



National Association of Educators in Practice

Adapting Practice Education for Learners of the Future

Friday 10th May 2019

The Studio, Cannon St, Birmingham



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Welcome

We warmly welcome all delegates and presenters to the eighth 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 presenter 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 seventh 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

A handwritten signature in black ink, appearing to read 'Ann Moore', is written in a cursive style.

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



Conference Outline

Investment in the next generation of health and social care practitioners has to be a shared priority if we are to embrace the changing landscapes of practice. Emerging roles, new contexts and settings and varied pathways and frameworks for learners to become qualified professionals are amongst the many considerations. A workforce with diverse backgrounds and who are digitally native means we need to rethink some of our traditional approaches to practice based learning if we are to harness these opportunities. It is opportunities and challenges that provide the focus for the 2019 conference.

Conference themes

1. Modifying practice learning to changing service needs

This theme focuses on how changing service needs can impact practice learning experiences and facilitate new ways of working. Topics might include:

- Innovative service design and integration of practice education
- New/emerging roles and practice education
- Partnership working between placement and education providers
- Evaluation of student learning in diverse contexts and settings
- Service user involvement in design of practice learning

2. Responding to new pathways to qualified practice

This theme focuses on how practice learning is responding to changes in policy or quality standards. Topics might include:

- Responses to the degree apprenticeship agenda
- Impact of new standards on practice-based learning
- Health and social care policy implications for practice based learning
- Quality monitoring and assurance of practice learning

3. Diversity of new generation learners driving change in practice education

This theme focuses on developing practice based learning that is anticipative of a workforce that is both diverse and digitally native. Topics might include:

- Students contribution to shaping to practice learning
- Evaluation of diversity and inclusion in practice education
- Supporting learners from varying backgrounds and learning needs.
- Schemes designed to ensure the workforce represents the populations that they serve
- Digital technologies and simulation in practice based learning



Conference programme

8.45	Coffee & Registration	Room: Achieve
9.15	Welcome to Birmingham and Introduction to the Conference Dr Jane Morris, Chair of NAEP	Room: Innovate

9.30-11.00	“Provocations”: workshops and plenary		
9.30-10.30: Workshops	Room: Develop Facilitators: Carol Sacchett John Hammond	Room: Innovate Facilitators: Louise Coleman Jane Morris	Room: Show Facilitators: Jane Harvey-Lloyd Lynn Clouder
10.30-11.00 Plenary	Room: Innovate Feedback from workshops: Action planning – take home recommendations		
11.00-11.25	Coffee and Networking, poster viewing	Room: Refresh	

11.25-12.25	Parallel Sessions 1 – Presentations			
	Room: Develop Modifying practice learning to changing service needs Chair: Lynn Clouder	Room: Innovate Modifying practice learning to changing service needs Chair: John Hammond	Room: Show Diversity of new generation learners driving change in practice education Chair: Jane Morris	Room: Tell Responding to new pathways to qualified practice Chair: Carol Dicken
11.25–11.45	<u>Then and Now - an exploration of novice nursing students experiences of mentoring in practice placement settings</u> <i>Darren Brand</i>	<u>Contemplating pre-registration practice-based interprofessional education for health workforce development</u> <i>Marjorie Bonello, Jane Morris</i>	<u>Telehealth Placements in Speech & Language Therapy Practice</u> <i>Anne Hurren, Jo Sandiford, Emma Burke, Naomi de Graff, Sarah James</i>	<u>Paramedic Praxis- A new perspective of the theory-practice relationship in paramedic pre-registration education</u> <i>Vince Clarke</i>
11.45 - 12.05	<u>Developing permeable practitioners: A new take on training for uncertainty for the health and care professions?</u> <i>Deborah Harding</i>	<u>Evaluation of a Pilot of Peer Mentoring in Clinical Education for Undergraduate Physiotherapy Students</u> <i>Catherine Moore, Natalie Matchett, Sam Patterson, Laura Loeber, Edward Lee, Theresa Baxter</i>	<u>Addressing diversity on clinical placement: Improving the experience for radiography students.</u> <i>Hilary Baggs, Charlotte Burnside</i>	<u>New directions in infrastructure in contemporary social care practice education - nurturing the supervisory relationship</u> <i>Aoife Prendergast</i>



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12.05 – 12.25	Providing tutorials as part of Leeds Teaching Hospital Trust Speech and Language Therapy clinical placements - the benefits for the service, placement educator, and the learner Helen McDonald	Implementing 'PROMPT' training into the midwifery curriculum Jo Butler, Becky Baker, Sarah Bennett Day	Evaluating the effectiveness of a peer-to-peer buddying system in enhancing the experience of transition into practice placements for diagnostic radiography students Sophie Willis, Jane Harvey-Lloyd	Developing a framework for supervision of undergraduate physiotherapy students: a phenomenographic approach Zoe Tilley
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12.25-13.10	Poster Viewing <i>Poster presenters are invited to stand by their posters during this period to answer any questions related to the poster abstracts</i>	Room: Innovate
13.10 -13.40	Lunch	Room: Refresh
13.45 - 14.30	Keynote Address: Shaping the Future for practice learning Speaker: Michele Russell-Westhead Professor of Higher Education Policy and Practice at the London School of Economics and Political Science. Chair: Professor Lynn Clouder, Vice-Chair of NAEP	Room: Innovate

14.30-15.30	Parallel Sessions 2 – Presentations			
	Room: Develop Modifying practice learning to changing service needs Chair: Louise Coleman	Room: Innovate Modifying practice learning to changing service needs Chair: Carol Sacchett	Room: Show Modifying practice learning to changing service needs (x2) Responding to new pathways to qualified practice (x 1) Chair: Pauline Douglas	Room: Tell Diversity of new generation learners driving change in practice education Chair: Ann Moore
14.30 – 14.50	Introducing the role of the practice educator from the University of Derby to the affiliated radiography clinical placement and its impact on the student learning experience. Veena Patel, Emma Orde Powlett	Developing an online distance learning course for Speech and Language Therapy (SLT) Practice Educators Jo Sandiford, Sarah James	Developing the next generation of Paramedic Practice Educators Emma Partington, Sean Cloak, Vince Clarke	Reasons for attainment inequalities in pre-registration physiotherapy practice education - a qualitative study of student experiences Saskia Walker, Meriel Norris, Annabel Williams, John Hammond



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<p>14.50 – 15.10</p>	<p>Time for Dementia - A new way of learning <i>Stephanie Daley, Wendy Grosvenor, Yvonne Feeney, Jane Morris, Juliet Wright, Sube Banerjee</i></p>	<p>Designing an SLT and OT placement that reflects the nature of MDT work in Special Schools <i>Rachel Clifford, Cherry Fitzsimmons</i></p>	<p>Educating our AHP Assistant staff on how they can be involved in Student Practice Placement Education. <i>Natalie Matchett, Sam Patterson</i></p>	<p>PebblePad e-portfolio engagement and the impact on reflective practice for speech and language therapy students on clinical placement <i>Sean Pert, Rachel Starkey</i></p>
<p>15.10 – 15.30</p>	<p>“I loved it so much, I absolutely loved it” - what do podiatry students learn while volunteering at a marathon? <i>Deborah Whitham, Paula Riley, James Coughtrey, Sophia Whitham, Simon Otter</i></p>	<p>Is there a relationship between Multiple Mini Interview (MMI) Score on admission and Physiotherapy students’ performance on practice placement in one HEI programme? <i>Sarah Waygood, Hendrik van der Sluis, Gita Ramdharry</i></p>	<p>Enhancing undergraduate placement capacity- A Focus Group <i>Sarah Dyson</i></p>	<p>Preparing health care graduates for the experience of transition in their first posts: maximising the effectiveness of preceptorship <i>Jane Harvey-Lloyd, Jane Morris</i></p>

<p>15.30 – 15.45</p>
<p>15.45 – 16.15</p>
<p>16.15</p>

<p>TEA + CAKES</p>
<p>Update on NAEP current activity and future directions - Jane Morris NAEP journal – Turning your NAEP abstract into a paper – Lynn Clouder Announcement and presentation of Abstract Prizes</p>
<p>Close of Conference NAEP AGM</p>

<p>Room: Innovate</p>
<p>Room : Innovate</p>



Introduction to “Provocations” workshops

This year’s NAEP conference is making a change to the format and including a parallel series of sessions entitled *Provocations*. The aim of these interactive sessions is to enable us to have “time and space for discussion” to explore some of the challenges we all face.

In these sessions participants will be invited to discuss potentially controversial issues directly related to the main themes of the conference. Although the content will be facilitated by members of the NAEP committee the emphasis will be firmly on utilising the knowledge in the room.

Participants will be allocated in advance to these sessions with the intention of maximising both the breadth and depth of experience within these sessions.

The *Provocations* sessions will last for an hour between 9.30 and 10.30. We will then come together as a single conference to share some of the output and to develop our explorations into actions that participants can apply to their own practice and future research



Parallel sessions 1 – presentations

11.25-12.25 - Room ‘Develop’ – Modifying practice learning to changing service needs

11.25 -11.45

Darren Brand

Then and Now - an exploration of novice nursing students experiences of mentoring in practice placement settings

This presentation aims to share the findings of a recent small scale piece of research undertaken to explore the experiences of year one nursing students of being mentored in practice. Surprisingly there is very little literature that explores the experience of student nurses and their mentoring experiences in the clinical setting.

A qualitative design was implemented to gain the thoughts and experiences of participants of their initial experience of learning in a work-based setting. Small group interviews were conducted with a group of ten first year students following the completion of their first clinical placement. Novice students were chosen, as their experience of learning in practice was more limited and as a result, they had less to compare their mentoring experience with. Participants were provided with detail on the study and invited to participate. Thematic analysis of the interview transcripts was then undertaken to pull out emergent themes, and Wenger’s Communities of Practice theory was used as a theoretical lens. A number of key findings were identified that as a team, my colleagues and I could develop to ensure that novice learners are fully prepared for what may well be their first steps into such an environment. In this presentation, I plan to discuss the two main themes that were identified from this research, namely:

- Belonging – students need to establish themselves in a group and feel settled and welcome in order to enable learning. A mentor plays a key role in facilitating this process of integrating a learner into the learning environment.
- Identity – as student nurses, it can be argued that these learners wear various “hats” throughout their education. These include students within the university, novice practitioners in the practice setting.

By ensuring that students are fully prepared for learning in a practice setting, I would suggest that this enables them to settle into the team they are to be working with and maximises the learning opportunities available to them in clinical practice. It also highlights the importance of effective partnership working between the theoretical and practical based elements of healthcare education.

This study was designed to feed into the thesis stage of the EdD process which I would also like to share within the presentation and invite debate and discussion at the end of the session. With the forthcoming introduction of new education standards for nurses by the Nursing and Midwifery Council, I plan to explore the experiences of students and mentors. A comparison will be made between those on the current model of working with a qualified mentor to the proposed structure of having a practice supervisor and practice assessor.

Darren Brand is currently a Senior Lecturer at the University of Brighton. A nurse by background, he teaches predominantly within the pre-registration adult nursing course, with an interest in practice learning and patient safety and quality. He is currently undertaking a Professional Doctorate in Education (EdD), with his research examining learning and the mentoring experience in practice settings.



11.45 - 12.05

Deborah Harding

Developing permeable practitioners: A new take on training for uncertainty for the health and care professions?

This is a presentation of grounded theory research conducted as part of a PhD study exploring supervision practices for three of the larger UK-registered allied health professions (AHPs); speech and language therapy, occupational therapy and physiotherapy. AHPs are the third largest workforce in the UK NHS and are regulated by The Health and Care Professions' Council (HCPC) whose Standards of Proficiency for Practice encourage supervision. This research explored the meaning and value of AHP supervision.

First-hand supervisor and supervisee accounts from nineteen therapists were gathered and compared. These accounts indicate that under certain conditions, supervision is a possible place to explore and resolve practice uncertainties. Career-long uncertainties are well recognised and have concerned those with scholarly interest in the training and ongoing professional learning for health, care and other professionals (Fox, 1957; Schön, 1983; Eraut, 1994; Dall'Alba, 2009; Webster-Wright, 2010; Dall'Alba and Barnacle, 2015).

Through constant comparison of therapists' accounts, characteristics and behaviours which supported endeavours to resolve practice uncertainties were identified; awareness, awareness-sharing, feedback-seeking, openness to alternatives, critical awareness and willingness to change. Therapists demonstrating these behaviours and characteristics, are conceptualised as 'Permeable Practitioners'. Regardless of expertise, experience or competence therapists anticipate uncertainties in everyday practice and throughout their career. Much as uncertainty has been characterised by Dewey (1910), Schön (1983) or Webster-Wright (2010), therapists' accounts indicate that permeable practitioners recognise uncertainty as both a prompt and an opportunity for learning from and about practice.

While therapists acknowledge and share perspectives about supervision practices as an essential element of governance, their focus on uncertainties as a springboard for learning contrasts with literature which describes concerns about the extent to which supervision may be a form of surveillance and or risk management, (Gilbert, 2001; Beddoe, 2010).

It is suggested that the relationships discovered in this grounded theory research between uncertainties, ongoing professional learning and practitioner permeability, have implications for both the training and ongoing development of AHPs. The value of training for uncertainty is not new of course; Fox (1957) wrote about the inevitable uncertainties which medics encounter in practice and of the place in medical education of training for uncertainty. In the context of therapists' accounts gathered in this grounded theory research, it is proposed that training for uncertainty may extend beyond professional knowledge and know how to support the development of permeable behaviours and characteristics and on recognising the learning potential which arises in moments of practice uncertainty.

Deborah Harding is Associate Professor and Director of Workforce Development for the School of Allied Health, Midwifery and Social Care in the Faculty of Health, Social Care and Education, Kingston and St George's University of London. She is a UK registered speech and language therapist and consultant therapist at St George's University Hospital NHS Foundation Trust. Deborah delivers post-registration education for health and social care professionals with a focus on policy, quality improvement and service transformation. She has completed evaluation work on AHP leadership for NHS Improvement. Deborah's PhD on supervision practices for AHPs was submitted in December 2018



12.05 – 12.25

Helen McDonald

Providing tutorials as part of Leeds Teaching Hospital Trust Speech and Language Therapy clinical placements - the benefits for the service, placement educator, and the learner

Background

Placement educators have traditionally been reluctant to fulfil their placement quota due to service pressures or feeling that their work area is too specialised for placements.

Purpose/Aims

A timetable of tutorials was set up for the final year SLT students on block placement in June 2018 with four aims:

1. Increase opportunities for students to see the wider role of the SLT and learn about specialist areas and emerging SLT roles.
2. Reduce the pressure felt by educators.
3. Allow SLTs who do not feel able to offer placements to fulfil some of their fair share quota via teaching/shadowing sessions.
4. Give students opportunities for peer support and sharing placement experiences.

Design methods

Eight 1-2hr tutorials were provided. Additional sessions were offered where students could observe Videofluoroscopy and FEES clinics or shadow the SLT in critical care. Topics covered included Dynamic assessment, Eating and Drinking with an unsafe swallow, SLT in critical care, Clinical supervision, Voice and Laryngopharyngeal reflux, and the SLT role in palliative rehabilitation. Students were asked to complete written feedback. Feedback was also collected verbally during the group supervision session. Feedback from SLTs providing tutorials and placements was sought via email.

Evaluation

- Students found tutorials useful and interesting, and a good use of placement time. Taking time away from clinical hands-on did not feel detrimental to learning at this stage of training. It opened students' eyes to the breadth of SLT roles, provided opportunities to meet SLTs other than those directly supervising them, and allowed them to "touch base" with peers.
- Educators found having times planned in advance when the students were otherwise occupied helped "take off the pressure", allowing dedicated time to get non-clinical work done. Learning from tutorials was brought back to the clinical placement and informed discussions re: patient treatment and management.
- Providing the tutorials ensured the fair share quota for each area of the LTHT SLT service was met and has increased enthusiasm for providing student placements in 2018-19.

Conclusions

Providing a programme of tutorials during student block placements benefitted students' learning and improved the placement experience for student and supervisor, as well as ensuring placement fair share quotas were met within the service.

A modified tutorial timetable is currently being provided for the 2nd year block placements and will be repeated for the final year students again in June.

Helen McDonald is a Specialist Speech and Language Therapist in the complex rehabilitation team at Chapel Allerton Hospital Leeds. She is the SLT link educator between Leeds Beckett University and Leeds Teaching Hospitals Trust and responsible for organising student SLT placements within the trust. Her interests are in providing equitable and consistent learner experiences, working in partnership with universities, multi-professional learning and promoting the benefits of providing practice placements to her colleagues.



11.25-12.25 – Room ‘Innovate’ – Modifying practice learning to changing service needs

11.25-11.45 | **Marjorie Bonello, Jane Morris**

Contemplating pre-registration practice-based interprofessional education for health workforce development

Background

The importance of a people-centred and integrated health workforce is increasingly recognised to address some of the challenges faced by health systems worldwide. Interprofessional education (IPE) has been identified as one of the ways how to create a collaborative-practice ready workforce better equipped to address changing service needs. In the small state of Malta, IPE is not yet practised; professional health education is carried out in traditional silos both in academia as well as in practice placements.

Purpose and Aims

This study explored the possibility of developing academic and practice based IPE at the Faculty of Health Sciences, University of Malta. It aimed to understand how the concept of IPE was perceived, what were the perceived barriers and/or enhancers of a possible IPE initiative, and how would micro, meso and macro factors influence IPE in Malta. This presentation will focus on the possibility of practice-based IPE.

Methods

A qualitative case study analysis was conducted with a purposive sample of 64 participants ranging from academics/researchers, senior health and education policy makers and newly qualified health professionals. Data was gathered through 11 focus groups, 5 one-to-one interviews and documentary searches and analysed using ‘Framework’ approach supported by NVivo 10.

Results

Participants were keen that students should be given opportunities to practise collaboratively during their pre-registration programmes and identified various enabling factors and learning opportunities to implement interprofessional practice placements. However they also recognised immense barriers which would challenge the development and implementation of such placements. These concerned organisational, professional, economic, structural and cultural barriers juxtaposed at different levels: government, institutional, organisational, professional and individual. Whilst many of these reflected international findings, participants also teased out the influence of national culture as a macro cultural determinant to interprofessional practice placements; this has largely been overlooked in the interprofessional literature.

Conclusion and implications

In view of the challenging landscapes of current practice environments, this study could help educators and mentors better appreciate the complexity of introducing interprofessional practice placements by untangling the micro, meso and macro level determinants of such placements. It also shows the importance of contemplating change based on evidence emanating from research, as opposed to simply imposing change. Finally, it offers a number of recommendations for developing IPE.

Marjorie Bonello is Head, Occupational Therapy Department at the Faculty of Health Sciences, University of Malta. Her teaching and research interests focus on interprofessional education and practice, practice based learning, qualitative methodologies, health workforce development and health systems in small states. Dr. Bonello has also worked in health policy at the Ministry of Health and was responsible for various initiatives such as service audits, operational reviews, coordination of national policies, gender mainstreaming in health and dementia services development in Malta.



11.45-12.05

Catherine Moore, Natalie Matchett, Sam Patterson, Laura Loeber, Edward Lee, Theresa Baxter

Evaluation of a Pilot of Peer Mentoring in Clinical Education for Undergraduate Physiotherapy Students

Relevance:

Workforce shortages of allied health professionals (AHPs) has lead to increased student numbers and greater demands on placement capacity. Higher Education Institutions (HEIs) and placement providers need to meet this challenge whilst ensuring that the quality of provision is not affected. This project lends itself to the theme of modifying practice learning to changing service needs.

Background:

Peer mentoring is the process of pairing more experienced students with those less experienced to assist with their academic studies. Within our HEIs peer mentoring has been exclusive to the academic aspects of the programme and not as yet extended to the clinical setting.

Purpose and aims:

This project will evaluate the pilot of a peer-mentoring scheme in the clinical setting. Year three students will be matched with less experienced students on clinical placement, with the specific purpose of supporting them with orientation to placement, placement knowledge and pastoral support. The peer mentors will have opportunity to demonstrate leadership, increase their confidence and develop mentoring skills. The project aims to show that this can support the education offered by clinical educators, enhance the student experience and potentially increase placement capacity.

Description of Pilot:

The pilot will take place over the elective placement for year three Physiotherapy students from the University of Nottingham (UoN). Two local trusts (University Hospitals of Derby and Burton NHS Foundation Trust and Nottingham Citycare Partnership Cic) will offer elective placements to students who would like to apply for the peer-mentoring on placement role. These students will then be paired with year two Physiotherapy students on placement in the same geographical location at that time. Students volunteering to be peer mentors will receive training on the purpose and scope of the role. Time will be allocated during the clinical placement to allow for the peer-mentors to meet with and support their peer mentees.

Planned Evaluation:

A questionnaire has been devised to obtain feedback from the peer mentors, peer mentees and clinical educators as to their experiences of the scheme. This will inform the success of the pilot and potential expansion of the project in the future.

Implications:

If successful the pilot can be expanded to other AHP groups, to other HEIs in a similar geographical location and to other trusts. In this way more students would have opportunity to expand their leadership skills, confidence and mentoring skills and could offer potential for inter-professional mentoring groups.

Catherine Moore is currently undergraduate programme leader for Physiotherapy at the University of Nottingham. Her interests in teaching and research centre on peer coaching, peer mentoring and the use of technologies to enhance assessment feedback.



12.05-12.25

Jo Butler, Becky Baker, Sarah Bennett Day

Implementing 'PROMPT' training into the midwifery curriculum

Our midwifery degree programme has been modified by implementing 'PROMPT' (PRactical Obstetric Multidisciplinary Training) into the student's course, to recognise the changing service needs. It is recognised that women have increasing risk factors for having a high-risk birth, such as older maternal age, obesity and co-existing morbidities (Institute for Fiscal Studies, 2017; RCOG, 2009).

Background:

Students are often anxious about their role in an obstetric emergency and it is evident that students value practising skills in a safe environment, away from the clinical setting, to build their confidence in skills (Power and Clampham, 2018; Lendahls and Oscarsson, 2017). PROMPT training has been proven to reduce poor outcomes within maternity settings through communication, team roles and leadership, as well as situational awareness and is used within our local trusts (PROMPT, 2018). The Better Births report emphasises the importance of multi-disciplinary teams training together, highlighting PROMPT as an example of best practice for training (NHS England, 2016). Therefore, it was decided to implement this training within our university, to work in line with practice.

Aims:

To widen participation of students working collaboratively, to ensure that teaching within the university mirrors the practice setting.

To increase student's confidence in dealing with an obstetric emergency, as well as consolidating their knowledge learnt in both university and practice.

Method:

An application to the University of Suffolk's Foundation Board was put forward for funding for models to run the PROMPT course, as well as facilitating four lecturer's to attend the PROMPT train the trainer course. This was accepted in November 2017 and attendance on the course was in September 2018. Following this, the programme has been implemented into three of the current modules within the curriculum, incorporating nursing students on the shortened programme, in addition to second and third year students on the three-year programme. This includes short lectures, scenario-based learning, followed by simulation training.

Evaluation:

Student evaluation forms were completed by all students participating in the PROMPT simulation at the end of the module. Feedback was obtained regarding what they felt they had learnt, the best aspects and looking at application to practice. Key themes were: aided revision of emergency scenarios, supported essential learning and boosted learner's confidence and team working.

Conclusion:

Implementation of the PROMPT simulation training has improved student's learning, especially around application of theory to practice, boosting their confidence and addressing the aims of the project.

Jo Butler is currently lecturing at the University of Suffolk within the School of Health. Her professional career began in 2006 after qualifying as a midwife and practising both in Hackney, London and within community and hospital settings in Suffolk. More recently, her interests have been regarding supporting students transitions to practice, in particular focusing on promoting emotional resilience and self-care.



11.25 -11.45 Anne Hurren, Jo Sandiford, Emma Burke, Naomi de Graff, Sarah James,

Telehealth Placements in Speech & Language Therapy Practice

Background

Over the past decade, interest in telehealth has grown with potential benefits including reduction of costs, meeting increased demand, connection of clients and clinicians over long distances and reduction of demand on clients.

This presentation describes and evaluates two telehealth projects involving students at Leeds Beckett University. Project 1: Year 1 students worked with conversation partners via telehealth (Skype), enabling people with aphasia who live beyond normal travelling distance to benefit from conversation practice. Project 2: Year 2 students on placement took part in project work to scope perceptions of (1) clients, & (2) care home staff in relation to telehealth.

Description

Project 1: Students worked in pairs with a conversation partner to practice 'total communication'. Each placement consisted of a total of 7 sessions which were conducted via Skype. A total of 13 students have participated to date. The experience of students and conversation partners was evaluated via short questionnaires.

Project 2: The project work was developed in collaboration with Bradford District Care Foundation Trust and supports their service developments in telehealth which had previously had low uptake from clients. It is being carried out by students on a 5- week peer block placement. Half their time will be spent on project work with the other half being 'standard' placement activities.

Students will collect data across a range of clients groups using focus group discussions, individual interviews or questionnaires to explore perception of telehealth for SLT and how potential barriers to telehealth could be overcome for those who are digitally literate and those who have no IT skills. Students will visit a nursing home and use focus group/ individual interviews or distribute questionnaires to nursing staff about their perception of telehealth link to SLT for dysphagia assessment/review and how potential barriers to telehealth could be overcome.

Results (Project 1): Clients reported that working via Skype was beneficial and had potential to increase access to more regular therapy practice. Students reported a number of benefits including saving time/ money on placement travel. They would recommend the placement to others.

Planned Evaluation/ Outcomes: (Project 2). Key findings regarding client and nursing home staff perceptions of barriers and facilitators to telehealth will be reported. The placement itself will be evaluated from the perspective of students and placement educators using short questionnaires and/ or individual interviews.

Discussion/ Implications:

Student involvement in telehealth and other forms of digital therapy has potential to benefit service users who can access therapy without the need to travel and services through increased therapy capacity. It can also increase placement capacity. As well as direct 'telehealth therapy', students can be involved in project work which supports Trusts to develop their telehealth and digital services.

Before joining Leeds Beckett in 2014, Anne Hurren worked for many years as Chief Speech and Language Therapist in Sunderland, specialising in the field of ENT and Head and Neck Cancer. Anne's current research interests are on the development of outcome measures and assessment of quality of life in head and neck cancer and voice disorders and the assessment and therapeutic management of voice disorders including neurological voice disorders e.g. Parkinson's Disease.



11.45-12.05

Hilary Baggs, Charlotte Burnside

Addressing diversity on clinical placement: Improving the experience for radiography students.

This study is relevant to the conference themes as it is investigating the diversity of the current student population and how clinical placement can address this diversity.

With NHS courses now being fee paying with no access to a bursary the external pressures on students has increased and the modern radiography student population has become increasingly diverse.

Koch et al conducted a study with nursing students in 2013 which concluded that being male and English not being their first language may lead to a less positive placement experience. They recommended that more work was also needed in other areas such as, mature students, students with a lack of previous work experience, financial constraints, parental status, ethnicity, religious belief, sexual orientation and students with special need or a disability.

In the Department of Radiography, this increase in diversity has been a noticeable trend. Many students are under increasing financial pressure, having to travel long distances and have many family responsibilities. Anecdotal evidence suggests that the traditional clinical placement working day no longer fits with these students.

This study will allow the academic team to gather a deeper understanding of the student population and investigate the student experience in clinical placement.

Questionnaires will be distributed to level 5 radiography students, with follow up interviews to elicit further information. This year group has been chosen as they already have a year's experience of placement but are not facing the pressures of their final year of study.

Questionnaires will be analysed using descriptive statistics and categorising student data. Graphs and pie charts will be produced and any trends in diversity highlighted. Open text answers will be analysed by looking for trends in student demographics and placement experiences, and how the 2 might link together. Interviews will be analysed using thematic analysis. It is expected that the results will show a hugely diverse cohort, and that the placement experience needs to be tailored to address this diversity.

We already know that a certain amount of diversity exists within the cohort, and some practice partners can accommodate students on an individual basis. However, this is not the case for every placement provider. With evidence from this research, we can open up discussions with all placements about how we can work together to address these issues, in order to enable to expand the workforce.

Hilary Baggs is a Senior Lecturer, Admissions Tutor and Level 4 Year Tutor in the Department of Radiography at Birmingham City University. Her interests in teaching and research are diversity within the student population and the transition into studying at university.



12.05 - 12.25

Sophie Willis, Jane Harvey-Lloyd

Evaluating the effectiveness of a peer-to-peer buddying system in enhancing the experience of transition into practice placements for diagnostic radiography students

Background:

Enhancing the experiences of radiography students when they commence their first clinical placement is key to both positive learning experiences and improving retention and progression through the programmes. Positive experiences of transition are known to reduce attrition and be powerful for sustaining learner engagement in programmes. Frequently radiography students will learn alongside other learners who may be based at different universities during their clinical placements. Often limited collaboration between institutions results in opportunities to optimise student's support being missed. This study sought to adopt a collaborative approach to redefine learner support during clinical placements.

Aim:

To engage students from two different universities in a project to evaluate the effectiveness of a peer-to-peer buddying system to enhance the experience of transition into the practice placement environment for year one diagnostic radiography students.

Design:

A peer-to-peer buddy system was established, which involved students from one university being mentored by students from another. A total of 12 students were involved and all students were encouraged to meet on a regular basis over their first placement. Reflective accounts of the experiences were subsequently analysed to explore the benefits of such collaborative approaches to both individual students and the universities involved.

Findings:

Reflective accounts from students suggest that the cross institution peer-to-peer buddy system this is a highly effective mechanism to promote positive early experiences of transition into the clinical environment. Furthermore, those collaborative approaches between universities empowered all learners and resulted in opportunities to promote positive experiences of transition being realised.

Discussion & Conclusion:

This project empowered students and lead programme developments, such that the students-as-participants become 'change agents'. Student feedback attests that many students find their first clinical placement challenging, as they must simultaneously adapt to unfamiliar environments and different styles of learning. This can potentially suppress the success of their transition and mean that they consequently do not benefit from all learning opportunities available. Peer-to-peer budding of students enabled effective support for year 1 students and collaboration between universities was judged highly effective in promoting positive early experiences during clinical placements.

Implications:

The findings will directly inform both the ongoing action plans and future programme design at both institutions involved to successfully target support strategies, which seek to better prepare students for successful engagement with their practice placements.

Sophie Willis is a senior lecturer and programme director for diagnostic radiography at City, University of London. She qualified as a Diagnostic Radiographer in 2001 and worked as a radiographer at Addenbrooke's Hospital, Cambridge for a number of years before moving into education in 2006. She currently contributes towards teaching and programme development across a range of radiography programmes at both undergraduate and postgraduate level. Sophie's research interests relate to the discourses that arise between educational policy and its translation into practice, and her doctoral work explored non-traditional student's experience of transition into HE over the course of a year.



11.25 -11.45

Vince Clarke

Paramedic Praxis- A new perspective on the theory-practice relationship in paramedic pre-registration education

A theory-practice gap has previously been proposed as existing in paramedic education. The move to a graduate profession has the potential to exacerbate such views, particularly when full-time undergraduate programmes are run in parallel to the apprenticeship models currently in development. This research proposes a challenge to the notion of the theory-practice gap, suggesting that there exists a 'paramedic praxis' whereby the relationship between theory and practice is such that the 'gaps' discussed in nursing literature do not manifest in the same, potentially problematic, way.

An extensive literature review was undertaken, drawing from the areas of both education and healthcare. Paramedic students' and Practice Educators' perceptions of the theory-practice relationship were explored through questionnaire surveys and focus groups.

Paramedic students considered that the predominant manifestation of perceived inconsistencies between theory and practice was due to the contextual and situational challenges associated with the undertaking of paramedic practice and, as such, were an expected part of the practice-based learning experience.

The challenges associated with the theory-practice relationship were acknowledged as being an expected part of learning, with a clear appreciation from the students that taught theory can never be exactly matched by their experiences of practice, and not all aspects of practice-based experiences can be 'unpicked' by reviewing the associated theory.

Practice Educators considered themselves to be a catalyst for learning, a view shared by their students who considered that the role was of greatest benefit when the Practice Educator was an active, engaged partner in the learning process.

The model of Paramedic Praxis developed through this research has informed the implementation of practices to enhance existing undergraduate paramedic and Practice Educator educational programmes. The model has been utilised when preparing students for practice placements, with greater attention being given to encouraging students to better prepare themselves to make the links between theory and practice. Approaches to reflection and reflective practice have been made more practical and applicable to the realities of practice-based learning, supporting students to enter the practice environment with a clearer individual strategy of learning already considered.

Practice Educator education has also been developed, with the model of Paramedic Praxis having informed the development of curricula for academically accredited, paramedic-specific, Practice Educator short courses. The findings of this research have direct implications for practice-based learning undertaken by student paramedics, both on full-time, undergraduate programmes and the soon to be developed apprenticeship pathways.

Vince Clarke has over twenty years' experience as a paramedic and is currently employed as a Senior Lecturer in Paramedic Science at the University of Hertfordshire. Vince is Head of Endorsements for the College of Paramedics as well as sitting on the College's national Education Advisory Committee. Vince has completed his Professional Doctorate in Education which focuses on the theory-practice relationship in paramedic undergraduate education. This work has informed the development of university accredited ambulance service Paramedic Practice Educator courses as well as being cited in the College of Paramedics' Practice Educator Guidance Handbook.



11.45 -12.05

Aoife Prendergast

New directions in infrastructure in contemporary social care practice education - nurturing the supervisory relationship

Context and Background

In the wider context of social care practice, supervision in the practice education setting is an important and intrinsic aspect of the social care profession. One can argue that the supervision aspect of students is a foundation and fundamental aspect of basic social care practice. In the forty year history of social care education (Courtney, 2012) the experiences, practices and perceptions of social care practice educators has received little attention in the context of third-level professional education and training programmes in Ireland. The traditional focus in supervision privileged hierarchical relationships, describing a “right” way to practise that students had to be taught as they were inexperienced and needed expert supervisors. Students who did not fit the expected patterns were “pathologised” and the language of therapy became the language of supervision (Gardiner, 1989: 6).

A community of practice is a new and original way of considering the learning required by those who share a universal concern for a particular area of interest (Lave and Wagner, 1991). Inducting new members into the community through situated learning and legitimate peripheral participation is a core activity of a community of practice. Professional supervision creates situated learning and experience gained under the guidance of a student supervisor (IASCE, 2013) provides legitimate peripheral participation.

Action

This presentation aims to explore the nature and dynamic of the supervisory relationship in contemporary social care practice education. It seeks to integrate perspectives and findings from qualitative research conducted in a variety of sites across Ireland to inform the evolving communities of practice in social care. In recent times, social care as a discipline has embraced a professional orientation by seeking to be relevant to practitioners at various levels. This presentation poses questions regarding the role of the current social care practice educator in Ireland – their identity, credibility and their deep connection with the supervisory process and experience.

Outcomes

- Participants will examine their own concept of “supervision” in relation to their own role and continuing professional development.
- Participants will have clear understanding of the synergy between social care practice education and identity.
- Participants will consider their own identity and position in terms of approach to regulation and recognise the strengths and opportunities for sharing power in hierarchical positions.

Aoife Prendergast is a Lecturer in the Department of Social Sciences at Limerick Institute of Technology. She has undertaken a diverse breadth of work with a variety of client groups and settings. Aoife has substantial lecturing and training experience in both the UK and Ireland in a variety of roles including National Training Projects Co-ordinator and Community Health Co-ordinator for NHS Peterborough, Cambridgeshire, UK. She has successfully created and managed numerous innovative training and development projects in public health within diverse communities in both the UK and Ireland.



12.05-12.25

Zoe Tilley

Developing a framework for supervision of undergraduate physiotherapy students: a phenomenographic approach

Background

Practice-based learning (PrBL) is an essential element of undergraduate physiotherapy training. With increasing numbers of students on existing programmes, and new courses being established, sourcing sufficient placements is becoming increasingly difficult. Practice educators (PEs) are reluctant to move from a traditional model of supervision, one student to one educator, to alternative models which may increase placement capacity. PEs believe that increasing student numbers becomes more difficult to manage in a demanding healthcare environment and this may compromise the quality of the supervision that PEs can provide. Guidance from professional bodies states that students should receive appropriate supervision but is not explicit in what this should entail. In the absence of explicit guidance of what is expected from PEs in their supervision of students it may remain difficult to increase placement capacity and maintain quality within PrBL.

Aim

To try and establish some guidelines for supervision a research project was undertaken to understand what supervision is, from the perspective of the PE, and how they implement this into their PrBL setting.

Method

Semi-structured interviews were conducted with 11 PEs that regularly provide PrBL to undergraduate physiotherapy students, at trusts/organisations within the East Midlands. Each PE was asked to describe how they supervise students within their PrBL setting. Interviews were recorded, transcribed and a phenomenographic analysis of the data was undertaken.

Results

Five themes were identified as important elements of supervision. These were: establishing and maintaining an environment for learning; teaching and facilitating learning; enhancing learning through assessment; facilitating student personal and professional development; and developing as a practice educator. Each theme consisted of tasks and activities that the PEs described as important elements of their supervision, for example, sending placement information prior to the start of the placement; allowing the student time to observe; and providing timely feedback.

Implications

The tasks and activities within each theme can be used to develop a framework to give explicit guidance to new, and existing, PEs in what is expected of supervision of undergraduate physiotherapy students. The framework can be divided into three levels that would describe the activities expected at a base level, through to what makes an exemplary PE in their practice of supervision. The framework may also be used as the foundation of practice educator training, as a means of self-reflection for PEs, within professional development appraisals and as a tool for evaluating the quality of supervision in PrBL settings.

Zoe Tilley is a Clinical Link Tutor in Division of Physiotherapy & Rehabilitation Sciences, University of Nottingham. Her role is to support students and practice educators in practice-based learning settings to ensure positive practice experiences and promote quality PrBL. This study formed the dissertation project in the award of MMedSci Medical Education.



Anne Louise Ambridge

1. Is current assessment and feedback fit for purpose to meet the development needs of the 'generation Z' nursing student?

Background

The task of educating the nurse of tomorrow is a daunting one. With the challenges of the current financial and socio-political agenda Higher Education Institutes (HEI's) have the responsibility of providing robust, innovative and engaging programmes that are responsive to the learning needs of a new generation. Following the loss of the NHS student nursing bursary in 2017 we are faced with a changing demography of student nursing population is largely from this generation; these factors, along with being raised by Generation X parents (Wiedmer, 2015), have created a new cautious generation, who strive for value for money.

In order to identify the challenges, in nurse education, we need to ask what is unique about this generation and what steps need to be taken to ensure consumer satisfaction?

Chicca & Shellenbarger (2018) identified 9 characteristics of generation Z which need to be considered: "(a) high consumers of technology and cravers of the digital world; (b) pragmatic; (c) underdeveloped social and relationship skills; (d) cautious and concerned with emotional, physical, and financial safety; (e) individualistic; (f) increased risk for isolation, anxiety, insecurity, and depression; (g) lack of attention span, desiring convenience and immediacy; (h) open-minded, diverse, and comfortable with diversity; and (i) sedentary activism".

Aims:

This short communication will address meaningful assessment and feedback for this generation, utilising the 9 key generational characteristics, to identify the optimal assessment and feedback strategy.

Methods:

Pre and Post module questionnaire (data currently being analysed)

Analysis Evaluation:

(data currently being analysed)

Discussion/Conclusion/Implications:

To follow

References:

- Chicca, J., Shellenbarger, T. (2018). Connecting with Generation Z: Approaches in Nursing Education. *Teaching and Learning in Nursing*. 13: 80–184
- Wiedmer, T. (2015). Generations do differ: Best practices in leading Traditionalists, Boomers, and Generations X, Y, and Z. *Delta Kappa Gamma*, 82(1), 51–58.

Anne Ambridge is currently the newly appointed Course Lead for the BSc Nursing Programme at Kingston University, St Georges University, London. Her interests in teaching and research is around meeting the physical / mental health needs of people with a learning disability. In addition exploring the learning needs of student nurses; bridging the generation gap in order to develop authentic assessment.



Stephanie Daley, Julie Cooper, Sube Banerjee

2. Longitudinal Clerkships – An opportunity for Interprofessional Education?

Relevance to conference themes:

Modifying practice learning to changing service needs Our presentation will demonstrate how a longitudinal clerkship in dementia, Time for Dementia has been modified to address Interprofessional Education requirements and enhance multi-disciplinary care for people with dementia

Background

In the UK there are estimated to be around 850,000 people living with dementia, and this number is set to rise. It is estimated that 80% of people with dementia will have other co-morbidities, often requiring clinical input from a range of different professionals There is a need for healthcare professionals to be able to work together to enhance the quality of patient care, decrease patients' length of stay, and reduce medical errors. Dementia education however is frequently undertaken in an ad-hoc fashion in professional silos, which does not enhance multi-disciplinary working.

In response to this challenge, the University of Greenwich, along with colleagues from the Brighton and Sussex Medical School, have been keen to adapt the Time for Dementia programme, a longitudinal clerkship, so that it addresses the interprofessional education needs of student learners. In the programme, students visit a family affected by dementia over a two period in order to improve student knowledge, skills and attitudes. The University of Greenwich have established the programmes so that the visits take place with a mixture of paramedic, adult nursing and speech and language therapy students, visiting families in pairs.

Aims

This is the first interprofessional longitudinal dementia education programme. There is a need to understand the impact of the programme on student outcomes, as well as on interprofessional relationships and learning

Methods

We will be undertaking a mixed methods study, which will involve:

- Quantitative measures of dementia attitudes and knowledge before and after the programme, compared to students who have not undertaken the programme measured at baseline and 24 months.
- Qualitative interviews with students who have undertaken the programme
- Qualitative interviews with educators leading the programme

Results

To date, 34 interprofessional student pairs have visited a family living with dementia. As this is a mandatory component of the curricula, the number of students involved in the programme will increase exponentially. Feedback from student learners and families have been positive. Implementing the programme has highlighted a number of organisational challenges and cultural differences. This learning has been incorporated into the iterative development of the programme, alongside the planned formal evaluation.

Discussion

This programme has implications for the enhancement of undergraduate healthcare IPE and dementia education

Stephanie Daley is a Clinical Research Fellow with Sussex Partnership NHS Foundation Trust, based at the Centre for Dementia Studies, Brighton and Sussex Medical School. Stephanie is an OT by background, and completed her PhD at the Institute of Psychiatry, Kings College London, Stephanie's interests are dementia quality of life, longitudinal education and dementia care practice.



Sarah Eades, Kerry Carter

3. Mentoring Portfolio for Radiographers

We aimed to improve Practise Learning to meet Service Needs by Introducing a formalised development of mentoring standards.

The society of Radiographers Guidelines for Professional Conduct (Coleman 2013) state:

“9. Radiographers should use and give professional supervision.
10. mentor and teach learners, support staff and other professionals.”

In our role as student placement coordinators we attend multi-disciplinary practice education meetings. Mentoring portfolios are used extensively in nursing practice. In radiography it is an expectation but there is no formalised framework.

As a result, using the Birmingham City University and Birmingham Children’s Hospital Mentor Portfolio for nurses, we designed a similar document based on HCPC recommendations, the Code of Conduct and incorporated competencies related to our profession.

After two years the Radiographers will submit them to PractiCe Education who will evaluate if they meet the Birmingham Children’s Hospital Standards for an award in Mentoring. Staff may progress through the levels outlined by the Nursing Standards in Mentoring.

We would like peer discussion to look at it being rolled out nationally and included in the HCPC Guidelines for Professional conduct.

Sarah Eades is currently a band 6 radiographer at Birmingham Children’s Hospital specialising in Training of Student Radiographer, pathway placement Nurses and other learners, Angiography, General and Intervential Radiography.

She sits on the committee for the Association of Paediatric Radiographers.



Alison Cox, Carol Fairfield

4. A Novel Approach: integration of new student placements and service delivery options.

This initiative aimed to offer new service provision for people with aphasia focusing on the activities and participation element of the ICF, whilst at the same time offering student placements.

With increasing demand for high quality student placements and also a desire to extend service delivery options, we introduced a book club for people with aphasia. This initiative encouraged reading for pleasure in people with aphasia, developing reading comprehension whilst supporting student learning.

The aim was to offer more student placement models, promoting independence and development of student competencies, whilst providing different models of service delivery.

The book club is run on a weekly basis and is based on Bernstein-Ellis and Elman's Book Connection' (Elman 2007). It aims to support access to books through 'reading ramps' (Elman 2007) which have been demonstrated to aid reading comprehension (Meteyard et al 2015). Students provide the reading ramps by setting the reading with service user involvement in book selection and workload. Students provide chapter summaries and plan questions with accessible format for each participant to support comprehension. Barriers to reading are addressed and alternative formats have been identified by service users. A remote placement supervision model is used, with students working in peer pairs.

Initial participant outcomes (n=6) indicated an increase on sections of the 'Reading Comprehension and Emotions Questionnaire' (Cox et al 2010): in confidence in reading; increased pleasure in reading and reduction in distress when unable to read something. The data set from this initial book club has been increased and will be subject to statistical analyses, which we predict, will demonstrate increase in scores on the Reading Comprehension and Emotions questionnaire.

Students were able to achieve their required placement competencies using this model and have raised relevant challenges that have arisen when running the group.

This model offers novel and challenging student placements and provides an effective service delivery model to support reading comprehension in people with aphasia by supporting the rediscovery of reading for pleasure. We plan to continue with this model and will re-evaluate student experience of this as well as their overt achievement of competencies. The success of this approach has led to a local library introducing a book club for people with aphasia and students can now attend this from all years as volunteers.

Alison Cox is a Clinical Tutor and Clinic Manager at the University of Reading. As an SLT she specialises in communication and swallowing difficulties in adults with acquired neurological conditions. Teaching focuses on adult acquired neurological communication and swallowing difficulties; development of clinical professional skills; interprofessional learning and training for Placement Educators.



Darren Hudson, Jenny Corden-Jolly

5. Use of Information Technology to support and supplement post qualification work based learning for the next generation.

Due to national recruitment issues within radiography, which is also reflected internally within the organisation, there is a lack of experienced MRI staff available to fill vacant posts. Therefore, for a few years now, an established internal training programme to support radiographers new to MRI has been in place in an attempt to grow our own and provide a structured approach to training and development within the modality.

Following a two-year review of the programme and the introduction of the largest cohort to date, some aspects of the training programme were reviewed to meet the different needs of the increasing millennial workforce and the changing requirements and learning styles of Generation Z, the main features of which are around increasing dependence on information technology, instant access to information, use of mobile devices and more active involvement in the learning process.

One of the main areas of improvement was therefore the introduction and increased use of information technology-based approaches to better support learning and development.

- **ImagingU:** an online resource of specially selected modules that explain complex physics concepts in bite size and easy to understand ways using video and animation. It can be viewed on mobile devices and dipped in and out of as required by learners.
- **Scanner Simulator:** an online scanner interface which allows learners to interact with it as if scanning, such as slice placement and parameter changes. Whilst the level of interactivity is limited, with the use of structured questioning the tool still adds value in terms of familiarity with a generic scanner interface and encouraging critical thinking and appraisal skills.
- **PebblePad:** a web based tool used as an e-portfolio to help evidence completion of competence assessment, as well as record personal reflections and monthly feedback with local Practice Educators.
- **Yammer:** an internal social media forum which was used to engage in between taught training days and provide behavioural nudges to prompt revision and reflection on certain key concepts around patient experience and MRI Safety. The group could also share experiences with each other and provide support despite being remote from one another.

Introduction of these tools has been generally well received with positive feedback to date.

It is hoped the use of such tools will continue to develop as the programme evolves so that it can continue to meet the needs of the changing workforce and their differing learning styles compared to more traditional approaches.

Darren Hudson is currently MRI Clinical Lead at InHealth, an independent sector provider of diagnostic and healthcare solutions. Part of his role includes the development and delivery of training within MRI across the organisation. He has also recently completed a Post Graduate Certificate in Clinical Education.



Jackie Branston, Rebecca Lander, Kirsty Pape

6. Evaluating Practice Educators' and Occupational Therapy students' placements within St Andrews Healthcare.

Inclusion and participation are key themes that resonate to us as Occupational therapists. Creating a learning environment that is inclusive of all its participants can be seen as effective educational practice.

In 1941, official recognition of the need for a School for Occupational therapy at St Andrews was obtained by Dr Tennent. Since that time the hospital has evolved with its teaching practice and in 2018 we were able to offer 48 student placements. This evidences our passion and investment with regard to developing modern day Occupational Therapy students. It also re-enforces how valuable this process is for the development of the educators with the need of evidence based learning and new practices. Facilitating our current volume of student placements brings great opportunity to understand and support the varying learning needs and backgrounds of the students.

To support our service and to enhance all practice educators we felt it was important to capture feedback from the students directly and have introduced an online audit tool. This provides an opportunity for students to share their experience anonymously. This process not only allows us to enhance the opportunity for ongoing development but also our professional skills and the service we provide.

We have developed a tool that enables us to audit the quality of the practice placements we provide from the student's perspective. The audit tool is a pre and post placement questionnaire that provides qualitative and quantitative data. The ongoing use of this audit tool will enhance further research opportunities.

The information collated will enable us to modify and develop our current systems and enhance the support provided to our students and their diverse and ever changing learning needs. It is hoped the feedback will also highlight our strengths as a service and the ways that we continue to support the diverse learning needs of the student.

We are currently in the early stages of collecting and assessing this data and it is felt that this information has a strong significance and is important to present to others despite it being in its infancy.

Kirsty Pape, Jackie Branston and Rebecca Lander are currently all practising Senior Occupational Therapists working within St Andrews Healthcare in Northampton across Medium, Low and PICU services. Model of Creative ability (VdT), Sensory integration and Model of Human Occupation are all central to our practice and is reflected in the learning opportunities for students on placement and enhances ways to develop student experiences.



Virginia Puno, Tina Bhalla

7. The impact of multiple Speech & Language Therapy Students on clinician time and activity within an inpatient setting

Relevance to Themes: This prospective design project relates to an innovative service plan and integration of practice education within an allied health profession working with adult inpatients.

Background: Following a change in practice, the Speech & Language Therapy (SLT) team at BHRUT now offer student placements to 2 – 6 students at the one time within an inpatient setting of varying caseloads (hyper acute stroke unit, acute stroke unit, stroke rehab and neurosurgical). Innovations to facilitate practice education of multiple students on placement included treating the students as one cohort, timetabling as a whole, increased emphasis on peer learning, and implementation of weekly or fortnightly clinical tutorials.

Aims: This prospective project aims to evaluate the impact of supervising multiple speech and language therapy students simultaneously on the practice educators and wider SLT team to inform future student placements and service delivery planning. The objective was to investigate the following (a) time spent teaching and supervising students and if this differed over the course of the placement; (b) impact on clinical productivity and the number of patients seen for SLT input during placement and (c) whether SLTs' time and activity within defined categories differed during student placements when compared to a period without students.

Method: Five 4th Year BSc SLT students were offered a 4 day/week for 7 week placement as per their university requirements. Three Band 6 SLTs with previous student supervision experience were formally assigned as their practice educators and further support provided from the wider SLT team (an additional 9 SLTs ranging from Band 5 to 7). All SLTs will collect data detailing their time use and activity during the second, fourth and seventh placement week. They will also collect data the week immediately post placement ('eighth' week). All SLT students will collect data detailing their time use and activity for the entire duration of the placement. Post placement surveys to evaluate student and practice educator satisfaction will also be used to supplement quantitative data.

Planned Analysis: Data will be analysed to determine if supervising multiple SLT students on placement has a positive or negative impact on practice educators and on the wider SLT team working within an adult inpatient setting. It is predicted that time spent teaching students will decrease as the placement progresses and they begin to demonstrate entry-level skills as this will be their final clinical placement in an adult setting prior to graduation. This will have the potential result of improving clinical productivity with an increased number of patients seen for SLT input when compared to a week with no students on placement.

Implications: Results from this prospective study will inform the structure of future SLT student placements at BHRUT and potentially other sites with a similar patient caseload and staffing. Outcomes on clinical productivity through student placements may also inform service delivery models and funding.

Virginia Puno is currently Band 7 Speech & Language Therapist in Stroke and is the student placement coordinator for the Speech & Language Therapy team at Barking, Havering & Redbridge University NHS Trust. She trained as a SLT at the University of Sydney, Australia and has collaborated with her colleagues in developing and improving student placements offered by the SLT team at BHRUT based on her experiences overseas.



Nick Rayment, Thomas Anthony, Charlotte Stephenson, Paul Hogan, Jill Ramsay

8. The Haka – a new look at motor assessment

This is an innovative service design undertaken by a student whilst on a practice placement

Assessment is key to any intervention with base line data as a starting point. Adolescents with mental health and learning disabilities have particular difficulties engaging with a formal process of establishing motor and neurological assessment; where their additional problems may be revealed. Motor control, posture and coordination all contribute and compound the underlying mental health and learning disabilities that these patients present with. This poses additional challenges; integrating an assessment with practice education where the student has limited time to develop trust and cooperation with the patient, in allowing the student to develop their clinical skill and the clinical educator in facilitating the activity whilst limiting the patient opportunity for non-compliance.

The aim of the activity was to develop a motor assessment that would be comprehensive, fun and deliver an activity that would engage the patients and result in increased uptake and completion. The assessment would then allow evaluation of physical ability and identify where therapy interventions need to be targeted. It would also provide data on any cohort issues associated with this client group and the success of therapy interventions.

Using the Haka as a template, the motor assessment activities were translated into a sequence and choreographed to a well-known theme tune by a student on placement. Delivered with staff in relevant costume thus making the activity one of theatre and fancy dress.

The assessment challenged balance, coordination strength and joint range. The participants, many who habitually avoid physical activity and have never engaged with sport, not only completed the sequence but were further encouraged with a visit from 2 Maori professional rugby players who engaged with the patients and demonstrated the original Haka. Learning a sequence of moves takes time and in undertaking the activity motor skill is also challenged and developed.

Engagement with this innovative motor assessment has seen a rise from 10% to 70% completion in the assessment activity by this client group.

The Haka has now provided a base line from which motor problems can be identified and therapy targeted appropriately. Follow up assessments will be completed with the Haka and the reliability, sensitivity and specificity can then be established. Coupled with audit of the interventions undertaken to address specific problems treatment within the unit will be focused, functional and fun.

Nick Rayment is a highly specialist physiotherapist at St Andrews' Children and Adolescent Mental Health Service (CAMHS) working with neurological, mental health and developmental conditions. He enjoys "...being paid to play." and is passionate about improving children's well-being through physical and mental enrichment; devising fun, novel and engaging activities disguised as play. He is developing an education/physical activity hybrid, where learning is intrinsically linked to a physically challenging activity; making exercise more obtainable and education, memorable, fun and moreish, in order to address poor attention/concentration, sedentary behaviour, obesity and other common physical issues associated with mental and developmental disorders.



Alison Sanneh, Sheena Chauhan, Hannah Jennings, Laura McGirr, Wesley Doherty

9. An Evaluation of a Clinical Induction Program for new starters in a Radiotherapy Setting

Radiotherapy, alongside other health and social settings is growing in demand to recruit the right number of practitioners with the right knowledge and skills. The Christie NHS Trust experienced a high influx in new recruits, born out of a number of criteria, including the expansion of their services.

A Radiotherapy Education Team was tasked to support 50 new recruits over an 18 month period. The Care Quality Commission requires new recruits to undertake a robust clinical induction, testing knowledge, skills and competence across all technologies and clinical protocols. The team devised a clinical induction program, incorporating Corporate and Local Induction processes, in addition to training and assessments in clinical competencies. To enhance service productivity, teaching and learning was delivered in group setting and followed robust training guides.

The process was evaluated after 18 months. The team aimed to evaluate the effectiveness of the clinical induction processes, with a view to service improvement.

Design: Survey Monkey collected anonymised data. The survey design included closed / ranked and open questions. The survey was piloted.

Findings: 70% responded. Over 40 % of new starters commenced employment between Sept and November 2018. 70 % were band 5. 26 % had trained locally and the remainder elsewhere. 83% were unfamiliar with the technology. 53% had relocated homes.

The survey measured corporate and mandatory training, preceptorship and eight workshops. These were assessed and will be reported in relation to Competence and confident in expected tasks. The survey also aimed to capture knowledge and skills, in addition to experiential learning.

18 % found some aspects of the induction valuable, 61 % found the clinical induction valuable, and 21 % all aspects valuable.

Discussion: The service evaluation focussed not only on the attainment of clinical competencies, but in the wider agenda of an affective induction. The team were keen to seek out themes that may impact on learning and translation of knowledge in a new context. The survey highlighted the effectiveness of working in teams alongside peers, in addition to self-directive learning. It also illuminated the value of storytelling when understanding risk.

Conclusion/ Recommendations: The clinical induction program developed a systematic approach to teaching and learning in Clinical Practice, and whilst novice and new practitioner in the work-place had attained HCPC registration and knowledge through their academic degrees, it proved vital to re-evaluate knowledge and skills at a foundation level, building local competencies and mechanisms for ongoing support.

Alison Sanneh worked in several areas of radiotherapy, clinical practice, education, research and clinical leadership. Alison holds extensive experience in clinical education, and has worked as a Practice Placement Quality Assurance Reviewer and a Specialist Advisor in Radiography for the Care Quality Commission. Alison has been involved in clinical leadership and facilitates an NHS Leadership Academy program. Alison can provide visitors with a wealth of knowledge of training standards in clinical practice. Standards are delivered through a range of teaching and learning packages, suitable for a diverse and innovative workforce.



Brian Smith, Russell Gurbutt, Dawne Gurbutt, Jean Duckworth, Hazel Partington

10. Viewing the challenges of practice education through a digital window: Re-thinking digital and e-learning as a relational, socially immersive experience.

Background

This presentation describes a new way of focusing on e-learning or Technology enhanced learning (TEL) based on the concept of Socially Immersive Learning (SIL) and relational approaches in health and social care. It arises from the extensive experience of delivering practice education, CPD and education for practitioners and mainly draws on the use of digital learning in three programmes: CPD for integrated care, leadership and management and sustainability. The SIL approach encourages a new generation of learners shaping contemporary practice through the use of digital technologies inclusive of simulation in practice-based learning.

The integrated care agenda with its focus on collaboration amidst constraints on resources in health and social care practice render digital teaching an attractive option to the learn, deliver and enhance patient centred integrated care. Digital teaching can enhance connectivity, personalised teaching, accessibility and inclusivity through the ebb and flow of online communication for learners. This presentation describes a socially immersive learning pedagogy, and a relational conceptualisation of digital learning as a way to engage, connect and empower learners in their reflection-in and reflection-on-action.

The purpose of our inter-university network was to consider approaches to digital learning collectively and to dispel existing notions of how this is constituted and experienced by students — challenging some of the assumptions that traditionally underpin digital teaching and focusing on the requisite skills for teachers. Drawing on the collective experience of teaching practitioners online, this constitutes a new way of framing elements of practice education to enhance interdisciplinary learning while responding to the pressures on workplace educators.

Description Many HEIs develop programmes with the expectation that students will seamlessly adapt to a different mode of learning with little guidance on how to learn. E-learning is often perceived as ‘geographically remote’; the spatial remoteness of the tutor rendering the relationship distant, thereby overlooking the strong relational aspects that can exist in digital learning communities. In an increasingly connected world dominated by collective ‘wicked’ problems, the boundaries between disciplines must become permeable to enable collaboration, networking and collective decision making. This requires a more student-centric approach drawing upon collective intelligence and lifewide learning.

The implications of this development are to move beyond education design that aligns to preconceived notions of how individuals learn in prescribed places and using existing familiar methods (curriculum, schemes of work, defined learning content, and defined learning outcomes) to the changing role and fluid identity of the teacher, learner and contexts and collaboration where learning occurs. The creation of socially immersive learning is an innovative pedagogy fit for 21st Century Health and Social care sector embracing the social changes that accompany the digital shift in education.

***Brian Smith** is currently a Teaching Excellence Specialist, National Teaching Fellow, Principal Fellow and Allied Health Practitioner. His interests in developing new ways of learning through the use of ubiquitous technology addresses contemporary issues/problems within the health and social care sector. His passion for Digital Education has extended into collaborative design of the Social Immersive Learning pedagogy placing learner behaviour and ontological needs at the forefront of patient centred integrated care.*



Kate Stancombe, Adam Davis, Harry Ford

11. Physiotherapy Role Emerging Placements – a new initiative developed between the University of the West of England (UWE) Bristol and the South Gloucestershire Care Home Liaison team, Avon and Wiltshire Mental Health NHS Partnership.

This project links to the two conference themes and topics below:

- **Modifying practice learning to changing service needs:**
 - New/emerging roles and practice education
 - Partnership working between placement and education providers
 - Evaluation of student learning in diverse contexts and settings

- **Diversity of new generation learners driving change in practice education**
 - Students' contribution to shaping to practice learning

The University of the West of England (UWE) Bristol Physiotherapy programme completed its first ever Role-Emerging Placement (REP) opportunity in June 2018.

REPs aim to capitalise on a potentially rich learning experience in a setting that does not have an existing physiotherapy service and provide great opportunities for students who are able/keen to show initiative, be creative and work more autonomously. REPs have been used successfully by our Occupational Therapy colleagues at UWE Bristol for many years but we are only the third physiotherapy programme in the UK (as well as Worcester and Glasgow Caledonian) to include them as a placement option on the UG BSc programme.

The REP was with the South Gloucestershire Care Home Liaison (CHL) team based in Kingswood (part of Avon and Wiltshire Mental Health Partnership NHS Trust [AWP]). It was developed and supported by myself as the long-arm supervisor, a qualified PT (and experienced educator) from the Older People's MH Community team based in the same office and other CHL team members.

The two 2nd year students were selected from six students who applied for the opportunity following a talk given by myself and the Occupational Therapist in the CHL team.

It has been extremely successful with both the two students evaluating their experiences very highly and all the staff involved recognising the huge benefits and potential for future placements.

This year we hope to offer this opportunity to two more students in May/June 2019. We hope to develop methods of evaluating the impact on service users of this type of placement (quality improvement metrics possibly) alongside the questionnaires used to evaluate the experiences of the students and staff involved.

***Kate Stancombe** has been a Senior Lecturer in Physiotherapy at the University of the West of England (UWE) in Bristol since 2004. As well as teaching and assessing students on the UG programme and running a 3rd year module, a key part of her role is developing, supporting and evaluating the practice-based learning aspects of the programme.*



Ruth Strudwick

12. The Role of the Practice Educator in Radiography

This poster will present feedback on the Practice Educator (PE) role that it utilised at our university to support Diagnostic and Therapeutic Radiography students when on practice placement. The region where we are based is rural and several of our ten practice placement sites are quite a distance away from the university. PEs are based at our practice placement sites and are therefore on hand to support students in practice

The PE is an important member of the course team. They are responsible for the co-ordination and facilitation of the integration of practice and academic education of undergraduate student radiographers in the practice setting. The PE also ensures the maintenance of effective lines of communication between the Diagnostic Imaging or Radiotherapy Department and the University through liaison with relevant staff. The PE assesses the students on their practice assessments and provides feedback and guidance on their progress in the practice placement.

This poster presents feedback from a questionnaire sent to students, Practice Educators, radiographers and departmental managers on the role of the Practice Educator.

The main themes were:

- Education, teaching and assessment
- Pastoral support
- Communication
- Contribution to the curriculum

The results of the National Student Survey (NSS) indicate that the Practice Educator role is vital to the success of our radiography programmes.

***Ruth Strudwick** has been involved in Radiography Education since 2001, and is a Diagnostic Radiographer by background. Her current role is Associate Professor, Subject lead for Radiography & Interprofessional Learning at the University of Suffolk (UoS).*

In 2011 Ruth completed her professional doctorate - 'An ethnographic study of the culture in a Diagnostic Imaging Department'.

Ruth teaches on several courses at UoS and her research interests include; interprofessional working, clinical education, values-based practice and work-based culture.

Keynote address

Keynote speaker: Michele Russell-Westhead – Shaping the future for practice learning

Professor Michele Russell-Westhead is a Professor of Higher Education Policy and Practice currently working at the London School of Economics and Political Science and with various Government departments on a range of education improvement and enhancement projects. Coming from a healthcare background, she is a great advocate of work-based learning and as such has picked up the mantle of the degree apprenticeship agenda designing innovative programmes with universities and employers and leading on a number of high profile national projects which have formed keynote addresses at Advance HE, Vitae and HEDG events on the subject. Michele has led the degree apprenticeship agenda designing innovative programmes with universities and employers.

Michele will share her experiences of developing apprenticeships, specifically new 'pathways to qualified practice' and her work to develop government policy focusing on the impact on organisational culture to effectively support this new generation of learners in practice settings and how to take first steps to influence, create and innovate in your own workplace.





Parallel sessions 2 – presentations

14.30-15.30 - Room 'Develop' – Modifying practice learning to changing service needs

14.30-14.50 | **Veena Patel, Emma Orde Powlett**

Introducing the role of the 'practice educator' from the University of Derby to the affiliated radiography clinical placement and its impact on the student learning experience.

The University of Derby and its affiliated Derby radiography clinical placement have historically met the needs of radiographic learners reinforcing the link between theory and practice in the clinical setting. The imaging departments have been fundamental to student learning and assessment alongside their increasingly pressured roles and responsibilities.

The changing service and its needs have resulted in radiographers coming under growing pressure, to reach departmental collective targets to reduce patient waiting times, whilst working towards a 24/7 culture. This inevitably impacts on the delivery of practice education and its quality to learners, in terms of time invested in meaningful learning, mentorship and reflection.

The practice educator role will be used to deliver a contemporary, student centred approach to practice education in the clinical environment.

The role will hope to lead an improved structured support network to radiographic learners and supervising radiographic staff in practice. This role will provide learners with a dedication to practice education, committing to provide pastoral care and engage in mentorship behaviours. Mentorship and reflective practice will become a key component to the practice placement experience for students.

The short term goal will be to promote the role and its relevance to student clinical practice, ensuring the role is accessible to learners and to empower supervising radiographic staff. It will also be used to introduce mentorship behaviours to learners for the first time in this placement.

The long term goals will be to develop and establish a learning team led by the practice educator, engage in habitual mentorship behaviours and maintain a positive learning culture amongst healthcare professionals. As a result, plans for the role and its impact will hope to see a positive difference in the student learning experience in clinical placement.

Evaluations of each learning experience provided to learners will take place, and retrospective feedback will be collated from the radiographic learners and supervisory staff to ensure that practice stays relevant and valid to the service users who contribute to a high standard of patient care delivery.

Veena Patel is currently a newly appointed lecturer in diagnostic radiography at the University of Derby. Her previous role was as a clinical learning facilitator for all learners in radiographic practice with a particular focus on reflective practice, mentorship and interprofessional education in the clinical learning environment.



14.50-15.10

Stephanie Daley, Wendy Grosvenor, Yvonne Feeney, Jane Morris, Juliet Wright, Sube Banerjee

Time for Dementia - A new way of learning

Background

Dementia education is a workforce priority within the health professions. Health Education England has mandated the inclusion of dementia education in all undergraduate curricula but practice in this area is varied. The active participation of service users in healthcare education is a tangible method of increasing real life learning and student engagement.

The experiences of people with dementia and their carers is often poor within healthcare settings, with clinician negative attitudes and inadequate knowledge about dementia being key mediating factors. There can often be an over-reliance on task-oriented, as opposed to compassionate care, with the treatment of people with dementia being underpinned by de-humanising attitudes such as objectification and disempowerment. With an ageing population, healthcare professionals of all disciplines are likely to work with people with dementia, regardless of their chosen speciality. It has been suggested that tailored dementia education at undergraduate level provides an opportunity to enhance the attitudes and empathy towards people with dementia at the stage when future healthcare professionals are more open to influence.

The Brighton and Sussex Medical School and the School of Health Sciences, University of Brighton have sought to address this challenge by introducing a new mandatory programme, Time for Dementia into their curricula. In Time for Dementia, students visit a family living with dementia over a two year period. In this programme, the people with dementia and their families are our 'experts' and it is they who teach the students about the living with the condition.

Aims

This is the first mandatory multi-disciplinary longitudinal dementia education programme in the world. There is a need to understand the impact of the programme on student outcomes, and the active ingredient underpinning these, the challenges involved in delivery, as well as the potential for Interprofessional Education.

Methods

We have undertaken a mixed methods study, which involves:

- Quantitative measures of dementia attitudes and change in those students receiving Time for Dementia, and comparator students who are not. These were measured at baseline, 12 month and 24 months.
- Qualitative interviews and focus groups with students who have undertaken the programme

Results

Our results have shown statistically significant improvements in dementia knowledge and attitudes. Additionally, students report that they have gained a deeper understanding of what it might be like to live with dementia, that their confidence and skills in communicating with people with dementia has improved, and that they have more awareness of the role of carers.

Discussion

This research has implications for undergraduate healthcare educators introducing longitudinal and user-led learning

Stephanie Daley is a Clinical Research Fellow with Sussex Partnership NHS Foundation Trust, based at the Centre for Dementia Studies, Brighton and Sussex Medical School. Stephanie is an OT by background, and completed her PhD at the Institute of Psychiatry, Kings College London, Stephanie's interests are dementia quality of life, longitudinal education and dementia care practice.



15.10-15.30 Deborah Whitham, Paula Riley, James Coughtrey, Sophia Whitham, Simon Otter

'I loved it so much, I absolutely loved it' - what do podiatry students learn while volunteering at a marathon?

Background:

Final year students on the pre-registration Podiatry course volunteer at the Brighton and London Marathon in a clinical support role supervised by University staff and external colleagues. This is a diverse placement opportunity outside of standard clinical teaching for undergraduate podiatry students and had not previously been formally evaluated.

Objectives:

To examine the student learning experience during volunteering in such a dynamic and demanding clinical environment and determine whether there are elements of learning that could be translated more effectively back into traditional clinical teaching environments.

Methods:

This qualitative study explored experiential learning based on underpinning phenomenological principles and used focus groups with students over a two year period to generate data. Focus groups were led by an external colleague, recorded and transcribed verbatim prior to thematic analysis according to concepts outlined by Van Manen (1997). Thematic analysis was performed independently by two researchers then agreed, before being independently verified by a third researcher to reduce internal bias, followed by participant verification.

Results:

Six major themes were identified:

- **Multi-disciplinary working:** Students welcomed the opportunity to work as part of a true multi-disciplinary team for the first time. Some seemed genuinely surprised that different professionals worked well together and recognised how traditional roles & boundaries can be flexible as part of a team.
- **Psychosocial issues:** The psychosocial burden both to themselves and to marathon participants was noted. This aspect of the experience was subsequently reflected upon by students.
- **The environment:** All found the field hospital type clinical environment challenging, for example maintaining good infection control, but reported developing confidence and the transference of prior learning to this new environment.
- **Clinical skills:** Participants reported developing skills in treating acute conditions infrequently seen/managed in their clinical education to date developing their confidence.
- **Learning approaches:** Participants positively reported how much they had learned from other clinicians in different disciplines and reported increased confidence.
- **Barriers to learning:** The issues of space, patient complexity, the nature of the experience overall and a lack of self-confidence could limit learning for some, as did group dynamics.

Conclusions:

Students reported both positive and negative experiences. This opportunity fills a perceived gap in learning and highlights areas not covered elsewhere in clinical learning. However, the frantic nature of the event both impedes and facilitates learning. There are elements identified within the themes which could translate back into the in-house teaching environment to recreate aspects of the experience.

Deborah Whitham is currently a senior lecturer, admissions tutor, and the apprenticeship lead for the pre-registration Podiatry Programme at the University of Brighton School of Health Sciences.



14.30-14.50 Jo Sandiford, Sarah James

Developing an online distance learning course for Speech and Language Therapy (SLT) Practice Educators

Background

As part of the government's strategic plan (2017) to increase the workforce, pre-qualifying allied health professions and nursing are no longer NHS commissioned, leaving universities 'free' to expand their courses. However, placement capacity continues to be a challenging and potentially limiting factor. Placements are a critical aspect of student development, highlighting the need for highly skilled practice educators across the NHS and independent sectors.

Purpose and Aims

The aim of this project was to develop, implement and evaluate a reusable distance learning resource for practice educators. The method involved:

- Scoping the learning requirements of current practice educators; evaluating current training, consulting educators and reviewing the literature / resources
- Designing and building the course
- Implementation and evaluation of the course

Design/ Methods

The distance learning course consists of 8 units including 'Feedback' and 'Supporting students with disabilities'. Each unit has activities and animations embedded within a workbook style. In addition, the on-line platform supports videoed clinical scenarios, developed using actors (simulated clients), students and HEI tutors.

Evaluation

At the time of abstract submission, 24 educators (both new and experienced / NHS and independent clinicians) have enrolled, with 5 completions. Evaluations received to date have been positive eg 100% of evaluations rated the 'Feedback' unit as 'extremely helpful'. Qualitative comments include: "There was a nice mix of video/written/audio content that kept it engaging, and I felt more informed on what to expect from students at different levels". Further evaluation of the project, based on Levels 1 (Reaction) and 2 (Learning) of the Kirkpatrick Model will take place in March 2019.

Conclusions

Distance learning provides an accessible, flexible and sustainable option for delivery of practice educator training across large geographical regions. Evaluation outcomes will inform future adaptations. Uptake compared to previous years' training will be analysed. In the longer term, impact on educator behaviour (Level 3, application of learning) and results (educator and student evaluation of placements) will be assessed.

Jo Sandiford joined the Speech and Language Therapy lecturing team at Leeds Beckett University in February 2017; she teaches on the paediatric speech pathology modules of the course and also leads on current, clinical and professional issues and employability for the final year students. Jo is the placement co-ordinator for the team. Prior to this, Jo worked for 25 years in the NHS, latterly as Clinical Advisor for the Leeds Children's Speech and Language Therapy Service. Jo loved supporting SLT students as an educator in clinical practice and now enjoys the challenge of facilitating their practice based learning from the HEI perspective.



14.50-15.10

Rachel Clifford, Cherry Fitzsimmons

Designing an SLT and OT placement that reflects the nature of MDT work in Special Schools

Student placements are an opportunity for students to grow and develop as collaborative professionals. With exposure to innovative practice, they can also be inspired by the approaches, clients and projects offered. We designed a clinical placement that considered the need to provide a more realistic representation of the work that is done in special schools by Allied Health Professionals.

Providing therapeutic intervention in a special school requires a full MDT approach (Bell et al 2019). The current SLT placements offered by the London university partners do not coincide easily with Occupational Therapy or Physiotherapy placements. All three placements are delivered in a very different way. However, successful work with children with complex needs, is in reality done together (McConachie 1998).

The project was designed so that OT and SLT students would have the opportunity to experience the benefits of working in an MDT manner to provide therapy for pupils and to work together to help the pupils meet their targets within the school environment. Placements were arranged so that SLT and OT students would overlap for a 6 week block of intervention and ensured one day in the special school was shared. The students were given the challenge to provide MDT intervention to a group of 3-4 year old children with profound and multiple learning needs.

Practice Educators supported the students to share their specific disciplinary knowledge on this client group and to share ideas on interventions as well as target setting. Together the students planned, designed and ran two therapeutic intervention groups including setting targets, reviewing targets and writing reports on individual children's outcomes.

Feedback from both sets of students was very positive. At the end of the placement students rated themselves as being better able to liaise with other professionals, include other professionals in their planning and to having a better understanding of the roles of other professionals. PEs rated the students as having learnt more practical and transferable skills in this placement, than on uni-disciplinary placements and it was noted that the students benefitted from each other enormously.

This approach to placements could pave the way for universities to offer students more opportunities to experience the MDT approach to managing caseloads. Placements could be organised to facilitate such experiences. Assessments of students involved in placements such as this could be completed jointly across universities. An MDT placement could provide students with a more holistic real introduction to working within complex needs.

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Rachel Clifford is a Clinical Specialist Speech and Language Therapist working with AAC and Dysphagia for a complex needs caseload in Hackney, East London. She works in a Special School as well as providing services for complex needs children accessing mainstream education. She values student placements and enjoys supporting and inspiring students within these settings. She is particularly interested in MDT working to meet the needs of children and families in Hackney and helps to develop MDT pathways and approaches.



15.10-15.30

Sarah Waygood, Hendrik van der Sluis, Gita Ramdharry

Is there a relationship between Multiple Mini Interview (MMI) Score on admission and Physiotherapy students' performance on practice placement in one HEI programme?

Background: Physiotherapists must be registered to practice with the Health and Care Professions Council (HCPC) and as such must uphold the professional values of their governing body. Physiotherapy students' professional values and behaviours are assessed through practice placements.

The Multi Mini Interview (MMI) is becoming a commonly used tool to assess the non-cognitive professional values of future Physiotherapy students and a number of studies advocate their use for recruitment of medical, nursing and midwifery students. There is limited knowledge of the effectiveness of the use of MMI recruiting Physiotherapy students.

Aims: The aim of this study was to investigate whether there was a relationship between physiotherapy students' MMI score and their first practice placement (PP1) marks in Year 2 of a degree programme in one HEI.

Methods: An observational, correlational study design was used to analyse the MMI score and first practice placement marks given for 99 students from two cohorts (2014 & 2015) of a BSc (Hons) Physiotherapy programme. Overall score, as well as each component score for PP1 (Interpersonal Skills (IP), Professionalism (P), Treatment and Management (TM) and Clinical Reasoning (CR) were compared against MMI score using Pearson's correlations. Statistical analysis was carried out using statistical software package SPSS v.23™ for Windows. Level of significance for statistical analysis was set at $p < 0.05$

Results: MMI score and PP1 marks were analysed for 99 students. Mean (SD) MMI score was 26.82 (2.36) (maximum 35) and mean (SD) PP1 mark 66.88(10.19)%. There was a weak but significant correlation between MMI score and overall score for PP1 ($r = 0.279$, $p = 0.005$), In addition, there was a similar strength but significant correlation between MMI score and score for IP ($r = 0.238$, $p = 0.018$), P ($r = 0.237$, $p = 0.018$), TM and CR ($r = 0.256$, $p = 0.011$). The strongest correlation was between MMI score and TM section ($r = 0.305$, $p = 0.002$).

Conclusion: Whilst weak, there is a correlation between MMI score and PP1 marks suggesting that MMI score relates to performance in practice placement. The MMI as a selection tool could therefore be invaluable to HEIs in identifying individuals who will go on to perform well in clinical practice. In addition, admissions teams may be able to justify the threshold MMI score and/or be able to put measures in place to support students who scored lower in their MMI to perform well on placement.

Sarah Waygood is Senior Lecturer and Admissions Tutor for BSc (Hons) Physiotherapy at St. George's University. Her clinical interests lie in the field of respiratory physiotherapy. Sarah is passionate about Physiotherapy education and particularly in ensuring that the profession is accessible.



14.30-15.30 - Room 'Show' – Modifying practice learning to changing service needs; Responding to new pathways to qualified practice

14.30-14.50

Emma Partington, Sean Cloak, Vince Clarke

Developing the next generation of Paramedic Practice Educators

Recent developments within the paramedic profession include the move to a solely degree entry profession, removing existing work-based diploma pathways and increasing the potential for degree apprenticeships. Several universities are also exploring Masters level pre-registration programmes for existing health care professionals to train as paramedics.

Alongside these changes to the routes of entry to the profession has come the adoption of a preceptorship period for recent registrants; the Newly Qualified Paramedic (NQP) pathway. Part of the NQP pathway requires newly qualified paramedics to undergo Practice Educator training and, in some cases, they are contractually obliged to undertake the role of Practice Educator following completion of their NQP period. These changes have altered the way in which prospective Paramedic Practice Educators are both identified and educated.

This presentation will reflect on the initial stages of the evaluation of a profession-specific Paramedic Practice Educator Course which was designed to meet the needs of both existing, experienced paramedics and those on the NQP pathway. Over three-hundred paramedics have so far progressed through this course, with earlier courses being predominantly attended by experienced, non-higher education paramedics and later course attendees being mainly NQPs who had completed either a part-time, 'in-house', diploma level qualification or a full-time undergraduate BSc degree.

The proposed evaluation will use data gathered from a documentary review of student portfolio completion and post-course feedback questionnaires along with anecdotal evidence gained from interacting with course attendees during in-class exercises.

The evaluation will consider how effective the course has been in meeting the profession-specific requirements of paramedic Practice Educators alongside the more generic traits required from any health professional tasked with supporting a learner in practice. It will also seek to determine if attitudes to the role of Practice Educator differ between experienced and newly qualified paramedics.

It is hoped that analysis of the findings will inform the continued development of both the existing course and the future development of CPD activities designed to give ongoing support to Paramedic Practice Educators.

The implications for the Practice Educator workforce, where the majority of existing paramedics are non-degree level qualified and are required to support degree level students in practice, will be considered.

Emma Partington is a paramedic who is currently employed as a Senior Lecturer at the University of Hertfordshire. Her particular areas of interests include resuscitation, cardiology and learning and teaching. Emma is a key member of the Paramedic Practice-based Learning Team.



14.50-15.10

Natalie Matchett, Sam Patterson

Educating our AHP Assistant staff on how they can be involved in Student Practice Placement Education. Creation of an Interprofessional Practice Placement Education course for Band 1-4 AHP Assistant staff.

Background: Practice placement education (PPE) is a key component of healthcare training and therefore it's essential that PPE provides a supportive and safe learning environment for students (HCPC 2017). In searching for innovative ways to increase our practice learning experience and capacity for PPE and from student feedback we identified the significant role our non-qualified workforce play in PPE, not only in improving the quality and pastoral support for students but also as role models with a wealth of knowledge and skills to share. Therefore a 1 day course was created to provide our non-qualified workforce with the skills to directly support PPE and work alongside clinical educators (CEs). Through this we aim to enhance our placement quality, capacity and productivity.

Purpose and Aims: The purpose of this course was to equip our Allied Health Professional (AHP) assistant workforce with additional skills relevant to PPE to support our CEs. Aims:

- To improve understanding of the diverse learning needs of students
- To develop observational, interpersonal, communication and teaching skills
- To learn how to recognise appropriate student performance and competence
- Develop skills in providing constructive feedback and supporting the CE with underperforming students

Design: The course was produced in collaboration with AHP Placement and Education Providers. The course delegates comprised of Occupational Therapy, Physiotherapy, Operating Department Practitioners, Radiography, Radiotherapy and Dietetic assistants. Teaching methods included taught sessions (produced and delivered in partnership by University tutors, Practice Placement Facilitators and CEs), interactive workshops and case studies/shared experiences. An interprofessional learning approach was used to broaden the learning experience, enhance knowledge and share expertise in the context of student education (Barr and Low 2013).

Evaluation: Delegates scored 4.84 out of 5 for satisfaction and quality of the course and reported an increased understanding of the student journey, why students may struggle on placement, increased confidence in involvement in PPE and felt better equipped to support the CE in providing positive and constructive feedback on student performance.

Conclusion: The AHP Assistant Educator course has proved very popular and received excellent feedback, with delegates pledging to put their learning into practice to improve the student experience. Moving forward, the course will include wider AHPs with input from their affiliated Universities. It is hoped that by consolidating the skills and expertise of the assistant workforce in supporting students on placement that this will have a positive impact on AHP PPE at the University Hospitals Derby and Burton.

References

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Barr, H. and Low, H. (2013) *Introducing Interprofessional Education*, Available at: <https://www.caife.org/resources/publications/caife-publications/barr-h-low-h-2013-introducing-interprofessional-education-13th-november-2016>, Accessed: 07/01/2019.

Natalie Matchett is an AHP Practice Placement Facilitator at University Hospitals of Derby and Burton and she is an Occupational therapist by profession. Currently working in the Practice Learning Support Unit where her experiences are focused on working alongside educators and students across all divisions interprofessionally to provide a high level of support in order to strengthen the practice learning experience. Natalie is an enthusiastic about the quality of healthcare education and enjoys working closely with local HEI's, service providers and commissioners at a pre and post graduate level to ensure we have graduates fit for now and future practice.



15.10-15.30

Sarah Dyson

Enhancing undergraduate placement capacity- A Focus Group

Background:

A follow-on piece of work from an earlier staff questionnaire designed to elicit perceptions and opinions of undergraduate physiotherapy student placement provision (presented at NAEP 2018). This second phase was exploring qualitative themes via a focus group. A focus group was formed with representation of all physiotherapy staffing grades as well as trust practice educators, students and HEI representatives.

Aims:

- To gather opinions, knowledge and insights into the provision of undergraduate physiotherapy placements locally.
- To understand the current issues and limitations for the provision of undergraduate placements.
- To generate themes from the information gained.
- To determine how this information can be used to shape the future of placement provision.

Evaluation and outcomes:

Open ended questions were asked of the group with an emphasis on barriers and behaviours with regards to current provision of undergraduate clinical placements

The following themes were developed:

- Staff awareness of the need to manage increasing capacity
- Staff willingness to manage undergraduate placements in a sustainable way
- Awareness of the impact of caseloads on the student placement experience
- Pressures on the clinical educator and the impact this has on the student
- Recognition of the challenges of clinical education
- Recognition of the positive aspects of clinical supervision- increased mentoring skills, shaping the future workforce.

Discussion/ Conclusion:

Working in conjunction with local HEI's some placement models have now been changed (for academic year 2019-2020). This will allow greater capacity, with placements spread more widely across the academic year.

New placement models have been tried in some clinical areas (4:1 student: educator model).

Clinical areas that did not historically accept students on placement are now offering placement opportunities.

HEI's receptive to ideas, e.g. 2 week clinical placement where students work as a HCA to pre load some of the soft skills as well as handling and personal care needs prior to placement. This placement will count towards the clinical hours required.

Sarah Dyson is currently a clinical physiotherapy specialist for respiratory and critical care at the Royal Liverpool and Broadgreen University Hospitals NHS Trust. She is also a council member for the ICS (Intensive care society) and sits on a number of local and national clinical committees and steering groups. Her interests include student education, with an emphasis on practice placement education and developing the next generation of physiotherapy professionals.



14.30-15.30 - Room 'Tell' – Diversity of new generation learners driving change in practice education

14.30-14.50 | Saskia Walker, Meriel Norris, Annabel Williams, John Hammond

Reasons for attainment inequalities in pre-registration physiotherapy practice education - a qualitative study of student experiences

Background

Previous research has demonstrated that attainment inequalities exist for students from black and minority ethnic (BME) groups and students with a disability in pre-registration physiotherapy education. Potential explanatory factors are under explored in physiotherapy and research to date has rarely included contributions from the students themselves.

Purpose

Therefore the purpose of this study was to explore BME and disabled student experiences during physiotherapy training and explore why an attainment gap might exist.

Methods

Pre-registration BSc and MSc students in their penultimate or final year of study who had completed both academic and practice modules were invited to participate. Eight focus groups were conducted across two HEI's for the two identify groups (BME and disability) and each year group (penultimate (MSc yr 1 and BSc yr 2) or final (MSc yr 2 and BSc yr 3)). Focus groups followed a topic guide developed from the literature and were facilitated by physiotherapy educators from outside the host institution. They were audiorecorded, transcribed verbatim and BME and disability data were thematically analysed separately. A systematic, iterative process was used by a lead researcher in consultation with the co-researchers to review and refine themes for each data set.

Results

A total of 31 students participated that were representative of age, gender and course and with a range of self-identified BME backgrounds (n=17) or with learning or mental health disabilities (n=14). A number of themes arose for each identity group. Relevant to practice education for BME participants is the theme: 'feeling other in reflections of belonging'. However those relevant for participants with a disability are; 'dilemmas of disclosure and inconsistent responses', 'the false glare of assessment'. A common theme for both groups of students is 'developing personal strategies to manage self' which for BME students was in the context of being positioned against the default ethnic majority. For students with a disability this was within and beyond the 9-5 hours of placement. Suggestions for addressing these issues are discussed, with the strongest being the need for academic and practice physiotherapists alike to listen to these students' voices and stories to understand where inequalities do exist.

Conclusions

Studying physiotherapy as a student with a disability or from a BME background requires resilience to overcome a series of implicit challenges. Students in this study have a desire to work with the profession to develop the inclusion, the inspiration, and the understanding which will support the increasing diversity that the workforce requires.

Saskia Walker is Senior Lecturer in the Department of Rehabilitation Sciences at Kingston and St Georges. Her interests include musculoskeletal practice, pain management and issues related to teaching and learning.



14.50 – 15.10

Sean Pert, Rachel Starkey

PebblePad e-portfolio engagement and the impact on reflective practice for speech and language therapy students on clinical placement

Speech and language therapy (SLT) students need to engage with reflection in order to develop complex clinical skills. They also require IT skills to engage with their study materials, employers' paperless clinical record keeping, and their own continuing professional development (CPD).

Teaching staff, in partnership with practice educators, focus on facilitating the integration of theory into real life practice. The reflective process involves the student moving from basic description of clinical sessions (The 'What?' stage); to identifying the crucial aspects of the interaction ('So what?'); then using these realisations to adjust, refine and improve future interactions ('Now what?')

Traditionally, SLT students have collected paper evidence such as observations, reflections, feedback from practice educators, relevant peer reviewed research and clinical guidelines. The resultant portfolio documents clinical skills development, as students integrate these knowledge assets into their clinic practice and professional identity. The resultant paper portfolio can be large and unwieldy. This can encourage students to reflect at a much later time when their client contacts occurred, leading to inaccuracy of reflection and lack of engagement.

Many students fail to move beyond the initial descriptive ('What?') phase of reflection. This may be because they view clinical practice as a series of technical tasks, rather than an interactive process.

The use of PebblePad™ is not new in Allied Health Professional undergraduate learning. Other educators have found that technology may increase staff workload unless carefully planned. We introduced a PebblePad™ workbook that included simple forms to prompt students to reflect and record their feedback from practice educators.

Students were issued with iPads with a PebblePad™ shortcut pre-installed. Pre-placement workshops covered how to interact with PebblePad™ and the iPad. This provided students with highly portable access to their e-portfolio, which was not dependent on access to placement computers. It was hoped that this would encourage students to reflect contemporaneously.

A survey of students from Years 1 and 2 was undertaken, asking their views on using the e-portfolio via their iPad, and if this had improved their ability to engage with information technology and their ability to engage with reflection.

This presentation will provide an overview of the students' views on the e-portfolio, barriers they encountered in using it, and their attitude to using the e-portfolio for future placements. It will also look at the impact on their reflections and if it facilitated reflections beyond the descriptive 'What?' stage.

Dr Sean Pert is the Lead for Clinical Education on the Speech and Language Therapy Degree Programme at the University of Manchester. He has focused on facilitating student learning and reflection through the use of technology, especially when they are undertaking clinical placement.



15.10-15.30 | Jane Harvey-Lloyd, Jane Morris

Preparing health care graduates for the experience of transition in their first posts: maximising the effectiveness of preceptorship

This presentation is based on the findings from my PhD entitled 'Being and Becoming a Diagnostic Radiographer' which explored the transition period of nine ex-students during their first twelve months as newly qualified radiographers. An interpretive phenomenological methodology was utilised to achieve the following objectives:

- To describe and interpret the experiences of newly qualified radiographers
- To utilise the findings in order to gain an understanding of what it is like to be a newly qualified radiographer and what factors influence the experience
- To discuss what can be learned from the experiences of the newly qualified radiographers to inform the transition period for others in the future

The participants were interviewed at three, six and twelve 12 months during which they shared their ups and downs, feeling and emotions and hopes for the future. During the analysis and discussion of the data it was concluded that are three essential elements to preceptorship: preparation, environment and the future generation. My study found that these three aspects heavily influenced the transition of the graduates who were fully prepared for the technical aspects of the role of the radiographer but often due to the lack of adequate support and preparation struggled to fit in to their role and the departments as quickly as they would like.

The purpose of this presentation to is to discuss some of the experiences of the graduates using direct quotations and use these and the relevant literature to develop a greater insight into the role that preparation, environment and the new generation has on transition. There will be a discussion of how preparation should begin before graduation to educate students about the experience of transition and help them to develop some coping strategies to use once they are qualified in their first post. There will also be a critical debate about the preceptorship and how it needs to take into account the requirements of the new generation and be tailored to individual needs to maximise support.

Sarah Dyson is currently a clinical physiotherapy specialist for respiratory and critical care at the Royal Liverpool and Broadgreen University Hospitals NHS Trust. She is also a council member for the ICS (Intensive care society) and sits on a number of local and national clinical committees and steering groups. Her interests include student education, with an emphasis on practice placement education and developing the next generation of physiotherapy professionals.



NAEP Executive Committee List: April 2019

Name	Representing
Dr Vince Clarke	<p align="center">Paramedics Senior Lecturer in Paramedic Science University of Hertfordshire</p>
Professor Lynn Clouder Vice – Chair of NAEP	<p align="center">Professor of Professional Development and Director of the Centre for Excellence in Learning Enhancement, Coventry University HEA National Teaching Fellow</p> <p align="center">Editor of the NAEP ‘International Journal of Practice-based Learning in Health and Social Care.’</p>
Ms Louise Coleman	<p align="center">Radiography Professional Officer for Education and Accreditation The Society and College of Radiography</p>
Ms Carol Dicken	<p align="center">Social Work Director of Practice Education for School of Allied Health, Midwifery & Social Care Joint Faculty of Health Social Care & Education Kingston University and St George’s, University of London</p>
Ms Pauline Douglas	<p align="center">Dietetics and Northern Ireland Senior Lecturer/Clinical Dietetics Facilitator University of Ulster</p>
Mr Peter Glover	<p align="center">AHPs and Scotland Practice Education Co-ordinator NHS Education for Scotland</p>
Dr Dawne Gurbutt	<p align="center">Nursing/ IPE Clinical Lead for Interprofessional Education School of Medicine , UCLAN</p>
Dr John Hammond	<p align="center">Physiotherapy Head of Department of Rehabilitation Sciences Kingston University and St Georges, University of London</p>
Jane Harvey-Lloyd	<p align="center">Radiography Associate Professor, Diagnostic Radiography, University of Suffolk</p>



Ms Jenny Miller	Voluntary sector CEO PAMIS, University of Dundee-based charity
Professor Ann Moore CBE President	Physiotherapy Emeritus Professor of Physiotherapy University of Brighton Director – The Council for Allied Health Professions Research (CAHPR)
Dr Jane Morris Chair	Physiotherapy Deputy Head of School of Health Sciences, University of Brighton (Learning and Teaching, Student Experience) HEA National Teaching Fellow
Mr Richard Pitt	Centre for Advancement of Interprofessional Education CAIPE Chair; Visiting Professor Tokyo Metropolitan University, Japan
Dr Kim Russell	Midwifery Director of Educational Development & Global Reach (Midwifery) University of Nottingham HEA National Teaching Fellow
Sarah-Jane Ryan Treasurer	Physiotherapy Principal Lecturer/Practice Education Tutor (Physiotherapy) School of Health Sciences, University of Brighton
Dr Carol Sacchett	Speech and Language Therapy Director of Studies in Speech and Language Therapy University College London
Mr Tony Walker	Nursing Lecturer, University of Hull
Miss Helen Bristow Hon Secretary	Physiotherapist