

AHP PrBL Recovery



Workstream Report 2023

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Executive Summary

Aim and Background

Covid-19 resulted in disruption to Allied Health Professions (AHP) Practice-based Learning (PrBL). The subsequent reduced capacity risked delayed graduation and workforce supply, increasing pressure on services. Scottish Government funding to address this disruption allowed NHS Education for Scotland (NES) to employ 14 (7.2 whole time equivalent) AHP Practice Education Leads (PELs) for 18 months to lead twelve recovery projects. 10 projects had a specific uni-professional focus, and 2 additional projects looked at infrastructure and cross / third sector placements.

This work is essential to ensure that students have a high quality and positive learning experience. Through the development of modern, diverse, and sustainable PrBL opportunities we will continue to have a new generation of AHP graduates fit to practice and to gain employment across all sectors in Scotland.

Findings and Successes

Scoping identified that access to resources, training opportunities, protected time, and support from managers and peers were key enablers to allow practice educators to develop their knowledge, skills, and confidence in supporting AHP PrBL. In total, the projects created over 50 new AHP PrBL training opportunities, over 30 new resources, 14,000 hours of new PrBL placements, and networks to support and develop PrBL in a modern, diverse, and sustainable way. Examples of key successes are within [Table 1](#) in the main report. A summary of the key focus, impact, and recommendations from each individual AHP PrBL Recovery project can be found within [Appendix 1](#).

Recommendations

To help sustain and develop the significant work that has been done the following recommendations are made.

1. Widely share the AHP PrBL recovery reports and resources
2. Identify and utilise clear support mechanisms to continue to build momentum
3. Continue to develop the AHP PrBL Virtual Community
4. Implement a national AHP PrBL campaign
5. Continue to develop and disseminate PrBL training, how-to sessions and resources
6. Deliver long-arm supervision robustly
7. Continue to develop data collection mechanisms to measure and demonstrate impact
8. Embed PrBL and PrBL resources in the national AHP PrBL infrastructure
9. Broaden the use of AHP profession specific approaches in other areas of NES work

Further detail on these recommendations can be found within the [recommendations](#) section of the main report.

Conclusion

There is strength in developing and utilising a wide range of opportunities including new models and methods of delivery, support networks and communities, and by increasing access to resources and training opportunities.

There continues to be the need for an ongoing focus on AHP PrBL, and collaborative working is key to provide high quality opportunities that are modern, diverse, and sustainable. Ongoing investment and capacity to maintain, scale up and spread the outcomes will be required.

Section One: AHP PrBL Recovery Workstream Report

1.1 Introduction and Background

The Allied Health Professions (AHP) Practice-based Learning (PrBL) workstream aimed to support and develop modern, diverse, and sustainable PrBL opportunities. This work is essential to ensure that students have a high quality and positive learning experience, and that we continue to have a new generation of AHP graduates fit to practice and to gain employment across all sectors in Scotland. The workstream was comprised of twelve projects. Section One of this report shares an overview and evaluation of the whole workstream. Individual project reports can be found in Section Two of this report.

PrBL is the clinical or practical experience integral to AHP education and preparation to enter the workforce (HCPC 2021 p38). The onset of COVID-19 saw significant disruption to AHP PrBL across Scotland which exacerbated an already fragile system. The Higher Education Institutes (HEIs) identified PrBL deficit across AHP programmes caused by the pause of PrBL placements for most professions. There was a loss of up to 40% of AHP PrBL placements due to very limited or no placements from April-August 2020. The subsequent reduced capacity risked delayed graduation and workforce supply, increasing pressure on services.

In April 2021 Scottish Government funding to NHS Education for Scotland (NES) and the HEIs provided a timely opportunity to develop projects and infrastructure to support recovery of and build capacity for AHP PrBL. The Scottish Government funded 14 AHP Practice Education Lead (PEL) posts (7.2 whole-time equivalent) for 18 months within NES. These posts had a specific remit to engage with the individual allied health professions (uni-professional), and to support PrBL recovery from the issues exacerbated during the Covid-19 pandemic. A 0.6 whole-time equivalent (WTE) senior educator ensured coordination of the posts and provided support and supervision.

The 14 AHP PELs were employed ranging from 0.2 to 1.0 WTE. The allocation of hours considered the size of the profession and the deficit of placements. A breakdown of this information can be seen in [Appendix 2](#).

The AHP PELs undertook 12 specific projects (see Section Two for detail) – 10 of which covered 14 professions, and 2 additional projects focused on infrastructure and cross / third sector placements. The uni-professional roles were the first with a singular focus on this scale within the NES AHP team. This allowed in depth scoping to be undertaken throughout Scotland to identify specific barriers, opportunities, and test change ideas supporting PrBL within 14 individual allied health professions and across sectors. The posts were fully recruited to by the end of October 2021 and ran until the end March 2023.

Building AHP PrBL capacity has been a priority for many years. Four consensus statements were agreed at the 2018 national Growing Capacity event by stakeholders involved in AHP PrBL. These statements are the focus for ongoing work across Scotland to provide quality, modern, diverse, and sustainable PrBL opportunities for all students in all AHP professions across all sectors of health and social care. The statements can be seen in Figure 1 below.

The consensus statements

1. All AHPs have a responsibility to support practice-based learning – regardless of their grade, occupational role, practice setting or specialism.
2. Practice-based learning can occur in any environment, setting or specialism.
3. A wide range of student supervision models can be used to deliver, and support practice-based learning.
4. Resources to support practice-based learning must be embedded in service plans and our infrastructure to meet the needs of everyone involved.



Figure 1: AHP PrBL Consensus Statements

These consensus statements are in accordance with guidance from the Health and Care Professions Council (HCPC) which states “in addition to a sufficient quantity of PrBL placements, AHPs of the future need to have access to a range of PrBL experiences to ensure they are prepared for working in new ways and in settings across health, social care, voluntary and private sectors” (HCPC 2021 p39).

The NES AHP PrBL recovery projects offered increased capacity to identify and develop opportunities, and build on existing work, in collaboration with the HEIs, Board AHP PELs, practice educators and other key stakeholders.

1.2 Methods and Approach

The NES AHP PELs undertook a period of induction to orientate them to their roles and the AHP PrBL landscape. In addition to local NES induction and mandatory training, this included reviewing information on facilitation of learning, AHP support and supervision, different models and methods of PrBL delivery, and AHP PrBL governance documents including the Quality Standards for Practice Placement (NES 2008).

As part of the induction process, each PEL undertook a personal learning needs analysis to identify opportunities for development and further training which were discussed at support and supervision sessions and captured within the Turas Appraisal process. The NES AHP PELs undertook training in impact assessment and measurement and change and project management. Monthly progress meetings and the use of project management tools supported implementation. Further information on the key processes undertaken can be found in [Appendix 3](#).

Scoping identified many stakeholders who were included within the communication strategy, and vitally who engaged in the projects. This included, but was not limited to, Board AHP PELs, Practice Education Coordinators, Practice Educators and the AHP workforce; the AHP Professional Bodies, students and AHP Directors; and colleagues from the HEIs, national and Board PrBL groups, Scottish Government, and cross / third sector organisations.

An AHP survey on student practice education aimed to collect baseline data and determine key enablers and barriers to providing PrBL opportunities. The AHP PELs within dietetics; physiotherapy; podiatry; prosthetics and orthotics; radiography; and speech and language therapy chose to utilise the survey and it was sent out in June 2022 to clinicians, service leads and managers. A range of other scoping mechanisms were utilised by the AHP PELs including but not limited to individual discussions, focus groups, and

stakeholder events. A high level of congruity was seen in the identified facilitators and barriers to practice-based learning across professions, in addition to areas for uni-professional focus. Scoping identified that access to resources, training opportunities, protected time, and support from managers and peers were key enablers to allow practice educators to develop their knowledge, skills, and confidence in supporting AHP PrBL.

A summary of findings from the survey is displayed in [Appendix 4](#). These findings and others identified through wider scoping discussions, influenced the subsequent actions and recommendations; and provide baseline data for use in future evaluation. The AHP PELs designed the projects based on findings from their scoping activities and uni-professional needs that were specifically identified.

Each of the 12 AHP PrBL recovery projects established at least one stakeholder group, or mechanisms to link in with existing groups. Terms of reference were agreed, and individual action plans were formulated to address barriers, and to support and develop AHP PrBL opportunities.

For each project there has been a focus on one or a combination of the following which align to the consensus statements:

- Increasing delivery of quality practice placements compared with pre-pandemic delivery
- Increasing the number of individuals supporting an AHP Practice Education experience compared with pre-pandemic placement delivery
- Increasing PE (new and existing PEs) confidence, knowledge, and skills
- Increasing breadth of delivery: new areas, cross / third sector, NHS and non-NHS PrBL settings
- Increasing the use of different models to support AHP PrBL placements
- Increasing the range and number of resources, experiences, and training opportunities available to support AHP PEs

1.3 Findings and Discussion

By 31st March 2023 new PrBL placements, training opportunities, resources, and networks were created to support and develop PrBL in a modern, diverse, and sustainable way.

Examples of key successes are in Table 1 below and further successes are in [Section Two](#).

Table 1: Examples of key successes that occurred across the AHP PrBL recovery workstream

Development	Successes
<p>14,000 hours of new AHP PrBL placement opportunities</p> <p>Over 400 new placement weeks / approx. 14,000 hours created and utilised; many occurring in new settings and utilising different models and methods of delivery.</p> <p>Further placement weeks were created but not utilised but will be opportunities for the future. Support also given to restart existing opportunities or deliver in different ways.</p>	<ul style="list-style-type: none"> • Trial of the first ever peer-assisted learning (PAL) placement in radiography • Increased PrBL capacity through use of PAL and exploration of new PrBL settings in speech and language therapy • Use of Peer-enhanced ePlacements (PEEP), and PAL in orthoptics • Delivery of a digital project-based PAL placement within the NES AHP Practice Education team • Five cross / third sector organisations participated in pilots as part of the cross / third sector project, providing learning that can be widely applied and plans in place to support students from a range of AHP professions
<p>Over 50 new AHP PrBL training opportunities</p> <p>over 50 new training sessions for AHP PEs</p>	<ul style="list-style-type: none"> • Prosthetics and orthotics sessions for practice educators on preparing for placements, the range of PrBL models, and blended models • Solution focussed myth busting PrBL workshops developed, piloted, and delivered in-person and online as part of the occupational therapy (OT) project • For paramedics, a how-to webinar and PE training days delivered in collaboration with the HEIs • 19 Peer-assisted learning (PAL) train the trainer sessions (8 AHP and 11 Uni-Professional workshops) • Sharing the standardisation of terminology and process to become a PE in Radiography
<p>Over 30 new AHP PrBL resources</p>	<ul style="list-style-type: none"> • A cross / third sector framework for creating, developing, and sustaining placements • A resource pack, and promotional video to support PrBL for arts therapies trainees and PEs

<p>Over 30 resources to support practice educators and students; in addition to communications and updates</p>	<ul style="list-style-type: none"> • Promotional material to help to inform student choices around podiatry placement areas • Development of a module and digital resources promoting dietetics PrBL in new specialisms • A placement mapping process document, and a storytelling resource sharing a range of case studies and examples of using different PrBL models in physiotherapy • To support career and professional development and discussion, a PE framework developed within the infrastructure project • New PAL resources including the development of an animation, videos, and case studies • Development of the AHP PrBL pages on Turas Learn building on key content from the previous Knowledge Network AHP Practice Education Community of Practice • Development of AHP PrBL Recovery pages within the AHP Turas Learn site to showcase project updates and new resources • Development of an AHP PrBL flashcard resource to support practice educators providing a placement preparation checklist, information on different models and methods of delivery, and highlighting relevant training and resources: Flashcards • Hybrid conference materials / learning stacks: Learning Toolbox (ltb.io)
<p>Networks, drop-in clinics, and support for practice educators</p>	<ul style="list-style-type: none"> • Development and launch of an AHP PrBL Virtual Community enabling engagement and support across professions Scotland-wide: AHP PrBL Virtual Community Sway • Podiatry pilot and development of drop-in sessions to provide peer support and the opportunity to problem solve and share learning • Paramedic PrBL Teams channel developed and regular keeping in touch sessions set up for Board AHP PELs • Launch of the Scottish OT Practice Educator Network • Physiotherapy placement allocation: coordination of request and return of placement offers

Evaluation of the AHP PrBL Recovery workstream was completed in March 2023 and aimed to determine the impact of this work and key learning points moving forwards. A Questback survey received 98 responses, and its findings are summarised in [Appendix 5](#).

As part of the evaluation, in addition to the Questback survey, four focus group sessions were undertaken (30 participants in total). Similar themes came from these discussions:

- The benefit of collaboration was explored including the shared focus with the HEIs and increased representation of the smaller allied health professions
- It was acknowledged that there may have been some repetition / duplication of activity and that organisations may have differing priorities
- There was agreement that the projects increased opportunity to achieve the AHP PrBL Consensus Statements although this requires continued development and a requirement to continue to embed resources over time
- Participants highlighted the projects have raised awareness of individuals' responsibility to support PrBL and increased discussion. There is evidence of increased engagement to explore and discuss different models particularly PAL, and consideration of more diverse settings including the development of cross / third sector opportunities
- The actions required to continue this work aligned to the Questback survey findings: continued communication and collaboration, dedicated resource / capacity, access to resources, the importance of embedding learning and developments in practice, and sharing information widely
- It was recognised a uni-professional focus allowed a targeted approach with additional capacity for profession specific development but that there is benefit in shared learning and achieving a balance between uni-professional and AHP approaches

A summary of impact can be found below, further information is available for each project within Section Two of the report and [Appendix 1](#).

Engagement Impact

- Engaged: 11 project stakeholder groups formed plus 5 Paramedic project support groups. Terms of reference and action plans agreed
- Informed: Stakeholders accessing AHP PrBL Recovery workstream updates: over 15,000 views on Twitter, over 2500 views of the AHP PrBL pages on the Turas Learn site, and over 750 views of AHP PrBL Recovery videos on Vimeo.com
- Over 265 members have joined the new AHP PrBL Virtual Communities
- 333 attended the AHPs In Scotland: Be Appreciated, Be Connected, Be Inspired event in March 2023 (193 attended virtually and 140 attended in person). There have been 1079 views of the learning stacks from the event

Educational Impact

- Increased knowledge, awareness, and confidence documented within polls and within evaluation of training opportunities and resources
- Statements of intent / pledges from stakeholders to utilise different models and methods of delivery

Performance Impact

- New PrBL opportunities created through utilisation of different models and methods of delivery, new settings, and new PEs
- Positive PE and student testimonials as shared in Section Two and learning stacks: [Learning Toolbox \(ltb.io\)](https://www.ltb.io)

Service Impact

- Reduced deficit in placement hours as shown in Red, Amber, Green (RAG) data*
- Increase in capacity: over 400 new placement weeks / approx. 14,000 hours created and utilised, resulting in no student failing to graduate due to lack of placement
- Positive PE and student testimonials
- New posts created including an Advanced Practice OT post in practice education within one health Board

*Due to the rapid need to gather data during Covid-19 this data is not subject to adherence to <https://turasdata.nes.nhs.scot/about-our-data-and-reports/data-sources-and-quality-assurance/>

1.4 Recommendations and Conclusion

To help sustain and develop the significant work that has been done the following recommendations are made. The allocated timeframes to each recommendation reflect time, financial and resource constraints. These are outlined below:

- Short – as soon as practicably possible and within 1 year
- Medium – 1 to 3 years
- Long – 3 years plus

Table 2: AHP PrBL Recovery Workstream Recommendations

No.	Recommendation	Focus / Rationale	Lead Agency / Agencies	Indicative Timeframe	Funding requirements
1	Widely share the AHP PrBL recovery report and resources	<ul style="list-style-type: none"> • Focus: Promotion of these materials and the delivery of bitesize interactive sessions • Rationale: Widen access to reduce duplication, share, and develop learning across all Allied Health Professions and throughout Scotland 	<ul style="list-style-type: none"> • The AHP PrBL Operational Collaboration (APOC) • The NES AHP Practice Education Team 	Short	Business as usual (BAU) Within current financial envelope / operational plan
2	Identify and utilise clear support mechanisms to continue to build momentum	<ul style="list-style-type: none"> • Focus: Develop support mechanisms which may include continuation of stakeholder groups and / or utilising wider networks and virtual communities 	<ul style="list-style-type: none"> • The NES AHP Practice Education Team 	Short	BAU Within current financial envelope / operational plan

No.	Recommendation	Focus / Rationale	Lead Agency / Agencies	Indicative Timeframe	Funding requirements
		<ul style="list-style-type: none"> • Rationale: Continuous collaboration between key stakeholders to reduce duplication, share, and develop learning 			
3	Continue to develop the AHP PrBL Virtual Community	<ul style="list-style-type: none"> • Focus: To increase and broaden membership and to expand the functions and resources available. Members from all Allied Health Professions and across Scotland encouraged to share and showcase resources and examples of good practice, offer support and networking opportunities • Rationale: To create a one-stop shop to support all involved in AHP PrBL 	<ul style="list-style-type: none"> • NES AHP Practice Education Team • AHP PrBL Virtual Community Core Development Group 	Short	BAU Within current financial envelope / operational plan
4	Implement a national AHP PrBL campaign	<ul style="list-style-type: none"> • Focus: To promote the AHP PrBL consensus statements and how to become a practice educator (PE), raising awareness of the values and benefits of PrBL • Rationale: To increase PE capacity and obtain engagement at all levels 	<ul style="list-style-type: none"> • NES AHP Practice Education Team 	Short	BAU Within current financial envelope / operational plan
5	Continue to develop and disseminate PrBL training, how-to sessions and resources	<ul style="list-style-type: none"> • Focus: To promote and support the use of a range of PrBL models/methods of delivery and emerging learning needs in a range of settings 	<ul style="list-style-type: none"> • NES AHP Practice Education Team • HEIs 	Short/Medium	Requires additional capacity / funding (see recommendation 8)

No.	Recommendation	Focus / Rationale	Lead Agency / Agencies	Indicative Timeframe	Funding requirements
		<ul style="list-style-type: none"> • Rationale: To support PEs and other key stakeholders to offer modern, diverse, and sustainable PrBL opportunities that will develop the future workforce 			
6	Deliver long arm supervision robustly	<ul style="list-style-type: none"> • Focus: To develop mechanisms to support and extend the use of long arm supervision within AHP PrBL • Rationale: To broaden PrBL opportunities and possible AHP roles across a range of sectors, realising the valuable contribution these settings and AHP roles can offer 	<ul style="list-style-type: none"> • NES AHP Practice Education Team • HEIs 	Medium	Requires additional capacity / funding (see recommendation 8)
7	Continue to develop data collection mechanisms to measure and demonstrate impact	<ul style="list-style-type: none"> • Focus: To agree and develop data sets and a quality management system that meets AHP requirements • Rationale: Robust data, reporting mechanisms that are fit-for-purpose, and undertaking regular evaluation processes to measure progress and utilise opportunities for continuous development 	<ul style="list-style-type: none"> • NES AHP Practice Education Team • NES Nursery Midwifery and AHP Directorate 	Medium / Long	Requires additional capacity / funding 0.6 WTE Band 8A agreed for Year 1
8	Embed PrBL and PrBL resources in the national AHP PrBL infrastructure	<ul style="list-style-type: none"> • Focus: To increase access to and engagement with PrBL and PrBL resources across all Allied Health Professions and throughout Scotland. 	<ul style="list-style-type: none"> • NES AHP Practice Education Team 	Long	Requires funding 4.0 WTE* Band 7 recurrent funding

No.	Recommendation	Focus / Rationale	Lead Agency / Agencies	Indicative Timeframe	Funding requirements
		<p>To support the integration of the PE Development Framework and obtain engagement at all levels</p> <ul style="list-style-type: none"> • Rationale: To support PEs and other key stakeholders to offer modern, diverse, and sustainable PrBL opportunities that will develop the future workforce 			*0.4WTE funding to March 2024 has been agreed to support challenges faced by Orthoptics
9	Broaden the use of AHP profession specific approaches in other areas of NES work	<ul style="list-style-type: none"> • Focus: To support wider uni-professional educational priorities, including but not limited to support for international recruits, and continuing professional development needs • Rationale: To recognise collective strength as an AHP group, but also the uniqueness of the different allied health professions. To increase representation and the opportunity for further engagement, development, and succession planning 	• NES AHP Team	Long	Requires funding 3.2 WTE Band 7 recurrent funding

In conclusion, there continues to be the need for an ongoing focus on AHP PrBL and collaborative working is key to provide high quality opportunities that are modern, diverse, and sustainable. There is strength in developing and utilising a wide range of opportunities including new models and methods of delivery, support networks and communities, and by increasing access to resources and training opportunities. AHPs across Scotland continue to demonstrate commitment to supporting and developing these opportunities. Despite the positive impact that these posts have had there is recognition that 18 months to realise the kind of whole systems change required was unrealistic and ongoing investment and capacity to maintain, scale up and spread the outcomes will be required.

This work has allowed collaboration on a scale not seen before, and we are at the start of seeing a change in culture that will be vital in supporting our future AHP colleagues to develop the skills required to enter the workforce in an ever-changing landscape.

Further information

Learning stacks sharing workstream and project resources: [Learning Toolbox \(ltb.io\)](https://ltb.io)

Section Two: AHP PrBL Recovery Project Reports

2.1 AHP Practice-based Learning (PrBL) Recovery: Arts Therapies 2023

Situation/Background

This project is part of an NHS Education for Scotland (NES) programme of Allied Health Professions (AHP) Practice-Based Learning (PrBL) Recovery commissioned and funded by the Scottish Government. As detailed in the broader project context, there was a need to focus on PrBL Recovery following the COVID-19 Pandemic. Whilst the arts therapies PrBL opportunities weathered the Covid-19 pandemic in a better position than larger AHP professions in terms of number of placements allocated, the quality of learning experiences was affected as reported by trainees (students), practice educators (PEs), and potential employers.

For clarity, the arts therapies comprise a group of therapies which use different creative modalities within their therapeutic process. These are art psychotherapy, dramatherapy, dance / movement therapy, and music therapy. Using the term arts therapies applies to all of these professions and using the term art therapy refers just to one profession.

Arts therapies data on the Turas dashboard is incomplete however it should be acknowledged that NHS Lothian is documented as having the highest wholetime equivalent (WTE) arts therapies workforce (21.9 WTE documented on 31 Dec 2022), with other NHS boards documented on 31 Dec 2022 as employing a single figure WTE or no arts therapies workforce at all.

Task

Scoping activities carried out by the arts therapies PEL from September 2021 – August 2022 identified two key themes which refined our objectives:

- There are benefits to developing clearer guidance and quality assurance around Arts Therapies trainees' PrBL experiences. PrBL is an essential prerequisite for workforce planning and service development.

- There is a need to increase the competence and confidence of potential PE and PrBL providers.

Original project objectives included:

- Creation of new opportunities for PrBL in new settings utilising different models, i.e., Long-Arm Supervision placements
- Development of PrBL resource package
- Collaboration with Queen Margaret University to create video advertising Arts Therapies placements to attract new PEs

Through further stakeholder engagement with a range of AHPs a key theme emerged from these discussions:

- Non-Arts Therapists were wary, feeling the arts therapies professions were very different from their own. They did not feel the one-day PE training was sufficient, and identified needing more support throughout the process
- Arts Therapists felt becoming a PE was something done later in their careers and lacked confidence in their skills
- Trainees reported feeling unprepared for placements within NHS settings and that the responsibility fell on the PrBL setting to provide additional context

There was general consensus more guidance and support was required through the creation of resources to support learner preparedness for placement, and as a source of information to enable facilitation of PrBL.

Table 3: Arts Therapies Actions

Actions	Intervention	Developments
Understand PrBL needs	<ul style="list-style-type: none"> Created a projection of arts therapies PrBL requirements over the next 3 years to better understand projected scope for PrBL needs in the future 	<ul style="list-style-type: none"> Projections indicate 174 places required in 2023/24; 189 places in 2024/25; and 204 places in 2025/26
Understand current PrBL experiences	<ul style="list-style-type: none"> Identified any gaps in the induction/PrBL support processes within NHS Lothian (largest arts therapies PrBL provider) Established opportunities upon which to focus 	<ul style="list-style-type: none"> Results supported the identified need for a comprehensive resource package to support both PE and trainees in PrBL
Develop PrBL Resource Pack	<ul style="list-style-type: none"> Initially created to meet the needs of the sample group, i.e. trainees from NHS Lothian placements, with aim of wider dissemination following testing Resource package refined and confirmed for use with non-arts therapies and arts therapies PEs 	<ul style="list-style-type: none"> Resource distributed to focus groups comprising course leads, NHS Scotland arts therapies representatives; and other AHPs including physio, OT, dieticians Resource package undergoing trial usage in NHS Lothian and NHS Borders
Stakeholder Group formation	<ul style="list-style-type: none"> Group established with membership composition: NES arts therapies PEL (Chair), NHS Arts Therapies Heads and Leads group representative, HEI representative, Arts Therapies PrBL provider representative, and Arts Therapies new graduate representative (maximum 2 years post-qualification). 	<ul style="list-style-type: none"> Terms of Reference agreed Meetings ongoing
Animation development	<ul style="list-style-type: none"> Video created introducing potential PE to the arts therapies detailing what to expect when supporting PrBL 	<ul style="list-style-type: none"> Animation undergoing first round focus group feedback and is in second draft Animation video agreed as introduction with shorter live

Actions	Intervention	Developments
		<ul style="list-style-type: none"> interview style videos answering specific questions to be developed beyond project completion
Long-Arm Supervision	<ul style="list-style-type: none"> Initial plans were made for long-arm supervision placements It should be noted that post graduate AHP pre-registration students are not eligible to claim travel costs for placements. This is a long-standing issue that NES continues to raise 	<ul style="list-style-type: none"> Some resistance from the HEIs to mandate placements that require travel beyond the central belt Opportunity to review and widen the use of long arm supervision in the future
Futureproofing	<ul style="list-style-type: none"> Making sure the resources are ready and available for when/if PrBL opportunities become necessary/available in wider NHS Scotland placements 	<ul style="list-style-type: none"> Continued Stakeholder Group investment

Impact

Educational Impact: Key findings from original scoping exercises with 2022/23 trainee cohort highlighted the need for resource development as outlined above. Open ended questions about what might be included in future iterations and what could be done differently informed the content of the current resource pack. Once completed, the resource pack was sent out for 3 rounds of focus group testing.



Figure 2: Confidence to be a practice educator to an arts therapies trainee

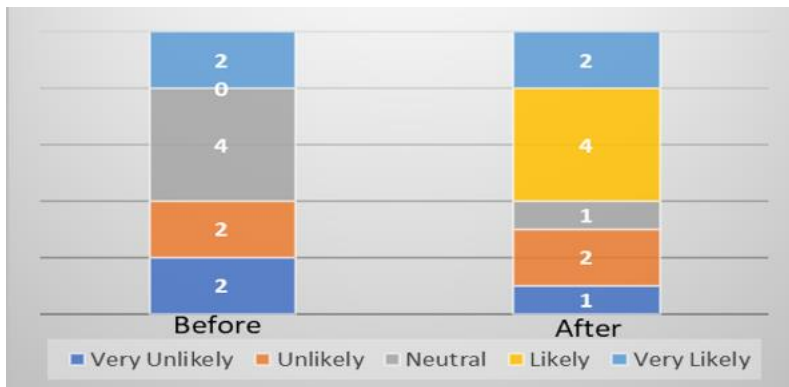


Figure 3: Likelihood of supporting PrBL for arts therapies trainee

Figures 2 and 3 identify changes in confidence to and likelihood of supporting an arts therapies PrBL placement before and after reviewing the resource. 80% of participants reported feeling more likely to support arts therapies PrBL, while 60% reported feeling more confident to do so.

Performance Impact: PEs who have used the resource report an increased confidence, and awareness of the requirements for trainees on placements. The resource has been used to support induction, and lunch and learn sessions and is currently being trialled in NHS Borders.

“I was running the induction day for our trainee cohort and I found it really useful to refer to the document, which kept me on track for what I needed to include for them and helped to structure the induction day.”

“It would help prepare me to support arts therapies students. It might be useful for non-arts therapies AHP PEs to know that long arm supervision would also be provided by an arts therapist.”

“Here in NHSL [Lanarkshire] we have no formal art therapy and are keen to develop – might be an interesting way to introduce”

“This was a valuable resource to offer consistent and relevant input helpful to students across placement settings. I will use again in the future, particularly at the beginning of a student placement as a helpful framework.”

Engagement Impact: The stakeholder group agreed their terms of reference in which biannual meetings are indicated. Trialling and testing of the resource has begun in NHS Lothian and NHS Borders, and this should continue to be measured.

Organisational Impact: Two of three of the original outcomes were achieved. It became clear that the initial aim of long arm supervision placements in more diverse settings was not attainable within the time frame of the project, but this is something for the longer term, and included within the recommendations.

There have been clear benefits of having an arts therapies PEL in terms of increased visibility of the arts therapies, within NES, the wider AHP networks, and provision of opportunities for learning about the arts therapies within these.

Learning/Recommendations

The stakeholder group is pivotal to the success of ongoing PrBL development and quality assurance. With the terms of reference agreed the recommendations ahead lie largely with measurement.

1. The PrBL resource should be trialled with the 2023/24 cohort of arts therapies trainees and its impact measured.
2. The arts therapies PE animation is to be launched and its impact measured to ascertain efficacy in attracting new PEs to the arts therapies.
3. New and existing PEs from within the arts therapies should join the PrBL Virtual community for ongoing support.

4. Findings from existing long arm supervision placements within NHS Lothian should be collated from this year and 2023/24 when the PrBL resource should be in use. In time, these long arm supervision placements should be trialled across NHS health boards and beyond.
5. Further work to develop networks with current practicing arts therapists in NHS Boards around Scotland to unite disparate voices from within the field.
6. Key contact links to be maintained between stakeholder group and NES.

Lots of exciting developments have been made and there is an aim to build on this over time. Further information is available here: <https://api.ltb.io/show/ABSVK>

2.2 AHP Practice-based Learning (PrBL) Recovery: Dietetics 2023

Situation / Background

The purpose of the project was to support the restoration of PrBL capacity which had been impacted by the cessation of placements during the early stages of the Covid 19 pandemic.

Purpose

To build on and support further development of dietetic PrBL opportunities across Scotland.

In Scope:

- In scope for the purposes of this project was any work around PrBL that could be influenced within the limited time frame of the project and which was able to be influenced by board practice educators (PEs) or the Dietetics Practice Education Lead (PEL).

Out of scope:

- Student funding, accommodation issues, the current allocation system and the student portfolio.

Task

Stakeholder Group

PELs from every health board in Scotland, Higher Education Institute (HEI) representatives from those delivering pre-registration dietetic training in Scotland, and the British Dietetics Association (BDA) Policy officer for Scotland were invited to attend the initial stakeholder meeting in April 2022. NHS Education for Scotland (NES) and board PELs were also invited to provide perspective from their understanding of the project. In addition, the project lead attended and gave presentations at the Scottish Dietetic

Leaders Group and the BDA Scottish Board and invited attendees from these groups. Attendees were asked to invite anyone with an interest in dietetic PrBL, to encourage diversity of voices and opinions.

Scoping

- A survey of dietetic PEs was carried out
- Stakeholder discussions
- Scoping of available resources and clarification of placement allocation figures

Key findings

Responses from the dietetic PE questionnaire (n=71 responses) suggested that:

- PEs felt supported in their role by managers and colleagues and were confident in supporting students.
- For future development, respondents suggested that more profession specific training would be welcome, more help with supporting underperforming students, and there was a desire for learning around different placement models.

The stakeholder group were positive about aspects of dietetic PrBL. These were:

- Digital solutions such as NHS NearMe have been well used and are now embedded in systems, to the benefit of students, patients, and dietetic services.
- Flexibility in placement delivery has been well received.
- The reinstatement of 12-week placements for Placements B and C was felt to be positive.
- Students have been engaged and motivated.
- There has been more collegiate working and support for PEs from HEIs.
- There was recognition that there is still a need to increase capacity, and that students could be better prepared for the challenge of working with different teams or individuals.

Change ideas for addressing these issues were:

- Support with peer-assisted learning (PAL) implementation and troubleshooting
- Exploration of cross / third sector placements to increase capacity
- Support to develop digital resources in specialist areas
- Support for reviewing PrBL timetables/structure

Aims and objectives

The overall project aim was to increase the number and diversity of dietetic practice placements offered across Scotland, and the objectives to meet this aim included:

- Diversifying dietetic student PrBL opportunities across Scotland
- Increasing numbers of practice placement weeks offered by the workforce across Scotland
- Further developing communication and collaboration between stakeholders
- Developing and raising awareness of a range of accessible resources supporting PEs to confidently deliver diverse and modern placement experiences
- Building capacity and capability within the dietetic workforce in the delivery of PAL placements

Actions/outputs

- Developing digital resources in specialist areas: short life working group formed and the module has been planned. The resource will be written as a Microsoft SWAY and reviewed by a user group.
- Project lead undertook the 'Train the Trainer' training for PAL placements and co-facilitated 5 interactive workshops. Dietitians attended all of the multi professional PAL workshops which were delivered over summer 2022, and a uni-professional dietetic PAL workshop was delivered in October 2022.
- Worked with the board PEL in NHS Lanarkshire to plan a workshop looking at the PrBL offer within the Board. Following this, the PrBL timetable within the Board was modified and the first students undertook the placement in autumn 2022, which has been evaluated.

- The possibility of PrBL opportunities within a cross / third sector organisation was explored with the centre chief executive officer, PE lead from NHS Lothian, cross / third sector PEL, and HEI representative. A site visit was carried out. It was felt that there was insufficient governance in place to support a PrBL opportunity in the short term, but that this was a possibility with additional support. By March 2023 guidance will be available for PEs on facilitating, planning or supervising a cross / third sector dietetic placement in Scotland.

Impact

Engagement Impact

- Questionnaire distributed to dietetic practice educators (n=71 responses)
- 35 dietitians attended either uni or multi-professional PAL workshops
- The stakeholder group met 5 times between April 2022 and March 2023 with attendance from >50% of territorial boards as well as NES PELs, board PELs and the BDA Policy Officer
- Student evaluation of placement re-design in NHS Lanarkshire

Education Impact

- Dietitians attending the interactive PAL workshop reported increased knowledge and confidence to deliver a PAL placement
- Students undertaking the placement in NHS Lanarkshire reported increased confidence in comparison with their previous practice placement

Performance Impact

- Action plan developed for sustainability and increased collegiate working across HEIs and Board PEs

Learning / Recommendations

- Guidance for cross / third sector placements could be built on and strengthened with student/PE stories.

- PAL should be embedded and promoted within the profession so that it becomes business as usual.
- The digital module for specialist areas could be developed further on other areas eg Mental Health where recruitment is challenging and PrBL opportunities are inconsistent across the profession.
- The stakeholder group should be sustained to ensure continued engagement and collaboration via an ongoing programme of work that recommend next steps for the profession.
- Placement models and timetables should continue to be evaluated and refreshed to reflect the dietitian of the future.

Further information is available here: <https://api.ltb.io/show/ABSRT>

2.3 AHP Practice-based Learning (PrBL) Recovery: Occupational Therapy 2023

Situation / Background

The Scottish Government commissioned NHS Education for Scotland (NES) to identify the number of placement hours shortfall for nursing, midwifery and AHP pre-registration students for the 2020-21 academic sessions. Concerns were growing that without the required number of placement hours pre-registration occupational therapy (OT) students would not be able to graduate and join the workforce. Previously, Royal College of Occupational Therapists (RCOT) identified that the required 1000 pre-registration clinical hours would be spent in more “traditional” environments, such as hospitals. There is now a strong desire for OTs to work across other sectors and environments including third sector, private practice and within community populations to enable the profession to demonstrate the full extent of its value and reach.

Task

The objective of the NES OT project, in collaboration with the Higher Education Institutes (HEIs), was to recover, and increase, OT pre-registration practice-based learning placement (PrBL) opportunities in Scotland that are high quality, modern, diverse, and sustainable. Quality PrBL experiences are vital to all OT students; allowing them to complete their programme of study and join the Scottish health and social care workforce.

The OT Practice Education Leads (PELs) led scoping activities that took place face to face, via Microsoft Teams, with individuals and with groups of OTs. A stakeholder group was created with involvement from NES, HEIs and practice educators across Scotland.

The following themes were identified within the scoping activities:

- Practice Educators (PEs) may frequently offer PrBL but are now increasingly overwhelmed

- PEs have ideas for offering placements but may not have the confidence to introduce something new, ultimately defaulting to one to one and face to face placement delivery
- Some clinical practitioners consider their practice area as being too “specialised” for most students

Actions

Pilot studies were identified, in collaboration with stakeholders and professional networks, to test different models and methods of PrBL delivery including long-arm supervision, peer-assisted learning (PAL) and project placements within NHS and cross / third-sector placement settings. Timescales were agreed, and desired outcomes created to trial and evaluate the models of PrBL delivery. An emerging framework developed by Janet Thompson, OT, NHS Grampian was adapted by the OT PELs for use with selected organisations.

Each pilot study was evaluated using a qualitative approach and the findings used to inform the aims of subsequent cross / third-sector pilot studies. The findings were discussed at stakeholder group meetings and further disseminated via stakeholder networks and the HEIs. Learning was also shared with new placement providers taking part in the project.

In addition, the following actions were undertaken as a direct result of findings from the scoping activities:

- Creation of drop-in clinics and the Scottish OT Practice Education Network to offer uni-professional support to new and existing PEs. Active promotion of the AHP PrBL Virtual Community, and buddying opportunities to encourage further networking and sharing of good practice.
- A range of resources including placement frameworks, Canva presentations, models and modes explanations, essential links, timetable examples, and blogs have been created to assist students, PEs, and placement organisations/providers in pre-planning activities available at <https://api.ltb.io/show/ABSPD>. Further

support was given in the form of face to face and virtual meetings, placement venue visits and ongoing daily/weekly contact via a dedicated Teams page during the pilot studies with learning shared thereafter.

- Introduction, development, and delivery of myth busting face to face and virtual roadshows to discuss models and methods of PrBL delivery. Resource pack developed so further areas can deliver their own roadshows.
- All stages and experiences of this process, for both PEs and students were actively shared via vlogs, blogs, roadshows, and national publications.

Impact

Engagement was evident with pilot projects, HEIs, PEs, cross / third sector organisations, and students. This was clear by the active collaboration with HEIs, the total number of new student PrBL opportunities created, and the number of cross / third sector organisations who approached the OT PELs requesting that occupational therapy students be placed with them.

A range of cross / third sector organisations volunteered to host pilot projects, each with varying degrees of support from the OT PELs. As a result of this project, additional placement capacity was created. Opportunities were identified and support given to deliver:

- Role emerging project based PrBL opportunities within NHS 24 which utilised long arm supervision, and PAL
- A project-based leadership placement within NHS Borders
- A project-based, hybrid, PAL placement within NHS Highland where the education authority hosted the student placements
- Split NHS Lanarkshire, cross / third sector PrBL opportunities utilising new placement settings

Twenty-eight students have undertaken 208 weeks, approx. 6000 hours of placement hours, through the opportunities identified and developed in this project. This comprised of 26 students undertaking 192 weeks of PrBL during the period June to December 2022, and a further two students each attending 8 weeks full time placement during the period

January to March 2023. Plans have been agreed for ongoing placements, building on two of the pilot projects that were created in collaboration with NHS, NES and an HEI colleague. These new PrBL opportunities have also been offered and accepted by a second HEI, providing additional PrBL for the future. All pilot projects have shared their learning through networks, social media, publication, and conferences.

Feedback indicated that despite these not being what would typically be called a 'traditional' placement, students could nevertheless gain experience and opportunity in acquiring skills identified by the HEI assessments and learning outcomes for PrBL. Therefore, by considering all sectors HEIs have an increased choice of quality PrBL options for students.

Students reported that decisions to accept employment offers were influenced by the opportunity to participate in modern and diverse placements. For example, one student commented that their decision to go for a mental health Band 5 post was a direct result of their placement with NHS 24 in the mental health hub. This was not an area of practice they had previously considered.

Crucially, links between NHS and cross / third sector organisations have been created and strengthened resulting in new modern and diverse PrBL opportunities. The sustainability of this is clear in the way that HEIs and cross / third sector organisations have continued to deliver and plan future PrBL opportunities for students despite the NES pilot projects having been completed.

To assist PEs to consider new modes and models, myth busting roadshows were delivered throughout Scotland both virtually and face to face. Questions for the OT PELs were around specific ways of delivering placements using the highlighted methods of delivery. The OT PELs were therefore able to share their own experiences from the NES pilot projects, for example of being a long arm supervisor, of managing peer assisted learning and of collaborating and setting up split placements across health and cross / third sector organisations. The roadshows focused on sharing the pilot outcomes and offering examples of good practice. Feedback from the sessions indicated a better understanding of PrBL and how it could be approached by PEs to enhance service delivery, capacity, sustainability, and future workforce.

One health board has created and secured funding for an Advanced Practice OT Post in Practice Education as a result of this work.

Learning / Recommendations

Recommendations moving forward:

1. Continued collaboration between PrBL providers, the HEIs and NES is essential to ensure sustainability. Identified capacity and mechanisms to continue this work is vital.
2. Utilisation of the Scottish OT Practice Education Network and drop-in clinics to support PEs and enable ongoing communication, sharing of good practice and networking throughout Scotland.
3. OT PrBL should endeavour to make use of full breadth of placement models available to ensure delivery in line with HCPC and RCOT professional standards. Examples of good practice and further information is available at <https://api.ltb.io/show/ABSPD>
4. Adequate time should be made available to ensure that all involved are fully prepared for PrBL and have access to the necessary resources.
5. PrBL should be part of all personal development plan (PDP) discussions for all members of placement provider team, and this should be supported by higher management.

The NES OT project has achieved the aim of increasing OT PrBL capacity and opportunities in Scotland. Modern and diverse opportunities have been developed through the utilisation of new settings, and different models and methods of delivery; and their value demonstrated. The project produced a surplus of pre-registration OT PrBL opportunities, and HEIs are continuing to offer these newly created opportunities beyond the NES project. Learning and good practice has been shared, and the development of resources and the Scottish OT Practice Education Network offer ongoing support for PEs.

2.4 AHP Practice-based Learning (PrBL) Recovery: Orthoptics 2023

Situation/background

Orthoptic placements are allocated using a national equitable allocation system which is designed to ensure fair allocation of all student placements throughout the UK. There are fewer large, specialist centres in Scotland, which makes it challenging to offer the range of experiences and sufficient exposure to the complex ocular motility conditions required to support students learning. By attending placements in both Scotland and England, students access a wide range of placement experiences and clinical caseloads.

During the pandemic, PrBL placements in England for Scottish orthoptist students were funded by the Scottish government to support PrBL recovery, resulting in the continuation of placements in Scotland and England with no deficit to recover in 2021.

In the academic year 2021-2022, 112 out of 176 Glasgow Caledonian University (GCU) placement weeks were in England.

The loss of Student Awards Agency Scotland (SAAS) funding for placements in England was anticipated and the need to increase placement capacity in Scotland was expected. New graduates explained the impact of the loss of funding:

“Without funding my clinical experience would have been limited; this could have affected my chances of graduating. Furthermore, I may have had to leave my course if there was no funding as we have to travel far for a period of time e.g. 6 weeks in London city centre.”

“I did not have funding, I had to borrow money from family & take unpaid leave from my part-time job.”

At present [guidance](#) from the Student Awards Agency Scotland advises that expenses may only be claimed for placements within Scotland.

Purpose of the project: The purpose of the project was to increase future placement provision in Scotland whilst maintaining a similarly wide range of placement experiences and clinical caseloads.

To keep within the project remit and timescales, the scope of the project was defined.

Table 4: Orthoptics scope of project

In Scope	Out of Scope
<ul style="list-style-type: none"> • Increase capacity and quality of PrBL experiences in Scotland • Identify requirements of good quality placements 	<ul style="list-style-type: none"> • Cross / third sector • Increased extended role opportunities • Increasing numbers of practice educators

Identification of stakeholders

- Higher Educational Institution (HEI)
- Lead Clinical Tutors (practice educators/PEs)
- Management representation (Heads of orthoptic services)
- British and Irish Orthoptic Society (BIOS) representation (orthoptic professional body)
- Representative from PrBL teaching site in Birmingham
- Orthoptic students

Scoping methods

- Conversations with stakeholders
- Survey to all stakeholders

Task

Key findings

- Barriers to designing a modern, sustainable quality student placement suited to a future orthoptic workforce: short clinic times; lack of control over appointments; lacking full range of equipment
- Workforce pressures impacting practice-educator time for PrBL
- Reduced number of extended roles within Scotland offering placements
- Lack of diverse placement models.

Aim

For the orthoptic workforce in Scotland to increase PrBL capacity by growing the diversity and quality of PrBL experiences available to students. This would be achieved by:

- Increasing the diversity of placement models
- Designing and testing a modern, sustainable quality student placement suited to a future orthoptic workforce

Actions

- To establish a new orthoptic practice educator stakeholder group by February 2022.
- To develop the proposed solutions into tests of change (ToC).

Stakeholder group: An orthoptic practice educator stakeholder group was established in February 2022, with a wide range of stakeholders. The group met every 6 weeks over the course of the project.

ToC 1: Using the Peer Assisted Learning (PAL) model on placement, to potentially provide access to a wider range and greater number of clinical cases appropriate to student stages of learning.

- Orthoptists were trained in the PAL model by participating in the NHS Education for Scotland (NES) PAL training sessions.
- NHS boards designed and delivered PAL placements for 3rd and 4th year students.
- Training and placements were evaluated

ToC 2: Implementing an online Peer Enhanced e-Placement (PEEP), designed by GCU to increase placement capacity in Scotland.

- Led by lecturers at GCU and supported by orthoptic practice educators from 3 NHS boards, a PEEP for 3rd year students took place over 2 weeks in August 2022.
- Student, orthoptic lecturer and practice educator experiences were evaluated.

ToC 3: Designing and testing a 4-week block placement for 4th year students to ensure high quality PrBL experiences, aligned with the NES Quality Standards for Practice Learning.

- 4 volunteer NHS Boards designed and delivered an additional 4-week block placement for 9, 4th year orthoptic students testing 9 key requirements for a high-quality placement identified by the stakeholder group.
- Feedback was collected from students, orthoptic service leads, lead orthoptic practice educators and orthoptic lecturers.

Impact

Placement capacity in Scotland increased by growing the diversity and quality of PrBL experiences.

Peer Assisted Learning
<p>Engagement impact</p> <ul style="list-style-type: none">• 21 orthoptists attended PAL training by September 2022
<p>Performance impact</p> <ul style="list-style-type: none">• 6 PEs had taken a PAL placement by December 2022
<p>Service impact</p> <ul style="list-style-type: none">• Using the PAL model in placement sites with a limited adult caseload, gave students access to a wider range of adult cases than using a 1:1 model.• All orthoptists evaluated, who had taken a PAL placement, reported they would take one again.

Peer enhanced e-placement
<p>Performance impact</p> <ul style="list-style-type: none"> • 6 hours of time was provided by 3 practice educators during the PEEP <p>Service impact</p> <ul style="list-style-type: none"> • 28 placement weeks provided using the PEEP
Placement design
<p>Service impact</p> <ul style="list-style-type: none"> • An extra 36 placement weeks provided by the additional 4th year block placement developed as the ToC. • Following withdrawal of funding, an additional 32 placement weeks already scheduled in England for January and February 2023 were moved to Scotland and adopted this placement model

Recommendations

- Continue to develop the use of PAL as a model by sharing learning through stakeholder group; development of orthoptic specific resources for TURAS site; further preparation of students for PAL by HEI
- Continue to develop the use of PEEP as a model through further development of resources to support practice educators, further development of resources by clinicians for PEEP placements
- Prioritisation of next steps for design test of change based on learning
- Scoping and development of additional diverse models e.g., simulation, project-based placements, long arm supervision
- Promote further development of extended roles within placement experience
- Awareness of PE training opportunities through linking with PEL network, promotion through stakeholder group and use of NES PE framework in PDP discussions

<https://api.ltb.io/show/ABSXX>

2.5 AHP Practice-based Learning (PrBL) Recovery: Paramedic Science 2023

Situation and background

2020 saw the launch across Scotland of a Paramedic Science Degree being delivered by five Higher Education Institutions (HEIs) with only one having prior experience of paramedic science. Prior to this the Scottish Ambulance Service (SAS) provided a Diploma in Higher Education (DipHE) programme, allowing technicians to progress to registered paramedics. This will cease in summer 2023.

Initially, each degree student required 60 weeks of practice-based learning (PrBL), 50% of which would be in cross / third sector settings (non-SAS settings). This was a significant new requirement for health boards and Nursing, Midwifery and Allied Healthcare Profession (NMAHP) educators. In the summer of 2022 these hours were revised to 18 weeks within a board setting. There are currently a total of approximately 893 paramedic students in Scotland.

The purpose of this project was to work with key stakeholders involved in paramedic PrBL to help identify and support initiatives that will increase placement capacity in a sustainable way. The project had the following key objectives:

1. By March 2023 all 3rd year students will be allocated non-SAS placements meeting at least 80% of their timetabled hours for semester 1/2.
2. By March 2023 at least 25% of year 3 non-SAS placements will be based on a non-traditional placement model.
3. By March 2023 at least 14 Allied Health Professional (AHP) Practice educators (PEs) will have facilitated a non-SAS placement for one or more student.
4. By March 2023 at least 20% of 3rd year non-SAS placements will be in new setting.

The main stakeholder group for the project was identified as the Scottish Collaboration of Paramedic Education (SCoPE). Five 'project support groups' were established, one based around each HEI delivering the paramedic science degree, with representatives from the HEI and each associated Health Board and local stakeholders. The scope of the project

focused on non-Scottish Ambulance Service (SAS) practice placements; however, we worked in collaboration with SAS as a key stakeholder.

Task

In September 2021 less than 80% of placements were confirmed, with an approximate deficit of 47,800 hours across Scotland. There were specific challenges placing students in speciality areas such as paediatrics, maternity, and theatres partly due to competition for these placements from paramedic DipHE, nursing, and midwifery students.

A report was commissioned to help collate the experiences of PEs supporting paramedic students on non-SAS placements and better understand the challenges faced. The report identified the following main themes:

- There was a lack of understanding amongst educators about what paramedic students could do or gain from a placement and unfamiliarity with documentation.
- Resources and training were required to help PEs and placements better support paramedic students.
- The need for good communication and links between HEIs and PEs supporting paramedic students.
- Better understanding and appreciation of the transferrable skills and knowledge other AHPs can bring to enhance paramedic student learning.

One HEI shared data from pre and post placement surveys of PEs supporting paramedic students in non-SAS placements in semester 1 (Sept –Dec 21). Feedback identified the following key themes:

- The importance of good communication and support from the HEIs to PEs supporting paramedic students for the first time.
- The requirement for students to be well prepared prior to attending the placement with clearly defined and student led learning objectives.
- PEs reported they were very likely to have further students and students had been well motivated.

In April the project facilitated a day long workshop with Scottish Ambulance Service Practice Education Leads (PELs) and HEI paramedic leads to look at the practice-based learning landscape and some of the challenges both within SAS and in the boards. The key learning points were the need to recruit additional Paramedic PEs within SAS and the need for collaboration between the HEIs and SAS to develop and deliver PE training days.

Action

PrBL opportunities: New placement opportunities were identified within the Scottish Trauma Network and NHS 24. 12 students were placed with the Trauma network at the Queen Elizabeth Hospital, Glasgow. It was a blended placement model, with students placed within the adult and paediatric trauma teams for 1 week and 1 week working on a project to produce a learning resource for their peers. NHS 24 pilot placements are due to take place in May 2023 with 4 students over 4 weeks. These will be blended placements located within NHS 24 call centre in Glasgow.

Resources: available to view on Toolbox: <https://api.ltb.io/show/ABSQE>

- A Question-and-Answer resource, hosted on Turas, was developed to provide guidance and support to PEs for paramedic students out with the ambulance service.
- A short animation was created aimed at helping paramedic students prepare for non-SAS placements. A second animation is in development to support PEs.
- A 'How to' webinar was hosted for PEs discussing how to support a paramedic student on an interprofessional placement. This was a live event and has since been made available on the Turas AHP learning site.
- All 5 HEIs in collaboration with Scottish Ambulance Service PELs designed and delivered a Paramedic PE training day for qualified paramedics.

A Paramedic Practice based learning Teams channel was established to facilitate communication, share resources, and continues to be widely utilised. Regular Paramedic keeping in touch (KIT) sessions were established to support all Board PELs involved in paramedic placements. The establishment of the 5 project support groups facilitated the

sharing of information and resources between HEIs and Boards, in addition to the development of closer working relationships between Board PELs, Nursing and midwifery colleagues and the HEIs.

Impact

Board PELs reported that the 1:1 placement model was predominately used, but alternative models including PAL, Blended, Hub and Spoke have been used in 7 of the 12 health boards. A pilot PEEP (Peer Enhanced E-Placement) model for paramedic students is currently being developed at one HEI. Half of the board PELs reported that between 75% and 100% of their placements had never previously hosted a paramedic student. Approximately 68 new AHP Practice educators were identified and participated in paramedic student training across 8 health boards.

Feedback from a questionnaire collated from the five project support groups demonstrated that participation had the following benefits and impact:

- Improved communication between Board staff, HEIs and SAS which enabled better coordination and quick resolution to issues.
- The opportunity to identify common issues and develop a co-ordinated national response to drive changes such as number of non-SAS PrBL hours.
- Access to additional educational resources to support students and PEs and increase the confidence of all staff supporting paramedic students.
- Raised awareness and better understanding of the paramedic PrBL programme and clarity on each stakeholders' responsibilities.
- Participants reported that they felt better supported and there was improved collaboration both locally and nationally.

The 'How to' workshop run in May 2022 was attended by a total of 187 participants (with 320 registered). Of these, 96% were from the NHS and consisted of 67% from nursing and midwifery and 32% from AHPS. This workshop sparked great discussion with participants' confidence levels increasing by 21% after the session. In addition, 68% agreed and 23%

strongly agreed that this workshop gave them new knowledge. 9 Board PELs reported that they had utilised this resource to support new third sector placements.

Analysis of the evaluation from the paramedic PE training days showed that:

- 98% of those attending either agreed or strongly agreed that they gained new knowledge that they could apply to their working practice.
- 100% of participants that completed the evaluation either agreed or strongly agreed that they would apply what they had learnt.
- 90% felt that they now felt prepared to support a student.
- One third of attendees that completed the survey had registered as qualified paramedics since 2021 which indicates a willingness on the part of new registrants to become practice educators.

Learning/Recommendations

To help sustain and develop the significant work that has been done the following recommendations are made:

- Continued representation and support from NES in Scottish Collaboration of Paramedic Education (SCoPE) as the main stakeholder group for paramedic education, and the 5 project support groups.
- Ensure consistent approach to role and expectation of Board PELs from each HEI and work towards HEIs using a similar placement process/model to other AHP programmes.
- In future it would be of benefit to integrate the SAS PEL role into the national AHP PEL community, helping embed paramedics into the AHP family.
- Continue to communicate and share resources via the Paramedic PrBL Teams channel and encourage paramedic discussion in the Scottish AHP PrBL virtual community.
- It would benefit all stakeholders to continue to collaborate on, and extend their use of alternative placement models, in addition to a greater use of third sector

placements. Once the paramedic PEEP resources have been developed by QMU there is the potential for these to be shared and used across all HEIs.

- There is a need for continued development of new resources to support staff who are facilitating paramedic students for the first time. As more PEs are trained this will lend itself to introducing more interprofessional placement experiences.
- To include paramedics into the AHP electronic system that is currently under development. A system whereby paramedic students and HEIs could gain access to placement area details, and Quality Standards for Practice Learning (QSPL)/ Quality Standards for Practice Placements (QSPP) details can be retained, would further aid paramedics to becoming part of the AHP family.

Considering the significant challenges, the success in identifying, facilitating, and supporting practice-based learning has been truly remarkable. This is testament to the dedication, tenacity, and resourcefulness of the Board PELs working in collaboration and support from multiple AHPs, Nursing and Midwifery colleagues, SAS PELs and the HEIs. The first nationwide cohort of paramedic science students from 5 Universities in Scotland are on track to graduate later this year.

2.6 AHP Practice-based Learning (PrBL) Recovery: Physiotherapy 2023

Situation / Background

Problem: Covid-19 resulted in ongoing organisational service disruption, reduced staff wellbeing and had a detrimental impact on placement delivery. Physiotherapy (Physio) placement provision in Scotland was insufficient to provide students with the required 1000hrs of PrBL for Health and Care Professions Council (HCPC) registration.

Aim statement: To support Practice Educators (PEs) to provide a broader range of Physio PrBL placement models and experiences, across healthcare and sectors in Scotland, by March 2023 to assist practice placement recovery.

Scope of Project and Objectives

The project scope was defined, and three key objectives identified: 1) To support PEs; 2) Promote different models of supervision; and 3) Reduce the placement hour deficit.

Stakeholders and Scoping Exercise

Following robust scoping, two project stakeholder groups were formed– one with Higher Education Institutes (HEIs) and one with representatives from NHS Territorial (geographical / regional) Boards. A webinar on PrBL with the Chartered Society of Physiotherapy (CSP) provided promotion and further scoping information and the national AHP PE survey also informed the project.

Task / Actions

The following five solutions were agreed and prioritised with stakeholders:

- Mapping of placement provision in NHS Board areas
- Supporting PEs to use alternate models of PrBL (Peer assisted Learning (PAL), Blended and a Team approach)
- Collating and centralising Physio specific PE resources
- Promotion of PrBL and strengthening the PE network
- Exploring non-NHS placement opportunities

Information about the project interventions is detailed below:

Placement Mapping: Guidance for a placement mapping process was developed to explain how services can calculate their own 'placement week' to 'whole time equivalent ratio'. NHS Greater Glasgow and Clyde (GGC) acute services shaped the method for this process, and teams from NHS Lothian, Lanarkshire, Dumfries and Galloway, Grampian and Highland have been supported at varying stages to review their placement provision.

PE Support: To provide practical support, three support sessions were delivered: A) Using Blended Models; B) A Team Approach to PrBL; and C) Starting and Returning to PE; recordings were made available on TURAS. A need for more interactive workshops was identified leading to a programme of six Physio PE workshops being developed. In total 15 physiotherapy specific sessions were delivered with 388 attendees across all sessions.

The Physio Practice Education Leads (PELs) assisted the delivery of the national AHP PAL training, providing four AHP PAL workshops and supporting two Physio PE leads within NHS Lanarkshire to complete the train the trainer programme.

Centralising Resources: Physio PELs actively contributed to development of the AHP PrBL Virtual Community, launched in November 2022. A list of Physio PrBL resources available from NHS Boards has been collated, ready to upload onto the virtual community once further developed, shared and housed on Microsoft Teams in the interim.

PrBL Promotion and Strengthening Practice Educator Networks: To share the project activity and engage more Physios in PrBL, monthly updates were published using Microsoft Sway and cascaded through stakeholders' networks. Seven Sways, with 1986 total views, were housed on the Turas project pages to reach a wider audience.

Promotional storytelling on Physio PrBL activity was shared using animations, released over social media, distributed through Board Physio networks, and saved on Turas as a resource, with 367 views. The Physio PrBL SBAR produced in 2018 at the national event; Growing Capacity for AHP Student PrBL in Scotland, informing the process for physio placement requests was updated in collaboration with stakeholders. It was agreed this would underpin placement requests for 2023-2024 and an animation promoting this process was produced and circulated. Finally, information on all Board PrBL network

groups has been collated to store on a centralised platform in the future to facilitate networking.

Non-NHS placement opportunities: Five organisations from independent and third sectors were recruited to review PrBL delivery, each had different needs requiring tailored support. The successful outcomes per organisation are detailed below:

- Police Treatment Centre – connected with Robert Gordon University for ongoing PrBL support
- The Ministry of Defence (MOD) Tri-Service Physio teams -trialled a blended model of placement delivery
- Edinburgh Scottish Rugby Union - connected with Edinburgh Napier University for PrBL support and committed to their first placement in August 2023
- Braid Health and Wellbeing Centre -supported by the Physio PELs to deliver one 6-week project PAL placement with long arm supervision for two students
- Scottish Ballet - Connected with Glasgow Caledonian University and Edinburgh Napier University to initiate PrBL planning

Impact

Engagement Impact: Our stakeholders consistently rated understanding of PrBL issues above 8.5/10 and importance of PrBL above 9/10 during collaboration meetings.

Support Sessions generated positive engagement feedback:

“Providing these learning opportunities has opened my mind, and the minds of colleagues to the various ways of hosting placements which in turn has opened conversation. That is a huge positive as student education in hospitals is something we are talking about again, primarily from these sessions being offered.” (Final evaluation respondee)

The final project evaluation (n=47) demonstrated ongoing engagement with 40% planning to be more involved in PrBL; 32% expressing a plan to using a blended model; 32% planning to use a team approach; and 45% considering using PAL.

Educational Impact: Polls after all sessions showed improved self-rated confidence in PrBL delivery. The final project evaluation (n=47) reflected this demonstrating 66% of respondents felt more confident in supporting PrBL, with 64% reporting better understanding of the different models of PrBL and 38% more confident in their use.

Performance Impact: 28% of respondents reported they were more involved in supporting PrBL in the end of project evaluation (n=47). Following attendance at a support session or workshop, 55% were using a Team approach to PrBL, 32% had tried a blended model of placement delivery and 34 % were using PAL.

Responses to the final evaluation questionnaire (n=47) were received from 12 of the 14 NHS Territorial Boards. Use of delivery models were reported by representatives from the Boards that responded as follows: Blended model 9/12; use of a Team approach 11/12 and PAL 7/12. Of the Boards where performance level impact was not shown from our evaluation, engagement level impact (planning to implement) was expressed towards blended models and a team approach for placements. All NHS Boards, except one, showed engagement level impact for using PAL. Performance impact was demonstrated within the MOD with Blended models, a team approach and PAL all being utilised.

Evaluation of those who had undertaken placement mapping highlighted that it identified ways to sustain and increase placement capacity. Respondents stated that it highlighted new PrBL opportunities, and they were subsequently trying new models of delivery.

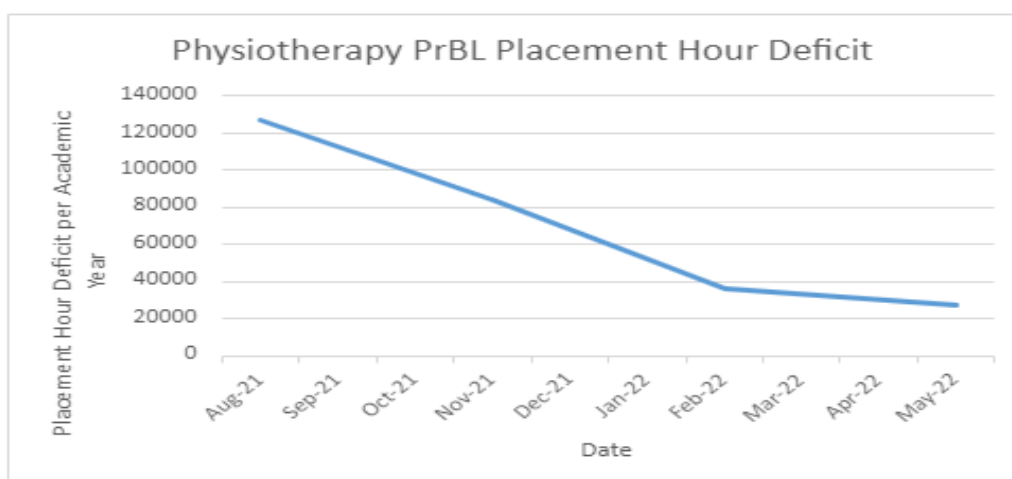


Figure 4: Physiotherapy PrBL Placement Hours Deficit

Service Impact: Snapshot data was shared by HEIs in a Red/Amber/Green (RAG) format to indicate placement hours deficits across Physio programmes in Scotland. Figure 4 shows the improving trend throughout the project.

No HEI providing Physio courses in Scotland reported graduation being directly affected by placement availability.

Project Objective Achievement

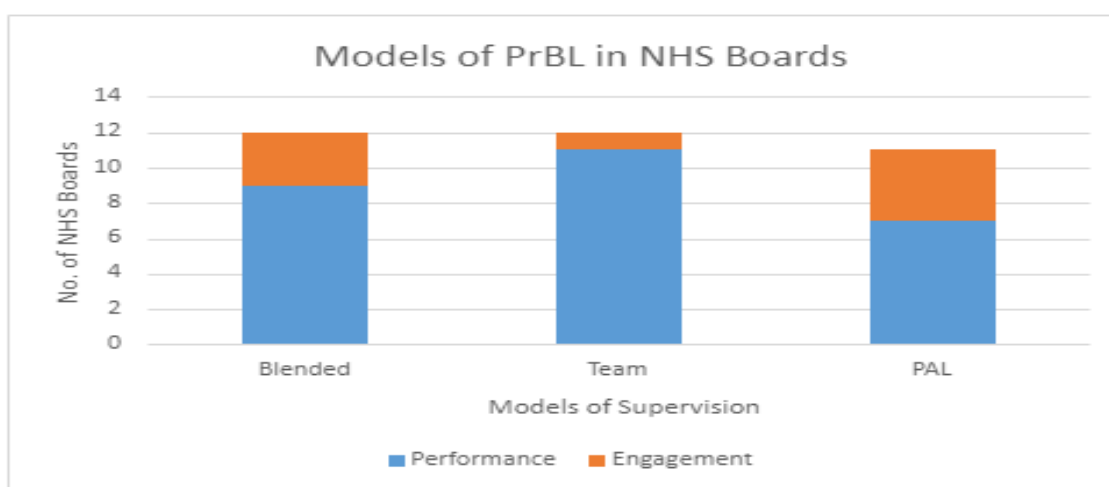


Figure 5: Models of PrBL in NHS Boards

From our final evaluation (n=47), 5 NHS Territorial Boards met the first objective, with representatives trying each of the three placement models. Of those that did not achieve performance impact, engagement impact was demonstrated.

Although the deficit in Physio PrBL provision across Scotland has significantly reduced, due to lack of robust data we cannot confirm that a deficit no longer exists. However, the third objective of 100% of students eligible to graduate, graduating on time was achieved within this project's lifespan.

Learning

Physios view PrBL as valuable and important. They are increasing their knowledge, skills and willingness to try new models of PrBL. Networking opportunities and sharing stories are effective ways to support PEs and share learning. Stakeholders are keen to participate in a national collaboration/network group, but do not have capacity to lead on this.

Placement mapping can aid understanding of capacity within NHS Boards and identify ways to sustain and/or increase placement provision. In non-NHS sites, leadership is required to provide Physio PrBL opportunities when there is no employed Physio attached. Despite discussions to explore capacity, no NHS Physio PEs were identified during this project to support and deliver PrBL within these organisations.

Recommendations

Ensuring Physio PrBL network groups are established and sustained, with consideration of the role of NHS Board funded posts, will continue to drive the recovery of PrBL locally and nationally. The AHP PrBL virtual community could be a mechanism to support Physio networking and centralisation of resources, but is in its infancy, lacks uni-professional focus and requires growth to meet the needs of the Physio profession.

There should be further exploration of PrBL delivery in all areas, including specialist NHS Boards. Use of PAL should continue to be supported: using local PAL trainers; mentor/buddy system post PAL workshop attendance; and ensuring PAL features on the agenda within network groups/ virtual community. Improved understanding of the concept and use of long arm supervision in Physio could enable available placement opportunities in non-NHS organisations with no employed Physios to be established and sustained.

For more information on this project see the Learning toolbox:

<https://api.ltb.io/show/ABSOL>

2.7 AHP Practice-based Learning (PrBL) Recovery: Podiatry 2023

Situation / Background

The Covid-19 pandemic disrupted the sustainability of podiatry student placement provision in Scotland. Prior to the pandemic, 96% of podiatry practice-based learning (PrBL) took place within clinic sites in NHS Greater Glasgow and Clyde and NHS Lothian. Physical distancing measures led to a 50% reduction in capacity at these clinic sites and loss of some placement sites.

Over the past 10 years, there has been a 10 percent decrease in the number of podiatrists working in NHS Scotland. Workforce data also tells us that the average age of a podiatrist is 55 and over. We hear from services that there are ongoing recruitment difficulties across many health board areas of Scotland. This highlights the urgency of ensuring we have confident newly qualified practitioners entering the workforce who are ready to practice and ensure the sustainability of podiatry services.

This project identified a need to increase the number of trained and experienced practice educators and quality placement opportunities across all health boards in Scotland. Within scope included quality of PrBL, placement models, and practice educator learning and development. Routes into Podiatry careers including an apprenticeship model, newly qualified practitioner preceptorship and funding issues for students were also out of scope of this project.

The stakeholders identified to support this project included podiatry services, clinicians, HEIs, students and the professional body Royal College of Podiatry.

Task

The project aimed to develop a more collaborative and consistent approach to PrBL across Scotland that combines the skills, perspectives, and ideas of those involved in podiatry PrBL towards a shared goal. This required the development of clearer channels of communication, defining roles and responsibilities and creating a culture for shared learning and improvement.

Scoping

Scoping of the current situation within Podiatry PrBL was conducted and involved initial 1:1 meetings with a range of health board areas (Urban, Rural and Remote), and the Royal College of Podiatry (RCOP), a stakeholder workshop and an Allied Health Professions (AHP) survey of student practice education.

Scoping identified that in board areas that had not supported many students there were a low number of trained or inexperienced practice educators. There was an assumption in some health boards that only more senior staff (Band 7+) were able to be practice educators.

Podiatry student practice education workshop

A Podiatry student practice education virtual workshop was held via Microsoft Teams on the 3rd of May 2022 and attended by 65 podiatry students, clinicians, managers and lecturers. The aims of the workshop were to create a shared vision for Podiatry PrBL, identify barriers and opportunities and identify the role of a stakeholder group. The agreed vision statements are in Figure 6 below.




-  Podiatry students receiving a variety of placement opportunities and clinical exposure to develop the clinical skills and reasoning required to prepare them for meeting the needs of the population, including high risk and complex cases.
-  Quality learner-centred practice based learning experiences across Scotland supported by trained and experienced practice educators.
-  Positive learning environment for all

Figure 6: A vision for podiatry PrBL agreed by stakeholders May 2022

AHP Survey on practice education

The AHP survey on student practice education was completed by 54 podiatrists (See full results in main report). The survey identified barriers and facilitators to becoming a practice educator, and to facilitating student PrBL (See Figure 7 for barriers and facilitators identified by podiatrists and how this informed project actions).



Figure 7: Barriers and facilitators to podiatry PrBL identified in the AHP survey on student practice education 2022

Action

Development of a Stakeholder group: A stakeholder group was identified from those who volunteered after attending the stakeholder workshop event and met every two months during the project via MS Teams.

Peer assisted learning placements in remote and rural areas: A concern highlighted during scoping was that it was difficult to support students in remote and rural areas. A test of change was carried out using the Peer-assisted Learning (PAL) model in NHS Western Isles in May 2022 with 2x level 3 students from Glasgow Caledonian University. This model was subsequently tested by Podiatrists in NHS Borders. Evaluation highlighted the key benefits that were identified by student and practice educators (See Figure 8 for details).

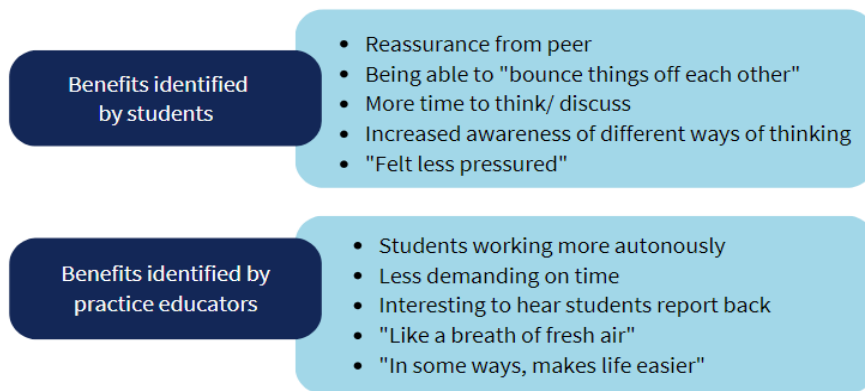


Figure 8: Benefits of the Peer Assisted Learning (PAL) identified by podiatry students and practice educators

Collaborative practice educator training: Profession specific practice educator training was highlighted in the survey as a key facilitator to becoming a practice educator. This training provides information on course modules, assessment and documentation. This was previously provided separately by each HEI and at times, individually to health boards. A collaborative approach to practice education was taken in 2022/23 to improve consistency and ease of access to training. Sessions were facilitated by Glasgow Caledonian University, Queen Margaret University and NHS Education for Scotland.

Drop-in sessions for Podiatry Practice educators: Drop-in sessions were piloted and developed based on feedback to provide opportunity for peer support, problem solving and shared learning. Three sessions took place during October-December 2022. 37 podiatrists from 7 health board areas attended. Topics discussed included: learning outcomes, feedback methods, student development, supporting struggling students and practice considerations.

Resources to promote placement locations: Podiatry services have been encouraged to create promotional material to help to inform student choices around placement areas. This has been collated by Glasgow Caledonian University. Student representatives were invited to attend a stakeholder meeting to provide information about placement information but due to timings of meetings and the academic calendar, this did not occur.

Impact

This project has seen a change in the culture around Podiatry PrBL across Scotland's health boards; increased commitment to PrBL, increased number of practice educators of all levels, increase in placement offers across health boards and the development of a supportive Podiatry PrBL stakeholder group.

Podiatry PrBL Stakeholder Group: Members of the stakeholder group rated the group 9/10 stars and highlighted benefits of improved communication between health boards and HEIs, and shared learning across health board areas. 100% of members would like the group to continue.

Practice educator learning and development: 12 % of the podiatric workforce (n=84) registered for practice educator training in 2022/23. The majority of podiatrists (54%) that attended training in 2022/23 reported to being new to the role of practice educator. The most significant increase was seen in NHS Grampian where a third of the workforce registered for training and two thirds of this were new to the role of practice educator. Attendees reported increased confidence to facilitate student learning and 66% of attendees were planning on supporting a student in the next 3 months.

Practice educator training was enhanced with the introduction of drop-in sessions for practice educators. The majority would recommend the session to a colleague and would like to see these sessions continue.

Service impact of increasing the number of practice educators: Stakeholders reported that there are now more students on placement within boards and that students are going to new placement sites with increased diversity of clinical exposure. This has led to increased flexibility around placement planning and reduced risk of cancellations.

HEIs have reported an increase in placement offers. For example, Glasgow Caledonian University reported 54 placements offers being made across 8 health boards in 2021/22 to 181 offers across 10 health boards in 2022/23. There are now more placement opportunities for students across health board areas.

Although there has been an increase in placement offers across health board areas, the rising costs of living and cost implications of external placements have limited the spread

of student placements and students continue to opt for placements close to university sites.

Learning/ Recommendations

This project has seen a cultural shift in Podiatry PrBL with increased engagement and commitment across Scotland. A collaborative approach to PrBL learning and development has allowed for shared practice and experience across geographical areas. A network of all those involved in PrBL has formed and this has supported the increase in number of practice educators and placement opportunities. To ensure sustainability of these developments, it is vital that podiatrists of all levels and clinical expertise are encouraged to be involved in PrBL.

Ongoing innovation is required to develop, modernise and diversify the PrBL experiences of students so that they can gain the knowledge, skills and clinical exposure required to practice, enter the NHS workforce and meet the needs of the population.

Further information can be found in the Podiatry PrBL Recovery Project Learning Toolbox Stack: <https://api.ltb.io/show/ABSOV>

2.8 AHP Practice-based Learning (PrBL) Recovery: Prosthetics & Orthotics 2023

Situation / Background

Problem: Prosthetic and Orthotic (P&O) placement provision in Scotland is insufficient to meet the educational requirements for students. COVID19 disrupted placement delivery, impacting on students' clinical experiences and preparation for joining the workforce.

Aim statement: The tripartite project aim was to raise awareness of the unique workforce related issues impacting the professions, highlight facilitators and barriers to P&O PrBL provision in Scotland and support Practice Educators (PEs) to provide increased numbers of sustainable PrBL placement models and experiences, by March 2023.

Scope of Project and Objectives: The project scope was defined, and objectives identified to 1: establish the unique challenges facing P&O professions from all perspectives, 2: provide support to PEs and promote different models of PrBL, for, 3: increased sustainable placement offers.

Stakeholders and Scoping Exercise

Stakeholders: NES Practice Education Lead (PEL); University of Strathclyde (UoS); NHS Orthotists; NHS Prosthetists; Buchanan Orthotics; UoS Students; British Association of Prosthetists and Orthotists (BAPO).

Scoping Review Task: In-depth meetings were held with stakeholders, to establish accurate background information and explore PrBL challenges. Students' perceptions were also considered. Reports were re-shared to ensure accuracy. Thorough thematic analyses of barriers and facilitators of PrBL were collated, agreed and further merged, also considering the P&O results of the NES AHP PE Survey (open through May / June 2022).

Scoping Review Findings: Comprehensive clarification of the P&O workforce and programme was established. Key areas for PrBL interventions were identified as: training and support for PEs, preparing for placements, knowledge and understanding of alternate models of PrBL, and communication.

Scoping Review Actions: P&O workforce / programme findings and PrBL actions follow.

Prosthetics & Orthotics Facts and Figures

NHS Scotland P&O Workforce: There are five NHS Boards providing prosthetic services (31wte, B5 and above) and fourteen NHS Boards offering orthotic services (78WTE, B5 and above), (NES Workforce Statistics, June 2022). These statistics incorporate B5/6 Technicians who are not HCPC registered AHPs. Following a significant Scottish Orthotic Service Review (R. Rooney, 2005), most Scottish Boards now have dedicated NHS funded Orthotic Service Leads. However, some Boards have orthotic services provided under the Orthotics National Service Contract (ONSC), currently Buchanan Orthotics, Glasgow. This is due to the small number of orthotists required by smaller boards, often 1WTE or less, and the risk to service provision should NHS directly employed staff leave without the appropriately skilled replacement being readily recruited. In addition, some services do not have access to clinical workshop facilities for orthotic manufacture. Although Buchanan Orthotics currently provide this vital role for safeguarding provision of orthotic services, the service provider can change in line with any new service contracts as these are tendered on a regular basis. There are currently 13.95WTE Orthotists and 0.3WTE Clinical Assistants employed under the ONSC. These numbers are not included in NES Workforce Statistics (June 2022).

Higher Education Institution: The National Centre for Prosthetics & Orthotics (NCPO) at the University of Strathclyde (UoS), is the only Scottish University which offers the four-year BSc (Hons) Prosthetics and Orthotics degree, producing graduates with a dual qualification. Students must complete two 18-week clinical placements; one in prosthetics and one in orthotics (incorporating 5 days protected leave). Placement sites need to be UoS approved clinical facilities in order to meet the practical and technical criteria requirements of all PrBL Procedural Based Assessments (PBAs). UoS utilise placement sites outside Scotland for several reasons, as further explored.

Placement requirements: UoS student intake varies year to year, with approximately 35 students reaching 4th-year. This requires provision of 630 prosthetic Placement Weeks (PWs) and 630 orthotic PWs each academic year; where $630 = 35 \times 18$. In order to meet

UoS student PrBL provision, Scottish NHS services would theoretically need to support over 20 PWs per whole-time equivalent (WTE) prosthetist and 8 PWs per WTE orthotist, which is a high demand when compared with other AHPs (generally 3-4 PWs per WTE).

Placement allocation and funding: Due to placement length and limited PrBL capacity within Scotland, students can indicate a preference of UoS approved placement sites from across the UK, Republic of Ireland and Norway. Students often opt to be in bigger cities whilst others prefer being located closer to home, or to stay with friends or family due to cost-of-living, travel and accommodation. Scottish students can access Student Awards Agency Scotland (SAAS) funding for travel and accommodation for placements, provided these are within Scotland. However, UoS are reliant upon access to prosthetic placement sites outside Scotland and at present [guidance](#) from SAAS advises that expenses may only be claimed for placements within Scotland.

Funding and risks: The UoS P&O course only recently became regulated by the Scottish Funding Council (SFC). UoS report the target set by SFC for intake of Scottish students is 25, and that recent applications have dropped from an average of 20 to around 10 (current cohort) which could be attributed to the lack of SAAS funding (for placements outside Scotland). Not only does this reduce the number of Scottish graduates entering the workforce but it poses a risk to the ongoing SFC funding for the P&O programme at UoS.

Impact of COVID19: Pre 2020, placements took place throughout Trimester B of Year 3 and Trimester A of Year 4. Disruption resulted in both placements being completed in Year 4 which challenges retention of skill acquisition developed in Years 1 and 2. This disruption remains. Consequently, students complete extension/resits in the summer months following completion of their final placement which may delay graduation.

Practice-based Learning Actions

In addition to scoping and identification of the challenges facing P&O PrBL in Scotland, the following four interventions were carried out to address agreed priority areas:

PE Training & Support: Profession specific PE training from UoS was ranked as the most important factor when facilitating student practice education (AHP PE Survey, 2022). NES

P&O PEL facilitated a consultation to collaborate with UoS and PEs for revision of P&O training. Four different P&O PE support sessions were delivered along with two P&O PE Virtual Cafés. Infographics and resources were designed, developed and disseminated.

Preparing for Placement: There was multifaceted reporting relating to the perception of students not being prepared for placement, causing stress for students and PEs, and impacting on placement outcomes. UoS facilitated 4 weeks of practical skills refresher training for 3rd Year students in April 2022 (2 weeks each of prosthetics and orthotics). The P&O PEL undertook promotion of established BAPO resources through stakeholder meetings, PE support sessions and developed animated guides. A student placement infographic was created which remains widely available for students and PEs.

Alternate models of PrBL: PEs reported that increased understanding and awareness of different models of PrBL may contribute to alleviating pressures of supporting students. Practical application of different modes and models of placement was incorporated into the delivered PE support sessions. NHS Greater Glasgow and Clyde (GGC) Adult Orthotic Services engaged with a PrBL workshop and were supported to pilot a blended model within their service. AHP Peer Assisted Learning (PAL) workshops were facilitated nationally and offered locally.

Communication: Communication challenges were widely reported as a contributing factor towards PrBL provision. Additional detail was captured through the NES AHP PrBL survey and addressed within the collaboration for revised UoS P&O PE Training to increase clarity on communication responsibilities for both UoS and placement sites. Engagement with the new Scottish AHP PrBL Virtual Community was actively promoted.

Impact

Engagement Impact: Initial engagement was achieved through connections with stakeholder groups with scoping interviews and meetings.

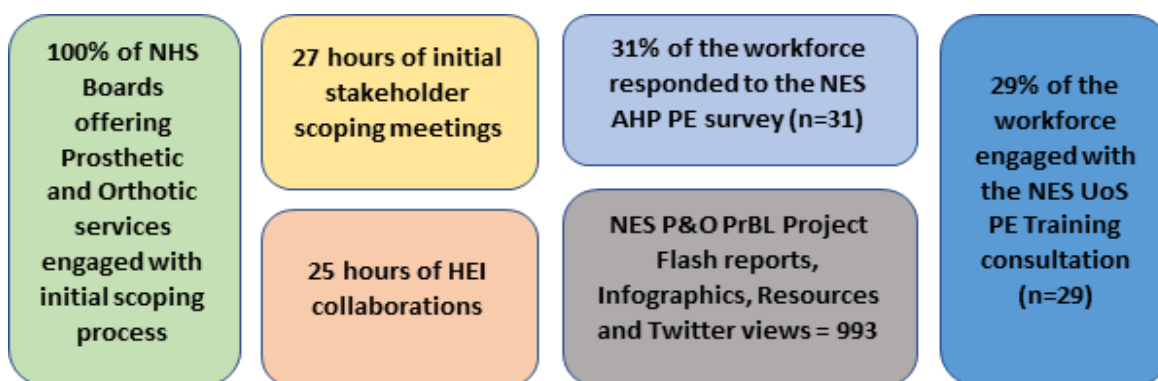


Figure 9: Prosthetics and orthotics engagement impact

Educational Impact: Support sessions were greatly appreciated. Evaluations (n=28) demonstrated agreement that learning objectives were met in terms of increased awareness, knowledge, and confidence for:



Figure 10: Prosthetics and orthotics educational impact

Performance Impact: UoS / PE consultation for reviewed PE training was novel for all involved, with participants reporting high satisfaction and intent to seek out future opportunities to collaborate. A blended online PAL model was successfully piloted across NHS GGC Adult Orthotics and remains in practice for their next student cohort.

Service Impact: For the first time in over six years, orthotic placement offers were made by NHS Highland. In total, NHS Scotland services offer 180 prosthetic PWs and 486 orthotic PWs annually. Unfortunately, not all offers are utilised due to the placement allocation model (previously discussed) which skews Red/Amber/Green (RAG) data. No student failed to graduate due to a lack of placement.

Project Objective Achievement: Whilst there is early evidence of engagement with alternate models of PrBL and increased sustainable placement offers, the project clearly outlines the complex workforce and programme structure and highlights the unique P&O PrBL differences and challenges.

Learning / Recommendations

- Capacity for increasing Scottish prosthetic placements is limited, therefore, UoS are reliant upon prosthetic placements outside Scotland. Funding needs to be available for Scottish students to engage with the necessary PrBL opportunities.
- Not all orthotic offers in Scotland are utilised by UoS which impacts on the ability of PEs to develop skills for supporting facilitation of learning. It would be beneficial if UoS could promote and prioritise Scottish offers.
- Due to the small size of the workforce, both professions would benefit from opportunities to share PrBL-related developments across Scotland, such as outcomes from piloting different models. The new Scottish AHP PrBL Virtual Community may be a platform to enable this.
- UoS and PEs have benefitted from collaborating and feel more engaged with each other. They should continue to reach out and encourage this.

For more information on this project see: <https://api.ltb.io/show/ABRRC>

2.9 AHP Practice-based Learning (PrBL) Recovery: Radiography 2023

Situation / Background

Covid restrictions limited many Allied Health Professions (AHP's) ability to provide quality PrBL experiences for students. Radiography managed to maintain capacity for quality student learning environments by being adaptive both to the needs of the students on clinical placement and to the restrictions placed upon them by the global Covid-19 outbreak. Please refer to the workstream report for the overriding background.

To maintain and increase PrBL capacity there needs to be an adequate resource and supply of quality Practice Educators (PEs) with robust support resources for all PEs to access and be signposted to. Without sufficient numbers of PEs actively participating in PrBL, there is a risk to a decline in PrBL capacity which will impact on the future Radiographic workforce supply and newly qualified graduates' preparedness to practice. We needed to address each of the project title components to maintain and increase capacity of PrBL experiences in radiography whilst responding to challenges of Covid-19 Pandemic.

- Recovery: not a direct need as radiography maintained its capacity for PrBL
- Modernisation: evolving the models of learning utilising peer assisted learning (PAL)
- Diversification: developing the PE training to suit demands
- Sustainability: futureproofing the profession

Current Situation: Radiography, as with all AHPs in NHS Scotland is currently facing a staffing crisis. Unison, Scotland comment that it is a shortage induced by Brexit and pre-pandemic planning being utilised now, among other factors(<https://unison-scotland.org/wp-content/uploads/NHS-staffing-crisis-an-introductory-note.pdf>)

We need to deliver quality learning environments for our students. There is direct correlation between quality learning and quality teaching by the PEs in a clinical environment. In June 2022, a survey of all Allied Health Professionals (AHPs) was carried out and the initial scoping exercises identified that radiography maintained the capacity

for PrBL for their students without marked deficit. This was due to adjustments in the working day hours and variation in days attended by students to comply with Covid social distancing requirements.

Purpose of Project: The AHP survey highlighted the deficit in PE numbers to deliver the needs of the students. Staff reported lapse in up-to-date training, poor staffing levels and lack of managerial support in providing protected time. The aim of the project was to increase uptake of PE role and expand the knowledge of PEs to deliver modern and diverse PrBL experiences. NHS Greater Glasgow and Clyde (GG&C) was identified as a test site for proposed change ideas due to engagement and the Practice Educator Lead (PEL) position in the organisation.

Stakeholder Group: A Stakeholder Group was formed. The stakeholder group had representation from Clinical Radiographers, Higher Education Institute (HEI) programme leaders, Scottish Radiology Transformation Programme (SRTP), student radiographers and professional body representation from the Society of Radiographers (SOR).

Questions were put to the stakeholders:

- What is current situation?
- What would better Practice Education look like?
- How do we achieve this?
- How do we promote the PE role?

The group highlighted

- the need for more PEs with greater recognition of the role
- clarification of what a PE is by adoption of NES values (Inspiring, Empowering, Adaptive, Collaborative, Engaged and Engaging)
- Wider dissemination of educational resources and where to find them for PEs
- Managerial support for PE role and its importance to CPD, HCPC Compliance for Fitness to Practice.

Task and Actions

Formation of a Short Life Working Group

A short life working group was established from within the stakeholder group to discuss the definition of a PE. Differing definitions between HEIs and professional bodies were acting as a barrier to engagement in becoming an PE. Were radiographers PEs or assessors? Subsequent meetings delivered potential solutions. The group decided to utilise the NES definition and to promote the SOR Practice Education Accreditation Scheme (PEAS) which is nationally recognised and is transferrable throughout the UK. PEAS has not had a great uptake in Scotland [SOR reports uptake in England – 78.5%, Scotland – 4.3%, NI – 14.2%, Wales – 2.8%], so promotion of this will be paramount to ensure all PEs are accredited to the same standard. Attendance at HEI's assessor workshops in conjunction with completion of the TURAS module, Being and Becoming a Practice Educator will be recognised as evidence for the non-formal route to PEAS by SOR. The SOR representative took this proposal to relevant SOR committees.

The aim is to standardise the terminology and process required to becoming a PE in Scotland to reduce potential barriers and increase engagement.

The number of PEs needed to be increased so a test of change was initiated to acquire this.

Action 1: Implementation of a Test of Change

Test of Change in Greater Glasgow and Clyde (GG&C) PE engagement and recruitment: a questionnaire was emailed to all radiographers in GG&C to assess the knowledge of PE role and to determine numbers of PEs. Responses were anonymised. All data was recorded and stored in compliance with GDPR, tailored by the Data Protection Act 2018. Due to time constraints, this was not a national roll out.

Charts available on the Learning Stack demonstrate the change in PE demographic within GG&C from September 2022 until December 2022. The promotion of PE role and uptake was advertised via flyers and all radiographers in GG&C were invited to a presentation at GG&C Continuing Professional Development (CPD) group. Before promotion there were

5.4% radiographers in GG&C recognised as PE's. After the promotion there were 8.5% (an increase of 3.1% which is 19 more PEs in place). There is direct correlation between number and quality of PE's delivering PrBL as increase in numbers lessens pressure on individuals allowing a more nurtured and holistic environment for learning. Awareness and participation in the TURAS module will deliver a higher quality PE. Resources for education and development of PEs are readily available on TURAS.

Action 2: Guidance to resources for all PEs

All radiographers will be directed to TURAS where there are a range of resources to support AHP PrBL. An AHP PrBL Virtual Learning Community has been set up for all involved in AHP Practice Education to access and allowing them to share resources and learning nationally.

Action 3: Drop-In Clinic and Virtual Community Developed

A 'drop-in' clinic is in process of development by the Radiographer PEL, HEI member and PE Facilitator. A Radiography PrBL virtual community has been set up as a point of contact for all radiographers in the PE role. This will improve quality of learning through discussion with peers. The link to it has been shared on multiple teams throughout Scotland.

Action 4: Continuation of Stakeholder Group

This project recognised the important role of leadership support in ensuring sustainability of actions. Radiography Stakeholder Group will continue to maintain communication for changes/developments within Radiography after tenure of NES project. All participants in group were invited to sustain the group via a poll and all agreed to continue.

Action 5: Developing New Models of Education: Peer Assisted Learning (PAL)

A short-term test of change was introduced to one radiology department (Royal Alexandra Hospital, Paisley). PAL model was trialled over a 6-week period. This was first trial of PAL in Radiography in Scotland. Feedback from questionnaires was analysed and a positive qualitative response was received. Quantitative evaluation via Visual Analogue Scoring (VAS) gave an average of 10/10 from the student cohort and an average of 9.25 from PEs

involved. This is a truly trailblazing approach to developing learning strategies within radiography. It brings radiography in line with many other AHPs that have adopted this system of learning. PAL is to be tested in radiography multi-site trial commencing this year. National roll-out planned with radiography adopting this learning model concomitant with other AHPs.

Impact

Educational: Consistent definitions and terminology have contributed to increased recruitment to role of PE with increased access to resources and ultimately increasing the confidence of the PE. Documentation of enrolment/completion of TURAS PE module is being developed. PAL has promoted a degree of independence to students on placement which has been evidenced in comments from the questionnaire. Learning stacks were developed and used at the Be Appreciated, Be Connected, Be Inspired Hybrid Conference and provide ongoing access to a range of information and resources:

<https://api.ltb.io/show/ABSQS>. Infographic flash cards have been sourced from SOR to aid students with additional learning needs i.e. Dyslexia.

Service: Facilitated by the introduction of more PEs, evidenced in a recruitment campaign. Data has been analysed with Microsoft (MS) Excel and showed exponential increase in numbers of PEs from start of promotion of PE role in radiography.

Performance: Demonstrated by increased uptake in role of PE by 3.1% in GG&C. Upscaling and proliferation should be next steps.

Engagement: Defined by a multi-disciplinary approach to the issues raised and the collaboration adopted by each discipline. Agreed continuation of stakeholder group. Poll conducted via MS Forms.

Learning/Recommendations

- Radiography PE “drop-in” clinics to support and assist radiographers nationally are in early stages of development, taking the form of an open forum for discussion.
- Uptake of PEAS to be promoted with the backing of SOR.
- Promotion of engagement in use of Radiography PrBL Virtual Community (15 members since launch on 8th February 2023); and participation in AHP PrBL Virtual Community.
- Encouraging all radiographers to be trailblazers in their profession, including consideration of new models and methods of PrBL delivery. Glasgow Caledonian University are facilitating a multi-site PAL project and radiography PEL hopes to provide ongoing support.
- Continue to promote a culture shift in radiography to encourage all radiographers to become PEs.

2.10 AHP Practice-based Learning (PrBL) Recovery: Speech & Language Therapy 2023

Situation / Background

The COVID-19 pandemic significantly disrupted speech and language therapy (SLT) student practice-based learning (PrBL) placements. At the height of the pandemic, 189 PrBL weeks were lost to COVID and one third of SLT students were in danger of deferring graduation. This was narrowly averted but many PrBL opportunities lost during the pandemic were not recovered, significantly reducing PrBL capacity.

This was in the context of a recruitment crisis, where 108.4 whole-time equivalent (WTE) SLT vacancies were recorded in the December 2021 workforce census with 91% of SLT managers reporting recruitment as having become 'much more challenging' in the last three years. Additional stressors on the supply of SLTs included the ageing profile of the profession (median age 42) whereby 13.8% of SLTs are aged 55 and over. A pressing need was evident to enhance PrBL capacity to support a higher intake of SLT students to address the significant undersupply of SLT.

Further pressures on PrBL capacity included the development of eating/drinking and swallowing competencies for the 2026 SLT student cohort within existing placement hours.

The aim of the project was to increase the number of high quality and diverse PrBL opportunities for students so that we could develop and maintain a skilled and sustainable future SLT workforce.

Task

In order to identify the key challenges to expanding PrBL capacity for SLT students a series of scoping exercises were undertaken including focus groups, polls, workshops, meetings with service leads and a targeted survey.

Lack of training, insufficient knowledge and skills, and poor confidence were cited as the primary barriers to providing placement by survey respondents. Some respondents reported that offering a placement was inappropriate at their level of band. Qualitative data gathered at stakeholder workshops identified additional barriers including short placements, the need for streamlined paperwork across both HEIs, a focus on traditional placement models, fragmented access to resources/information, insufficient collaboration with HEIs and poor understanding of how students can add value to SLT services. Scoping also indicated a number of clinical settings that had traditionally not taken students due to the perceived complexity of the caseload. Sites identified included many Children and Adolescent Mental Health Service (CAMHS) settings, the prison service, and a number of adult learning disability services.

Finally, a poll at the project's first stakeholder meeting indicated that significant numbers of stakeholders felt that the current PrBL model was working well and did not see the need to change the current system of placement allocation.

The project aimed to adapt and develop new opportunities for PrBL by:

- Raising awareness of PrBL and the urgent need to change the current model
- Increasing the knowledge and skills of Practice Educators
- Sharing models of good practice
- Facilitating strong links between Higher Education Institutes (HEIs) and clinical teams
- Expanding diversity of placement models and placement settings
- Identifying and developing resources

Actions

One of the project's key initial actions was to raise awareness of the urgent need to address PrBL capacity. The links between diminished PrBL capacity in the context of a recruitment crisis and the need to increase the intake of SLT students was not widely

appreciated across the profession. Meetings were held with service leads across Scotland to underline the pressing need to enhance PrBL with an emphasis on the recruitment crisis and the risk that presented at profession and service level.

A dedicated stakeholder group committed to supporting practice education and identifying key solutions was established. This broad group included SLT service leads, practice education co-ordinators, practice educators, the Royal College of Speech and Language Therapy (RCSLT) lead, both HEIs, the independent sector, and students. Key priorities for the group were identified including, sharing models of good practice, raising the profile of PrBL, facilitating strong links between HEIs and clinical teams, and embedding PrBL into job planning with the ultimate aim of increasing and expanding PrBL opportunities.

One of the projects key aims was to expand the diversity of placement type and to support clinicians to move away from traditional 1:1 placements. Clear enthusiasm for developing knowledge and skills about Peer Assisted Learning (PAL) placements was evident. In response to this, in collaboration with the HEIs, the project developed a series of SLT specific PAL workshops across Scotland. The purpose was to train a critical mass of SLTs so that PAL would become the default placement model for SLT Practice Educators. A Teams channel was set up to support SLTs new to PAL. This offered opportunities to share resources, seek support, jointly problem solve and network with other practice educators. A drop-in clinic was arranged midway during the third-year placements to provide direct support to clinicians new to PAL. In addition, both HEIs developed training for students so that they knew what to expect from a PAL placement and how best use this model to meet their learning needs.

Newly trained PAL clinicians provided practice educator support to University of Strathclyde's Intensive Aphasia Comprehensive Programme, a remotely delivered, student led intervention. This innovative placement model provided a feasible alternative to on site clinical placement. Skilled practice educators, using PAL principles were able to facilitate support tailored to the students' stage of clinical education.

To promote the idea that PrBL can take place in any setting or specialism, three pilot placements were trialled in CAMHS, Adult Learning Disability and prison settings. These were clinical settings that had traditionally not taken students, largely due to the perceived complexity of the caseload. Focus groups were undertaken prior to the pilots to identify clinicians' reservations and anticipate what additional supports and resources were required.

The need for a one-stop shop where SLTs could access the PrBL resources and information they needed was cited frequently as much needed support. Other Allied Health Professionals (AHPs) across the recovery project raised the same concerns. In response an AHP virtual community was established on Teams with the purpose of supporting practice educators and all involved in practice-based learning in Scotland to network, connect, work together, and share experiences/ resources. The development of an SLT specific channel is planned.

To maximise project impact, in collaboration with University of Strathclyde a webinar to sustain and nurture PrBL in Greater Glasgow & Clyde, Scotland's largest board was held where locality teams made live placement pledges for the following academic year.

Impact

The impact of the recovery project in meeting its objectives of increasing the diversity in placement type and settings, increasing the skills set of SLTs and raising the profile of PrBL can be seen in the metrics below.

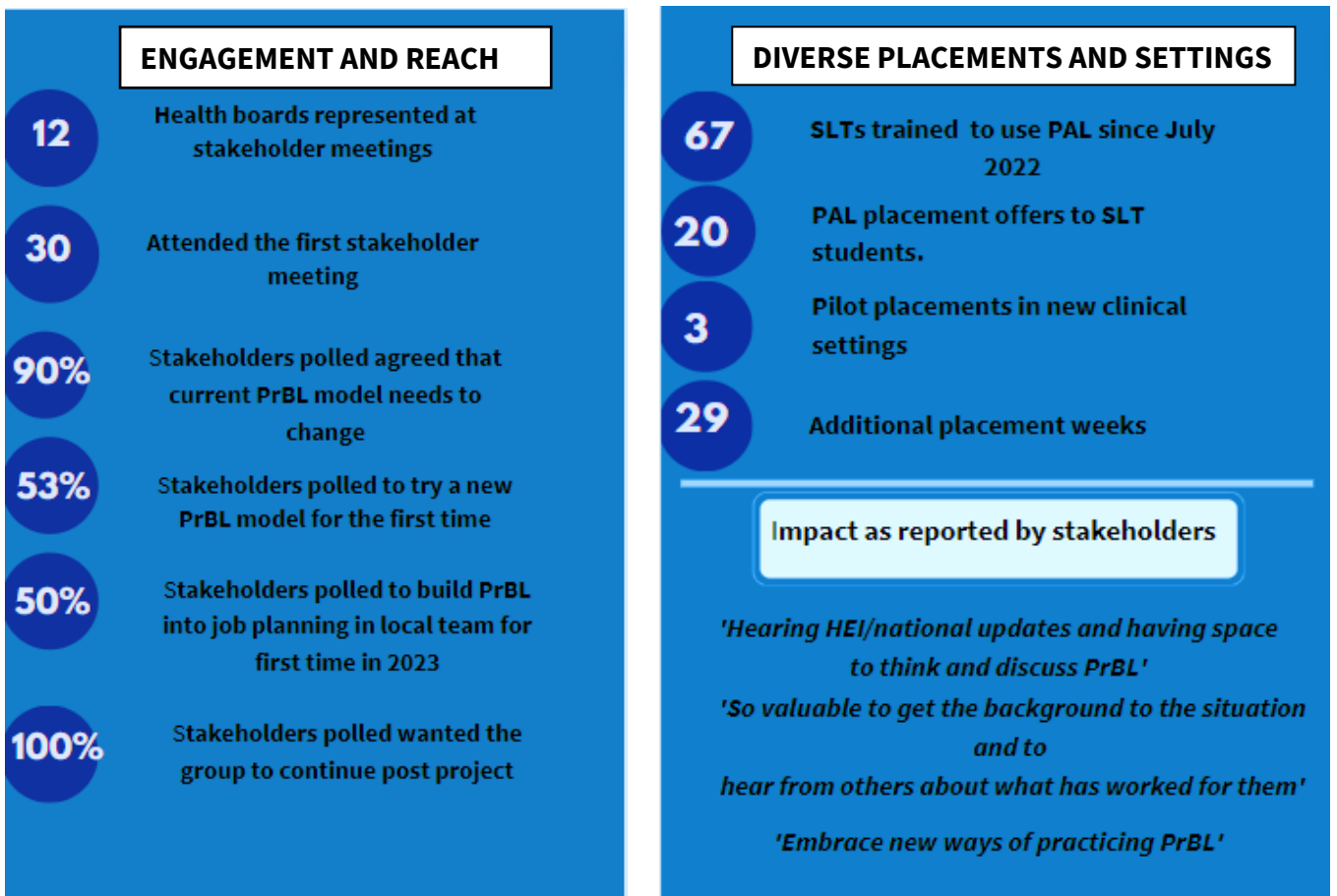


Figure 11: Speech and language therapy project impact

Through regular meetings with a highly engaged stakeholder group, the project significantly strengthened the links between the HEIs and practice educators. Clear tangible benefits have emerged as a result with both HEIs committing to streamlining their paperwork to reduce the workload of the practice educator and a commitment to co-ordinate the timing of placement requests to allow teams to plan a little better.

The impact of three pilots, with extremely positive feedback from Practice Educators, HEIs and students illustrates powerfully that PrBL learning outcomes can be met in all clinical settings. Learning from these pilots can disseminated across the profession to support further PrBL opportunities in similar settings. These pilots reflect how the SLT role has expanded and changed and provide the opportunity to develop competencies for working in complex systems.

Learning / Recommendations

- The stakeholder meetings have been a powerful platform to promote PrBL and to jointly develop a vision about how best to nurture and sustain PrBL across Scotland. It is important that the meetings continue post project and to this end a three-year sustainability plan has been developed
- A real appetite to use new PrBL models, particularly PAL has emerged among SLTs. To sustain the momentum, continued access to PAL workshops is crucial. During the project, both HEIs helped deliver workshops and a tentative plan is in place to creating a rolling timetable possibly in collaboration with board PELs
- Learning from the 3 pilots needs to be widely shared to enhance PrBL capacity. This will support shifts in thinking about how best to meet learning outcomes in clinical settings that are considered ‘too specialist’
- Insurance questions about long armed supervision need to be clarified. Opportunities have been lost (NHS 24 role emerging placement) as a result of uncertainty around indemnity cover. This also makes it harder to pursue potential placements in the charitable, health and education settings
- The impact of the cost-of-living crisis particularly on placements where students have to travel needs to be considered in order to support students who may be financially struggling due to additional costs

Further information is available at <https://api.ltb.io/show/ABSGU>

2.11 AHP Practice-based Learning (PrBL) Recovery: Cross / Third Sector 2023

Situation / Background

Allied Health Professions (AHP) education programmes are required by the Health and Care Professions Council (HCPC) to include Practice-based Learning (PrBL) as a principal and integral part of the structure and framework for learning. Higher Education Institutions (HEIs) must manage the governance around this PrBL provision, and HEIs should “make sure that learners have access to an appropriate range of practice-based learning experiences which reflect the nature of modern practice and the range of practice settings of the profession they are preparing to enter” (HCPC, 2017 p.38).

The scope of this project was to support the sustainability of the increase in offers and range of PrBL offers made. Where numbers of PrBL offers were satisfactory the focus was on further developing diverse placements opportunities in keeping with new ways of working, and the requirements of HCPC for PrBL in AHP pre-registration education. The scope of the project includes working closely with NHS Education for Scotland (NES) infrastructure projects, and resources created. The scoping and networking activities carried out by the cross / third sector Practice Education Lead (PEL) from September 2021 identified that several cross / third sector organisations nationally are seeking to employ AHPs within their organisations to enhance their existing service provision. For the purposes of this project cross-sector means working across organisations including third sector (voluntary organisations and charities), private organisations and other non-health organisations.

Stakeholders for this project were identified from previous findings from NES studies, established NES networks, and Scottish Government funding programme key contributors. Stakeholders were also identified using networks created with existing Board PELs, Uni-Professional and Infrastructure PELs. The NES cross / third sector PEL identified current professional networks to determine people and organisations who might have a professional interest in the project.

A NES Cross / Third-sector Stakeholder Placement Recovery group was formed with the purpose of ensuring a consistent, collaborative approach to cross-sector placement recovery through consideration of the four pillars of practice, a shared sense of responsibility, and ensuring the maintenance of quality PrBL placement development, informed by the Quality Standards for Practice Placement and student evaluation. This group met quarterly for the duration of the project.

Task

In keeping with the aim of the NES AHP Placement Recovery programme, the cross / third sector project aimed to apply examples of good practice to offering PrBL experiences for pre-registration AHP students within other organisations and settings i.e. non-health, whilst ensuring the quality of the PrBL is maintained. It also identified settings and organisations who, until that point, hadn't considered offering pre-registration AHP student placements and who were now prepared to do so. This allowed the project to identify the modern and diverse nature of current and potential AHP PrBL opportunities.

Scoping identified that there are no AHPs in some organisations who can offer formal Practice Educator (PE) supervision and assessment of placement learning outcomes. Therefore, another method of delivering formal supervision and assessment would be needed, for example using long arm supervision (LAS). Long arm supervision refers to the process whereby a supervisor (practice educator), who is located at a distance to the practice learning area, takes responsibility for supervising and supporting the student, (NES 2013).

Placement preparation was acknowledged in terms of the amount of time and work it takes. Within the cross / third sector the preferred methods of placement delivery/type were Peer Assisted Learning (PAL), and project placements.

As the projects progressed, and Scotland was experiencing post-COVID economic crisis, the issue of the cost-of-living crisis was identified by HEIs as having a significant and detrimental impact on students' ability to take up face to face/one to one placement, or any placements that required travel and subsistence costs.

Actions

A framework for creating, growing, and sustaining placements was developed based on work by Janet Thompson, Occupational Therapist in NHS Grampian. This drew together the examples shared of good practice in offering non-conventional or atypical placements and provided a template that could be used, amended, and further shared by organisations. The framework was refined based on the outcomes of each small cross / third sector pilot project. A 'Placement Delivery Package' was created which included checklists for long arm supervisors; steps/timetables to be followed; resources that could be used by PEs and students as part of placement preparation and delivery; tutorial support; and suggestions for how PrBL outcomes can be evidenced by students in non-clinical settings.

Small pilot studies were created to trial and evaluate models of PrBL delivery using the emerging framework within selected organisations using a Plan, Do, Study, Act approach to testing change and improving quality. Areas of current good practice were sourced and evaluated with a view to informing these smaller pilot projects. Each small pilot project was evaluated using a qualitative approach and the findings used to inform the aims of subsequent cross / third sector pilot projects. The findings were shared with the stakeholder group members and disseminated via stakeholder networks, HEIs and other means such as social media and roadshows/workshops. These findings were also subsequently shared with new cross / third sector placement providers taking part in the projects, as well as with any potential cross / third sector placement provider who had approached NES for support with developing their PrBL opportunities for AHP students.

There was a firm focus on LAS as part of the NES cross / third sector pilots as there are few AHPs employed within the third sector/non-NHS organisations in comparison to the more conventional placement setting of the NHS. Those organisations who do have AHPs already offer and support the maximum number of placement hours as possible.

Therefore, the LAS PE role was scrutinised, trialled and developed as an integral part of the overall project.

Impact

The cross / third sector project applied examples of good practice to offering PrBL experiences within five cross / third-sector organisations. These organisations were Braid Health & Wellbeing, West Lothian; Central Scotland Adventures, Lanarkshire; Simon Community Scotland, Lanarkshire; a Highland Education location; and Eric Gray Centre, Shetland. It also identified settings and organisations who, until that point, hadn't considered offering pre-registration AHP student placements and who were now prepared to do so. This allowed the project to identify the modern and diverse nature of current and potential AHP practice opportunities.

The five cross / third-sector organisations who volunteered to host these pilot projects, each did so with varying degree of NES support. All cross / third sector pilot project placements were developed as new role emerging opportunities within each organisation, had hybrid or blended attendance, PAL, long arm supervision via NES, and a project component. From June to December 2022, these were primarily occupational therapy and physiotherapy focussed. During this period 22 students attended full time placements totalling 158 weeks. From January to March 2023, placements were occupational therapy and podiatry focussed with two students each attending an 8-week full time placement, and a further 30 students attending for one day over a 6-week period.

The cross / third sector projects created surplus PrBL hours which weren't required by any of the HEIs therefore supporting the immediate needs of placement recovery and graduates entering the workforce in a timely manner.

The cross / third sector organisations all valued the opportunity of being able to offer AHP pre-registration student PrBL and all had clear ideas for projects that could be carried which were authentic in contributing to the service they provided. They welcomed the support from the NES PEL and resources created; and recognised the benefit of regular communication and building a relationship with the HEI, which can continue to be developed overtime. Clear links were established between cross / third-sector organisations and HEIs as part of the sustainability for future PrBL offers and provision.

Students' perceptions of LAS are captured in the relevant NES AHP PrBL Recovery Project Uni-professional reports. The majority of students who provided feedback stated that they felt supported on placement; found the resources provided and resource tools, such as a dedicated Microsoft Teams page, useful or very useful; and all praised the support they received from their PE. Suggestions were also provided to support placement provision improvement.

Learning and Recommendations

Long Arm Supervision: It should be noted that the purpose of the NES AHP Placement Recovery Programme was to recover placement hours for AHP pre-registration students and as such the cross / third sector project met this need. However, the outcomes and results were possible because the NES cross / third sector PEL, and Uni-professional PELs (occupational therapy and physiotherapy) were available to act as, or source, long arm supervisors. As a sustainable aspect this needs to be further supported if these pilots can be replicated as ongoing offers.

For the project outcomes to be sustained it is important to understand the perceptions of the role including the challenges and benefits. The feedback from the LAS PEs in the pilot projects is that several things went well including support from NES and other PEs, the opportunity to access the pre-placement preparation where it was needed, regular contact with other PEs, and a high standard of student engagement and performance. LAS was described as real-world learning in which students benefited from being more responsible for their learning.

Drawbacks from the LAS PE perspectives include the sense of being overwhelmed with information during the preparation stage of the placement, which must be balanced with the PE's main working role and duties. Unsurprisingly, more time and more support from HEIs were offered as suggestions for improving this.

The relationship between the LAS PE and the placement provider is viewed as crucial to the success and sustainability of these placements. When combined with PAL placement

delivery one LAS reflected that keeping student numbers within manageable limits is vital for the PE to allow them to balance placement delivery with their work role.

Further consideration should be given to long arm supervision and how this may be provided more robustly. Huge potential for PrBL opportunities within cross / third sector organisation have been identified, however not all organisations are necessarily in a position (financially or otherwise) to prepare for AHP pre-registration students. This is, to date, an untapped and underdeveloped source of AHP PrBL opportunities which could make a significant contribution to the education of AHP pre-registration students, would support the broadening of the AHP service provision and promote an understanding of working across NHS and cross / third-sector services. The consistent message is that cross / third sector organisations and the HEIs wish to develop and build PrBL opportunities which takes time and workforce to facilitate.

Discussions with HEIs suggest that having the framework for these placements in place will assist but as a LAS list of PEs doesn't exist then they may have to rely on their existing infrastructure at present. Opportunities that may be explored further in the future are outlined below.

Discussion with Health Education England AHP colleagues has identified the development of long arm supervisors using a bank staff system (currently being piloted and evaluated). This would allow payment to happen - e.g. for non-NHS AHPs but also for those NHS AHPs who perhaps work part time and would like to earn extra money or develop their CPD (where their substantive post doesn't allow for this). The outcomes of this project could be applied within Scotland if found beneficial.

An interesting and long- term discussion within the stakeholder group was around targeting retiring AHPs to act as long-arm supervisors, using the notion of a 'Flying Finish' scheme. This would allow the retiring AHP to scale down clinical work with PE responsibilities and a stepped down approach. This would perhaps mean that the PE role would be their final formal role and potentially one which they could continue, on a bank staff basis, after their formal retirement.

Resource to support ongoing development: The NES Cross / Third Sector Stakeholder Group recognised the value of the cross / third sector PEL role and highlight the need for identified capacity to support the continuation of the NES projects. Some cross / third-sector PEs commented on the excellent support they received and one further commented that “knowing NES were available in addition to HEI was useful” in establishing a PrBL offer and placement delivery. The NES cross / third sector project has allowed for resources to be developed to support the sustainability of the placements created; this includes a cross / third sector placement framework and a placement delivery package all of which will be distributed to relevant University programme placement leads, placement organisations and PEs.

Raising awareness of new opportunities: Others made the suggestion of raising the profile of cross / third- sector organisations so that non-NHS placements are held in the same regard as NHS ones by both students and AHP PEs. The NES Cross / Third sector Stakeholder group has allowed this to be raised and discussed as an open and honest starting point. It also allowed examples of good practice to be shared and disseminated giving an opportunity to raise awareness of the benefits of PrBL within third sector and non-NHS settings so seen as the valuable PrBL experience it is by PEs and students alike.

Further recommendations target the longer term and are made in support of the work of each HEI. Feedback from placement providers and practice educators suggest HEIs should continue to offer robust preparation to students particularly around atypical modes and methods of placement delivery so that they can prepare for the modern and diverse practises within the wider job market e.g. hybrid and virtual working patterns. This would support students in managing their expectations for placements in non-healthcare settings. As new areas of modern practice are opening up for graduate AHPs, the need for placements to diversify in a sustainable way is needed. The NES cross / third sector projects offered quality PrBL opportunities that reflect this emerging practice area. Continued stakeholder engagement and collaboration will be vital to continue to take this forward and ensure sustainability.

Further information is available within the learning stack: <https://api.ltb.io/show/ABSQX>

2.12 Practice-based Learning (PrBL) Recovery: Infrastructure Project 2023

Situation and Background

A robust infrastructure is necessary to support AHP Practice Based Learning (PrBL) across Scotland, both in the recovery phase from the COVID-19 pandemic and in the ongoing modernisation, diversification, and sustainability of AHP PrBL delivery.

Purpose

The purpose of this project was to further develop the existing AHP PrBL infrastructure that supports the delivery of quality PrBL across Scotland.

Scope

In scope for this project:

- AHP wide interventions supporting PrBL delivery across all sectors in Scotland
- Practice education learning and development for AHPs across Scotland

Out of scope for this project:

- Specific requirements for cross / third sector PrBL governance and delivery

Stakeholders

- NHS Education Scotland (NES)
- Higher Educational Institutions (HEIs)
- Uni-professional Practice Education Leads (PELs)

Task

- Scoping methods

Three surveys were conducted:

- ❖ Practice Education survey – Evaluation of ‘Being and becoming a Practice Educator’ carried out by Dr Jane Hislop
- ❖ 6 of the Uni-professional projects carried out Practice Educator surveys within their own professional groups (n=624 responses)

❖ Health Care Support Workers as Practice Educators survey (n=330 responses)

- Stakeholder discussions
- Search of available resources to support AHPs delivering PrBL in Scotland
- NHS Education for Scotland (NES) Nursing Midwifery and AHP (NMAHP) directorate dashboard review of TURAS resource interaction

Key findings

- No central repository for resources and information to support AHPs delivering placements in Scotland
- Poor engagement with existing 'Being and becoming an AHP practice educator' learn site with individuals spending less than 13 minutes on the site
- Current culture surrounding PrBL does not consistently:
 - ❖ value the role of the practice educator
 - ❖ prioritise learning and development required to support PrBL
 - ❖ promote shared responsibility for delivery of PrBL
- Building the capacity and capability of the AHP workforce to deliver peer-assisted learning (PAL) placements could positively impact placement capacity across professions

Aim

This project aimed to work collaboratively with stakeholders to:

- improve accessibility to resources that support AHP staff to deliver PrBL
- provide a framework supporting AHP development as practice educators throughout their career
- positively influence the culture surrounding being and becoming a practice educator and the delivery of PrBL

Actions

By May 2022:

- Identify stakeholders establishing a stakeholder group, meet 6 weekly

By April 2023:

AHP TURAS Learn site

Develop the [AHP TURAS PrBL Learn site](#) using and building on key content from the previous Knowledge Network AHP Practice Education community of practice

- Addition of new and relevant content
- Promote available resources through PEL networks and other means e.g., use of social media and across all sectors
- Evaluation of AHP TURAS PrBL Learn site

AHP Practice Educator Framework

Build on existing PE frameworks to develop a resource suitable for all AHPs across all bandings inclusive of learners and non-registered members of staff

- Collaborate and consult with stakeholders and the wider AHP community to gain agreement on content and use of framework to guide Practice Educator development across the [NMAHP career development framework](#)
- Utilise the framework improve the culture and value around being and becoming a Practice Educator
- Promote the PE preparation framework across all networks and sectors as a tool to facilitate career and personal development plan discussions
- Consider PE preparation opportunities aligned to the framework

Peer Assisted Learning (PAL) - see PAL report

TURAS AHP Practice Educator preparation learn programme

- Collaborate with NES and HEIs to further develop the existing 'Being and becoming an AHP Practice Educator " learn site into a learn programme with trackable data and completable pages
- Promote and share the learn programme with guidance regarding target audience and expectations for its completion

Influence cultural change through governance processes and awareness raising

- In collaboration with all stakeholders consider potential changes to the AHP PrBL partnership agreement wording that specifically values the role of Practice educator and the importance of PrBL delivery within Scottish health boards
- Initiate an AHP Practice Educator recruitment campaign using the four PrBL consensus statements
- Production of a nationally available SWAY detailing PE development opportunities circulated and promoted widely via social media and email

Impact and Outputs

Outputs

- Draft Band 2-8A practice educator development framework ready for consultation process
- AHP TURAS PrBL learning site accessible to all AHPs across Scotland
- TURAS AHP practice educator preparation learn programme (Being and becoming an AHP PE) which includes completable pages and accessible data
- Wording changes to AHP PrBL partnership agreement supporting and valuing the practice educator role ready for agreement refresh in 2024
- AHP PE communication toolkit launched to raise awareness of the PE role and recruit those who currently do not contribute to PrBL delivery

Engagement impact

- Survey of Health care Support Workers (HCSW) and their role in practice education (n=330)
- Draft PE development framework – ongoing consultation
- Consultation with Scottish AHP PrBL Stakeholder group and Scottish Directors of AHPs group regarding wording changes to AHP PrBL Partnership Agreement supporting the PE role. Both groups supportive of changes
- TURAS learn site engagement April 2022 – January 2023:
 - ❖ 545 views of AHP PrBL Models and Modes of delivery page
 - ❖ 1907 views of AHP Practice Based Learning (PrBL) page
- TURAS learn site evaluation by uni-professional and board practice education leads (PELS)
 - ❖ 3.92 (out of 5) for how easy it is to find the AHP learn site
 - ❖ 4.08 (out of 5) for how easy it is to find PrBL specific information

Learning and Recommendations

- Expression of interest to explore further development and spread of AHP HCSW roles within PrBL
- Expression of interest to explore flying finish/late careers within the PE development framework to further enhance PE capacity across Scotland
- Promote the PE development framework and embed its use within practice
- Progress the PE recruitment campaign through phased approach
- Link and develop practice educator preparation opportunities mapped to all levels of the PE development framework
- Develop and embed robust governance that supports long arm supervision in practice
- Maintain, promote, and further develop the AHP PrBL TURAS learning site

Further information is available here: <https://api.ltb.io/show/ABSRV>

2.13 AHP Practice-based Learning (PrBL) Recovery: Peer-Assisted Learning 2023 (Subsection of Infrastructure report)

Situation / Background

The Allied Health Professional (AHP) consensus statements state “a wide range of student supervision models can be used to deliver, and support practice-based learning.” In response to this statement, an AHP national working group was set up in 2018 to explore and implement peer assisted learning (PAL) placement models. The focus being on enhancing the quality of student learning experiences but also the opportunity to diversify student practice-based learning (PrBL) experiences across Scotland to increase future capacity.

Benefits of PAL include increased student confidence; reduction in student anxiety; enhanced team working skills; augmented learning opportunities and reduction in clinical educator workload and stress. It is recognised for the benefits of PAL to be optimised; practice educator education is necessary (Carey 2018, Markowski 2021, Sevenhuysen 2017).

Earlier phases of the project developed a workshop to support practice educators to develop the knowledge and skills to plan, deliver and evaluate a PAL placement. During the pandemic, it became necessary to develop existing content into an online resource. This was successfully trialled and evaluated with 5 digital workshops and 78 attendees.

Uni-professional Practice Education Leads (PELs) were employed in 2021 with a focus on placement recovery following the Covid-19 pandemic. Eight of the AHP professions identified the introduction or increase of the PAL model would offer a valuable contribution to placement recovery for their professions.

Purpose

The purpose of this project was to increase AHP practice educator capacity and capability in the delivery of PAL PrBL.

Table 5: Peer Assisted Learning (PAL) scope of project

Scope	Stakeholders
<ul style="list-style-type: none"> • Increase delivery of PAL workshops • Identify resources to support practice educators to deliver PAL 	<ul style="list-style-type: none"> • PAL National Working Group • Uni-professional PELs

Task

Increase spread and sustainability of PAL by:

- Developing the infrastructure to increase opportunities to deliver the PAL digital workshop
- Developing additional resources to support practice educators deliver PAL PrBL

Actions

- Development, delivery, and evaluation of a train-the-trainer programme to enable Uni-professional PELs to deliver PAL workshops
- Streamline administration required for workshops
- Delivery and evaluation of uni-professional and AHP PAL workshops
- Development of resources to support embedding PAL in practice

Impact and Outputs

Development and delivery of a PAL workshop train-the-trainer programme

- 9 AHPs trained through train-the-trainer to deliver workshops

Workshop delivery (June – December 2022)

- 19 workshops delivered (8 AHP workshops/ 11 uni-professional workshops)
- 285 workshop attendees
- Attendees from 13 boards and 2 national health boards and 9 AHP professions

TURAS development of PAL resources:

- Animation
- Videos
- Case studies

Engagement Impact

- Train-the-Trainer
- 100% felt programme was an effective means of upskilling practice-educators to deliver the PAL workshop:

“Good level of training to support delivery of workshops independently”

- Streamlining administration of workshop with Business Support Unit support:

“Having been without support and then with admin support – I don’t now see how this can run without admin support”

- Example of pledge following PAL workshop:

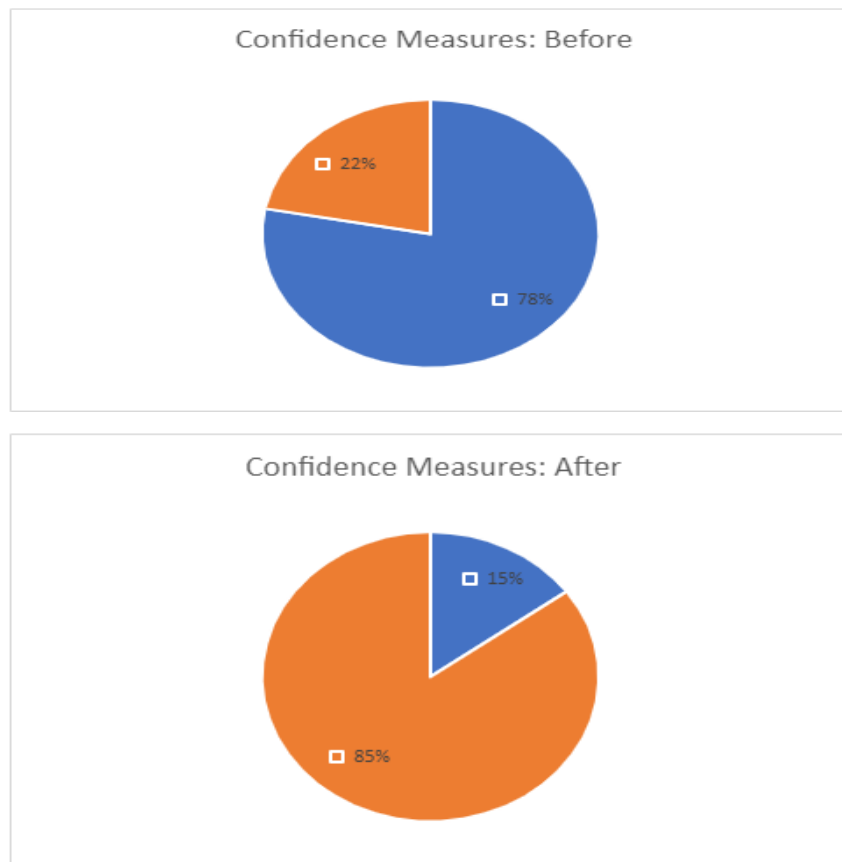
“I will aim to support PAL placement with another staff member”

- Feedback following interactive workshop:

“I am sold, and feel more confident pitching the approach to my team”

Educational Impact

Confidence measures of participants were collected pre and post workshop:



- Not at all confident/ somewhat not confident/ neutral
- Somewhat confident/ extremely confident

Figure 12: PAL educational impact before and after workshop attendance

Evaluation post workshop on knowledge, skills and attitudes:

- 97% report the introductory and main presentation supported learning around planning, delivering, and evaluating a PAL placement

- 92% agreed learning outcomes were met in the interactive session

“Thank you for the session! I feel this has been the most informative and productive Teams/presentation on PAL placement. I feel far better prepared to begin thinking of a PAL placement, and how to plan for such. Definitely recommend this session to anyone who is considering a PAL placement, or even those who currently aren't as they may be convinced!”

Performance Impact

Increased capacity of workshop delivery through train-the-trainer programme:

- 7 AHP NES PELs
- 2 HEI representatives delivered the workshop

Six-month follow up data (early data):

- 37.5% have taken a PAL placement
- 62.5% plan to take one in the future

Recommendations

- Further development of a robust infrastructure to support the delivery of PAL training to further build the capacity and capability around PAL:
 - ❖ Recruitment of Board PELs, champions within boards and HEIs to continue delivery of PAL workshop training utilising the train the trainer model
 - ❖ Ongoing expression of interest post to continue spread and sustainability of practice educator education of PAL
 - ❖ Increase national working group to include HEI representation
 - ❖ Continued administration support from Business Support Unit using agreed procedures
- Evaluation of resources to ensure they meet the needs of AHP practice educators:

- ❖ PAL resources on TURAS e.g., number of times viewed, survey of practice educators, equality and diversity review
- ❖ Ongoing review and evaluation of workshop from practice educator and uni-professional PEL feedback
- ❖ Identify potential gaps in resources e.g., ensure all professions are covered/ explore examples of PAL in new clinical areas e.g., community.

Further information is available here: <https://api.ltb.io/show/ABSYB>

Section Three

3.1 Acknowledgements

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3.2 References

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3.3 Appendices

Appendix 1: Summary of Key Focus, Impact, and Recommendations from AHP PrBL Recovery Projects

Appendix 1 Table 1

Project	Key Focus	Key Impact / Successes	Recommendations
Arts Therapies Learning stack and resources: https://api.ltb.io/show/ABSVK	<ul style="list-style-type: none"> • Improve students' preparedness for clinical placement • Increase confidence and competence of non-arts therapies practice educators (PEs) 	<ul style="list-style-type: none"> • PrBL resource pack developed to support arts therapies trainees (students) coming out to practice, and PEs • Animation developed to encourage and support non-arts therapies PEs to facilitate arts therapies PrBL opportunities • Testing of these resources in two boards 	<ul style="list-style-type: none"> • Complete evaluation of resource pack and animation, and promote these resources across Scotland • Maintain and develop networks of arts therapists in NHS Boards • Review and widen the use of long arm supervision
Dietetics Learning stack and resources: https://api.ltb.io/show/ABSRT	<ul style="list-style-type: none"> • Support implementation of peer-assisted learning (PAL) • Increase capacity through delivery of cross / third sector placements • Develop digital resources in specialist areas 	<ul style="list-style-type: none"> • Content for learning module for paediatric dietitians developed and tested • Delivered five PAL workshops for dietitians 	<ul style="list-style-type: none"> • Develop additional resources to support dietetic PrBL in specialist areas e.g., Mental health etc • Extend use of PAL model throughout Scotland • Continue stakeholder group to drive the recovery of PrBL locally and nationally

Project	Key Focus	Key Impact / Successes	Recommendations
<p>Occupational therapy</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSPD</p>	<ul style="list-style-type: none"> • Support required to enable PEs to utilise new settings, and different models and methods of delivery • Evaluation of value to demonstrate impact 	<ul style="list-style-type: none"> • Myth-busting PrBL roadshows instigated, and a large number of resources developed to support PEs in practice • Wide range of placement models delivered across a variety of cross / third sector organisations resulting in 28 students undertaking 6000 hours of new PrBL opportunities • Creation of drop-in clinics and the Scottish OT Practice Education Network to support OT PEs 	<ul style="list-style-type: none"> • Continue to support and widen use of a range of PrBL models and methods of delivery • Time and resources should be made available to ensure that all involved are fully prepared for PrBL • Include PrBL in all personal development plan (PDP) discussions, supported by higher management
<p>Orthoptics</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSXX</p>	<ul style="list-style-type: none"> • Increase capacity and quality of PrBL experiences in Scotland • Identify requirements of good quality placements • Three tests of change (ToC) undertaken: <ul style="list-style-type: none"> -using the PAL model -implementing an online Peer Enhanced e-Placement (PEEP) -designing and testing a 4-week block placement for 4th year students 	<ul style="list-style-type: none"> • 21 orthoptists attended PAL training by September 2022 and 6 PEs had taken a PAL placement by December 2022, giving students access to a wider range of adult cases than using a 1:1 model and reporting they would take one again • Additional 28 placement weeks provided using PEEP • An extra 36 placement weeks provided by the additional 4th year block placement developed as the ToC 	<ul style="list-style-type: none"> • Spread and scale up the use of PAL and PEEP delivery models • Development of orthoptic specific PrBL resources • Design and undertake ToC for further diverse models e.g., simulation, project-based placements, long arm supervision • Promote further development of extended roles within placement experience • Continue to raise awareness of PE training opportunities and use of NES PE Development Framework

Project	Key Focus	Key Impact / Successes	Recommendations
<p>Paramedics</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSQE</p>	<ul style="list-style-type: none"> • Increase understanding amongst PEs about their role and use of documentation • Improve communication and links between HEIs and PEs • Enhance understanding of the transferrable skills AHPs can bring to enhance paramedic student learning 	<ul style="list-style-type: none"> • New PrBL opportunities and modes of delivery developed for blended approach within NHS 24 and Trauma network • Resources, training, and a virtual community developed to help PEs support paramedic students • Development of ToC for PEEP placement with one HEI • Evaluation undertaken showing improved communication and collaboration with key stakeholders 	<ul style="list-style-type: none"> • Continue to work with the Higher Education Institutes (HEIs) to ensure clarity of the Practice Education Lead (PEL) role which aligns with how other AHP programmes are supported and managed • Scale up and spread of PEEP resources developed across all HEIs • Continued development of new resources to support staff who are facilitating paramedic students for the first time • Include paramedics in the AHP electronic quality management system that is currently under development
<p>Physiotherapy</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSOL</p>	<ul style="list-style-type: none"> • Support PEs to use alternate models of PrBL including PAL, Blended, and a Team approach • Collate and centralise physio specific PE resources • Promotion of PrBL and strengthening the PE network • Explore non-NHS placement opportunities 	<ul style="list-style-type: none"> • Physiotherapy specific training sessions were delivered with 388 attendees, development of communications and resources • Creation of additional placement opportunities in five new areas • Contribution to a significant reduction in placement deficit from approx. 130,000 Aug 2021 to just under 23,000 hours May 2022 	<ul style="list-style-type: none"> • Continue physio PrBL network groups to drive the recovery of PrBL locally and nationally • Review and broaden PrBL delivery in a range of areas, including specialist NHS Boards. • Widen use of PAL model throughout Scotland • Review and extend the use of long arm supervision

Project	Key Focus	Key Impact / Successes	Recommendations
<p>Podiatry</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSOV</p>	<ul style="list-style-type: none"> • Increase the number of trained and experienced PEs and placement opportunities across all health boards in Scotland • Focus on quality of PrBL, placement models, and practice educator learning and development 	<ul style="list-style-type: none"> • PAL placements in remote and rural areas – two ToC – western isles and Borders undertaken • Collaborative practice educator training facilitated by Glasgow Caledonian University, Queen Margaret University and NES • Drop-in sessions for podiatry PEs • Resources to promote placement locations developed • Increased placement offers (Increased from 54 offers in 2021/22 to 188 in 2022/23 from an additional 2 health boards) 	<ul style="list-style-type: none"> • Support podiatrists of all levels and clinical expertise to be involved in PrBL • Develop, modernise and diversify the PrBL experiences for podiatry students
<p>Prosthetics and Orthotics</p> <p>Learning stack and resources: https://api.ltb.io/show/ABRRC</p>	<ul style="list-style-type: none"> • Education and support for PEs which included knowledge and understanding of alternate models of PrBL • Student preparation for placements • Need to establish robust communication mechanisms 	<ul style="list-style-type: none"> • 4 PE support sessions and 2 PE Virtual Cafés delivered. Infographics and resources designed, developed, and disseminated. • PEs reported an increased understanding and awareness of different models of PrBL • NHS Greater Glasgow and Clyde (GG&C) Services supported to test a blended model within their service 	<ul style="list-style-type: none"> • Ensure the necessary funding is available for Scottish students to engage with PrBL • Continue to utilise prosthetic PrBL out with Scotland due to limited Scottish capacity • Further promotion and prioritising of Scottish orthotic PrBL offers • Widen sharing of prosthetic and orthotic PrBL developments across Scotland

Project	Key Focus	Key Impact / Successes	Recommendations
Prosthetics and Orthotics (contd)		<ul style="list-style-type: none"> AHP PAL workshops facilitated nationally and offered locally 	<ul style="list-style-type: none"> Continued collaboration between HEI and PEs to develop sustainable PrBL opportunities
Radiography Learning stack and resources: https://api.ltb.io/show/ABSQS	<ul style="list-style-type: none"> Increase uptake of PE role and expand the knowledge of PEs to deliver modern and diverse PrBL experiences Expand models of learning using PAL 	<ul style="list-style-type: none"> ToC in NHS GG&C focused on PE engagement and resulted in 19 additional PEs ToC of PAL model was trialled over a 6-week period on one site which was first trial of PAL in radiography in Scotland. Evaluated well A radiography PrBL virtual community has been set up as a point of contact for PEs 	<ul style="list-style-type: none"> Continue to support radiography PEs using drop-in clinics and virtual community Embed resources encouraging new models and methods of PrBL delivery within practice Continue the collaborative work with HEIs to spread PAL across sites in Scotland and to support a culture shift to encourage all radiographers to become PEs
Speech and Language Therapy Learning stack and resources: https://api.ltb.io/show/ABSGU	<ul style="list-style-type: none"> Raise awareness of PrBL and the urgent need to change the current model Increase the knowledge and skills of PEs Expand diversity of placement models and placement settings Identify and develop resources 	<ul style="list-style-type: none"> 3 ToC undertaken in new clinical settings 67 Speech and Language Therapists (SLTs) trained to use PAL; 20 PAL placements delivered; 29 additional placement weeks created 	<ul style="list-style-type: none"> Continue to support the delivery of co-created three-year sustainability plan across Scotland Embed new PrBL models, particularly PAL, in practice Share and scale up learning from the 3 pilots to enhance PrBL capacity

Project	Key Focus	Key Impact / Successes	Recommendations
<p>Cross / Third sector</p> <p>Learning stack and resources: https://api.ltb.io/show/ABSQX</p>	<ul style="list-style-type: none"> • Increase PrBL capacity • Support and develop PrBL opportunities within cross / third sector settings • Expand diversity of PrBL models • Develop resources to support PrBL opportunities within cross / third sector settings and key stakeholders 	<ul style="list-style-type: none"> • Development of a cross / third placement framework, placement delivery package and a range of resources to support PEs and students • Pilot projects undertaken in five cross / third sector organisations totalling over 174 placement weeks • Range of PrBL models / methods of delivery utilised including PAL and long arm supervision 	<ul style="list-style-type: none"> • Utilise the cross / third sector placement framework and delivery package to support PrBL opportunities • Develop and support mechanisms to deliver long arm supervision robustly • Deliver preparation for students around atypical modes and methods of placement delivery • Raise the profile of cross / third sector placements through the sharing of good practice
<p>Infrastructure (including PAL)</p> <p>Learning stacks and resources: https://api.ltb.io/show/ABSRV https://api.ltb.io/show/ABSYB</p>	<ul style="list-style-type: none"> • Improve accessibility to resources that support AHP staff to deliver PrBL • Provide a framework supporting AHP development as PEs throughout their career • Positively influence the culture surrounding being and becoming a PE and the delivery of PrBL 	<ul style="list-style-type: none"> • Band 2-8A PE development framework out for consultation • AHP TURAS PrBL learning site accessible to all AHPs across Scotland • Development of TURAS AHP PE preparation learn programme (Being and becoming an AHP PE) which includes completable pages and accessible data • Wording changes to AHP PrBL partnership agreement supporting and valuing the PE 	<ul style="list-style-type: none"> • Promote the PE development framework and embed its use in practice • Progress the PE recruitment campaign through a phased approach • Develop and embed robust governance that supports long arm supervision in practice • Develop and spread of AHP healthcare support worker (HCSW) roles within PrBL

Project	Key Focus	Key Impact / Successes	Recommendations
Infrastructure (contd)	<ul style="list-style-type: none"> Increase AHP practice educator capacity and capability in the delivery of PAL PrBL 	<ul style="list-style-type: none"> role ready for agreement refresh in 2024 AHP PE communication toolkit launched to raise awareness of the PE role and recruit new PEs 19 PAL workshops delivered with 285 attendees, and 9 AHPs trained through train-the-trainer to deliver workshops. Evaluated well showing increased confidence, knowledge and skills in delivering the PAL model 	<ul style="list-style-type: none"> Develop opportunities to enhance PE capacity across Scotland including consideration of flying finish and late careers Further develop robust infrastructure to support the delivery of PAL training to further build capacity and capability Evaluate PAL resources to ensure they meet the needs of PEs

Appendix 2: Allocated Whole Time Equivalent (WTE) for Projects

Appendix 2 Table 1

Project	WTE
Arts Therapies	0.2 WTE
Dietetics	0.4 WTE
Occupational Therapy	1.0 WTE
Orthoptics	0.4 WTE
Paramedic Science	1.0 WTE
Physiotherapy	1.4 WTE
Prosthetics and Orthotics	0.4 WTE
Podiatry	0.4 WTE
Radiography	0.4 WTE
Speech and Language Therapy	0.4 WTE
AHP Cross / Third Sector	0.6 WTE
AHP Infrastructure	0.6 WTE

Appendix 3: Key Workstream Processes Undertaken

- Core objectives and workplan deliverables were agreed and shared
- The AHP PELs completed quarterly project updates, and utilised a 'red, amber, green' scale to measure progress on project deliverables
- Monthly progress meetings were attended by the AHP PELs and NES AHP Practice Education team to share learning, support the team and progress workstream actions
- The GRPI (Goals, Roles, Process, Interpersonal) Model of Team Effectiveness (Beckhard 1972) was completed monthly to review key factors and plan teamwork
- Project management tools were used to define the workstream aims, scope, stakeholders, business case and key performance indicators (project Charter); and to monitor and mitigate against risk (risk register)
- A workstream communication strategy was developed that encompassed monthly updates shared on the Turas Learn site Using a range of media including infographics, animations, and Microsoft Sway. A quarterly workstream brief highlighting key messages was widely disseminated by email and shared on Twitter

Appendix 4: Results of AHP Survey on Practice Education (June 2022)



Appendix 4 Figure 1

Questions to those already involved in facilitating student practice education..



How confident are you in your skills and knowledge in facilitating student practice education?



What are the biggest barriers to facilitating PrBL for you and your service?



Top 5

Most important things to support AHPs to facilitate student PrBL

1. Support from peers/ colleagues 95%
2. Protected time for own learning and development 94%
3. Shared experience from other practice educators 88%
4. Profession specific practice educator training from Higher Education Institute 87%
5. Access to online resources 85%



83% of respondents stated they were planning to support PrBL within the next year



58% of respondents stated they would use or consider using a Virtual PrBL community



Appendix 4 Figure 2

Appendix 5: AHP PrBL Recovery Evaluation (March 2023)



AHP PRBL RECOVERY: QUESTBACK EVALUATION MARCH 2023

SURVEY DEMOGRAPHICS

98 responses from clinicians, educators and managers.

Responses from across Scotland:

- 12/15 Regional Health Boards
- 3 National Health Boards (including the Scottish Ambulance Service)
- Local authority
- Cross / third sector
- Higher Education Institutes

Responses from 12/14 of the Allied Health professions.

RESPONDENTS' ROLE IN RELATION TO AHP PRACTICE EDUCATION

- 37% placement coordinators
- 36% practice educators
- 24% another education role (Practice Education Leads, Higher Education Institutes, etc)
- 3.1% no role

92% of respondees were aware of project aims.

KEY ACTIVITIES WITHIN THE PROJECTS

1. Promotion of different models / methods of delivery (90%)
2. Provision of training / workshops (78%)
3. Scoping discussions / survey (76%)
4. Development of stakeholder groups / networks (69%)
5. Development of resources (67%)
6. Identification / development of placement opportunities (65%)

IMPACT OF THE PROJECTS

84% agreed or strongly agreed that an increase in modern PrBL opportunities had been achieved

-82% agreed or strongly agreed that an increase in diverse PrBL opportunities had been achieved

-68% agreed or strongly agreed that an increase in sustainable PrBL opportunities had been achieved

DEMOGRAPHICS

ROLE

ACTIVITY

IMPACT



FURTHER INFORMATION IS AVAILABLE AT [LEARNING TOOLBOX \(LTB.IO\)](http://LEARNING TOOLBOX (LTB.IO))

Appendix 5 Figure 1

AHP PRBL RECOVERY: QUESTBACK EVALUATION MARCH 2023

THE PROJECTS INCREASED OPPORTUNITY TO ACHIEVE THE AHP PRBL CONSENSUS STATEMENTS*

1. Everyone - 83.7% agreed or strongly agreed
2. Anywhere - 83.7% agreed or strongly agreed
3. All Ways - 91.8% agreed or strongly agreed
4. Anytime - 77.6% agreed or strongly agreed

CONSENSUS STATEMENT ACHIEVEMENT

TOP 5 KEY STEPS TO KEEP MOMENTUM GOING

1. Access to resources, support and training
2. Sharing practice and key messages
3. Dedicated resource / capacity to take forwards
4. Embedding learning and developments in practice
5. Using and developing different placement models / methods of deliver

NEXT STEPS

UNI-PROFESSIONAL FOCUS

- 71% agreed or strongly agreed that there has been benefit in projects having a uni-professional focus.
- Respondents also highlighted benefit of collaboration and AHP voice

UNI-PROFESSIONAL ROLES

QUOTES FROM RESPONDENTS

"Uni-professional leads have been committed, engaged and have led from the front with innovations"

"The entire project and all that came with it has been an excellent resource over the past 18 months. Well done to all involved"

"The momentum created and the conversations started around PrBL must continue and it is important for everybody to support this moving forward"

"It has been an incredible experience working across boundaries, with interested and committed people to achieve change that might have taken 10-25 years without the challenges provided by Covid. It has been a privilege to play my part with others and I hope the drive towards innovation will continue rather than going back to business as usual"

"Further options to work with NES in this way would be valued highly"

QUOTES

*MORE INFORMATION ON THE CONSENSUS STATEMENTS:
[HTTPS://LEARN.NES.NHS.SCOT/60124](https://learn.nes.nhs.scot/60124)

Appendix 5 Figure 2

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email **altformats@nes.scot.nhs.uk** to discuss how we can best meet your requirements.



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