AHP principles of practice-based learning

Working together to develop our future workforce

CHARTERED SOCIETY OF PHYSIOTHERAPY

CODP College of Operating Department Practitioners

College of paramedics

Royal College of Occupational Therapists

BAPO

BDA The Association of UK Dietitians

BIOS British and Irish Orthoptic Society

in collaboration with:

Royal College of Podiatry

RCSLT

SoR CoR

AHP principles of practice-based learning: working together to develop our future workforce

Contents

About these principles

Since first introducing the 'Principles of practice-based learning' in October 2022 we have been delighted with the positive response they have received.

The principles have acted as both a catalyst and framework for conversations across practice and education as well as amongst many other professions that we work closely with. It is these conversations that have led to the launch of this updated version co-badged by 10 professional bodies and renamed the 'AHP principles of practice-based learning: working together to support our future workforce'. The challenges of practice-based learning are common across many AHP professions. By working together with clear and consistent messaging, there is a collective opportunity to better shape and support the provision of practice-based learning for our future workforce. We want to make it easier for everyone involved to come together and create placements that work for all.

The change of name is the biggest change to these principles. Their purpose remains the same - to support the development of quality, sustainable placement opportunities for pre-registration AHP students and apprentices. Small changes to the language have been made to ensure the principles are fully inclusive to all professions and additional profession specific references have been embedded.

This document is designed to be used by everyone involved in practice-based learning: students and apprentices; university representatives; practice educators; service leads; business owners and many more. The same principles are applicable across all our professions. By having this common language and shared purpose, we believe these principles offer an opportunity to connect, understand different perspectives and identify areas for joined up working both within and across our professions truly delivering change as we are stronger together.

You can use the document in many ways. It has been created to be flexible and interactive. All principles include the evidence-based rationale behind their importance to our professions. They go on to provide space for individual and group reflections to help you all to consider what they really mean and how they can be embedded into your practice. You may choose to use this information as a discussion within your team, a continuing professional development workshop or to drive conversations with others involved across practice and universities for example. We want the principles to provide a framework to support all those involved in the consideration of new practice-based learning opportunities and the enhancement of established offers.

Whilst these principles stand alone for practice-based learning, we encourage you to read and act upon them in conjunction with other key publications and pieces of work. This includes the Health and Care Professions Council's (HCPC) Standards of Proficiency for your profession [1] , HCPC's Standards of education and training [2] and country specific practice-based learning literature [3].

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Terminology Explainer

We have provided a glossary at the end of this document to help explain the different terminology used.

There are, however, some terms that we would like to offer complete clarity on before you read any further.

‘Placements’ or ‘practice-based learning’?

We use these terms interchangeably. Both refer to the times when pre-registration students and apprentices are completing assessed learning within a professional practice setting.

We use ‘practice-based learning’ within our pre-registration publications’. In doing so we are wanting to bring particular focus to the active process of learning that occurs in practice as opposed to the more passive process of being ‘placed’ somewhere. This terminology also encourages thinking across the four pillars of practice.

We do however recognise that the term ‘placement’ is currently more widely used across our professions. By using both terms in this document, we hope that it offers both familiarity and an increased awareness of newer terminology.

Who are ‘learners’?

Learners are students and apprentices.

With the fantastic growth of apprentice routes into many of our professions, it is crucial that our terminology reflects all enrolled in pre-registration programmes of study who will be engaging in practice-based learning.

We simply use ‘learners’ as a collective term for both students and apprentices.

What happened to the term ‘clinical educator’?

We do not use the term ‘clinical educator’ within this document. Instead, we use the term ‘practice educator’.

Our professions work across all four pillars of practice – clinical, education, leadership and research. Using the term ‘practice educator’ reinforces to all involved that placements can and do happen across all pillars, not just in one.

A practice educator is a registered practitioner who supports learners in the workplace [4]. They lead and facilitate practice education with the support of a team and will be the point of contact for the education institution. The practice educator is likely to hold ultimate responsibility for a learner’s assessment criteria based on the standards produced by the education provider and relevant professional body and they are supported in their role by the wider workforce; all practitioners carrying a responsibility to work with, supervise and provide mentorship to learners.

AHP principles of practice-based learning: working together to develop our future workforce

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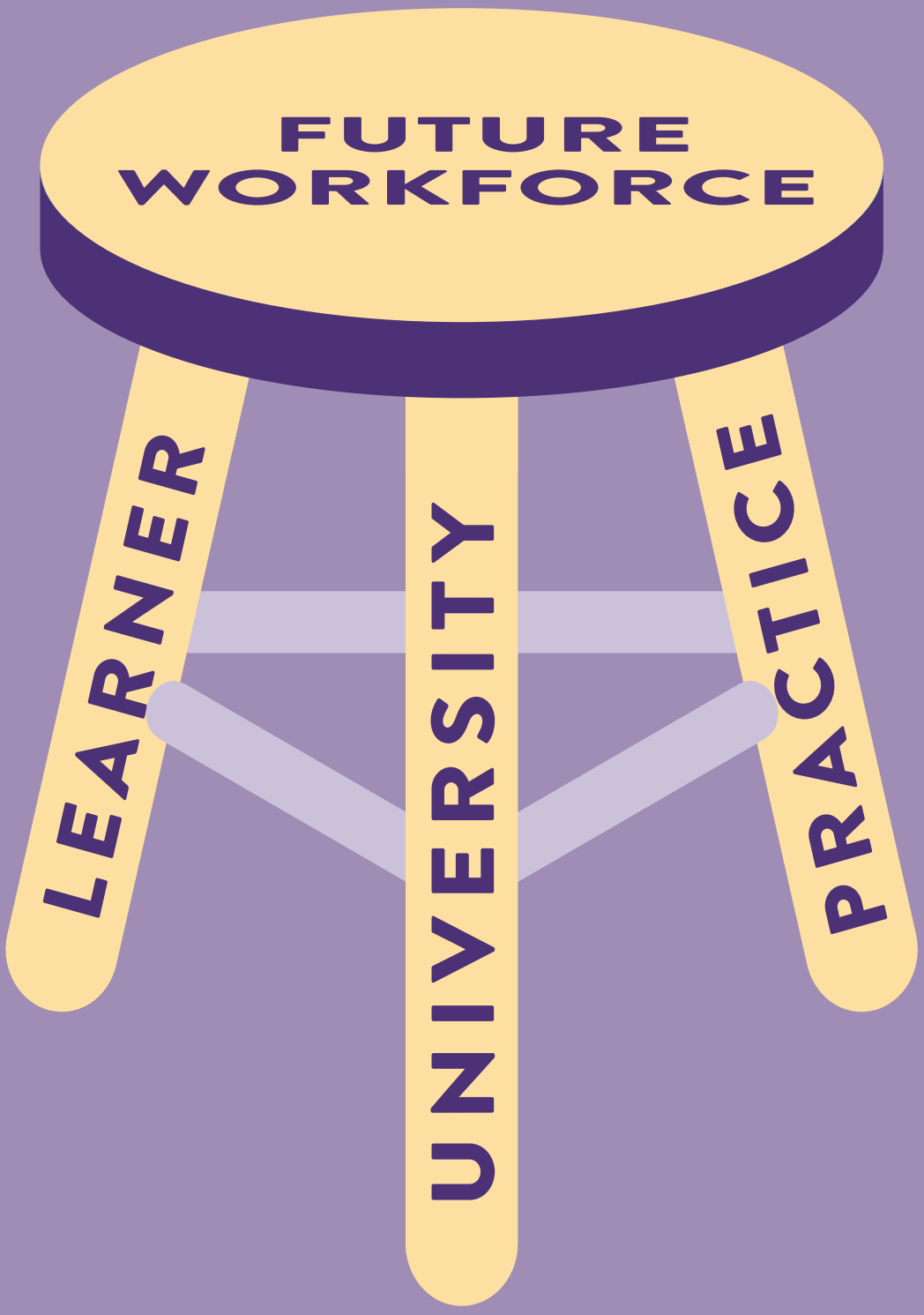
Principle 1

Practice-based learning opportunities are co-produced



Principle 1 Practice-based learning opportunities are co-produced

Lots of different people are involved in practice-based learning. We have learners, practice education teams, host organisations and university representatives as well as the communities and populations we engage with. There are often competing priorities that exist between these people, making the creation of placements that work for everyone involved feel particularly challenging [5]. But rather than focus on the differences, let's instead consider how and where they align. Whether your priority is to recruit a newly registered practitioner into your team or to ensure learners graduate on time as work-ready professionals, **we all seek to develop our future workforce**.

To address this common goal, we must work together.

The development of the future workforce can be represented as a three-legged stool. Each leg may be separate, but they are also all essential. If one of the legs is missing or knocked away, the common goal simply cannot be achieved.

One leg of the stool is '**practice**', representing the placement setting, the business or organisation and all of those involved in the practice education team. The second leg is the '**learner**'. This is the individual going on placement whose approach and attitude to learning is key to its outcome. The third leg is the '**university**', the education provider to which the learner belongs.

Each of these legs plays a crucial role. Without practice providing placements, how can learners complete their studies? Without universities supporting the development of practice educators, how can more quality placements be created to accommodate our growing professions? Or without learners being open to engaging in placements across different sectors and settings, how can a workforce for the future be developed? They can't, all are required. Collaborative working between universities, learners and practice is key for mutually beneficial outcomes.

As well as being the first AHP principle of practice-based learning, working together across all legs of the stool is the golden thread running throughout all others.

No principle can be successfully achieved by working alone, no matter how hard we try.

As you read through this document, hold onto this 'whole team' approach. Take time to challenge your own thinking and current practice. Consider the principles through the lens of those in each leg of the stool, acknowledging different perspectives and identifying opportunities that we can bring each other. Think about how you come together, making sure that everyone is around the table, to be able to see the big picture; to create more quality and sustainable practice-based learning experiences to support the development of our future workforce.

Principle 1 Practice-based learning opportunities are co-produced

Reflections and actions

What do these mean to you? Use this link to an **online workbook** to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. Who are you currently working with, and in what ways, to develop quality and sustainable practice-based learning opportunities? Is it effective? How do you know?
2. What else can you do? Who can you work with and in what ways to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 2

Practice-based learning takes place across all areas, pillars and levels of practice

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It is an exciting time in the evolution of our professions. **UK health care is changing and, as a result, where we work and how we practice is changing too.** [6]

The UK has an aging and growing population with more complexities than ever before [7]. Alongside this there is both policy drive and patient desire for person-centred care closer to home [8-11]. Care that is underpinned by a robust evidence base, where equity is promoted and communities are empowered.

Practice is responding to these changes.

We work across:

- different sectors of health and care including the independent sector, the NHS and voluntary organisations.
- different settings including people's homes, GP practices, high street clinics, acute hospitals, industries, schools, community centres, charities, care homes, gyms, universities and many more. This list really could go on and on.
- the four pillars of practice – clinical, education, leadership and research – at all levels. Many professions already recognise their importance by firmly embedding the pillars within their robust career development frameworks [12-19].

Practice-based learning should reflect this.

To better reflect current health and care provision and the evolution of our professions, learners must engage in a diverse range of placements across different sectors, settings and pillars of practice[20-22]. This provides more opportunity to see their chosen career through a range of different lenses. More opportunity to understand the reach of where we work and how we practice, the importance of our skills across different environments, and the many ways in which we can make a difference to people's lives. **Whether the placement involves providing direct person-centred care, clinical assessment and diagnosis, leading a service, researching new insights or supporting learners to grow, the breadth of career possibilities available could inspire and shape our future workforce.**

Whilst practice-based learning can be extremely rewarding, it can also feel hard. We have a necessary growth in numbers of learners alongside bigger and more complex workloads that ever before. In addition, it can often feel like it is the same people in practice who supervise learners. In part this may be due to our perceptions of the 'best' way to deliver a placement. Let's continue to challenge this thinking.

Everyone can be part of practice education; no matter where you work, how long you have been practicing or whether or not you are in a patient facing role. There are many benefits that this can bring to you: developing in the education pillar; inspiring others' futures; helping to shape the skills of the workforce; and learning yourself whilst you go.[23]

More placements with different models across more areas of practice means that more practitioners can get involved, more learning opportunities can be unlocked, more solutions to challenges in practice can be enabled and the professions can be better supported to grow. Our future workforce should develop the knowledge, skills and behaviours needed to thrive in modern health and care and champion what we do.

Principle 2 Practice-based learning takes place across all areas, pillars and levels of practice

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. What are you currently doing to support practice-based learning opportunities across all areas, pillars and levels of practice? Is it effective? How do you know?
2. What else can you do to support placements across all areas, pillars and levels of practice? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 3

Practice-based learning environments must be inclusive and welcoming to all

Principle 3 Practice-based learning environments must be inclusive and welcoming to all

This principle can be challenging for some, taking us outside our comfort zone. It is intentionally bold to encourage us all to do and be better. If we can do this together, we have the collective ability to truly transform practice but only if we embrace the discomfort that it might elicit.

During their formative years it is essential that learners feel welcomed and a sense of belonging to our professions. We need a strong and diverse workforce, more representative of society, where everyone can belong. Our learners are more representative of society. They are increasingly diverse with different needs, identities, backgrounds and experiences. Equity, diversity and belonging is an ongoing lifelong commitment and not an adjunct to our learning, education, clinical practice and services. 'Learner welfare and anti-discrimination are a crucial focus for our existing and future work within our respective professional bodies. **It is vital we make sure the experiences of those marginalised due to their protected characteristics, identity, differences and the communities they belong to are positive, equitable, inclusive and ensuring they feel they belong.**[24]

Our learners should experience a welcoming and safe environment within all aspects of their studies [25-30]. Practice, universities and learners all have responsibility and a role to play in achieving this. We should be actively anti-racist, anti-discriminatory and anti-oppressive in our practice. **To do this we need to identify, challenge and remove any structural barriers to achieving equity of opportunities and experience for everyone [24].** This will provide safe placements and work environments which are paramount to our health, well-being, safe learning and our feeling of belonging.

It is important to acknowledge we are not all experts, and we will make mistakes. We should be open to learning and changing our behaviours. This benefits us all and the communities we serve. Thomas [31] encourages us to 'seek discomfort' by intentionally and actively seeking out diversity. He identifies that 'if you are uncomfortable, it means that you're doing it right, we need to challenge ourselves, evolve and grow'.

Systemic racism, ethnic and social inequalities exist. This is detrimental to our health and well-being and causes health inequalities particularly among minoritised groups [32-36]. 'As individuals and allied health professionals we must value and respect people's differences. We belong to diverse communities and have multiple intersecting identities.

This is everyone's responsibility, at all levels and breadth of our workforce, as individuals, teams and organisations. We need to be able to articulate how we are doing this within our practice-based learning. It is important to recognise for our learners there are added individual dimensions. These include being away from home and usual support mechanisms, being assessed and being a temporary member of the team. Therefore, learners can potentially feel disempowered to challenge or speak up when experiencing or observing inequitable situations. We all, practice, learners and universities, have a role in initiating and providing a safe space for understanding each other's needs.

How do we create a welcoming environment where learners feel they belong?

Have a read through these, taking some time to think honestly about where you currently see yourself. Using a scale of 0-10, with 0 being no consideration currently being made and 10 being fully embedding the behaviours into your practice, place a number on where you feel you are. What would it take to nudge you up the scale? These should be considered in addition to organisational resources and policies.

Action/behaviour	Self-reflective score (/10)
Create a welcoming environment and learner identity safety through the development of shared power relationships, working together to co-create and agree expectations. [37, 38]	
Collaborate and agree on the principles regarding how you should learn and operate (learner, practice, university) to enable shared understanding and expectations. Understand each other's learning expectations and agree to remind each other of these if any person is not enacting them.	
Take action by intentionally and openly opposing racism, all forms of discrimination and systems of oppression by demonstrating effective allyship. Being an active bystander, speaking up and doing something about any discrimination you see. [39]	
Recognise that we are not all experts and engage in self-directed learning. Be accountable and take ownership to educate yourself, seeking knowledge to deepen and strengthen your understanding of ways to promote inclusion.	
Strive to know and do better through education, research and action [14, 40] to enable us to put our knowledge into actions. [1]	
Actively engage in identifying and addressing inequalities and reflect this within your individual practice, bringing it to the attention of strategic/policy makers.	
Ask questions, listen with empathy and compassion and learn from those with lived experiences who are the experts. Take ownership, commitment and humility through a critical inquiry approach. [39, 41, 42]	
Use inclusive language that is adaptable and respects all. Acknowledge that language evolves; changing in culture, context and time and will need updating. [24]	
Intentionally seek out diversity by actively broadening your networks and experiences.	
Visibly and actively empower people from minoritised groups, giving opportunities, support and offer platforms for voices to be heard.	

Principle 3 Practice-based learning environments must be inclusive and welcoming to all

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. What are you currently doing to create inclusive and welcoming practice-based learning environments?'? Is it effective? How do you know?
2. What else can you do? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 4

Practice-based learning uses flexible, appropriate and supportive models of supervision and delivery

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There is no such thing as a traditional placement. We practice our professions in so many ways that we cannot have a 'one size fits all' approach. To create quality, sustainable placements that better meet the needs of the setting, the team and the learners, **we should think flexibly in terms of how learners are supervised and how placements are delivered.**

Supervision

Our regulator, the HCPC set standards to ensure safe and effective practice-based learning [2]. They clearly state the importance of supervision and support, but also recognise that day-to-day supervision can and will differ across placements. This allows for flexibility in design.

Some key considerations to supervision structure may include:

- **Who?** Supervision can be provided by different members of a team including, in some instances and when appropriate, those outside of a learners profession. Each learner must have a named practice educator who has overall learner and supervision responsibility and, in most cases, is HCPC registered.
- **How?** Placement supervision can be provided through a variety of means dependent on the context of the practice environment and any relevant legislation and/or professional policy. For example, in many situations supervision may be delivered in person, remotely or a combination of the two. In others, where legislation must be applied to practice, direct supervision may be a requirement [43]. Some professions may use long-armed supervision, where a supervisor is not located on the placement site but is available for regular structured support [36]. This can enable placements to happen in emerging areas of practice and identify areas for our professions to evolve.
- **How often?** This will depend on many factors including learner confidence and needs, area of practice, practice educator needs, as well as any applicable workplace or university policies and procedures.

Placement Delivery

With many different placement models available, early consideration should be made to how many learners to support on placement at any one time. Peer learning, where two or more learners work together in the practice setting supervised by one practice education team [44] is well established. **Rather than add to practice educator workload, this approach enhances experiences for both practice teams and learners [44-46].**

Reported benefits to practice include a reduced time commitment from practice educators [45, 46], the inclusion of part time staff [46], the creation of an active learning environment and positive impacts to services such as increased number of patient interactions, completion of audit tasks and the ability to provide additional support for service users [45-47].

Learners often state that they prefer having one on one supervision. However, the evidence is clear. Having a peer on placement has been found to reduce anxiety and help create a safe learning environment [45, 46, 48, 49]. Learners report being able to practice the giving and receiving of feedback whilst also reasoning and reflecting together, building important professional skills needed within the workforce [45, 46]. Peer learning does not replace practice educator supervision, feedback and guidance but it can complement it. For physiotherapy and occupational therapy, the CSP and RCOT advise that, where all other considerations allow, this model should be the default and encourage all legs of the stool to be working towards this as the norm [50].

Consideration should also be made to integrate different ways of working to reflect modern practice. This includes in person contact, remote working, tele-health and simulation-based learning activities [20, 51]. Placements may involve time split between different settings or extended hours to better meet the needs of the learners or the practice team. There really are many options to make placements work better for those involved.

Having lots of choice in placement design can sometimes feel overwhelming. It's often difficult to change established ways of working or start afresh. For learners, the different approaches in supervision may take a bit of getting used to as no two placements will be the same. **Universities, practice and learners must support each other, think flexibly and be open to embrace the benefits that different placement models can bring.**

Principle 4 Practice-based learning uses flexible, appropriate and supportive models of supervision and delivery

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. What else can you do to ensure supervision is flexible, appropriate and supportive to create a quality practice-based learning experience?? Are they effective? How do you know?
2. What models of supervision are you currently using? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 5

Practice-based learning is designed with a whole team approach

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The whole team has a pivotal role in taking a shared responsibility for practice-based learning and considering learners as 'an integral part' of their work [52, 53].

Who is 'the team'? This will look different depending on each individual service and/or area of practice. **We need to recognise and utilise the wealth of knowledge and skills within our teams**, across all professions, scope and levels of practice (registered and non-registered practitioners) and ensure they are included in the placement experience. Everyone should be involved. This in turn allows learners to be valued [53].

Whatever the composition of the team, this approach enables learners to gain experiential knowledge, skills, behaviours and attitudes by being immersed in a practice environment to prepare for practice [53-57]. We need to support everyone in identifying and developing the skills they need to excel in their role, broadening the formal and informal training opportunities available.

Universities can support the team in considering the breadth of learning opportunities they provide and how the whole team can have a meaningful and defined role.

Is there a role for me? Yes. Supporting learners in their placements provides learning opportunities across the whole team, contributing to lifelong learning [23], development within the education pillar [12, 13, 15-19, 53] and diversifying inter-professionalism [56]. You bring knowledge, skills and experience to the workplace and all learners will benefit from spending time with and learning from you. **We all have a professional responsibility to provide regular practice-based learning opportunities [1, 4, 5, 53, 58].**

As discussed in Principle 4, there are many designs, delivery and supervision models within practice education. Each provides an opportunity for you to consider:

- **What could I bring?**
- **How can my strengths and skills be used?**
- **How can this support my learning and personal development?**

Work with your colleagues and practice-based learning leads to find roles and opportunities that work for you both as an individual and as part of a team. Identify roles where you can shine, contribute to and be included in practice education.

As a learner, you can actively seek to define your role within the team. Take time to explore each person's role and embrace the opportunities team working brings to develop your delegation, referral and assessment skills amongst many others.

All members of the workforce: our support workers, assistant practitioners, other registered professionals, pre-registration apprentices and practice educators, across all areas of practice, have a valued role in practice-based learning.

What are the benefits of a team approach? More staff can be involved with less reliance on one person. This also cultivates learning opportunities for both learners and staff.

It is vital for the team to role model good practice, demonstrate inclusive and non-discriminatory behaviours and provide a safe, supportive and welcoming environment for learners and the wider team [2]. This equips the learner and our future workforce to widen their perspectives, and in turn role model good practice, behaviours and provide outstanding care to our population [53, 55, 59]. A whole team approach also future proofs our workforce by expanding the placement capacity to support learners [15, 52, 53, 60, 61].

A team approach needs to be contemporary, innovative, diverse and across the pillars of practice. It needs to be sustainable, modelled to meet the needs of our learners, team and diverse communities we serve [4, 14, 15, 62]. A whole team approach supports those managing clinical caseloads and other competing priorities, those with flexible or part-time working arrangements and can be a peer support system for staff [15, 60].

It complements and supports the profession-specific expertise practice educators provide, whilst enabling the learner to maintain their profession-specific identity. It demonstrates and role models inter-professional team working and exposes learners to sociocultural aspects of working within teams [14, 15, 63].

A team approach facilitates learners to practise their accumulated 'knowledge and skills in a safe environment' [4, 14], enhances the learner experiences and skills acquisition opportunities that is inestimable to both their development and that of the workforce. [64]

Principle 5 Practice-based learning is designed with a whole team approach

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. In what ways are your whole team incorporated into the design of your placements? Is it effective? How do you know?
2. What else can you do? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 6

All those involved in practice education feel valued, respected and recognised within their roles

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The work of everyone involved in supporting quality practice-based learning experiences cannot be underestimated. Through the creation of positive learning experiences and cultures, they have the ability to support and shape a positive introduction to a learner's chosen profession. Furthermore, without a breadth of quality placement opportunities being offered, there will be no future workforce.

As such, it is vital that all those involved feel valued [53]. Valuing, recognising and respecting the importance of all those involved in practice education is a shared responsibility, essential to the pre-registration curriculum, to support our current learners, future workforce and to serve our communities.

Often it is the named Practice Educator who has their time acknowledged and training opportunities provided. Principle 5 encourages a whole team approach, and therefore it is important that the whole team are valued and recognised in both the role they take and the benefits this has to service users, learners, the team and wider organisation [53]. All these people need to have their time and skills recognised and developed so they can be the best educators they can be and provide the best introduction to the profession for our learners.

We recognise that educators and staff often have large workloads, complex caseloads and other competing priorities. Providing practice education to learners may feel like an extra task. However, it is a professional responsibility to provide regular practice-based learning opportunities and promote a learning culture within the workplace [14, 15, 17, 18, 40, 53, 58]. Therefore, it is important that we work together: practice, universities and learners, to supportively develop and maintain this culture and ensure everyone can identify the ways in which they feel valued, respected and recognised.

What does 'being valued, respected and recognised' look and feel like?

This will feel different for everyone, often making it hard to articulate what it should look like. We can sometimes find it easier to be clear about the ways in which we don't feel valued. Aspects below, while not exhaustive, provide a catalyst for conversation within your team to consider how these can be instigated, demonstrated and embedded.

- Given time to prepare for and undertake the role
- Supported to attend practice educator training, and other associated CPD opportunities to support the confident delivery of quality practice-based learning. Practice education supports career development and aligns with elements of the career development frameworks [14-19]

- Supported to explore different modes of delivery and models of supervision
- Recognition of the skills developed and practised through supporting learners (including leadership skills, inspiring others, contributing to lifelong learning [23]) and how this benefits both the individuals and those they work with
- Trusted and supported to try new models of delivery and supervision, challenging the norm [53]. Learners supporting the educator and team with innovation, quality improvement, and project-based placements whilst learning valuable transferable skills that will develop their learning and practice [51]. Leading with innovation to improve our practice and ensure our service is sustainable and promotes job satisfaction
- Supported to identify a meaningful role in the practice education of learners – a role which works to your skill set and role within the team
- Learners are appreciated by the team, their contribution is recognised and valued [65]. In turn this may lead to their return as registered practitioners supporting the ongoing work of the team
- Trusting learners to have an active role in their own learning. They bring contemporary knowledge gained from their pre-registration studies and can disseminate this to educators and the wider team [60]
- Colleagues take the time to give constructive feedback, and opportunities to act on that. Learners can be 'critical friends' and provide honest feedback to the educator and team [55, 65]
- Celebrate and share feedback from learners, service users and others with the team and organisation
- Feel supported to learn from things that haven't gone so well or were difficult, as well as the aspects to celebrate
- Given the resources needed to undertake your role effectively, such as IT equipment for the learners.

Principle 6 All those involved in practice education feel valued, respected and recognised within their roles

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. In what ways do you and your colleagues feel valued, respected and recognised for the part you play in practice-based learning? Is it effective? How do you know?
2. What else can you do? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Principle 7

Practice-based learning is evaluated; capturing data to drive improvement and demonstrate impact

Principle 7 Practice-based learning is evaluated; capturing data to drive improvement and demonstrate impact

Data tells you what you need to know about the value and impact that your placements have. It tells you about what is working well and where there may be frustrations or areas to improve upon. It can enable different approaches to be tested out and help support a case for change.

Using data to make placements work better for you

To better understand what data to gather, first consider what you want to measure, why you want to measure it and what you intend to do with your findings. This will ensure that any data collected is meaningful to you. There is no right or wrong here - your choice will depend on what you want to better understand.

You should also consider what type of data will best tell your story; quantitative, qualitative or a combination of the two. Quantitative data, with the ability to be measured as a numerical amount[66], can be useful to tell you 'How many?', 'How much?' or 'How often?' Qualitative data, usually descriptive and expressed as words and narrative [66], can help to answer your 'Why?' and 'How?' questions and will enable people to tell you how they really feel about something. Both are useful in measuring data about placements.

When planning your data collection, think about this through the lens of all 'legs' of the stool. This will help you acknowledge all perspectives and take bigger steps to achieve our common goal to develop the future workforce.

- **Think about what matters to practice staff**

  The practice education team roles are multi-faceted. Equipped with a broad skillset, they deal with assessment [67], supervision [68], and mentorship [69] all whilst continuing to manage their ongoing daily practice and interactions [53]. Collecting data about their experiences including any impact on their health and wellbeing, job satisfaction, the level of support received, workload impact and suggestions for improvement are just a few possibilities.

- **Think about what matters to learners**

  Consider the placement experience from a learner point of view. How supported did they feel? How did they find the supervision structure – too much, too little or just about right? What were the best parts? Where did they feel improvements could be made? Was there enough freedom to learn? Also consider the timing and means of data collection. Unsurprisingly, we hear that learners are less likely to provide negative feedback about a placement if data is collected before they receive their final placement assessment due to

fear that it will affect the placement outcome. To reduce positive bias we must acknowledge the unequal distribution of power between the educator/team and learners [60]. Educators should be accepting, encourage this and provide a safe environment to do so [70].

- **Think about what matters to organisations/businesses**

  Think broadly as to what placement value means to the individual organisation. What is important to ensure the placement offering is sustainable? This may be the creation of a strong learning culture, an opportunity to develop education opportunities for staff or maybe to improve outcomes and experiences of service-users. You should also consider what part do placements play in workforce development. We know, anecdotally, that there is a link between positive placement experiences and future employment. By collecting placement data alongside recruitment and retention data, an important element of value to a placement provider could be captured [71]. It is difficult to put a price on many of these areas of provider value so data to demonstrate impact could be extremely useful.

- **Think about what matters to universities**

  Universities regularly audit placement providers to assure quality experiences for their learners in practice. Consideration must be made to what is collected and why. Is it collected in a timely manner? What processes are in place to address any concerns? Also think about whether the data collection is timely. Does it take into account perspectives from practice too? Is it meaningful? And if not, could any changes be made?

Next steps

Once data is collected, think through how it is analysed and how any findings are acted upon. If dissatisfaction is reported, how is it addressed? How do learners, practice and universities share between each other? If a model of supervision leads to improved staff and learner feedback, how is this showcased?

All of these are essential to close the feedback loop and use data effectively to learn and grow together across all three legs of stool.

Principle 7 Practice-based learning is evaluated; capturing data to drive improvement and demonstrate impact

Reflections and actions

What do these mean to you? Use this link to an online workbook to capture your personal and group reflections that will be emailed back to you. Alternately, use the space in the table below.

Online workbook

1. In what ways are you capturing data and evaluating your placement offer? Is it effective? How do you know?
2. What else can you do? Who can you work with to support this? Consider the three legs of the stool: learners; practice; universities.
3. How will you measure impact? Considering the three legs of the stool: learners; practice; universities, how will each measure impact and develop together?

Glossary

We use some slightly different language within our professions, so to avoid any confusion here's a brief overview.

Allied Health Professional (AHP)	Allied Health Professions is a collective term used to describe 13 different professions who work across the whole lifespan, in a wide range of settings throughout the NHS, social care, local authority, private practice, education, and the judicial system [72]
Education Provider	The awarding body that delivers or oversees a pre-registration programme. Education providers may also be known as 'higher education institutions' (HEIs) or 'universities'.[4]
Educator	An individual with the relevant specialist knowledge and expertise, employed or engaged by an education provider to teach the pre-registration programme. Educators may also be known as 'academics', 'tutors' or 'lecturers'. [4]
Four Pillars of Practice	The four Pillars of Practice are used widely across the UK. There's some variation in wording, but the essence is essentially the same: • Professional Clinical Practice • Facilitation of Learning • Leadership • Evidence, Research and Development
Health and Care Professions Council (HCPC)	The regulating body in the United Kingdom established to protect the public by regulating a range of health and care professions.
Identity	This is used in two ways: • Personal identity: the fact of being, or feeling that you are, a particular type of person, organisation, etc.; the qualities that make a person, organisation, etc. different from others [72]. • Professional identity: 'professional self-concept based on evolving attributes, beliefs, values, and motives'.
Learner	An individual enrolled in a pre-registration programme. Learners may also be known as 'students' or 'apprentices.'[4]

Practice-based learning (placement)	AHP education delivered in a variety of settings that allows learners to apply and practise their newly acquired knowledge and skills in a safe environment. Practice-based learning has traditionally occurred in role-established settings, such as hospitals and community health services; however, alternative and non-traditional settings are also integral to pre-registration programmes. The inclusion of practice-based learning settings in which there is no existing profession specific role is important to develop learners with leadership skills who are capable of working in diverse settings. [4]
Pre-registration programme	A programme of study, approved by the HCPC leading to eligibility to apply for registration [58]
Protected characteristics	It is against the law to discriminate against anyone because of: • age • gender reassignment • being married or in a civil partnership • being pregnant or on maternity leave • disability • race including colour, nationality, ethnic or national origin • religion or belief • sex • sexual orientation These are called 'protected characteristics.'
Service User	A broad phrase to refer to those who use or are affected by the services of professionals registered with the HCPC [73].
Supervision	Supervision is a process of professional learning and development that enables individuals to reflect on and develop their knowledge, skills, and competence, through agreed and regular support with another professional. [39]

Feedback

Please complete this feedback form so we can learn more about how you are utilising these principles within your placement related work. Your feedback will help us to ensure that we are able to provide relevant resources to support your work in implementing these principles for all placements within your organisation.

Use this link: https://forms.office.com/r/zxVEzGg5Tt or scan the QR code to access the feedback form below.

Feedback Form

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