# Students supporting quality improvement work

### The practice educator perspective

In the autumn of 2020, I offered to deliver a weekly peer placement for 4th year students from the University of Reading, lasting 10 weeks. I work in the Oxfordshire Stroke Rehabilitation Unit, which is a 20-bed in-patient unit. We have been fortunate to be able to offer face-to-face placements throughout the COVID-19 pandemic.

The students were a pleasure to have on the unit. They demonstrated high levels of professional competence and settled into our multidisciplinary team (MDT) quickly. At the start I always challenge their placement goals to push them to achieve more. I also ask that they undertake a project for the ward. This year was brilliant. They produced a supported communication pack to assist capacity assessment around consent to care and treatment and created an aphasia friendly version of our patient leaflet. Both students presented their work to the ward staff.

The challenges were logistical. It was a full-time activity organising, discussing and reviewing patients, interactions and note writing. However, I learned that the buzz of peer placements works very well for me within our unit. While peer placements require careful planning, the rewards were great for both me and the ward.

#### Advice to students going on placement

- Help your practice educator (PE) to help you achieve by having all the necessary paperwork to hand.
- Fill in your reports with the reflections you have made each week this will help with discussion and evidence at mid-point and final report stages.
- Be prepared to stretch yourself from the start.
- Offer to do a project this is good experience for you and helps your supervisor.

#### Susannah Stobart, clinical lead SLT and practice educator



## The student perspective

We recently had a face-to-face placement on an acute stroke rehab ward in Oxfordshire, that we attended once a week for nine weeks. We had a mixture of experience with aphasia and dysphagia patients. We learnt invaluable transferable skills and developed our theory and independence during this time.

We both completed projects and presented these to all the allied health professionals, healthcare assistants and nursing staff on the ward. This gave us the opportunity to work as part of an MDT and practise our presentation skills.

One thing we found most interesting was learning the skills to communicate with patients who had aphasia. Susannah, our practice educator, was incredibly supportive. She taught us so much and pushed us to achieve our potential. We got stuck in from day one and by the end of placement, we were planning and delivering therapy independently, as well as working with other members of the MDT.

Although we loved this placement, it had its challenges. Wards are busy places and can be demanding, so you need to think on your feet and be flexible. You are often working with patients who are quite ill and vulnerable and sometimes you need to have difficult conversations with patients. This can be emotionally challenging.

Our advice to new students going out on placement is to really get involved with the placement. Throw yourself in at the deep-end and take any opportunities that come your way. The more you put into a placement, the more you will learn. Always have an open mind and be honest if you are struggling with something. Don't be afraid to ask for help. Most importantly, enjoy it, even if you have had to get up at 5am to get there!

We loved our time on placement and had an experience we will never forget. We can't thank Susannah enough!

#### Phoebe Honey and Jen Tyldesley, student SLTs, University of Reading



