

Innovative practice-based education in speech and language therapy: working together to go beyond traditional placement models

Introduction

This innovative project addresses developments in speech and language practice-based education. We have recognised and prioritised clinical practice from the four pillars of practice to ensure that students receive excellent quality placements, working directly with clients with neurological conditions who have been waiting for speech and language therapy input.



Background

NHS England calls for innovation beyond traditional placement models to enhance quality care (NHSE, 2023). Post Covid-19, Leeds Community Healthcare NHS Trust's (LCH) Speech and Swallowing Team were unable to fulfil the Royal College of Speech and Language Therapists (RCSLT) requirement for staff to provide 25 days of practice education per year (RCSLT, 2021). They were facing service pressures, staffing issues and increased waiting lists. Support was provided by Leeds Beckett University (LBU) and an independent speech and language therapist to provide high-quality placements and reduce speech and language therapy client waiting lists. This has been achieved through working together in a non-traditional placement model.

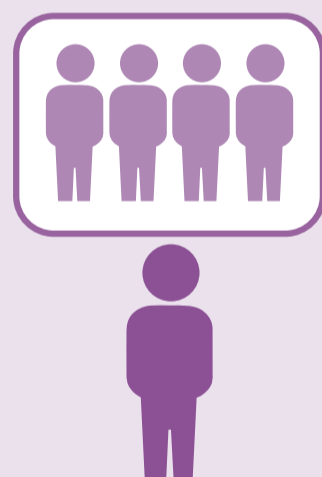
Aims

- Address placement capacity shortfall.
- Deliver innovative placements in a non-traditional model.
- Support students with reasonable adjustment requirements due to health conditions.
- Assist students with placement costs during cost-of-living crisis.
- Provide speech and language therapy intervention and reduce client waiting lists.



Methods

LCH worked in partnership with LBU and an independent speech and language therapist (SLT) to configure an innovative placement. A hybrid, online and in-person method was established with a **4:1 student: practice educator model**. The students worked online two days a week with the independent SLT, carrying out telehealth groups and one to one therapy for people with Parkinson's Disease (PD) who had been on the LCH waiting list for intervention. The students also attended in-person two days a week with LCH staff, doing home visits for clients with PD. In addition, the students engaged in project work, for example, creating resources designed to support people with PD.



Evaluation and outcome

- 4 placements over 18 months.
- 2464 placement hours delivered.
- 16 students successfully completed the placement.
- Reasonable adjustments related to health needs met student requirements due to the hybrid model.
- Students benefitted from reduced placement financial pressures (travel and accommodation) due to the hybrid model.
- LCH PD client waiting list reduced.
- Clients had a choice of online or in-person intervention, which is central to personalised care (NHS Constitution, 2021) and aims to reduce health inequalities.
- Students created a sustainable digital intervention package for clients with PD.

Positive feedback

From students:

"It was an outstanding placement."

"Opportunities to engage in direct therapeutic work that supported development of my skills exceeded expectations."

From clients:

"The students were very good and I really enjoyed the sessions."

"They [students] were nervous at first, but then after 2-3 sessions they got into the swing."

Implications and future plans

Co-designing an innovative, hybrid 4:1 placement resolved placement capacity issues and enabled successful placement delivery, targeting the service waiting list and delivering effective intervention to people with PD, thus highlighted the students' integral role in a service. This placement has implications for service delivery going forwards and is a model that can be sustained with ongoing student involvement. Placement models must remain innovative and responsive to the needs of students and services. We must also continue to recognise students as part of the workforce and central to managing caseloads and client care.

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