



AHP Careers Fellowship Scheme

Funding AHP Learning and Development



Showcase ...

🔗 Aims of the Scheme

Launched in 2010, the Allied Health Professions (AHP) Careers Fellowship Scheme provides financial support for AHPs undertaking learning opportunities. Support staff and assistant practitioners have been the priority for funding, reflecting Health Boards' skill-mix agenda. Different allied health professionals, from different Health Boards, have undertaken different learning and development opportunities. All with the same purpose: to enhance the contribution that they make to the patients/service users and families who rely on AHP services across Scotland.

In these tight financial times, NES recognises that education and learning funds are precious and this ring-fenced money for AHPs of over £200k is a highly valuable asset for AHPs across Scotland.

To make sure this money is allocated wisely there is a thorough application process.

Applications may be from individuals or teams but must be supported by line managers and AHP Directors. There must be a link to the applicants' KSF and PDP and the application must set out clear links to current policy and Health Board priorities.

The scheme exists to enhance the careers of the whole AHP workforce for the benefit of people who rely on AHP services, including patients and their families.

A rounded practitioner requires skills not only in clinical expertise but in other areas, including research and using evidence base, facilitating learning in others and leadership skills.

These are described as "pillars" and the applicant is asked to show how the learning will link to one - or all - of these pillars.

Applications are considered by a Careers Fellowship Panel made up from representatives from the AHP professional bodies via the Federation Scotland, from the universities that provide AHP education via the AHP Education Forum and from the employers via the AHP Directors Scotland Group.

The Panel also includes NES staff - both AHP Programme Directors and the Educational Projects Manager with responsibility for support worker education.

There is input from non-AHPs, from a GP and a pharmacist, who provide their expertise based on the fellowship schemes that exist for these professions.



Funded Students: Case Studies



HNC Physiotherapy Support

Morag Amour, Anna Barr, Sharon Budai, Jennifer Dairon, Alison Fraser, Nicola Grant, Alison Hamilton, Leana Martin, Debbie Morrison, Joanna Muir, Angela McCuaig, Dorothy McDaid, Carol McGuire, Lynne Robertson, Georgie Skene, Alison Wilson.

NHS Highland, Lothian, Greater Glasgow and Clyde, Grampian, Ayrshire and Arran, Fife & Golden Jubilee

The Careers Fellowship Scheme has funded the 2nd cohort of students for the HNC in Allied Health Physiotherapy Support.

The course provides the theoretical underpinning knowledge for the safe practice of support staff and assistant practitioners. The course involves online study with 3 week long residential tutorials.



HNC Occupational Therapy Support

Lois Clarke, Amy Crawford, Sue Fraser, Janet Hamilton, Emma McEvoy, Elaine Michie, Elizabeth Muir, Margaret Paterson, Pauline Sullivan.

NHS Grampian, Greater Glasgow and Clyde, Fife, Lanarkshire, Highland, Tayside & Golden Jubilee

The long running HNC for Occupational Therapy Support continues to provide popular and highly relevant learning for staff working in health, social care and voluntary sector.

NHS staff have been funded via the fellowship scheme. They participate in this distance learning format as small groups of students benefit from learning with and from each other.

HNC Speech & Language Therapy Support

Linda McGlinchey, Sandra Tannock, Annie Welsh, Joan Cameron, Sue Jack, Jacqueline Hosie, Donna McNeil.

NHS Greater Glasgow and Clyde, Lothian & Lanarkshire

The second group of students for the HNC in Allied Health Speech and Language Therapy Support includes a number of NHS staff who are funded by the Fellowship Scheme. The course includes units of study that are shared with physiotherapy and radiography such as anatomy and physiology, psychology and sociology, healthcare policy alongside profession specific modules such as: Clinical Linguistics - An Introduction, Language Development and Human Communication and Clinical Decision Making and therapeutic strategies.



Open University modules

Laura Ramsey,
Clinical Assistant,
Podiatry

NHS Grampian

I have been studying “An introduction to health and social care” with the Open University and have completed a distance learning course and I feel more involved in my role. I also have a greater understanding of care plans, patient focused care and ways to support people.

I think this course has enabled me to think in a different way and improved the way I work. I have decided to progress with my learning and have decided to study Diabetes Care.

This is another course provided by the Open University and is relevant to my current post. I have registered with the Open University to provide support to other people who are undertaking the module I have completed. I have also registered with CHAIN (online network for people working in health and social care) and I plan to discuss my study and funding with my fellow clinical assistant and podiatry assistants.

Bobath and Cerebral Palsy

Lorraine Marcus,
Physiotherapy Assistant,
NHS Grampian

Grieg McHugh,
Physiotherapy Assistant,
NHS Tayside

Working within a Child Development Team, a large portion of our caseload is made up of children with Cerebral Palsy. We attended the course at the Bobath centre where we learned through classroom lectures, practical demonstrations and hands on partner working.

Lorraine reported “I have a better understanding of the types of Cerebral Palsy and how muscle tone can affect body position and movement. This gives me a greater insight into why a child on my caseload with CP moves a certain way as well as what I can do to influence that tone to assist the child in achieving a specific goal.

As the course was aimed at all types of support assistant, all therapies were covered. This was beneficial for multidisciplinary team working and gave me a good insight into the work of the Occupational therapist and the Speech and Language therapist and what their input would be with respect to a child with Cerebral Palsy.

I am grateful for the opportunity provided by the AHP Fellowship fund to attend this course and feel that it has enhanced my working practices and my understanding of what the qualified therapists are aiming to achieve with regard to the Cerebral Palsy caseload.”

Grieg added “The AHP Careers Fellowship Scheme Funding enabled me to develop my skills base, and allowed me to have a better understanding through the training from specialists in this field, an opportunity that I feel that I wouldn’t have pursued independently because of cost and financial circumstance. I have further developed my awareness of this condition, through reading and working with my peers, putting into practicing my newly learnt techniques.

I feel the more support that you have to increase your knowledge through learning by such schemes as this, can only benefit not only the individual, but the AHP service, the NHS that we are allied to and support, and to the individual patients that we care for.”

Musculoskeletal outpatient setting

Linda Halcrow,
Lucy Ward,
Physiotherapists

NHS Shetland

We received funding to complete the ‘Certificate in Spinal Manual Therapy’ in Dublin, Ireland. This course is an evidence based summary of all the leading work in spinal pathology and manual therapy fields. This was a fantastic opportunity for us as this particular course is only run in London, Australia, Oslo, Paris, Dubai and Ireland, without this award it would be impossible to self fund.

Practicing under the supervision of course tutors allowed us to become competent such that on return to Shetland we could start using our skills with immediate effect on our patients.

The course has allowed both of us to

enhance our practical and theoretical knowledge in this very specific area of medicine. We can now assess complex conditions more readily and provide specific treatments to this category of patients in a safe and appropriate manner. It has further developed our ability to modify treatments to ensure optimal outcomes for the patients.

We plan to share our experiences and knowledge and skills from this course through formal in-service training within the department and also through our input into regular clinical supervision sessions and presentation of patient case studies within our smaller musculoskeletal out-patient team.

Mental health

Donald Murray,
Community Occupational
Therapy Technician
NHS Western Isles

Through the NES AHP Career Fellowship scheme, I undertook a one week placement in mental health (I only work half day per week in mental health) and I have attended a one day conference in Edinburgh which brought together people from Mental Health and environmental organisations to learn more about well-being and the outdoors.

I was able to:

- increase my knowledge of diagnosis within mental health, symptomology and treatment and how such may affect an individual's functional ability.
- Take part in formal learning locally both on-line and delivered by person such as mental health first aid, suicide intervention training and learn Pro.
- develop awareness of role of TI in community in 7 acute mental health services, observation of initial assessment, treatment planning review & discharge to see how that differs to other areas of OT practice.
- Gain experience across mental health team and services such as CPNs, consultants, Alcohol Services, Acute staff.
- Build on group work experience to allow TI to work autonomously with individuals delivering 1-1 therapeutics interventions within a small caseload.

- Gain experience with local agencies, IE-living life, Samaritans, The Nova Project, catch 23, breathing space.
- Learning time to ensure reflection on learning needs and support throughout learning opportunity to build on existing level of interest and knowledge within Mental Health area of OT practice.
- Gain knowledge of standardized assessments used in MHOT such as cognitive assessments and functional assessments.

I will continue to build on my learnt experience and wish to gain more formal qualifications in Mental Health. It has given me a greatly improved confidence in working in Mental Health environment I now have a greater awareness all round on individuals capabilities and more importantly my own. My line manager is also happy as when staffing levels are possibly difficult in Mental Health I know & feel I can contribute to alleviate some of the pressures and assist with my improved skills and knowledge.

Derbyshire language scheme

Frances Peterson,
Speech and Language
Therapy Support Worker
NHS Shetland

I work with a number of children who have language delay. I work under the direction and guidance of Speech and Language Therapists (SLTs). The number of children I see on the caseload is gradually increasing and to enable me to provide effective therapy and support for children, I was keen to develop my skills and be more flexible and confident in planning, carrying out and modifying therapy sessions to suit each child more independently.

The Derbyshire Language Scheme (DLS) is a language intervention programme for developing children's use and understanding of spoken language. The scheme can be used with children who have very limited language comprehension or expressive ability but also children who have more advanced language skills.

Attending this DLS course has given me a more comprehensive understanding of the Derbyshire Language Scheme. I am now more confident in using the assessment

materials and selecting appropriate teaching activities for children who have language delay. I am now more able to prepare relevant resources with specific aims in mind and provide more effective therapy and support for children with language difficulties. It has also given me more confidence to better explain activities to parents and staff in schools. As a result of this I can now see more children on the caseload.

Depending on need, I will set up language groups within the Additional Support Needs Base where the Derbyshire Language Scheme can be used with children to help develop their language skills. Opportunities may also arise during the next year to use the Derbyshire Language Scheme with children who use Makaton signing. My colleagues and course tutors will provide further support and advice if required as I gain further experience using the intervention programme.



AHP Fellows at the Careers Fellowship Scheme Showcase Event 2012



PGc Medical Ultrasound

Claire Lindsay,
Imaging Coordinator

NHS Forth Valley

Due to the pressures within X-ray department with regard to general ultrasound, releasing a sonographer from obstetric scanning will allow an increase in general scan lists and a reduction in waiting times. In addition, there has been increased pressure on obstetric scanning due to the introduction on Nuchal Translucency (NT) Screening within Forth Valley and as a result the length of time taken to perform a gestational age assessment scan combined with NT scan has increased. Through the career fellowship scheme I have become trained to perform obstetric scanning and improve service delivery. Some of the learning has been self-directed learning and research as part of the programme. The other learning has been of a practical nature, by which I mean hands on scanning time.

The volume of information required to sit the written examinations has been far more than I expected and far more intense than any of my previous learning experiences. I have set aside study time every day, for research and for the writing of study notes.

In addition, I have completed a physics experiments based project. Without having set aside this time, I think it would be difficult to pass the course content due to

the volume of information required to be learned.

Having a sound understanding of the physics and technicalities of ultrasound scanning has made the practicalities of using the machine far easier. I have a sound understanding on how to use the ultrasound machines for optimal image creation, which I think would not be a good if I hadn't learned so much during my directed study time. In addition, having to study for a practical examination on Obstetric Images and Abnormalities has improved my image interpretation greatly. Also, I have been asked by my department to present the results of my physics project to the staff meeting as CPD for the staff group.

In all this has been the most challenging learning I have undertaken and my advice to people would be to consider this carefully before attempting this course. There is a huge volume of subject matter to be covered in a relatively short period of time. The personal time required is far greater than previous post graduate study I have undertaken, although it has been the most satisfying. It has been worthwhile and as a whole has given me a great foundation to start my scanning career.

Health Promotion

Lisa Walker,
Occupational Therapist

NHS Grampian

When I saw the Improving Health: Developing Effective Practice six-day course advertised I felt the agenda was relevant to my professional role. Publications that have been released, including: Towards a Healthier Scotland, Delivering for Health (2005), Equally Well (2008) etc, have discussed health promotion, it is a vast area of which occupational therapists are well placed to incorporate in practice. In 1998, Ann Wilcock highlighted the importance of participation in activities (occupations) and achieving health and well-being. The course was aimed at increasing confidence in promoting health, which I highlighted as a developmental need.

The group teaching enabled me to develop my confidence in voicing my knowledge and clinical reasoning in different areas. I learnt a lot from discussing subjects with other professionals such as: Smoking cessation advisor, dental nursing assistants, medical consultant, and public health advisors. The wide range of knowledge and skills were evident from the first day, the facilitators were able to guide and

facilitate discussions. The approach to the training made me comfortable to discuss my opinions and skills. I felt a responsibility to represent occupational therapy to the range of professionals.

I used learning logs to document my learning and reflection at the end of each day.

At the end of the course I completed a reflective essay to analyse my role as an occupational therapist and incorporating health promotion. To complete this I reflected upon a relevant case study and linked the theory I had learnt within the course and interlinked this with theory from my profession.

This course has impacted my practice: I am actively incorporating the wider community in some individual treatment plans: i.e. training carers in anxiety management – so they can use with other clients. I have been asked by my line manager to educate others on my training i.e. clinical support workers. I am now able to consider more policies and the impact within my role.



Mindfulness

Gillian Simpson,
Dietetic Assistant
NHS Fife

The learning opportunity I accessed took the form of a 5 day residential workshop. The workshop was a condensed version of a well-known 8 week Mindfulness Based Stress Reduction programme (MBSR). As such, the course was very intense, both emotionally and physically. Topics covered included – introducing mindfulness, ways of seeing, the power of being present, learning about stress, mindful communications, how can I best look after myself and staying mindful.

The week consisted of a mix of practice and theory. Set pieces of work were set which were tackled in small groups and this was

followed by feedback to the larger group. In a very short period of time, everyone on the group began to share experiences and was very open about their thoughts and feelings.

I have signed up for 4 weekend courses over the next year which will then allow me to access a teacher training course. During the next 2 years I hope to increase my use of mindfulness with clients, continue contributing to a local NHS Fife mindfulness group, be able to offer taster sessions through the group and eventually set up a mindfulness group attached to dietetics, for dietitians to refer patients to.

Vocational Rehabilitation

Patrick Gilmartin,
Occupational Therapist
NHS Forth Valley

Whilst on secondment from NHS Forth Valley to a local authority employability service, I successfully applied to the career fellowship scheme. The employability service focuses on supporting people who have health barriers get back to work and sustain their employment. Most of the patients/clients referred on to my caseload often have complex bio-psychosocial needs, yet recently there have been an increase in clients reporting physical barriers returning to work.

My previous clinical experience was in mental health but my experience of assessing an individual's physical tolerances to do their job or a job that may have been identified was limited. After researching and discussing with other experts in Vocational Rehabilitation, I identified the FCE training by Obair Associates as having the best evidence to support my learning. The purpose of the FCE is to provide a clear picture of an individual in work terms and allows practitioners to make robust and defensible rehab recommendations, to say whether someone has the ability to return to work, identifies reasonable adjustments, identifies ergonomic requirements, and assists in negotiating return to work with employers.

Due to funding training restrictions within my current board, they could not support me in this learning, so I had to look elsewhere to support my training aspirations. This is where I am very thankful to the AHP Fellowship Scheme for supporting my learning.

The area of vocational rehabilitation is now prominent within Health Policy: Quality Strategy; Health Works and Rehabilitation Framework etc. The training will support the values of these policies through both my day to day clinical practice, but also acting as a leader within my own trust to develop Vocational Rehabilitation Practice.

Within 4 weeks of doing the course, I managed to carry out an FCE that has resulted in someone returning to his job after being off work for 9 months. The FCE has allowed me to provide accurate assessment and recommendations to the line manager to support the employee's return to work. Furthermore, due to the quality of the information the line manager received from the FCE, the line manager has referred a further two cases for early intervention to support an early return to work.

Diagnostic Imaging in Musculoskeletal Services

Kerry Mavor,
Podiatrist
NHS Fife

Undertaking a Masters Module in Diagnostic Imaging for Podiatrists has enabled me to evaluate and interpret diagnostic images in the assessment of musculoskeletal pathology in the lower limb.

The main reason for undertaking this module is so that my patients are seen by one practitioner for all their treatment needs. I can request x-ray without the

need of the patient seeing their GP first and therefore provide timely and accurate treatment packages for the high risk foot in my diabetes patient caseload.

This learning experience has given me an understanding on how to interpret x-rays and also has allowed me to research into the topic and utilise different forms of information gathering.

Dementia

Margaret Barrie,
Occupational Therapy
Support Worker

NHS Greater Glasgow
and Clyde

Through the career Fellowship Scheme I participated in a three and a half day course "Meaningful Activities for people with Dementia". It involved two days on Dementia and a day and a half on Anatomy and Physiology.

What I knew about Dementia before I went on this course was gained from reading various books and what I had learned from my NHS Glasgow OT Colleagues and the Nursing Staff at a residential Care Centre. The Care centre is where I come into contact with the bulk of the residents presenting with some level of cognitive impairment.

The lecturer delivering the Dementia portion was very knowledgeable. Her delivery technique was relaxed, friendly and easily understood.

We watched a DVD called "Darkness in the Afternoon". I was deeply moved by this experience and gained an insight into how it might feel to cope with this terrible illness.

There was not a lot of time devoted to Activities as such. I myself went expecting to learn about some new innovation or technique that would make that big difference in my delivery of care. But there was none, simply a reassurance that what I was doing, mainly, was the right thing after all.

Only now I am much more confident.

The Anatomy & Physiology was delivered by a Sports Scientist. Her delivery was good, but the level of the subject material was far too advanced. This level would never be required by a Support Worker (which we all were) and indeed was far too much for us to digest and process.

There was a work book to be completed, speakers about a Computer programme to assist in life story work and a gentleman who has a diagnosis of dementia speaking about his journey completed the course.

Before attending this course I felt that I was not able to cope with the residents who were severely impaired, but I now understand that even my presence and touch may be enough to bring comfort to them.

The Course although not meeting my full expectations was well delivered, and the venue was first class. In my evaluation form I expressed my concerns. This is a fairly new course which is being developed; therefore I trust that issues raised will be taken into consideration before it is next presented.

I have compiled a reflective report, which I have presented to my Colleagues.

Ultrasound

Nicola Cranney,
Sonographer

NHS Greater
Glasgow and Clyde

I completed my MSc in General Medical Ultrasound, and the AHP Career Fellowship Scheme made a contribution to funding my studies on condition that I demonstrated impact for assistant practitioners.

My research was to investigate how sensitive ultrasound was in comparison with cystoscopy at detecting bladder tumours. I also evaluated whether two diagnostic tests should be carried out when one may be sufficient and consequently recommendations were formulated to improve patient care.

It was hoped that this study would prompt a change in protocol if the findings demonstrated that ultrasound was less sensitive. Despite the fact that the study was not statistically significant the results did suggest that ultrasound was inferior to cystoscopy when detecting intravesical pathology. Consequently, it was thought that the diagnostic process for evaluating the bladder was inefficient and based on my findings a decision was made by

the Consultant Radiologists, Consultant Urologists and Consultant Sonographer at the study hospital, not to scan the bladder when carrying out a renal tract examination on a patient who has been referred by the one stop haematuria clinic as they will most certainly go on to have the superior test of cystoscopy. This will be beneficial to the diagnostics service as clinicians will not have to wait on patients filling their bladders if they attended unprepared or carry out a post micturation scan and therefore increase throughput.

Following the completion of the course I am able to design a research project; confidently utilise a range of search strategies to retrieve relevant literature; critically appraise published literature; distinguish between different research methodologies and discuss components that comprise each method. My study required ethical approval and therefore I now have a critical understanding of the role and procedures involved in gaining ethical

continued over...



Ultrasound

Nicola Cranney,
Sonographer

NHS Greater
Glasgow & Clyde

approval from the Health board prior to collecting my data. My study also required me to understand how to formulate research questions and set relevant hypotheses. The course also taught me how to select descriptive and inferential statistics to apply to analyse quantitative data.

Having completed my Masters level education I am now able to undertake increased Ultrasound roles which were previously been designated to Radiologists allowing them to focus on other medical duties.

My previous radiographic duties are now performed by one of two trained Assistant Practitioners within our department and therefore helping with the implementation of the Four-Tier Model within Radiology without detriment to the service provided by the Radiology Department.

I would encourage any members of my department to carry out post graduate education as not only did it enhance my continuing professional development but I gained many skills which I will be able to transfer to my area of practice.

Interested?...

The scheme opens for applications every year in December with monies available from the start of April and in summer in time to support courses starting in September.



For more info visit:

<http://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/career-fellowship-scheme.aspx>

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