

Placement profile

Names and roles Liz Hagon, Adult AHP Professional Lead



Organisations Shropshire Community Health NHS Trust

Placement overview

Split clinical and leadership placement - clinical hours within a Community Hospital Ward (predominately a pathway 2 setting, with some ring fenced stroke rehab beds). The clinical element of the placement has been face to face to reflect the ward environment. The leadership element has aimed to expose the student to the inner workings of an NHS Trust and has all been conducted virtually over MS Teams. The student has been tasked with project work to meet the needs of the Trust, producing a training presentation for corporate induction and teaching material to fit with a Trust initiative. Both will continue to be used in the coming months.

The placement has been led by the AHP Professional Lead as educator, but drawn on the skills and resources within and external to the Trust to give a rounded overview of an NHS Trust and where it sits within the local health economy. Opportunities have included: Introduction to data, national data sets, population level data, SNOMED CT Covid-19 sit reps and the process behind the data capture to meet clinical and reporting requirements. Introduction to Commissioning - 1 hour spent 1:1 with a commissioner Regional AHP Leads meeting National AHP webinars STP AHP Council meeting Internal Trust meetings, 1:1 with Director of Nursing, presentation to Quality and Safety Committee (based on one element of project work assigned to the student) STP business process mapping for a current transformation project Audit of patient outcomes through the designated stroke beds - including methods of data capture, use of an EPR to capture and link data

The placement was initially set up as 2 days clinical, 3 days leadership, but this has been modified during the placement for a variety of reasons. The ratio of clinical days to leadership days has not changed, but we have moved to a 5 day week working clinically to support patient treatment planning and progression. A timetable with links to meetings was provided for the student at the start of the placement, with the expectation of the student managing her time to ensure attendance. Watch Liz and Third year student Hannah discuss the placement in more detail in this [webinar](#)

Supervision: 1:1 but plans to complete as 2:1 going forwards, long-armed supervision and face to face, whole team supervision as well as inter-professional.

Lessons learnt:

1. The positive, engaging and adaptable attributes of the student
2. Opportunity to expose a student to different career paths, both clinical and non-clinical
3. Opportunity to enhance a students' knowledge in to the why requests and some of the data behind the asks

Top tips for others:

- The student needs to be able to self-direct their learning with guidance and direction but not continual oversight by the educator."
- "Use other members of the organisation/wider health economy to broaden the students experience"
- "Have a theme for the placement – it helped them to structure the learning around the theme"