiry and encourages the development of their own strategies to meet the learning needs they have identified.

Learning is centred on an event that has occurred in the recent past. The student group is broken down into groups of 10–12 students; each group has a facilitator with responsibility to help to structure the learning experience for the students. The trigger scenario is provided by Browne Jacobson solicitors and is a suitably anonymised account of the care received by a patient.

Those of us who have taught in the past will recognise that the problem with scenarios is often the fact that by their very nature they are not real but representations of real events, a reality that learners are only too keen to point out. By using an event that is authentic we not only escape this criticism, but are able to provide a learning experience relevant to practice and from which learning from past events can take place. Browne Jacobson have also been able to provide us with module resources which would otherwise not be available to us, including a letter of complaint related to the scenario and a subsequent letter of claim made against the Trust, each of which is introduced by the facilitator as an authentic learning resource that allows the learner to view the incident from the different perspectives of the people involved. This encourages critical analysis and debate by the students, drawing on ethical, legal and professional concepts of accountability.

### Structure of the learning experience

Students meet weekly with their facilitated groups which contain no more than 12 students over a seven week period. Each student is encouraged to maintain a learning diary which documents the work of the group, the contribution made by the student and the learning outcomes they feel they have achieved. The diary sheets are submitted with the assignment, which is itself a reflection on the student's learning about accountability and focussed on a theme arising from the group's discussions.

Session 1 starts the course with a taught introductory lecture to the whole cohort. The lecture revises the spheres of accountability, ethical concepts and the law of negligence, etc. At this introductory session the students will also receive a letter from a fictitious Trust's Legal Services Department, which will tell the student that an event that occurred while they were on placement is now being investigated and that they may need to be interviewed.

The focus of Session 2 is accountability as it applies to clinical 'standards', including those set out by:

- Local and National Policies
- Governance, etc
- Standards agencies such as NICE, the role of the NHS Litigation Authority, the CQC, the National Patient Safety Agency, NSFs, etc.

Session 3 concerns the nature of the inquiry into the untoward event. Students are encouraged to write a statement as if they were a witness to the event. Their work is then discussed in the light of guidelines about statement writing prepared by the solicitors at Browne Jacobson.

In Session 4 students are encouraged to look at the NHS complaints procedure, and to analyse the letter of complaint from the perspectives of the family, the hospital, the nurse involved, NMC, etc. The students are encouraged to reflect on any inconsistency between these different perspectives, and to

consider which of the issues raised might be most important to each party involved, and why.

Session 5 moves the focus onto the legal action. The letter of claim details the formal allegations made, providing the learners with an insight into how the legal profession perceives the events and providing further opportunity to reflect upon the issue of accountable practice.

Sessions 6 and 7 focus on consolidating the students' learning. The students are asked to divide into two groups; one group will focus on the perspective of the family and patient and the allegations being pursued; the other group will work from the perspective of the service provider and the staff involved in the incident, with a view to preparing a defence to the allegations made in the letter of claim. The simulated court case enables students to articulate their perspective utilising the evidence they have acquired about the legal, ethical and professional requirements of accountable health and social care practice.

### Evaluation

Students evaluate the module firstly within their group and then anonymously using the University's Student Evaluation of Module (SEM) forms. The evaluations to date are very positive. When asked what they liked about the module, a strong theme emerged relating to the value students place on learning from real life events and the importance of being able to relate learning directly to clinical practice. Similarly, when asked 'what have you learned about accountability?', students felt the module had strengthened their knowledge about accountable practice, record keeping, care planning, problem solving and the importance of competence and self awareness. Inevitably perhaps, some students would have preferred a more structured learning experience facilitated by lectures, while others appreciated the nature of the enquiry approach and noted that they themselves needed to invest more in the enquiry process.

### Conclusion

The module is an innovative development in facilitating learning among healthcare students that could not have been achieved without the professional expertise, advice and resources of our partners at Browne Jacobson solicitors. More recently we have adapted the module for use with learners undertaking the MSc in Advanced Clinical Practice. Students on this course have been able to spend time at Browne Jacobson's offices and have appreciated the opportunity to talk with lawyers about clinical standards, governance and professional accountability. We hope to develop the interprofessional focus of the module to enable nurses, and other health and social care professionals to learn together about what it is to be an accountable practitioner, and how accountability can be used to promote service improvement, patient satisfaction and effective clinical outcomes. BJN

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