Reducing teacher workload

Research report

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Research topic

Our small-scale research project focused on one of the Review Group's two key recommendations: the importance of clarity around the purpose of data collection. Recently there has been an increased emphasis on the importance of inter-professional learning where members of different professions learn with, from and about each other to improve collaboration and the quality of care and services (CAIPE, 2016). It has been argued that teacher education should be looking to align itself more closely with the principles of medical education with Furlong's (2014) review for the BERA-RSA Inquiry recommending the establishment of a national strategy for teacher education and professional learning that reflects the principles of research-informed clinical practice. Many teachers experience the collection of data as an end in itself and without clarity of purpose they can lack confidence in dealing with data which in turn increases their workload. Doctors are often more confident in their use of data and we wanted to see whether some of the principles which underpin the medical profession's approach (e.g. Atul Gawande's work as a key ambassador in using data to initiate cycles of change) could be helpfully applied to schools.

Review Group Recommendations

Our research project was underpinned by the Review Group's recommendation that having a clarity of purpose around data collection is vitally important. The Review Group's report also identifies the need for 'broader professional pedagogical conversations' and we, therefore, sought to establish a collaborative project involving teachers and medical professionals which aimed to reduce workload by empowering teachers with an awareness of the potential of data for 'improving the life chances of our children' (Costello, 2016).

Approaches to reducing workload

We anticipated that the project would lead to a reduction in the participant teachers' workloads by empowering them to do something different in their approach to data and making them feel more confident about the purpose and potential of data in their school settings. Our ultimate goal was that data can and should motivate change and underpin progress rather than be seen as an additional burden that needs to be 'managed'. As the Review Group notes, we need to be having deeper conversations around data and it was hoped that this project would be an important part of the 'first tentative steps of long term systemic change'. Ultimately this exploratory project was designed to see the degree of application of healthcare approaches to teaching, as perceived by teachers on the ground.

We anticipated the quantified benefits of the project to include an increase in the participant teachers' confidence levels in relation to the clarity of purpose of data collection and a greater awareness of the potential of data as a stimulus for change and

progress. This would stem from the teachers using a change management model to identify what they would ‘stop, start, continue doing’ in relation to data and creating an associated action plan. This, in turn, would contribute to a reduction in their workload or at the very least, their perception of their workload. We expected to build a purposeful and sustainable inter-professional network involving teachers and medical professionals which could underpin future collaborative projects. We measured the impact on teacher workload by collecting data about the participant teachers’ attitudes towards the purpose of data collection in their school settings at two focus groups. We used qualitative methods of data analysis to code the participants’ responses to see if there had been a change in their attitudes and a Likert scale response questionnaire to discern whether there had been a reduction in their workload or their perceptions of their workload.

Research Projects

Our innovative, interdisciplinary project set out to investigate whether some of the principles which underpin the medical profession's approach to using data can be helpfully applied in schools. Ten participant teachers were selected from a range of schools in the Jurassic Coast Teaching Schools' Alliance.

Focus Group 1

This Focus Group was used to investigate the current attitudes of the participant teachers towards the purpose of data in their school settings. Pair and whole group discussions were used to identify broad themes and then individual questionnaires were used to gather both quantitative and qualitative data from the participant teachers. Analysis of the data confirmed two of the key findings from the Review Group – there was a lack of clarity around the purpose of data collection and approaches taken to data collection and analysis can impact negatively on teacher workload (see Figure 1 and example comments below).

Q21 In what ways does data impact on your workload?

'It is my workload – along with marking'.

'It puts an enormous amount of stress to get data collected and to make sure that the data doesn't reveal any inadequacies in my teaching'.

Interdisciplinary Event

Our academic partner for the project (Professor Karen Mattick, The University of Exeter Medical School) secured the support and commitment of four clinicians (three GPs and a consultant surgeon). An interdisciplinary event with participant teachers and medical stakeholders was held with the aim of professionals learning with, from and about each other. Each clinician gave a 10-minute presentation in which they focused on a different aspect of data in their professional roles (e.g. population data; data for improvement; practice level data; data for appraisal). The participant teachers then discussed the approaches taken with the four clinicians individually. During the presentations and discussions, the participant teachers were asked to take notes on similarities and differences that they noticed between the ways teachers and clinicians use data.

Focus Group 2

The primary purpose of Focus Group 2 was to identify findings from the interdisciplinary event and to use these to inform individual action planning (see Figure 2). Each participant teacher created an individual action plan which they took back to their schools to disseminate the project findings through meetings, CPD sessions, staff briefings, newsletters etc. The action plans identified what the participant teachers would continue,

stop and start doing with data and what their immediate next step was. The immediate next steps included:

- ‘Ask for additional training in the interpretation of data’
- ‘Look at more longitudinal data’
- ‘Reinstate the need to talk about class data’
- ‘Ask Leadership Team about why we collect data’

Limitations

A key limitation in the research design can be found in the sample of participant teachers. We had hoped to have a balance of primary and secondary participant teachers but we were only able to secure the commitment of one primary colleague which meant that the other nine were secondary specialists. However, the primary participant is also an SLE so it is hoped that the project findings will be able to be disseminated widely to primary colleagues.

We were very mindful that our project was both small scale and exploratory. We have not sought to make any generalisations based on a sample of just ten and we were conscious at all stages that we could not assume that it would be possible to apply approaches used by clinicians to teaching.

School Culture

This project was dependent on the support and commitment of headteachers from schools in our Teaching School Alliance. The JCTSA is a supportive and sophisticated network which has developed strong ties since 2011. From the outset, the JCTSA has worked cooperatively to ensure the development of the Alliance and to help foster an atmosphere of mutual support and engagement. Without this, the project would not have succeeded. Headteachers not only had to agree to release their staff to take part in three half-day events but they had to be open to the idea that current practice in their school was going to be critiqued and that anonymity at the face-to-face events was not going to be possible with a sample of ten. We did, of course, ensure that no schools were identified in the reporting and dissemination of findings.

Conclusion

This project was very effective in terms of highlighting current practice and suggesting alternative approaches and ways of thinking in relation to data. The method and findings have been shared widely, both within the TSA and across the region at conferences. Although it is unlikely that other schools would be able to replicate the interdisciplinary nature of the research design, it has shown how important it is to have open and honest conversations around the purpose of data collection in schools. The change management model ('stop, start, continue doing') could be used as a starting point for any school wishing to analyse their current practice.

The teachers and the clinicians really valued the opportunity to learn with, from and about each other. Useful links have now been forged and there is very much a shared appetite for seeking out future interdisciplinary research collaborations.

Statement (n = 10)	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
I understand why my school collects data about its students	3	5	1	1	0
The data which is available is useful to me	1	7	1	1	0
My school only collects data which is likely to have a positive impact on student outcomes	0	3	2	4	1
Data is presented to me in a format which I find useful	1	3	3	3	0
I would like more training in how to interpret data	4	3	1	1	1
My school places too much emphasis on data	1	2	4	3	0
I know who to ask in my school for guidance about data	3	4	3	0	0
My school collects data mainly to satisfy Ofsted	1	3	1	4	1
Collecting data about my students has led to improvements in learning	2	3	2	3	0
My school collects data for the sake of it	1	2	1	7	0
I am confident that I can interpret data effectively	2	6	2	1	0

Statement (n = 10)	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
My school has a clear policy about the purpose of data collection	0	0	7	1	2
Collecting and analysing data has a minimal impact on outcomes for my students	0	2	3	5	0
Data collection in my school is driven by a desire to improve student outcomes	1	6	2	0	1

Figure 1: Findings from Likert scale response questionnaire at Focus Group 1

Source: Focus Group 1

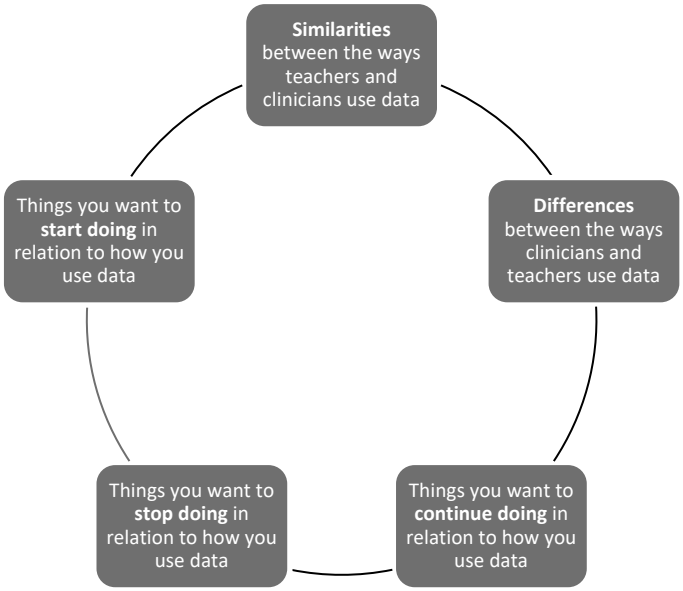

Figure 2: Planned outcomes for Focus Group 2

Source: Focus Group 2

References

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Costello, L. (2016). Eliminating unnecessary workload associated with data management, DfE: London

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