

Enhancing Social Work Interprofessional Learning Through Across University and Industry Collaboration: Early Steps in the Advanced Health Directives Project

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ABSTRACT

There is ongoing interest in strategies for enhancing the reciprocal benefit derived from social work placements by students, host agencies, and universities. There is also recognition that interprofessional learning is an important aspect of social work education, and that field education placements have a role to play in this learning. This article reports on an innovation in community-engaged learning undertaken between a major public hospital and a university, where a team of social work and law students contributed to a focused inquiry into a socio-legal practice challenge faced by the hospital, namely the use of Advanced Health Directives (AHDs).

Various collaborative processes involved in the early phase of the AHD project are reflected on by participants, with particular attention paid to the university–industry collaboration and interprofessional, student-learning aspects of the project. A preliminary evaluation of the process of establishing the AHD project supports the value of taking a systematic approach to university–industry engagement where interprofessional collaboration occurs vertically and horizontally within and across university and placement hosting agencies.

Keywords: *Interprofessional learning; Social work placement; Field education; University–industry partnerships; Collaboration*

INTRODUCTION

The social science literature reveals a steadily growing interest in the development of strategic partnerships and models which promote effective collaboration across the university–agency divide. A range of overlapping literature has developed around service learning, university–community (or industry) partnership, and various forms of university–industry research collaboration.

Within the social work literature there has been a similar range of interests expressed in partnerships between social work education providers and agencies (Price et al., 2013), academic–practice research partnerships (Joubert & Epstein, 2005), networked practitioner research and mentoring (Fouché & Lunt, 2010; Lunt et al., 2012), and the benefits of interprofessional learning and practice (Ivanitskaya, Clark, Montgomery, & Primeau, 2002). Collaborations between health-care organizations and tertiary education institutions have been a specific focus of such interests (Brush, Baiardi, & Lapidés, 2011).

Even so, these collaborations must be considered within the broader context in which social work is undertaken. Social work is currently experiencing significant challenges in Queensland (and elsewhere) under the push for outcomes and cost efficiencies within a neo-liberal conception of human need and intervention. Rather than being a self-evident “good” it can be argued there is pressure on social work field education to be structured so as to simultaneously benefit students, the host agency and their clients, as well as meet university strategic goals.

Meanwhile interprofessional collaboration is seen as an important factor for increasing the effectiveness of health services (D’Amour, Ferrada-Videla, Rodriguez, & Beaulieu, 2005) supported by a range of studies (Biegel et al., 2010; Murray, Macintyre, & Teel, 2011). This has led to a growing interest for incorporating strategies for building interprofessional skills into social work courses (Pecukonis et al., 2013; Pockett, 2010).

This article describes and reflects on the various processes involved in developing and undertaking the Advanced Health Directives (AHD) project which responds to the above dynamics. Drawing on the reflections of participating staff and students, particular attention is paid to describing an emerging multi-faceted approach for university–industry collaboration to support interprofessional student learning,

Enhancing university and industry collaboration

There are both strategic and pedagogical reasons for universities to enhance their engagement with industry. At Queensland University of Technology (QUT), graduate capabilities have been specified for team work, interdisciplinary capacities and the need to have “real world” understandings and employability. Work-integrated learning (WIL) is seen as a critical mechanism for the achievement of these graduate capabilities (see www.qut.edu.au).

Effective collaboration between universities and industry has been typified by deliberate planning and joint decision-making, realistic aims and objectives, clearly defined roles, responsibilities and lines of accountability (Atkinson, Wilkin, Stott, & Kinder, 2001; Cameron & Lart, 2003). Strong leadership, support and commitment by senior and frontline staff, and the need to link projects into other planning and decision-making processes are likewise emphasized throughout the literature. Reciprocity, characterised by open communication and the equalization of power imbalances, has been identified as important for developing sustainable partnerships (Fouché & Lunt, 2010; Sloper, 2004). An absence of these characteristics constitutes a barrier to effective collaborative partnerships (Sloper, 2004), while interaction through face-to-face communication and the sharing of ideas and information have been identified as key tactics in overcoming these barriers (Cox, 2000).

The implementation of strategic university–agency alliances can present challenges to existing professional cultures and paradigms within universities (Pockett, 2010). While health and social research partnerships can allow the critical questions identified by service organisations to more fully be explored, there are challenges in terms of the time and commitment required by both organisations and universities (Sadler et al., 2012). There are also inherent questions about the nature of the relationship between universities and agencies. Amey, Brown, and Sandmann (2002) argue that universities need to “overcome deep-seated paradigm conflicts ... move away from the expert model and allow their own disciplinary perspectives to blend together with others, rather than to dominate” (p. 21). Willingness to bridge different knowledge paradigms has been argued as necessary to allow truly collaborative and sustainable partnerships to be built (Proctor, 2007). Cox (2000) argues that community-engaged partnerships increase the competition for resources, and highlights the universities’ dependency on externals such as students, placement of students, research and outreach funding. While they do not identify any detrimental effects, Poyago-Theotoky and colleagues (2002) call for further investigation into policies which promote university–industry alliances.

Interprofessional learning and social work

At the heart of interprofessional learning is the activity of two or more professionals from different areas learning with, from and about each other to intentionally enhance collaborative practice (Barr, 2000; O’Halloran, Hean, Humphris, & Macleod Clark, 2006, cited in Humphries, 2007). An inter-professional lens involves seeking a common space (Gusdorf, 1990 cited in D’Amour et al., 2005) and common ground (Ovretveit, 1995). It is acknowledged that there has been some overlapping and evolution of terminology with “multi-disciplinary” and “inter-disciplinary” also used (Pockett, 2010).

There is evidence that social work students see explicit attention to interprofessional learning within their courses as preparing them to work more effectively across professions (Pekunonis et al., 2013). The reflections gathered through our project provide further support for this perception.

Within allied health disciplines, significant attention has been given to the challenge of locating quality field placement opportunities for students. Several studies identify key

enablers for students' learning in the placement environment as being a spirit of collegiality, team work and the willingness of staff to interact with students (Papp, Markkanen, & Von Bonsdorff, 2003). Consideration of these qualities produces an alliance that is shown to be collaborative and mutually beneficial (Bosma et al., 2010). Further, there is a developmental quality to the process of building collaboration which requires attention to "...fostering co-learning and capacity building, building on strengths and using an iterative process" (Sadler et al., 2012, p. 464).

In a comprehensive overview of interprofessional education in social work Pockett (2010) argues that social work has opportunities to engage with, and benefit from, interprofessional education undertaken through field education placements. Pockett concludes an examination of interprofessional education in the social work courses at University of Sydney by pointing to the necessity for coordinated systematic support from both higher education and industry:

These initiatives demonstrated that the desire to work interprofessionally must be supported within the higher education system and the practice context, with field education placements including elements of interprofessional education. Unless there is a coordinated program, interprofessional education will become serendipitous for most students ... (pp. 218–219)

What follows is an account of a small interprofessional initiative involving social work students on placement from QUT at the Royal Brisbane and Women's Hospital (RBWH).

Establishment of the Advanced Health Directives (AHD) project

The AHD project is a product of a cross-faculty collaboration developed through a university-wide, service-learning initiative of QUT called the Community Engaged Learning Lab (CELL). CELL (www.student.qut.edu.au) self-describes as providing opportunities for students to:

- engage in projects as part of a multidisciplinary team collaborating with a community partner on a real, current and complex issue;
- together, find creative solutions and deliver tangible outcomes;
- apply and extend professional skills and knowledge; and
- reflect on service-learning experience to gain a broader appreciation of your discipline and professional capabilities while giving back to the community.

Two frameworks combine to inform and structure the CELL approach, these being service learning and participatory action research (O'Connor et al., 2013). Service learning is a form of community-agency-based experiential learning "...in which students engage in activities which address human and community needs together with structured opportunities to promote student learning and development" (Jacoby, 1996, p. 5). Participatory action research (PAR) is commonly described as involving a series of collaboratively undertaken cycles of inquiry (such as plan-act-observe-reflect), which

facilitate the development of enhanced practices, understandings of practices, and situations of people (Kemmis & McTaggart, 2005). PAR informs the inquiry process at the CELL-wide and individual CELL-project levels (O'Connor et al., 2013). Of critical importance is that it is the partner community agency which nominates the focus of the inquiry, *not* academics or students. Together, service learning and PAR provide principles and processes for pursuing mutually beneficial partnerships between universities and community agencies (Bringle, Clayton, & Price, 2009).

In CELL projects, a key goal is for students to develop greater appreciation of disadvantage and diversity through their direct involvement with community-based agencies. At the time of AHD's (located in a public sector hospital managed by Queensland Health) development, CELL projects were undertaken only with non-government organisations. Hence the project opportunity with this large public hospital was pursued outside the formal CELL system, but built on relationships established through the across-faculty CELL process and used the CELL framework. Public sector organisations are now able to be included as formal CELL partners.

Development of the AHD project commenced in November 2012, with the student-involving phase reported in this article undertaken in the first half of 2013. Initially, the Coordinator of the Legal Clinics unit at QUT was contacted by a colleague in the Law School, who suggested contact be made with the Director of Legal Services at the RBWH to follow up on interest expressed in working with law students on a research project.

In recognition of the socio-legal complexity of some of the possible topics canvassed for investigation, discussions then took place between law and social work academic representatives at the university-wide CELL Advisory Group. A meeting was then held at RBWH between these academics and the Director of Legal Services for the hospital. The partnership grew from there; it was agreed that a group of law and social work students would be invited work together on a project related to the use of AHDs in the hospital. The specific practice concern of Legal Services was in relation to the "non-use" of AHDs within the hospital, how they were understood (or not) and specifically, why patients were not using AHDs. A number of possible sources of complexity were raised as possibly influencing the non-use of AHDs including patient-family dynamics, professional attitudes, and practical difficulties such as the nature of the required forms and available time and space for difficult conversations.

The use of AHDs in Queensland is outlined largely in the *Powers of Attorney Act 1998* (Qld) and the *Guardianship and Administration Act 2000* (Qld) (www.justice.qld.gov.au). An AHD is a formal way for an individual to give specific instructions for his/her future health care, coming into effect only if the person named in the directive becomes unable to make their own decisions. The criteria require that the person making the AHD is aged over 18 and has the capacity to give those instructions, meaning those declaring have to understand the nature and consequences of their health-care decisions, and the nature and effect of the directive. The decision must be made freely and voluntarily and the person must communicate their decision in some way.

A student team was formed comprising four undergraduate law and two undergraduate social work students. The law students participated through a Legal Clinic subject which involved volunteering at a community legal centre or legal services unit of an organisation over one semester. The social work students participated in the project as one element within a field education practicum at the hospital of 500 hours over the semester. The Legal Clinic unit involved students making periodic visits to the hospital whereas the social work students were located at the hospital four days a week, mostly within clinical teams of particular wards.

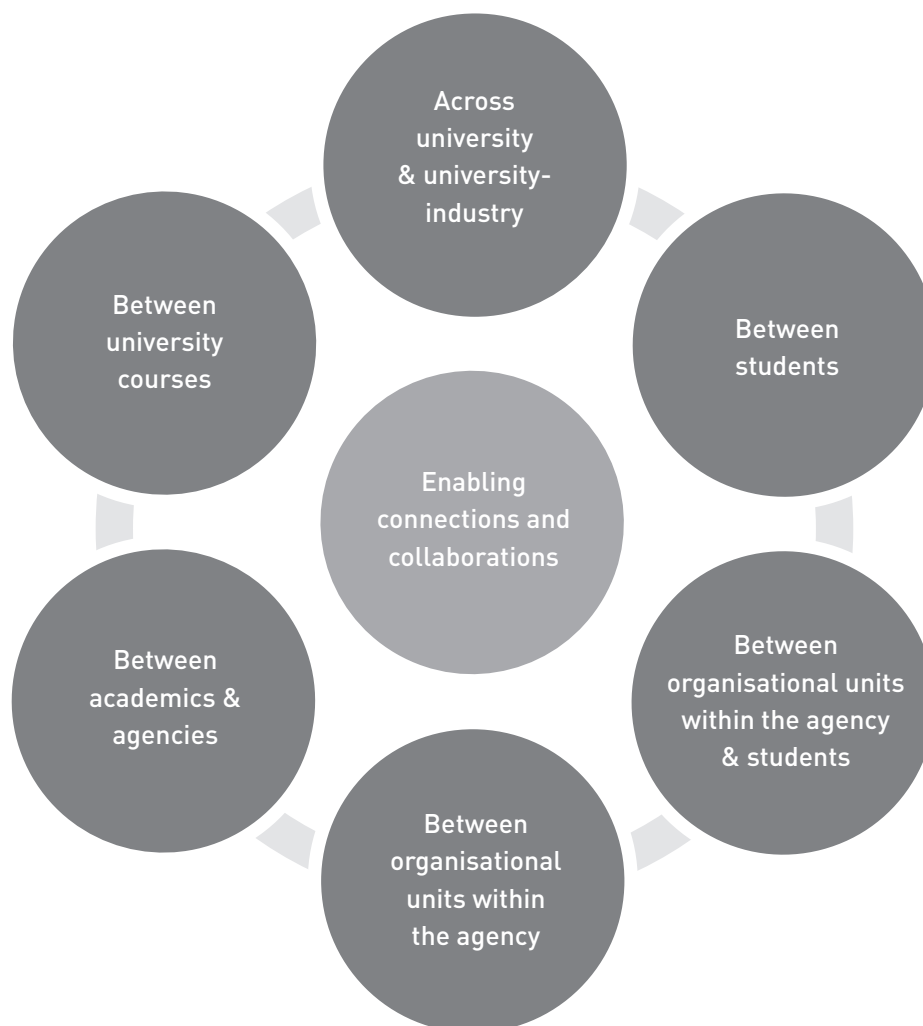
The project process involved the law and social work student cohorts each undertaking their own literature review on the use of AHDs. The two cohorts then met and identified similar and distinctive aspects of their reviews and shared this with the Director of Legal Services who was also the AHD project manager. A specific strategy emerged of the students developing a survey interview schedule which could be administered to various categories of staff at the hospital (identified through discussion) to explore staff understandings and use of AHDs. During the 12-week period available, the survey interview schedule, a participant information sheet and a consent form were collaboratively developed within the interprofessional student team and then with the Director of Legal Services. A wide range of issues, including a number of ethical and research method considerations, were canvassed along the way. Students met independently to negotiate and progress tasks, with an advisory group chaired by the Director of Legal Services and comprising the students, staff from the social work department, and QUT law and social work academics meeting periodically to clarify and negotiate directions.

The semester concluded with the survey and associated forms completed. The next step is submission of an ethics application to the hospital research ethics committee. It is envisaged a multi-professional team of students will continue the project by administering the survey and analysing results.

Generating a model for university–agency interprofessional collaboration

As outlined above, the project arose from a number of intersecting collaborations, including a university-wide strategy for community-engaged interprofessional and multi-disciplinary learning (CELL) and existing relationships between the legal and social work sections of the RBWH with their respective university faculties. A distinctive aspect of this approach to developing a social work interprofessional practice opportunity arises from a clear commitment within the university to this form of practice. The suite of enabling connections and collaborations depicted in Figure 1 were generated by the authors as part of their reflection on the project.

Figure 1. A Suite of Enabling Connections and Collaborations for Interprofessional Learning Through Tertiary Education Placement



The connections and collaborations depicted are across and between universities and organisations, organisational units, courses and units within them, and staff and students in particular roles. It is suggested that this model can assist in discussing and specifying sites for the needed systematic higher education and industry support advocated by Pockett (2010). Further implications of this model for conceptualising effective university–agency interprofessional student learning will be canvassed later in this article.

The process used for gathering reflections from students and staff

Students and staff involved engaged in reflective processes individually and collectively during and following the project. Rather than being conceptualised as a research study, there emerged during the project an interest in sharing the reflections of those involved, as a form of reflective practice. As part of this preliminary evaluation of the process, and after securing explicit written consent student, reflections were collated and make a valuable contribution here. Communication about student contributions occurred after all assessment associated with the units they were enrolled in had been finalised

and released. Law student reflections come from their individual reflective papers submitted to their Law Clinic tutor at the end of semester with written permission for use gained subsequent to the writing and assessment of these papers. The social work student reflections were gathered through unstructured videoed interviews after the semester, and successful completion of their placement. University and health staff reflections were generated with written permission at joint staff meetings during and following the project, or as individual reflections for inclusion in this article. Whilst it is appreciated the reflective material generated is partial and anecdotal, the process has assisted in describing and making some salient features of this approach available for interprofessional learning.

Student reflections on the collaborative, multi-level character of the project

Students generally recognised that the project involved a number of the levels of interaction which are referred to in Figure 1. Specifically the frame of micro, mezzo and macro levels of practice was referred to by both law and social work students as relevant to understanding the various levels of interaction in the project. One law student wrote:

Hartley and Petrucci (2004) go on to say that social workers interact with “client systems” at three different levels: the individual level (micro); the small group level (mezzo); and the agency or community level (macro). This [is said] of lawyers also who interact with individuals, groups such as companies and the community. This project reflected this model as there was interaction between the students at the mezzo level which aimed at interacting with the RBWH at the macro level with the ultimate goal being at the micro level for consumers namely increases in personal autonomy. (Law student B)

Students indicated they saw the engagement with multiple parties at different levels as a positive aspect of the project, particularly how this contributed to the richness of their learning. Students indicated they saw the opportunity to be involved in a research process concerning what they saw as a significant legal and practice issue (AHDs) as significant and beyond their prior expectations. The presence of multiple relationships and levels of communication however was also experienced as a source of challenge.

Just so many people. Like there was QUT law and social work, and hospital legal and hospital social workers, and law students and social work students. Multiple supervisors, and within the group there [were] different expectations. (Social Work student A)

Student reflections on their interprofessional experience

Multi-professional team experience can help shape students' knowledge, attitudes, skills and beliefs about their own professional role (Barr, 2005; Cooper, Carlisle, Gibbs, & Watkins, 2001).

Students from both disciplines communicated a greater appreciation of complexity apparent to them as they attempted to explore attitudes and practices in respect of AHDs and how developing the survey required them to move beyond their previously more confined understandings of professional practice. Interestingly, both law and social work students commented on the more contextualised, nuanced approach to understanding of people brought to the project by the social work students and how this allowed for

a broader range of considerations, such as cultural differences, to be brought to investigating this complex area of practice.

Myself and the other social work student brought the individual who had written the [particular AHD] document into the picture. Understanding the individual, the “person-in-environment”, the individual within the context of their family, and their cultural background and individual circumstances. (Social work student B)

A similar view of “the social” extending “the legal” is evident in the following comments by the law students.

... when it came to the research topic I learnt that you would also need to think about it from the social point of view and how the individual taking the survey would think, feel or say in response to each question. (Law student L)

This project [...] was to be a collaborative undertaking by two distinct professional groups namely law and social work. For lawyers, working alongside traditional “helping” professions such as social work can be used to enhance and contribute to more effective lawyer–client relationships. It also promotes development of other forms of intelligence including emotional and narrative intelligences which are critical for lawyers to possess when dealing with clients. (Law student B)

It was apparent that the experience social work students were gaining from placement was a resource they brought to their interprofessional engagement. One law student indicated:

They [the social work students] described varying experiences within the clinical setting where they have been confronted with different cultural beliefs, and how these beliefs impacted on the type of assistance they provided. These accounts assisted me to draft questions taking culture into account. (Law student T)

Conversely law students were seen by social work students as extending their understanding of context:

The legal students were good at bringing in points of view from a lot of different stakeholders, as I felt sometimes [Student A] and I could get caught up in only thinking about the patients’ rights. They also gave us great insight into the legal frameworks imbedded in the hospital and wider health context. (Social Work student B)

The social work students also clearly appreciated what they saw as the very methodical and precise approach of the law students to undertaking tasks, as well as their disciplinary awareness of various relevant legal dimensions.

Social work students also indicated they were able to take the confidence and understandings they gained from being in the project team back with them into other interprofessional engagements they had on the wards. One of the social work students commented:

... when I was on the wards I felt more confident talking to patients and other professionals.
(Social Work student B)

Even though working and learning together in multi-professional teams has potential benefits, difficulties in implementation can occur particularly around the distribution of status and power and the effect on decision-making (Frost, Robinson, & Anning, 2005; Onyett, Heppleston, & Bushnell, 1994). These issues were similarly reported by the social work students in the early phase of the AHD project, specifically over not being proactively included in communications and planning at the commencement of the project (further discussed later in this article).

As the project developed, the law and social work students came to share responsibility for the work, to coordinate their actions, cooperate more in planning, jointly set goals and distribute tasks. Peer support, communication, and information sharing were reported by students as integral to achieving desired learning and task outcomes. The process required that the students invest in working and learning together, be prepared to articulate differences, explore alternatives, model solutions, examine an agreed model and implement activities (Engstrom, 2001).

What we managed to create with the team was a team environment where we developed a lot of respect for each other's perspective and were able to acknowledge [this] where each other were coming from. Some of the challenges came about in wanting to do things in different ways.
(Social Work student A)

Overall, the students indicated that the different disciplinary perspectives blended together so that what emerged from their project was more comprehensive and nuanced than it otherwise would have been (Amey et al., 2002).

Reflections from the Hospital Social Work Clinical Educator (SWCE)

A key focus from the SWCE's perspective was to help the social work students manage the tensions presented by an interprofessional project. Initially the SWCE's role was expected to be minimal; however, it became apparent early in the process that a greater level of support for the social work students' involvement was necessary for the project to proceed. In the early weeks there was limited 'on the ground' communication between the law and social work students. Drawing on the principles of empowerment and group work participation (, the SWCE arranged for the two student cohorts to meet and 'join' as a small working group, and to share their separately undertaken literature searches for discussion. For the SWCE, students sharing their professional identities, and negotiating how they would interact, work and learn together emerged as being of critical importance (Barr, 2005).

In the meeting, it was interesting to observe the law students sitting on one side of the table and the social work students on the opposite. The pivotal moment came when one of the law students asked the social work students, "What does social work do?" This provided a perfect opportunity for the social work students to articulate the role of social work in the health context, which they managed very well. In facilitating that meeting, I was able to observe the social work students' increase in confidence as they articulated their professional identity. The question initiated

conversations and discussion amongst the students who then together decided how they would communicate in the future. (SWCE)

The project provided opportunity for the social work students to bring a psycho-social perspective to the medical model of care (Abramson, 2002), and specifically to address the complex of socio-legal issues associated with end-of-life planning and AHDs. This is made possible because of the good fit with social work's emphasis on appreciating client context, in particular "the wider social and family context, which can be a competing focus to that in law-related professions" (Hicks & Maidment, 2009, p. 428).

Incorporating a distinct research project into a hospital placement posed a number of challenges for placement support. These included ensuring the social work students' learning outcomes and goals were able to be met across the research and clinical aspects of their placement, and ensuring the student and supervisor relationship was supported and negotiated in such a way as to maintain clear reporting and communication pathways, a challenge when the student's placement supervisor was external to the research component of the placement. Finally, monitoring the various stakeholder expectations was needed to ensure the work demands, timelines and the expectations arising out of the two placement components were articulated and remained realistic. The SWCE was conscious of the need to ensure the project added value to, rather than compromised, the students' placement learning experience.

Critical to managing potential placement challenges was that an open communication strategy between university support, the hospital social work supervisors and the students was established. The university social work liaison visitor was able to monitor the progress of the research, student experiences and meeting professional placement requirements, through liaison visits and regular informal communication with students and field supervisors. This involvement provided another point of view where emerging concerns could be acknowledged and addressed. Incorporating the research component was seen by hospital staff and students to add richness and diversity to the placement, evidenced by the student's learning plans and their articulation in supervision of a deepening understanding and application of the social work practice and professional standards (Australian Association of Social Workers, 2013), including those related to research.

Reflections from the university social work academic

Within the social work program at QUT there was an interest in developing a stronger focus on socio-legal practice. The opportunity to undertake a "CELL-like" inter-professional project with law students at the hospital was initially identified through conversation between the law and social work academic representatives on the advisory committee of the university wide-work integrated learning initiative. The social work academic was also responsible for teaching the legal and ethical units within the social work and human service degrees. They wrote:

My role was initially about brokering the opportunity, and involved communicating a vision of the purpose of the AHD Project and the potential benefits to all parties. Key to this was the exploration of the different relationship between industry and tertiary education which

the CELL approach heralded ... One where industry partners drove the inquiry agenda supported by, and with benefits to, the University. (QUT social work academic)

This academic remained active in the project. A key role was to provide survey and research ethics information and advice. Draft material developed by students was reviewed through a collaborative process involving the students, the SWCE, the Director of Legal Services, and this academic. The goal was to provide academic support to the development and review of the draft material so that it was both a research learning experience for the students, and mindful of ethical considerations that the hospital research ethics committee may have. Distinctive here is that this input did not occur as part of a teaching unit but was provided as needed and on site at the hospital during what can be characterised as an emergent process.

The principle of reciprocity, embedded in CELL through use of a participatory action research framework (Maiter, Simich, Jacobson, & Wise, 2008), was used to clarify institutional and individual roles. For example, it was important for the research topic to be one nominated by the host agency, and for an academic staff member to support the development of the survey process within the hospital without shifting management or ethical responsibility from the hospital to the university. Critical to this was supporting the student group develop the survey instrument, participant information sheets and informed consent documents for approval by the hospital research ethics process, rather than turning to the university ethics process. The social work academic assisted in the clarification of the survey's purpose, clarifying who the participants were, the phrasing of questions, strategies for the rating of questions, units of analysis, and the sequencing of questions. This contribution mostly occurred in project meetings and through the sharing of resources by email following these meetings.

Reflections from the Legal Services unit Director

The Queensland Health regional Legal Services unit located at the hospital was the host agency for the project and nominator of the research topic. The Director of Legal Services welcomed the opportunity for a team of students to work on a socio-legal issue that was of interest at the hospital. Whilst the subject was of interest, it was not of sufficient priority or urgency to warrant the allocation of specific hospital resources. The semester-long process was seen as resulting in significant progress being made through a review of the literature and the development of an interview schedule and informed consent documents designed to explore various AHD understandings and practices at the hospital. Such foundation work was seen as having the potential to be built on more formally as research resources become available at the hospital, or to be extended by a subsequent student project.

Importantly, the host agency saw support of interprofessional learning through such university-hospital projects as something it had an ongoing commitment to. The inter-professional approach was seen as generating a richer suite of considerations in exploring an issue of complexity than otherwise would have occurred, as providing an opportunity to work across different sections of the hospital, and as extending the hospital–university relationship in an innovative way:

I found it stimulating working with the students not only [...] their individual enthusiasm

and focus but also because of the difference in their academic disciplines. I really hope this is the start of a strong ongoing multidisciplinary relationship. (Director Legal Services Metro North, Queensland Health)

Challenges and enablers in developing a collaborative approach to interprofessional learning

The creation of a collaborative “space” is a key early challenge in establishing a collaborative process (Wicks & Reason, 2009). In particular, time management, developing an equitable interprofessional process, creating a coherent suite of placement activities and supervision arrangements, a clear approach to project management, and those involved having confidence in dealing with the emergent character of the project process, were all raised as issues.

A tension can exist between the development of an interprofessional collaboration such as this project, which requires a range of higher-level institutional clarifications and commitments, and the timely engagement of students in the process. For example the structure of the Legal Clinics unit required clarification of the law students’ activities within the agency before the semester commenced. For social work students, engagement could not be fully confirmed prior to the commencement of their placement and negotiation of their learning plan with their various placement supervisors. Also, whilst the law students undertook their engagement with the project as their only commitment for the unit of study they were enrolled in, the social work students were undertaking it as one component of a multi-activity field education placement. Creating a coherent suite of placement activities and supervision arrangements was a practical challenge. Social work placements at the hospital appropriately contain a range of practice activities, with the corollary that students may have more than one point of professional supervision. In this instance, one of the social work students undertaking a first placement had two field supervisors across two different clinical areas.

Concerns were raised by the social work students’ placement supervisors about their own capacity to support the students in the project. The iterative and collaborative development of the research plan meant that the specific knowledge and skills needed were progressively understood rather than known at the outset. These challenges were viewed by the hospital or university staff involved not as obstacles but as concerns that needed to be managed.

As shown in Figure 1, university wide-community collaboration was made possible through the CELL initiative, which provided an institutional mechanism for academic staff from Law and Social Work to uncover an interprofessional opportunity. CELL also provided an agreed meta-process for university staff to use in developing and managing multi-professional teams of students coming together around an inquiry nominated by an industry partner. The participatory action learning and research framework used (O’Connor et al., 2013) allows for something of a reconceptualization, or at least broadening of the university–industry relationship to one that is more reciprocal. This more systematic approach to the collaboration is suggested as important if interprofessional learning is to become more institutionally sustainable.

Many mechanisms already exist at universities for students to undertake work-integrated learning (WIL). The development of interprofessional strategies through “joining up” WIL across faculties in collaboration with host agencies presents an opportunity for significant innovation in professional learning.

The literature on network structures is useful here as it is interested in the role and nature of collaborations which can assist in responding to problems which no one agency can deal with by itself (Keast, Mandell, Brown, & Woolcock, 2004). This literature points to the need for new roles and relationships at various levels of governance if true collaboration is to be achieved. Collaboration involves a higher level of integration in how a strategy is managed, one where the boundaries between agencies become blurred (Keast, Brown, & Mandell, 2007). The authors experience in the AHD project suggests WIL interprofessional projects require a more intense and engaged collaborative relationship than typified by cooperation (accommodation by different agencies of each other’s goals), or coordination (working together towards separately generated goals) (Keast et al., 2004).

Broader implications

The AHD project comprises a complex set of institutional, professional, pedagogical and client interactions. At the institutional level, bridging the university–agency divide was inherently complex, reliant on formal and informal communication channels and methods within and between the university and the hospital. The view of Pockett (2010), that interprofessional learning must be supported by a coordinated and systematic approach, is clearly reinforced by the AHD project experience. A challenge at all levels of interaction is to develop sufficiently clear planning, communication and decision-making processes whilst affirming the collaborative and iterative process values underlying this approach.

At the level of everyday professional practice in the hospital, questions were raised by social work staff of where and how difficult conversations that have a socio-legal character can take place, such as those involving the creation or application of an AHD. The scope of social-work-practice-related possibilities was also raised by the social workers involved over how their role in respect to complex practice situations interfaces with, or overlaps with, other professional hospital roles. Negotiating interprofessional relations reflects the broader issue of social work being able to articulate its role in working with complex issues in a particular setting, in its overlap with other services, and the need to further explore the role of social work within multi-professional teams and more broadly in a changing health services sector.

Limitations

This article describes the development process and early steps in a small, time-limited project involving six undergraduate social work and law university students undertaking an interprofessional, research-related task whilst on placement at a large public hospital. The small numbers of students and staff involved and the retrospective approach to reflection used mean that generalizable evaluative conclusions about the project cannot be drawn.

CONCLUSION

The experience of the early phase of the AHD project was that innovative collaboration involving interprofessional learning involves articulating and building a complex of institutional, situational, relational and practice linkages, underpinned by values and processes for undertaking collaborative inquiry. A suite of collaborations within and across a university and an agency provided a networked platform for this interprofessional experience.

Student and staff reflections reported here support the view that this phase of the AHD project has been a useful vehicle for interprofessional learning. Consistent with other accounts, students from both social work and law reported a range of benefits from being involved in an interprofessional learning experience, learning from each other and enriching their own professional understandings and identities. Further development of the project, including ethics approval to undertake data collection and formal evaluation of the project, is necessary to further explore and confirm these learnings.

The initial establishment phase experience of this project suggests there is value in seeking greater articulation between social work placements and other work integrated learning strategies being developed across universities. Further, locating different students around an issue which the agency nominates as significant can allow students to collaboratively explore practice, whilst providing benefit to both the host agency and the university. Whilst challenges exist in negotiating clear communication and management processes, the AHD project experience suggests that an interprofessional, inquiry-oriented approach to university–agency collaboration has the potential to enrich and extend social work education.

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