Report Pro Forma

Simulating Experiential Learning: Role-Play or Simulated Face-to-Face Interaction

1. State the name(s) of the project team leader(s) and Employee ID number(s)
   Project team leader: Deepa Rao, Employee ID number: 110759

2. State (a) the title of the project, (b) anticipated completion date, (c) total amount of grant, and (d) amount of funds still to be allocated to project.
   (a) the title of the project: “Simulating experiential learning: role-play or simulated face-to-face interaction”
   (b) anticipated completion date: December 2009
   (c) total amount of grant: $9954
   (d) amount of funds still to be allocated to project: none

3. In one sentence, summarise the original anticipated outcomes. Note if there has been any alteration to the anticipated outcomes as a result of the project implementation (see #5 below).
   Development of best practice approaches to the use of role-play or simulated face-to-face interaction approaches in teaching particularly the Pharmacy program

4. Outline the principal accomplishments to date. What is/are the milestone(s) just completed? How have they been achieved and the grant funding received acquitted.
   Principal accomplishments to date:
   1. Conduction of interviews with course coordinators to discuss current practices in the use of face-to-face role-play in teaching across various disciplines such as education, occupational therapy, physiotherapy, law, outdoor education, nursing, computer and information science and pharmacy.
   2. Conduction of a workshop to facilitate discussions around development of a best practice model for role-plays in teaching.
   4. Implementation of the practice approach for role-plays in a first year Pharmacy course
   5. Evaluation of the practice model used in a first year Pharmacy course

The grant funding received was acquitted in the following ways:

   1. Remuneration for Project Officer for work done until 30th November 2008 - $2421
   2. Hiring of venue for workshop - $375
   3. Hiring of equipment for workshop - $25
   4. Refreshments for workshop - $405.90

5. If circumstances have changed re the project implementation, state them, and briefly identify the problems encountered and the measures taken to overcome same.

   - This project was to be conducted in two phases. Phase 1 was the development of a best practice model of role-play in teaching. Phase 2 was the evaluation of the developed practice approach. The two phases of the project were to be completed in
a period of 12 months (i.e. by December 2008). While Phase 1 of the project was completed on time, Phase 2 of the project could not be completed on time due to unforeseen circumstances not under the control of the research team.

- The evaluation of the practice model was to be undertaken with a pharmacy course offered in Study Period 5 2008. However we were unable to start this on time as the Project Officer had to take some time off in the second half of the year to complete her University degree. Extension to complete Phase 2 of the project was requested and granted.
- To complete Phase 2 of the project we recruited another Project Officer. We have now completed both phases of the project as indicated in the original grant application.

6. List any highlights, or challenging and surprising aspects of the project. Note if there have been any unexpected outcomes to date.

The **highlight** of the project has been the enlightening and stimulating discussions surrounding the use of role-plays in different courses and programs in the University. This has led to the development of a practice model that incorporates the best aspects from all of the approaches used by the participating course coordinators in various courses. This approach was implemented in a first year Pharmacy course and the results of the evaluation have led to the modification of the model to improve student outcomes.

The **surprising** aspect of the project has been the revelation of the different definitions of role-play and the different ways in which role-plays are used in different programs.

7. Summarise engaged dissemination activities undertaken thus far.

- A website has been created to allow dissemination of findings and to provide updates on the progress of the project. http://www.unisanet.unisa.edu.au/learn/UniSAnet-1D/?PATH=/Resources/sel/Simulating+Experiential+Learning/&default=Introduction.htm
- The results from the data analysis of Phase 1 were forwarded to the participants for comment.
- A manuscript on the developed model has been submitted for publication to an international peer reviewed journal ‘Innovations In Education & Teaching International’. The manuscript is currently under review.
- Another manuscript entitled ‘Evaluating the effectiveness of a process using simulated role-plays in a first year pharmacy course’ has been submitted to an international peer reviewed journal ‘Pharmacy Education: An International Journal for Pharmaceutical Education’.

8. Conclude by requesting the release of funds (state amount as budgeted in the grant application) for the next stage of the project.

The **entire amount as budgeted in the grant application has already been released to the project team.**
Project concept, pedagogy and educational value

This proposed project was prompted by work already undertaken by some members of the project team. Results from the 2006 Carrick funded pharmacy discipline initiative project – ‘Quality Indicators for Best Practice Approaches to Experiential Placements in Pharmacy Programs’ indicate that Australian University Pharmacy departments currently have very variable arrangements for placements –regardless of the structure for each University the following comment typifies student concerns around experiential learning- ‘in fourth year... you’re trying to work out everything at once’. Community stakeholder consultations in the work described above highlighted the fact that more University-based learning opportunities were needed, potentially in the earlier years of a degree, to build communication skills. An example of such an ‘opportunity’ would be the use of role-plays to improve communication skills of students (particularly EAL students- those for whom English is an additional, and not their native, language) as preparation for, and, to complement, the skill development which occurs during experiential learning opportunities.

Role-play, along with gaming and computer simulation, is considered to be a type of simulation and has been described as either interactive whereby participants act out the role of a character in a particular situation following a set of rules, or non-interactive whereby a presentation is made by a participant who has adopted a particular character (Lean, Moizer, Towler, & Abbey, 2006). It has been suggested (Maier, 2002) that the role-play method be selected according to the educational role. For example, role-plays can be valuable teaching approaches for knowledge acquisition, particularly if observation of others is involved, and understanding and assimilation of such information is important. With respect to attitude development, spontaneous emotions may be important; for skills acquisition the opportunity for repeated opportunities with feedback is critical. Role-plays have been shown to enhance active-listening skills, social problem-solving skills and demonstration of emotional empathy in the area of hostage negotiation (Van Hasselt et al 2005) and to foster team work in aviation (Beard, Salas and Prince 1995). However these skills are also highly desirable of professionals from different disciplines particularly the health sciences. Thus role-plays can be a highly effective approach to develop these skills.

Although in the Carrick funded pharmacy discipline initiative work described above, role-play is suggested as an approach, which can be used to develop communication skills, role-play in the UniSA Pharmacy program also tests skills around problem solving therapeutic issues and hence aims to develop knowledge) in a clinical context. Attitudes in terms of appropriate professional behaviours are also addressed.

Guidelines for effective role-play or simulated face-to-face interaction in medical programs include adequate preparation, alignment of roles and tasks with level of practice and structured feedback guidelines (Joyner and Young, 2006;Nestel and Tierney, 2007). A systematic search of peer reviewed higher education literature has not located a developed typology of role-play to provide higher education teachers indications of approaches which could be best used to provide role-play learning opportunities to promote cognitive, affective and psychomotor domains of learning.
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by students. There is no comparative work which details student guidelines, assessment approaches, assessment validation, structure of feedback and its provision.

This project investigated practices in the use of face-to-face role-play in teaching with the aim of developing the best approaches to role-play in the Pharmacy program. The results will also enable other academic discipline areas using role-play to consider other aspects and approaches in the use of role-play. Role-play or simulated face-to-face interaction is already used in the Pharmacy program- the question faced by the project team is whether the approaches used are those which best achieve its ambitions.

Over the past years various approaches have been used in the UniSA Pharmacy program: multiple summative group tasks with one student undertaking the role-play, or multiple individual formative role-play tasks and one summative role-play. Role-plays have often involved tutors in the role of ‘patient’, and more recently, actors have been used in the summative role-plays. However, each approach has its drawbacks, and the optimal approach is yet to be developed.

Changes to the role-play approach used have not always been made after systematic evaluation, but rather after consideration of issues that have arisen with each of the formats. Regular evaluation of teaching and teaching practices is the cornerstone for high quality learning in a higher education setting (Mikilewicz 2008). Engagement with evaluation must be employed at all levels of University teaching to understand the impact of teaching on student learning (Ramsden, 2003) and for quality assurance purposes (Ellis, 1993).

Therefore the principle aims of this project were

1. To investigate practices in the use of face-to-face role-play in teaching across various disciplines in the University and
2. To develop best practice approaches to the use of role-play or simulated face-to-face interaction approaches in teaching particularly the Pharmacy program.
3. To evaluate the effectiveness of the best practice approach developed in developing essential pharmacy practice skills in a first year pharmacy course.

Methods:

The study was approved by the University of South Australia Human Research Ethics Committee. The project was conducted in two phases.

Phase 1 - development of a best practice model of role-play in teaching: An email detailing the project was sent to a course coordinators list across the University. Course coordinators that employed the use of role-plays as a teaching and learning tool were invited to participate in the project. Eight course coordinators/teams were interviewed in a semi-structured interview to identify a series of features around the courses and the use of role-play. The courses were purposefully selected to reflect a diverse range of disciplines. The features of the course explored in the semi-structured interviews included the aims of the course, the purpose of the role-play, in
particular whether the purpose was around student learning of knowledge or professional skills and attributes or indeed a combination of these, and/or whether a primary intent was the development of communication skills; the motivation/reasons for introduction of the role-play; the physical “set up” of the interaction- students, tutors, physical space and arrangement, length of role-play; information given to students before role-play in relation to expectations and projected specific learning outcomes; assessment of role-play, assessment proforma, feedback provision e.g. by tutor or through peer evaluation, grade distribution, comparison of assessment of role-play with other assessment methods in the course; student satisfaction and reflection by the students on the activity generally and its structure or relative lack of structure; changes in the way the role-plays had been run over time i.e. with each iteration of the course; what worked, what didn’t with respect to running the role-plays and what sort of scaffolding was provided. An example of a typical scenario was also requested during the interview.

The interviews were transcribed, and key themes arising from the interviews were collated and analysed through manual processes involving sorting of notes; reading through information to make general sense; recording of thoughts about the data and organising material into categories (Strauss, 1998 #172). A draft discussion paper presenting key themes from the interviews was distributed to the interviewees four days prior to a one day workshop for all project participants. The purpose of this workshop was to provide an opportunity for collaborative examination of the draft paper. A final discussion paper was distributed to all participants. Feedback around the applicability of the typology and guidelines was subsequently sought from the participants.

Phase 2 - Implementation and evaluation of the developed practice approach:

A combination of qualitative and quantitative approaches were used to collect data. Data were collected through

1. A survey of students enrolled in PP1A: A paper copy of the survey was administered to students present for a lecture towards the end of the semester. One hundred thirty students were enrolled in the course, however the level of participation at the lecture on the day of administration of the survey is unknown. All completed surveys were coded and data for each of the questions including open text responses were entered into Excel-Microsoft 2009. Quantitative data were analysed using descriptive statistics. Text based responses were collated and thematic analysis performed on the content to identify themes by constant comparison method. Data were identified, coded and categorised into main themes or patterns (Aronson 1994).

2. An analysis of all pharmacy practice assessments (n=130) including role-plays and case notes to compare outcomes with the original objectives of the workshops. All 130 student assessments, which were de-identified, were included in the analysis. Students were assessed for verbal communication
skills in role-plays. The case notes were assessed for accuracy of documented information. Data i.e. assessment marks were entered into Microsoft Excel 2009. Descriptive statistics are reported.

Results

Phase 1: A brief summary of the role-play scenarios is shown in Box 1. A prospective typology of role-play types was derived from the findings of these scenarios and included three categories namely ‘Role-Switch, ‘Acting’ and ‘Almost Real-Life’ (Figure 1). This typology emerged from the thematic analysis of the transcripts of individual interviews, and has been supplemented by reference to workshop discussions. The typology is further described in Table 1. A set of guidelines (Box2) for using role-play was also developed from the findings of the interviews.

Phase 2: A total of 58 surveys out of a possible 127 were returned with a response rate of 46%. Out of the 58 respondents, 20 were males and 38 females; 33 were local and 25 international students. Fifty five students were 24 years old or less while 3 students were 25 or older. The perceived usefulness of the model in developing information gathering skills, the demonstration role-play and practising documenting case notes was found to be generally high among the students although students found the background information provided prior to the workshops only slightly to moderately useful. Students also provided feedback on how the approach could be improved. These are related to size of the groups, variety of cases, provision of examples and need for more feedback. A majority of the students also reported acquiring skills in the areas of developing professional attitudes, accurate documentation, obtaining accurate patient history, communications skills, active listening and framing appropriate questions. However the response for skills such as developing professional attitudes and accurate documentation of information was less than satisfactory with only 64% and 67% of respondents believing they had acquired these skills. International students scored less than their local counterparts on all the items.

The assessments including role-plays and case notes were analysed for verbal skills and accuracy of documented information. Each student was assessed for demonstration of verbal skills during the role-play and was given a grade ranging from High Distinction to a Fail. A majority of the students (84%) achieved a grade of Credit or higher i.e. exhibited an excellent or outstanding performance for verbal communication skills.

The case notes from the assessments were analysed for accuracy of information by comparing the number of correct items documented on the case notes to the total number of correct items presented in each scenario. For the four scenarios with 23 pieces of correct information, the average number of correct information was 12.7 (56.5% of information correct) while for the remaining five cases with 18 pieces of correct information, the average was 12 (66.7% of information correct).
Discussion:

The typology developed in this project provides a tool to assist in the development of best practice approaches to using role plays within higher education. Based on the objectives for the use of the role-play it provides a means of determining what kind of role-play might be suitable. Miller’s triangle describes a framework for clinical assessment (Miller, 1990) and has been used as a model to display levels of fidelity of simulation approaches (Alinier, 2007). We have adapted Miller’s triangle to display our proposed typology (Figure 1). Unlike Miller’s triangle we have not focussed on competency assessment but on representing the focus of activity and its complexity. Some role-play approaches i.e. the “role switch” represent an engaging approach to teach course content - the “know” dimension. The acting approach in which students play out and/or explore a scenario is related to “knows how” and “shows how”. The “almost real life” is shown at the level of students “doing”. This level corresponds to use of high fidelity simulation platforms in medical education (Alinier, 2007).

The results from the survey suggest that the model was perceived to be useful in developing the required skills necessary for the practice of pharmacy although there were a number of suggestions for improvement. Areas such as the provision of feedback and the quality of background information provided for both role-plays and case notes were found to be lacking. There is no doubt that providing feedback to students on their performance is crucial to their learning (Gibbs and Simpson 2004). Feedback is necessary for students to become competent practitioners (Costa 2006, Bernard and Goodyear 2009). This is particularly important for first year students who haven’t been exposed to any form of professional practice and are therefore dependent on feedback and guidance to hone their skills. Lack of quality background information on the expectations and process for the role-plays was also a concern. Clarifying expectations, objectives and assessment criteria is essential to increase acceptability among students and to ensure the desired student outcomes (Ramsden 2003).

Student perceptions of the usefulness of the model in acquiring necessary skills were found to be generally high except for developing professional attitudes and accurate documentation of information. Possible explanations for this could be the lack of understanding of what is meant by professional attitudes or a lack of recognition of the skill. The low response for accurate documentation skills could be related to the perceived lack of knowledge around expectations and lack of feedback. The results are consistent with the findings from the assessment which suggest that accurate documentation of information is an area that needs further attention. Some areas of concern are the disparity in perceptions among local and international students in the area of documentation and developing verbal communication skills.

Some recommendations arising from this study include.

- Improving the quality of the written background information provided to students. The portfolio can include several written examples of case scenarios and pharmacist-patient/customer interactions that embody the required patient care skills required of pharmacists.
Several demonstration role-plays that include both positive and negative interactions i.e. what is required and what should be avoided. Debriefing is important i.e. what went well, what did not, alternative strategies, after each demonstration role-play and to allow students to critique the demonstration role-plays using assessment criteria.

Training both observer and the simulated patient to provide constructive feedback to their peers to encourage self-assessment and peer-assessment. This is a life-long skill that is necessary for reflection in professional practice and under these circumstances will decrease reliance on tutors for feedback.

Limitations: There were several limitations to the study. The analysis of pharmacy practice assessments was restricted to assessing verbal skills and documentation of case notes. Skills such as professional attitudes could not be measured in this study. Future research could include developing measures to assess acquisition of professional attitudes. Also accurate documentation of information was used as evidence for acquisition of other skills such as framing appropriate questions, active listening and obtaining accurate patient history. However this is not a reliable measure as there could be several reasons for why students may have not documented the information correctly including not being able to recollect information gathered under stressful exam conditions. Alternate measures for assessing skills could be used in future studies. Another limitation is the lack of knowledge of response rate. This could be overcome by manually counting the number of students that attend the lecture on the day of administration. The participation rate can also be increased by administering the survey on the day when most students are expected to attend for e.g. revision lecture or a guest speaker.

It is important that regular evaluations be conducted to prove the effectiveness of teaching strategies or to improve practice (Rogers and Smith, 2006 cited in Smith 2006). Therefore as part of the strategy for embedding and maintaining change beyond the term of this grant, systematic evaluations to the role-play approach will be conducted for this course every year with the intention that the instituted change will improve student learning.

Outcomes of this project:

Feedback from the participants, around the applicability of the typology and guidelines, has been positive. One participant will be using the findings of the study in a workshop to discuss and develop good practices in the use of role-play in his discipline - Outdoor Education.

‘I will be drawing upon some of the categories that have emerged regarding the use of role play, the limitations and the assessment examples…. I hope to emerge from the workshop with specific examples which illustrate these categories, and feedback on whether they were useful when constructing learning experiences’.
We have several publications arising from this project. One manuscript entitled ‘Exploring the potential of role-play’, has been submitted to an international peer reviewed journal ‘Innovations In Education & Teaching International’. The manuscript is currently under review.

Another manuscript entitled ‘Evaluating the effectiveness of a process using simulated role-plays in a first year pharmacy course’ has been submitted to an international peer reviewed journal ‘Pharmacy Education: An International Journal for Pharmaceutical Education’.
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Bibliography:


Gibbs G and Simpson C 2004, ‘Conditions under which assessment supports student’s learning’, *Learning and Teaching in Higher Education*, Issue 1, pp 3-31


Mikilewicz S 2008, ‘Guidelines for Evaluation Activities Involving UniSA Students and Staff’, prepared for Planning and Assurance Services, University of South Australia [www.unisa.edu.au](http://www.unisa.edu.au) [accessed on 01/04/2009].


Box 1: Brief description of Role-Play Scenarios used in various courses

1) Early Childhood Education
Students role-play a child of a particular age, other student role-play a variety of skills whereby they scaffold and prompt those children to stay on task, to share etc. In this way students develop a range of skills “like a tool box”. There is an expectation that the students know the interests, needs, and capacities of children from developmental checklists and milestones.

2) Computing
Role-plays are used in a course focussed on computer networking. Each group of four students role-play a computer and each student plays a different layer of software. Messages are sent on pieces of paper, modifications are made as the messages are passed on, with the whole room becoming a network. The role-play occurs early in the semester and is referred back to so that students are helped to appreciate the links between current and previous lecture materials.

3) Physiotherapy
Role-plays are used in a “professional” arrangement and are chiefly used in the teaching of professional skills, practical skills and the learning of communication specific to those skills as well. Students role-play in the physiotherapist and client roles in a range of practical skills such as manual handling.

4) Occupational Therapy
In the first year of the program role-plays are used to build students communication and feedback skills to and start building the process of reflection on their interactions. In a counselling course in the third year of the program students undertake real interviews with other occupational therapy students.

5) Law
Role-plays are used to model professional practice, to enable them to develop a specific communication skill set such as negotiation and to develop teamwork skills. Scenarios include students role-playing lawyers and, for example, the managing partner in a law firm. Practicing legal practitioners also participate.
## Table 1: Typology of role-play

<table>
<thead>
<tr>
<th>Model</th>
<th>Role switch</th>
<th>Acting</th>
<th>“Almost” Real life</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Learning from the inside out (of people or “things”)</td>
<td>Playing out and/or exploring a scenario</td>
<td>Using real life (students own experiences)</td>
</tr>
<tr>
<td>Example</td>
<td>Computer technology Early childhood education</td>
<td>Physiotherapy Occupational therapy, Outdoor education Law Early childhood education</td>
<td>Occupational therapy, Outdoor education</td>
</tr>
<tr>
<td>Principle Learning domains</td>
<td>Cognitive</td>
<td>Affective and psychomotor domains</td>
<td>Cognitive, affective and psychomotor</td>
</tr>
<tr>
<td>Key quotes from course coordinators</td>
<td>“I would say that an essential component of role-play is the ability to switch your own position from your own subjective assessment into seeing how it is from another point of view”.</td>
<td>“it really was around encouraging students to actually use the skills before they go out on placement and are in real situations where we want them to use the skills. It was seen as a safe environment for them to step out into using some of these skills and reflecting on their capacities around those skills.”</td>
<td>“we shifted from role-play to sort of reality in the counselling sessions” “…to develop [self] analysis and …to use experiential learning to reinforce theory”.</td>
</tr>
<tr>
<td>Cautions</td>
<td>Needs to be well set up e.g. background information detailed description of what is required of students</td>
<td>Potential for “acting” as opposed to displaying professional skills Props may need to be available</td>
<td>Some caution with risky topics such as suicide Sensitivity to student trust of each other</td>
</tr>
</tbody>
</table>
Box 2: Guidelines.

- Consider the purpose of role-plays
- Consider the type of role-play
  - Need to consider quality i.e. depth of role-plays or number of role-plays utilised. Which gives more benefit to learner?
  - The size of the groups
  - The roles required
- Provide background information prior to role-play
  - What content knowledge do students need prior to undertaking role-play?
    - May need to provide fragments of starting script
  - Guidelines around respectful behaviour and confidentiality.
  - Expectations
- Determine whether role-play is to be assessable or formative?
  - If role-play is assessed formative practice is necessary prior to summative assessment of the role-play.
  - Assessment criteria with clear rubrics
- Consider whether you will give demonstration of technique and if so will this be before or after the students. Would a demonstration lead to students copying?
- Consider the set up:
  - Consider props to contextualise situation and assist students to visualise roles.
  - Consider rotating groups to avoid bad behaviour/habits being reinforced or a deep relationship between only two.
- Will feedback include peer feedback and how will this be done? Peer feedback may require specific guidelines such as identify one strength, one weakness and one “missed opportunity”
  - Videoing needs to be considered to provide a stimulus for reflection by student.
  - Multiple sources of information should be considered - video plus feedback from client perspective, practitioner perspective, observer perspective.
  - Supervision numbers in our examples ranged from 1-4 to 1-75. Tutor presence may inhibit performance or prevent risk taking by students.
- Overall need extensive pre-activity planning, activity and then debrief.
- Remember that it’s challenging to do role plays and humour is often used to cope with anxiety.
Project Management and Milestones

The project will be managed by the chief investigator Dr Deepa Rao and the project officer Ms Penelope Renc. Each of the stages described above represents a project milestone.

<table>
<thead>
<tr>
<th>Project task</th>
<th>Time frame</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advertising and recruitment of a Research Assistant in the role of a Project Officer</td>
<td>Penny Renc was recruited in February 2008</td>
<td>Completed</td>
</tr>
<tr>
<td>Obtain ethics approval</td>
<td>Ethics application for this project was submitted in March 2008</td>
<td>Completed</td>
</tr>
<tr>
<td><strong>Stage (i)</strong></td>
<td></td>
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<tr>
<td>Contact with Course Coordinators across the University to identify courses that use role-plays</td>
<td>May 2008</td>
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<tr>
<td>Literature review and development of semi-structured questionnaire</td>
<td>May – June 2008</td>
<td>Completed</td>
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<tr>
<td>Recruiting course coordinators for semi-structured interviews</td>
<td>May 2008</td>
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<tr>
<td>Pilot-testing of semi-structured questionnaire</td>
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<td><strong>Stage (ii)</strong></td>
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<tr>
<td>Conduction of semi-structured interviews</td>
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<td><strong>Stage (iii)</strong></td>
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<tr>
<td>Transcription of semi-structured interviews</td>
<td>June 2008</td>
<td>Completed</td>
</tr>
<tr>
<td>Data analysis</td>
<td>June 2008</td>
<td>Completed</td>
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<tr>
<td>Preparation of materials for “Role-play Training Workshops”</td>
<td>June - July 2008</td>
<td>Completed</td>
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<tr>
<td>Dissemination of pre-reading material in preparation for the “Role-play Training Workshops”</td>
<td>July 2008</td>
<td>Completed</td>
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<td><strong>Stage (iv)</strong></td>
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<tr>
<td>“Role-play Training Workshops”</td>
<td>July 2008</td>
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<td><strong>Stage (v)</strong></td>
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<tr>
<td>Analysis of feedback from workshop</td>
<td>July 2008</td>
<td>Completed</td>
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<tr>
<td>Development of model role-play and dissemination of findings</td>
<td>July - August 2008</td>
<td>Completed</td>
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<tr>
<td><strong>Stage (vi)</strong></td>
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<tr>
<td>Evaluation of student and tutor satisfaction and perceptions of role-play approaches pre pilot</td>
<td>August 2009</td>
<td>Completed</td>
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<tr>
<td>Piloting of model role-play approach in various courses in different disciplines</td>
<td>August 2009</td>
<td>Completed</td>
</tr>
<tr>
<td>Evaluation of student and tutor satisfaction and perceptions of model role-play approaches post pilot</td>
<td>November 2009</td>
<td>Completed</td>
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