

Examples of Innovative Telehealth Placements

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***‘WHAT IS GOOD LUCK?
OPPORTUNITY AND PREPAREDNESS COMING
TOGETHER.’***

(Deepak Chopra 2019)

A NEED FOR A SOLUTION

We couldn't continue working in the way we had previously for a number of reasons:

Suspended services

SLTS re-deployed

SLTS overwhelmed

Student safety

We couldn't put off placements indefinitely either

Students needed placement experience to enable progression

Student mental health

Future Workforce

CHALLENGE BECOMES 'OPPORTUNITY'

We were approached by one or two SLTs, who were at the point of launching a telehealth therapy just at the point of lockdown

What have we got to lose?

We started investigating

Research / evidence looked promising

We mapped opportunities against the learning outcomes

We sought advice and looked for guidance from RCSLT

PREPAREDNESS – BEING READY FOR TELEHEALTH

Accommodation:

Home?

Confidentiality

Backdrop

Access to technology

Wi-fi connection

Laptop (with webcam)

Headsets

Access to clinical notes

Open mind

Collaborative approach

**Bravery in the face of feeling
vulnerable**

Tenacity

RE-THINKING THE A1 PLACEMENT

Original A1 placement start date April 2020

Placement is a 4 day observation experience of a clinician and where possible wider team members in practice within a variety of contexts

As a result of COVID -19 placements were suspended for all AHPs

Clinicians redeployed

Service delivery changed overnight

PREPARED- NESS

Virtual consultation with partners

Check-in with students - eager to get started!

Introduction of telehealth in teaching – best practice / information governance

Questionnaire - re: accommodation and technology

Redesign

Working to deadline

FACTORS WE HAD TO CONSIDER:

To maintain principles of the A1 placement:

- Students work with a number of clinicians

- Observe patients /carers/ clinicians in different contexts

- Opportunity to meet the A1 capabilities

Ensure that the building blocks for subsequent placement were in place

Adjustment in line with the new context in which our profession is now working

Minimise risk for all

Minimise impact of workload for providers across the region

Question of band 3 contracts?

Maximise experience and opportunities for students and placement educators

Different practice educator / setting each day

Learner observes a typical day

Structured observation & workbook

Debrief at the end of each day

Assessment – pass/fail

Opportunities (see next slide)

To observe interactions with client - assessment or therapy

To observe methods of record keeping

To reflect on and discuss observations

- SLT behaviour

- Client experience

To discuss current learning and begin to identify next steps with practice educators support

To demonstrate professional behaviour and values

The A1 capabilities can still be met within a telehealth setting / pre-recorded as the student is required at this point to observe clinical interactions and reflect on these.

RESULTS – BREADTH OF EXPERIENCES

Independent practices and NHS

Individual / peer (1:1-9)

community / acute settings

paediatric

Highly specialist (cranio-facial team, paediatric dysphagia, transgender clinic, AAC specialist)

Observation

STUDENT FEEDBACK

'I loved the voice clinic, I think even if its not an area of interest we learnt so much. I also loved my day with XXXX, which was a surprise for me as I've never considered working with adults... until now!'

'I am pleased that I was able to see a mixture of paediatric and adult therapy sessions whilst witnessing first hand how practice is evolving with telehealth.'

I enjoyed the mixed experiences and being able to observe a wide range of client groups/therapy/assessment sessions e.g. live telehealth and learning about specialist areas like craniofacial SLT input. I enjoyed the opportunity to go onsite and ask SLTs how Covid-19 has influence their practice and what changes are being made more long term as a result of Covid-19 e.g. offering more telehealth sessions; paperwork being 'paper-light' so all online.'

'The placement allowed me to really experience how multifaceted and complex the SLT profession is, how different services operate and get a feel for what a day in the life of an SLT would entail. I also enjoyed speaking with service users and reflecting on their experiences of accessing healthcare in general including SLT services and how varied these experiences

Very interesting to learn from such a specialist area' 'The placement day with XXXXX has steered me towards the possibility of pursuing a career in working with children with feeding difficulties in the future, any questions I had were answered'

' I personally enjoyed how structured and detailed the experience was with XXXXXXXX as they had delegated different areas to cover with us to different therapists and therefore the days were very diversified and different.

BCU Clinic – 'really enjoyed these sessions and it was good to see some live telepractice and see how an SLT is involved in this area'. 'The placement day at the voice clinic with XXXX, was very interesting and XXX would always ensure that we weren't confused at all and I found the session very interactive.

'We shared some great, in depth discussion and she went through the feedback with us individually. I had a great day!

'XXXX really made us consider the importance of the interaction with not just the client but also their families and how important this relationship is to ensure the best possible intervention is delivered for their loved one'

XXXX with XXXXX was a very enjoyable and informative experience. I was able to ask all of my questions and she invited me to create an informal assessment for use of irregular past tense verbs, as well as help her to complete a TOMS for a client with a stammer.

PROVIDER RESPONSE

Developed confidence to try longer placements

Would it work with longer placements?

Virtual peer placements 1:3

Practiced educators who engaged are reassured that learning goals could be achieved

LESSONS LEARNT

Use every challenge as an opportunity

The level of commitment from our dedicated providers is humbling

Preparedness – being open minded and ready on a practical level

Telehealth placements provided opportunities for clients that wouldn't have been reached during lockdown

Telehealth placement increased opportunity for virtual placements

Technology- who will provide the resources?

Suitable accommodation (home , on campus, on a Trust site?)

NEXT STEPS IN TELEHEALTH PLACEMENTS:

Longer block placements (8 weeks)

Blended placements (the best of both worlds)

Providers are loaning laptops – overcoming barriers

Virtual peer placements

Evaluation

Virtual supervision groups for practice educators

NEXT STEPS

More detailed evaluation:

Particularly client experience

Student placements that include overall management of client care