

OCCUPATIONAL THERAPY EXTENDED SCOPE PLACEMENTS WORKSHOP

2023-24

Facilitated by Sarah Lacey and Katherine Garvey

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The logo for Sheffield Hallam University, featuring the words "Sheffield", "Hallam", and "University" stacked vertically in a bold, red, sans-serif font. The logo is positioned on the right side of the slide, partially enclosed by a large, stylized circular graphic composed of multiple overlapping, semi-transparent bands in shades of light blue and beige.

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For any general placement queries
please refer to the placement
website initially:

<https://www.shu.ac.uk/health-social-placements/profession-information/occupational-therapy>



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PLAN FOR TODAY

1. Key dates
2. Placement aims
3. Roles and responsibilities
4. Assessment
5. Supervision
6. Tariff and payments
7. Examples of previous work

The logo for Sheffield Hallam University is centered within a white circle that has a thin red border. The circle is positioned on the right side of the slide, overlapping a dark red vertical bar that runs down the right edge. The text 'Sheffield Hallam University' is written in a dark red, sans-serif font, stacked in three lines.

Sheffield
Hallam
University

Key dates

PLACEMENT DATES (BSc)	4th MARCH 2024 – 26th APRIL 2024 (week commencing 1 st April off for Easter)
PLACEMENT DATES (MSc)	29th April 2024 – 3rd July 2024 Students on placement MONDAY- WEDNESDAY
DEADLINE FOR OFFERS	Monday 15th January 3pm

Key Points

MSc 3 days per week (22.5 hours)

BSc 5 days per week (37.5 hours)

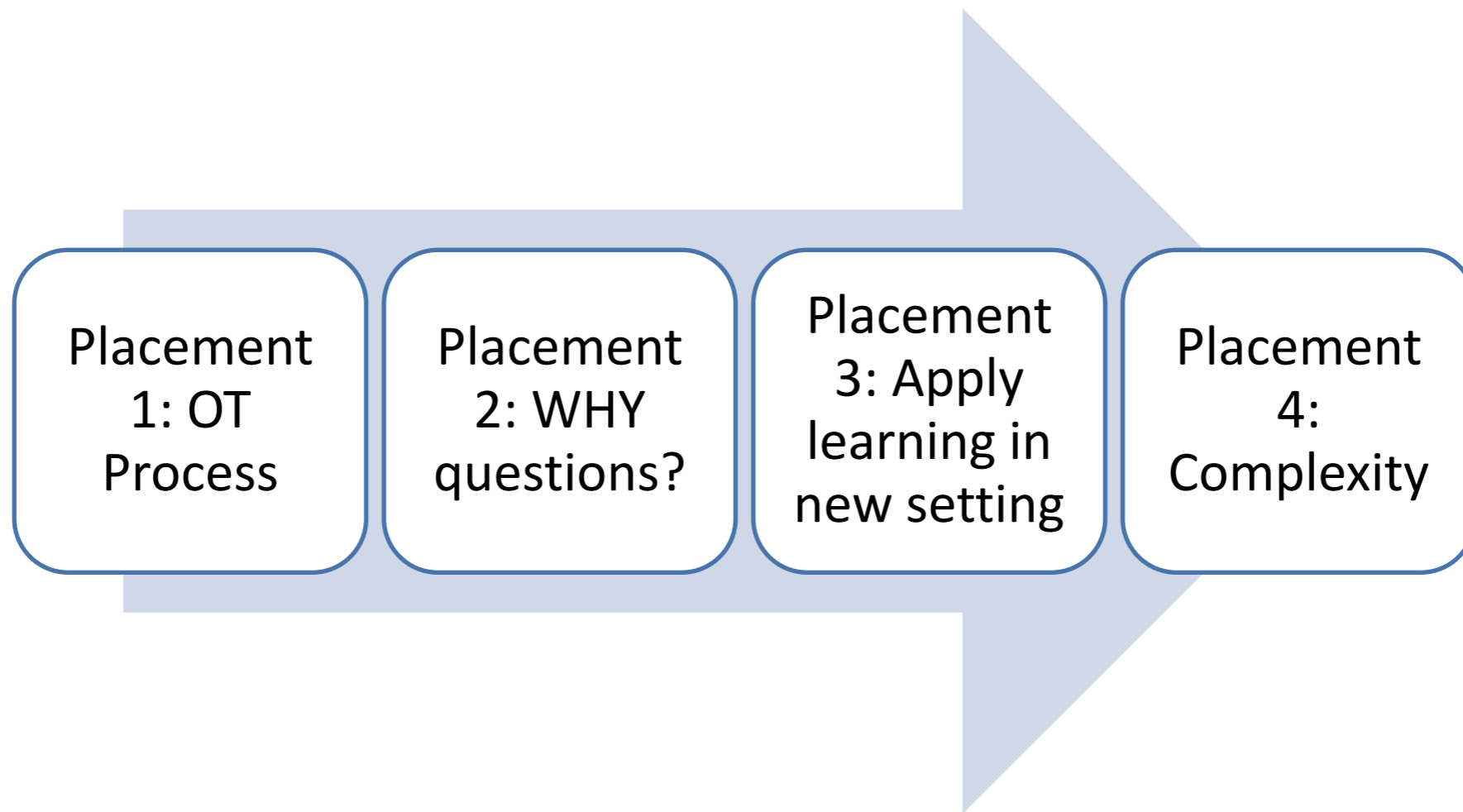
Times and days can be flexible depending on the needs/demands of the service/student.

MSc students Thursday/Friday = University learning and group supervision.

BSc students Friday = group supervision.

Students go out in pairs wherever possible.

Expectations at each level:



Placement Aims

This practice learning experience will give the student the opportunity to **broaden their awareness of the context of health and social care** by participating in a non-statutory or emerging area of practice where they may or may not already be an occupational therapist in situ. The student will have support from a related field of practice or from the university.

The student will **develop their professional skills** as they would in any practice setting, but in addition they will also **develop and implement an occupation-based intervention** appropriate to the setting and service user group with the support of the supervisor.



Responsibilities

- **The on-site supervisor** will be responsible for the day-to-day management of the students, their whereabouts and their activities.
 - **The long-arm occupational therapy supervisor** will be responsible for professional supervision aimed at the students' practice in the setting.
 - **The university tutor** will see the students for two hours every fortnight for group supervision - this will be based at the university.
-

What are we
expecting the
students to
do?

- Build professional relationships with colleagues and peers.
- Scope a service.
- Design, run and evaluate an occupation-focussed intervention that meets the needs of service users.
- Take control of their learning; organising supervision, setting and agenda, managing their time, writing up action plans.
- Act as an ambassador for the profession of Occupational Therapy.

Expectations of the Long-Arm Educator

- To provide weekly 1 hour supervision (fortnightly for MSc).
- To have an open dialog, where students can share evidence.
- Gather feedback from the onsite supervisor and placement setting regularly, and for the half-way and final assessments.
- For MSc students the assessment takes place between the onsite supervisor, long-arm supervisor and university tutor, and the students have full details of this in their handbook.
- 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!

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.



Example of placement booklet

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

Development of Occupational Therapy Role and Intervention

Grade	Assessment of scope of service	Identification of occupational therapy role	Intervention planning and implementation	Professional reasoning (assessed at presentation)	Evaluation and planning (assessed at presentation)
PASS ++	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
PASS +	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.
PASS	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.
FAIL	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 users and providers in the evaluation

What is 'Scoping the Service'?

Knowing the mission statement/purpose/aims of the given organisation

How does the service work (staffing, volunteers, expertise, provision, commissioning?)

The service user group which attend: What are their needs? Are these needs met currently within the service?

Challenges in society for this given service user group (marginalisation, vulnerability, representation in society)

OT Assessments/Intervention

Articulate the role of OT:

- Use of models
- To be able to define the role of OT to others, in relation to the service/organisation
- Assessment / intervention approaches

Intervention approaches:

- Evidence base
- Service user involvement and co-production?
- Client-centred approaches

Professional Communication

Grade	Communication with Clients/Carers	Communication with Occupational Therapy Team and other agencies.	Assertiveness	Anti-Oppressive Practice	Documentation
PASS ++	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. Acts with courage as necessary. Sets clear boundaries and negotiates with skill.	Consistently demonstrates non-judgmental 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
PASS +	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-judgmental attitudes and discuss complexities and dilemmas involved.	Writes concise and accurate notes. Beginning to undertake other written reports with minimal support.
PASS	Is clear and sensitive in communicating with clients and carers understanding the importance of informed consent and confidentiality. Demonstrates care and compassion for others	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.
FAIL	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

Personal and Professional Development

Grade	Professional Suitability	Self-Appraisal	Self-Development	Initiative and Motivation	Reflective Practitioner	Safety
PASS ++	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
PASS +	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.
PASS	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.
FAIL	Unreliable or irresponsible in approach or behaviour. Inappropriate behaviour which contravenes professional code of ethics.	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.

Working Practices

Grade	Self-Management	Workload Management	Policies and Procedures	Information Handling	Inter-professional working
PASS ++	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 inter-professional context. Consults and collaborates with inter-professional team where appropriate.
PASS +	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 inter-professional working. Collaborates with inter-professional colleagues where appropriate
PASS	Usually exhibits good time management and organisational skills. Makes good use of spare time and mostly meets deadlines.	Understands need for WLM. Demonstrates ability to apply theory to practice. Mostly works efficiently and effectively. Takes decisions appropriately. Understands need for prioritising.	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 inter-professionally where appropriate. With assistance is client centred, facilitating autonomy and empowerment of individuals and communities.
FAIL	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 inter-professional context of care. Does not consult or so-operate with inter-professional colleagues

ASSESSMENT BOOKLETS



Students are responsible for keeping their booklet and sharing this regularly. They may do this via a paper copy, but it is more likely they will share a digital version you can all see and type on.



Get the students to write up their own supervision logs, **HOWEVER**, if there are specific concerns you need to make sure these are clearly documented.

Supervision Arrangements

Onsite supervision as needed. I recommend you touch base weekly.

Group supervision with university tutor approximately fortnightly.

Supervision with the long-arm supervisor weekly (BSc) or approximately fortnightly (MSc).



Strategies for successful supervision

- 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 student's 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, or record it (with appropriate permissions).
 - 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 experience to the long arm supervisor and a university tutor by way of a presentation at the end of the placement.
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Negotiating your Project Agreement (MSc students)

The student will then normally have 3-4 weeks to make specific intervention / project plans in negotiation with the practice setting and their supervisor. The following tick-list should assist the students and placement supervisor to ensure the practice experience meets the needs of the student, the service users, the service providers and the university.

Student Name:

Practice setting:

On-site supervisor:

Long-arm occupational therapy supervisor:

University tutor:

Project / Intervention Description:

	Details
Identified as need by service users	
Timings and finish dates agreed.	
Future sustainability is discussed -plans for intervention / project when practice experience ends are prepared where appropriate and agreed with service providers	
Resources negotiated and agreed with service providers	
Consent of service users sought where necessary	
Liaison with related services is pursued	
Monitoring / supervision meetings are timetabled weekly	
Date of presentation	
Proposed attendees at presentation	

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.



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.

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!

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



Options for materials

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

Options for what we write

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.

QUESTION 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

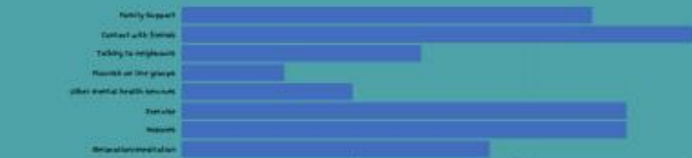
Concern around how wearing a mask increases anxiety.

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

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

Lack of clarity from the Government.

QUESTION 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)



Other:

- Being on my own, not having to go places or see people I don't want to see
- Financial savings, getting closer to nature and seeing it thrive
- I've done decorating in the house & saved more money that I would have spent on my commute & coffees etc
- Family zooms etc. Writing on Twitter and Facebook at the night handing of the pandemic by the government
- Gardening
- Return
- Staying home
- Work
- The Sunniest

QUESTION 3: PLEASE SELECT THE ANSWER WHICH BEST APPLIES TO YOU; "COVID-19 AND THE RESPONSE TO IT HAS MADE MY MENTAL HEALTH..." (28 RESPONSES)



Future Workshop Dates

- Tuesday 30th January 12-1
- Tuesday 20th February 12-1
- Thursday 18th April 3-4

All on zoom: <https://shu.zoom.us/my/sl0841>



CONTACT UNIVERSITY IF NEEDED

IF YOU HAVE ANY ISSUES OR CONCERNS ABOUT YOUR
STUDENT, PLEASE CONTACT:

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Any Questions?