We started by adapting CliP which worked well in a variety of in-patient settings (acute and mental health) and called it ... a mapping and planning tool that can be used in all health and social care settings. Practice partners must be on board!

The daily learning log can be used as part of an evidence based assessment which reduces the amount of documentation the educator needs to complete. Group initial & mid point interviews also help.

our last few students wont even make a phone call!! how can they assess remotely

please allow a couple of days (sorry I was delayed, will it be possible to access a recording later)

Yes, well share the recording on the HEE website: https://www.hee.nhs.uk/our-work/allied-health-professions/helping-ensure-essential-supply-ahps (sorry I was delayed, will it be possible to access a recording later)

We will be recording todays webinar, you will find it on the HEE website here: https://www.hee.nhs.uk/our-work/allied-health-professions/helping-ensure-essential-supply-ahps
Difficulties with providing community based team placements - we are working from home and travelling around the community is... clinicians are having problems with many not wanting home visits and if agreeable - wanting only 1 visitor at a time.

Learner dyads work really well in community settings. Triads and quads can work well if you have a clear role for senior students as facilitators of 'conversations that matter' i.e. productive reflective discussions, based on their learning logs.

Issue is students having access to IT - they can use Attend Anywhere and Teams on their own laptops, but they can't have patient record systems on their own laptops.

What support will practice providers have to develop these new models? Is this the responsibility of HEIs or from the Trust?

Problems with providing community based team placements - we are working from home and travelling around the community is... clinicians are having problems with many not wanting home visits and if agreeable - wanting only 1 visitor at a time.

Around similar issues - some students have been really overwhelmed and the placement has become overwhelming.

Problems with providing community based team placements - we are working from home and travelling around the community is... clinicians are having problems with many not wanting home visits and if agreeable - wanting only 1 visitor at a time.

Totally agree with a pick and mix approach, I mixed a clip with a little bit of each model throughout Covid. I took the responsibility with the paperwork (learning logs and assessments) and the staff were happy to give learning opportunities.
The current students have shown so much flexibility in COVID and change. We need to keep the flexibility across the whole piece.

Thank you.

Anonymous (Unverified)
It would be useful for a collaborative approach between HEIs and placement providers, as the latter are asking for support when this is new to us too.

Anonymous (Unverified)
Whoever asked about payment from the HEIs to support placements, that is what you NMET money is for - track it down!

Anonymous (Unverified)
Lynn, could you share your email address for SCIP?

very interesting thank you

how can we access the resources

JANE GARDNER-FLORENCE (JANE.GARDNER-FLORENCE@HEE.NHS.UK)

What about resources to facilitate remote working? Is the expectation that Trusts will provide laptops for students or should this be provided by the HEI?

Do the clinical supervisors work for the trust or the university?

Liz Hagon (Unverified)
My current placement involves 2 days with 1 educator in mental health, 1 day with another educator in MSK/occi health, and 3 days with a group of educators in education. Weekends involve teaching, learning from me and improving our communication/team work to ensure I get the best placement possible.

Liz Hagon (Unverified)
Clinicians are not always welcome at the moment let alone students.

Lynn Carpenter (Unverified)
It would be helpful if HEE could develop some examplar SOPs to support faster implementation around governance, tech... adapt for individual needs. It would save huge amounts of time across the country without everyone trying to do the same.

Anonymous (Unverified)
HEI don't give us time to prepare.

Anonymous (Unverified)
Can the clinical supervisors work for the trust or the university?

Anonymous (Unverified)
Can you share some resources for educators to develop their skills in the coaching approach?

Michael Mandelstam (Legal Consultancy) is doing open access talks on legal issues surrounding tech use 15th July and 20th July may be of interest to those with legal concerns.

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We have only seen your title slide so far Sophie...

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Anonymous (Unverified)
Can you put up your presentation link again?

Anonymous (Unverified)
Anonymous (Unverified)
Anonymous (Unverified)
Anonymous (Unverified)
We have only seen your title slide so far Sophie...

ZOE (Unverified)
Can we look at split placements with HEI and Provider? Perhaps increasing access to sim environment within HEI?

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Clinicians are not always welcome at the moment let alone students.

We have only seen your title slide so far Sophie...
Question: Anonymous (Unverified)  When is the other webinar on role emerging placements please?
Response: David Marsden (David.Marsden@hee.nhs.uk)  tomorrow 4:30
Question: Anonymous (Unverified)  Thank you for such a though provoking and practical talk
Question: Anonymous (Unverified)  What if trusts say they do not want more students, especially in e
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Question: channine (Unverified)  can HEE champion the tariff as we need increase placements in pr
Question: Anonymous (Unverified)  thank you
Question: Jane (Unverified)  thanks
Question: Leanne Evans (Unverified)  Thanks very much
Question: Anonymous (Unverified)  thank you
Question: Jane (Unverified)  thanks
Question: Anonymous (Unverified)  thank you
Question: gwyn (Unverified)  Thanks for hosting this webinar & allowing us to tap into Sophie’s
Question: Anonymous (Unverified)  thank you
Question: Leona (Unverified)  Lots to think about, thank you :)
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Question: Kathy Pantelides (Unverified)  I unfortunately missed the beginning of the presentation - is there
Response: Jane Gardner-Florence (Jane.Gardner-Florence@hee.nhs.uk)  Yes, we'll share on our website here: https://www.hee.nhs.uk/ou
Question: Anonymous (Unverified)  You were going to share the link for the placement slides.
Question: Jane (Unverified)  thanks
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In my experience it's not so much the thoughts of having more than one student in the team at a time that generally puts people off, most people can see the benefits of that. An one student in the team at a time that generally puts people off, most people can see the benefits of that. In my experience it's not so much the thoughts of having more than one student in the team at a time that generally puts people off, most people can see the benefits of that. In my experience it's not so much the thoughts of having more than one student in the team at a time that generally puts people off, most people can see the benefits of that. Any suggestions for streamlining the 'paperwork' process?

Yes, well share the recording on the HEE website: https://www.hee.nhs.uk/our-work/allied-health-professions/helping-ensure-essential-supply-ahps (sorry I was delayed, will I numbers so have pushed for split placements but they have not been recieved well by students. I suspect we r numbers so have pushed for split placements but they have not been received well by students. I suspect we r

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offer in our acute and community SLT services. We don't have enough office space for all our staff to come in.

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too, great ideas Thanks you, we do use weekends and MDTs, peer learning is encouraged and def helps capa
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We've used CLiP in the community, which can work very well particulary in GP. Piloted with nursing students but real... We have some research, in
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How to encourage independent learning on a 2:1 model? i.e. if seeing patient with one student making sure the other is doing something productive!! Often find students need
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We are being asked to increase the number of placements that we offer in our acute and community SLT services. We don't have enough office space for all our staff to come in
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It often feels like HEI are so keen to fill placemetns, they send anyone, often disinterested students who make placements extremely hard. WFH also makes taking students real
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We have to work alongside others it is good for them to learn that too, great ideas Thanks you, we do use weekends and MDTs, peer learning is encouraged and def helps capa
It would be very helpful if HEE could develop some example SOPs to support faster implementation around governance, tech set ups, confidentiality etc for TECS placements.

We are keen for students to use peer-assisted learning as a means of understanding how best to use Zoom, MS Teams professionally and learning the etiquette and skills that are necessary.

We have had a great response to our SCIP (student coaching in practice) model, and have really increased our placement numbers. It's a shame that placement expansion bids focus on legal issues surrounding tech use 15th July and 20th July may be of interest to those with IT concerns.

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r-work/allied-health-professions/helping-ensure-essential-supply-ahps(Kathy Pantelides (Unverified) asked "I
model. The biggest challenge is that this then means 2,3, or even 4 lots of paperwork and that's the bit people are far less keen. Any suggestions for streamlining the 'paperwork' process?

I work part-time and would not normally be included in educator numbers so have pushed for split placements but they have a shift in expectations and thinking outside of silos. Tips to support this and maximise opportunities would be great.

Logistical issues to having multiple students on a face-to-face placement - often simply not the room to accommodate the clients. Have carried out peer placements successfully in client groups where too many adults would be intimidating. Have carried out peer placements successfully.

We started by adapting CliP which worked well in a variety of in-patient settings (acute and mental health) and called it a mapping and planning tool that can be used in all health and social care settings. Practice partners must be on board!
put them up on the website? (Unverified) asked "please can you circulate these slides or put them up on the
Trusts could then adapt for individual needs. It would save huge amount of time across the country without ev

us on 1st years only, as this approach requires expansion of 2nd and 3rd years too. We have achieved this, bu

nd 1 day working from home to bring new ideas to the team. It is a lot to learn and take in but I actually love it
We started by adapting CliP which worked well in a variety of in-patient settings (acute and mental health) and called it MIRO, a mapping and planning tool that can be used in all health and social care settings. Practice partners must be on board!
The educators have said how much they have enjoyed teaching, learning from me and improving their communication and teamwork skills.
My current placement involves 2 days with 1 educator in mental health, 1 day with another educator in MSK/occi health, ... teaching, learning from me and improving their communication/team work to ensure I get the best placement possible.