

### OCCUPATIONAL THERAPY EXTENDED SCOPE PLACEMENTS WORKSHOP

2022-23

Facilitated by Sarah Lacey

Placement Lead <u>s.lacey@shu.ac.uk</u>



### Introductions

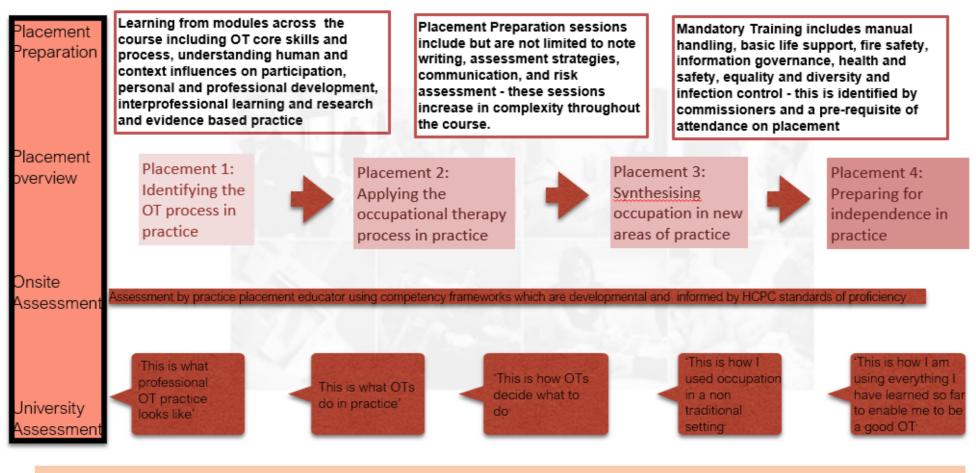


#### Sheffield Hallam University

### Progression



**Progression Through Practice Placement Learning** 



It is the synthesis of academic and placement based modules which generate creative, competent and inquiring practitioners

(Polglase and Treseder 2012)

References

Polglase, T., Treseder, R (2012) The occupational therapy handbook: practice education, M&K Update, Keswick.

# PLAN FOR TODAY



THE STORY SO FAR PLACEMENT STRUCTURE ASSESSMENT SUPPORT CHALLENGES History of non-traditional occupational therapy placements at Sheffield Hallam

- MSc introduced the placement
- BSc started running the placement in 2014
- Student numbers continue to increase
- We are responding by continuing to set up new links to placement sites
- Exciting new job roles have been created from extended scope placements

# **KEY POINTS**



MSC 3 DAYS PER WEEK

BSC 4 DAYS PER WEEK

DA 5 DAYS A WEEK

- TIMES AND DAYS CAN BE FLEXIBLE DEPENDING ON THE NEEDS/DEMANDS OF THE SERVICE/STUDENT

THURSDAY / FRIDAY – UNIVERSITY LEARNING AND GROUP SUPERVISION

PAIRS – WHERE POSSIBLE

# EXPECTATIONS OF STUDENTS



- BUILD PROFESSIONAL RELATIONSHIPS WITH
  COLLEAGUES AND PEERS
- SCOPE A SERVICE
- PLAN, RUN AND EVALUATE AN INTERVENTION
   6 WEEKS AVERAGE
- TAKE CONTROL OF THEIR LEARNING: INCLUDING ARRANGING SUPERVISION, SETTING THE AGENDA, KEEPING A RECORD OF ACTION PLANS AND FEEDING BACK
- BEHAVE PROFESSIONALLY AND ACT AS AN AMBASSADOR FOR THE PROFESSION

# Expectations of the Educator



• To have an open dialog, where students can share evidence

Sheffield

Universitu

Hallam

- Gather feedback from placement setting
- To listen and share professional insights
- The educator is not expected to be an expert in the area of practice
- Allow the student to find their own solutions
- Negotiate boundaries!



#### Sheffield Hallam University

#### ASSESSMENT

EXAMINE THE COMPETENCY GRIDS AND CONSIDER WHAT EVIDENCE CAN BE PROVIDED TO ENABLE THE LONG ARM EDUCATOR TO MAKE AN INFORMED JUDGEMENT



### Example of BSc booklet

	1. Assessment of scope of service	2. Identification of occupational therapy role	3. Intervention planning and implementation	4. Professional reasoning	5. Evaluation and planning
P A S S + +	Able to fully articulate current scope of the practice setting and locate it within its context in the community. Identifies links to other areas and related services.	Independently identifies ways of involving service users and providers in establishing and prioritising needs for potential occupational therapy role.	Plans and implements a significant occupation- based intervention in the service or with service users. Adapts and modifies intervention weekly using feedback and reflection	Uses current theory and developing practice knowledge to justify new intervention. Able to articulate professional reasoning to both service user and service provider.	Feedback from service users and providers is integral to evaluation throughout .Sustainability or possible future developments of this intervention and occupational therapy role in the service is considered
P A S S +	Able to identify scope and range of service within its working context. Identifies key areas of work and service provision.	Able to identify and prioritise potential occupational therapy role in consultation with service users and providers with minimal support from practice supervisor	Able to plan and implement a workable and useful occupation based intervention. Is able to adapt and alter plans as implementation takes place with minimal assistance.	Justifies new intervention with reference to current theory and professional philosophy. May need some assistance from practice supervisor to articulate this	Evaluates new intervention incorporating feedback from service users and providers, Sustainability is considered or future plans are explored.
P A S S	With support of practice supervisor, is able to identify the scope of service and needs of service users. Has grounded awareness of practice service context.	Can identify potential occupational therapy role considering needs of service users and service providers, with support from practice supervisor	Plans and implements a realistic occupation based intervention for service and users or parts thereof with support from practice supervisor	Able to justify and reason through the innovation with reference to occupational therapy philosophy and theory with support from practice supervisor.	Can evaluate the new intervention. Is able to identify changes and improvements for future implementation. Feedback from service users and providers is sought.
F A I L	Unable to assess the scope of practice area or needs of service users . Is not able to articulate the current role of service within its context	Does not consult sufficiently with service users and providers to identify needs. Is unable to identify clear potential role for occupational therapy. Does not respond to feedback on this.	Plan for new intervention is not realistic and needs maximum support from practice supervisor to modify and adapt plans.	Unable to link occupation-based intervention to theory and philosophy of occupational therapy. Intervention is not sufficiently related to occupational therapy.	Unable to evaluate the new intervention in relation to the context of the service. Is unable to suggest changes or improvements and does not consult sufficiently with service

	1. Communication with Clients/Carers	2. Communication with Occupational Therapy Team and other agencies	3. Assertiveness	4. Anti-Oppressive Practice	5. Documentation
<b>P</b> L U S ↑	Sensitive interaction with clients and carers at all times. Able to deal with demanding situations and empathise with clients and carers.	Is able to participate in many forms of communication with team and other agencies and always has a positive in- put. Shows a clear understanding of group dynamics.	Respects self and others. Sets clear boundaries and negotiates with skill	Consistently demonstrates non-judgemental attitudes to others and works in a client centred context.	Independently writes concise and accurate notes. Is able to complete a limited range of other written reports to a high standard
P L U S ↑	Is confident in communicating with clients and carers. Establishes rapport easily.	Participates fully in team and other agency communications.	Open and clear approach. Is able to consider other view points in a positive and respectful manner and negotiate accordingly.	Able to demonstrate non- judgemental attitudes and discuss complexities and dilemmas involved.	Writes concise and accurate notes. Beginning to undertake other written reports with minimal support.
P A S S	Is clear and sensitive in communicating with clients and carers understanding the importance of informed consent and confidentiality. Gaining confidence in talking about more difficult issues	Helpful, positive interactions with team and other agencies.	Has an open and clear approach to self and others. Able to discuss issues in open, mature and professional manner.	Able to demonstrate ability to value difference in others and incorporate this into their practice. With assistance understands the impact of dysfunction and deprivation on service users, aware of socio- cultural diversity.	Beginning to take responsibility for documentation. Some assistance may be required to complete full range.
F A I L	Has problems communicating - may be withdrawn or too informal or inappropriate. May not be able to show empathy.	Has not understood or become involved in communications with team or other agencies. Has avoided communication or has done so inappropriately	Is not able to discuss issues without becoming defensive. May manipulate or avoid situations.	May express negative attitude to others in a judgmental way. Has no insight into these attitudes.	Needs assistance or prompting to complete basic documentation

	1. Professional Suitability	2. Self Appraisal	3. Self Development	4. Initiative and Motivation	5. Reflective Practitioner	6. Safety
P L U S	Displays confidence, integrity and a responsible, mature, professional approach.	Perceptive level of insight into personal level of strengths and limitations and development needs.	Plans and develops self-development programme based on self-appraisal; identifies needs and goals and establishes means of monitoring outcomes.	High level of enthusiasm and ideas. Highly motivated and able to use initiative. Able to use own professional judgement.	Uses reflective practice to enhance evaluation of practice considering more complex and broader issues.	Demonstrates in- depth understanding of safety issues within working environments. Is pro-active in consideration of safety issues
P L U S ↑	Reliable, honest and trustworthy. Is confident and professional in approach. Takes appropriate responsibility.	Able to critically assess levels of personal strengths and limitations.	Identifies goals and plans for self- development based on self appraisal and feedback.	Well motivated and enthusiastic. Shows initiative. Mostly using own professional judgement.	Uses reflective practice to develop analysis of and ideas on practice.	Aware of safety issues in environment. Needs minimal advice to enforce.
P A S S	Reliable, honest and trustworthy. Clear professional attitude and gaining in self- confidence. Accepts responsibility appropriate to level. Adheres to professional code of conduct.	Developing level of self-appraisal with reasonable insight into own abilities and limitations	Able to identify and plan realistic and appropriate personal goals. Beginning to maintain CPD.	Positive approach and use of initiative. Self-motivated. Beginning to use own professional judgement.	Uses reflection to evaluate practice. Making sound judgements based on reflective analysis.	Aware of safety and risks within immediate working environment. Practices within the legal and ethical boundaries of the profession with advice.
F A I L	Unreliable or irresponsible in approach or behaviour. Inappropriate behaviour which contravenes professional code of	Demonstrates lack of insight into own abilities and limitations. Over-estimates abilities.	Cannot identify personal learning goals. Needs constant prompting to identify needs.	Lacks initiative and appears disinterested in the work. Appears unmotivated.	Can only apply knowledge to familiar situations. Unable to use reflective practice to back up decision making.	Requires constant supervision and prompting regarding safety issues. Would place self or others at risk.

	1. Self Management	2. Workload Management	3. Policies and Procedures	4. Information Handling	5. Interprofessional working
P L U S ↑	Demonstrates good time management and organisational skills. Is calm and well organised. Takes opportunity to gain new skills. Is self-motivated	Demonstrates good WLM applies theory to practice. Works efficiently and effectively. Makes sound and well reasoned judgements	Applies and incorporates policy, procedure and legislation to daily practice. Keeps up to date and understand importance and effects of policy. Understands need for quality and audit.	Consistently gathers and processes appropriate information. Writes good appropriate reports. Seeks out relevant information and informs other where appropriate.	Relates own practice to interprofessional context. Consults and collaborates with interprofessional team where appropriate.
P L U S ↑	Demonstrates good time management and organisational skills. Well motivated. Can problem- solve.	Can prioritise and demonstrates good WLM. Is efficient and effective	Aware of importance of policy, procedures and legislation. Works safely and aware of health and safety measures.	Gathers and processes appropriate information. Maintains confidentiality and gives accurate reports. Keeps other informed and able to seek information where necessary	Able to relate own practice to context of interprofessional working. Collaborates with interprofessional colleagues where appropriate
P A S S	Usually exhibits good time management and organisational skills. Makes good use of spare time and mostly meets deadlines.		Aware of importance of policy, procedures and legislation and is usually able to apply them to practice with assistance. Works safely and corrects errors. Understands need for health and safety measures.	Gathers and processes information appropriately. Respects confidentiality. Aware of need to keep others informed and usually does so. Aware of principles of audit and quality.	Demonstrates awareness of need to work interprofessionally where appropriate. With assistance is client centred, facilitating autonomy and empowerment of individuals and communities.
F A I L	Chaotic and disorganised. Unable to meet deadlines without constant prompting.	Cannot prioritise or apply WLM needs constant prompting to work efficiently. Makes inappropriate decisions and lacks insight.	Unaware of need to apply policy and legislation and its impact on practice. Works in isolation and can be unsafe because of this.	Unable to gather and process information. Unaware of need for confidentiality. Does not report to others.	Works in isolation. Unable to demonstrate understanding of interprofessional context of care. Does not consult or so-operate with interprofessional

### STUDENTS TO HOLD THEIR BOOKLET, AND SHARE THIS REGULARLY

THE LONG ARM SUPERVISOR CAN GET THEM TO WRITE SUPERVISION NOTES BUT YOU NEED TO BE CLEAR THAT ANY CONCERNS ARE CLEARLY DOCUMENTED



- APPRENTICE MODEL TO SELF DIRECTED LEARNING
- GREATER AWARENESS OF THERAPEUTIC USE OF SELF
- UNDERSTANDING OF SELF AS AN OCCUPATIONAL BEING
- DEVELOPING SKILLS IN RELATION TO ASSESSMENT AND OBSERVATION
- BECOMING AN ENABLER OF OCCUPATION USING ACTIVITY ANALYSIS AND ADAPTATION
- RECOGNISING THE IMPORTANCE OF PERSON CENTERED GOAL PLANNING
- LINKING THEORY WITH PRACTICE

### **KEY TASKS AND STAGES**



- INDUCTION TO SETTING DISCUSS ANY HOPES AND FEARS (ON BOTH PARTS), EXPECTATIONS AND LIMITATIONS, AGREE THE MOST CONVENIENT AND EFFECTIVE WAY TO KEEP LINES OF COMMUNICATION OPEN, DISCUSS HOW FEEDBACK WILL BE SHARED OR REQUESTED
- NEGOTIATED LEARNING CONTRACT CONSIDER ADDITIONAL LEARNING NEEDS, PERSONAL LEARNING OBJECTIVES, EXPECTATIONS OF EACH OTHER
- STUDENTS ARE ENCOURAGED TO INTERPRET THEIR EXPERIENCES AND CONSTRUCT KNOWLEDGE RATHER THAN OBSERVING AND REPEATING
- RECIPROCAL TEACHING-LEARNING APPROACH AS OPPOSED TO DIDACTIC
- TURN ANYTHING INTO A LEARNING EXPERIENCE

### STRATEGIES



- FORMALLY REQUEST REFLECTIONS (WRITTEN AND VERBAL) AND AGREE HOW AND HOW OFTEN THESE ARE SHARED
- SET A CHALLENGE / TASK, E.G. WHEN YOU COME BACK NEXT TIME BRING WITH YOU A LIST OF THE ACTIVITIES WHICH CURRENTLY HAPPEN AT THE UNIT
- MAKE AN OBSERVATION ON A STUDENTS FEEDBACK OR QUESTION IT
- COMPARE AND CONTRAST SOMETHING, E.G. HOW SOMEONE THEY RESPECT APPROACHES A TASK OR COMMUNICATION AND HOW THEY DO
- CRITIQUE A PLAN (OR BETTER STILL ASK THE STUDENT TO DO IT)
- ASK STUDENT TO SEPARATE CAUSE FROM EFFECT
- ASK QUESTIONS
- ASK THE STUDENT TO OBSERVE SOMETHING SPECIFIC AND FEEDBACK TO YOU
- PROVIDE A STRUCTURE OR MODEL TO SHAPE THOUGHTS AND IDEAS

### FORMAT OF SUPERVISION



- SUPERVISION CAN HAPPEN IN ANY FORMAT FACE TO FACE, MS TEAMS, PHONE ETC
- WHERE POSSIBLE WE DO SUGGEST THAT YOU GO OUT TO THE SETTING TO OBSERVE THE STUDENT, HOWEVER THIS IS NOT ALWAYS POSSIBLE AND YOU MAY NEED TO BE CREATIVE.
- YOU WILL ALSO NEED TO OBSERVE SOME PART OF THEIR INTERVENTION, IF YOU ARE UNABLE TO GO TO THE PLACEMENT SETTING, THEN PERHAPS ASK THE STUDENTS TO PRESENT THEIR INTERVENTION TO YOU
- THE STUDENTS WILL NEED TO EVALUATE THEIR INTERVENTION AND
  INCLUDE SOME CLIENT FEEDBACK WHERE POSSIBLE
- COMPLETION OF HALF WAY AND FINAL REPORT IN CONJUNCTION WITH PLACEMENT SETTING
- MSC STUDENTS ALSO NEED TO PRESENT A SUMMARY OF THEIR PLACEMENT EXPERINENCE TO YOU AND A UNIVERSITY TUTOR.

# Some examples of interventions from previous placements

#### So, you're on placement at **Burton Street**...

A guide written by students, for students

#### What you need to know....

- It's a not-for-profit organisation, primarily for adults and children with learning disabilities.
- They are host to 50 other businesses and charities.
- Sessions include baking, dancing, singing, art and film-making.
- Money comes from clients, room hire, events, bistro night and grants from other external funding bodies for one-off projects.
- All profits go back into the organisation to keep things running smoothly, as well as to fund projects such as the hydrotherapy pool.



#### Our experience

- As OT students, we have loved being at Burton Street and feel that it has been a highly valuable experience.
- The team are SO friendly and welcoming.
- Each client is unique and has their own set of talents and attributes.
- At first communication was challenging with some clients, but this got easier, especially through learning new ways to communicate such as Makaton.
- At first, we tried lots of different sessions to get a feel for the service, but eventually settled into regular groups each week.
- It's been high energy, interactive and fun. The days go so quickly, as did the placement!

#### Burton Street and beyond ...

- You will have met the fantastic team at Burton Street...but who else is involved?
- In some cases, clients are referred to Burton Street by social workers.
- Some clients see a physiotherapist outside of the service, or sometimes on site.
- A lot of the work relates directly to Occupational Therapy. This has a similar ethos to Burton Street, using occupation to promote independence and enable self-expression, self-confidence and communication.
   Other communication links include CAMHS, the community mental
  - health team, schools, adult education providers and speech and language therapists.

#### Top tips

- ★ Burton Street offers a lot of variety, so try and experience as much as you can (Beighton Street, Children's service, outreach etc.)
- ★ Don't be afraid to ask questions, the staff are the experts and are both very approachable and knowledgeable.
- ★ Learn Makaton! This is a great way to aid communication with most of the clients.
- ★ Arrive at sessions early where possible staff really appreciate help with setting up, planning and facilitating the sessions - plus, this is great experience!
- ★ Towards the end of your placement, give the clients time to process that you will be leaving. You will have developed a bond/rapport with them so be sensitive to this.

#### Intervention session 2 - Building letters

Aim of session - to build our own letters!

Goals - Work on letter recognition Work on letter formation Increase participation





Resources Cotton buds - buy Play dough/plasticine - can find Lego - find Letter templates - Laminated sheets

# BCDEF

- and the second se
- 1. In one session have different tables with each different material on
- 2. Use one material for building e.g the cotton buds
- Split into 3 sessions a different material each week.

#### Options for what we write

**Options for materials** 

- 1. Seasonal themes
- 2. Clients write their names
- 3. Clients choose a theme each week
- 4. We make an alphabet? may take a while



A follow-up survey to understand the impact of Covid-19 on mental health and wellbeing. August 2020

#### INTRODUCTION

This anonymous mental health and wellbeing survey was conducted by Sheffield Flourish - a mental health charity rooted in the community, during the COVID-19 outbreak in Sheffield. The survey was completed online. We wanted to continue finding out how the lockdown is affecting people and their mental health in our community. 28 people responded to the survey and has continued to provide us with an increasing awareness of the difficulties people are facing during the pandemic as well as how we can best continue to keep in contact and support people throughout this period.

OUESTION 1: NOW THAT RESTRICTIONS ARE BEING LIFTED, ARE THERE ANY CONCERNS THAT YOU HAVE ABOUT THIS? (27 RESPONSES)

Responses to this question fitted under 5 key areas. As this was an open question participants were free to share any concerns that they might have in their own words.

People are reporting that they are concerned the lockdown is being lifted too quickly

Concern around how wearing a mask increases anxiety.

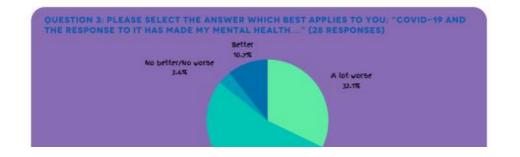
There are concerns that people who are sheilding will still be at the same level of risk when sheilding ends.

There are concerns about other people are being too relaxed and not wearing masks.

Lack of clarity from the Government.

OUESTION 2: HAS ANYTHING IN PARTICULAR MADE YOU FEEL BETTER DURING THE LOCKDOWN PERIOD? TICK AS MANY CATEGORIES AS YOU FEEL APPLY AND ADD YOUR OWN UNDER 'OTHER' IF THEY ARE NOT INCLUDED IN THE LIST. (28 RESPONSES)







## Any Questions?



### **CONTACT UNIVERSITY IF NEEDED**

IF THE STUDENT IS STRUGGLING CONTACT YOUR LINK TUTOR – THE STUDENT'S ACADEMIC ADVISOR

ANY OTHER ISSUES YOU CAN CONTACT

SARAH LACEY <u>s.lacey@shu.ac.uk</u> (Placement Lead and MSc Coordinator)

KATHERINE GARVEY <u>k.Garvey@shu.ac.uk</u> (BSc Placement Coordinator)

LIZ WAINWRIGHT <u>e.wainwright@shu.ac.uk</u> (DA Placement Coordinator)

OR OUR PLACEMENT ADMINISTRATOR TEAM ON ahpotplacements-mb@exchange.shu.ac.uk