National Association of Educators in Practice

Identity and practice: Responses to future needs

Friday April 15th 2016

Coventry University Technocentre

Contents

Welcome

We warmly welcome all delegates and presenters to the fifth annual conference of the National Association of Educators in Practice (NAEP).

The conference aims to provide a friendly, informal environment in which colleagues can present research, and share their experience of practice-based education. We sincerely hope that during the day you will have the opportunity to network with colleagues from a range of health and social care professions. We also encourage you to become a member of NAEP and join our National and International Network. This will enable us to continue to ensure that professional education is grounded in practice providing the best possible support network for educators and students in practice across the Allied Health Professions, Midwifery, Nursing and all Health and Social Care Professions.

We would like to take this opportunity to thank our keynote presenters and everyone who submitted an abstract for taking the time and trouble to do so.

We hope all participants in the conference have an interesting, enjoyable and useful day.

Dr Jane Morris
Chair, National Association of Educators in Practice
National Teaching Fellow of the Higher Education Academy

Dear Delegate

It gives me great pleasure as President of the National Association of Educators in Practice to welcome you to the National Association of Educators in Practice Conference. This is the fifth conference which NAEP has organised. I would like to take this opportunity of thanking the NAEP executive committee for putting the programme together which I think includes something for everybody! I hope you find the day enjoyable, stimulating and refreshing and look forward to speaking to you at various points during the day.

Enjoy the conference

Professor Ann Moore
President of the National Association of Educators in Practice.

About NAEP

The National Association of Educators in Practice is a support network for educators in practice across the Allied Health Professions, Midwifery, Nursing and all Health and Social Care Professions.

Vision:

To have a health and social care workforce in which individual practitioners fully understand the value of education for learners, patients, carers and other health care practitioners.

Mission:

To ensure that professional education is grounded in practice through providing the best possible support network for educators in practice across the Allied Health Professions, Midwifery, Nursing and all Health and Social Care Professions.

NAEP strives to:

- Provide a structured forum that generates and delivers support to those individuals who are recorded on the NAEP database.
- Provide opportunities for: sharing and dissemination of good practices, collaborative working and disseminating sources of information and expertise.
- Provide sources of information to inform the development of new roles for Educators in Practice and strategies for the advancement of education and service delivery.
- Provide advocacy and advice on policy matters
- Promote collaboration with other agencies to underpin and support Educators in Practice.
- Provide and support the development of an evidence base to underpin education in practice and ensure its dissemination to relevant stakeholders.
- Promote and provide CPD opportunities leading to recognised accreditation and qualification for practice educators

National Association of Educators in Practice

Conference Programme

8.45	Coffee & Registration	Foyer
9.15	**Welcome to Coventry Technocentre –** Dr Douglas Howat, Associate Dean, Faculty of Health and Life Sciences **Introduction to the Conference** - Dr Jane Morris, Chair of **NAEP**	CC1.3
9.30	**Keynote Speaker** Gloria Dall'Alba: *Becoming professionals – towards an uncertain future* **Chair: Jane Morris**	CC1.3

10.30-11.10	**Parallel Sessions 1 – Presentations**			
	CC 1.8 **Becoming/being a compassionate professional** **Chair: John Hammond**	**CC 2.1** **Impact/outcomes of learning in practice** **Chair: Dawne Gurbutt**	**CC 2.6** **Impact/outcomes of learning in practice** **Chair: Janet Holt**	**CC1.3** **Becoming/being a compassionate professional** **Chair: Clare Kell**
10.30-10.50	Supporting speech and language therapy students: personal and professional development using reflective development groups **Kirsty Harrison, David Glynn, Midge Seymour-Roots, Abigail Levin and Marie-Therese Worthington**	Persistent pain: physiotherapy student experiences of person-centred care in musculoskeletal outpatient departments. **Aneurin Claydon, Graeme Paul-Taylor**	What I wish I had known before my first Practice Placement: Advice and feedback provided by social work students for future students and practice educators following their first placement experience **Carol Dicken, Hayley Palfreyman**	Being and becoming a radiographer **Jane Harvey-Lloyd, Graham Stew, Jane Morris**
10.50 – 11.10	Trainspotting: Cancer and addition **Lorraine Whyte**	A step into the unknown; delivering seven day student placements in physiotherapy **Sarah Elliot, Angela Glynn, Jane Morris**	Midwifery Curriculum Design; A Values Based Assessment Tool for Midwife Mentors to Grade Clinical Practice **Maria Pearson**	Innovation approaches to Dietetic Practice Education **Rosanna Hudson, Annemarie Knight**

11.15-11.45	Coffee and Networking	Restaurant

11.45-12.25	Parallel Sessions 2 – Presentations			
	CC1.8 Impact/outcomes of learning in practice Chair: Richard Gray	CC 2.1 Becoming/being a compassionate professional Chair: Ian Fleming	CC 2.6 Becoming/being a compassionate professional Chair: Lynne Clouder	CC1.3 Impact/outcomes of learning in practice Chair: Gwyn Owen
11.45 – 12.05	Role-emerging placements: An important pedagogic opportunity to develop occupational therapy students professional identity. **Channine Clarke**	Becoming the professional: The experiences of final year physiotherapy students on practice placement in the acute setting **Sarah-Jane Ryan, Charlotte Griffin**	Cultivating compassion awareness in undergraduate students: an inter professional study **Angela Glynn, Julia Montgomery, Dr Charlotte, Sue Wheatley, Claire Martin, Anna Jones, Juliet Wright, Katie Whan, Victoria Cathie**	Learning clinical decision making on placement: a thematic analysis of student and practice educator perspectives. **Janet Wood, Melanie Bowles**
12.05-12.25	The story of an inter-professional pilot placement **Friederike Stenning, Marilyn Plant, Iain Beith, David Dearlove, Louie Lee, Lauren Johnson**	An investigation into undergraduate dietetic students: perceptions of communication skills required for practice: A case study. **Pamela Smith**	Developing the Compassionate Professional **Amanda Squire**	Remembering, Reflecting, Returning: Tracing an Occupational Therapist's Return to Practice **Karen Benthall, Katherine Wimpenny**

12.30 – 13.15	**Lunch**	**Restaurant**
13.15-13.45	**Poster Viewing** *Poster presenters are invited to stand by their posters during this period to answer any questions related to the poster abstracts*	**Restaurant**
13.45-14.30	**Keynote Speaker** **Linda Hindle:** *Developing the future public health workforce* **Chair: Anne Moore**	**CC1.3**

14.40-15.25	**Parallel Sessions 3 – Presentations**			
	CC1.8 **Impact/outcomes of learning in practice** **Chair: Carol Dicken**	**CC 2.1** **Impact/outcomes of learning in practice** **Chair: Carol Sacchet**	**CC 2.6** **Impact/outcomes of learning in practice** **Chair: Helen Bristow**	**CC1.3** **Becoming/being a compassionate professional** **Chair: John Hammond**
14.40 – 15.00	Preparing the dietetic workforce for the future - growing the next generation. **Myra McKenzie, Evelyn Newman**	Professional identity and clinical decision-making of musculoskeletal therapists **Nikki Petty, Oliver Thomson, Abeer** Altamimi	A case study of the student paramedic unpredictable learning environment **Verity Snook**	The Compassionate and Professional Midwife-development of a Flipped Classroom module. **Maria Pearson, Suzanne Britt**
15.00-15.20	Valuing our students in practice: Is there more we can do? **Lindsay Keefe, Fiona Fowler**	Multi-Disciplinary Team Education on Ageing (MDTea) podcasts to foster communities of practice and collaborative working. **Jo Preston, Iain Wilkinson**	The head, heart and hands model: a new approach to the holistic assessment of competence in clinical practice **Lindsay Gillman**	Reassuring the public that nurses and nursing students are compassionate. **Majella Kavanagh, Kathy Elley**

15.25-15.45	**Tea and Cakes** *Reminder to complete online feedback survey*	**CC1.3**

15.45-16.15	**Update on NAEP current activity and future directions - Jane Morris** **NAEP journal – Turning your NAEP abstract into a paper – Lynne Clouder** **Announcement and presentation of Abstract Prizes**	**CC1.3**
16.15	**Close of Conference**	

NAEP conference 15/4/16:   Identity and practice: Responses to future needs

Keynote introductory presentation

Keynote Speaker – Gloria Dall'Alba - Becoming professionals – towards an uncertain future

Gloria Dall'Alba is Associate Professor of Higher Education at the University of Queensland in Brisbane, Australia.
She has previously held appointments at RMIT University and the University of Melbourne, as well as in Sweden at Karolinska Institute and Gothenburg University.
Her research interests include education for the professions, higher education pedagogy, workplace learning and qualitative inquiry.
Gloria's research draws substantially upon hermeneutic phenomenology, especially relating to notions of learning, teaching, professional practice, and inquiry

KEYNOTE ADDRESS

The continuing process of becoming and being professionals can follow various trajectories as it unfolds over time. It is open-ended, never complete.

This introduces uncertainty as practice shifts with time. Not only is it impossible to know what the future will bring, but the demands of professional practice also alter as society changes and new technologies emerge that impact on practice.

Learning to respond to situations as they emerge can help prepare us for an uncertain future. The ways in which we respond have implications for the kind of world we contribute to creating.

Parallel sessions 1 – presentations

10.30-11.10 - Room CC 1.8 – Becoming/Being a compassionate professional

10.30 -10.50   **Kirsty Harrison, David Glynn, Midge Seymour-Roots, Abigail Levin and Marie-Therese Worthington**

Supporting speech and language therapy students: personal and professional development using reflective development groups

Speech and language therapy (SLT) students encounter challenging situations on clinical placements such as working with people who are sick or depressed about their communication/swallowing impairment, exposure to child protection issues or working with clients who are terminally ill. Additionally, SLT students need to develop effective working relationships with a wide range of people, including their practice educators, clients with communication impairments and their family members and professionals such as teachers, doctors, social workers. Understandably, many students find placements challenging.

This talk will discuss a qualitative study, which evaluates the use of reflective development groups for speech and language therapy students on clinical placements, to support their professional and personal development. The groups are intended to support students' resilience and development of professional identity. 36 third year students have been invited to five reflective development groups (approximately 12 students in each group) facilitated by a trained student counsellor from the university counselling service. The focus of the reflective development groups is fluid and determined by the individual participants, in line with a counselling approach. The groups offer an opportunity to discuss aspects of placements that students find challenging and to consider their responses to these experiences.

The impact of these groups will be evaluated using qualitative questionnaires and a focus group allowing in-depth exploration of participants' perceptions. Final data will be collected in June 2016 and will be analysed using the Framework approach (Spencer et al, 2013) to discover key themes.

This presentation will discuss the background to the project and ethical issues involved in conducting this kind of sensitive pedagogical research. Practical issues and challenges faced including a discussion of solutions found so far will also be considered. Plans for data analysis will be outlined and some preliminary themes that have arisen during the reflective development groups will be discussed.

This study will contribute to our understanding of how best to support clinical education for speech and language therapy students and we anticipate the findings may have relevance for a wider range of healthcare students facing challenging situations in placement learning.

Kirsty Harrison is a lecturer in the School of Health Sciences at City University London. Her interests in teaching and research centre on developing professional identity, pedagogy in healthcare, communication and swallowing in progressive neurological conditions and end of life decision making.

10.50 -11.10　　　　　　　　**Lorraine Whyte**

Trainspotting: Cancer and addition

Cancer patients with addiction issues are a high risk group that require broader health care input e.g. health improvement & targeted interventions.

We as Therapeutic Radiographers are not well equipped to deal with this patient group & require specialist education and guidance. However, there are no addiction specialists equipped to deal solely with cancer patients. This is an unmet need and there is an educational deficit.

A learning needs analysis was carried out amongst staff at the Beatson to assess whether there was a need for specialist education with regards to caring for patients with both cancer and addiction issues
The answer was a resounding yes! Funding was secured from Beatson Cancer Charity to hold a study day. Speakers included clinical oncologists, associate medical director of addiction services, psychiatric liaison lead, criminal defence lawyer, an addictions nurse and an A&E consultant.

Compassion and public sympathy is often very low for drug addicts but the day was very well attended. Many unexpected issues were raised, especially from the teenage cancer trust and the use of Legal Highs amongst their patient group. The Trainspotting generation were also raised as an issue as people who are opioid dependent have an excess risk of a range of cancers compared with the general population. Evaluation of the day was carried out using a robust feedback questionnaire.

Patients with cancer and addictions are an important group to look at when investing resources into patient support and staff education.
This conference educated and enlightened and the needs of those affected by drugs will now hopefully be met more effectively and with empathy, compassion and respect where human rights and equality come as the result of informed, open and respectful debate

Lorraine Whyte is a therapeutic radiographer and has worked at the Beatson West of Scotland Cancer centre for over 13 years. She has been a clinical radiographer for most of this time but in the last four years has taken up a new post as the practice education radiographer. Her main role within the department is the provision of high quality educational materials for the Radiographers and the maintenance of training records, competencies and entitlements. She is also researching the quality of under graduate clinical placements within the department.

10.30-10.50   **Aneurin Claydon, Graeme Paul-Taylor**

Persistent pain: physiotherapy student experiences of person-centred care in musculoskeletal outpatient departments

Background

Person-centred care (PCC) is advocated in the management for people presenting with persistent pain (PPP). It is central to a number of health policies and reports. However, evidence suggests physiotherapy students' may feel unprepared to manage PPP and to translate PCC into practice.

Purpose / Aims

To explore physiotherapy students' experiences of PCC with PPP in a musculoskeletal outpatients' placement setting, and how this impacted their practice.

Design / Methods or Description

A purposeful sample of nine final year undergraduate physiotherapy students' from Cardiff University, with experience of PPP from a musculoskeletal outpatient department placement, participated. An interpretive method to qualitative research was employed. The students' were invited to participate via email and attended one of two focus groups. Questions and prompts were developed following a literature review and pilot study. Recordings were transcribed using transcription software and verified by the researcher.

Analysis and Results

A thematic approach to data analysis was completed using a cyclical immersive process of familiarization; generating codes; seeking, reviewing and defining themes and sub themes. Field notes were included in the interpretation of the transcripts. An assistant moderator and reflexive diary provided a source of triangulation. Three themes emerged: understanding, learning and influences.

Discussion / Conclusion / Implications

The students' showed an understanding of PCC, in line with current literature. PCC was generally deemed 'well taught' at university. It appeared that learning in a university setting was at times at odds to the realities of learning on clinical placement. A number of factors influenced their ability to implement PCC. The role of the clinical educator and the impact of being assessed on placement seemed to affect student's practice. The influences affected their learning and development of PCC in their practice despite evidence showing that this was beneficial to PPP.

Physiotherapy students' struggled to integrate learning of PCC from university into their practice on a musculoskeletal outpatient's placement. At times it appeared that learning on placement seemed to conflict with students' learning from university. This impacted their learning and also the management of those presenting with persistent pain they had seen.

University learning and placement learning should complement one another in order to encourage and develop PCC into students' future practice. Universities should review their curricula so learning in university and on placement are more in line to facilitate the application of PCC into practice.

Aneurin Claydon is currently a rotational band 5 physiotherapist within the Cardiff and Vale University Health Board. Having recently qualified from Cardiff University in the summer of 2015, this abstract is derived from his dissertation. During the process of completing his dissertation he gained an interest in the management of people experiencing persistent pain and also the development of person-centred care in future clinical practice.

10.50-11.10   **Sarah Elliot, Angela Glynn, Jane Morris**

A step into the unknown; delivering seven day student placements in physiotherapy

Introduction: As a result of government directives and evidence from the department of health that seven day working provides improved quality of care, quicker response times and prompter discharges the physiotherapy profession is reconfiguring to seven day working patterns.

Many physiotherapy services are now providing a seven day service, with extended hours or twilight services and more will develop over the coming years. So student placements may be offered across a seven day week instead of the traditional five, and may extend later in the evening with some students experiencing a 12 hour shift pattern. This is a new experience for both physiotherapy students, practice educators and universities and currently little literature exists on this topic.

Purpose: This exploratory study focussed on what it is like to be a student and practice based educator on these emerging seven day practice based clinical placements which may inform future practice.

Methods: An interpretative phenomenological approach was adopted, using in depth semi-structured interviews. A purposive sample of six physiotherapy students, six practice based educators and three university link tutors were interviewed and asked to discuss their experiences of practice based placements hosted across a seven day model of working. The interviews were transcribed verbatim, and thematic analysis was used to interpret the data.

Results : Initial findings emerging from the data suggest that physiotherapy students are participating in seven day working and some descriptive elements regarding the transition towards and the delivery of seven day placements developed during analysis. One theme; 'a natural transition to seven day student's placements' explores the awareness and acceptance of seven day working by physiotherapy students, practice based educators and universities. It also explores the planning and execution of seven day placements, which includes the importance of flexibility and adaptability when hosting these placements.

Conclusion: It appears that the physiotherapy profession is both aware and accepting of the transition to seven day working but there is still a debate over whether seven day placements should be compulsory or on a voluntary basis. The importance of flexibility and adaptability when organising and delivering seven day student placements should be considered.

Implications: Findings suggest that with adequate support and preparation all physiotherapy students should be offered the opportunity to experience a seven day model of placement as this experience is thought to be beneficial in developing the physiotherapists of the future. Both students and practice based educators should be flexible and adaptable in their approach to the delivery of the placement. This

exploratory study may inform future practice as there is currently no literature on this subject.

Sarah Elliott *is a Physiotherapy Practitioner at Medway NHS Foundation Trust where she specialises in Critical Care. She commenced her professional doctorate in 2011 which is exploring the experiences of physiotherapy students, practice based educators and university link tutors in a seven day model of working in practice based education.*

10.30-11.10 - Room CC 2.6 – Impact/outcomes of learning in practice

10.30 -10.50   **Carol Dicken, Hayley Palfreyman**

'What I wish I had known before my first Practice Placement': Advice and feedback provided by social work students for future students and practice educators following their first placement experience

Social work students generally undertake two practice placements during their qualifying programme. The first is for 70 days and the final placement is 100 days. Lecturers in the School of Social Work at Kingston University and St George's University of London try their best to prepare students for the placement experience but inevitably some students feel that they get too much information and others not enough. Often the relevance is only appreciated once they are actually on placement. We wondered if asking students to identify what they wished they had known before their first placement might give us a clearer knowledge base to focus our preparation activities and enable the student voice to be heard by us, other students and also by practice educators.

So far we have gathered the views of BA and Masters level pre-qualifying students at the end of their first placements in the academic year 2014-15 and are using this to prepare students and practice educators during 2015-16.

We asked them to work in groups to identify

- What they wished they had known at the start of the placement?
- What advice would they give a student going on their first placement?
- What was the best advice they had been given on placement and by whom?

We had an enthusiastic response from students and this presentation will outline the main areas covered in their feedback which include

- Expectations of them as students
- Assessment
- Relationships with practice educators including power dynamics
- Personal and professional organisation strategies
- The development of the student as a knowledgeable, skilful and reflective practitioner

Although these comments are given by social work students many of their messages may resonate with students from other professions undertaking practice placements and with those supporting and assessing them.

Carol Dicken is the Faculty Lead for Practice Education in the Faculty of Health, Social Care and Education and a Senior Lecturer in the School of Social Work and Social Care at Kingston University and St George's University of London. Her interests include practice learning and assessment for professional practice and the development of students' reflective practice and critical analysis skills. (Dicken, C. & van Graan, D. (2016) 'Reflective Practice Skills' in Davies, K. and Jones, R. Skills for Social Work Practice Basingstoke; Palgrave Macmillan). She is a registered social worker (HCPC) and an independent practice educator for social work students as well as an assessor for trainee social work practice educators.
Hayley Palfreyman is a Senior Lecturer and the placement coordinator for social work and is based within the School of Social Work and Social Care at Kingston University and St George's University of London. Her interests include practice learning and social work in palliative care settings. Hayley has recently contributed to a chapter around working with children in youg people in the book 'Practical Guide to End of Life Care' (2015). She is a registered social worker (HCPC) and currently practices within a hospice setting alongside being an independent practice educator for social work students as well as an assessor for trainee social work practice educators.

16

Midwifery Curriculum Design: A Values Based Assessment Tool for Midwife Mentors to Grade Clinical Practice

The grading of hands-on midwifery practice became a professional regulatory standard in 2009; this was to show an equivalency between theory and practice so that both will count toward any final degree classification (Nursing Midwifery Council [NMC], 2009). Arguably this move places equal value on both theory and midwifery practice. This represents a shift from midwifery lectures marking *on* practice (for example a written reflection on practice) to the grading *in* practice by sign-off midwifery mentors. Grading *in* practi*ce* has been widely debated within the midwifery literature and issues highlighted such as grade inflation (the grade is higher than is a correct reflection of the student) together with the design of grading tools which are purported to add to grade inflation (Chenery-Morris, 2010, Gray and Donaldson, 2009).

The NMC (2009) standard is unclear on how best to grade practice and what should be graded. Currently ALL universities in the United Kingdom (U.K.) implement grading *in* practice locally. Debatably this leaves a non-standardised approach to the assessment of grading *in* practice within midwifery education. With 14% rise since 2010 of midwifery registrants currently being investigated by the NMC (2015) Fitness to Practice committee, a robust assessment of students' prior to registration is a high priority for universities including the standardisation of grading *in* practice.

A number of recent high profile reports should inform in the design, development and implementation of any new midwifery curricula (Berwick, 2013, Bubb, 2014, Francis, 2013) to demonstrate how midwifery education providers are responding to and preventing healthcare practice that falls below the minimum standard both required and expected by the public. The NHS core values and behaviours or the six C's framework (Department of Health, 2012) provide a firm foundation for grading of hands on practice.

The aim of my presentation is to share the development of a Values Based Assessment Tool to support practice midwifery educators grading 'hand on' clinical practice. The tool is currently being used by undergraduate midwives but has yet to be fully evaluated. However, it is argued that this values based assessment tool provides an new way of assessing student midwives competence and values based practice behaviours.

Objectives of presentation
-Discuss the context and rationale for grading *in* practice
-Describe the development and implementation of a Values Based Assessment Tool

Maria Angelina Pearson is a Teaching Associate at the University of Nottingham, School of Health Sciences, and Division of Midwifery. Maria is the Lead for the Compassionate and Professional Midwife, level one module in the new undergraduate curriculum. Maria also leads on mentorship within the Division of Midwifery Together with a sign-off mentor Maria developed a Grading in Midwifery Practice tool based upon the NHS values. Maria is also a year one student undertaking an Education Doctorate at the University of Nottingham.

10.30-11.10 - Room CC 1.3 – Becoming/Being a compassionate professional

10.30 -10.50   **Jane Harvey-Lloyd, Graham Stew, Jane Morris**

Being and becoming a radiographer

Background:
The radiography profession is undergoing significant change in response to social, economic and political influences. This has resulted in increasing service demands and a requirement for graduates to possess a much wider range of skills (Decker, 2009). The pressures now being placed on newly qualified health and social care practitioners has initiated research in both nursing and medicine which has focussed on the transition of student to practitioner (Ross and Clifford 2002; Mooney, 2006).

Aim:
The aim of this project is to explore the experience of transition from student to practitioner in diagnostic radiography

Design:
An interpretive phenomenological approach was adopted consisting of three face-to-face interviews of each participant at three months, six months and twelve months post qualification. These time intervals have been identified in the literature as critical times (Decker, 2009; Smith and Pilling, 2007).

Analysis and results:
Thematic analysis was utilised in that through examining each individual experience, commonalities and relationships, including differences across the participants may be identified (Gibson and Brown, 2009).

Six main themes were identified; needing support, settling in, developing confidence, becoming established, feeling useful and looking forward. These will be presented and discussed in view of current literature and contextualised in order to analyse the journey of a newly qualified radiographer in the first twelve months.

Jane Harvey-Lloyd is currently an associate professor and the course leader for the BSc (Hons) Diagnostic Radiography course at University Campus Suffolk. She teaches on a range of undergraduate and postgraduate courses across the university. Jane is currently studying for a PhD at the University of Brighton. Her other research interests are preparing students for practice, peer assessment, e-learning, Continuing Professional Development (CPD), practice education, reflective practice, workplace stress, coaching and supporting and motivating others.

10.50 -11.10   **Rosanna Hudson, Annemarie Knight**

Innovation approaches to Dietetic Practice Education

Over recent years, the British Dietetic Association's (BDA) University partners have reported difficulties in sourcing practice education placements to meet demand. A project was commenced to explore practical solutions to delivering pre-registration training requirements, in terms of capacity and extending the scope of the profession.

Dietetics transcends the NHS, with dietitians working in multiple sectors. In reflection of this, the project sought to provide a wider definition of practice education, helping the profession equip students with the skills and sector understanding to enable them to work across both traditional and emerging environments.

Additionally, the project explored alternative models of training, including peer assisted, simulated and inter-professional learning which develop the skills of the student whilst reducing the time/resource burden placed upon dietetic departments.

An expert working group was appointed. It utilised the expertise of two key reference groups comprising educators and dietetic managers. Stakeholders provided an overview of current activity, risks and opportunities impacting upon dietetic training. The wider profession contributed through case study examples of innovative practice.

The project incorporated the following activity:
- a literature search considering international approaches; and

- a UK-wide scoping exercise of current dietetic practice education activity, ultimately leading to a case study resource. A standardised template was used to collate the data in a comparable format, linking practice education to specific learning outcomes.

Following consultation, a position statement with guiding principles reflecting the BDA's stance on practice education opportunities was produced. This complemented a summary of the current UK position, identification of international methodologies and consideration of practice education opportunities for the profession to exploit.

Innovation case studies were streamed into thematic areas and a comprehensive, easily navigable case study resource produced.

It is hoped that the guidance / case studies will raise awareness of alternative approaches to practice education and embed these as normal practice alongside NHS experience. This broadens the opportunities for newly qualified dietitians to work outside of the acute sector. In tandem, the guidance encourages NHS practice educators to use resources wisely, incorporating PAL / simulated practice and reducing the time burden associated practice education.

Phase two of the project will develop baseline online practice educator training and bring together representatives from non-traditional sectors (industry, charity, public health, etc) for a round table event to discuss a UK wide approach to establishing training pathways and opportunities.

Rosanna Hudson *is the BDA's Education Policy Officer, providing advice and guidance to members and stakeholders across the four countries on pathways to dietetics, the curriculum framework and all aspects of CPD, including HCPC audit requirements and training opportunities. She responds to national consultations, and represents the BDA on the Health and Care Professions Education Leads group. Rosanna supports the Education Board and is responsible for managing the pre-registration accreditation system, CPD courses and developed and runs the BDA's online Learning Zone.Finally Rosanna manages the Sport and Exercise Nutrition Register (SENr), established to bring sports dietitians and performance nutritionists together under one competency based framework, thus protecting athletes, the public, employers and the registrants themselves.*

Parallel sessions 2 – presentations

11.45-12.25 - Room CC 1.8 – Impact/outcomes of learning in practice

11.45- 12.05   **Channine Clarke**

Role-emerging placements: An important pedagogic opportunity to develop occupational therapy students professional identity.

Background: Role-emerging placements (those where a student attends a placement in a setting where there is no occupational therapy service) are increasingly being used to help occupational therapy students develop the confidence, skills, knowledge and attributes needed to work in new and innovative practice settings. This PhD study explored students' experiences of undertaking such placements and the impact of doing so on their professional practice and identity. This research was important in ensuring that placement experiences reflect the future needs of students and graduates and in helping to gain a deeper understanding of how students develop their professional identity through practice placement.

The aims of the study where to gain a deeper understanding of how occupational therapy students experience and ascribe meaning to role-emerging placements and the ways in which such placements influence their professional practice and identity once qualified.

Design / Method: The study used Interpretative Phenomenological Analysis (IPA) to gain rich insights into students' experiences. In-depth initial interviews were carried out with five MSc pre-registration occupational therapy students within one month of having undertaken a role-emerging placement. Follow-up interviews were carried out six months after the students had graduated and gained employment. Interviews were audio taped, transcribed and analysed using IPA guidelines.

Key findings revealed that the role-emerging placements acted as a strong catalyst for the students' ontological development. Through engaging in challenging and autonomous learning experiences, they developed deeper insights of who they were becoming as professionals. This led to a professional identity that was of their own making. Having to continually reflect on and verbalise the core essence and contribution of occupational therapy, students developed clarity of understanding about the uniqueness of the profession. This is an important finding in light of the historical difficulty occupational therapists have had articulating their unique role and professional identity.

Conclusion: Recommendation is made for role-emerging placements to be made compulsory for all occupational therapy students to assist them in their ontological development and prepare them more effectively for practice. Such placements should also be considered by other professions and placement co-ordinators.

Channine Clarke is currently an Occupational Therapy Practice Placement Tutor / Senior Lecturer at the University of Brighton. She is also Course Leader for the PG Certificate in Practice-Based Education. Her research interests are in the pedagogic domain, including the long term effects of Problem-Based Learning (PBL) in the workplace and diverse practice placements. She is also interested in the links between occupation, health and well-being.

12.05-12.25   **Friederike Stenning, Marilyn Plant, Iain Beith, David Dearlove, Louie Lee, Lauren Johnson**

The story of an inter-professional pilot placement

Practice placements form an essential part of Health and Social care students' experiences of their future work place and their ability to apply academic knowledge in their clinical environment. They also help develop the image of their chosen profession.

While the workplace is set to move away from the acute hospital setting, student placements largely remain in this frequently uni-professional acute setting.

The project 'Identifying and implementing opportunities for practice learning in Health and Social Care provision, and ensuring these are embedded in Community Education Provider Networks' has attempted to address this imbalance.

One approach taken was that of piloting an inter-professional clinical placement of two undergraduate physiotherapy students in a GP practice where the supervision was provided by the GP and a physiotherapist in equal parts.

Since no ethics approval had been sought, this case study simply provides the story of the placement, told by those who were involved in the setting up and developing the placement, namely the students, the supervising physiotherapist, the GP, the link tutor and the project worker.

The insights gained during this pilot placement might provide a discussion base where a similar placement is to be considered by other providers.

Friederike Stenning is currently the project worker for the project entitled 'Identifying and implementing opportunities for practice learning in Health and Social Care provision, and ensuring these are embedded in Community Education Provider Networks' at the joint Faculty of Health, Social Care and Education at Kingston and St George's University London. Her background is physiotherapy and her special interest lies in practice education and the development of services outside the acute hospital setting. She worked with a local GP and an organization providing part-time physiotherapy services within the GP surgery to set up this inter-professional pilot placement.

11.45-12.25 - Room CC 2.1 – Becoming/being a compassionate professional

11.45- 12.05   **Sarah-Jane Ryan, Charlotte Griffin**

Becoming the professional: The experiences of final year physiotherapy students on practice placement in the acute setting

Physiotherapy programmes in the United Kingdom provide graduates with knowledge, skills, values and behaviours that will enable them to practice safely and effectively. To qualify as a physiotherapist university based learning and 1000 hours of practice based learning must be completed. Graduate physiotherapists must be able to work in a variety of environments including the acute setting which presents a different set of challenges compared to a non-acute setting.

The purpose of this study was to gain an insight into the experiences of final year physiotherapy students on practice placement in the acute setting.

A qualitative, phenomenological approach was used. A purposive sample of eight pre-registration physiotherapy students (3 female and 5 male) at the University of Brighton, who had no prior experience of an acute setting were recruited. Eligible participants had completed at least one practice placement in an acute setting. Individual, face-to-face, semi-structured interviews were conducted. Interviews were audio recorded, transcribed verbatim and analysed using thematic analysis.

Four main themes emerged from the data: 'reality and challenges of the acute setting', 'The experience you don't get at uni", 'relationships' and 'becoming the professional'. Overall the findings suggest that the participants consider their learning to be mostly positive in the acute setting. The participants were exposed to many different learning opportunities that enabled and challenged them to develop skills, knowledge and professional relationships. They also became more aware of the benefits, challenges and realities of working in this setting. These participants encountered high quality practice placement education but the findings suggest further development both in preparation and in practice could be applied to enhance their experiences.
Sarah-Jane Ryan is a senior lecturer and practice education tutor for Physiotherapy at the University of Brighton. Her interests in teaching and research focus on long term conditions, learning technologies and practice education.
Charlotte Griffin is a rotational physiotherapist working for the Brighton and Sussex Hospitals NHS Trust.

12.05-12.25   **Pamela Smith**

An investigation into undergraduate dietetic students: perceptions of communication skills required for practice: A case study.

Effective communication is inextricably linked with patient-centred practice, which brings about many positive health outcomes. Among the benefits reported by researchers in this field are improved patient empowerment, increased ability to self-manage, better understanding, greater satisfaction with their treatment and care, and less frequent visits (both new and return) to health professionals. Further, optimal communication skills on the part of the practitioner have been found to enhance job satisfaction.

The aim of this study was to explore the perceptions held by dietetic students, of

communication and interpersonal skills required for clinical practice. It also aimed to explore which activities both within and outwith University, students felt impacted positively on their communication and interpersonal skills development. The purpose of the study was to inform future curriculum development in such a way as to optimise patient-centred practice, asserting more focus on the training of specific communication skills not identified by the students.

The design of the study was that of an exploratory, interpretivist case study. Participants were recruited from all four levels of the undergraduate dietetics programme (n=53).The data was gathered using questionnaires, focus groups and vignettes and was analysed using thematical and content analysis.

Seven themes emerged from the analysis of the participants' responses: people skills and attributes, professional practice, language skills, non-verbal communication, environment and physical factors, time limitations and patient's readiness to change.

The findings suggest that the students selected for this programme have a strong lean towards patient-centred practice and recognise many of the skills involved in communicating effectively with patients. However, there are significant gaps in their knowledge of particular skills involved such as marrying verbal and non-verbal communication, and a lack of awareness of key components of interview such as establishing the reason for attendance. This is likely to result in an incomplete skill set for optimising their clinical practice and future dealings with patients.

Based on these findings, it is recommended that the dietetics curriculum adopts a more explicit and structured approach to the training of communication skills and the stages of interview such as that proposed by the Calgary Cambridge model (2008), beginning in the first year of the programme.

Pamela Smith is currently the programme lead for BSc Hons Human Nutrition & Dietetics in the School of Health & Life Sciences at Glasgow Caledonian University. Her interests in teaching and research centre on developing communication skills and patient-centred practice.

11.45-12.25 - Room CC 2.6 – Becoming/being a compassionate professional

11.45- 12.05   **Angela Glynn, Julia Montgomery, Dr Charlotte, Sue Wheatley, Claire Martin, Anna Jones, Juliet Wright, Katie Whan, Victoria Cathie**

Cultivating compassion awareness in undergraduate students: an inter professional study

Following the Francis report there is a focus on compassionate care at the heart of health and social care. Health education providers need to consider how they develop compassionate practice in their students.

This study builds on the Cultivating Compassion Toolkit developed by the University of Brighton and Health Education Kent, Surrey, Sussex and a pilot study looking at observed acts of compassion undertaken by a group of medical students. The students in the pilot study used a Toolkit exercise to record acts of compassion that they observed during the course of their practice. Themes arising from these observations included team compassion, patient-centred compassion, student to student compassion and patient to patient compassion. Students also reflected on the impact that increased awareness of these acts had on themselves.

The main aim of the current study is to explore how signposting acts of compassion witnessed during practice impacts on awareness of compassion and compassionate behaviour in pre-registration students. It will also explore whether there are any differences in compassionate acts as viewed through the lens of different professions. This is a qualitative study taking an overarching Narrative Enquiry approach. Students in practice for at least 3 weeks during the period October – December 2016, third year Medical, Physiotherapy and Nursing students and first year Occupational Therapy students, were invited to participate in the study.

Students attended an interprofessional workshop to introduce the study and explore what they considered to be an act of compassion. Students were asked to record acts of compassion that they observed in the practice setting during a 3 week period. Students recorded acts on a secure Edublog. They were asked to briefly describe the compassionate act, the setting and roles of people involved whilst maintaining confidentiality. Students were encouraged to discuss the compassionate acts on the blog.

14 Students posted acts of compassion and engaged with the blog. These students will be attending a workshop to undertake thematic analysis of the acts of compassion recorded and the discussion on the blog. In addition, as part of the research, the students will write a 500 word reflection on the impact that undertaking this study may have on their future practice and the impact of working together with other health professionals. A mixed method of content analysis and narrative enquiry will be taken to analyse these reflections. Data analysis will be complete by mid-March 2016.

Angela Glynn is Physiotherapy Academic Lead and Assistant Head of School in the School of Health Sciences, University of Brighton. Her interest is compassionate care and how this may be cultivated in both pre-registration students and qualified health and social care professionals.

12.05-12.25   **Amanda Squire**

Developing the Compassionate Professional

The Department of Health defines compassion as care based on empathy, respect

and dignity (DH, 2012) The development of compassion in students is traditionally viewed as inherently dependent upon their individual personalities and experiences (Dewar, 2013). Since the publication of Francis Report (2012) there has been a huge amount of media focus on the compassion health professionals demonstrate when caring for their patients.

This paper describes the transformation of student attitudes through the use of patient stories to initiate discussions of their own experiences, both personal and transferred. Students (n= 179) attending interprofessional workshops around patient stories were asked if they understood the meaning of empathy and how empathetic they judged themselves to be. They were asked to consider how they felt their experiences to date would impact on their professional practice. They were asked to score how important they felt empathy was in treating patients. During the sessions the students were encouraged to note down thoughts and ideas which came to them as a result of listening to patient stories. At the end the students were asked to record their feelings, thoughts and ideas around the purpose of empathy in their practice. There were four different professional groups and differences between the groups were noted. Quantitative results were analyses using SPSS and a thematic approach was used to evaluate qualitative data. Distinct differences were noted between comments at the start and end of the session, although not statistically significant they represent an area worthy of further larger scale investigation.

Although it is recognised that a single session cannot embed this complex construct, this paper demonstrates both quantitatively and qualitatively the impact of such sessions on raising awareness within individuals. This paper also leads us to discuss the differences between professional groups and whether some professions are naturally more empathetic and proffers the hypothesis that some professions require more support to develop this key skill.

*Following a successful NHS career, **Amanda Squire** seized the opportunity to pursue an academic appointment, preparing students for the challenges of the modern health service. Her current role as Interprofessional Education Lead at Cardiff School of Health Sciences allows her to motivate the drive towards compassionate professionalism. This involves engaging hearts and minds as well as developing innovative approaches to teaching. Following the award of her PhD and through ongoing research, Dr. Squire has presented to conferences at home and abroad, has worked with government bodies and is actively involved wherever possible in driving up the quality of professionalism and care.*

11.45-12.25 - Room CC 1.3 – Impact/outcomes of learning in practice

11.45- 12.05   **Janet Wood, Melanie Bowles**

Learning clinical decision making on placement: a thematic analysis of student and practice educator perspectives.

The ability to practise as an autonomous professional is one of the standards of proficiency for speech and language therapists, as set by the Health and Care Professions Council. Such practise entails, amongst other things, being able to make reasoned clinical decisions.
There is a growing body of research into the development of clinical reasoning for student health professionals. However, this topic remains relatively unexplored within speech and language therapy education and practice. Furthermore, there is little research in this area that considers the combined views of both students and practice educators.

This study investigated factors that influence student's development of clinical decision-making skills on placement, from the perspective of both students and practice educators. A secondary aim of the study was to inform future education for each of these groups.

This was a qualitative study, involving thematic analysis of semi structured interview data. Interviews were conducted with eight final year speech and language therapy students and seven practice educators. Purposive sampling was used to select participants and data analysis, which was inductive, involved the six step method for thematic analysis proposed by Braun and Clarke (2006).

Three themes were identified from the data, which help to explain the factors that influence 'learning about decision making'. These themes are (A) 'articulating rationale', (B) 'learning from experience', and (C) 'being authentic'. The study confirmed previous findings regarding the influence of contextual and interpersonal influences on practice-based learning, and the central importance of the student-practice-educator relationship. It highlighted the complex relationships between perceptions of confidence, responsibility, risk, and authenticity and the opportunities provided for students to practice clinical decision making. It is evident that different practice educators often have differing expectations and styles and it can be difficult, or even stressful, for students to navigate these differences.

This study supports previous findings about practice based learning and, additionally, provides further insight into the impact of contextual and interpersonal influences on student's clinical reasoning. Recommendations are presented, which relate to both the process and style of practice education and the pre-placement preparation of both students and practice educators.
Janet Wood is the Practice Education Lead for Speech and Language Therapy at UCL. Janet develops and runs training for practice educators and her primary research interest is the process of practice based learning.

12.05-12.25   **Karen Benthall, Katherine Wimpenny**

Remembering, Reflecting, Returning: Tracing an Occupational Therapist's Return to Practice

Following a 5 year career break, the author reregistered in 2015 with the HCPC (Health and Care Professions Council) as an Occupational Therapist (OT) and has returned to practice in the NHS. This return journey has included successes and setbacks with learning experiences including training, informal study and creative processes. These have led to the author reflecting on personal and professional identity as well as how 'returners', and the professionals who support them, experience the passage back to practice.

The author trained at Coventry University and has re-established links with her former research tutor there. Their exchanges, along with the author's attendance of seminars at the university, engaging with professionals from the arts, education and academia, have all enlivened and enriched the author's process of returning to practice.

The College of Occupational Therapists (COT) and the HCPC have both published guidance on the requirements for return to practice and there is some anecdotal literature offering a supportive perspective to Occupational Therapy (OT) returners. COT also facilitate return to practice study days, and a small group of universities offer returner learning modules for OT's but this is by no means the norm. In the field, there is great variance in how OT's can be, and are supported to return to their profession. While a handful of NHS trusts offer comprehensive placement packages for OT returners, it was the author's experience that supported time in the field was unusual, with practitioners uncertain of how to respond to the author's request for a placement. This, in stark contrast to the expectation of practicing OT's to actively support OT undergraduate students on practice placements.

This presentation will offer the audience an insight into the author's return journey to OT using an autoethnographic/autobiographical perspective as theoretical scenery. This approach, alongside relevant research on returning to practice, personal reflections and creative interpretations through poems, pictures and popular music, will illuminate stories of the author's return to practice. In this way, the author hopes to bring to life her return journey with humility and humour.

Finally, the author will discuss the implications of the variance in support offered to OT returners, at local and national levels and in context with other professions. The impact on identity, learning and practice for OT returners, as well as for the professionals and services that support their journey, will be explored and considered for the future.

*__Karen Benthall__ is an occupational therapist currently working with the NHS in Bedfordshire with older people who have mental health problems. She graduated from Coventry University in 2002 and had 8 years clinical experience before a family career break. In 2003 she presented a poster at the College of Occupational Therapists (COT) annual conference on the subject of her undergraduate research, Client Centred Practice: Student Perspectives**.** She was a member of COT's Learning and Development Board in 2006 and is currently supporting final year OT students at Coventry University in a multinational, on line learning module.*

Poster viewing and discussion

1. From selection to registration, and beyond: Supporting the student diagnostic radiographer in becoming a compassionate professional

Hollie Hadwen, Ruth Strudwick, Jane Harvey-LLoyd
Hollie Hadwen is currently a lecturer in Diagnostic Radiography at University Campus Suffolk. Her interest in promoting, supporting and developing values based practice in radiography education has been intensified by her role as the admissions tutor for the BSc (Hons) Diagnostic Radiography programme.

The NHS constitution aims to safeguard the underpinning principles and values of the NHS, emphasising the behaviours expected of all NHS staff. Whilst employers are obligated to recruit staff whose values and behaviours align with those of the Constitution, higher education institutions (HEI) assume a fundamental role in promoting and embedding those values and behaviours into curricula, and thus supporting individuals in the transition from student to professional.

The purpose of this presentation is to discuss how values based practice has been embedded in undergraduate radiography education at University Campus Suffolk.

The presentation will describe how the HEI utilise values based recruitment and selection processes, and explore the strategies employed to develop that foundation prior to entering practice placement. We will discuss key issues including the importance of early experiences prior to being socialised into the established culture of the diagnostic imaging department, and the need for lecturers to act as professional role models. We will go on to discuss how we continue to support students in developing their professional identity over the programme of study.

The presentation will consider the reflections of students following their first practice placement, exploring the challenges and triumphs of upholding the NHS values and behaviours in practice.

The role of the lecturer in supporting the transition from student to compassionate professional cannot be underestimated. The presentation will conclude with an exploration of our aspirations for the future of values based practice at University Campus Suffolk.

2. Being and becoming a Healthcare Professional

Introduction The sense of 'professional being' as a healthcare professional is fundamental to how that individual is and acts as a professional. Understanding how this sense of 'being' (or 'becoming') a professional develops with time and experience provides important insight for both the developing individual and for those supporting and guiding them towards higher levels of professional ability. This literature review aimed to clarify what was already known in relation to being and becoming a healthcare professional.

Method A literature search was conducted in EBSCO-CINAHL, Science Direct, PubMed and MEDLINE for articles from 2005 to date. Boolean search terms included 'being' or 'becoming' and 'professional' or 'caring'; 'therapy' (therapist); 'rehabilitation; or 'physical science' ('human science', or 'health science', 'health care', or 'movement science'). The search found 128 papers: 57 were eliminated as they were not directly relevant to the subject area. The remaining 71 papers were read and summarised by the four researchers. Two researchers (NJP, HH) carried out a simple content analysis.

Results Ten papers were eliminated due to insufficient information, leaving 44 research papers, 16 commentary papers and 1 letter. Publications in this area have increased gradually since 2011 with 29 papers published in the last 3 years. They have come from USA/Canada (22), Australia/New Zealand (11), and Europe (17): 9 from Sweden and 8 from the UK. Thirty three papers were from Nursing, 16 from Allied Health Professions of which 7 were by Occupational Therapists and 4 by Physiotherapists. The literature has mostly focused around three areas: the experience of undergraduate students (n=29), identity formation in undergraduate students (n=9) and transition and professional socialisation (n=8). Of the 44 research papers, most used a generic qualitative methodology (15), with a few studies using a phenomenological (5), grounded theory (4), ethnographic (4) or case study approaches.

Discussion These papers demonstrated that professional identities are characterised by diverse constructions. Varying aspects of health care worker identity emerged at different times, with different professions and in different locations. This supports the rejection of single issue constructions of identity. Gaining a more thorough understanding of the process of 'being' and 'becoming', and what it means to be a professional, would both help inform those striving for self-development as well as health educators. To achieve this understanding, we need to develop research methodologies with the capacity to understand the multifaceted nature of professional identities.

Nikki Petty, Hazel Horobin, Clair Hebron, Pijo Vuoskoski

Nikki Petty is Associate Professor in the Centre for Health Research, University of Brighton. She is Course Leader for the MRes (Clinical Research) which is funded by the National Institute for Health Research (NIHR) and manages the NIHR Integrated Clinical Academic Programme. She has written two textbooks on MSK physiotherapy translated into 6 languages, and published 27 peer reviewed journal articles. She has given 39 presentations, 20 at international conferences and 16 as keynote. She is hub leader for the Council for Allied Health Professions Research Network in Surrey and Sussex.

3. Coping Strategies Adopted by Pre-Registration MSc UK Physiotherapy Students While Attending Educational Placement

Contemporary learning on healthcare courses in the United Kingdom is underpinned by clinical experiences with an educator while on placement. This educational model provides students with an opportunity to put theoretical knowledge into practice while being guided by a senior practitioner who assists them in honing practical and assessment skill with symptomatic patients and populations. This process is not only academic, but additionally social and psychological in nature – a journey from student to established junior practitioner – and such a process is not without difficulties and contentions. Within all fields of healthcare, placement experiences are seen as potentially stressful for students, however few studies have sought to identify specific stressors in order to alleviate them for students. Studies in medical students have shown that feelings of stress in students can accelerate professional fatigue and ultimately harm patient care, and therefore understanding stressors that exist in the placement environment and how students cope with them is of vital importance to inform future models and guidance for educators, students, and universities. This study sought to identify student stressors on placement through five in-depth semi-structured interviews with students on an MSc Physiotherapy pre-registration course. This population group has not previously been studied in this context, increasing the importance of this study as a view into the experiences of postgraduate pre-registration students. Constructivist grounded theory analysis was used to code and memo data which was used to construct theory surrounding how sources of student stress and coping strategies adopted while on educational placement. The study concludes that primary stressors for the participants of this study focussed around uncertainty of their future, a discord between their current practice and desired skill levels, and financial concerns surrounding their studies. Emotional coping, wherein a stressor is ignored or where a student became upset, was the most commonly seen coping strategy, however participants reported an array of strategies that they are able to use and an awareness of their efficacy and effectiveness. The implications of this study apply to students, educators, clinical placement environments, and universities, and it is hoped that by studying student coping strategies these can be used to modify current educational models to reduce student feelings of stress whilst on placement, contributing to a more effective learning experience and ultimately into safer and more robust clinical practice

Robert Wagner
Robert Wagner is currently an MSc Physiotherapy student at the University of Brighton. He will be beginning a band five rotational physiotherapy post at Worthing Hospital with Western Sussex Hospitals Trust in April 2016. His research interests include communication and the experiences of students as they develop their clinical practice.

4. The role of interprofessional learning in developing transformative health professionals

Ruth Strudwick, Jane Harvey-Lloyd and Hollie Hadwen

Interprofessional learning (IPL) is an integral part of all health and social care undergraduate education programmes at University Campus Suffolk. It is widely considered that IPL encourages health and social care students to learn from and about one another and that this process underpins a better understanding not only of their own professional roles but also those of others. This in turn promotes more effective team work, enhances integrated patient pathways and therefore provides better care for service users.

The purpose of this presentation is to discuss the experience of delivering IPL at UCS by using examples from our modules in order to highlight and debate the importance of IPL in preparing health and social care students for their professional roles.

The presentation will describe two IPL modules where students work in interprofessional groups examining case studies. All of the staff and students involved completed a feedback questionnaire which evaluated their experiences of the case study work. This feedback will be shared from the staff and student perspective. The impact of these experiences will be discussed in terms of professional development for the students involved and the impact that these learning experiences have on their future roles. We will argue that these IPL experiences allow students to develop their own professional roles and identity, understand the roles of others and are enabled to provide more holistic care for service users.

We believe that working together in interprofessional groups to look at service user case studies is transformative in that it allows them to learn from and about other professionals, it equips the students with knowledge about one another's roles and enables them to work together with other members of the Interprofessional team. This in turn enables the students to work together for the good of their service users and thereby becoming more compassionate and patient-centred professionals.

Ruth Strudwick has been involved in Radiography Education since 2001, and is a Diagnostic Radiographer by background. Her current role is Associate Professor, deputy course leader and practice placement lead for the BSc(Hons) Diagnostic Radiography course at University Campus Suffolk (UCS). She is also the course leader for the Interprofessional Learning (IPL) Programme which includes all pre-registration health & social care courses at UCS.
In 2011 Ruth completed her professional doctorate - 'An ethnographic study of the culture in a Diagnostic Imaging Department'.
Ruth teaches on several courses at UCS and her research interests include; interprofessional working, clinical education, values-based practice and work-based culture.

5. Role modelling in Diagnostic Radiography

In many studies of work-based culture and the process of learning a profession, role modelling is mentioned. This poster will use data from an ethnographic study carried out in one diagnostic imaging department to evaluate role modelling with diagnostic radiography (Strudwick, 2011). The methods used in the ethnographic study were participant observation for four months and semi-structured interviews with staff from the department.

The purpose of this poster is to highlight how role modelling is part of the process of becoming a professional

The process of learning to become a radiographer involves the use of role models. Students observe radiographers doing their work and from this learn how to behave as a professional. This suggests a type of 'apprenticeship model' of learning where the learner spends time with the experienced practitioner in order to learn the skills of the trade. Other studies of students and environments where newcomers have to learn a role speak about role modelling. Colley et al. (2003) in their paper about learning and becoming in vocational education and training talk about the importance of role models in identity transformation and picking up norms. Holland (1999) and Mackintosh (2006) looked at student nurses and how they learnt to become nurses. They both talk about how role models influence the socialisation of students. Smith (1992) when talking about emotional labour in nursing says that students observe professionals and from their observations they identify role models.

This presentation will use data from the study to demonstrate how role modelling is important in the student's transition from student to qualified practitioner.

Ruth Strudwick
Ruth Strudwick has been involved in Radiography Education since 2001, and is a Diagnostic Radiographer by background. Her current role is Associate Professor, deputy course leader and practice placement lead for the BSc(Hons) Diagnostic Radiography course at University Campus Suffolk (UCS). She is also the course leader for the Interprofessional Learning (IPL) Programme which includes all pre-registration health & social care courses at UCS.
In 2011 Ruth completed her professional doctorate - 'An ethnographic study of the culture in a Diagnostic Imaging Department'.
Ruth teaches on several courses at UCS and her research interests include; interprofessional working, clinical education, values-based practice and work-based culture.

6. Room For Improvement? Investigating the Use of Goalsetting Software as a Tool to Increase Medical Students' Performance in Clinical Skills

Background:

Goal setting is a key tool used in high performing organisations such as world class athletes to maximize performance and the probability of achieving a desired goal or success criteria. As with elite athletes, medical students have a huge volume of components to internalize and perfect to perform clinical procedures and examinations to a proficient standard. Software has recently been created to aid this process.

Goal setting aids the identification of components that underpin success in a given skill. Knowing the progress in each of these components and the relative priority for their improvement is crucial to allow forward progress of the skill in question. In addition to an objective measure of performance, goal setting increases self-awareness of the priorities needed for success. The mere act of evaluating performance can also have positive benefits, as per the Hawthorne effect. In addition, mapping progress objectively using goal-setting techniques has a positive effect on motivation to improve further. Despite the extensive benefit of implementation, no robust goal setting method used by medical students to improve performance exists in current literature.

Aims:

This project will investigate the benefits of implementing of goal setting software by medical students in the clinical skills setting to increase students' performance in OSCEs (objective structured clinical examinations).

Methods:

RCT study design. Year 3 students sign up to mock neurology OSCE. Group randomly split into group 1 and 2 (approx 30 students in total). Group 1 given goal setting software with preset template designed to aid revision for mock OSCE. Template designed by Dundee neurology team. Group 2 will use traditional study methods. Both groups sit mock OSCE 2 weeks after study started. Difference in mock OSCE score between group 1 and 2 will be compared. Adjusted ANOVA using SPSS 21 to take variables e.g. age, gender, into consideration.

Results and discussion:

Expected study start date in February, results unavailable until after this. Aim of this poster abstract is to increase awareness of the application of goal setting as a tool for increasing medical students' performance in clinical skills.

Expected Conclusions:

As in elite athletes/sports teams, application of goal setting software is expected to increase the user's performance.

Andrew McGowan

Andrew McGowan is currently an intercalating BMSc medical student at the University oi Dundee. Outside of medicine, Andrew has been a member of the Scottish and the British Youth Sailing Team. He is a current coach to the Scottish Sailing Team. Andrew has a strong interest in how techniques used to improve the performance of high-level athletes can be transferred into a medical setting to improve the performance of medical students and staff.

7. Enhancing Consistency of Assessment on Placement (CAP) Project

The purpose of the project is to improve the consistency of the assessment of dietetic students on clinical placements using existing assessment tools. This is a response to student perceived inconsistency of assessment between clinical supervisors as evidenced via NSS feedback and during placement debrief sessions with the placement coordinator. The British Dietetic Association Curriculum Framework for Pre-Registration Training and Education of Dietitians states that 'the HEI will ensure consistency of documentation and assessment tools for the group of placement providers with whom their students are placed' (BDA 2013).

This aims of the project are to; explore current clinical assessment practice and to develop and implement best practice guidelines in collaboration with our clinical educators. A short questionnaire was designed in collaboration with a small working group of experienced clinical educators. The purpose of the questionnaire was to elicit current assessment practices.

26 questionnaires were completed by a purposive sample of clinical educators across the West Midlands. 11 departments were represented and the respondents had a range of experience (<1-10 years). Data identified that practice was not consistent between and within departments, however, clinical educators felt consistency was important. Potential implications of inconsistent use of assessment tools were identified as being; student confusion, frustration, dissatisfaction and impaired confidence, and inequitable, unfair and subjective assessment. A need for training in addition to written instructions was identified.

Best practice guidelines were developed based on analysis of the questionnaire data and training was delivered in the practice setting at multiple sites.

It is expected the guidelines will be utilised February-May 2016 following which educator compliance with the guidelines will be evaluated using student and educator feedback. Additionally online resources to support the consistent use of assessment tools will be developed for the Coventry University Placement Connect platform.

Carla Phillips and Kathleen Hennessey-Priest

Carla Phillips has been a registered Dietitian for 14 years specialising in Renal Dietetics. Currently working as a senior lecturer in Nutrition and Dietetics at Coventry University with the additional role as Course Director for the undergraduate Dietetics programme. Teaching interests include renal nutrition, clinical dietetics, interprofessional education, communication & professionalism.

Kathleen Hennessey-Priest has been a registered Dietitian for 27 years specialising in Paediatric Dietetics. Currently working as a senior lecturer in Nutrition and Dietetics at Coventry University with the additional role of clinical placements coordinator for the Dietetics programme. Teaching interests include; applied human nutrition and clinical dietetics.

8. Creating Excellent Practice Learning Environments : an inter-professional approach

Carol Dicken, Mary Jane Cole and Kathryn J Yates
Carol Dicken, Faculty Lead for Practice Education and Senior Lecturer in the School of Social Work and Social Care in the Joint Faculty of Health, Social Care and Education Kingston University and St George's University of London. Interests include practice learning and assessment for professional practice and the development of students' reflective practice and critical analysis skills.

At the St George's University of London Education Day 'Creating Learning Environments' in November 2015, a group of health and care professionals including academics, practice educators, clinical facilitators and students, with representation from social work, nursing, physiotherapy and medicine, joined together in a workshop entitled 'Working with students in practice settings – identifying challenges and creating opportunities for student learning' to consider how to create excellent practice learning environments. This poster represents the responses to the questions asked during the workshop;

- What do we mean by excellence in practice learning?
- What are the barriers to achieving this?
- Recommendations for creating excellent practice learning environments

Participants worked in two small facilitated groups and collated their thoughts before sharing these and, following discussion, agreeing recommendations.

The results have been analysed and the following themes have emerged

Excellence in Practice Learning Environments can be created by:

- Learner focus
- Practice Educator attributes
- Welcoming Team
- Resources

The Obstacles to excellent practice learning were perceived as

- Mentor attributes
- Team
- Resources
- External factors

Despite differences in terminology and process it was clear that across the range of different professions similar factors were recognised as contributing to excellence in practice education and creating barriers to providing a high standard of practice education for students.

The recommendations recognise the need to develop multi-professional and interprofessional learning and assessment. There was also acknowledgement of the need for those organising and supporting practice education both in university and practice settings to work together to model mutual learning across professional groups.

9. Spotlight on Hidden Corners of Education

Carrie Weller and V. Kalidasan

Carrie Weller graduated from Sussex with a degree in Biochemistry in 1990, having specialised in cancer cell regulation. Her interest in oncology clinical research began when she was appointed as the first Clinical Trial Co-ordinator for research associated with the National Breast Screening Programme, based within the CRUK Clinical Trials Unit. A career break in 1999 led to re-training as a teacher and subsequent appointment as Lecturer at a local Further Education College. Returning to clinical research in 2008 led to a role as Lead Clinical Trial Coordinator at The Royal Marsden NHS Foundation Trust, where she was also responsible for developing education and training for multi-professional research staff. A move to Brighton & Sussex University Hospitals in 2015 as Strategic Education Development Manager with the responsibility for facilitating integrated education for all professional staff

Background

The Trust is commissioned to provide educational activities for staff and healthcare students. Historically non-medical education has been managed outside of the Medical Education Department. To address this a Multi-professional Education Group (MEG) has been established to:-

- Develop an overview of multi-professional education and identify training gaps
- Standardise education process and share best practice
- Promote multi-professional and multi-organisational education
- Identify barriers to integrated education

Method

The organisational remit of this group covers multi-professional representation from all disciplines. Therefore the focus will be on overseeing and directing the aims and objectives of local, regional and national strategies for integrated healthcare education.

Results

Although in its infancy, the group has provided input into a multi-professional review of quality systems resulting in a number of initiatives that will be managed through the MEG group. Furthermore the group has completed an intelligence gathering exercise that will inform the evolving educational strategy. The proceedings of the MEG will form part of the discussions at the Local Academic Board meetings which traditionally only dealt with post-graduate medical education.

Conclusion

The MEG's aim will be to provide co-ordination, direction and guidance to all elements of the vision for a truly multi-professional Trust Directorate of Education and Knowledge.

10.   The meaning and perceived function of supervision in an NHS organisation

The Care Quality Commission requires that staff working in health and social care organisations have supervision (CQC 2015). A number of professional bodies, for example occupational therapy and nursing, also suggest or require that their members have supervision, the primary function of which is to support high quality patient care.

The existing studies and literature on the topic of supervision have produced guidelines, lists and suggestions for processes and structures. However, most of the studies state or agree that; supervision is not straightforward to implement, and there is a lack of consensus regarding what it is. In spite of this, most have not explored the impact of the organisational setting or culture on how supervision is understood and delivered. In addition, there are a limited number of studies that look at more than one group of staff or professions.

The aim of the project is to contribute to improving patient care by developing the understanding and use of supervision within the organisation.

The objectives are to:
- Investigate the understanding of supervision among staff in the organisation.
- Investigate the reported impact of supervision for differing strata and professional groups of staff.
- Identify a basis on which to move the supervision agenda forward within the organisation.

The study utilised a broadly ethnographic approach. Participants were recruited from within the organisation being studied and the data was collected using interviews and focus groups. This is in the process of being analysed, along with the principal researcher's own reflections, using thematic analysis (Braun & Clarke 2006). Following this, the themes and topics will then be applied to a theoretical framework (Jackson & Mazzei 2012) to enable a deeper understanding of the findings.

Preliminary findings indicate that there is a lack of shared understanding of the language of supervision, its purpose and focus and who could or should be supervising whom.

These findings present a challenge for the organisation and have implications for how supervision is perceived and used. It is anticipated that the outcome will inform a review of the supervision policy and practice in the organisation.

Denise Harris
Denise Harris is currently Organisational Development Manager for Sussex Community NHS Trust. She has a clinical background as an occupational therapist. Her role includes supporting and enabling staff development. Denise is undertaking a doctoral study exploring the perception, use and understanding of supervision within the trust.

11. The Visiting Tutor in Practice Education: A Qualitative Exploration Of How The Visiting Tutor Views Their Role

Esther Terrell, Yacoub Didi and Mary Jane Cole
Esther Terrell and *Yacoub Didi* are recent Physiotherapy graduates of Kingston University and St George's University of London. This is the first piece of research they have undertaken. As new graduates they are interested in how academic institutions can optimize the delivery of practice based learning.

Background: The visiting tutor (VT) is a representative of the university who supports physiotherapy students during practice placements. Students are allocated practice educators (PE) who supervise their learning in the clinical environment. Previous studies have represented the views of students, PEs, placement providers and universities in relation to the VT role. However, there is a lack of evidence representing how the VT themselves views this.

Aims: The aim of our study was to explore how the visiting tutor views their role and to consider the implication of these findings to the future of its delivery.

Method: All visiting tutors working with Kingston University & St George's University of London were invited by email to participate in an exploratory questionnaire. Thematic semantic analysis was conducted to interpret the data.

Results: A total of fifteen out of seventeen questionnaires were returned. Five over-arching themes were identified: *support, mediation, education, link with the university* and *delivery of the role.*

Conclusion/Implications: The VT role facilitates ongoing self-evaluation and education for student physiotherapist, PE and for the VTs themselves. This implies that the process of learning spans an individual's career and therefore the VT participates in defining and upholding core professional standards.

In a resource constrained healthcare system, where offers of quality practice placements are limited, the VT provides a valuable link with the university, suggesting innovative models of supervision. The presence of the VT in the practice environment, whilst costly, allows continual consideration of current physiotherapy curriculum and its pertinence to changes within the profession.

12.   Inter-professional physiotherapy placements in primary care – blockers and enablers

Practice placements form an essential part of Health and Social Care students' experiences of their future work place. While the workplace is set to move away from the acute hospital setting, clinical placements for physiotherapy students remain largely in this environment. The project 'Identifying and implementing opportunities for practice learning in health and Social Care provision, and ensuring these are embedded in Community Education provider Networks' has attempted to address this, partially by sourcing inter-professional placement opportunities.

In October 2015 a first inter-professional placement of two undergraduate physiotherapy students in a GP surgery was piloted during which the supervision was shared between a GP and a physiotherapist. The GP volunteered her input into this pilot placement; the physiotherapist had been a clinical educator within her employing community based organization for several years. The students were approached on the basis of their perceived ability to verbalize their needs, their previous placement in an MSK environment and their confidence in their own professional identity as physiotherapists. When the placement had come to its conclusion, feed-back (both verbal and in writing) was sought from all participants, including the project officer who had supported the development of this placement, the physiotherapist, the visiting tutor, the students, the GP and via the GP some patients' views.

Considering the experiences gained leading up to and throughout the placement, a number of blockers and enablers for this type of placement in the primary care sector are being suggested, offering the base for discussing potential implications for practice and how to manage blockers while facilitating enablers.

Friederike Stenning
Friederike Stenning is currently the project worker for the project entitled 'Identifying and implementing opportunities for practice learning in Health and Social Care provision, and ensuring these are embedded in Community Education Provider Networks' at the joint Faculty of Health, Social Care and Education at Kingston and St George's University London. Her background is physiotherapy and her special interest lies in practice education and the development of services outside the acute hospital setting. She worked with a local GP and an organization providing part-time physiotherapy services within the GP surgery to set up this inter-professional pilot placement.

39

13. Analysis of activity levels and productivity whilst physiotherapy students are on placement: Developing a model to include students in workforce planning

Helen Ricketts Rachael Moses and Matt Zasada
Helen Ricketts is the principal respiratory physiotherapist at St George's University Hospitals NHS Foundation Trust. Her clinical area of interest is predominantly within the field of oncology and haematology. She has worked closely with St George's University of London on Physiotherapy student placements for over 10 years including innovative models of clinical education.

Introduction:Clinical placements are a fundamental component of health professionals' education and are an integral component of the undergraduate curriculum. Their role in enabling experiential learning in a practice environment facilitates the practical application of theoretical knowledge.

It has been suggested that increased demand upon services, staff shortages and financial constraints in both health and education sectors, as well as the perception that student presence negatively impacts upon productivity and activity levels have made clinicians less willing to accept students on clinical placements.

Aim: To explore the impact of student supervision on clinical activity levels during weekend shifts.

Method: Data was collected on number, duration and perceived benefit of patient contacts on weekends with and without students on placement between 1/5/15-10/1/16 at St George's Hospital, London. Continuous and categorical data were analysed using t-tests and Fisher's exact test, respectively.

Results: The presence of students enabled a significant increase in both the number of patients seen and the amount of time spent with them as well as the proportion of 'doubles' (patient contacts requiring two therapists) achieved. The presence of students did not negatively impact upon patient outcomes or number of discharges, with a non-significant improvement in each.

Conclusions:Many hospitals are now implementing changes to traditional Monday-Friday working following guidance from the Department of Health on seven day services. In line with this, the Respiratory Physiotherapy team at St George's Hospital have been working as part of a seven day model for over 12 months and have always included students in this new way of working.

Work presented last year (Moses *et al.*, 2015) demonstrated that including students in this seven day model, aids independent working and autonomy and improves clinical reasoning skills and confidence. From an employer perspective we have demonstrated that students can increase productivity and aid safe delivery of clinical activity as part of weekend working.

Recommendations:Therapy departments working as part of a seven day model should include students in workforce planning to enhance clinical productivity and improve student experience.

14. Supporting a student on the autistic spectrum in practice education: a reflection

Jimmy James, Emily Jay and John Hammond

Jimmy James is a senior physiotherapist working in the field of neurology at King's College Hospital. He graduated with a BSc in Physiotherapy from Kings College London in 2009.

Emily Jay is a senior physiotherapist working in the field of neurology at King's College Hospital. She graduated with a BSc in Physiotherapy from University of Hertfordshire in 2001. She has an MSc from Glasgow Caledonian University.

Background: Physiotherapists need to be representative of the populations they are treating. To achieve this, students need to reflect the population. In pursuit of widening participation, physiotherapy education has increased the proportion of students from underrepresented backgrounds, including those with disabilities. There have been steps to ensure that the curriculum is inclusive. This understandably calls for development of new skills and approaches for practice educators but there is often limited opportunity for support and guidance.

Developing an effective therapeutic relationship is key to physiotherapists working with patients. Yet developing effective student-educator relationships may present unique challenges compared to day-to-day clinical practice. Furthermore, given the wide ranging opportunities for physiotherapists outside of the standard route of hospital based practice, the need for a standardised approach to practice education is questioned.

Purpose/Aims: To discuss experiences of supporting a student with an autistic spectrum disorder through placement in the hospital setting, sharing challenges and successes.

Design/Method: A case study method is used. To inform our evaluation we refer to several sources of data including: feedback from the student, notes from meetings with the student, other members of the team and with the university educator. We also refer to the placement assessment form and our own reflective notes.

Analysis and Results: Some of the key learning points are highlighted. We had to provide more structure to the timetable including regular meetings with the student. This was different from a typical situation where we encourage students to demonstrate initiative and autonomy. In this situation this was not enforced to allow the student to become familiar with the setting.

Through the process of this supervision experience we have gained a greater understanding of the importance of specificity in feedback, providing this in a concise way to students. To not overload students, we have also learned to accept that students may have areas of weakness but by focusing student efforts on their strengths facilitated progress across all areas. Through the appraisal and learning process we have also broadened our own methods of practice to consider other perspectives and alternative ways of working. Through the support of the university for both student and educator the placement experience has been a rewarding one, with which we are able to better understand and identify students' potential for success.

Discussion/Implication: On reflection, we feel less prescriptive and rigid in guiding students, and have a greater acceptance of different approaches to working. This

experience has enabled our team to feel more confident in addressing issues that arise early with both students and the university (irrespective of disability), which previously we interpreted as a failure in our own abilities to teach and manage students. We have shared our experience with other educators at a university clinical educators' study day, and have also helped support a colleague who faced similar challenges

15. Practicing Self Compassion - The implementation and evaluation of Action Learning Sets for Lecturers

Research has indicated Nursing Students need to build leadership skills during their training, and need to have opportunities that will enable them engage in this process, and to work authentically (Waite et al 2013).

It is agreed that there needs to be a shift in organisational culture in order to improve the outcomes for patients, more compassionate care, through Authentic leadership The drive includes everyone who is involved in health care, and Nursing Students are not exempt from this expectation.

Nurses currently spend half their time out in practice, and whilst they may experience authentic leadership whilst on placement, they also need to see it mirrored in their university setting through their tutors.

The constructs of leading authentically require an understanding and exploration of self through awareness and self-regulation. In order to help achieve this, time and space to reflect on such aspects was needed. Whilst there was always the opportunity for individual reflection it was clear that some staff new to the Academia welcomed a more structured support. However there was no group forum though which such ideas could be explored.

Action learning is seen as a process that allows for reflection on experiences, and to explore feelings and emotions, as well as strategies for moving forward (Machin and Pearson 2012)

Therefore in response, an Action Learning Set was created for staff new to the organisation. The sets were offered to 7 newly arrived teachers that were new to academia and to education. The meetings were held for two hours, and four meetings were held over a year. Those attending the group were all given an opportunity to discuss an issue, and to explore this in practice.

The learning set was evaluated using post questionnaire measuring the impact of the workshop on Lecturers' confidence in engaging with activities and personal feel good factors. Data indicated that staff felt more motivated and confident. The experience of facilitating and leading the sets will be explored.

Findings will be presented, followed by a discussion of lessons learned and a reflection about the sustainability of developing and implementing these Learning Sets.

Judith Francois

Judith Francois is currently Senior Lecturer in Clinical Leadership and Management, and recently appointed Personal Tutor Faculty Lead at Personal at the joint Faculty of Health, Social Care and Education at Kingston University and St Georges University of London. Her current interests are supporting students to develop leadership skills both through academic learning and in practice.

16. Preparing students to train others: a new assessment for speech and language therapy students

Speech and language therapists (SLTs) in paediatric practice are commonly required, from qualification, to develop and run training programmes and/or workshops for other (non-SLT) professionals and parents/carers on the subject of speech, language and communication needs (SLCN). These courses are often a crucial aspect of an increasing 'universal' provision of service to children with SLCN, yet the skills involved in such an activity have not hitherto been an area of teaching or assessment in the MSc Speech and Language Sciences programme at University College London. This poster describes the evaluation of an assessment that requires students to work collaboratively to design a training package to address a scenario commonly encountered in a paediatric workplace. In the planning of this new assessment, focus group discussions with SLTs and teaching staff at UCL revealed that the key skill areas to be addressed should be: the students' ability to design a suitable training programme (including learning outcomes, teaching activities and a method of evaluating outcomes); working collaboratively within a group; and, on completion of the group exercise, self-reflection on own knowledge and skills in relation to the areas stated above. The marking of the assignment is twofold: a group mark to reflect the overall content and design of the training package and an individual mark to reflect the student's application of knowledge and self-reflection for continuing professional development. This poster presents preliminary results in the evaluation of this exercise. Firstly, we contrast the grades obtained in this assignment to those acquired via traditional methods of assessment (written coursework) and discuss resulting similarities or differences. Secondly, we summarise feedback collected from questionnaires completed by participating students and teaching staff, focusing on the development of training and collaboration skills necessary for current practice as a paediatric SLT.

Kate Shobbrook
Kate Shobbrook is a Speech and Language Therapist and Teaching Fellow at University College London. Kate's interests in teaching involve the clinical education of speech and language therapy students, specifically the training of students to support children with speech, language and communication difficulties.

17. Improving the student experience: a tariff success story

Education & training Tariff monies were outlined by the Department of Health in 2014 to address the need to make funding for training more transparent and to ensure that the funding followed the learner.

The University Hospitals of Leicester have utilised tariff funding to develop and enhance the practice placement experience received by undergraduate students within our Imaging departments.

The purpose of this poster is to share ideas introduced to our undergraduate experience, share feedback received & promote benefits of the use of tariff funding to other practice placements.

Allocation of funding is managed through a formal multi-professional steering group to oversee expenditure and ensure quality of the resultant learning environment. This has allowed the development of a dedicated management structure within Imaging with subsequent creation of Practice learning lead and supernumerary Clinical learning facilitator roles.

Introducing these roles allows the promotion of practice based learning to all students; encouraging them to link theory into practice.

Learners are further supported by the introduction of both group and individual mentoring sessions related to level of practice. This has been extended to an annual end of placement review to discuss and plan objectives for the following semester.

Tariff funding has been used to enhance the actual learning environment. The development of dedicated training rooms, equipment and the purchase of core booklists and IT equipment has allowed space for tutorials, individualised learning and enhanced pastoral support.

Improved multi-professional collaboration has allowed us to utilise the skills and expertise from fellow professionals outside of our traditional professional boundaries. All first year students undertake a week-long ward placement to develop their patient care, empathy & communication skills. This forms part of the Trust-wide Inter-professional learning ethos which includes learning & development sessions with students from other disciplines.

Stakeholders report positively within regular forums between academic and placement staff. This includes an increased number of clinical assessors available to students, the enhanced induction programme and improved pastoral support.

Activities undertaken by students during practice placement have received positive evaluations; feedback received has been developed allowing for further learning in specific areas. Students tell us that they feel more 'in charge' of their learning but in addition; staff feel more empowered to supervise and

Kay Cleaver and Veena Patel

Kay Cleaver is a Radiographer and Practice Learning lead for Imaging at the University Hospitals of Leicester.
Interests lie within Practice development frameworks, undergraduate placement and trainee development opportunities.

Veena Patel is a Radiographer and Clinical learning facilitator at the University Hospitals of Leicester. Interests lie within practice teaching and mentorship.

assess learners due to this extended support network.
Greater numbers of staff are now working together to
enhance the learning experience and promote the ideal of life
long learning.

18. Introducing Inter-professional Education onto a Multidisciplinary Stroke Unit

Lisa Edwards, Majella Brennan and Callum MacGregor
Lisa Edwards is currently working as a Senior Stroke Specialist Speech & Language Therapist for University Hospital Lewisham, within a large Stroke Unit and Multidisciplinary team.

The World Health Organisation (WHO) first identified Inter-professional Education in 1978. The Department of Health NHS Plan of 2000, mentions that inter-professional education forms part of a, "new core curriculum for all education programmes for NHS staff" (DoH 2000). However, from initial background reading it was evident that this is a relatively rare practice within therapy services. We therefore proposed that Interprofessional Learning Education (IPE) could be beneficial in improving health outcomes and promoting interdisciplinary collaboration within our unit.

A fantastic opportunity arose to provide a student nurse with an insight into the daily life of therapists, within our busy stroke unit. Conventionally we would offer uni-disciplinary student placements, with the opportunity to shadow other professions; however we had yet to introduce IPE onto the stroke unit. Whilst offering a variety of educational opportunities within each discipline, this encouraged us to go one step further, introducing objective led multi-professional teaching.

Placement occurred over 3 weeks (7th – 25th September 2015). Each week was led by a particular discipline (Speech, Occupational and Physio-therapy) with objectives agreed for the whole placement. These were reviewed using qualitative and quantitative data through semi-structured interview focusing on skills and professionalism, rather than task-based objectives. Emotional touch points were a valuable approach to encourage the student to identify opinions and feelings at the start and end of the placement.

From four agreed objectives a visual analogue scale (1-10) was used to measure the students' progress throughout the placement. At the end of placement, it was found that there was significant improvement in student progress with mean scores improving from 1 initially to 7.5 at the end of three weeks.

Frustration was an interesting factor, where expectations of the educator and the student were not aligned, despite careful discussion at the outset. The student expected to have a more hands on experience with opportunities to be a 'proxy' therapist. The emotional touch points reflected more a realisation of the extent of knowledge of other professions that could be better echoed within her practice. It was promising to hear our student take some of the knowledge gained and put this into practice during the placement, as well as encouraging other qualified nurses to do the same. We realised that IPE is crucial within our own daily practice on the

stroke unit and furthermore highlights that, "collaborative practice strengthens health systems and improves health outcomes" (WHO, 2010).

Future developments:
- ✓ Pre-learning pack
- ✓ Objectives; overall and individual
- ✓ Combined student placements across disciplines
- ✓ Student led IPE resource pack

19. Developing a practice learning opportunity (PLO) in an experimental medicine clinical research setting: preparing nursing students to be research active

Clinical research is an essential part of practice learning opportunities (PLO) within nurse education (Evely, Hanson and Naylor, 2014; Harrison, 2014). NHS England mandates that every patient has the opportunity to be involved in research (NHS England, 2013). Clinical research needs to be embedded in clinical practice; which requires more clinical staff to be research active, supporting and leading studies. However, research roles are often poorly understood and the profile of research needs to be raised. Research and evidence based practice is included in pre-registration nurse education, but (Evely, Hanson and Naylor, 2014; Harrison, 2014) suggest that PLO in clinical research should be positive experiences for nursing students.

In response, a two week placement pilot study was undertaken for 21 Adult, Child and Mental Health Post Graduate Diploma Nursing students (PgDip, RN) in a clinical research facility with an emphasis on experimental medicine research. The clinical research PLO included a bespoke Good Clinical Practice light session, experience of research in practice in a number of specialties and laboratory teaching across the life span.

Evaluation of the project was positive, and undertaken through pre and post student questionnaires. Data was thematically analysed to identify what the students had learnt. Overall, all students found the PLO to be of benefit and for some the experience of being in another field of nursing undertaking clinical research was very thought provoking. At the end of the PLO the students presented as mixed field groups to their peers and shared their learning from the PLO. The evaluation through the student questionnaire was seen as a positive experience overall.

The authors have since built on the pilot success by hosting a variety of professionals from other international institutions looking to gain an insight into the experimental medicine research process in the UK.

Since the completion of the pilot, planning for ongoing PLOs has been developed and endorsed through NHS England reviews like Shape of Caring (2015). This makes recommendations towards integration, developing greater decision-making skills and the routine application of research and innovation, which should be formalised within education. At the same time, a focus is emerging, in response to

Margaret Davenport, Ruth Millet and Jo Studham
Margaret Davenport is Course Director, Post Graduate Diploma in Nursing Programme, Kingston University and St Georges University London.

Ruth Millett is currently a Clinical Research Nurse at St George's University Hospitals NHS Foundation Trust. Working across a range of specialties to improve outcomes for patients and their families through access to experimental medicines and novel treatments. She has been a mentor for seven years and is proud to play a part in helping student nurses to develop their knowledge and skills.

financial pressures, on retention of newly qualified nurses especially across the London area. These issues have been explored in relation to providing future local and international research placements. Results and a discussion of findings will be presented within this poster.

20. A case study on the changing landscape of clinical placement: the South East Coast Ambulance Service approach.

A broadening scope of practice for paramedics and growing demands on the wider healthcare system has resulted in an increased call for commissioned paramedic places at HEIs around the UK. In response to a national deficit, places on paramedic programmes have risen by nearly 1000% over the last 10 years. This academic year will see South East Coast Ambulance Service (SECAmb) supporting an estimated 500 direct-entry and 120 in-service student paramedics spread across 5 partner HEIs. Each student requires an average of 700 clinical placement hours per year, spread over 44 ambulance stations and covering a geographical area of 3,600 square miles across Kent, Surrey, Sussex and parts of North East Hampshire.

Mentoring within an ambulance trust brings its challenges. The environment in which placement education occurs is unique, but more recently, the challenge comes in responding to this increasing demand for paramedics and providing over 400,000 hours of mentoring per year.

Through utilising placement funding, the introduction of a new structure dedicated to supporting clinical placements and working collaboratively with our HEIs has increased both the capacity and quality of the clinical learning environment for students. Six dedicated education leads plus administrative support, link with our five partner HEIs to facilitate the creation of a network supporting our mentors and students. By increasing the focus on achieving excellence in placement provision, we are offering student paramedics' valuable experiences and enabling them to find their own identity within the profession.

Development of innovative software to manage booking of clinical placement shifts will be delivered this spring. Linked with our live database of mentors, it is constructed around 24 hour, 7 day per week placement provision. It enables real-time booking by students, allowing effective management of placement hours, minimising inaccuracies and maximising placement capacity.

With the increased shift towards practice simulation, the trust has launched a clinical simulation vehicle, 'Simbulance' and also introduced iSimulate teaching units. These combined with the simulation suites at our partner HEIs, enhance the clinical learning environment for the student paramedic with scenarios that can be realistically imitated from practice.

SECAmb's clinical placement team are looking to offer a centre of excellence in placement provision and education,

Nigel Brown and Matt Bridgeman

Nigel Brown is a NAEP Committee member and the Clinical Placement Lead for South East Coast Ambulance Service NHS Trust, working alongside clinical education colleagues in pursuing excellent placement education for student paramedics. He holds the clinical role of Paramedic Practitioner and has interests in mentoring, urgent & primary care, practitioner mental health resilience & wellbeing and End of Life.

Matt Bridgeman is a Practice Placement Facilitator for SECAmb, linked with Canterbury Christ Church University and part of the clinical education team supporting pre-registration students. He is a Paramedic and has interests in mentoring, teaching and education within healthcare.

able to adapt to the continuing demand for paramedics regionally. Through this commitment, the trust is contributing to the creation of a fit-for-purpose workforce whilst allowing for the growing needs of the wider healthcare system.

21. Health Care Professionals as Collaborative Researchers: Developing the Necessary Foundation Skills at the Start of Pre-Registration training for Speech and Language Therapists

The stated principles of the NHS, contained in its Constitution, include a commitment to the promotion and conduct of research and a pledge to ensure that patients are made aware of research relevant to them. Therefore practising health care professionals are expected to have a research role, which is usually executed in collaboration with other members of an investigative team. At University College London we have developed a new non-assessed assignment, designed to develop foundation collaborative research skills at the beginning of the degree course leading to recommendation to practise as a speech and language therapist.

This study describes the evaluation of this new assignment in terms of whether it has helped the students to:

- master skills in library searching and using citation managers;
- develop academic writing and reading skills;
- develop collaboration skills with fellow students and researchers.

Students worked in small groups to research a topic relevant to speech and language therapy practice and produce a report written in the APA style (used in most journals read by speech and language therapists) with references generated by a citation manager. Immediately following the allocation of the topics, the students received training in library searching, use of citation managers and academic writing skills. Staff conducting the training used the assignment as a context for their teaching. Students were also encouraged to contact relevant researchers in UCL and at other universities.

Students received feedback on draft and final versions of their reports, which were placed on an internet site that all students and staff can access.

The final reports were written in the APA style and references had been generated by a citation manager.

Other outcomes of the assignment were measured by a focus group, immediately following completion and a questionnaire given to students four months later.

The presentation will describe a detailed summary of feedback from students, focusing on the skills that the assignment aimed to improve. Students reported that it was useful to develop these skills early in the course, before assessed work was set. They gave examples of specific skills they had learnt such as summarising rather than quoting, how to assign roles in a group and, using shared google documents for writing group reports. Building on

Rachel Rees
Rachel Rees is currently the Programme Director of the MSc Speech and Language Sciences at University College London. This degree leads to recommendation to the HCPC to practise as a speech and language therapists. Her interests in teaching and research centre on speech and language therapy interventions.

these kind of foundation skills should allow students to develop as collaborative researchers when practising as speech and language therapists.

22. Challenging the traditional model of physiotherapy student supervision on the acute medical unit.

Sarah Smith, Fiona Mooney, Mary Jane Cole, Jennifer Willis and Peder Becket
Sarah Smith is currently the Principle Physiotherapist in the STAR team at St Georges NHS Foundation Trust. Her specialist interests are therapies in acute medicine and ED, her background of geriatrics and orthopaedics.

Traditionally therapists working on AMU had the roles of admission prevention, improving patient flow within the hospital, providing early rehabilitation to patients, so reducing their length of stay and improving the risk of deconditioning and acute respiratory physiotherapy intervention.

Therapists working in AMU have evolved overtime and now combined teams with PT's and OT's work in an enhanced / extended model with PTs and OTs completing some aspects of each others roles whilst maintaining professional respect for when the specialism is required.

This style of role enhancement has many benefits to the patients and service such as reducing handovers, improving continuity of care, reduced duplication of assessments, so improving speed of assessments and in turn patient flow.

The aim of this project was to review the appropriateness of the current model of physiotherapy (PT) undergraduate supervision for students whilst on placement in the AMU. The current model was then challenged with a view to mirroring the inter-disciplinary style of therapy practice used in the AMU and to explore the perceived benefits of the new model.

Whilst on clinical placement, therapy students are traditionally supervised by a therapist of the same profession. The proposed approach was for the undergraduate PT students from St Georges University to be supervised by a senior Occupational Therapist (OT) for the duration of the student placement.
During the course of the project, there were 3 students within the AMU therapy team (STAR – social, therapy, assessment and rehabilitation team). 2 of the students had clinical educators practicing with the traditional model (1 PT and 1 OT) and the 3rd student, who was a PT, had an OT as their clinical educator, so trialing the new style of clinical education practice.

The students, STAR staff and university staff completed questionnaires pre and post placement on their thoughts, apprehensions and experience to the education models used and then a focus group was held at the end of the placement for the 3 students with the project leads.

Feedback from both the students and the educators was very positive and to date we have used this educational style with three PT students on placement in our team and in May will be having our first OT student completing a placement with a PT educator.

The success of this project highlighted the appropriateness, in some specific clinical areas, to extend and continue to develop the model of clinical education by supervisors outside of the traditional training profession.

As therapists on AMU move to inter-disciplinary working being their normal practice, we would like to extend this to being the norm for undergraduate PT and OT students whilst on placement in the AMU.

Keynote presentation – afternoon session

Keynote speaker - Linda Hindle - Developing the future public health workforce

Linda Hindle is the lead allied health professional and public health engagement champion for the Police and Fire service within Public Health England.
She is responsible for supporting the contribution of the 12 Allied Health Professions, Fire and Police services to improving public health across England, as well as supporting the national health and wellbeing programmes coordinated by Public Health England. Linda's previous role was consultant dietitian in Birmingham City Council, with responsibility for the strategic planning and commissioning of services and interventions to prevent and treat obesity across Birmingham.
Linda has experience of working in and with Local Authority, NHS and private sector, research and education organisations.

KEYNOTE ADDRESS

The more imaginative students, tutors and practice teachers are, the more impact interprofessional practice learning will have. That is the proposition that I invite you to test as we compare the merits of practice learning models adopted and adapted from our respective professions for interprofessional learning in the workplace, the classroom, the laboratory and the virtual environment.

Barriers are many:

- attitudinal - relinquishing outdated assumptions
- organisational - aligning courses, placements and requirements
- operational - grounding in best practice
- educational - preparing practice teachers
- financial - demonstrating value for money

The session is your opportunity to pool experience in surmounting these barriers in partnership between services and universities to strengthen interprofessional within professional education throughout health and social care.

Parallel sessions 3 – presentations

14.40-15.25 - Room CC 1.8 – Impact/outcomes of learning in practice

14.40-15.00   **Myra McKenzie, Evelyn Newman**

Preparing the dietetic workforce for the future - growing the next generation

Dietitians have historically delivered 1-1 therapeutic advice and support to service users in their own homes and care home settings. Practice placements have largely focussed their training within clinical rather than social care settings.
 With current developments of healthcare provision directed towards homely, social care settings there is a compelling need to develop a skilled, person-centred workforce, which is equipped to work across sectors and to support people from within social care models of care.
In 2014 a partnership group, comprising NHS Education for Scotland (NES), NHS Highland, Parklands care group and Robert Gordon University (RGU) piloted and successfully developed a model for the placement of several student dietitians within a care home. The placements have been thoroughly evaluated and widely shared.
Other Health Boards are now implementing dietetic care home placements as a result of the Highland model. In 2015 a partnership of NES, Care inspectorate, NHS Highland, RGU and Highland Home carers (HHC) agreed to test a model of training student dietitians in the context of care at home settings

Aims
Carry out observational comparisons of care in homely settings
Conduct audit of service users' nutritional status
Observe and assist aspects of meal service provision
Reflect on the challenges of eating and drinking safe, nutritious food and fluids in a homely settings.
Develop innovative pieces of work related to engagement of service users in their nutritional care.
Explore use of Quality Standards for Practice Placement (QSPP) across placement settings

Outcomes to date
Care home placements have:
Been successfully trialled, evaluated and shared widely through the NES website, in many national publications and via social media.
Received recognition in several national award ceremonies: winning The British Dietetic Association (BDA) Dame Barbara Clayton award for innovation and excellence; runner up in the Advancing healthcare AHP awards "integrated care delivery"; and the Scottish dementia awards "most innovative partnership"
The pilots have demonstrated that social sector placements for student dietitians can be used as an alternative model to conventional NHS- centred clinical placements.
There is still a great deal to explore, to plan for enabling service users to remain nutritionally safe and well in homely settings. These two models of placement offer opportunities to develop our learning about what our service users want from our service.
We have engaged the wider profession in sharing the outcomes of these pilots. Other health boards are now piloting their own care home placements. The care at home option will continue to develop and evolve following each evaluation.

Myra McKenzie is an experienced dietitian, with 30 years of experience in a variety of settings. She is currently Course Tutor in Dietetics at Robert Gordon University, and her interests in teaching are around ensuring that dietetic graduates are prepared for the workplace and able to practice in a person centred and empathic way.

15.00-15.20 **Lindsay Keefe, Fiona Fowler**

Valuing our students in practice: Is there more we can do?

The placement component of health and social care programmes is integral to degree programmes across the UK and affords a means for enculturating students into the real world of practice and their profession. The importance of a caring and compassionate workforce is well espoused in relation to patient care along with valuing and recognising individual contributions from staff and students. However local NSS data and anecdotal evidence from students on an interprofessional programme revealed that they do not always feel valued and respected in their practice settings. The importance of students being valued and having a sense of 'belongingness' is well evidenced with mentors being influential in how this is manifested. 'Belongingness' motivates students to learn, question and feel safe in a learning environment.

Following ethical approval to further hear the student voice they were invited to attend focus groups. These were used to explore what had made students feel valued, how this had been facilitated and enhanced in practice areas and what factors had undermined this. Using thematic analysis a number of themes emerged including: needing to be recognised as an individual and not 'just a student', communication, power relationships, understanding the 'hidden' aspects of team dynamics/working areas and the importance of the stage of training being recognised and acknowledged.

The NMC and HCPC place great importance on the student ability to develop their skills in working as effective, autonomous and independent practitioners. In the novice stages of training these skills are in the formative stage and require skilled support and commitment to develop. As students near completion of their practice experiences and are at a level of 'competent' students, they expect to be working at a level of autonomy and independence appropriate for a newly qualified practitioner.

The findings of the research have been used to inform practice colleagues about what students say they value most and has informed preparation of mentor training along with the development of a booklet proving hints and tips to student and their mentors on how to maximise this very important sense of 'belongingness'.

Lindsey Keefe is currently the placement lead for the occupational therapy pathway within the Faculty of Health and Wellbeing at Canterbury Christ Church university. Her particular interest is in teaching and learning in practice environments.

14.40-15.00　　　　　　　　　**Nikki Petty, Oliver Thomson, Abeer Altamimi**

Professional identity and clinical decision-making of musculoskeletal therapists

Background

Clinical decision-making in relation to examination, assessment, treatment and management of people with musculoskeletal conditions is fundamental to clinical practice and central to professional autonomy and accountability. With the advent of patient-centred care, collaborative decision-making has been advocated between patients and therapists, however little research has explored how practitioners make decisions with their patients.

Purpose

To explore practitioners clinical decision-making.

Methods

This paper draws on three qualitative grounded theory studies carried out at doctoral level to offer new unpublished data and insights into clinical decision-making. Fifty-one semi-structured interviews were carried out with 21 physiotherapists and 12 osteopaths, who had between 4 and 25 years of clinical experience. Two studies were carried out in the United Kingdom and one with physiotherapists in Saudi Arabia.

Results

Practitioners were characterized as Treater, Teacher or Communicator and this professional identity influenced how they approached clinical decision making. Treaters focused on effective diagnosis and treatment, held a technical rationale view of practice and decision-making was practitioner-led. Teachers focused on listening and learning from patients in order to teach them how to manage their condition, held a professional artistry view of practice and facilitated patients to make decisions about their treatment and management. Finally, communicators focused on the interests, values and expectations of the person, held a professional artistry view of practice and facilitated shared decision-making. Practitioners starting a postgraduate musculoskeletal physiotherapy course were considered Treaters but post qualification widened their repertoire to appreciate the role of teacher and/or communicator.

Conclusion

There was similarity in musculoskeletal clinical decision-making amongst physiotherapists and osteopaths across the two countries. Practitioners identity influenced how they practiced and the degree to which they enabled patients to participate in decisions about their treatment and management.

Implications

Awareness of professional identities and subsequent conceptions of practice and clinical decision-making may enable practitioners to bring their preferences under conscious control so that appropriate, deliberate management strategies can be chosen for individual patients. It might be posited that this would, in part, be a characteristic of clinical expertise.

***Nikki Petty** is currently Associate Professor in the Centre for Health Research, School of Health Sciences, University of Brighton. Her main role is Course Leader of the MRes (Clinical Research) and teaching research methods. She has written two textbooks on neuromusculoskeletal examination and assessment, and neuromusculoskeletal treatment and management. She completed her Doctorate in Physiotherapy in 2009 exploring the learning transitions of MSK physiotherapists and their development towards clinical expertise. She is Hub leader for Sussex and Surrey Council for Allied Health Professions Research (CAHPR).*

15.00-15.20   **Jo Preston, Iain Wilkinson**

Multi-Disciplinary Team Education on Ageing (MDTea) podcasts to foster communities of practice and collaborative working.

Background

Learning is a collaborative process. Interactions within our own communities of practice are stimuli for learning to occur. Currently learning for multi-disciplinary teams (MDTs) is largely profession specific going against the working environment and counter to five year forward visions for the NHS, as a whole, and for older people in particular. Gold standard geriatric care requires Comprehensive Geriatric Assessment, a multidimensional, inter-disciplinary diagnostic process to develop a coordinated and integrated care plan for treatment and follow up.

Podcasts are a free, easily accessible way to share information, reaching wide and varied audiences. They provide an alternative to both traditional face-to-face and written forms of educational content delivery and allow learners to access material flexibly. There are no existing podcasts on multi-professional practice.

Purpose:

To develop free, open access educational material for the whole MDT on ageing. To develop a community of practice within the digital space which will translate to better clinical working within teams working with older adults.

Description:

The MDTea podcast produces short (30min) episodes on topics commonly encountered by healthcare professionals working with older adults, including dizziness, pain control, continence and falls. Each is freely available through a website, free hosting platforms and a mailing list - ensuring all levels of digital literacy are catered for. Active engagement with social media is used to develop the online community of practice.

An MDT faculty representing physiotherapy, occupational therapy, pharmacy, physician associates, geriatric doctors and nurses governs the content. Episodes map to curriculum frameworks for each MDT discipline so they can be used as CPD for revalidation.

Results:

In the first 7 days following release, the podcast received 250 downloads, and trended in iTunes charts (science and medicine). Followers on twitter and facebook totalled 187 and 86. Tweets gained 5500 impressions with a peak engagement rate of 10.6%. While the majority of our audience was UK based, 11% were from USA / Canada, with additional activity noted from Norway and Spain. We will present further up-to-date details as further episodes are released.

Conclusion:

Podcasts usually take 12-18 months to develop a large audience; 250 in one week is significantly above average for a first episode, demonstrating a clear market for delivery of information not only in this format but also in this area of practice. We have been able to engage a large number of practitioners from different backgrounds early on and will continue to do so.

Jo Preston is currently a final year registrar in geriatric medicine in Kent Surrey and Sussex, soon to become a Consultant in Acute Geriatrics at St George's Hospitals Healthcare NHS Trust. She is interested in the role of education as a fundamental driver for service improvement.
Iain Wilkinson is a Consultant Geriatrician with a special interest in Orthogeriatrics and movement disorders at Surrey and Sussex Healthcare NHS Trust. He is a fellow of the higher education academy and has a longstanding interest in medical education and educational research

14.40-15.25 - Room CC 2.6 – Impact/outcomes of learning in practice

14.40-15.00   **Verity Snook**

A case study of the student paramedic unpredictable learning environment

Background
The College of Paramedics (2014) discuss disease and conditions of the late 20th century which have necessitated changes in the preparation of pre-hospital care provision. These changes have impacted the requirement for paramedic knowledge and skill to demand a greater emphasis on clinical decision-making, leading to an evolution of the university based student paramedics attending full time undergraduate programmes. Practical skill consolidation is undertaken with a partner ambulance trust as clinical placements.

Method and Design
Qualitative research using an interpretive case study design sought to answer the question "how do you support student paramedics in an unpredictable learning environment?" Case study research Baxter and Jack (2008) explain is an approach to research whereby the phenomenon that is being investigated is explored thoroughly and from a variety of angles. This methodology supported enquiring into a variety of sources to understand where the educational framework and curriculum, guide paramedic practice placement learning and included interviewing six practice placement educators (PEds) recruited from one UK Ambulance Service to elicit learning and teaching strategies adopted when supporting student paramedics.

Analysis and results
The quality of the practice learning environment and support provided by the PEds has a significant impact on the student paramedic's ability to integrate theory with practice. There was widespread acknowledgment that the unpredictability of the learning environment poses challenges for students, PEds and university tutors.

Conclusion
The findings of this study suggest a provision for advanced communication strategies, providing tools to support mentors in coaching and counselling in the provision of effective reflective debriefing should be routinely provided. Consideration to alignment of placement venues to reduce the impact of unpredictability would provide valued patient interaction with less volatility. In addition, accessing more appropriately staged simulated activities will provide opportunity for general competency development and improve student confidence.

Verity Snook is currently a teaching fellow in Integrated Care with a specialist interest in Paramedic Practice at the Faculty of Health and Medical Science at the University of Surrey. Verity's interests teaching and all healthcare students both undergraduates and postgraduates in particular paramedics.

15.00-15.20   **Lindsay Gillman**

The head, heart and hands model: a new approach to the holistic assessment of competence in clinical practice

In 2014 the Health Education England Local Education and Training Boards in London commissioned a project to develop a standardised midwifery practice assessment document, in partnership with eight universities.

Following scoping of the practice assessment documents used by the universities, it was clear that there was significant variation in the way that clinical competence and

professional behaviours were assessed; also reflected in a national scoping exercise (LME UK 2014). Recommendations from a number of authors indicated that further work was required to develop practice assessment models in order to consider holistic performance (Chenery-Morris 2010, Donaldson and Gray 2012, Edwards 2012, Heaslip and Scammell 2012).

The aim of the holistic approach to student assessment is to consider overall performance rather than just competence in undertaking particular clinical skills (Bernstein 1996 cited in Chenery-Morris 2010 p.5). In this context, overall performance is referred to as *conceptual knowledge*. Anderson *et al* (2001) and Bloom *et al* (1956) define this knowledge as one in which the inter-relationships between elements of understanding enables them to function together. This creates a 'web of knowledge' that can be transferred between situations and facilitates application outside a known context. Conceptual knowledge develops as a result of thoughtful, reflective learning through practise. This type of knowledge is considered to be the most meaningful for effective, autonomous practice (LME UK 2014).

Two models have been developed to demonstrate this approach: the 'Head, Heart and Hands Conceptual Knowledge model' and the 'Practitioner Conceptual Development model'.

The *Head, Heart and Hands* model has been developed with reference to the three learning domains in addition to the elements from the *NHS Compassion in Practice* strategy (NHS 2012) to produce an integrated model that includes professional values and behaviour. The *Practitioner Conceptual Development* model consists of a three dimensional framework within which each 'step' consists of a 'layer' of expected knowledge, application of skills and demonstration of professional behaviours.

The aim of this model of assessment is to encourage student practitioners to engage with all elements of professional practice in a holistic way, integrating the professional values and behaviours into knowledge and skill acquisition, in order to develop as a clinically competent, compassionate professional. The models have been adopted for use by the eight universities who participated in the project, and have been locally evaluated positively.

Formal evaluation of the impact of the models at the eight participating universities will occur during 2016-2017.

Lindsay Gillman is an Associate Professor in the School of Midwifery and Child Health at Kingston University and St. George's University of London. Lindsay was seconded full-time to the Midwifery Pan London Practice Assessment Document project in 2014-15 leading on the assessment strategy. Lindsay's interests include exploring work-based learning and the ways in which professional theory and practice can be taught, integrated and assessed effectively.

14.40-15.25 - Room CC 1.3 – Becoming/being a compassionate professional

14.40-15.00   **Maria Pearson, Suzanne Britt**

The Compassionate and Professional Midwife- development of a Flipped Classroom module.

A number of recent high profile reports (Berwick, 2013, Bubb, 2014, Francis, 2013) all highlight issues with staff who appear to lack the essential desire to deliver compassionate care. The National Health Service (NHS) core values and behaviours cited in the Department of Health's (2012) six C's are a solution to the highlighted issues and form the foundation from recruitment through to graduation of the University of Nottingham's (UoN's) 2015 spiral midwifery curriculum. The first module that students undertake is the Compassionate and Professional Midwife. The module incorporates five themes; the midwife, the Professional Midwife, Emotional Intelligence and resilience, Ethics, Compassionate midwifery care and the context of midwifery practice. The module's central objective is to introduce students to the principles of compassionate midwifery care underpinned by professionalism, arguably key elements missing from care, as cited by the recent reports.

Both the content and delivery were key drivers in developing the module; it was important to create an authentic, exciting and interactive approach to learning to keep students engaged and enthused. Furthermore, consideration was given to personalised learning approaches to reflect the fact that contemporary student midwives are motivated and engaged by technology. A Flipped Classroom model (Berrett, 2012) was followed. This flipped classroom pedagogical model reverses the usual lecture format and students gain first exposure to new material outside class, via reading and undertaking tasks online. Classroom time is used to adapt and apply the learning through critical reasoning approaches. This approach means that students are undertaking lower levels of cognitive work (gaining knowledge and understanding) outside the traditional classroom and instead focusing upon the higher forms of cognitive work (application, analysis, synthesis) in class with facilitation and support from a midwife lecturer. The pedagogy arguably supports the development of critical, courageous midwives that are able to learn independently from the more traditional models of education.

Student evaluations from the first module are encouraging with students enjoying and finding the topics of compassion, emotional intelligence and professionalism exciting and relevant.

The aim of the presentation is to share with other educators one aspect of this exciting new university curriculum, which is responding to high profile reports and developing compassionate, professional and self-aware midwives of the future.

Maria Angelina Pearson is a Teaching Associate at the University of Nottingham, School of Health Sciences, and Division of Midwifery. Maria is the Lead for the Compassionate and Professional Midwife, level one module in the new undergraduate curriculum. Maria also leads on mentorship within the Division of Midwifery Together with a sign-off mentor Maria developed a Grading in Midwifery Practice tool based upon the NHS values. Maria is also a year one student undertaking an Education Doctorate at the University of Nottingham.
Suzanne Britt is an Assistant Professor of Midwifery at the University of Nottingham, Division of Midwifery. Suzanne leads on the year two Perinatal Mental Health module, but has a special interest in the teaching of Emotional Intelligence, Self-awareness and Resilience. She has experience in developing e-learning for her modules and is working on university-wide

resources for improving learning and student engagement. She is a Fellow of the Higher Education Academy and will be commencing a PhD in October 2016.

15.00-15.20 **Majella Kavanagh, Kathy Elley**

Reassuring the public that nurses and nursing students are compassionate.

Becoming a health or social care professional is much more than simply developing the knowledge base and skills required'. Becoming and being a compassionate professional in a constantly changing landscape is not a new demand on the profession. The innate capacity to care though is under question by the public, following the reports by Francis (2013), Keogh (2013) and Andrews & Butler (2014).

The purpose of this submission is to present the findings of my recent dissertation exploring, what ethical competence is and its impact on compassionate care.
The aim of the dissertation was to determine whether nursing and midwifery students are ethically competent to carry out compassionate care or whether they need to be ethically competent to be compassionate.

The dissertation took the form of a literature review, initially using a global search facility, then 'Findit©' and then 'CINAHL©'.

After identifying appropriate research I utilised guidance from the Critical Appraisal Skills Programme, CASP and from the Research and Analysis Tracking System, RATS to identify whether the research was of a rigorous enough standard to contribute to determining a link between ethical competence and compassionate care.

The literature review revealed the connection between the development of ethical competence and compassionate care and subsequently the key role of the mentor in facilitating that learning was identified and explored. The literature review was complicated by the realisation that consistent language was not used. This meant that a series of words, used synonymously with the word 'compassion' had to be incorporated into the search terms. This should not detract from the findings.

Much of the research identified that learning took place when students encountered ethical dilemmas. The mentor is key to this learning, and whilst ethical competence cannot be taught in the same way as practical skills the mentor can facilitate the students own learning and the development of a compassionate approach when encountering ethical dilemmas. The mentor needs to be ethically competent themselves in order to share and reflect on those experiences with the student and so facilitate the students learning.

The potential for learning therefore is realised when student nurses encounter ethical dilemmas within a supportive student mentor relationship. Transformational learning in this way has the capacity to be life changing as the students critical thinking abilities are developed. McAllister's (2015) literature review, in particular drew attention to the capacity for this transformational learning. Learning that promotes the values of compassion, in contrast to some contemporary beliefs, reinforced by some of the popular press that nurses and by default nursing students lack compassion.

This puts the onus on mentors of nursing students, as the ethical dilemmas regarding patients and clients are encountered in practice. Mentors need to be skilled in their

65

own reflective practices in order to process ethical dilemmas and to share their understanding and personal perspectives with nursing students, thus supporting nursing students in the processing, and the associated decision making, involved in managing the dilemmas themselves. These conversations support the development of reflective thinking, learning in the students.

In the contemporary constantly changing social and healthcare landscape the ability to reflect and learn through reflection contributes to the development of the nursing identity. It is the responsibility of Nursing and nurses in the 21st Century to demonstrate to the public, the consumers of healthcare that the discipline is fit for purpose. That includes being ethically competent and able to deliver compassionate care that is evidence based and appropriate for individuals, families and communities. Shaping our identity as compassionate professional nurses is vital.

Majella Kavanagh *is a Practice Education Facilitator with ABMU HB and USW. Her role is to develop potential and existing mentors to nursing and midwifery students in practice. Her interests are continuing education for registered nurses and the sharing of positive aspects of caring for those with dementia.*

NAEP Executive Committee List: April 2016

Name	Representing
Mr Nigel Brown	Paramedics Clinical Placement Lead (Specialist Paramedic – Urgent & Emergency Care) University of Brighton
Professor Lynn Clouder Vice – Chair of NAEP	Professor of Professional Development and Director of the Centre for Excellence in Learning Enhancement, Coventry University Editor of the NAEP 'International Journal of Practice-based Learning in Health and Social Care.'
Ms Louise Coleman	Radiography Professional Officer for Education and Accreditation The Society and College of Radiography
Ms Carol Dicken	Social Work Faculty Lead Practice Education & Senior Lecturer (Practice Learning), School of Social Work Kingston University and St George's, University of London
Ms Pauline Douglas	Dietetics Senior Lecturer/Clinical Dietetics Facilitator University of Ulster
Mr Ian Fleming	Clinical Psychology Clinical Director, Doctoral Training Programme in Clinical Psychology University of Manchester
Mr Peter Glover	AHPs Practice Education Co-ordinator NHS Education for Scotland
Dr Richard Gray	Medicine Chair of Centre for Advancement of Interprofessional Education
Mrs Maureen Grove	Occupational Therapy Education Manager, Pre-registration and Policy The College of Occupational Therapists
Dr Dawne Gurbutt	Nursing School of Health UCLAN

Dr John Hammond	Physiotherapy Associate Dean (Education) Kingston University and St Georges, University of London
Jane Harvey-Lloyd	Radiography Senior Lecturer in Diagnostic Radiography University Campus Suffolk
Dr Janet Holt Treasurer	Nursing Director of Learning & Teaching, School of Healthcare University of Leeds
Ms Rosanna Hudson	Dietetics Policy Officer, Centre for Education and Development, British Dietetic Association
Dr Clare Kell	Physiotherapy Programme Leader PCUTL/Senior Lecturer Cardiff University
Ms Jenny Miller	Voluntary Sector CEO PAMIS, University of Dundee-based charity
Professor Ann Moore President	Physiotherapy Emeritus Professor of Physiotherapy University of Brighton
Dr Jane Morris Chair	Physiotherapy Deputy Head of School of Health Sciences, University of Brighton
Dr Gwyn Owen	Physiotherapy Practice Education, Chartered Society of Physiotherapy
Mrs Kim Russell	Midwifery Associate Professor in Midwifery, University of Nottingham
Dr Carol Sacchett	Speech and Language Therapy HEI providers of Speech and Language Therapy Education
Mrs Tracey Stokley	Osteopathy College of Osteopaths
Mr Tony Walker	Nursing Lecturer, University of Hull
Miss Helen Bristow Hon Secretary	Physiotherapist