

Practice Educators -Diagnostic Radiography

UNIVERSITY OF BRIGHTON
SCHOOL OF SPORTS AND HEALTH SCIENCE



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Practice Educators Course – Aims

- Discuss student needs and support
 - ▶ Learning styles
 - Additional needs
 - Equality and diversity
- Provide educators with tools to support students
- Introduce and explain relevant paperwork/assessment tools

Practice Educators Course – Learning Outcomes

- Practice Educators will be able to -
 - Prepare placements for students
 - Appreciate different learning needs of students
 - ► Follow processes related to the failing student
 - ► Navigate placement paperwork including assessments

Session 1- Introduction to placement

- Passports
 - Educator/Student
- Preparing for placement
 - Practice Educator
 - Staff
 - Student
- Responsibilities of educators

Preparation for placements

- Consider when you last started at a new employer/workplace
 - What would have been useful to know?
 - What did you need to find out for yourself?
 - What did you find out way too late?



- https://universityofbrighton.padlet.org/pdick8/t7ducm74g12gyygj
- Come back in 5 mins to discuss

Educator Passport

- Enable students to know a little about their Educators
- Only need to complete one and then re-use it unless significant circumstance change
 - ▶ 3 versions Short, Free text, Free text with service SWOC analysis
 - Add info as appropriate
- Photo will enable students to identify educator(s) on arrival
- Multiple Educators could be added to a single PDF

Educator Passport - Typical Information

- Basic info
 - Name, job role, photo
 - Qualification + work history
- Current Role
 - Work responsibilities + duties
 - Work interests + challenges
- Icebreakers
 - Interests outside of work
 - Favourite biscuit/treat!

Diagnostic Radiographer Practice Educator Passport			
Hi! My preferred name is [] and I'm a [Insert Profession](pronouns: she/her (e.g.))			
I completed my training at [university] and graduated in [year] Since qualifying I have worked at [organisations/services] in [roles].	Upload your Picture		
I currently work in [service] as a [role]. I am in this area of work because			
The patient group I work with is			
The things I most enjoy about my work are			
The biggest challenges in my place of work at the moment are			
[Option to insert other information on professional interest's e.g. post-grad educat specialist interest groups etc.]	tion, membership of other		
Outside of work I enjoy			
My favourite biscuit or sweet treat is because because			
[This ice-breaker question is intended to support relationship building between student and	d educator(s), and provides		

We'd love to 'meet' you prior to your placement starting! Please let us know some suitable times you'd like us to arrange a call via MS Teams.

an additional, informal topic to interact and engage on]

Educator Passport - Feedback

WHAT STUDENTS SAID...

IT WILL HELP STUDENTS BUILD A
PICTURE OF WHAT THE ROLE IS AND
MAKE PLACEMENT SEEM LESS DAUNTING

I like that you have stated the many reasons why you love and enjoy your job!

you form a good relationship with your educator before you start

I love the bit about the favourite biscuit! It's sharing enough for me to 'meet' my educator but not over-sharing.

Perfect!



A photo is a brilliant idea I would have loved to have had a
picture of my educators friendly face
to recognise on my first day

...AND FROM OUR EDUCATORS

Having 3 different versions to choose from was great – it allowed me to share something meaningful and gives options for the team

It took less than 15 minutes and I can use the same copy with different students

I love this idea of sharing information in an informal and friendly way before the placement starts

It's really positive
to be able to give students
more insight about my role
and the service before they
arrive



Student Passports

- Opportunity for student to provide useful information about themselves
 - Preferred name and pronouns
 - Contact details
 - Next of kin etc
- Mandatory information
 - DBS clearance
 - Occupational Health clearance
 - Mandatory training
- Placement experience and strengths/development needs
- Other useful information
 - Learning Support Plan if appropriate

Strengths and development needs (to be discussed with personal tutor). This should be based on your academic work and the placement assessment forms:

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Placement	Strengths	Development needs		
Placement 1				
Placement 2				
Placement 3				
Placement 4				
Placement 5				
Placement 6				
Placement 7				
Placement 8				

Preparation for placements - Practice Educator

- Induction checklist/welcome pack
- Timetable
- Is relevant paperwork available?
 - Local policies etc.
- What does your site do that may differ from others?
- What learning resources are available?
- Available support from colleagues
 - Mentors, Fire wardens
- Contingency arrangements and Innovation
 - Flexibility to cope with changing clinical pressures
 - ▶ How might students gain additional experiences or not waste opportunities?

Preparation for placements - Staff

- Are staff aware of their role and responsibilities?
 - And who to contact with concerns?
- Do they know what students they will be working with?
 - ▶ When?
 - What experience/needs the students have?
- Familiar with assessment tools

Preparation for placements Student

Student

- Prior contact with placement site
- Student Passport
- Induction checklist
- Learning contract

Awareness of own learning and development needs

113			
Development Needs What do I need to develop? (Skills, Knowledge, Experience)	Learning Resources What resources are available to me?	Criteria for Evaluation How will I know when I have achieved my learning outcomes? What will I be able to do that I can't do now? (Include target date for achievement)	What do I need to learn next? What do I need to develop/learn next?

Responsibilities – Practice Educator

- 1st point of contact between University and placement site
- Day-to-day organisation of learning experience
- Academic and practical support

Responsibilities – Mentor

- May be separate role to PE not course requirement
- Continuous point of contact for student
- Offer support and departmental information
- Facilitate integration into placement environment
- Discuss and agree learning objectives
- Liaise regularly with Practice Educator
 - Student progress
 - Issues and challenges

Responsibilities – Supervisor

- May not be radiographer e.g.
 - Nurse
 - Reception supervisor
- Directly oversee students work
- Ensure student working correctly and safely

Responsibilities – All

- When assessing consider all evidence
 - Knowledge and skills
 - Attitude
 - Views of those receiving care
- Give constructive and useful feedback
 - Acknowledge both underachievement and excellence
- Highlight development needs with Practice Educator
 - Including fitness to practice, inappropriate behaviour
- Set an example!

Student Views - (recent UoB OT students)

- What is helpful in terms of supporting well-being on placement?
 - Welcoming and belonging
 - Supporting students on placement
 - Supervision
 - Self-reflection

Remember placement pressures

- Being in a new environment and not knowing what to expect and what is expected of them as a student
- Commute, family life, not having time for healthy eating/gym
- Complex patients who challenge and stretch knowledge
- Being outside comfort zone
- Being assessed constantly
- Not being sure of being able to meet all the criteria
- Working with the MDT
- Relationship with Educator

Session 1 - Summary

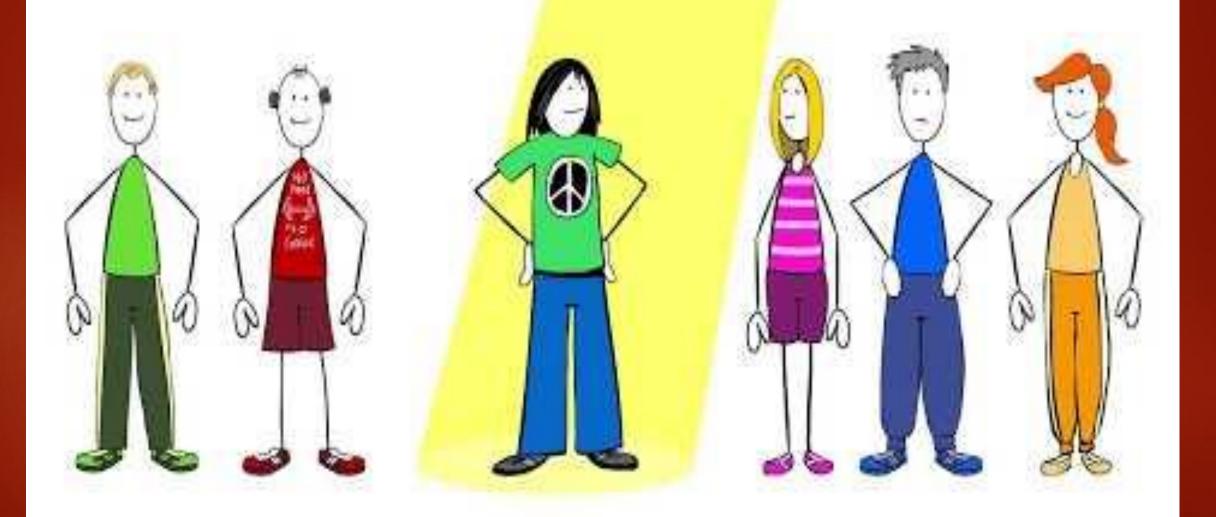
- Preparation
 - Introductions and paperwork
 - Staff aware and prepared
 - Materials available
- Contingency
 - Where else might students learn?
 - Who else might students learn from?
- Consider all needs of students
 - Learning
 - ▶ Home/work needs

Session 2 – Assessment and Feedback

- Learning styles
- Experiential Learning and Reflection
- Assessment
- Giving students feedback
- Feedback for the educator

Learning Styles

- Honey and Mumford Learning Styles Questionnaire (1986)
- Four main learning styles
 - Activist, Reflector, Theorist, Pragmatist
- Most people lean towards one or two
- Everyone benefits from experiencing a variety of learning opportunities
- Which one are you? https://www.mint-hr.com/mumford.html



Learning Styles

VERBAL

Words are your strongpoint! You prefer to use words both in speech and in writing!

VISUAL

You prefer to use pictures, diagrams, images and spatial understanding to help you learn

MUSICAL / AUDITORY

You prefer using sounds or music or even rhythms to help you learn.

PHYSICAL / KINAESTHETIC

You use your hands, body and sense of touch to help you learn. You might 'act things out'.

WHAT'S YOUR LEARNING STYLE?

LOGICAL/ MATHEMATICAL

Learning is easier for you if you use logic, reasoning, systems and sequences.

SOCIAL

You like to learn new things as a part of a group.
Explaining your understanding to a group helps you to learn.

SOLITARY

You like to work alone. You use self-study and prefer your own company when learning.

COMBINATION

Your learning style is a combination of two or more of these styles.

Characteristics of social styles

High Responsiveness

Amiable Style

- Slow to take action and making decisions; Likes close personal relationships
- Dislikes interpersonal conflict; Supports and actively listens to others
- Weak at goal setting and self-direction; Good Counselling skills
- ► Has excellent ability to gain support from others
- Works slowly and cohesively with others: Seeks security and belonging

Low Assertiveness

Analytical Style

- Cautious actions and decisions; likes organisational structure
- Asks many questions about specific details; prefers objective, task-oriented, intellectual
- Wants to be right, therefore over relies on data collection, works slowly and precisely
- Seeks security and self-actualisation
- Good problem-solving skills

Low Responsiveness

Expressive Style

- Spontaneous actions and decision
- Dislikes being alone; Exaggerates and generalizes; Likes involvement
- Tends to dream and jumps from one activity to another; works quickly and excitedly with others get others caught up in his/her dreams
- Seeks esteem & belongingness; good persuasive skills

High Assertiveness

Driving Style

- Decisive actions and decisions; Likes control, dislikes inaction
- Prefers maximum freedom to manage themselves and others; Cool, independent and work environment competitive with others
- Low tolerance for feelings, attitudes and advice for others; Works quickly and impressively often alone alone
- Seeks esteem and self-actualisation
- Good administrative skills

Have you recognised these different learning/social styles in practice?

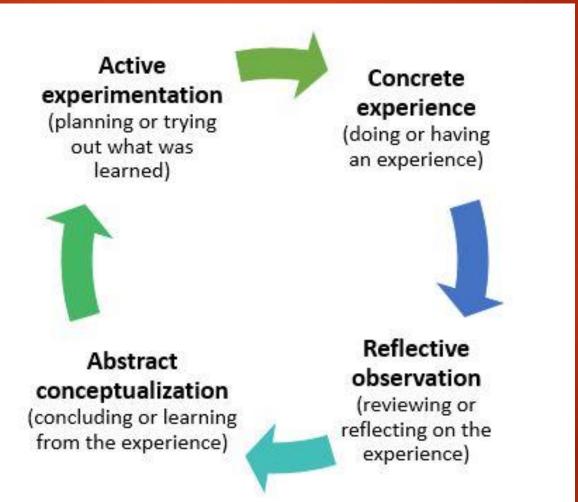
- Comment on the board -
- https://universityofbrighton.padlet.org/pdick8/nknir9jpyri51o9r
- How might this affect your practice?
- Come back in 5 minutes and discuss



Reflection and learning

- Learning can be
 - Taught/observed
 - ► Classroom, clinical setting
 - Experienced
 - ▶ Simulation, real-world
 - Assessed
 - ▶ To inform educators of progress/standard
 - ▶ To inform learner of progress/standard
 - ▶ Informal, formative, summative

Experiential learning (Kolb's reflective cycle)



Gibbs' Cycle

Description

What happened?

Action Plan
If it arose
again, what
could you
do?

Feelings
What were
you thinking
and feeling?

Gibbs' Reflective Learning Cycle

Conclusion
What else
could you
have done?

Evaluation
What was
good and bad
about the
experience?

Analysis
What sense
can you
make of this
situation?

Novice Is rule driven Uses analytic reasoning and rules to link cause and effect Has some ability to filter or prioritize information, so synthesis is difficult at best and the big picture is elusive Advanced beginner Can sort through rules and information to decide what is relevant based on experience Uses both analytic reasoning and pattern recognition to solve problems Can abstract from concrete and specific information to more general aspects of a problem Competent Emotional buy-in allows the learner to feel an appropriate level of responsibility More expansive experience tips the balance in clinical reasoning from methodical and analytic to more readily identifiable pattern recognition of common clinical problem presentations Sees the big picture Complex or uncommon problems still require reliance on analytic reasoning Can perform this activity with understanding of theory and practice principles without assistance and/or direct supervision, at an appropriate pace and adhering to evidence-based practice Proficient Breadth of experience allows one to rely on pattern recognition of illness presentation such that clinical problem solving seems intuitive Still needs to fall back to methodical and analytic reasoning for managing problems because exhaustive number of permutations and responses to management have provided less experience in this regard than in illness recognition Is comfortable with evolving situations; able to extrapolate from a known situation to an unknown situation (capable) Can live with ambiguity Dreyfus and Dreyfus Expert Thought, feeling, and action align into intuitive problem recognition and intuitive situational responses and model (Adapted from management national Podiatry Is open to notice the unexpected Is perceptive in discriminating features that do not fit a recognizable pattern assessment tool)

Levels of competency

Novice

- Rule driven
- Uses reasoning and rules to link cause and effect
- Some ability to filter and prioritise so synthesis difficult and big picture is elusive

Levels of competency

Advanced Beginner

- Uses experience to sort through rules and information to decide what is relevant
- Problem solves using analytical reasoning and pattern-recognition
- Can abstract from concrete and specific information to apply to more general problems

Levels of competency

Competent

- Emotional buy-in allows learner to feel appropriate level of responsibility
- Expansive experiences causes clinical reasoning to tip from methodical and analytical to pattern recognition of common clinical presentations
 - But complex problems still require analytical reasoning
- Can perform activities with understanding of theory and practical principles without assistance and/or direct supervision
- Sees the bigger picture

The role of feedback in professional development (MCKimm, 2009)

Table 1. The role of feedback in professional development					
	Unconscious incompetence	Conscious incompetence	Conscious competence	Unconscious competence	
Learner	Low level of competence. Unaware of failings	Low level of competence. Aware of failings but not having full skills to correct them	Demonstrates competence but skills not fully internalized or integrated. Has to think about activities, may be slow	Carries out tasks without conscious thought. Skills internalized and routine. Little or no conscious awareness of detailed processes involved in activities	
Role of feedback	Helps learner to recognize weaknesses, identify areas for development and become conscious of incompetence	Helps learner to develop and refine skills, reinforces good practice and competence, demonstrates skills	Helps learner to develop and refine skills, reinforces good practice and competence through positive regular feedback	Raise awareness of detail and unpack processes for more advanced learning, note any areas of weakness or bad habits	

Effective feedback

► DON'T

- Generalise
- Comment on things that can't be changed
- Criticise without making recommendations

DO

- Find and appropriate time and place
- Agree what you are going to focus on
- Accentuate the positive
 - Start with what went well
- Distinguish between intent and effect
- Distinguish between performance and personal
 - "that sounded judgemental" Vs "you are judgemental"
- Identify areas for improvement
- Offer alternatives
- Check for understanding

Formative Assessment

- Helps students know how they are progressing
 - Compare against standards
- Does not count towards the final mark
- More formal than continuous feedback (could be a half-way report)

Summative Assessment

- At the end of the placement
- Pass or fail
- Does not count towards the degree classification
 - But failure will impact students' ability to continue

Evaluation and Reflecting on the learning

- Students evaluate their placement experience formally, informally and in university sessions and this is sent back to you
- Time for you and the team to reflect on what went well and what might be different next time

Student Placement Evaluation Form

To enable us to monitor standards and the quality of placements, students must complete an evaluation form following each placement (COR Quality Standards for Practice Placements, 2012). We would like you to be as honest and constructive in your feedback as possible. This is important in enabling your educators to identify their strengths and needs in terms of providing good quality placement experiences for students.

The form will be kept here at the University and a copy will be given to your educator to support their CPD. You therefore need to ensure that all feedback is written in a constructive and professional manner. If you experience difficulties with the placement, it is important that you still provide honest <u>feedback</u> but you may want to discuss how you present this feedback with your personal tutor. If you raise specific issues about your placement these may also be discussed with the placement coordinator responsible for that placement to ensure that your feedback is addressed if necessary. Completing this evaluation form is an important learning opportunity for you as the skill of providing constructive feedback is one that you will need to develop for your future role as a radiographer.

The completed evaluation must be emailed to c.m.wallace@brighton.ac.uk after completion of placement. You may also want to keep a copy of the form for your CPD folder.

Student Name:	Year:
Placement Site:	
Placement Setting/Modalities:	
Date of Placement-	
From:	
To:	
Practice Educator Name(s):	
Practice Educator Contact details (email/ <u>phone</u>), if different from the cont placement form:	act details you were given on your
Nome and date	
Form reviewed by Practice Education Team:	
Comments from Practice Education Team (if necessary)	

	PREPARATION FOR PLACEMENT	Yes	No	Please briefly state reason
111	I received information from University about how to contact my placement prior to starting.			
2 0	Before going on placement, I understood how the course learning outcomes linked to the practice experience.			
3 0	My hospital accommodation was adequate and comfortable (Note: only complete question 3 if you stayed in hospital accommodation).			
	WELCOME AND ORIENTATION	Yes	No	Please briefly state reason
4	I was made to feel welcome as part of the team.			
	My induction/orientation programme was adequate to prepare me for my placement.			
	On my first day, I <u>was made</u> aware of my line of support within the placement setting.			
	I discussed my learning contract with my Practice Educator at the beginning of the placement.			
8	Any student resources on placement were current.			
	Any student resources provided were a valuable learning aid.			
-	Additional student resources/ information would have	been ເ	iseful	on (please make a note here):
-	-	Yes		on (please make a note here): Please briefly state reason
10 /	Additional student resources/ information would have			
11	Additional student resources/ information would have Learning Environment I was made aware of potential learning opportunities			
10 A	Additional student resources/ information would have Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask			
10 / 11 12 13	Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask questions appropriate to my level of experience. I had the opportunity to learn in other departments / with staff who do not work in the imaging			
10 / 11 12 13 14	Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask questions appropriate to my level of experience. I had the opportunity to learn in other departments / with staff who do not work in the imaging department			
10 / 11 12 13 14 15 16 16 16 16 17 16 17 17	Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask questions appropriate to my level of experience. I had the opportunity to learn in other departments / with staff who do not work in the imaging department I was assisted to develop my clinical reasoning skills.			
10 / 11 12 13 14 15 16 15 17 17 17 17 17 17 17	Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask questions appropriate to my level of experience. I had the opportunity to learn in other departments / with staff who do not work in the imaging department I was assisted to develop my clinical reasoning skills. I was provided with opportunities to achieve all my learning objectives. My Practice Educator and I discussed the evidence			
10 / 11 12 13 14 15 16 17 18 18 19 19 19 19 19 19	Learning Environment I was made aware of potential learning opportunities within the placement. I was encouraged to participate in discussions and ask questions appropriate to my level of experience. I had the opportunity to learn in other departments / with staff who do not work in the imaging department I was assisted to develop my clinical reasoning skills. I was provided with opportunities to achieve all my learning objectives. My Practice Educator and I discussed the evidence base underpinning different imaging approaches. I was able to observe and discuss interprofessional	Yes		

Session 2 – Summary



Respect
Collaboration
Reflection
Know/understand
Empowerment
Confidence
Environment

- What strategies can you think of to enable you to learn new skills at work?
- Can the students learn this way?
- What affects your ability to learn in the workplace?
- List approaches and strategies to build competence
 - ▶ I.e. incremental basis
- How do you get to understand the student's perspectives and strengths?
 - ▶ To foster collaboration and respect
- How do you empower and build confidence?
- How do you help learners turn negative feedback into constructive challenges?

Session 3 – Additional support

- Equality, Diversity and Inclusion
- Learning support plans
 - Dyslexia etc
- Failing students
 - Recognition
 - Action plans

Equality, diversity and inclusion in the NHS & physiotherapy (Frontline 1.3.21)

Have you experienced or witnessed harassment, victimisation or discrimination while studying or on placement?

- •26% of all respondents
- •35% of respondents with a disability or long-term health condition
- •39% of BAME respondents

Equality, diversity and inclusion in physiotherapy | The Chartered Society of Physiotherapy (csp.org.uk)

Member support and resources | The Chartered Society of Physiotherapy (csp.org.uk)

Webinar Bridging The Gap How to support BAME students on placement 1 Webinar Bridging The Gap How to support BAME students on placement 1 – YouTube

BAME Representation in Physiotherapy (Careers Webinar) | mango masala BAME Representation in Physiotherapy (Careers Webinar) | mango masala - YouTube

Bridging the Gap

A group of PT & OT University of Brighton & CCCU students have been on a leadership placement called 'Bridging The Gap to Leadership'. They have provided resources for educators so they can support BAME students on placement and to help bridge attainment gaps at university.

- Watch their webinar here (April 2021).
 https://www.youtube.com/watch?v=WYfXlgynlYc
- Please take a look at the supporting BAME student resources on our website: <u>Resources for educators | University of Brighton Supporting Health</u> <u>and Sport Students in Practice</u> and share and discuss with your teams.

The Student Voice: On Placements

'I constantly lived in a state of fear'

'I hated my
placement
experience and I
couldn't wait for it to
end.'

'I felt like I was constantly been watched as if they were waiting for me to do something wrong so that they have a reason'

'I felt like I had to work harder than other students because if I didn't I would get called lazy'

'I felt that I picked the wrong course as I was literally on my own'

'I always get pulled up on things that other students don't get pulled up on'

'I felt like I didn't belong there'

'The way that they treated their BAME members of staff was so bad that I wasn't sure if this was the place for me'

'I was exhausted from constantly trying to fit in'

'She just kept touching and commenting on my hair she never asked for permission. One time she even pulled my hair' 'It was lonely being the only person of colour'

'I couldn't believe it, there were so many lies in my supervisors report'

'I was too scared to ask for help'

'They never commented on the quality of my work only ever on that I have a good awareness of the needs of BAME clients'

'I avoided speaking about my religion as when I did they made me feel like I was an extremist' 'Nothing will change if I speak up'

'I was always excluded'

Inclusivity & Equitability

- Here is a really important discussion of AHP student experiences from ethnically diverse, LGBTQIA+ and disability backgrounds, which is emotional and impactful.
 - They discuss how educators can create an inclusive, safe and supportive environment: https://youtu.be/QMurDMvoyPg

There is no place for racism, homophobia, transphobia, xenophobia.
 ageism or discrimination of any kind in our society; especially our

healthcare and education systems. We must do better.



Unconscious Bias

- ▶ Get to know what some of your own unconscious biases might be. It is good to know and acknowledge this. You can do so with a test from the Harvard Business School It is called Implicit Association.
- Take the test here.

Learning support for students

- Equality Act (2010)
- Not required to disclose their disability but we may override this if the student or others are at risk
- Reasonable adjustments

Making reasonable adjustments

- Offer opportunity for disclosure at beginning / prior to placement
- Be flexible with work hours if necessary

How to support students with specific learning difficulties

- Autism
- Dyslexia
- Dyspraxia
- Dyscalculia

- They will still demonstrate that they are fit to practice and meet all the learning competencies and skills in the same way as others.
- Affects students in different ways and strategies that have worked for one student on a practice placement might not be helpful for another student; or even that same student in another placement setting.
- Support needs may change and/or arise for first time on placement
- A new task can present more difficulty than it will to others, despite a similar level of ability.
- The level and quality of work might vary from day to day.

Dyslexia specific considerations

- Dyslexic people may forget quickly rather than learn slowly.
- At the start dyslexic students might need instructions repeated several times in order to learn the different procedures and tasks

- May struggle with -
- Recall (instructions, terminology)
- note taking (writing)
- spelling (cannot hear sounds)
- time management
- reading

- loses track/goes blank
- combining activities
- easily distracted
- organising self/work
- clumsy/ balance

- Emotional & Mental Health Impact
 - being "labelled"
 - Embarrassed
 - feeling fearful (of being put on the spot/ to read out load/ being thought stupid)
 - reduced self-esteem etc.

Remember....

- Liaise with university to agree definition for reasonable adjustment and discuss concerns
- Seek guidance, especially if student is at risk of failing
- Consider the individual

The current picture

- There is a rarity of placement failure across our professions.
- The 'fail to fail' is seen in all aspects of education and training
- ? Quantity and Quality of placements.
- ▶ Failure to mention the F word.

The Failing Student

- What characteristics might you expect from the failing student?
- https://universityofbrighton.padlet.org/pdick8/owaeul0nt0w3mcfr
- Come back in 5 minutes to discuss



So why do students struggle in or fail placements? (Finch 2015)

- Blaming others for their mistakes
- Lack of professionalism
- Poor time keeping
- Not working within scope of practice
- Cannot relate theory to practice
- Struggles to see complexity
- Lack of clinical reasoning
- Lack of preparation
- Avoidance of tasks/situations
- Poor or no reflection
- Defensiveness

- Overtalking/not listening
- Over confidence
- Lack of confidence
- Lack of boundaries
- Dishonesty
- Lack of enthusiasm
- Lack of motivation
- Not acknowledging impact of own health
- Personal factors getting in the way.
- Conscious bias



Information for students and education providers

Guidance on conduct and ethics for students

So what do we have to rely on?

- Promote and protect the interest of service users and carers.
- Communicate appropriately and effectively.
- Work within the limits of your knowledge and skills
- Delegate appropriately.
- Respect confidentiality
- Manage risk
- Report concerns about safety
- Be open when things go wrong
- Be honest and trustworthy
- Keep records of your work with service users and carers

What advice would you give?

- Use aims / learning agreements to monitor
- Regular weekly feedback
- Clarity as to what you require to pass
- Time with other team members
- Half-way visit
- Liaise with placement / visiting tutor

Action Plan

Misconduct and Fitness to Practice

- It is not expected that students will be immediately competent but will progress throughout placement and course.
- ► However...
- Core areas of acceptable practice must be met
- Demonstrates non-discriminatory practice
- Practice safely and effectively
- The student demonstrates professionalism throughout their practice
- Serious breaches or failure to act upon warnings will result in placement fail

What else do we need to consider

 A student's race and ethnicity has a significant impact on their degree outcome and graduate employability



- Unconscious and conscious biases
- Letting go of our own experiences
- Exploring the emotional impact of working with a struggling student or failing a student.

Thank you!