Millennial Students in Fieldwork Guidelines to Success

Curtin University
Teaching and Learning Project
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Project Team

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Project Overview

Universities, students, and employers have been reported to "...live in parallel universes" due to a lack of shared expectations

(Mourshed, Farrell, & Barton, 2012, p.18)

Aim of project: to gain an increased understanding of allied health millennial students to facilitate their engagement, learning, and hence success within placements and ultimately enhance their employability in the 21st Century workplace

Project Process

- Scoping review of literature

- Focus groups – students & clinical educators

- Development of Guidelines

- Stakeholder review

- Guidelines available

Increases in university attendance = increases in diversity (Denman, 2005)

Australia has one of the highest rates of international university students (OECD, 2017

High level of diversity in language, culture & learning > need to embrace diversity (Ibarra, 2009)

Generational differences

- Baby boomers = idealists

- Generation X = sceptical independents

- Generation Y (millennials) = connected, diverse collaborators

  National Chamber Foundation, 2012

Characteristics of millennial students

Majority of students currently attending university are classified as 'millennials'. University enrolment rates of millennials in Australia increased by 15% between 2005 and 2015 (OECD, 2017).

Millennials have been described as:

- technologically competent
- achievement focused
- confident
- conventional
- pressured
- sheltered
- special
- team-oriented
- multi-taskers

Holt, Marques & Wray, 2012; Howe & Strauss, 2007; Johanson, 2012; Monaco & Martin, 2007; Pardue & Morgan, 2008; Venne & Coleman, 2010

Personality & personalisation

Digital natives

Wellness & work-life balance

Expectations

Learning style

Relationships

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Millennial students rate personalisation as a very important aspect of their placement experience (Brown et al., 2011; Chan & Ip, 2007).

Student perception of the level of personalisation has been strongly associated with their overall satisfaction with the placement (Berntsen & Bjørk, 2010; Brown et al., 2011; Shivers, Hasson, & Slater 2017).

It is important for students and clinical educators to reflect on their expectations and the opportunities for personalisation of the placement, and to communicate this regularly

Given concerns regarding students' **use of mobile phones** during placements, important that expectations around the appropriate use of these devices is **discussed and negotiated**

Explore how students can engage with technology at the placement - might include students enhancing their educators' use of new technologies.

Mental illnesses affect 45% of Australians (ABS, 2010). Highest rates in 16-24 year-old age group, followed by 25-34 years.

Millennials prioritise personal life & seek to maintain a balance between work and leisure (Werth & Werth, 2011).

Conversely millennials can be pressured and hyper-focused on achievement (Howe & Strauss 2007), often expressing feelings of stress, anxiety, and being overwhelmed (Much, 2014, p. 38).

Be aware and open to discuss

Expectations - documented so they are transparent

Students & clinical educators need to be accountable

Include those for the students (e.g. professional behaviour, deadlines, caseload, level of independence, documentation, self-reflection), those for the clinical educators (e.g. time allocated to the student, how and when feedback will take place, and how the level of guidance and supervision will change over the length of the placement) and those for the relationship (e.g. accessibility, expectations of one another).

Some useful tools include:

1. Placement map / checklist – week by week guide
2. Supervision contract – complete together, can help structure supervision sessions
3. Expectations of fieldwork – clarifies what is expected & provides opportunity to discuss and clarify
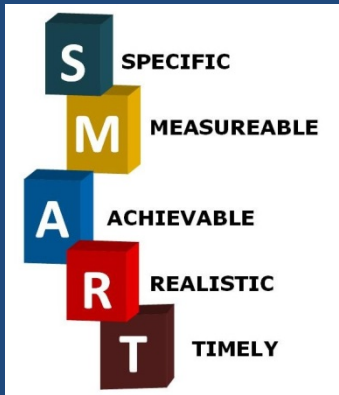
Students should prepare SMART learning goals for their placement and discuss these with the clinical educator in the first week of placement (if possible).

Students need to engage in this process meaningfully and personally to make the most of the learning experiences to come.

Prompt students to continually reflect on the goals, adjusting strategies and goals based on feedback.

When the clinical educator is engaged in the process of reviewing and reflecting on the learning goals, it reinforces the value and importance of them to the student.

Students value a sense of belonging (Levett-Jones, Lathlean, Maguire, & McMillan, 2007)

Quality of supervising relationship is important to supervision effectiveness (Kilminster et al., 2000). Millennial's seek collaborative & supportive relationships that are not hierarchical or authoritarian (Roehling et al., 2010). Like to feel respected & appreciated by clinical educators & those who demonstrate this are highly respected (Holt et al., 2012).

Strong supervisory relationship is a critical platform for placement success. Supervision should include clinical management, teaching & research, management & administration, pastoral care, interpersonal skills, personal development, & reflection (Kilminster, et al., 2000).

Strong student-clinical educator relationship will help address students need for personalisation:

➢ Initial contact
➢ Initial meeting
➢ Get to know each other

Investment in the supervisory relationship from both parties will be mutually beneficial

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Reflection of professional practice

The suggested strategies are not only supported by the literature as essential components of successful placements, but the congruence to professional practice is unmistakeable.

Collaboratively setting clear goals and expectations with clients/patients is an essential step in achieving positive outcomes, and a key component of the therapeutic alliance.

The importance of developing and nurturing this therapeutic relationship is pivotal for all health professionals, as they support, intervene, facilitate and build capacity of their clients/patients through a cycle of feedback and reflection.

It is therefore no surprise that health professionals are truly well equipped to create high quality learning experiences for students, when the same values and principles are applied.

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