2017
HSC
STUDENT EXPERIENCE
PLACEMENT REPORT

Introduction

1) In April 2017 UEA Students' Union published its 'HSC Student Experience Report'[1], based on the research we have undertaken with students in the school by asking them to complete the 'Big Conversation' survey.

2) Whilst this focused predominantly on the effectiveness of representation strategies, co- and extra-curricular opportunities, and overall engagement, we understand that practice placements make up a large part of the overall student experience for Health Sciences students.

3) This not only impacts students' ability to fully participate in the wider student and campus experience, but also presents a number of additional challenges.

4) This report primarily draws on qualitative data however it also embeds it within quantitative data to provide a more holistic picture. The focus on qualitative data is to develop an in-depth understanding of student experiences during placement. As such, our analysis brings together both findings and the wider processes involved with placement allocation and management. It also emphasises the impact that positive as well as negative experiences can have for a student both academically and for their overall wellbeing. Recommendations are based on the analysis which we hope the university will implement. We would like to thank the University's Business Intelligence for kindly sharing this data with us.

5) The report is divided into the following themes:

   i.   Organisation and management
   ii. Pre-placement information and preparation
   iii. Accommodation and travel
   iv. Placement support

6) Within each theme a number of recommendations are outlined to the school and the university in order to support HSC students as thoroughly as possible with the practice placement element of their course(s).

7) This report aims to make clear the additional challenges that are faced by Health Sciences students due to the practice hour requirements that are integral to the completion of their course, and should be read in addition to the HSC Student Experience Report and previous Big Conversation reports.

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[1] HSC Student Experience report (2017) can be found at
www.uea.su/pageassets/democracy/reportsandresources/hscser/HSC-Student-Experience-Report.pdf

Undergraduate students in the School of Health Sciences are required to complete a set number of placement hours. These are determined and regulated by external professional councils and bodies that govern non-medical health courses. Placements can take place in a variety of settings, such as hospitals, care homes, schools and community-based Trusts (amongst others), and specific placement requirements vary by course. Further information on these can be found in the Nursing, Midwifery and ODP Practice Learning Student Handbook, and the individual Practice Education Handbooks for Occupational Therapy, Physiotherapy, Speech and Language Therapy and Paramedic Science.

Feedback featured in the HSC Student Experience report, and throughout the comments used within the previous two Big Conversation reports, suggests that these placement requirements have a notable impact on student engagement with extra-curricular activity. National Student Survey data from 2015-16 also recurrently featured comments mentioning placement support, disparity in the quality of placement experience, and issues around communication. In total 102 negative comments in HSC's NSS response featured the word 'placement'.

We were interested to find out whether this theme was on-going, and understand more specifically what issues students were facing during their placement experiences. Upon completion of each placement 'block' students are asked by the university to complete a survey. The results of this have very kindly been shared with us, and so we have been able to more clearly understand students' issues, and how the university might address them.
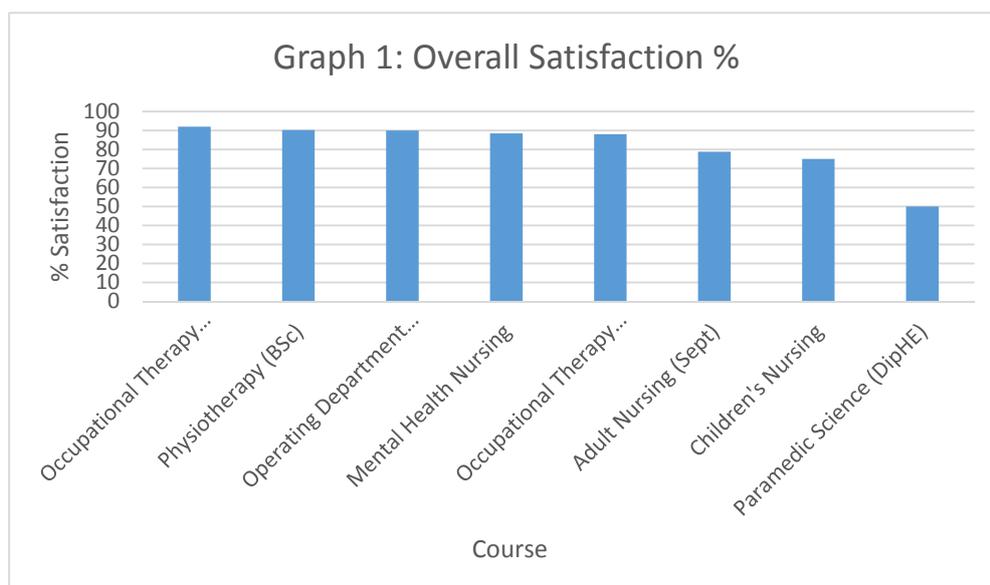
Overall, the majority of students were 'quite' (36.6%) or 'completely' (46.2%) satisfied with their placement. We keep in mind throughout this report, however, that where experiences vary considerably it is important to question why, and for the university to address students' key concerns. We also appreciate that a proportion of student concerns and feedback are outside of the direct control of the university. Data that concerns issues which we consider to be inherent to the programmes of study or nature of non-medical health education has not been included here.

Methodology

Report structure and analysis of findings

Focusing solely on the placement aspect of Health Sciences courses, this report closely follows the structure of our previous report titled '2017 HSC Student Experience Report'. Initially, staff from uea(su) planned to conduct a series of focus groups however it became quite clear that due to the wealth of existing placement data that our own research would add very little to what was available. As such, we decided to analyse existing data from the 'HSC Placement Feedback Survey'[2] which forms the content of our report. Inspired by the grounded theory approach, we analysed source data, grouping them into categories and then overall themes, accompanied by a contextualised analysis which allowed us to generate recommendations for the university to implement.

Ethics

All data is processed in accordance with the principles of the Data Protection Act, 1998. Survey responses were held securely online, accessed only by those directly involved in the research. Surveys were anonymised (source data provides each student's course) and we include this in our report in order to aid in analysis; where applicable, comments were further edited to remove any identifying markers. This data will be retained for only as long as necessary for the purposes of this research.

Limitations

There are two main limitations associated with this research. First, due to the population sizes of each course being different, caution should be exercised when comparing data scores between courses. For example, Adult Nursing, (which is the largest Health Sciences course) had 100 students take part in the survey whereas MSc Occupational therapy (which is the smallest Health Sciences taught course) only had 16 participants. While this is expected since Adult Nursing has a larger overall population size, it still means that for the smaller courses each participant's responses carry much more weight and have the ability to skew the data more easily. Still, this limitation is difficult (if not impossible) to overcome because the overall number of students in each course will always remain unequal. Second, because students were not required to fill out the 'comments' sections of the survey, responses were lower across all courses than the total number of people who participated in the survey which can limit our understanding of student perceptions to some extent. Still, these comments illustrate a detailed picture of the issues that students face, and because many comments are repetitive and because the sample size surveyed 22% of the total Health Sciences population (a study which would not have been feasible through uea(su)) the findings and analysis should not be dismissed solely on this limitation.

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[2] Autumn and Spring Semester Data for the 2016-17 Academic Year

Theme 1 - Organisation and Management

The organisation and management of placements in HSC involves the input of several parties, including external host trusts (where students complete their placement), academic staff in the school and local support staff in Learning and Teaching Services. This makes organisation and management a tricky component of the practice placement process, but central to the experience of students. Two key categories were identified within this theme: 'communication' and 'workload management'. Communication issues predominantly concern what information is provided to the trusts in advance of students' placements, whilst workload issues are related to balancing academic work and practice placement demands.

Communication

Only 2% of total respondents were not expected by their host trust on arrival. This percentage is made up of two Adult Nursing students, one Mental Health Nursing student and three DipHE Paramedic Science students. Two students raised this issue in their comments:

> *The information that I would be a student joining West Newton was not passed on to the ward who in turn did not factor me into the [initial] off duty. I am unsure why West Newton ward did not know I was joining them in November. It seems that the UEA were keen to pass the buck and made very little effort to solve the problem or support me during this stressful period.*
> **Mental Health Nursing**

> *Also [the Spoke placement area] were not informed they were going to have students coming to them, and therefore had very little for us to do! Also UEA did not brief us on what paperwork to have filled out while on spoke or what we needed signed off as proof of mental health placement?* **Adult Nursing**

Although the percentage of students that were not expected upon arrival at their placement is small, several comments raise issues around confusion of how long students were expected in their placement areas for:

> *My mentor was not expecting to have me for 11 weeks - she thought it was a 2 week placement as that is the usual length that they have students for. Perhaps a lack of communication between UEA and placement mentor?*
> **Children's Nursing**

> *Made to feel extremely welcome by the team on arrival despite mentor unfortunately being away for the first week. Confusion between Adult Nursing cohort on 2 week Health Visiting Placement and Child Field who were on for full 11 weeks. Team were not aware that we were different to Adult cohort on arrival and as a result had to rethink. Miscommunication from the university, no fault of the trust I believe.*
> **Children's Nursing**

We understand that addressing this specific communication issue is challenging due to the considerable number of Trusts and departments that provide placements for UEA students. Despite this, we are concerned that it seems Trusts are receiving incorrect information about students, which has the potential to impact on their placement experience. UEA Students' Union recommends that where possible, students continue to be encouraged to contact their placement in advance to confirm all details and avoid confusion. We would also encourage that all students are provided with details of how the placement allocation system works, including the complexity of allocation, to ease frustrations with communication issues. This could form part of the placement handbook content.

Workload management

In the feedback students raised concerns around the number of hours that were expected of them on their placement in addition to having to complete academic work. 22.7% of students rated the amount of 'hours of *work*'[3] required of them as either 'too high' or 'much too high', and 16.4% of students rated the amount of 'hours of *practice placement*' required of them as either 'too high' or 'much too high'. Comments mentioned the ratio between academic work and

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[3] We understand this to mean 'academic work' although the original survey question does not specify.

placement hours, imbalance of academic work required between placement and academic theory timetable blocks, and the lack of a study day. These were predominantly amongst Nursing students.

working hours: academic work on placement ratio needs improving.

Adult Nursing

Thought it ridiculous to have dissertation hand in on placement - again another stressful situation made ten times worse by ueas timing.

Adult Nursing

30 hours of placement time per week was adequate. increase to 37.5 and lack of study day cause disturbance to my routine of how I manage and found it difficult to finish my essay and reflections without the allocated 7.5 hour study day. Although we have been allocated a study week at the end of the placement this is not how I can usually work on every consecutive day and find it easier to spread my theory work over less days and a longer period of time.

Mental Health Nursing

Short shifts and difficult to find study time without a study day.

Adult Nursing

There was no balance between my home responsibilities and my placement hours so it made things difficult.

Children's Nursing

It is a concern to us that the academic performance and, most importantly, wellbeing of students, is potentially at-risk due to the intensity of workload during placement periods. Though one Occupational Therapy student commented that they felt it was unfair to have to complete revision work whilst on placement, there are instances in which Nursing students' summative deadlines fall during their placement period, including a second-year assignment and the dissertation module. Comments suggest the issue is intensified where a study day is not given per week:

[The intense workload] was made worse by taking away our study days towards the end of our placement which was nearing our deadline for our empowerment assignment.

Adult Nursing

This appears to be further impacted by travel requirements, discussed in more detail in the '*travel and accommodation*' section of the report.

We understand that some changes to the assessment schedule for the Nursing programmes must be approved by the professional regulatory body for Nursing, the Nursing and Midwifery Council (NMC), in accordance with their standards. However, upon redesigning the curriculum we would encourage the school to consider the spacing of assessment deadlines and their impact upon practice placement. We hope that this would go some way to relieving part of the pressures placed upon our Nursing students.

Recommendations

1. Upon designing curricula, and specifically redesigning the Nursing curricula upon the release of updated 'Standards for pre-registration nursing education', ensure spacing of assessment deadlines enables success in academic work and placement through an appropriate balance of workload and deadlines.

2. All students should be provided with details of how the placement allocation system works, including the complexity of allocation, to ease frustrations with communication issues. This should form part of the placement handbook content

In preparation for their placement we believe students should be provided with sufficient information, both by the university and hospital trust, about the environment they are going into and the challenges they might face. Overall 33.4% of respondents (based on 317 in total) felt either 'quite' or 'completely' prepared by UEA before starting their placement. However, one third were also dissatisfied with the information relevant to their placement made available to them in advance of starting.

In contrast, 100% of Physiotherapy (BSc) students felt satisfied with the information relevant to their placement available to them in advance of starting. Further, where 19% of Physiotherapy (BSc) students responded negatively to the question '*How well do you feel UEA prepared you for your placement before starting?*', this number is higher across other courses. On average, across Adult (September), Children's and Mental Health nursing fields, 42.8% of students responded negatively to the same question. Of 24 respondents, only 50% of Children's nursing students felt 'quite' or 'completely' prepared by UEA before starting their placement. Despite this, comments from these students suggest that they did feel well prepared by the trust before starting:

We had an induction day before starting - hosted by the lady in charge of placements within Cambridge Community Services. This was really helpful and gave the information that we needed.

Children's Nursing

I was contacted by the clinical educator to come and visit the hospice prior to starting placement which was really helpful and made me feel a lot more prepared for placement to begin.

Children's Nursing

I think more preparation into the field would be useful, as I didn't have a large understanding of the field I went into. I have struggled to write about communication for my essay too due to the fact that I never tend to see the same patients.

Children's Nursing

These comments demonstrate that when specific effort is put into inducting students into Trusts, particularly in terms of pre-placement communication, that it improves their overall feeling of preparedness. We understand this is more difficult for larger cohorts or where lots of students have been assigned placements with the same providers. However, where arranging pre-placement visits is feasible, we recommend the school continues to actively encourage this.

Two thirds (66.3%) of Adult nursing students, a notably higher number than Children's nursing students, felt 'quite' or 'completely' prepared by UEA before starting their placement. This could be due to academic preparation for practice, if Adult field content appeared more frequently in lectures and study work prior to placement. There were however, mixed comments on the preparedness of Adult nursing students for placement. Where some students felt preparation for placement was sufficient:

The university prepared me for going on placement in general

Adult Nursing

Others felt that information on placement areas and preparation for practice are lacking:

University should give us more information about the placement area.

Adult Nursing

UEA however never properly prepares us for placement.

Adult Nursing

UEA does not provide much "preparation" for placement per se; we are just thrown into it. Rather than clinical skills which would be helpful for placement, we sit through hours of lectures on communication,

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or safeguarding which has been repeated over and over again. It would be more helpful to provide us with clinical skill sessions, and more pharmacology related lectures, than safeguarding (which is a part of the trust inductions anyway) etc.

Adult Nursing

Comments suggest that experiences differ significantly, and that where general preparation can be facilitated, specific preparation is more difficult due to the wide breadth and variety of placement types. This would echo the aforementioned difficulty for Children's nursing students if their placements were in child-specific settings.

60% of Paramedic Science (DipHE) students felt neither 'quite' or 'completely' prepared for placement, with 40% 'neither satisfied nor dissatisfied' with the information relevant to their placement made available to them in advance of starting. Comments centred on information provision and timing:

'*I felt it would have been better if our theatres placement was closer to the module when we were learning relevant skills (intubation). Prior to the placement I did read up on technique etc, but this is not as good as having had recent practice on manakins etc.*'

Paramedic Science DipHE

'*Sent by email a general overview of what the unit does, but had no focus on my learning opportunities or potential skills that I could practice.*'

Paramedic Science DipHE

Whilst the latter comment is Trust specific, the former indicates that there was some dissatisfaction with knowledge and skills preparation for practice. An Occupational Therapy student on the MSc programme raised a similar issue, commenting that:

Being in a hand therapy setting I did not feel very well prepared in terms of academic coverage in this area; of two planned sessions on splinting in the last term one was cancelled which meant the remaining one allowed for only a very quick introduction to the practice.

MSc Occupational Therapy

Comments also suggest that ODP students do not receive welcome packs for their Trusts via Blackboard, where pre-placement documentation and information is located. Nursing students have commented that welcome packs and pre-placement information available via Blackboard are out of date.

I feel welcome packs/speciality theatre information could be available on blackboard to allow students to prepare for their placement area in advance.

ODP

No welcome pack, although the ones the Trust have for other areas are unhelpful and out of date anyway.

Mental Health Nursing

The information regarding placement area on blackboard was inaccurate and old.

Adult Nursing

Comments arose across most professions about the availability and currency of information on Blackboard. For example, students were directed to out of date information packs and misled to what the nature of their placement would be –

On the [Blackboard] page for the hospital placement it [stated] that ward 12 was a gyna and breast care [ward] when in fact it is a general medicine ward.

Adult Nursing

Named mentor not provided. Difficult/impossible to find placement area information as it was under a different name on the UEA system. **Children's Nursing**

The information on blackboard was out of date, citing an employee who had not worked in the

department for several years.
Mental Health Nursing

Whilst I was informed of my placement area in good time, the placement information was not available on Blackboard. The placements team informed me that this would be uploaded before I began my placement but eventually it had to be sent to me by the ward manager around 1 week before I began.
Mental Health Nursing

Would have been useful if I was given a phone number to contact my placement on.
Children's Nursing

Although we understand that placement documents and information are sent from individual Trusts, and individual wards/ departments within those Trusts, we would urge that the University puts pressure upon placement providers to standardise the quality of this information and to provide updates where necessary. In turn, we hope that the relevant responsible UEA staff members, whether academic or local support, are conscious of updating the information on Blackboard.

Academic Content

A subject that arose across comments from a variety of programmes was how prepared students are academically for working in a practice environment, but also what would be expected from them whilst completing placement hours. Occupational Therapy (MSc) students noted that there was a lack of academic preparation around policies and procedures, but also in terms of working with patients with mental health conditions:

I'd like more preparation in terms of placement as the case often seems to be that what we are told in our lectures is not applied on placement. I'd like to learn more about policies, procedures and current politics within the field and above all I'd like more lectures in regard to professional reflecting.
MSc Occupational Therapy

I feel that the preparation which we had done at UEA of mental health conditions did not prepare me for the reality and severity of the mental health conditions which I encountered on placement.
MSc Occupational Therapy

Comments were also made by Nursing students that touch upon preparation for working with critically ill patients (Adult field) and Children's nursing field-specific preparation. Caring for patients who are Children, or that live with critical and mental health conditions, arguably present their own specific challenges and we are keen that students are prepared for and supported in dealing with the environments they are introduced to. We recommend that, where possible, guidance documents are produced on developing resilience and appropriate coping strategies in these situations, particularly for students going into their first placement block.

Recommendations

1. Students should be expected to contact their placement in advance to confirm all details against a published checklist avoid confusion.

2. Pre-placement visits to trusts and placement should become the norm- the school should use influence to enable this.

3. UEA should require providers to standardise the quality of pre-placement information for students and to provide timely updates where necessary. In turn, we hope that the relevant responsible UEA staff members, whether academic or local support, are conscious of updating the information on Blackboard.

4. Guidance documents and optional training interventions should be produced by the School/SSS/SU on developing resilience and appropriate coping strategies, particularly for students going into their first placement block.

5. The school should systematically identify placement providers for which students were least and most satisfied with their inductions and collect information on how these were conducted. Placement teams should then use this information to advise Trusts of best practice.

6. Comments suggest that students are unsure of why certain topics are delivered in lectures whilst others (including skills sessions) are perceived as having insufficient coverage. We understand that curriculum development is carefully mapped to NMC standards and requirements - this should be communicated more clearly to students by their programme teams.

Theme 3 - Travel and Accommodation (Written in Partnership with an FMH Faculty Convenor)

Students on Medicine and Health courses are required to attend placement as an integral part of their learning and a requirement of their registering bodies. HSC students at UEA can be placed in a variety of locations across East Anglia, and will have experience at multiple practice settings over their years of study. Travel and accommodation can be a key part of the placement experience, particularly if students live a considerable distance away from their placement location.

The comments in this section of the report therefore are in reference to a variety of different placement providers. We recognise that it is therefore difficult to associate comments with specific locations, however the purpose of this chapter is to provide an overview of students' holistic experiences with travel and accommodation whilst on placement. This section of the report outlines key concerns of students about the travel and accommodation aspects of their placement experience, separated into themes.

Accommodation

This section of the report outlines key issues that were raised in student comments to do with accommodation, both in terms of physical provision and support with finding accommodation.

In order to complete both formative and summative work, access to reliable Wi-Fi is essential for students on placement. However, some comments within the survey indicate that the quality and reliability of Wi-Fi is not always to the standard required at some health trusts. The concerns below were voiced by students across a number of different programmes, indicating comments that Wi-Fi is an issue across a range of locations:

However there was no Wi-Fi access across site/accommodation and therefore internet use outside of working hours was limited and expensive to then purchase data
MSc Occupational Therapy

The hospital accommodation needed improving, no Wi-Fi or opportunity to purchase the hospitals Wi-Fi.
Physiotherapy

The accommodation facilities; overpriced, very poor Wi-Fi
Adult Nursing

The Kings Lynn staff accommodation isn't that great and the WIFI is rubbish when trying to do work.
Adult Nursing

These comments illustrate the need for placement providers to either improve their Wi-Fi provision, or for UEA to better communicate to students to not rely on the Wi-Fi for the completion of their formative and / or summative work. It also may be the case that some trusts' Wi-Fi provision is better than others', which could put some at an unfair (dis)advantage particularly in relation to the writing and submitting of assessments. Where students are staying at their placement location for the duration of their placement, this could be more difficult and other provisions for them may need to be considered.

Another key issue is physical and financial access to placements. If students wish to live closer to their placement location there are options available in terms of accommodation close to the trust, with students being able to rent accommodation for the duration of their placement. However, given that this takes place at a time when most are likely to be paying rent or mortgages for their term-time address, students can struggle to fund accommodation in two places. The student support services are able to offer loans which cover approximately half the cost of a 12 week placement accommodation and is a real help to students needing accommodation near to their placement. However, this still leaves students having to find extra funds to cover the rest of their time. It can also take up to a month for the loan to come through, meaning that students may still have to find the money initially before getting some of it paid back. Where students cannot afford accommodation even with some financial help, they may have to rely on public transport which isn't always the most practical option:

I don't drive and couldn't afford accommodation alongside renting out my house in Norwich. Had to rely on the bus which was only possible to get for night shifts as day shifts they did not arrive early enough. Meant days were extremely long and tiring.
Child Nursing

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Some students experienced difficulty in accessing accommodation at all due to operational issues:

As I live in Norwich, I hoped to book accommodation in King's Lynn for my time on placement however this option was closed to me as the ward failed to produce off duty for me until around 10 days before I was due to start. This uncertainty meant I could not book accommodation and the rooms all filled up before I was even given my hours.
Mental Health Nursing

I was unable to find any contact details for my placement and was told to contact my mentor directly. However, I wasn't told my mentor until a week prior to placement. Until this point I did not know which team I was placed in and so was unable to arrange transport/accommodation.
Adult Nursing

The rooms all filled up before I was even given my hours. As a result, I have to spend 4 hours per day travelling to and from King's Lynn which is physically and emotionally draining.
Mental Health Nursing

There were also comments from students illustrating that they feel that UEA could have done more to help them to find accommodation when needed:

I also felt that we were quite unsupported regarding the geographical area and accommodation needs... After having initial difficulties hearing back from the hospital accommodation providers the placements team at UEA did not have any alternative private providers and so this was quite stressful the thought of having to arrange private accommodation in an area so far away.
MSc Occupational Therapy

The organisation from the UEA has been substandard. I was originally told I would be working on a psychiatric intensive care unit in Norwich, this was then changed to the CMHT in Great Yarmouth then changed again, only a few days before I was due to start, to the CMHT in Stowmarket. Luckily I live on the Suffolk/Norfolk boarder and have my own car so transport is not an issue. However if I had been sent to somewhere like Kings Lynn, where I would have to have accommodation, I would have found this very difficult.
Mental Health Nursing

I think it was very bad how we were left on our own to find accommodation and as I had just moved 250 miles to Norwich it was very distressing having to move to a new accommodation that I did not know with very little support.
Adult Nursing

Travel and transport issues
This section of the report focusses on issues relating to students' travel to and from their placement locations.

As previously mentioned, students can find themselves being placed in a variety of locations across East Anglia often resulting in longer journeys than their normal travel to and from campus. The amount of time students spend travelling to placements can add considerably to the overall length of the day. As illustrated by the comments below, this can have a notable impact upon students, including their physical and mental health. It can also take up time that could be spent working on written or theoretical work:

The full time hours are tiring, on top of the travel, making up hours and the work load of two essays.
Child Nursing

Living in Norwich and needing to travel to Kings Lynn for placement adds an extra 2 hours onto my day for travel, therefore exhausting to try and fit any other study in during that day. I feel this is not taken into account on the extra students with extra travel have to do.
Adult Nursing

Students also commented on the fact that arrangement for travel are often not particularly flexible and not as inclusive

as other UEA courses such as Medical students who get transport provided, which is especially difficult for those who do not drive:

The not-compassionate hour's policies and travel arrangements. No consideration for travelling or sick days in community placements as they are 9-5 Mon-Fri.
Child Nursing

Travel to and from the hospital has been a problem at times and as it has been very time consuming considering I do not drive.
Adult Nursing

Travelling and staying at QEH. Even if a bus was provided like the medical students have, us nurses would be so happy to have that.
Adult Nursing

Many of the comments indicate simply how tiring travelling can be, particularly when balancing home life. It seems that students do not feel that support in managing this pressure and long days is available and that this can impact upon their own wellbeing and even their ability to fulfil the needs of their placement:

The hours combined with the travel (4 hours a day 100 miles round trip) were hard to manage when working 9-5 every day. There was no balance between my home responsibilities and my placement hours so it made things difficult
Child Nursing

The distance between home and placement needs to be addressed, placement is stressful enough but to add an hour or more travel to and from placement is even more so.
MSc Occupational Therapy

A 90 mile round trip after nights is unsafe, you need to rethink placements once the bursaries are scrapped, people will not put up with it when they are paying for it.
Adult Nursing

There is a specific section of this chapter (3ii) which focuses on some of the comments made around the impact that long journeys and travel times can have on students' mental health and wellbeing. Whilst it is noted that funded transport facilities for students on medicine programmes is externally governed and outside of the control of the university, we are concerned that this is not communicated to students on non-medical health programmes. The SU has put work into explaining HEFCE funding structures to cohorts in HSC, but feel this should be a process undertaken by the school, particularly in light of the removal of the NHS bursary for future cohorts.

Comments illustrate that students who commute to from further afield may be at a disadvantage in a number of ways including financially and academically. This is because, as previously discussed, time spent travelling to and from placement can deduct from time to be spent on academic work to be submitted, as well as there being a delay in reimbursement for money spent on travel:

The travel distance is unreasonable I had to travel nearly 30 miles for my Health visitor placement which is unreasonable as I not able to claim any of this back in mileage.
Adult Nursing

I was placed three hours on public transport away and due to this found the travel and workload exhausting. It made it extremely difficult for me. I can't fault the staff but I felt at a disadvantage from my peers to get the work done.
Child Nursing

There also appears to be unclear communication from the University as to the system in place for allocating placement location, which gives the impression to students that allocation is unfair:

This is my third placement where I have had to travel long distances. Would be nice if the placement team took into account travel distance and the number of times you are placed far away.

Child Nursing

Placement allocation to make it fairer for students. For example: some students have not had placements in hospitals that require further to travel (e.g. From Norwich to Kings Lynn)

Adult Nursing

We understand that a working group was recently set up to address communication to students around placement allocation processes and why 'swapping' and 'choosing' placements is not a viable option considering the limited number of providers, vast numbers of students and specific module learning outcomes. This is a positive step taken by HSC and will hopefully go some way to improving students' understanding of the placement allocation process.

Other issues

Resources is a further issue affecting students on placement: on top of being disadvantaged with time to complete written work, those expected to travel or stay in accommodation are also disadvantaged with resources for their studies in regards to not having easy access to the facilities on campus that those on placement closer to UEA will be able to use. The quality of students' written work could be impacted by not having easy access to the facilities on campus that those on placement closer to UEA will be able to use:

Being away from main university library resources whilst in Kings Lynn can be impractical (when no study days in place) due to limited resources in the area and inability to travel back regularly, particularly during times of assignments.

Child Nursing

The hospitals library closed at 5:30 which was too early, considering my day in the ward finished at 4. The common area had very poor lighting, which wasn't ideal to work under.

Physiotherapy

UEA should therefore consider providing alternatives to students on placement, such as better access to e-books which could be retrieved at distance.

Another issue that was raised by the data was that of students' mental health and wellbeing. Many students acknowledged how lonely and isolating placements away from university, friends and home can be. Taking into account the aforementioned stress of workload and travel time, students identified some other factors that impacted on their physical and mental health:

When travelling daily. If hours were missed, I found overexerted myself to make hours up especially when you can only do four days a week as placement didn't work weekends. And issues with travel out of your control wasn't accommodated to.

Adult Nursing

Travelling to QEH was one of the worst experiences, I would have enjoyed my placement if I didn't have to travel that far every week and have to stay in accommodation. Everyone I spoke to said the accommodation made them feel depressed and lonely, including myself. I'm really anxious that I will be placed here again, because the feelings of wanting to quit due to feeling so lonely was horrendous.

Adult Nursing

working full time whilst having the pressure of empowerment assignment and assessment of practice document and essays meant that we were all at breaking point. It is impossible to concentrate and be productive after a 12.5 hour day… It is ridiculous that there is so much academic work during placement period.

Child Nursing

It therefore seems that UEA should consider the support available for students on placement to ensure that they are not at risk of mental health issues specifically due to the placement experience. It is also important to ensure that students are made clear of the support available to them whilst on placement, whether through link lecturers, personal tutors or

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even external sources.

Recommendations

1. Processes for accessing support, and who is the most appropriate person to seek support from for specific areas, are documented in a way that is accessible to students and made easily available via Blackboard.

2. On open days the distance of potential placements relevant to each programme should be clearly communicated to students; this should also include information on transport links in the local and regional area as well as case studies of current students' travel experiences.

3. There must be an appropriate and effective standard of support for helping students to find accommodation; Programme-level coordinators could take a more active role in working with LTS in their role to support students to find accommodation, where this is not already taking place.

4. All Personal Advisors should be required to regularly 'check-in' with their advisees during their placement allocation. This would ideally happen a minimum of twice during a 12-week placement block. The UEA advising policy should be revised to reflect this.

While on placement, students are required to change their learning technique from the more traditional class-based learning, which they experience initially at UEA, to a placement-based practical approach. While students recognise that this method is not only necessary, but also the most effective way to learn, they often need strong support networks in place to help them make the transition as quickly as possible.

This is so that they can make the most of their condensed learning experience, particularly in terms of adjusting to work with partners external to the university, and to prevent the high demands placed on them from having a negative impact on their overall wellbeing. In addition, because many are required to move to a new location, they often rely more heavily on support provided by both UEA and their placement because their personal support networks can be more difficult to reach. Many of the issues students face are context-specific therefore the need for support by people who are equipped to understand and address their issues is very important.

This report recognises that support is a difficult concept to analyse on its own, especially because many, if not all, aspects of placement can affect a student's perception of the level of support they receive. It is therefore the case that two aspects of support are discussed in this section: mentor/practice educator (a role external to UEA), in supporting students directly during their placement, and Visiting/Tutor/Link Lecturer (a UEA staff member), because of their primary role in offering support to students' practice education development. The latter is described in the UEA Link Lecturer role descriptor as being in place '*to maintain and develop education / practice links in order to facilitate an effective clinical learning environment in conjunction with practice'.*

Within the standards it is stated that the Link Lecturer is responsible for -

- '*provid[ing] additional support and signpost[ing] to relevant processes if problems are identified (by student / practice educator / mentor)*'

and

- '*Respond[ing] to student concerns about the learning environment*'

Q17 from the HSC Placement Feedback survey asks students to rate their satisfaction with the support received from their Visiting Tutor/Link Lecturer and their Mentor/Practice Educator, however the data shows that students are much more dissatisfied with the support they receive from their Tutor/Link Lecturer compared to their Mentor/Practice Educator. Indeed, out of the nine categories measured under Q17 Visiting Tutor/Link Lecturer was ranked the lowest by students whereas Mentor/Practice Educator was ranked the highest[4] (of those 'completely satisfied'). The following list shows the different areas measured under Q17 in descending (satisfaction)

    i.   Learning opportunities
    ii.   Quality of feedback from mentor/practice educator
    iii. Timeliness of feedback from mentor/practice educator
    iv.   Support from mentor/practice educator
    v.   Formal supervision/assessment interview[5]
    vi.   Availability of resources on placement e.g. library
    vii. Contact with UEA
    viii. Support from Visiting tutor/Link Lecturer

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[4] Ranked satisfaction was based on the combined scores of 'quite' or 'completely satisfied.
[5] iv. and v. scored the same

Support Satisfaction - Mentor/Practice Educator and Visiting Tutor/Link Lecturer
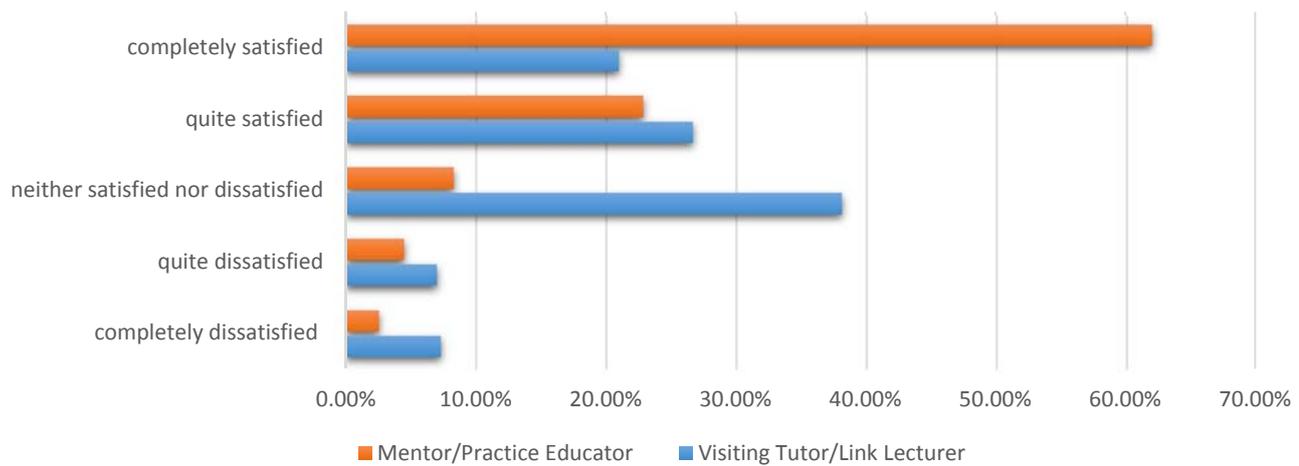
While student satisfaction for support from Mentor/Practice Educator generally follows a positive progression, Visiting Tutor/Link Lecturer does not. Indeed, there are almost three times as many students saying that they are 'completely dissatisfied' with their Tutor/Link Lecturer compared to those 'completely dissatisfied' with their Mentor/Practice Educator. Similarly, there are three times as many students saying they are 'completely satisfied' with their Mentor/Practice Educator than those 'completely satisfied' with their Tutor/Link Lecturer.

Satisfaction levels across courses vary greatly, however the majority of students are more dissatisfied than satisfied. Of those who are completely dissatisfied Physiotherapy, Mental Health Nursing and Adult Nursing rank very high at 50% 45% and 22% respectively. When adding those who are 'quite dissatisfied' these numbers rise to 60%, 69%, and 43% again respectively. Conversely, the same numbers for 'completely satisfied' are 6% (Physiotherapy and Mental Health Nursing) and 3% (Adult Nursing) and when including the 'quite satisfied' category these numbers jump to 19% (Physiotherapy), 10% (Mental Health) and 12% (Adult Nursing) - still very low proportions. Unfortunately, there are few students from Physiotherapy and Mental Health Nursing who commented on the reasons for why they were so dissatisfied.

Support Satisfaction from Visiting Tutor/Link Lecturer
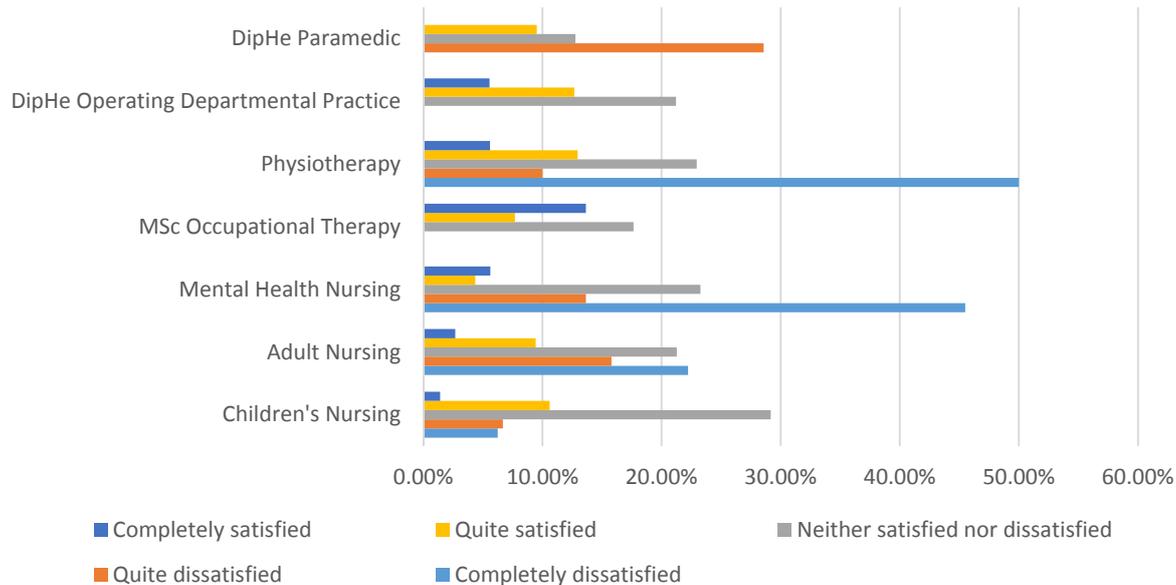
Support from Tutor/Link Lecturer

The main reason students express their dissatisfaction with the level of support received by their Tutor/Link Lecturer is simply because they have not met or spoken to them whilst on placement:

During placement I had no contact with link lecturer or uea regarding Quidenham [hospice]
Children's Nursing

My link lecturer hasn't visited me at all during the placement so far. Children's Nursing

I had no contact from my link lecturer.
Adult Nursing

I have never met my link lecturer. they have not yet visited my placement.
Adult Nursing

I have not seen my Link Lecturer for the whole of the placement and have had little contact with UEA.
Adult Nursing

Our link lecturer only checked on me once at the beginning when I couldn't identify any issues
Adult Nursing

Once out of placement we have heard nothing from UEA, no visits from link lecturer or even a reply to emails!
Adult Nursing

I did not meet the 'link lecturer' whilst on this placement. Therefore, my name was passed around by word of mouth to the members of staff.
Paramedic Science

I didn't see my link lecturer at all, I don't even know who the link lecturer for my ward is. I felt very on my own.
Adult Nursing

The link lecture [should] visit and encourage students.
Mental Health Nursing

The last two comments clearly show that students may feel less motivated and develop a sense of isolation without the support their Link Lecturer is supposed to provide them. This in turn can lead to lower self-confidence, as well as decreased wellbeing, both impacting on their ability to do well on placement. This is often a cyclical effect whereby underperformance in school can also exacerbate poor wellbeing. The third comment from the bottom shows that students may also feel less part of their team, and unknown especially to those who may be important for them to do well on placement. Furthermore, since students are in a new environment, away from UEA, having contact with someone from the university can aid in making the student feel like they are still part of the UEA community, particularly because it may be more difficult to build a sense of belonging or community on placement. While it is acknowledged that Link Lecturers are often responsible for large groups of students, the newly revised *'Link Lecturer Standards*' (201*7*) state that Link Lecturers are required to '*Make contact with each student at least once per placement for assessed practice placement areas[...] via e-mail, Blackboard, telephone or face to face*'. We hope that in the following placement periods this standard is maintained and helps to make students feel more confident in contacting their link lecturer about issues in a timely manner. Students who feel well supported often identify feeling 'welcome' and 'part of the team' as an important aspect of support:

Really impressed with the way I was welcomed. Felt part of the team straight away, everyone was really friendly and willing to answer any questions I had. This made me comfortable right from this start which made my placement experience feel really smooth.
MSc Occupational Therapy

I was given a warm welcome and I felt I was part of a highly professional team. I was able to work alongside the anesthetists who actively supporting and developed my skills at airway management.
Paramedic Science

I was welcomed on every single occasion and it was a privilege to be involved. **Mental Health Nursing**

Being in part of the community team!
BSc Occupational Therapy

very welcoming, trust in my ability and really treat me like part of the team. Even though I had 4 weeks out on a spoke, I was welcomed back and it felt like I never left. This gave me more confidence.

Adult Nursing

Feeling so welcomed by everyone and felt part of the team! Was given so many opportunities to get involved with things! Mental Health Nursing

Supportive learning environment, being made to feel part of the team. MSc **Occupational Therapy**

Conversely, students who did not have a good experience cited a lack of a welcoming environment as an important factor:

I felt lost at sea during the first weeks and did not fully understand what was expected of me. Some nurses and HCAs did not communicate with me and just fed back negative comments about me after my shift, others seemed actively hostile at times. Other staff were welcoming and engaging, checked my understanding of what I was doing, and helped me develop my knowledge and skills… I did not feel welcomed by some members of the team and at times found it difficult to get team members to engage with me.

Adult Nursing

There was no contact with UEA, or the module team which made me feel a little abandoned, especially as I was the only UEA student on the ward.

Adult Nursing

I did not meet my educator on the first day as she does not work on Mondays. This all meant I felt a little unwelcome on the initial days of my placement

MSc Occupational Therapy

The comments above as well as the comments about lack of support from the Link Lecturer touch on another related issue about lack of contact from UEA whilst on placement (Q17 vii.) which was ranked only one place above support from Visiting Tutor/Link Lecturer. Given its low rank, it is clear that much more can be done by UEA to improve their contact with their students.

Support from Mentor/Practice Educator

As mentioned earlier, students were generally satisfied with the support provided by their Mentor/Practice Educator and a number of students commented on how much they appreciated their continued support, and the impact it had on them whilst at placement:

A really well rounded experience and a lot learnt. The experiences would have meant little without having the expertise of such a brilliant mentor.

Children's Nursing

My mentor and the team were amazing and very supportive and encouraging. I have found having a singular mentor helpful as on other placements I have had mine changed, or had several different ones at the same time due to work pressures of some. I think it is a great placement and the sole mentor here has been one of the best people to work and learn from.

Mental Health Nursing

The quality of my mentoring and the amount of time dedicated to support my placement experience.

Mental Health Nursing

Excellent support from all the staff and my mentor. I...was encouraged by my mentor to also learn the theory behind what I was doing.

Adult Nursing

my mentor…[was] absolutely fantastic and could not be faulted.

Adult Nursing

My mentor has provided me with support encouragement and helped me gain confidence over the placement

ODP

I could have not asked any more from my mentor. Absolutely super with regards to providing opportunities for spoke placements... thorough and honest feed back in a timely manor [sic] (and ways to improve)...thinking ahead and willing me to make the most of every opportunity whilst working to my strengths and more importantly being so accommodating when without travel, in particular going out of her way to make sure I was safe and didn't miss out on experiences because of the lack of transport. A wonderful teacher who made the placement exciting and enjoyable. Fab.

Children's Nursing

These comments, and particularly the last two, are powerful examples which show how beneficial it is for students to have a supportive mentor. It is worth stating that not all students had similar experiences. Two areas of improvement were identified among the comments. First, was the need for more time with their mentor:

Spent less than 20% of time with mentor.

Children's Nursing

More time spent with my specified mentor.

Mental Health Nursing

There simply is not enough time to spend with mentor and associate mentor to look thoroughly at skills booklets during a day shift due to the busy nature of the ward.

Mental Health Nursing

more time to do paperwork with mentors.

ODP

I found it difficult to find time with my mentor to do paperwork.

Adult Nursing

While these comments also fall into other areas which were measured separately under Q17: Quality of feedback (ii.); Timeliness of feedback (iii.); and Formal supervision/assessment interview (v.) - it is worth noting them under this section because high satisfaction in these areas can contribute significantly to students perceiving that they have overall high levels of support. This is particularly because of the one-to-one nature of the support and the mentor's main function as a supportive channel (as mentioned in the introduction); this is conveyed quite clearly through the positive comments above. One reason for the varied experience in mentor support is that mentors do not always work with their students directly so the amount of time they have with them can be severely limited. Several students who felt that it had a negative impact on the level of support received. The second area of improvement was not being allocated a mentor early enough in the placement block:

Didn't have a mentor at the start of placement which was very difficult.

Adult Nursing

Mentor / placement allocation was quite late.

Mental Health Nursing

It takes a long time to find out where you are going for placement and a long time to get given mentor names.

Mental Health Nursing

I was not allocated a named supervisor or mentor.

Paramedic Science

I did not have a mentor or practice supervisor who was familiar with my requirements.

MSc Occupational Therapy

Expectations around when students should be allocated a mentor vary, with some expecting allocation early on before placement begins, and others expecting to be allocated a mentor prior to placement. In many comments however, students remark that they were assigned a mentor only after a few weeks of being on placement or in some cases, not being provided one at all. This is unacceptable (particularly in the latter case) and can place added amounts of stress

on the student especially when it is during this time that they will most likely need support the most. Providing clear expectations to students about when they should expect to receive their mentor should be clearly stated, and it appears that students benefit from receiving this information prior to placement, so that they can ask questions to better prepare themselves.

Recommendations

1. At the beginning of each placement, Link Lecturers should be required to send a generic email to students in their placement area to introduce themselves and give students a point of contact.

2. Link Lecturers should be required to visit their link practice areas at least once per placement. In extremis if not possible Link Lecturers should make it clear how often they are likely to be present at the Trust.

3. Revised Link Lecturer standards should be communicated to students in HSC effectively. This should include the policy sitting in an accessible location on Blackboard, with course directors referring to it regularly when students are preparing for their placement block.

4. UEA should develop clear standards around mentoring for trusts to meet, and develops links to and involvement in performance management of live mentors which enable student feedback to be acted on. The processes for this should be documented in a way that is accessible to students and made easily available via Blackboard.

Conclusion

In this report, we hope to have successfully highlighted the importance of support for students throughout their placement experience. This ranges from indirect support, through sound administration processes and high-quality organisation and management, to direct personal support from university staff members and practice partners. Accessibility to and transparency of information at all stages of the programme is paramount to managing student expectations, and therefore maintaining good levels of satisfaction their overall experience.

It is made clear throughout student feedback that much of what is considered dissatisfactory by students is in fact within the very nature of NHS bursary-funded non-medical health programmes of study at UEA. This is particularly relevant in areas such as travel requirements, academic programme structure and funding arrangements. Therefore, we feel the key issues running throughout HSC students' placement experiences is lack of communication and expectation management. The recommendations within this report will, we hope, work to tackle these issues and gradually improve overall satisfaction.

We would like to reiterate our thanks to the School of Health Sciences for sharing the placement feedback data to enable us to write this report. The continuing partnership between UEA Students' Union and the School is hugely valued, both by us and the students we work with, and we hope that this continues to benefit all parties involved. We look forward to continuing to attend the School's placement-specific committee meetings, and would be happy to discuss the content of the report further with its members.

1. Upon designing curricula, and specifically redesigning the Nursing curricula upon the release of updated 'Standards for pre-registration nursing education', ensure spacing of assessment deadlines enables success in academic work and placement through an appropriate balance of workload and deadlines.

2. All students should be provided with details of how the placement allocation system works, including the complexity of allocation, to ease frustrations with communication issues. This should form part of the placement handbook content.

3. Students should be expected to contact their placement in advance to confirm all details against a published checklist avoid confusion.

4. Pre-placement visits to trusts and placement should become the norm- the school should use influence to enable this.

5. UEA should require providers to standardise the quality of pre-placement information for students and to provide timely updates where necessary. In turn, we hope that the relevant responsible UEA staff members, whether academic or local support, are conscious of updating the information on Blackboard.

6. Guidance documents and optional training interventions should be produced by the School/SSS/SU on developing resilience and appropriate coping strategies, particularly for students going into their first placement block.

7. The school should systematically identify placement providers for which students were least and most satisfied with their inductions and collect information on how these were conducted. Placement teams should then use this information to advise Trusts of best practice.

8. Comments suggest that students are unsure of why certain topics are delivered in lectures whilst others (including skills sessions) are perceived as having insufficient coverage. We understand that curriculum development is carefully mapped to NMC standards and requirements - this should be communicated more clearly to students by their programme teams.

9. Processes for accessing support, and who is the most appropriate person to seek support from for specific areas, are documented in a way that is accessible to students and made easily available via Blackboard.

10. On open days the distance of potential placements relevant to each programme should be clearly communicated to students; this should also include information on transport links in the local and regional area as well as case studies of current students' travel experiences.

11. There must be an appropriate and effective standard of support for helping students to find accommodation; Programme-level coordinators could take a more active role in working with LTS in their role to support students to find accommodation, where this is not already taking place.

12. All Personal Advisors should be required to regularly 'check-in' with their advisees during their placement allocation. This would ideally happen a minimum of twice during a 12-week placement block. The UEA advising policy should be revised to reflect this.

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16. UEA should develop clear standards around mentoring for trusts to meet, and develops links to and involvement in performance management of live mentors which enable student feedback to be acted on. The processes for this should be documented in a way that is accessible to students and made easily available via Blackboard.

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