GIG CYMRU NHS WALES
Addysg a Gwella Iechyd Cymru (AaGIC)
Health Education and Improvement Wales (HEIW)

These interprofessional placement learning principles have been coproduced with key education and placement provider stakeholders and endorsed by HEIW.

All-Wales principles for interprofessional placement learning experiences

In relation to the HEIW Strategic review of education and implementation of new education contracts

Sept 2022

SC/DP/ED (HEIW-09.2022)

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The principles for interprofessional placement learning experiences produced in this document are informed by discussions in HEIW hosted stakeholder workshops (Aug/Sept 2022) including key education and placement providers. The document has been subject to internal HEIW ratification processes and has been endorsed by HEIW (Sept 2022).

HEIW interprofessional placement learning principles

August 2022

1. Context

Health Education and Improvement Wales concluded the All-Wales pre-registration healthcare professional education tender exercise in 2021. One of the key themes of new education contract awards was for education providers to embed interprofessional placement learning experiences within nursing, midwifery, allied health, and health care science professional programmes.

Interprofessional placement learning specifications were outlined in the HEIW 'Procurement for the provision of Health Professional Education & Training Services':

> *'Education providers (EPs) must provide a minimum of 4 weeks of placement jointly with other student healthcare professionals. The Interprofessional Education Placement days can be spread across the whole Programme and do not need to be delivered in one 4-week block of learning.'*

The 4-weeks (subsequently referred to as 150 hours) is taken to denote placement time that a student spends with other students or with other health, education, and social care professionals outside of their chosen professional programme.

The focus on interprofessional placement learning within HEIW education contract specifications is reflective of a call for better utilisation of interprofessional education and collaborative practice strategies to strengthen health system performance and improve health outcomes (WHO 2010; WHO 2022).

2. Professional regulation, education standards, codes of practice

HEIW contract specifications also benchmark with regulatory body requirements for integration of interprofessional education within education programmes enabling students' exposure to seamless ways of working. Professional codes require registrants to work collaboratively with colleagues and share skills, knowledge and experience where appropriate (NMC 2018; HCPC 2016; AHCS 2022).

Key requirements of the Nursing and Midwifery Council *Framework for nursing and midwifery education* (NMC 2018) include provision of a learning culture that is conducive to safe and effective learning where innovation and interprofessional learning and team working are embedded.

Health & Care Professions Council *Standards for education and training* (HCPC 2017) require programme design and delivery to ensure learners can learn with and from, professionals and learners in other relevant professions.

Academy for Healthcare Science *Standards of education and training* include professional standards to support the development of the learner in a multi professional team setting including opportunities for effective interprofessional teaching and learning wherever possible (AHCS 2022).

3. Summary of interprofessional placement learning principles

All-Wales interprofessional placement learning principles	
Benefits of interprofessional placement learning	
1.	Interprofessional placement learning opportunities will equip students to meet contemporary service objectives to expand generalist skills and promote seamless integration of services, particularly through exposure to professional groups students are likely to work with in their future careers.
Inter-professional placement learning ethos	
2.	Interprofessional placement learning is founded on two or more professionals being able to learn about, from, and with each other to enable effective collaboration and improve health outcomes (WHO 2010).
3.	Interprofessional education will constitute a minimum 20% of students' overall healthcare programme, including a minimum 150 hours of interprofessional learning experiences during placements.
4.	The requirement for 150 hours of interprofessional placement learning experiences can be accumulated over the full duration of a healthcare programme whether accrued as opportunities arise in practice, centrally allocated as a planned block of placement time, or incorporating simulated learning activity.
Informal and formal interprofessional placement learning	
5.	Best practice interprofessional placement activity will include a blend of enabling placement learning opportunities where students work with healthcare professionals *and* with students from outside of their professional programme or field of practice.
6.	Provision of 'informal, in situ learning' and 'formally allocated' interprofessional placement learning opportunities will be based on effective facilitation, supervision, and partnership arrangements between education and placement providers.
7.	Education and placement providers will seek opportunities for relevant groups of students to undertake joint induction and reflective supervision, enabled by close working relationships between HEIs and placement providers and the allocation of students from different professions to placement environments at aligned times in the calendar year.

HEIW contract expectations in relation to interprofessional placement learning	
8.	The ratio of time that students spend with other students and with health and care professionals outside of their chosen professional programme will be for HEIs and placement providers to determine but must include a *proportionate blend of enabling interprofessional placement learning opportunities* in such a way this promotes greater understanding of how a range of professionals contribute collectively to person-centred care.
9.	HEIW will enable the sharing of best practices relating to interprofessional placement learning initiatives through collaborative events and a central repository of resources.
Performance reporting and quality management of interprofessional placement learning experience	
10.	HEIs will report against annual HEIW interprofessional placement performance measures in relation to each student cohort from Sept 2022, incorporating a range of best-practice placement information.
Student record of interprofessional placement learning	
11.	Students will utilise an 'Interprofessional Student Learning Log' throughout their programme journey to accurately record and reflect on their accumulation of 150 hours of inter-professional placement learning.
12.	Organisations will encourage a learning climate where students are also active participants in identifying and arranging their own learning opportunities.

4. Benefits of interprofessional learning

The interprofessional element of HEIW new education contracts emphasise the importance of students' understanding of service models that empower service users, families and carers, and communities (Welsh Government 2018).

Previous high-profile service failings focus on the importance of interprofessional connections as fundamental to person-centred organisational culture, prudent healthcare, and effective multi-disciplinary and multi-agency service delivery (Ockenden 2022; Frances 2013).

Interprofessional literature highlights the educational value of healthcare students learning with other healthcare professionals, as well as with students outside of their chosen professional programme (Fox et al. 2017; Darlow et al. 2017) notwithstanding the complexities of facilitating interprofessional education in practice (O'Leary et al. 2022; Boshoff et al. 2020; Reeves et al. 2013).

Benefits are indicated in the connection between interprofessional education and students' enhanced sense of professional identity and clinical confidence, understanding roles and responsibilities, and greater appreciation of ethical practice, conflict resolution, communication, collaboration, and teamwork (Bianchi et al. 2019; Foronda et al. 2016)

Interprofessional placement learning opportunities will also help enable students to meet the aims of A healthier Wales: long term plan for health and social care and Our Workforce Strategy for Health and Social Care, to expand generalist skills and provide a seamless close professional integration of services, particularly through exposure to professional groups that students are likely to work with in their future careers (KPMG 2019).

Opportunities to embed students' understanding of interprofessional ways of working can therefore usefully align with programme learning outcomes in relation to communication skills; health, safety and security issues; quality service improvement; equality and diversity; individual health and wellbeing; research impacts; psycho-social determinants of health; public health disease prevention initiatives; leadership development; human anatomy and physiology; and legislative frameworks for health and social care.

Principle 1.
Interprofessional placement learning opportunities will equip students to meet contemporary service objectives, to expand generalist skills and promote seamless integration of services, particularly through exposure to professional groups students are likely to work with in their future careers.

5. Interprofessional education and HEIW contract expectations

The ethos of interprofessional placement learning underpinning the new education contracts is founded on *'two or more professionals*[1] *being able to learn about, from and with each other to enable effective collaboration and improve health outcomes'* (WHO 2010).

Whilst interprofessional education is already a key part of programme curricula and placement experience for all professions, new contract interprofessional placement learning specifications apply to education programmes commencing from Sept 2022. Education and placement providers will therefore have three years to embed arrangements and enable students to evidence 4-weeks (or 150 hours) of interprofessional placement learning activity.

HEIW education contracts require programmes to include interprofessional education opportunities that constitute a minimum contribution of 20% of overall student learning experience (quantified as the number of academic credits and/or learning outcomes, and/or learning hours). Also, that education providers must provide students with the opportunity to work collaboratively with the professional groups that they are likely to work with in their future careers.

HEIW recognises that the interprofessional placement learning element of education contracts will need time to fully embed and that where placements are centrally allocated from HEIs, significant forward planning is required in terms of the logistics of securing interprofessional opportunities for students in practice, particularly student-to student contact across different professions.

Principle 2.
Interprofessional placement learning is founded on two or more professionals being able to learn about, from, and with each other to enable effective collaboration and improve health outcomes.

Principle 3.
Interprofessional education will constitute a minimum 20% of students' overall healthcare programme, including a minimum 150 hours of inter-professional learning experiences during placements.

Principle 4.
The requirement for 150 hours of interprofessional placement learning experiences can be accumulated over the full duration of a healthcare programme whether accrued as opportunities arise in practice, centrally allocated as a planned block of placement time, or incorporating simulated learning activity.

[1] The term healthcare 'professional' is used in its widest sense to include all individuals working as part of a team in support of service users in health and care settings. 'The philosophy of teamwork underpins health practice, involving collaboration with other health workers, intersectoral collaboration, and collaboration with individuals, caregivers, families and populations as informed members of the health team' (CAIPE 2017; WHO 2022).

6. Informal and formal interprofessional placement learning

With increased numbers of students undertaking nursing, midwifery, allied health, and healthcare science healthcare programmes, expanded opportunities exist for interprofessional placement learning across professional groups.

In one sense, interprofessional placement learning experiences will happen 'as and when' students work with other students and other health and care professionals outside of their chosen professional programme throughout the course of service delivery. This exposure and understanding of how interprofessional working contributes to person-centred care will also align with taxonomies of learning as students' progress through their programme.

For example:

- where nursing, physiotherapy, and occupational therapy students may be contributing to the care of a person who has experienced a stroke,
- or where midwifery, operating department practitioner, and diagnostic radiography and imaging students are involved in support of individuals in orthopaedic trauma or obstetric theatres,
- or where, clinical psychology trainees, dietetic, or social work students are supporting a person with a learning disability in a community team,
- or where speech and language therapists are working with teachers and parents to ensure communication in familiar environments, is accessible for an autistic child.
- or where medical trainees, pharmacy and radiotherapy students are part of interprofessional care in cancer treatment centres.

Harnessing these 'informal' interprofessional placement learning opportunities is dependent on placement supervisors/educators bringing students together where clinical circumstances allow, with such expectations being normalised as part of an enabling placement learning culture and recorded by means of a learning log (see Appendix 1).

Interprofessional placement learning opportunities will also occur where prior planning allows students from across professional groups to be centrally allocated by one or more HEIs to be on placement at the same time.

Where curriculum planners enable this more 'formal' method of student allocations, there is an opportunity for supervisors/ educators and others to engage students in collective learning experiences. This may be over the duration of a placement, (or part of a placement), through bringing relevant students together in facilitated clinical supervision sessions, student collaboration on feasible short-term projects and joint student feedback on individual case studies.

Where HEIs can allocate students from different professions to placements at the same time in the calendar year, whether in the same learning environment or in dispersed locations, these best practice opportunities for interprofessional learning will arise (facilitated remotely where necessary). Normalising interprofessional placement learning opportunities over the next three years and beyond, will therefore involve further focus on:

- Multi-professional educational audit of practice learning environments.
- Integration of collaborative models of learning in practice, with students also being active participants in their own learning (Hill et al. 2020; Williamson et al. 2020; Willis 2012).
- Inclusion of interprofessional placement opportunities in practice supervisor/educator preparation programmes that incorporate discussion on facilitator confidence, managing professional conflict, and a commitment to interprofessional education (O'Leary 2022; van Diggele et al. 2020).
- Best practice simulated interprofessional learning activity particularly in terms of students' development of knowledge, skills, attitudes, and behaviours associated with collaborative ways of working (INACSL Standards Committee 2021; Boet et al. 2014; Gough et al. 2012).
- Additional HEI scrutiny of placement timetabling through the calendar year across professional groups, facilitating the equity of interprofessional learning opportunities across student cohorts and working with placement providers for increased provisions for inter-professional student induction.

HEIW will also continue to work in partnership with organisations to help embed the interprofessional placement element of new education contracts including opportunities for organisations to come together to share best practices. This will involve an offer for HEIW to facilitate further workshops and conference events, develop a repository of interprofessional resources and provide ongoing operational clarifications about the interprofessional element of contract implementation.

Additionally, the HEIW simulation team will engage with stakeholders on processes, pathways and innovation required to further develop interprofessional simulation-based education and training in Wales.

Principle 5.
Best practice interprofessional placement activity will include a blend of enabling placement learning opportunities where students work with healthcare professionals *and* with students from outside of their professional programme or field of practice.

Principle 6.
Provision of 'informal, in situ learning' and 'formally allocated' interprofessional placement learning opportunities will be based on effective facilitation, supervision, and partnership arrangements between education and placement providers.

Principle 7.
Education and placement providers will seek opportunities for relevant groups of students to undertake joint induction and reflective supervision, enabled by close working relationships between HEIs and placement providers and the allocation of students from different professions to placement environments at aligned times in the calendar year.

7. HEIW contract expectations in relation to interprofessional placement learning

The ratio of time a student spends with other students and time with other health, education or social and care professionals outside of their chosen professional programme within the '4-weeks' (or 150 hours) of interprofessional placement learning stipulated in HEIW education contracts, will be for HEIs and placement providers to determine.

However, it will be expected that this ratio includes a *proportionate blend of enabling interprofessional placement learning opportunities* for students to work with other students and with other health, education, and social care professionals in such a way this promotes greater understanding of how a range of professions contribute collectively to person-centred care.

HEIW will assist with the capture and central storage of best practice interprofessional initiatives for example, including documented student case studies, placement exemplars describing students' interprofessional collaborations (see example in Appendix 2), videos capturing students' interprofessional experience, best-practice inter-professional student allocation methods.

As programmes embed over coming years, HEIW will also evaluate implementation of the interprofessional learning contract elements through agreed HEI quality monitoring and performance measures.

Principle 8.
The ratio of time that students spend with other students and with health and care professionals outside of their chosen professional programme will be for HEIs and placement providers to determine but must include a *proportionate blend of enabling interprofessional placement learning opportunities* in such a way this promotes greater understanding of how a range of professionals contribute collectively to person-centred care.

Principle 9.
HEIW will enable the sharing of best practices relating to interprofessional placement learning initiatives through collaborative events and a central repository of resources.

8. Performance reporting and quality monitoring of interprofessional placement learning experience

The planning, organisation, and management of interprofessional placement learning opportunities is a joint responsibility of the education provider in partnership with placement providers. This set of obligations is detailed in the HEIW Local Level Agreement.

HEIW will require HEIs to report on inter-professional activity and their partnership working with placement providers as part of new education contracts. HEIW has agreed a performance management framework with HEIs to monitor implementation of contracts including interprofessional specifications, effective from Sept 2022.

These requirements will be discussed as part of finance, performance and quality contract business meetings between HEIW and HEIs scheduled throughout the year. From Sept 2022, HEIW will also arrange bi-annual 'Regional Collaborative Education Consortiums.' These are meetings including HEIW, an individual Health Board and their feeder HEIs, to discuss key themes and objectives arising from new contract awards, including placement capacity and innovation.

The requirement for students to have completed 150 hours of interprofessional placement learning time is included as a key performance indicator within the HEIW performance management framework. Examples of annual returns by HEIs going forward will include:

- Submission of an annual summary of interprofessional placement learning activity for each student cohort from Sept 2022. This could include organisational initiatives, case studies, placement journey exemplars, student video clips of interprofessional learning experiences, high-level summaries of student placement evaluations, and HEI development of best practice interprofessional learning in practice.
- Summary reports providing assurance that all students (from Sept 2022) have accrued 150 hours of interprofessional placement learning experience by the end of their programme. This will include assurance of interprofessional placement learning as part of students' journey through the programme that includes '*a proportionate blend of enabling interprofessional learning opportunities.*'

This contractual requirement will be formally reported for the first time in HEI returns following the graduation of students in 2025. However, HEIW will seek assurance from education providers during the range of annual contract meetings and prior to new programme completions that students will be able to meet the interprofessional placement learning requirements. Best practice will also ensure students on existing programmes benefit from interprofessional learning in practice.

Principle 10.
HEIs will report against annual HEIW interprofessional placement performance measures in relation to each student cohort from Sept 2022, incorporating a range of best practice placement information.

9. Student record of interprofessional placement learning

To ensure students accurately record and reflect on interprofessional placement learning throughout their programme journey, an 'Interprofessional Student Learning Log' is recommended (see Appendix 1 for a suggested template). The template can be adapted as appropriate for individual programmes and incorporated within or alongside students existing practice assessment documentation.

Principle 11.
Students will utilise an 'Interprofessional Student Learning Log' throughout their programme journey to accurately record and reflect on their accumulation of 150 hours of interprofessional placement learning.

Principle 12.
Organisations will encourage a learning climate where students are also active participants in identifying and arranging their own learning opportunities.

Appendices

Appendix 1. Interprofessional learning log template

The following is by way of a suggested template for an 'Interprofessional Student Learning Log' for students to collate their ongoing interprofessional learning and development during placement learning. The template can be aligned with students' practice assessment document and added to e-platforms.

Students' learning logs and their accrual of 150 hours of interprofessional learning experiences and can be reviewed as part of personal tutor/ academic mentor/ academic assessor discussions post placements as students' progress through their programme.

It is anticipated students would also share their learning logs with practice supervisors and practice assessors during placements for verification of learning hours accrued, and to enable discussion on the collaborative effects of working with students and healthcare professionals outside of their chosen professional programme.

Students would also be expected to identify practice learning outcomes linked to their programme that correspond with the interprofessional learning activity they have undertaken, cross reference these and specify them within the learning log.

The following narrative can be used to remind students of the purpose of the interprofessional learning log, how this can be integrated within their wider portfolio of learning, and how this informs their personal and professional development.

My Interprofessional Student Learning Log

Please use the following reflective template to record your interprofessional learning as you progress through your healthcare programme. This will help you provide a record of learning about, from, and with other students and registrants across other health professions enabling effective collaboration and improved health outcomes.

By the end of your programme, you will need to evidence 150 hours of interprofessional activity that includes a proportionate blend of learning opportunities with healthcare professionals and with other students outside of your chosen programme.

Fill in a page for each of your reflective accounts, linking these to your programme learning outcomes that refer to interprofessional learning and development. You need to make sure you do not include any information that might identify a specific service user or carer, a colleague, or other individuals whose anonymity might otherwise be compromised.

Please also share your interprofessional learning log with your personal tutor/ academic mentor, and with practice supervisors and practice assessors as you progress through your programme journey.

My Interprofessional Student Learning Log:			
Number of hours involved in this interprofessional learning activity			
What interprofessional placement learning activity you were involved in?			
Enter text			
What did you learn from the interprofessional experience?			
Enter text			
How has the interprofessional activity helped change or improve your practice?			
Enter text			
How does the interprofessional experience link to your programme learning outcomes and code of professional behaviour? Cross reference relevant programme learning outcome numbers and relevant sections from your professional code.			
Enter text			
Number of hours of interprofessional placement activity accrued during your programme so far			
Student signature		**Date**	
Supervisor signature		**Date**	

Appendix 2. Interprofessional placement exemplar

The following provides a suggested format that can be used to generate further practice learning exemplars following a student's learning journey through a placement, incorporating interprofessional learning activity across professional groups, and detailing opportunities for achievement of relevant programme learning outcomes.

Placement setting: Care home environment

Scenario: Interprofessional student supervision and assessment care home exemplar

'Ocean' (pseudonym) care home provides specialist nursing and residential support for people with dementia, challenging mental health needs, acquired brain injury, neurological conditions and learning disabilities. There are 59 beds set within five individual units supporting people over a range of ages.

Ocean care home offers assessment of needs, care planning, risk management, manual handling, shift management, crisis management, physical health care, physical observations, communication skills, liaison with multi-disciplinary teams (MDTs), medication management, management of challenging behaviour, working with families, education of client needs. There is a framework in place for staff professional development.

Ocean care home includes a multi-professional ethos with nursing, physiotherapy, occupational therapy, pharmacy, human nutrition and dietetics, speech and language therapy involvement in care delivery, together with a number of activity coordinators employed.



Students' practice learning experiences include opportunities to participate in the delivery of person-centred care commensurate with students' stage of learning, collaborate and learn with and from other professionals, develop supervision and leadership skills, and develop resilience. Alice is a student in her second year of nursing programme and has been allocated to Ocean care home for a 7-week placement.

Whilst the Unit operates arrangements for students to take advantage of learning opportunities with all care staff working within the care home, the manager (Fatima – a registered nurse) has allocated Lucy as a designated Practice Supervisor to support Alice throughout her practice learning experience.

This arrangement is designed to assist students' sense of continuity of their learning experience throughout their allocation. Fatima is identified as the named Practice Assessor for Alice. All staff supporting Alice have undertaken suitable preparation for their role in line with Nursing and Midwifery Council Standards for supervision and assessment.

During the first week of practice learning experience, Lucy and Alice meet to agree learning objectives. Alice is sign-posted to a range of learning experiences within the care home as well as some external spoke learning opportunities with district nurses, and mental health and learning disability services. Further dates are set for midway and end of practice learning meetings.

Model of supervision:

Fatima, Lucy, and the wider care home team act as role models for person-centred, compassionate care encouraging Alice to reflect on her learning experiences and the team model of supervision and assessment enables Fatima as Practice Assessor to receive credible feedback from several sources on Alice's achievement of proficiencies.

Interprofessional learning opportunity

Ocean care home regularly facilitates student placements across a range of healthcare professions, and currently there are allocated nursing, occupational therapy, and human nutrition and dietetics students. Ocean is one of several care homes within a larger organisational group, and students are allocated to range of provider settings.

Ocean care home has set up an interprofessional model of student supervision and assessment, whereby students from across professions are enabled to learn "about, from, and with each other to enable effective collaboration and improve health outcomes" (World Health Organisation, 2010).

On this occasion, Alice is on placement at the same time as Rhodri (Human nutrition and dietetics student), and Usma (Occupational Therapy student), albeit they are working across the five individual care home units.

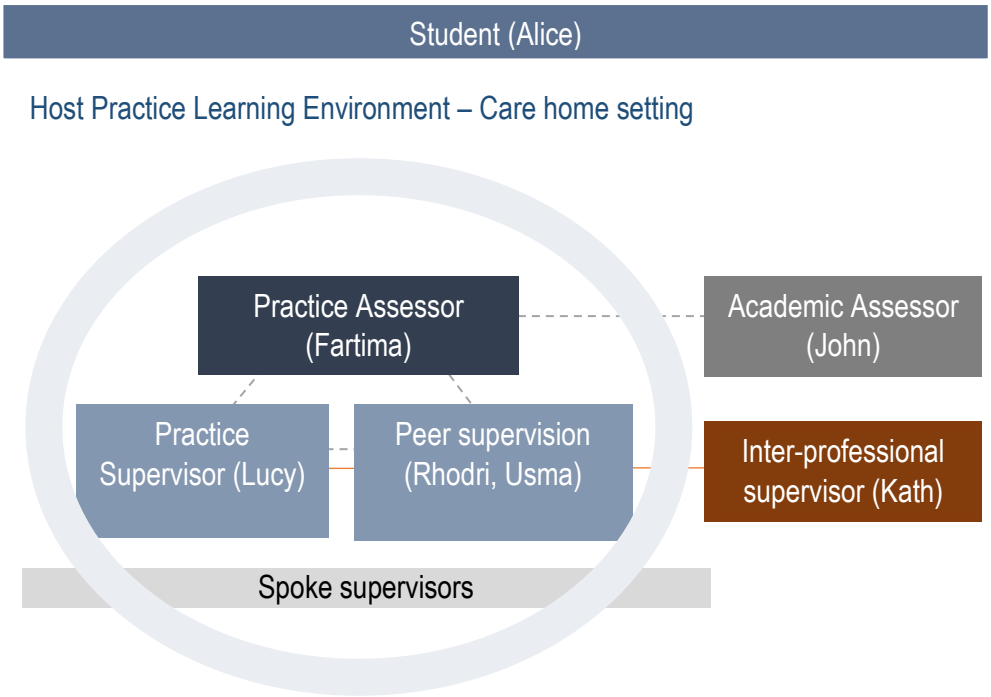
Working directly with clients…

As practice supervisor, Lucy is conscious to facilitate joint learning opportunities where individual client care involves a range of professions.

Where appropriate, students are encouraged to work directly together with individual clients, to reflect on these experiences, and to identify why and where those opportunities result in a wider appreciation of holistic care. All students can also access spoke experiences such as accompanying clients to hydrotherapy sessions, exchange visits to other care home activity centres, and to work with community nurses across fields of practice.

Students are also involved in care home multi-disciplinary team meetings and are expected to feedback on client care delivery issues and experiences.

Key participants in the interprofessional model of student supervision and assessment



Remote supervision…

In addition to engineering opportunities to work with other professions and directly with clients, Ocean has also set up a scheme to bring students together for timetabled, facilitated interprofessional reflection. Lucy is also able to join these meetings.

On this occasion, Kath (a member of the care home training team)[2] has set up three remote meetings during the placement with Alice, Rhodri, and Usma. Clinical supervision ground-rules are agreed, and as part of these sessions, students are asked to bring an anonymised client story from their practice experience to share with peers, and to 'swop' professional roles to view the story from different professional perspectives.

At the beginning of the placement, students were asked to consider a particular aspect of care (on this occasion meeting the spirituality needs of clients), and during remote supervision sessions, these discussions are also advanced using an interprofessional lens.

Assessment…

As a result of the range of placement learning opportunities, Lucy was able to make informed decisions about Alice's formative development and achievement of proficiencies, skills, and procedures.

[2] Interprofessional supervisors and facilitation can be provided from within the care home staff, or externally from Care Home Education Facilitators, or University staff.

Regular contact with Fatima (practice assessor) enabled rich feedback from Lucy on Alice's learning progression and professional development. As Practice Assessor, Fatima also undertook observations of Alice during the placement, and informed by Lucy's feedback and the collective views of the wider team, was able to sign-off several of Alice's practice learning outcomes.

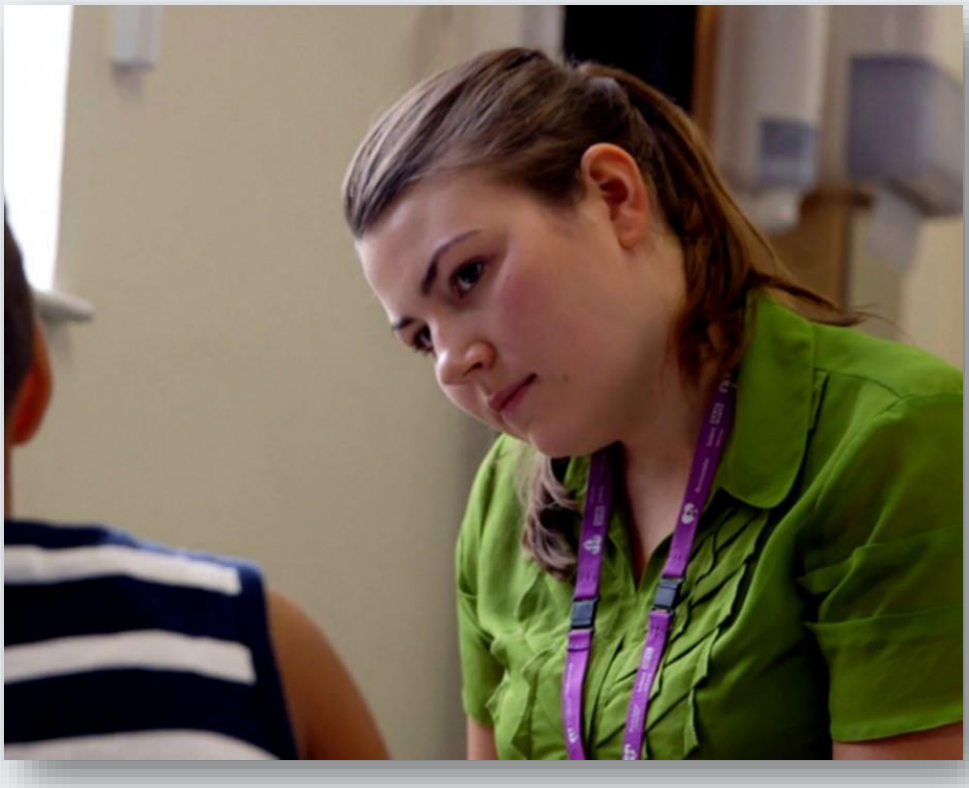
The nominated university Academic Assessor (John) was also able to link with Fatima, and together agree Alice's achievement and progression.

Focus: *Usma's refection*

I undertook an elective placement as part of my Occupational Therapy degree programme in a care home setting predominantly supporting older people with dementia. The aim of this placement was to gain insight into peoples' lives and adapt my practice as part of my continuing professional development.

Spending time with care home staff and residents allowed me to gain a greater understanding and experience of how to communicate with people, particularly some residents with learning disabilities who were also experiencing the effects of Alzheimer's disease. I have recognised the importance of individuality and getting to know the person and their individual needs and abilities and how this allows enhanced forms of communication.

An important point to take-away from this learning was the individuality and complexity of communication needs and respect for individual likes and dislikes, and abilities. This was especially relevant when clients were accessing unfamiliar care environments or involved in discussions about life ambitions.



I was also able to attend multi-disciplinary review meetings during the placement. I was encouraged to participate in these meetings alongside other students from different professions. We were invited to be involved in a project to rationalise medication regimes for people with a learning disability whose behaviour may challenge services.

We were asked to feedback on aspects of the project which included person-centred inclusive communication plans for individual residents with prudent use of 'as required' medication being a 'last resort' aspect of individual plans. I was also able to attend a hospital appointment with a resident that allowed me to see how different medical professionals treated the individual.

The approach taken by the staff at the hospital towards the resident was extremely positive, allowing time for explanations and ensuring the resident's questions were satisfied. For example, questions were directed at the resident and only if needed were directed to carers, ensuring that the resident wasn't overlooked and was included in all the conversations. This experience allowed me to think about when I will treat individuals in hospital and how to address someone with learning disabilities.

Learning log

The main things I learnt whilst on my elective placement was how to appropriately alleviate situations where residents may be distressed and that this requires individualised forms of care. Also, the importance of enabling individuals to be as independent as they can be and improving my communication skills has been invaluable.

I have also recognised the value of being with other students from different professions, especially how much learning is common across professional groups in terms of professionalism, accountability, working within the limitations of individual competence, safeguarding individual clients, working in an interprofessional team, and the importance of interpersonal communication.

I entered some reflections on my interprofessional experiences in a learning log.

Additional learning opportunities:

As part of the learning contract discussions, Alice, Rhodri and Usma were able to identify a range of wider learning opportunities within the allocation. Examples included:

- Following individual patients through a care pathway approach using appropriate communication skills.
- Under supervision, leading and managing the care, appropriate prioritisation, delegation, and assignment of care responsibilities to others involved in providing care in a multi-professional environment.
- Managing the process of access to additional healthcare services, demonstrating knowledge of when and how to refer people safely to other professionals or services for clinical intervention or support.
- Working with the specialist professionals to follow the co-ordination of clients' healthcare pathways and review.
- Working with a range of professionals to demonstrate best practice approaches for meeting needs for care and support with a range of healthcare issues, accurately assessing the person's capacity for independence and self-care and initiating appropriate interventions.

References

AHCS. 2022. *Standards of Education and Training for MSC Undergraduate and post Graduate Programmes.* The Academy for Healthcare Science. Retrieved from: AHCS-Overarching-SETs (2).pdf

Bianchi, M., and Valentina B. 2019. Effectiveness of Interprofessional Education and New Prospects. *Journal of advanced nursing* 75.1 2019: 14–16.

Boet. S., Bould. MD., Burn. CL.., Reeve. S. 2014.Twelve tips for a successful interprofessional team-based high-fidelity simulation education session *Medical Teacher* 36: 853–857

Boshoff. K., Murray. C., Worley. A., Berndt. A. 2020 Interprofessional education placements in allied health: A scoping review, Sc*andinavian Journal of Occupational Therapy,* 27:2, 80-97, DOI: 10.1080/11038128.2019.1642955

CAIPE. 2017. *Interprofessional education handbook*. Centre for Advancement of Interprofessional Education. Fareham. Retrieved from: IPE-Handbook-2021-without-note-pages (2).pdf

Darlow. B., Coleman. K., McKinlay. E., Donovan. S., Beckingsale. L., Gray. B., & Pullon, S. 2015. The positive impact of interprofessional education: A controlled trial to evaluate a programme for health professional students. *BMC Medical Education*, 15(1): 98

Foronda. C., MacWilliams. B., McArthur. E. 2016. Interprofessional Communication in Healthcare: An Integrative Review. *Nurse education in practice* 19: 36–40.

Fox L., Onders R., Hermansen-Kobulnicky C.J. 2017. Teaching interprofessional teamwork skills to health professional students: a scoping review. *Journal of Interprofessional Care.* 32(2):127–35.

Gough. S., Hellaby. M., Jones. N., MacKinnon. R. 2012. A review of undergraduate interprofessional simulation-based education (IPSE) *Collegian*. 19:153—170

HCPC 2017. *Standards of education and training.* Health and Care Professions Council. Retrieved from: standards-of-education-and-training.pdf (hcpc-uk.org)

Hill, R., Michael, W., Arthur, A. 2020. Collaborative Learning in Practice (CLiP): Evaluation Report. University of Easy Anglia and Health Education East of England. *Nurse Education Today* 85, February 2020, 104295. Retrieved from: https://www.sciencedirect.com/science/article/abs/pii/S0260691719301388?via%3Dihub

INACSL Standards Committee (International Nursing Association for Clinical Simulation and Learning), Rossler. K., Molloy. M.A., Pastva. A.M., Brown. M., Xavier. N. 2021. Healthcare Simulation Standards of Best Practice TM Simulation-Enhanced Interprofessional Education. *Clinical Simulation in Nursing*, 58: 49-53.

KPMG. 2019. *Review of health professional education and training in Wales*. KPMG International Cooperative.

Mid Staffordshire NHS Foundation Trust Public Inquiry. 2013. *Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry: Executive summary.* Retrieved from:http://www.midstaffspublicinquiry.com/sites/default/files/report/Executive%20summary.pdf

NMC. 2018. *Standards framework for nursing and midwifery education.* Nursing and Midwifery Council. London. Retrieved from: education-framework.pdf (nmc.org.uk)

Ockenden Report. 2022. *Findings*, *conclusions, and essential* actions from the *independent review of maternity services at the Shrewsbury and Telford Hospital NHS Trust* (HC1219). Crown. Retrieved from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1064302/Final-Ockenden-Report-web-accessible.pdf

O'Leary. N., Salmon. N., O'Donnell. M., Murphy. S., Mannion. J. 2022. Interprofessional education and practice guide: profiling readiness for practice-based IPE, *Journal of Interprofessional Care*, DOI: 10.1080/13561820.2022.2038551

Reeves. S., Perrier. L., Goldman. J., Freeth. D., Zwarenstein M. 2013 *Interprofessional education: effects on professional practice and healthcare outcomes*. Cochrane Database Syst Rev.(3).

Welsh Government. 2019: *A Healthier Wales: Our Plan for Health and Social Care*. Retrieved from: https://gov.wales/sites/default/files/publications/2019-10/a-healthier-wales-action-plan.pdf

Williamson. G., Bunce. J., Kane. A., Jamison. C., Clarke. D. 2020. Investigating the Implementation of a Collaborative Learning in Practice Model of Nurse Education in a Community Placement Cluster: A Qualitative Study. *The Open Nursing Journal*. Retrieved from: http://dx.doi.org/10.2174/1874434602014010039

Willis Commission. 2012. *Quality with Compassion: The Future of Nursing Education*. Retrieved from: http://www.williscommission.org.uk/__data/assets/pdf_file/0007/495115/Willis_commission_report_Jan_2013.pdf

World Health Organization. 2010. *Framework for action on interprofessional education and collaborative practice.* Geneva: World Health Organization. Retrieved from: WHO_HRH_HPN_10.3_eng.pdf

World Health Organization. 2022. Global Competency Framework for Universal Health Coverage. Health Workforce Department. Geneva: World Health Organization. Retrieved from: 9789240034686-eng.pdf