#### Webinar



## Student placement expansion and innovation

Update on the outputs of the online forum and areas of planned future activity

Friday 7 August, 10am



Beverley Harden National Allied Health Professions Lead



Char Hobbs AHP Student Placement, HEE



Janice St. John-Matthews Deputy Head of Department (AHP), UWE, Bristol



David Marsden
Regional Allied Health
Professional Lead across the
North East and Yorkshire



Ruth Allarton HE Advisor -Placement Capacity Project

Developing people

for health and

healthcare

www.hee.nhs.uk

https://www.hee.nhs.uk/AHP-student-placement



## **AHP Student Placement Online Workshop**

Char Hobbs (Student Physiotherapist, AHP Placement with HEE)
Janice St John-Matthews (Deputy Head of Department AHP, UWE Bristol)





# **Section roadmap**

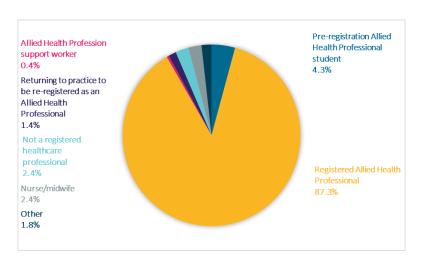
- Aim of Project
- Headline data
- Most popular comments/ ideas
- Major themes
- Council of Deans @150Leaders input



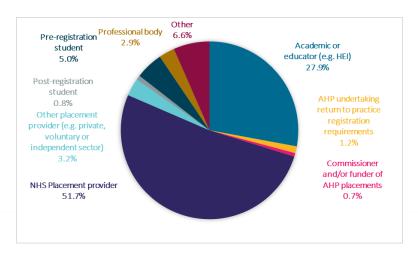
Online conversation: 23<sup>rd</sup> June to 7<sup>th</sup> July Open 24 hours/ 7 days a week



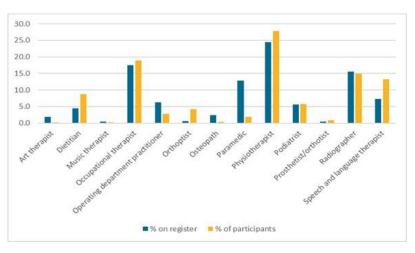
# Participant demographics Health Education England



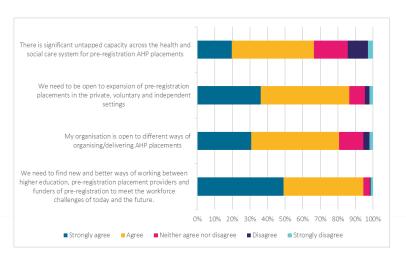
#### **Primary role of participants**



Types of organisations



## Participants by AHP compared with numbers on HCPC register (England)



Views relating to clinical placements



# **Participant location**



Country	%
England	84.1
Northern Ireland	2.0
Scotland	7.9
Wales	3.1
Australia	0.9
Canada	0.4
Egypt	0.1
India	0.2
Latvia	0.1
New Zealand	0.1
Portugal	0.2
Republic of Ireland	0.8
Not stated	0.2



@NHS\_HealthEdEng #AHPPlacements



#### Health Education England

# Popular ideas across the 5 questions

#### 1. Capacity

"Taking students should not be seen as a burden, but an investment in our selves" (118 votes + 17 comments)

"Be creative.."
(85 votes + 12 comments)

#### 2. Quality

"Placements across the year" (44 votes, 11 comments)

"Mindset" (34 votes, 3 comments)

#### 3. Across System Working

"Dedicated (and supported) student co-ordinator roles" (51 votes + 4 comments)

"Advanced clinical educator training ad split academic and trust posts"

(45 votes + 4 comments)

#### 4. Improvement Ideas

"Standardised assessment processes/paperwork and clinical education training"

(40 votes, 3 comments)

"Using placement funding for placements!"

(22 votes, 9 comments)

#### 5. Examples of Good Practice

"Telehealth placements" (30 votes, 4 comments)

"Utilise AHP assistants more in practice learning"
(25 votes, 4 comments)



#### Theme 1

#### Health Education England

### Diversity in placement opportunities

- Skills learned- leadership vs clinical, peer assisted vs 1:1
- Location of placements
- Time and duration and planning of placements
- Individualised journey

"...Why do we not think wider and look at gaining wider experience across the Health & Social care organisations...." "Using the clinical research networks to link AHP students with educators who are actively researching would boost capacity and provide an inspiring placement."

"..The portal offered our Trust an opportunity to offer multi-professional AHP induction and reflective action learning groups. Feedback included 'so great to meet students from other professions - we hear about them but have never met them."



#### Health Education England

## Theme 2

# Improve the process in terms of placement capacity and coordination

- Better planning
- Funding
- Timely provision of information
- Communication between providers and HEIs.

"The current funding model does not incentivise placement providers

If the HEI could directly pay the provider that would be more attractive. Currently the funds goes to the Trust & may not filter down to the dept providing the placement".

"Cast your mind back to when you were a student and have empathy, encourage, mentor and support. Collaborate with colleagues and HEI's to develop new ways of working" "A common theme appears to be that we do not have evidence for our current models or alternatives. It would be good to dedicate more funding to testing and researching models as well as the barriers described to training."



### Theme 3

#### Health Education England

### Joined-up system

- Centrally co-ordinated placement capacity
- Communication between all actors,

Standardised paperwork such as evaluation forms, clinicians

training, etc.

"The HCPC does not stipulate that students need to achieve certain numbers of hours of practice - this comes from Professional Body recommendations. The HCPC is keen to ensure that students can demonstrate that they meet the standards of practice via the learning outcomes.."

"Common learning outcomes and streamlining of paperwork would definitely reduce confusion and workload for supervisors, and Trusts may be more willing to take students from several different institutions" "Review and refresh the evaluation of placements to take into account all stakeholders, HEIs, Students, placements, clinical educators service users etc and have students part of the process for reviewing these so that a joined up approach to learning from the outcomes"



## Theme 4

# Overall redesign of education/ placement model

- Re-think the purpose and structure of the educational-placement model
- New routes to jobs- apprenticeships

Final placement = First workplace

"Apprenticeships - a 'grow your own culture' many valued and dedicated staff are currently in Band 3/4 roles and keen to develop. A paid employment route to develop and nurture our own staff is a great idea. Increasing retention, improving morale and most importantly improving patient care/experience. What's not to like?"

"Consider looking into the RePAIR project promoted by HEE and recommended by AHP, Midwives and Nursing Leadership.

This is a collaborative project that looks to join HEI's and providers in what is best practice to support 2nd and 3rd year students from being students through to preceptorship for their 1st year as newly qualified staff.

It can also build collaboration and ideas between

Nursing and AHP directorates."



### Theme 5

### **Educators capacity**

- Training- student training and time for own clinical development
- Ring-fenced time to teach students
- Reduced clinical workload- more time with student

"To increase placement capacity we need to encourage departments to become learning environments for all staff regardless of postion or grade. Staff need to be willing to share their knowledege and skills. Each member of the team/department/service should see it as their role to pass on what ever knowledge / skills they have. This should be from non registered staff to all grades of registered staff. Spread the load share the learning. Do we need. kite mark?"

"In operating theatres the clinical skills facilitators cannot provide students with the most appropriate experience if they are continually pulled away to do other tasks. When they are pulled away students who need more support slip through the cracks, rotations fall apart, skills are not achievable. Anyone in theatre who has responsibility for organising student placements should be protected and the role respected more."



### Theme 6

#### **Cultures and attitudes**

- Educators and providers in how they see students
- Placement opportunities
- A call for integrating and valuing students within teams
- Support workers

"Embed a culture of supportive learning for the workforce by involoving all team members in the clinical education of students, no matter what grading ie utilise your non qualified staff (fantastic resource!) as well as managers/specialists/leads - get away from only a certain banding taking students..."

"Students should be an integral part of the team. It shouldn't be a burden to have a student, but an asset. Rather than 'belonging' to one clinical supervisor, they should be accepted by all and supervised by all....They should be able to be mentored and learn from all grades of staff and MDT colleagues. I learnt the bread and butter of my profession from working with amazing support workers."





## Learners as "Critical Friends"

#### Virtual Workshop on Tuesday 4th August

- 20, Council of Deans #150Leaders
  - Physiotherapy, Occupational Therapy, Paramedics, Podiatry, ODP, Therapeutic
     Radiography, Drama Therapy, Arts Therapy, Dietetics, Speech and Language Therapy
- Discussed
  - Six major crowdsourced themes
  - Learner experience and views
  - Experience they have had
- Written comments submitted by those unable to attend





## **Summary findings with #150Leaders**

#### **Diversity in placement opportunities**

- Individualised placements.
   Supporting learners to achieve career goal
- Co-creating experience. 3
   personal goals and wishes for placement with educators



#### Improving capacity

<u>Student coordinator role</u> highly recommended- placement experience much better when this role is available.

'Incentivising' educators to take students however may create the idea of students are a burden even more





## **Summary continued...**

#### **Educators capacity**

 Increase placement provider education- does not seem uniform across the board

#### **Cultures and attitudes**

- Experiences of learners being 'burdens'
- Not comfortable <u>raising concerns</u> to clinicians
- Stereotypical views of students
- Language used i.e. 'the student'
- Need for harnessing <u>support workforce</u>
   (Assistant Practitioners) expertise to assist placement learning



Reducing Pre-registration Attrition and Improving Retention Report

Health Education England



# AHP Placement Expansion Solutions and Resources

David Marsden, HEE Regional AHP Lead, North East and Yorkshire



Developing people

for health and

healthcare



# AHP Placement Expansion Solutions and Resources

- Placement expansion webinar series
- Learning exchange and repository
- HEE Star placement resource

# NHS Health Education England

# **AHP Placement Expansion Webinars**

#### **Aims**

- To inspire confidence in expanding AHP placement immediately through national examples
- To support the submission of Clinical Placement Expansion bids

#### Webinar recording links (accessible here)

- ✓ TECS and simulated placements
- ✓ Alternative supervision models
- ✓ Role Emerging Placements
- ✓ On-site clinics



# AHP Placements Learning Exchange

#### We encourage you to use this platform to:

- Have access the most up to date national policy and guidance from arms length bodies, professional bodies and regulators
- Share best practice or innovation around expanding placement capacity and improving quality
- Seek support if you have placement capacity or quality challenges
- Share information on placements e.g. resources, funding



# AHP Placements Learning Exchange

What you need to do:

Sign up to NHS Futures

Access the learning exchange



# **AHP Placements Learning Exchange**

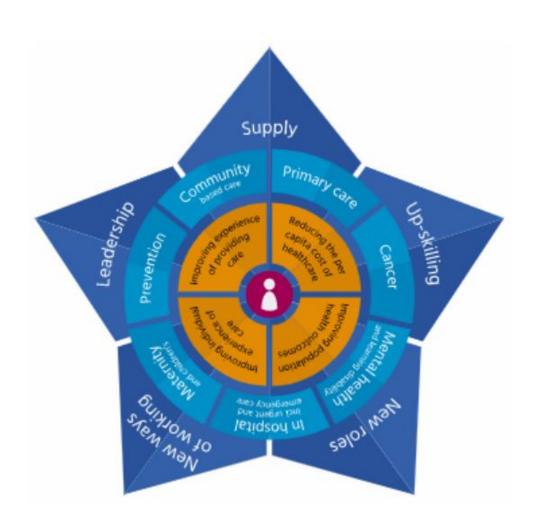
#### **Sections**





## **HEE Star**

**Access HEE Star** 





## Finally....

# All the resources discussed will be available on the HEE website <a href="here">here</a>

Thank you

david.marsden@hee.nhs.uk

@D\_MARSDEN\_OT



## **AHP** student placements

Ruth Allarton, HE Advisor



Developing people

for health and

healthcare

www.hee.nhs.uk



# What are the givens?

- Perspectives from-
  - Regulators HCPC, GOsC
  - Professional Bodies



## How will we disseminate?

Collect examples – Please share!

- Placement expansion bids
  - Clusters with champions
  - Evaluate and disseminate findings as we go



## Thank you.

Please visit our website for webinar recordings, slides and more information about our work on student placement innovation and expansion.

www.hee.nhs.uk/AHP-student-placement

