## **PPE (Positive Placement Experience)**



I have been reflecting on my recent placement on the Hyper Acute Stroke Unit (HASU) at Queen's Hospital in Romford. Every Monday since October I have had the slightly surreal experience of arriving at the staff entrance to the hospital, with a slight spring of imposter syndrome in my step as I flash my ID badge, put on my scrubs, swap my surgical mask for a fresh one, take my temperature and sanitise my hands for the first time that day. Only recently have I learned to navigate my way around the vast, maze-like hospital with its seemingly hundreds of staircases and lifts. But finally, in my last few weeks, it began to feel like somewhere I belonged.

Having had 2 of 3 first-year placements cancelled when the pandemic first broke out, I was both relieved and apprehensive to find out my second ever placement would be in an acute setting. Hospitals can be a sensory overload at the best of times, and I was expecting this to be heightened during the peak of the second wave. But much to my surprise there was an eerie calm about Queen's, with no families visiting, empty corridors, social distancing, and a noticeable absence of the general chatter of staff scoffing their lunch down in the cafeteria as they share stories during their half-hour break.

I have always wanted to work with people with acquired disorders, and I am grateful this placement allows me to see a person's journey from the very start of acquisition, when they are at their most vulnerable. I quickly learned the importance of early intervention with stroke patients. New admissions and those ready for discharge are prioritised for communication assessments, before attending to those identified in their initial screening as having acquired communication deficits. This makes for a sophisticated caseload prioritisation MDT meeting each morning with SLTs, occupational therapists and physios (think 'episode of Casualty with loads of medical terms flying about').

Now that I have got to grips with the comings and goings of a stroke ward, I am feeling more confident to leave the very safe and comfortable nest of my practice educator to do things independently. Finally, I am able to start fulfilling the reason I chose to embark on my journey to become a SLT – to help people to communicate when they are most in need. To give people the time and patience they deserve. To live up to the 'everyone deserves a voice' logo on my hospital tote bag.

My advice to students feeling apprehensive about placements – You will make mistakes. But you will learn from them and come back better equipped to tackle future challenges, and ultimately, become the best SLT you can be.

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