

Lee [01:00:04]

Hi and welcome to another episode of your First of Everything. My name is Lee and I am very lucky to have Lucy with me today, who is a occupational therapy student. Hi, Lucy. How are you?

Lucy [01:00:16]

Hi. I'm good. Thanks. Thanks for having me.

Lee [01:00:20]

No. Thank you. Thank you for coming to talk to us. So you're going to be sharing one of your experiences from practice around your first experience, sort of making that first contact with a service user, is that correct? Yes.

Lucy [01:00:34]

Yeah.

Lee [01:00:35]

Bro, do you want to sort of give us the background to that then.

Lucy [01:00:39]

Yeah. So I guess, within the occupational therapy process. So the sort of stages that we work through, one of the early stages is information gathering. So kind of making sure you've got, got all the bits of data that you need. And I thought my, my sort of recent placement experience, it was quite a good learning opportunity for me, sort of taking the lead with that initial patient contact. So I thought that might be an interesting thing to talk to you about.

Lee [01:01:12]

No, absolutely. And I think, sort of that fact finding and get, you know, getting to the crux of the needs of our patients and service users is it's actually a really, really important skill. So is there a particular instance from practice that.

Lucy [01:01:30]

Yeah. So, my most recent placement. Well, just to contextualise, I had a two year interruption from study due to having my first baby at the end of my first year of study. Ah, congratulations. Thank you. So it had been two and a half years since my, first and only placement. Two and a half years since being in education. And it was my first experience working in a hospital, so it was a bit of a lot of firsts.

Lee [01:02:04]

Yeah.

Lucy [01:02:04]

Yeah. I. During my maternity leave, I did a lot of, sort of care work building on the kind of ten years experience I have working in health and social care, and I'm also an actor and workshop facilitator. So useful. Transferable skills in sort of pretending I know what's going on. Which was useful because this placement was a kind of really throw you in at the deep end sort of setting, which I guess at first I. They felt like, oh, no, I want someone to hold my hand. I've, you know, I've mainly been playing with trucks and diggers for the last two years. Just talking to toddlers. I can't talk to people. Somebody help me. But I actually think I probably learnt a lot more that way. And this experience of that kind of data gathering, I guess, is what we'd call it, was an an example of that. So yeah, I guess the story, it was maybe my second or third day of, the placement, and the educator gave me the form after the morning briefing and just said, like, let's go. The patient's waiting. Waiting for us. So the questions that we were asking were about their home setup, equipment that they had in situ access requirements, their occupational needs, their routines, the support that they had in place or might need, which was all to do with kind of assessing, how how occupational therapy could help that patient and therefore to sort of triage within our caseload, sort of managing that discharge process. And, you know, the, the form and the content sort of straightforward, seemingly, and I guess to an experienced practitioner, a very logical process. But once I actually started asking the questions. I became really quite overwhelmed at just the sort of volume of information that I needed to gather and the realisation as well, of how personal this information was. You know, it's toileting, it's hygiene, it's someone's sort of general functionality. It's do they have a support network? It's all really kind of yeah, like I say personal personal stuff. And I think I just had gone into the, The the the contact thinking yeah, I can I'm, I'm a bit nervous but I can, I can, I can do it. But then actually it was really quite different to what I thought it would be that.

Lee [01:05:00]

No, I think that's a really I think I find that really interesting, Lucy. And I think we it kind of calls back, doesn't it, to these skills that we need to possess as healthcare professionals around. I know we call them soft skills a lot of the time, like communication and nonverbal communication. I don't know why we call them soft skills because, you know, they're not straightforward skills, are they? They're actually talking.

Lucy [01:05:23]

About that you need just the other day. Why why are they called soft skills.

Lee [01:05:27]

Yeah exactly. And and I think it's a really it can be very intimidating to meet someone for the first time. You know, you're walking through and also asking is there any social care involvement, you know, and quite personal pertinent questions. Yeah. And how did you manage that? How did you what was your approach?

Lucy [01:05:49]

All right. That's such a good question. I suppose it's just being being personable and remembering to ask questions in a way that sort of makes sense to people. You know, we were talking just before we pressed record, weren't we? About how, there were sort of. Expressions and language that you that you use in your field that seem kind of obvious. And then actually, sort of adapting your communication style and your, your use of language is, is is a real skill. So I suppose it's a bit of that. And yeah, just really showing that you're listening. And I think striking that balance of. You know, I became very aware, like, of the sort of the constraints on the department and everyone's so busy all the time. But, you know, in that in that moment with someone, it's, you know, it's a, it's a client centred profession. And we have to make sure people feel like that time is really important, which it is. Yeah. And I suppose in the debrief with the educator, that became sort of quite pertinent because they, they were quite a blunt person. They said as well that I could have allowed the patient more time to talk about how they were feeling before sort of launching into the questions, which was really interesting because I sort of felt like I'd done that a bit. But going back to what I was saying about the sort of the pressures and the workload, I kind of felt like, oh, gosh, we've got to, you know, we've really got to get things done. But actually, yeah, that, that balance again.

Lee [01:07:30]

I think that is such a powerful point. And I actually think that speaks across all professions really, you know, in terms of. Finding that balance between, Effective time and time for service users and patients as well. I think that's really, really powerful. Yeah. And, you know, as you were talking, I can reflect and think, actually, there are times where we don't like silences, do we like to fill silence? And if we ask a question that someone hasn't responded to within two seconds, we're jumping in with either the next question or a broken down version of that question. We don't. I suppose it's very easy to not forget people might need more than what we think.

Lucy [01:08:17]

Yeah, we were talking about that again just at just the other day at uni as part of sort of communication skills is is handling silence. And again, it comes back to that sort of busy hustle and bustle and everyone's sort of rushing around very, you know, very busy and important. Lots to do. But yeah, being also able to take that time and carve out that time, I was. Quite proud of myself, but also maybe a bit shocked at my own assertiveness that, you know, this wasn't like, you know, peak imposter syndrome. Yeah. Time for me. But that I sort of prompted the educator to give me some positive feedback as well as the sort of areas for improvement. And they they actually apologised and said, you know, that's really that's really important. Sorry. You did a really good job of making the patient feel at ease. And, you know, again, your body language, nonverbal communication skills, all of that sort of stuff is a key part of this. So I think it's just interesting what, you know, what you were saying about that, that sort of, I guess, the therapeutic relationship in terms of my field, but also that that kind of communication is really important as well between educators and students. And, you know, it goes both ways as well.

Lee [01:09:37]

It does. And again, really important point is that use of reflection as well, it isn't just about what could be done better. It's also about, you know what, this was a way. And I feel like this went really well, that sort of really rounded view of reflection. So having been through that experience and and thank you. I've such an interesting, discussion. I think I could talk to you for days. But I suppose for another learner who's maybe going into that experience for the first time, maybe it's the first time there. I want to say a mission because I'm a nurse, but the first time doing that sort of information gathering and fact finding, with the service user or patient, what would what would your top tips be? How do you prepare, for that kind of learning opportunity?

Lucy [01:10:35]

I suppose part of it is the appreciation of how, you know, again, it's like every contact matters, isn't it? And how important that is for working, efficiently, effectively, as part of a team, again, in a client centred way. But. Being, being prepared for it. Knowing what you, what you, what you want to find out, but also that sort of openness and flexibility for you. You don't know where conversations are ever going to go in life. You don't know what people are going to say. And I suppose one of my reflections is. You know, people work in different ways and people learn in different ways. And that's that's fine. And that's really interesting and helpful. So just because you see one person do something away or someone tells you something, it's all part of the learning process. And we're always learning and developing. So it's kind of just yeah, I guess just being present and. Just seeing how it goes.

Lee [01:11:34]

Absolutely. And I think that's so I keep saying powerful point because you're making loads of them. But is that, observing a range of people? I always kind of say I'm a bit of a thief in a way, because I'll watch someone do something and I'll kind of go, I really liked what they did there. I like that word they use, and I'll take it for myself and kind of embed it into my practice and other in the opposite way. I've gone, oh, not sure about that one. So I haven't done so, that sort of learning from a range of different people. Yeah. I think is a really, really key tip actually.

Lucy [01:12:11]

And I think that's as well really important for, sort of managing your own emotions and setting boundaries and seeing different ways of working. And I don't know if we're nearly up for time, but that's. Yeah, another interesting sort of area for personal and professional development isn't it.

Lee [01:12:31]

Absolutely. Especially when you're asking such personal pertinent questions. Yeah. Remembering our role in that and I suppose as well that sort of need to know aspect of, how, how that data is managed, how that information is managed as well in the. Yes. Yeah. It's, it's been entrusted to you as a healthcare professional. And it needs to be managed in that way, doesn't it? Yeah.

Lucy [01:12:59]

And like drawing on your own experiences personally and professionally to, to help you. And I think the more experience you get, the the better able you are to do that I

suppose. One of one of my other likes or key reflections from this placement was I found it quite strange and triggering and emotional working in a hospital for the first time. Because I had a very sort of traumatic birth. All the things that could have gone wrong. Did you know, forget whale music and birth pools and picture blood loss and rushing down the corridor to theatre and. Yeah. At first I just found it so strange being in a hospital, but actually it was really conducive for my own sort of trauma recovery and then learning how I could sort of redirect that energy and sort of to put things in perspective and. Yeah. It's just the sort of. Sorry I'm waffling. I could go on and on.

Lee [01:14:00]

You know, you're absolutely right. And I think I think what you've what you've hit on really eloquently is that self-awareness, around self-care and that awareness of our journeys. We've all got a different journey. We everyone has the potential to have experienced trauma at some point. Yeah. And we may stumble across that as part of our working lives as people who work with people. Yeah. So I think it's that's a really important message, around that emotional wellbeing and self protection.

Lucy [01:14:33]

And remembering sort of, you know, it's it's it's a real privilege, I think, to be working with people and, and, and trying to help them, you know, and how you can use your own experiences to, like you say, looking after yourself. But. Yeah, I guess it's just a sort of cycle of life that you see in, in, in hospitals, isn't it? There's so much to be learned from that and different, different sort of stages of the lifespan. And I guess that for me that was really pertinent. You know, I was looking after a small person and then looking after not so small people. And yeah, like you say, you've got to make self-care a part of that because you've got to look after yourself before you can look after anyone else.

Lee [01:15:14]

And that. And that's the key message and a lovely one to draw. This to a close with, Thank you so much, Lucy. I genuinely could have spoken to you for days, I think. It was. Thank you so much for sharing your experience, both personally, but also within your practice as well. I think people will find this really, really beneficial.

Lucy [01:15:37]

Oh, that's so nice to hear. Thank you. Honestly, it's been such a such a pleasure for me as well. So really nice to have a sort of different forum in which to to sort of do that reflection and. Yeah, just, just just lovely.

Lee [01:15:51]

Thank you so much.

Lucy [01:15:52]

Thank you. Goodbye.

Lee [01:15:55]

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