**‘They come with their own ideas of what they want’: educator, healthcare student and manager perspectives of learning outcomes**

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# Keywords

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## Introduction

Learning outcomes (LOs) represent ‘one of the major global developments in education policy’ (Souto-Otero 2012, p.249). They are a well-established feature in higher education (HE) systems across the European Higher Education Area (Sweetman 2019), the United States, Australia and Canada (Stanley 2015). In the United Kingdom (UK), LOs have become a core element of both curriculum design and the management of educational quality (Prøitz *et al.* 2017; Sweetman 2019). LOs are no less important in accredited post-registration education offered by the HE sector to healthcare professionals. Such education must meet the needs of practice, as well as the rigorous HE quality assurance requirements. LOs therefore, need to incorporate both academic and practice components as well as clearly communicate to stakeholders the purpose of the module. These stakeholders include workplace managers responsible for planning workforce developments, the registered practitioners engaged in study to meet their professional and personal goals, and educators responsible for planning and delivering modules which meet the academic requirements of their institutions.

In this context, LOs in healthcare professional education must therefore span both HE and practice, and in so doing there can be tension between these two worlds as they each strive to meet their respective demands and frames of reference. This project set out to explore how LOs were understood by different stakeholders: educators, healthcare students and service managers.

## *Background*

LOs are statements of what the learner will know, understand or be able to do on the completion of a programme of learning (Sweetman 2019). In a guide to writing and using good LOs, Baume (2009) suggests that these statements clarify educators’ thinking about what they want to achieve and provide a basis for what is taught. In pedagogical theory, effective teaching and assessment pivot on LOs. Grounded in constructivist learning theories, Biggs and Tang’s (2011) concept of constructive alignment proposes that students learn best when a module offers assessment tasks and learning activities which are aligned with the LOs. As such, the adoption of LOs are presented as shifting educational practice towards a more student-centred practice in which greater emphasis is placed on learner’s constructing their own understanding and rather than one centred on teaching (Prøitz 2015; Bleiklie *et al.* 2017).

LOs are also regarded as a central element of HE reform and a mechanism to enhance the standardisation, transparency and accountability of the sector (Souto-Otero 2012; Prøitz *et al.* 2017). Consequently, LOs are presented as management tools serving political and bureaucratic purposes due to their association with institutional academic quality assurance processes and government agencies responsible for auditing HE provision ( Hussey and Smith 2008; Bleiklie *et al.* 2017). Moreover, due to their association with the current HE culture of targets, managerialism, consumerism and the ‘commodification’ of knowledge, some contend that LOs are being diverted from their intended pedagogical purpose in supporting good learning and teaching (Avis 2000; Hussey and Smith 2008). Indeed, James (2005) suggests that LOs have ‘become vacuous and at best useless, at worst damaging’ (Hussey and Smith 2002, p.89).

Despite their widespread adoption, there is relatively little empirical evidence regarding the purpose and usefulness of LOs. Sweetman (2017) argues that the mechanisms by which LOs influence student-centred learning can be, at best, implicit and vague. Through interviews with students and lecturers from eight bachelor degree programmes in four universities (two in England and two in Norway) about their perceptions of the influence of LOs on module planning and learning experiences, she found ‘little support for claims that LOs are sparking a paradigm shift in teaching and learning, or … that LOs necessarily support more learner-focused and effective environments’ (p.53). Even so, there is some evidence that students can find them useful. For example, Bleiklie et al*.* (2017) reported that LOs could ‘provide a vocabulary to describe their achievements and abilities to future employers’ (p.78). Furthermore, Brooks et al.’s (2014) investigation of students’ views of LOs (n=918) and whether and how they used them revealed that the majority found them useful and wanted them to remain a central element of their learning. However, a third of the students indicated that they thought that the primary use of LOs was to provide evidence of teaching quality to external parties.

***Learning outcomes as intended, taught and experienced***

The concept of LOs evokes expectations of precision, clarity and universal meaning independent of context (Lassnigg 2012). LOs are intended to make the outcomes of any learning experience transparent and understandable to stakeholders – students, teachers, employers and policy makers (Werquin 2017). Branceleone and O’Brien (2011) suggest that LOs represent a predictive promise to these stakeholders that such outcomes will be actualized by students. However, the intended curriculum – as represented by LOs – is not necessarily the same as what is enacted by the educator (Hume and Coll 2010) or how the student subsequently views, engages with or is able to achieve them (Hewitt 2012; Schubert 2010).

This divergence of that which is *enacted* and *experienced* from that which is *intended* has several roots. LOs are designed to speak to diverse stakeholders – guide educators and students, reassure university management and government agencies as well as reflect the needs of any professional regulators. In the case of post-registration healthcare education, LOs also need to speak to employers sponsoring their employees’ study with the expectation they will develop the skills needed by their workplace. Curriculum construction, delivery and experience therefore, are subject to a cascade of different interpretations, each shaped by several sites of influence which promote particular perspectives of what constitutes *worthwhile learning* (Hume and Coll 2010). Consequently, LOs are open to multiple interpretations (Allais 2012). Furthermore, LOs not only vary in the way that they have been developed but these origins are often implicit and contested (Daugherty *et al.* 2008). All this raises an important question about the assumed clarity of LOs, and whether different stakeholders find them useful or if they need to be contextualised to be understood and interpreted.

The contested nature of LOs is well illustrated by Morcke *et al*.’s (2006) small study of medical education in Denmark. They revealed that the different perspectives among or between stakeholders, educational leaders and curriculum designers, resulted in misunderstandings about the meaning of the LOs. They argue that such differences should be acknowledged, respected and incorporated into the curriculum design process through discussion with stakeholders to achieve a common understanding. In addition, Bleiklie *et al*.’s(2017) comparative study in England and Norway concluded that LOs were shaped by external factors, including policy context, organisational environment and disciplinary requirements – understanding them was therefore contextualised.

Drawing on insights from South Africa at a time when LOs were being introduced as part of major education policy reform, Allais (2012) concluded that LOs ‘did not enable the essence of a programme to be understood similarly enough by different stakeholders’ (p.331). Allais (2012) also states that the ‘ability (or inability) of outcomes to disclose the essence of a learning programme is not just a practical problem, resulting from the limitations of language. It is epistemological, because knowledge cannot be mapped onto, or derived from, learning outcomes’ (p.335).

The educators’ development and delivery of LOs and the students’ experience of engaging with them will be, like all ‘curriculum intentions’, shaped by the sociocultural context of educational practice and the students’ subjective experience (Billett 2004). The operational curriculum will be different from the intended curriculum – LOs as intended will differ from LOs as enacted (Hume and Coll 2010). Furthermore, that students may not realise the ‘promise’ of LOs is not necessarily a limitation of the statements themselves or student academic ability but rather a reflection, as argued by Billett (2004), that a learner’s personal context and subjectivity shape how they engage with learning opportunities. Consequently, LOs as intended are likely to be different from how they are experienced by students.

Therefore, LOs will inevitably be interpreted differently by different stakeholders, enacted in particular ways by educators and experienced by students and managers in ways other than intended. Given the dearth of empirical evidence about how LOs are perceived by different stakeholders (particularly workplace managers), this study set out to explore how LOs were understood by module leaders (referred to here as educators), healthcare students and managers in two post-registration healthcare programmes in two English universities. Our specific research question was:

*How do educators, students, and workplace managers understand the LOs in continuing professional education (CPE) modules?*

It was our intention that the voice of these different stakeholders would add further insights to the existing LOs literature, particularly in relation to professional education, and to stimulate future work in the UK and internationally.

## Materials and methods

A concurrent mixed methodology research design was employed. Online questionnaires collected data from students and managers and semi-structured interviews were used with educators.

### *Setting*

The study focused on four modules in two postgraduate advanced practice programmes for registered healthcare professionals run by two English universities (University A and B) where a number of members of the research team were employed. These part-time and work-based programmes enable practitioners to extend their practice to a more autonomous level of assessment, diagnosis and treatment of patients (RCN, 2018). The programmes and their module LOs therefore have an impact on students’ practice roles and career prospects. Similarly, as advanced practice and role extension is sought by service managers, it was likely that they too would have an opinion of the programmes and their LOs. Consequently, the study aimed to explore three different stakeholder perspectives on LOs – educators teaching to them, students working to achieve them and managers wishing to develop advanced practice in their workplaces.

### *Participants*

Purposive sampling was used to recruit participants who were either educators, healthcare students, or managers of students involved in the four modules. All students (n=81) registered on the four modules (two at each of the universities) were invited to complete an online questionnaire by a research team member from a different university. A participant information sheet was included with an invitation email. Managers were also invited to complete a similar questionnaire, tailored to their role. The complex research governance processes encountered, along with the wide geographical dispersal of managers across several NHS organisations local to the two universities, meant that it was only possible to invite managers associated with one of the universities. Fifty three managers, who had links to University B, were invited to complete the managers’ questionnaire.

Six educators involved in teaching the four modules at the two universities were recruited for individual interviews. At University A, two educators were involved in one module and the third taught on the other. In University B, all three educators were involved in the two modules. Educators were recruited by members of the research team in their respective universities, and supplied with a participant information and consent form.

***Ethical considerations***

Research ethics approval was granted by one of the two participating universities on behalf of the whole project (Research Ethics Panel SREP/2016/087). Questionnaire participants were informed they had the right to decline participation by disregarding the link to the online questionnaire. The first page of the questionnaire explicitly informed participants that submission of the questionnaire implied consent. No incentives were offered. Anonymity and confidentiality of all participants have been maintained and pseudonyms used.

### *Data collection*

Development of the two online questionnaires (one for students and one for managers) was informed by the literature and previous work of three members of the research team (Clark *et al.* 2015). Both were piloted with a small number of students and managers.

The student questionnaire was self-administered online using SurveyMonkey™. It comprised closed multiple choice and open-ended free text response questions collecting data on participant’s understanding of different aspects of LOs, as well as demographics such as age, gender, and current clinical employment (see Figure 1). The questionnaire was administered in the first four weeks of the start of the modules and students had four weeks to complete it. The managers’ questionnaire addressed the same topics as those given to students but with phraseology tailoring questions to their managerial role (see Figure 2).

Insert Figure 1 and Figure 2 here

Individual interviews with educators explored their perceptions of students’ and managers’ understanding of LOs and were conducted by a research team member from a different institution to the student and manager participants. They were semi-structured, conducted by phone, recorded and lasted 30–40 minutes. Following transcription, interview transcripts were sent to all participants for review. Five responded but all six transcripts have been included in the analysis.

### *Data analysis*

SPSS™ was used to generate descriptive statistics from the questionnaire data. Free text responses were organised into themes with numbers of respondents coded against each theme. Analytic rigour was supported by two researchers doing the analysis together followed by review by the whole project team.

The educator interview data were analysed using a thematic approach (see Braun and Clarke 2006). Four researchers read and coded the transcripts. A list of first level codes was created, discussed and agreed upon by all four. Similar codes were merged resulting eventually in five agreed top level categories: functions of LOs, development of LOs, understanding of LOs, communication of LOs, and expectations of modules. The transcripts were then reviewed by the four coders using the five top-level categories to create a grid of the top-level themes and quotations for each educator. Analytic rigour was enhanced by using this pre-defined analysis method and by reaching agreement between researchers.

## Results

Thirty four students across the four modules (n=univ A, n=univ B) completed the questionnaire giving an overall response rate of 41% (34/81) with the rate for each module ranging from 10%–62%. The response rate for the manager questionnaire was 25% (13/53). The low response rates to the student and manager questionnaires meant that it was not possible to undertake any inferential statistical analysis. In contrast, the individual interviews with educators generated rich qualitative data. Consequently, this results section reports predominantly on the interviews with educators and is structured using the five themes generated from that dataset. Data from the student and manager questionnaires is incorporated into themes 3-5 to reinforce, challenge or nuance the qualitative data from the educators. (Students and managers were not asked about the function or development of LOs.)

### *Functions of LOs*

Educators reported that LOs served two separate but related functions. First, LOs communicated to stakeholders what students should achieve by module end:

*To let them* [students] *know what they’re going to enrol on or let the managers know what they’re going to enrol their staff on is the right module to meet what they want it to meet. So the learning outcomes for this module should give the students and the managers a good idea of what they expect out at the other end.* UnB2[[1]](#footnote-1)

A few educators recognised the limitations of LOs in this respect:

*I’m not convinced that they [*LOs*] delineate the curriculum, they were in more vague terms and to make them precise enough, I dunno, they become very long if you make them precise enough to show you what’s in the curriculum and what isn’t.* UnB3

The second, related function of LOs was educational, directing teaching and assessment design and aligning all the elements of the module:

*The learning outcomes I think connect with the whole process, including the preparation, the teaching, the assimilation of knowledge and then the assessment process.* UnB1

However, educators predominantly emphasised the role LOs played in assessment and how they helped explicitly articulate and judge the required standard of performance:

*I suppose whilst I was doing assessments I thought one of the values, but may be not the purpose, was that you could have at least a clear statement of what was intended to be achieved and then decide whether the assessment showed that it had been achieved or not. So they were useful from that point of view.* UnB3

As such, educators primarily linked LOs to assessment. They stressed that LOs offered students guidance in preparing their assignments and served as a benchmark against which academics and workplace educators could measure progress, allowing the assessor to *‘confidently say that at the other end they* [students] *are competent and able practitioners.’* UnB2

### *Development of LOs*

Most educators reported that the development of the LOs was informed by the requirements of UK professional and statutory bodies (such as the Nursing and Midwifery Council and the Royal College of Nursing), national policy drivers and specific role descriptions for advanced practitioners. These drivers influenced module content and were then translated into LOs. This educator described the development of a module in diabetes:

*The learning outcomes are heavily influenced by the diabetes competency frameworks […] we tried to ensure that this is a match to what we need nationally […] and then also some input from patients, although it was quite challenging.* UnA3

Developing LOs based on these various sources enabled educators to assess students against these requirements, as students were required to demonstrate they had developed the skills and knowledge necessary to meet these external professional standards. Standards for advanced practitioners involve not only a list of practical and clinical skills relevant to the area of clinical practice, but also higher level ‘academic’ skills such as critical thinking, autonomous decision making and the ability to translate evidence into practice. LOs were therefore developed to align learning and assessment with the practice roles students would undertake afterwards, as well as the characteristics of postgraduate study.

Educators stressed the task of transforming these various standards into LOs. This included communicating LOs using the ‘university-speak’ necessary for approval within university systems and communication with other educators who subsequently may take over the teaching of the module. Consequently, it was felt that the LOs may not necessarily be easily understood by students and employers:

*They’re very much our* [academic] *tool, it’s how we develop programmes and really possibly they’re not fully understood by employers and by our students.* UnA1

Thus, whilst the LOs reflected the requirements of external stakeholders, they were expressed in academic terms that may not be immediately comprehensible to those external to the academy.

### *Understanding of LOs*

Educators reported that students had a very clinically and practically-focused view of their personal learning goals which LOs did not necessarily reflect:

*I think they come with their own ideas of what they want to do. You know they have expectations from their workplace as well. So I think they do struggle a bit sometimes with the learning outcomes.* UnA1

The majority of educators reported that students had difficulty understanding the need to meet LOs in order to pass the module and argued that students did not look at LOs or view them as important:

*I don’t think they really understand the purpose of them* [learning outcomes]*.* UnB2

Educators reported some of this difficulty related to the academic terminology used in LOs, especially for those students unfamiliar with academia or the advanced skills of postgraduate study:

*I think if someone hasn’t been in academia for a long time then it’s hard to kind of understand what is a LO, you know how can this be achieved.[…] so they’ll be like ‘what is synthesised knowledge?’* UnA2

The more concrete and clinically-focused outcomes were reported to be better understood, and more in keeping with what students thought important as they ‘*just wanted to get on with the clinical stuff.’* UnB3

Educators rarely engaged with managers over the LOs. Managers were predominantly interested in the clinical roles their staff could assume upon completion of their studies:

*So the LOs for this module should give the managers a good idea of what they expect out at the other end […] I can’t remember a time when we have gone through the actual LOs with higher level managers.* UnB2

#### Student and manager questionnaires

The questionnaires gave the students the opportunity to comment on the clarity of LOs for their module. In contrast to the educator’s views of students’ understanding, the vast majority of students responded that LOs were ‘very clear’. No student indicated that any LO was ‘unclear’. Managers also found LOs ‘very clear’ with only a very small number of responses indicating that an outcome was ‘not entirely clear’. Again, no LO was described as ‘unclear’ but a few free text manager comments suggested LOs contained ‘*too much jargon’*.

The data across the three different stakeholder groups therefore seems to suggest a difference in perception of the extent to which LOs were understood.

### *Communication of LOs*

The interviews explored how LOs were communicated to stakeholders. Educators suggested they had ongoing communication about module LOs with students, mentors in practice and managers, with each interaction tailored to their particular context. Students were introduced to the LOs at the beginning of the module, throughout the teaching and via formative feedback on assignments:

*…what we do here is on the first day…I always ask them to tell me what they want to learn from the module basically and then…I discuss the LOs […] I showed them a LO as well as a match with the marking criteria.* UnA3

These discussions were seen as necessary to supporting students to a successful pass:

 *It’s like setting someone up to fail if you don’t kind of communicate that across.* UnA2

Educator accounts of student interest in LOs varied. One educatorsuggested that students never initiate discussion about LOs. Others recalled students emailing or contacting them to ask if they were meeting the LOs on an assignment:

*I get emails, lots of emails. Sometimes I’ll get assignments saying ‘Look, have I met the learning outcomes?’* UnA2

Educators also communicated with service managers and practice mentors who assess student competence in practice:

*We go out once a year, not necessarily* [to] *the managers but the workplace mentors, who are doctors, and we work with the elements of the assessment and LOs that are* *relevant to clinical practice because the medical mentors are responsible for signing the students off in clinical practice. UnB2*

Educators also discussed the module with service managers who were not clinical assessors. These discussions only sometimes focused on LOs but more often emphasised the roles students would be able to fill on module completion or the practicalities of study:

*They* [LOs] *are discussed in terms of the expectations of each module and what the manager’s responsibility is in either facilitating the education or ensuring that the student is released to be able to have time with their educators.* UnB1

#### Student and manager questionnaires

Evidence from the questionnaires indicated that student engagement with LOs typically took place after the module had started. Although almost every student reported having seen the LOs before completing the questionnaire, one had not and one was unsure. Less than a third of students reported having looked at the LOs before undertaking the modules. Ten managers indicated that they had discussed the LOs with the student they managed. Two managers stated they had not seen the LOs before completing the questionnaire.

### *Expectations of the modules*

Interviews with educators suggested that their expectations of the module differed from those of students and employers. They reported that students expected an experience which stressed the development of concrete clinical skills and understandings specifically related to their workplaces:

*I think sometimes what they* [students] *arrive wanting is just tell me how to – you know, the clinical skills; show me how to examine a chest and how to do this and how to do that, and they don’t always think that maybe the consultation skills are important.* UnA1

While educators also wanted students to develop clinical skills, their focus was on a wider range of skills and knowledge, teaching and assessing both academic and practical LOs. In contrast managers and students were presented as less interested in the academic LOs:

*… you want this academic sort of idea for us as a university, whereas the employers are thinking very much of practically the nurse that’s going to be standing in front of me and what are they going to be able to offer me […] So, to them learning outcomes are – you know, for instance, one of our learning outcomes is something about the national and international development of health professionals and something about the advanced nurse. Employers don’t care about that.*  UnA1

Educators also believed that those LOs focusing on practical skills included a range of competencies which could only be fully developed through a period of sustained practical experience beyond the period of the module. Therefore, the most basic level at which the LOs could be met within the module was that of safe practice:

*I’d like to have a well-rounded, safe, effective clinician at the other end of it. Yes we want to make sure that they meet the national guidelines for training ANPs/ACPs* (Advanced Nurse Practitioners/Advanced Clinical Practitioners). UnB2

#### Student and manager questionnaires

Despite the educators’ reservations about the extent to which the module outcomes met student expectations, the student and manager questionnaire data suggested a different picture. Almost 100% of students indicated that the LOs fully reflected their expectations of the module. The free-text comments which asked students to indicate what the module ‘was about’ were overwhelmingly practical and clinical. Only one comment suggested that the module was not relevant to the student’s particular field of work. Students indicated the modules prepared them with the knowledge, skills and competence for advanced level practice, with replies such as ‘Core systems, red flags, examination skills, recognising what’s normal and what is not’, ‘Professional progression’ and ‘Being able to assess and diagnose effectively and safely’. Students therefore expected the module to allow them to ‘perform new skills’ and ‘improve patient care’. Managers’ expectations of the module were close to unanimous. The majority expected the module to allow the student to ‘Expand their current role’, ’Perform new clinical skills’, ‘Improve patient care’, ‘Develop professionally’ and ‘Gain confidence in his/her role’.

## Discussion

This project set out to explore how LOs were understood by different stakeholders –

educators, healthcare students and managers. It was found that LOs were derived from several sources and constructed to meet both educational and managerial purposes, although the managerial dimension was somewhat muted in participant accounts. In their description of the role of LOs within their modules, educators emphasised the assessment of learning. They also stressed that students did not fully understand or ‘use’ LOs in preparing assignments, partly because they weren’t seen as important and partly because of lack of clarity in expression. However, data from students and managers dispute this view, in part, and emphasise that they were more focused on clinical and workplace relevant aspects. Educators confirmed the clinical and, in particular, workplace-specific focus of students and managers, noting how this contrasts with the broader clinical **and** academic focus of ‘the academy’.

As set out in the introduction, the construction, delivery and experience of LOs involves a cascade of interpretations, each shaped by several sites of influence and promoting particular perspectives of what constitutes *worthwhile learning* (Hume and Coll 2010). Similarly, as illustrated in the present study, appreciating how students, educators and workplace managers understand the LOs in CPE modulesinvolvesrecognising this cascade of interpretations. Consequently, we suggest there will be a distinction between LOs as intended and how they are enacted by the educator and experienced by the student. This therefore sets up a clear delineation between LOs-as-intended, LOs-as-enacted and LOs-as-experienced.

In the current study, LOs were a focus for establishing curriculum intentions and module planning. However, the unequivocal nature of LOs-as-intended belies the diverse and broad set of curriculum intentions from which they are derived. The requirements of statutory and regulatory bodies, policy documents, role descriptions, workplaces *and* academic requirements for postgraduate study reflect, what Schubert refers to as, a diverse set of socio-political and economic contexts and mandates (Schubert 2010). LOs therefore are a bricolage derived from a range of policy-academic-professional imperatives. As such, they have value in their potential to harmonise the educational experience with a broad range of imperatives (Sweetman 2019).

LOs-as-intended were interpreted further through the lens of university governance – the conversion into ‘university speak’ for curriculum approval. While noting the challenge of getting written expression right (not so many LOs as to be overwhelming or so few as to become ambiguous and non-specific), participants’ indifferent accounts of these bureaucratic requirements contrast with the prevalent accounts of the distorting effect of managerial or bureaucratic control and accountability (Hussey and Smith 2008). LOs were therefore presented primarily as devices to guide teaching (and assessment) but presented in a format to meet university requirements.

Theoretically, the underlying premise regarding the connection between LOs-as-intended and student achievement lies in the pedagogical process of constructive alignment (Biggs and Tang 2011). The introduction of LOs has been presented in the literature as provoking a shift from a teacher input model to a student-centred output model (Bleiklie *et al.* 2017). However, in this study, educator accounts of the link between LOs and the overall teaching strategy, learning activities or the student learning process were either vague or entirely absent. LOs were presented as akin to educational bookends, communicating expectations at module start and assessment of performance at module end. Sweetman (2017) notes a similar finding in her work but in a later paper (Sweetman 2019) she argues that this is not so much about educational inadequacy but a problem of scale. LOs are more helpful for articulating to stakeholders what the module is about but unsuitable for planning day-to-day learning activities.

Given that learner subjectivity and context give rise to varied responses to any learning opportunity (Billett 2004; Hodkinson *et al.* 2004), the way in which LOs-as-experienced were distinct from LOs-as-intended dominated the participants’ accounts. While educators reported that students misunderstood or simply ignored LOs, the quantitative data from students presented a contradictory view. Students reported they understood the LOs but emphasised clinical or workplace-specific skills. Managers had a similar response. Student or practitioner focus on the clinical over the academic has been considered elsewhere (Landers 2000). Similarly, it has also been noted that nursing students (and students more generally) can be less engaged with those aspects of the learning experience which sit outside their imagined destination as practitioners (Fenton-O'Creevy *et al.* 2014). Consequently, it appears that the role of LOs in guiding the learning process is not unequivocal. LOs themselves were therefore contested, based on the students’ and managers’ professional priorities and the educators’ academic and institutional goals.

**Conclusion**

The original premise for this study lay in an awareness that some alignment of perception across practice and HE is necessary to achieve an impact on professional practice (Clark *et al.* 2015). Consequently, the study investigated how educators, healthcare students and workplace managers understood a key aspect of that impact by focussing on the LOs of four continuing professional education modules in two universities in England.

Our findings indicate that there are differences between educators, healthcare students and workplace managers in terms of which outcomes they prioritise. The educators viewed LOs as a bricolage of a variety of curriculum intentions but primarily as a pedagogical tool to establish educational purposes. This suggests that the oft-cited critique of LOs as a managerial device (see Hussey and Smith 2008; Bleikle *et al.* 2017) can be overplayed. Furthermore, while the educators understood that LOs should guide the learning process, they emphasised assessment rather than the alignment of teaching and learning activities. LOs therefore may promote some degree of transparency for students preparing their assignments but their use in aligning teaching or, as suggested by Sweetman (2017), in safeguarding against weak teaching practice, is more ambiguous.

Nuanced differences are observable between the perspectives of educators, healthcare students and managers, suggesting that Branceleone and O’Brien’s (2011) tongue in cheek description of LOs as offering a predictive promise is limited by healthcare students and managers’ particular priorities. Healthcare students and managers prioritised clinical and workplace-specific skills whereas educators focused on a broader range of outcomes. While healthcare students and managers reported finding LOs clear, educators reported that students often misunderstand them.

When Morcke *et al*. (2006) also found divergent views between different parties involved in education, they advocated acknowledging and incorporating these differences into the educational experience. Moving beyond this current study, discussing the LOs with students, explaining how academic outcomes complement clinical outcomes, and inviting students to surface their own priorities in the experience would be of value. That LOs may not be fully understood without first attaining them should also be acknowledged. A more personalised educational experience or at least one which is rendered more personal through discussion has much more resonance with the student-centred nature of LOs.

LOs play a prominent role in the educational process. In this study they were discussed with students at the module start but very rarely with managers sponsoring the study of their employees. Given that greater alignment and integration between HE and the workplace may facilitate impact (Clark *et al.* 2015), joint discussions about educational outcomes will be of value. However, while LOs may have the potential to clarify to stakeholders what professional education can do, it may be that LOs are not the format preferred by managers (Ewell, [2007](https://onlinelibrary-wiley-com.libezproxy.open.ac.uk/doi/full/10.1111/ejed.12202#ejed12202-bib-1001), cited in Sweetman, 2017). A different approach could be to co-construct outcomes with managers, although this might not be achievable depending on the scale of provision. Furthermore – and perhaps more radically – a discussion of an alternative to LOs could be of value such as ‘practice’ attributes or practitioner profiles.

This paper has explored understandings of LOs. This topic rarely receives scrutiny despite their centrality in the educational process and the considerable attention given to educational impact. Further work with a larger sample would be of benefit. Similarly, surveys with workplace managers rarely receive attention and further research exploring the perceptions of outcomes of students and their specific managers is likely to generate further insight.

**Declaration of interests**

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1. Code UnA/B denotes which of the two universities. Numeral indicates participant number from that university. [↑](#footnote-ref-1)