Your First...experience of providing a leadership placement

Rose speaks to Nisha, an educator and Allied Health Professional workforce lead, about her first experience providing a leadership placement.

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Rose [01:00:00]

Welcome back to another episode of your First of Everything. Today I am joined by Nisha, who is an Allied Health Professionals workforce Lead, and she is going to talk to me about her first experience of providing a leadership placement for occupational therapists and her perspective as an educator. Hello, Nisha.

Nisha [01:00:20] Hi there.

Rose [01:00:21] How are you?

Nisha [01:00:22] I'm good, thank you. Glad to be here.

Rose [01:00:24]

Good. So please tell me then about your first experience of this leadership placement. What is it, first of all?

Nisha [01:00:33]

Yeah, sure. So leadership placements came about when the world was dealing with the Covid 19 pandemic and they were widespread cancellations in student placements, especially face to face placements. But we had to find an innovative solution to still provide placements to students so they could complete the required number of hours and actually move towards graduation. And but apart from that, it was also about thinking about a more holistic experience of placements where traditionally placements have been about development of clinical skills and but there is more to coming into work rather than, you know, than just clinical skills. Clinical skills is a very obviously a very important part of it. And but the leadership element of it is not often focussed on in student placements. So it just seemed like a great opportunity to bring together some of those elements to make the placement more leadership focussed. And so leadership placements are those which focus on development of either leadership skills or service improvement skills, looking at communication as well, and sort of development of self awareness really, and working in teams. And it's to enhance the employability of future graduates as they move through the system. And these placements are typically blended placements where there's an element of face to face contact with the learner, but it can also be delivered online. So it makes it actually a very good mix and of that face to face contact. But having time away from the clinical area to actually think about what needs to be done next, process that and really plan the work out because there is a lot of project work involved as well.

Rose [01:02:32]

Well, that sounds really interesting and it sounds like you've bridged the gap there really for students so they get that exposure and that experience. How did you feel when you first did that, being in that educator role?

Nisha [01:02:45]

So I've been an educator in the past, but being an educator for a leadership placement, I was guite nervous to start with. It felt guite daunting and I'd never done it before, even though it had been happening in pockets in the country. And we'd connected with these other educators who had delivered placements like that. So there was a loose model available for me to kind of use and and tweak. And however, it still felt like we were going in uncharted waters. So I was quite nervous because of that. I decided that it would be better if I partnered up with someone else, another educator for that purpose, so we could support each other as well, apart from supporting the learners. Yeah, the thing I was most, I guess, worried about was whether the learners will have a great experience because it's all about them, but also whether they'll achieve those learning outcomes, which can be quite patient and service, user focussed and rightly so. But even in their assessment paperwork it can can be very heavily sort of towards clinical assessment and not those non-clinical skills. So we were worried about those sorts of things. I felt like I had to be guite prepared for my first placement as well, right down to the timetables and what they would be doing and and on a personal level as well, leadership placements are a lot about giving yourself a little bit to the placement as well as an educator because you share your own leadership style, you share about what you know about yourself as a personality as well. So so that bit of sort of self disclosure is there. So it was it was a case of, oh, whether they like me, whether they like me or not, you know, that sort of thing as well. I guess so, yeah, nervousness. But it all sort of dissipated after the first week when the learners started to get what we were trying to do and really engaged with us.

Rose [01:04:54]

So what made you want to go into that role?

Nisha [01:04:57]

And so. Wanted to provide a leadership placement in the first place because it felt there was a gap in our placement experience. So there is we often refer to it as the four pillars of advanced clinical practice, which is your clinical leadership, research and education. And it is sort of a map for clinicians to develop all their skills in all these four pillars. But in our placements we were heavily just delivering the clinical side of things but not really looking after. Those are the three pillars. So it felt like we need to give a lot more to our learners. So that was, I guess, one of my prime motivations of trying to develop a leadership placement and almost a curriculum for that leadership placement.

Rose [01:05:51]

Yeah, that's really good. And like I said, you know, that's very, very positive I think, for the students because they feel like they've got somebody there who's offering them the additional needs really, you know, from that point of view. Have you faced any challenges along the way?

Nisha [01:06:04]

Yes, definitely. I think first was just trying to convince others that actually these placements will serve these students. They'll put them in good stead in the future because there was a lot of apprehension that they will lose out on clinical learning and clinical time because of these non clinical placements. But I got around or I kind of encouraged people to think about that we weren't taking away, but we were adding something to the whole placement experience. Yeah, they already have six placements and five out of those six are clinical, but we don't do anything about other areas they need to develop. So kind of that was my my argument for that. The other one was there was a lot of myths around leadership placements that they weren't supported by the HPC or by a professional bodies. So I had to do a lot of myth busting as well to say that actually, yes, they are supported. This is the evidence. You can read it. And so, so that evidence on paper really helped. Yeah. And I guess lastly was just trying to manage my own day job while trying to provide something new. Takes a lot of time to actually plan that first placement. But then I realised that once that first initial planning is done, actually the rest of the placement can be guite self directed by the learner, so they didn't have to be tied to my apron strings, so to speak, and they could really fly after that first few first couple of weeks.

Rose [01:07:45]

That's really good. Is there any advice that you would give to the students going into these leadership placements?

Nisha [01:07:51]

Yes, I would. I would encourage students to think about doing them because I think there is some learner apprehension about trying these leadership placements and because, as I said, it's about all rounded development of new graduates. And, you know, I might be very good at an outcome measure or doing an assessment, but if I'm not able to communicate well with my team or if I'm not able to show leadership to cause a good change in the service, then there is something incomplete about me as a clinician. So these placements will give you a flavour of what it is like in real working life. Because in in work you're not just seeing patients and writing notes. You're doing much more in terms of teamwork and you're doing much more in terms of developing your personal self. So that would be my my suggestion and sort of encouragement to to learners to really try it. And and also, if you are going into these placements, go with an open mind and go with an open mind that they will be very much shaped by you as a learner as well. So most of the educators I know now who offer these placements, there is a there's an ethos of co-production within these placements. So it's very much learner led after that initial hand-holding the learners then just fly, to be honest. Yeah.

Rose [01:09:21]

So what sort of feedback do you get from your students that have been on this placement?

Nisha [01:09:25]

So the majority. The feedback from learners has been that when they first came into the placement, they didn't quite know what to expect, even though we send them sort of an induction back and a welcome back. But it really doesn't explain that experience of being behind the scenes on a leadership placement. But then when they leave, they feel like their understanding of the behind the scene mechanisms of a hospital are so much more clearer. They understand the reasons for why certain things are done in a certain way. So I work in. In an acute hospital. And the biggest pressure for an acute hospital is around making sure that patients are moving through the system so they are discharged in a timely manner. And and sometimes it feels guite a pressured environment for occupational therapists to work in. However, when they understand that actually if we worked in a certain way, it would free up a bed for a very poorly patient who might be waiting at A&E for the ambulance to hand them over and then go and see another poorly patient in the community. And as part of the leadership placements, learners attend those bed flow meetings where senior management meet so they can see what is really happening on the shop floor and then how that impacts the policies and their own work. That kind of thing does not happen in your traditional clinical placement because you're totally patient facing and doing, learning your assessments and treatment, and rightly so, yeah. So that feedback has been resounding across all the learners I've had, and the other one has been around learners, especially the on the non mature students they've come straight from school, has been around that confidence when they realise that everybody is a leader in their own right and therefore they have the autonomy to make changes in the way they work. So realising what their sphere of control is and kind of acting within that instead of waiting for things to happen to them. So that empowerment I guess has been some of the feedback that I that that we get as well.

Rose [01:11:35]

That's certainly offered a unique perspective as well, hasn't it? Because as you've said, it doesn't. Normally as a student you don't get to see those kinds of meetings, you know, bed management and everything else. So yeah, I think that's absolutely fantastic. How does it feel to know that you've made a difference in these students lives?

Nisha [01:11:55]

And it feels on a personal level, it feels fantastic when a learner feels that they've gained so much out of a placement. It feels like you've contributed to them not growing just as a clinician, but as a person as well, that you've added something to the that pool of resilience that they might have. So they understand that it's not easy in health care, it's not straightforward, and it's very, very complex and complicated. But actually there are things you can do to kind of decode some of that complexity. And there is always support around you. That realisation when students and learners have that, that feels very satisfying, that they can have a really good career in health care as an occupational therapist when they see that there is so much variety in our careers as well that you can be a clinician, you can be an educator, you can be, you

know, an HP workforce lead or you can be a manager. So so that sort of opens their eyes as well and and hopefully keeps them in their in their career as a as a happy occupational therapist.

Rose [01:13:11]

That's lovely. Thank you very much for sharing your experience with us and thank you for coming today.

Nisha [01:13:15] Thank you very much for having me.

Rose [01:13:19]

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